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California Child and Family Services Review Signature Sheet

For submittal of: CSA ☐ SIP ☒ Progress Report ☒

County	Los Angeles
SIP Period Dates	Quarter 2, 2014 through Quarter 1, 2015
Outcome Data Period	

County Child Welfare Agency Director

Name	Philip L. Browning, Director
Signature*	
Phone Number	213-351-5600
Mailing Address	DCFS Headquarters 425 Shatto Place 6th Floor Los Angeles, CA 90020

County Chief Probation Officer

Name	Calvin C. Remington
Signature*	
Phone Number	(562) 940-2501
Mailing Address	9150 E. Imperial Highway Downey, CA 90242

Public Agency Designated to Administer CAPIT and CBCAP

Name	Los Angeles County Dept. of Children and Family Services
Signature*	
Phone Number	(Signature Above)
Mailing Address	

Board of Supervisors (BOS) Signature

BOS Approval Date	Not Applicable
Name	
Signature*	

Mail the original Signature Sheet to:

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

*Signatures must be in blue ink

Contact Information

Child Welfare Agency	Name	Mary Lau, Children's Services Administrator II
	Agency	Los Angeles County Department of Children and Family Services
	Phone & E-mail	(213) 351-5882 Laum@dcfs.lacounty.gov
	Mailing Address	425 Shatto Place, Room 303, Los Angeles, C.A. 90020
Probation Agency	Name	Lisa Campbell-Motton, Probation Director
	Agency	Los Angeles County Probation
	Phone & E-mail	(323) 357-5545 lisa.campbell@probation.lacounty.gov
	Mailing Address	11701 South Alameda St., 2nd Floor, Lynwood, CA 90262
Public Agency Administering CAPIT and CBCAP (if other than Child Welfare)	Name	
	Agency	
	Phone & E-mail	
	Mailing Address	
CAPIT Liaison	Name	
	Agency	
	Phone & E-mail	
	Mailing Address	
CBCAP Liaison	Name	
	Agency	
	Phone & E-mail	
	Mailing Address	
PSSF Liaison	Name	
	Agency	
	Phone & E-mail	
	Mailing Address	

California - Child and Family Services Review

Annual SIP Progress Report

Quarter 2 2014 through Quarter 1 2015

Rev. 12/2013

Table of Contents

INTRODUCTION.....PAGE 2

SIP NARRATIVE.....PAGE 5

STATE AND FEDERALLY MANDATED CHILD WELFARE/PROBATION CHILD WELFARE INITIATIVES.....PAGE 80

ATTACHMENTS

FIVE-YEAR SIP CHART.....ATTACHMENT 1

DCFS STRATEGIC PLAN.....ATTACHMENT 2

PROBATION CHILD WELFARE JUVENILE JUSTICE PRACTICE MODEL.....ATTACHMENT 3

The System Improvement Plan

The System Improvement Plan (SIP) is one of five components that make up the California Outcomes and Accountability System (COAS). The other four components include: Outcome and Accountability County Data Reports; Peer Quality Case Reviews (PQCR)[1]; County Self-Assessment (CSA); and State Technical Assistance and Monitoring. The SIP incorporates data received from the PQCR and the CSA in an operational agreement between the County and State. Strategies towards the improvement of child welfare services are identified in the agreement. Los Angeles County Department of Children and Family Services (DCFS) and Probation Department (Probation Child Welfare) collaborate in the development of the County's SIP. While public child welfare services delivery is the sole focus of DCFS in Los Angeles County, Probation Child Welfare has a major focus on child welfare, with the same Federal, State and County mandates and outcomes for all Probation foster children and youth and those at risk of entering the foster care system.

Los Angeles County's 2011-2014 System Improvement Plan was approved by Los Angeles County Board of Supervisors on September 13, 2011. This report represents our annual review which covers four quarters from April 1, 2014 through March 31, 2015. Information will be included that falls outside of this time period as applicable. In 2012 the California Child and Family Services Review (C-CFSR) was redesigned from a three to a five-year cycle (as reflected in the All County Informational Notice 1-16-12). In order to align with the revised schedule Los Angeles County has extended the current SIP period from June 2014 to October 2016, making the SIP a five year plan (June 2011 – October 2016).

Methodology

Qualitative Data

The PQCR[2] and CSA[3] are the initial steps in building a System Improvement Plan. In addition, the County holds an annual SIP Stakeholder Event which includes DCFS and Probation staff, public and private agency partners, community representatives and child welfare service consumers. Participants are asked to provide input into the development and progress of the SIP. In November 2010, Los Angeles County submitted its third PQCR. The PQCR explores child welfare practice through a week long staff, client and community partner interviewing process. The interviews provide qualitative data about a chosen topic area. The focus area selected by Los Angeles

[1] The PQCR aspect of the COAS will be different for California-Child and Family Services Review Round 3

[2] Los Angeles County held the most recent PQCR in the first week of June 2010

[3] Los Angeles County's most current CSA was Board approved on June 28, 2011

County was permanency for Transition Aged Youth[4]. The PQCR participants provided feedback to the County regarding services, resources, child welfare system strengths and challenges. Participants identified the strength of practices such as team decision making meetings and specialized youth permanency units. Staff commitment, as well as family finding practice, was seen as beneficial to Transition Aged Youth. Identified challenges included workers and agency partners' inability to share information between systems, combined with limitations in data systems sharing information. PQCR participants shared that staff and clients lack updated information regarding current services and resources available through different systems and that fiscal constraints have put limitations on some resource availability.

The CSA, like the PQCR, includes qualitative data gathering through a number of focus group opportunities, advisory teams, and for DCFS, Bureau convenings. Participant input highlighted the abundance of opportunities in place for DCFS and Probation to team with service providers and clients. In addition participants expressed the value in collaboration between County departments, the community, service providers, and clients in order to increase communication and leverage resources. CSA qualitative data feedback overall included the following suggestions as opportunities to enhance child welfare services:

- Engage all parties in effective strategies of partnerships and collaboration;
- Improve collaboration with external partners by establishing clearly defined responsibilities;
- Enhance and build resource availability and knowledge of resources;
- Provide cultural and linguistic competency training for DCFS, Probation and Service Providers;
- Develop consistent best practice model approaches; and
- Develop mental health service models for DCFS, Probation and Service Providers that guide service delivery.

This SIP Progress report covers four quarters of effort related to the improvement plan; Quarter 2 2014 through Quarter 1 2015. The report builds on quantitative and qualitative data which informed the full System Improvement Plan of September 2011. Additional data is gathered as system improvement strategies and milestones are implemented.

Qualitative data for this report period was captured at the Los Angeles County's SIP Annual Stakeholder event held on June 4, 2015.

Quantitative Data

In addition to qualitative data, the SIP Progress report includes information gathered through quantitative data reviewed in the County Self Assessment. Quantitative data examined in the CSA comes primarily from State Child Welfare Services/Case

[4] Federal Measure C3.3 "Of all children in foster care during the year who were either discharged to emancipation or turned 18 while still in care, what percentage had been in foster care for three years or longer."

Management System (CWS/CMS). CWS/CMS Outcome Measures are organized under areas of County Participation Rates, Safety, Permanency, and Well-being Outcomes. Although Probation has access to CWS/CMS, data input remains in the early stages. Preliminary outcomes data, related to Probation Child Welfare, will be discussed and provided as applicable. It is noted that in order to achieve meaningful outcome data, Probation Child Welfare will need to fully utilize the system for every case from case initiation through case closure.

The data sources for the information included in this report comes from: (1) CWS/CMS Dynamic Reporting System website and (2) the California Department of Social Services (CDSS) Quarterly Report for quarter 2 (Q2), of years 2007 through 2015 (http://www.childsworld.ca.gov/PG1358.htm). (3) Quarter 2 2013 data was captured from the CDSS/UC Berkeley California Child Welfare Indicators Project (CCWIP). Child welfare measures found in the CWS/CMS Dynamic Reporting System web-site include, but are not limited to, categories of Safety, Reunification Composite, Adoption Composite, Long Term Care Composite, Placement Stability Composite, Siblings, and Service Delivery.

In this SIP Progress report, the County will report data for three measures being followed as a part of the SIP (C1.4, C3.3 and C4.2) and by identifying current performance status on page 79.

By choosing the same quarter of each year for goal analysis, the County is able to factor for time of year fluctuation in various performance measures, thus giving a more "apple to apple" comparison of performance. For those specific performance measures that are being followed as a part of the System Improvement Plan, Measures C1.4, C3.3 and C4.2, the County will use sequential quarterly data, beginning with Q1 of 2011, to monitor performance activity.

STAKEHOLDERS PARTICIPATION

Los Angeles County holds a formal System Improvement Plan Annual Stakeholder Engagement Meeting. During this meeting, SIP goals, strategies and outcomes are reviewed and discussed. Feedback is garnered from participants in the form of workgroups as well as through survey responses.

On June 4, 2015, Probation Child Welfare and DCFS conducted the annual System Improvement Plan (SIP) Stakeholder Engagement Meeting. Feedback was provided by the participants through completed surveys collected at the end of the event. In all, **55% (174/317)** of participants provided survey feedback regarding teaming, communication and managing for results. Data information related to responses is discussed in more detail in the Enhanced Organization Performance section of this report (page 63).

In addition to the formal SIP stakeholder meeting, DCFS and Probation Child Welfare have on-going engagement with stakeholders through workgroups aligned with SIP strategies, Regional Advisory Groups and monthly placement, service provider and community organizational meetings.

CURRENT PERFORMANCE TOWARDS SIP IMPROVEMENT GOALS

Federal Measure C1.4: Re-entry Following Reunification

Methodology:

This measure computes the percentage of children re-entering foster care within 12 months of reunification discharge. The denominator is the total number of children who exited foster care to reunification in a 12 months period; the numerator is the count of these reunified children who ten re-entered care within 365 days of the reunification discharge date.

FIGURE 1

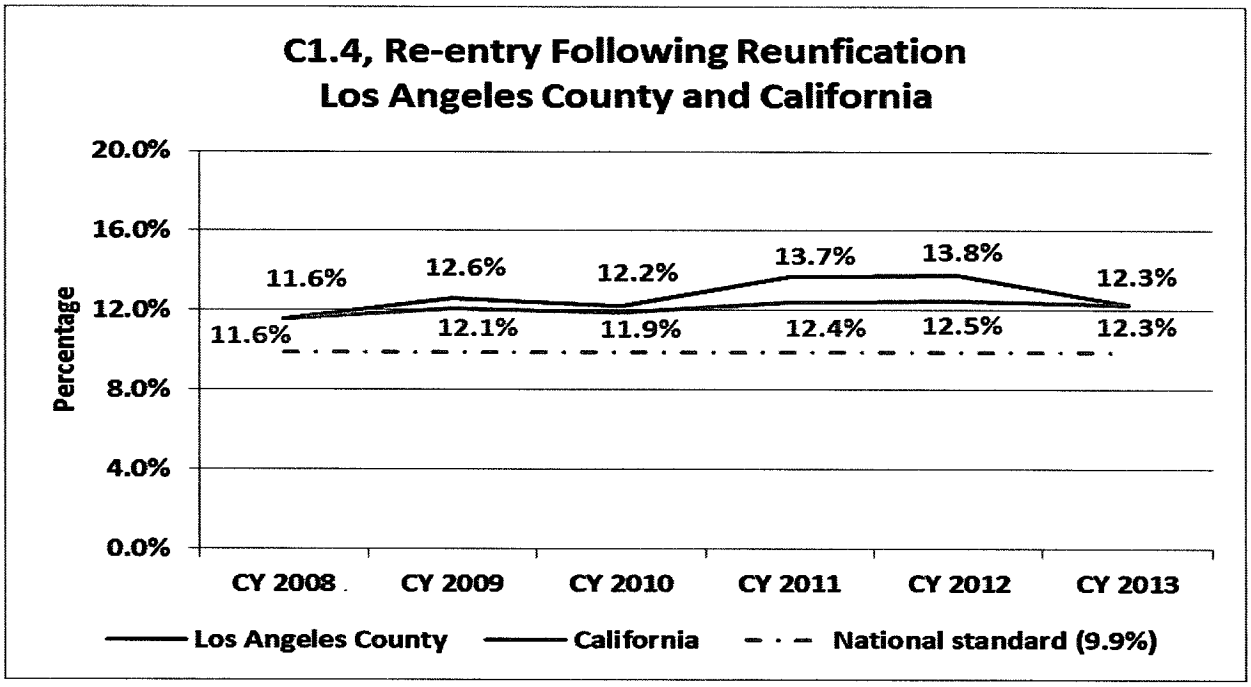
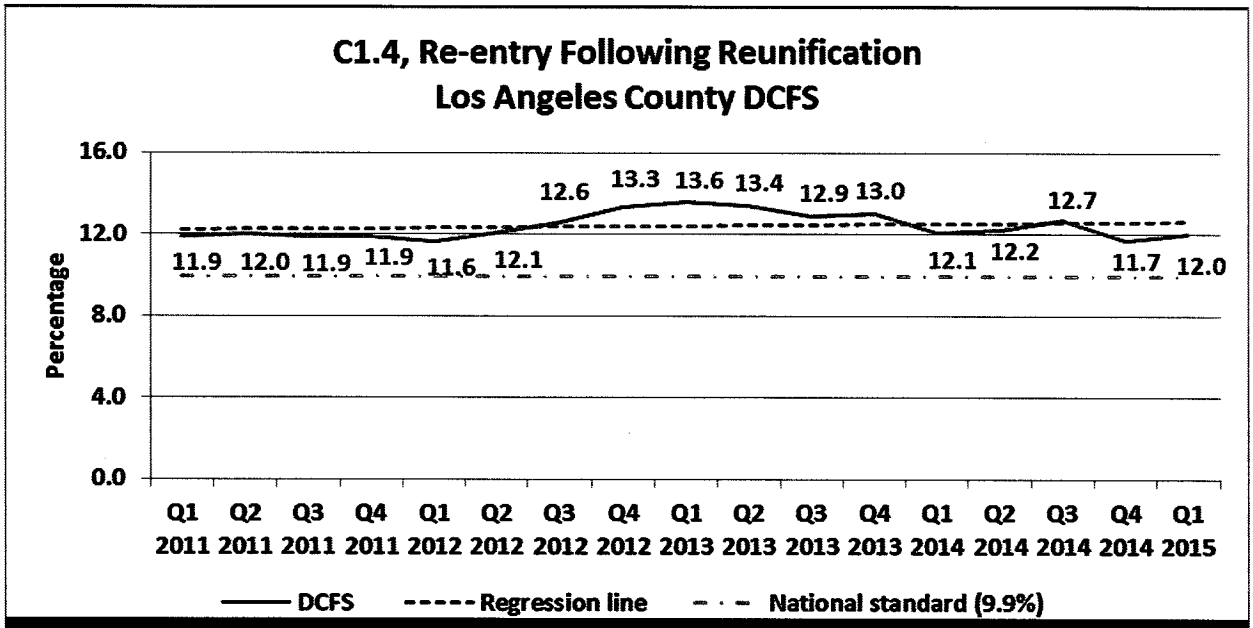


FIGURE 2

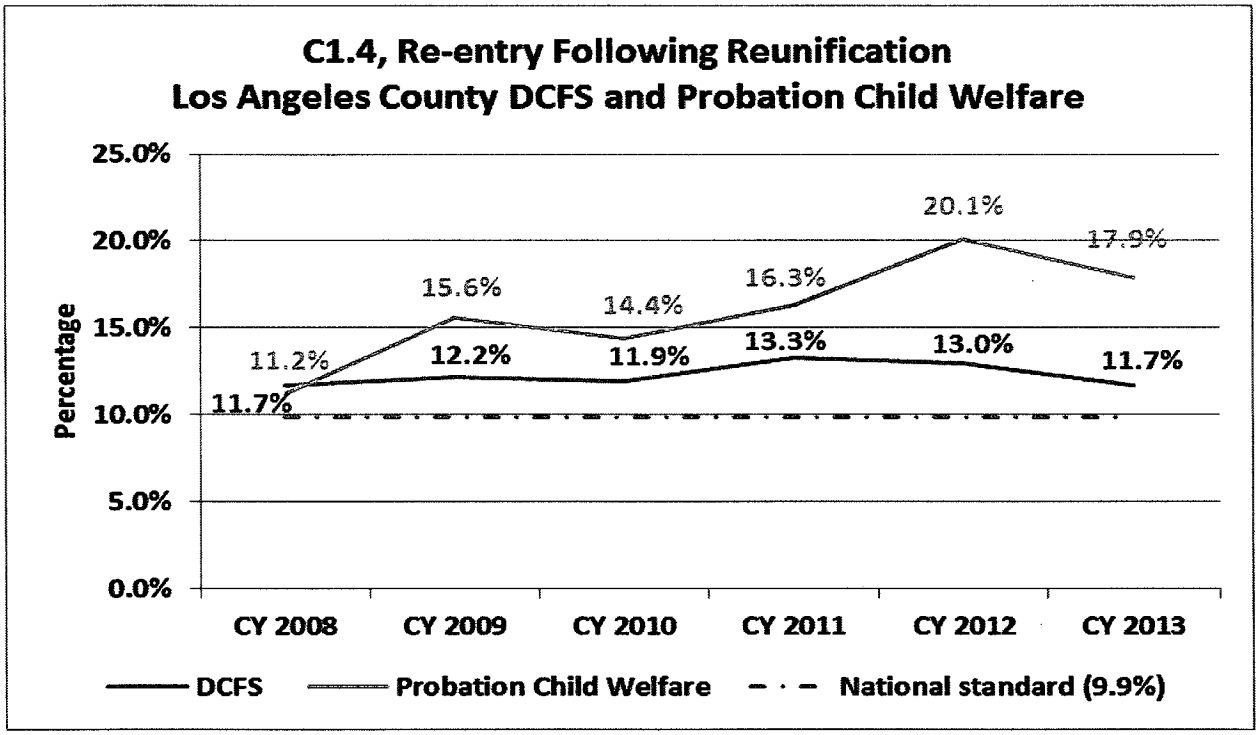


*Based on Berkeley California Child Welfare Indicators Project data ~ Retrieved on 9/1/15

SIP Goal:

By January of 2016 LA County re-entry rate will move from 12.4% to achieve the National Standard of 9.9%

FIGURE 3



Since 2011, DCFS and Probation Child Welfare have seen a gradual increase in in re-entry following reunification. Quarter 1 of 2015 data shows DCFS is performing at 12.0% re-entry rate, which is an increase from the previous quarter. It is likely that this outcome indicator will be an area of continued focus in the 2016 System Improvement Plan

DCFS SIP Strategies ~ Measure C1.4: Re-entry Following Reunification:

- Develop a screening assessment and treatment model to address Substance Use Disorder (SUD)
- Increased Utilization of Reunification Team Decision Making Meetings; *(Discontinued Progress Report 2013)*
- Evaluating Up Front Assessment *(Completed Progress report 2013)*; and
- Expansion of Wraparound Services and Access.

Develop a screening assessment and treatment model to address Substance Use Disorder (SUD)

This strategy was developed from a three-month DCFS pilot project known as Project SAFE that extended from April 2 through June 29, 2012. The Department of Children and Family Services (DCFS) collaborated with the Los Angeles County, Department of Public Health, Substance Abuse Prevention and Control (DPH-SAPC) Program to initiate a process for identifying, assessing, and providing services to families who were

newly-involved in the child welfare system. The SAFE pilot project resulted in lessons-learned that were used in developing goals including:

1. Identify Substance Use Disorder (SUD) for parent or primary caregiver at an early point;
2. Accurately identify SUD;
3. Increase timely access to treatment; and
4. Increase collaboration between child welfare system and Department of Public Health Substance Abuse Prevention and Control (DPHSAPC).

The SUD strategy was included in Los Angeles County's System Improvement Plan (SIP) beginning in Quarter 4, 2013. This strategy will remain in place at least through calendar year 2016.

About the Strategy:

DCFS established programs in partnership with external agencies to address the needs of parents and primary caregivers in receiving screening, assessment, and (as necessary) treatment for Substance Use Disorders (SUDs); previously called Alcohol and Other Drugs. Recognition exists in the substance abuse treatment and child welfare fields that meeting SUD needs can positively contribute to child welfare outcomes for children, both in terms of family reunification and the federal performance indicators including Re-entry Following Reunification and No Recurrence of Maltreatment. Addressing SUD issues can also contribute to the well-being and stability of parents and primary caregivers

Two programs that are available to DCFS parents and primary caregivers who meet the eligibility criteria are the Family Dependency Drug Court (DDC) Program and Access to Substance Abuse Services for High Risk Parents and Caregivers (known simply as SA Access).

Family Dependency Drug Court (DDC) Program

The Family Dependency Drug Court Program is a partnership between DCFS, Los Angeles County Department of Public Health (DPH,) and Los Angeles County Superior Court. It is a voluntary, one-year program available to parents of children served through the Dependency Court. The services include outpatient treatment, residential treatment, and aftercare. The Program has been implemented in six DCFS regional offices and five Service Planning Areas (SPA) of Los Angeles County. Family Dependency Drug Court began in 2006 as a pilot in SPA 7, and was later expanded to four more SPAs. Specific juvenile dependency courtrooms have been identified to serve the DDC Program. The treatment providers are contracted through DPH.

Lessons-learned from the DDC Program model were incorporated into the SIP Project SAFE pilot. The program provides a parent, or parents, with more active involvement with the Dependency Court and the team members including the hearing officer, treatment provider, DCFS social worker, County Counsel, parent's attorney, and child's

attorney. The team members work with the parents through regularly scheduled progress hearings. The principal focus is on intensely serving the family to support a parent's recovery from substance abuse.

The funding allocated to the DDC Program can support up to 20 parents at any given time in each SPA to receive treatment and aftercare services. Depending on the treatment modalities (based on the results of an assessment of each parent), the availability of funds may vary, which can affect the number of parents who are served at any given time within a SPA.

Evidence-Based Aspects

DCFS, in conjunction with its partners at DPH and the Juvenile Dependency Court, has placed high priority on implementing and subsequently expanding the DDC Program for children and their families. Los Angeles County recognizes the successes of the DDC Program model as highlighted in national studies. One study was the 2002 National Family Treatment Drug Court Evaluation, which included California Family Treatment Drug Court programs.

The findings from a 2007 study suggested that parents served by a Family Treatment Drug Court were more likely to enter substance abuse treatment than those not served by such a program. Parents served by Family Treatment Drug Courts also entered treatment more quickly after the initial court petition. The study results also suggested that children served by a Family Treatment Drug Court spent less time in out-of-home care than those not served by a drug treatment court program. Children served by a Family Treatment Drug Court were also more likely to be reunified with their families.

Table 1 provides statistics for parents involved at any point in the DDC Program in Los Angeles County during a 2-1/2 year time period, July 2012 through March 2015. Note that the most recent reporting period is only seven months and thus its numbers are lower than typically would be expected for an entire year. The DDC program completion rates exceeded 75 percent, although they declined in the most current reporting period to about 58 percent of the parents who had been accepted into DDC.

The decline in referrals (parents who were screened) in the most recent reporting period might be attributed to DCFS's DDC social workers simultaneously carrying non-DDC cases. Fluctuations in the acceptance to the DDC Program are related to a client meeting the program eligibility requirements. Too little is known at this time to speculate the reasons for the decline. In the future more teaming and collaboration needs to occur between the DCFS regional offices and Juvenile Court hearing officers to promote the usage of the DDC Program. In addition, the goal is to have stronger collaboration between DDC treatment providers and DCFS in order to be able to determine the reasons for non-acceptance.

TABLE 1
Family Treatment Drug Court (DDC) Program Statistics
Los Angeles County

Measure	Time Span					
	FY 2012-13		FY 2013-14		September 2014 through March 2015 (seven months)	
	Number	Percentage	Number	Percentage	Number	Percentage
Parents who were screened	304	---	156	---	108	---
Parents accepted to the DDC Program	67	22.0%	47	30.1%	52	48.1%
Parents who completed the DDC program	52	77.6%	38	80.8%	30	57.7%

In 2013, the DCFS Research and Evaluation Unit conducted a review to determine if there were differences in re-referrals, re-opening of cases, and re-detentions between those children whose parents had successfully completed the DDC Program and those children whose parents had not participated in the program. To assure a basis of analysis, demographic and other characteristics were similar for the comparison groups including allegations of parental substance use.

The findings suggested that a greater percentage of children whose parents had been served by the DDC Program did not have a case re-opened than children in the comparison group. A greater percentage of these children were also placed with their parents than children in the comparison group. As a result of the DDC Program, DCFS remained involved with DDC-served families for a longer period of time than families in the comparison group. Previously-served DDC families came back to DCFS's attention sooner than the families in the comparison group. In summary, the DDC Program has had positive outcomes for families.

In reviewing these outcomes, DCFS recognized that a family's progress in regards to substance abuse treatment and child welfare services need to be further reviewed and understood. Table 2 provides a summary of program gaps and adjustments that are being addressed.

TABLE 2
Family Dependency Drug Court (DDC) Gaps and Adjustments
Los Angeles County

Gaps	Adjustments
Current data does not provide full information or stories on families, who are referred, screened, accepted, and completed the DDC program.	Collaborate with DPH to share data from both departments.
Discrepancies exist in the current data collection process.	Establish mutually-agreed definitions for parents completing treatment and graduating parent
The referral and screening processes need strengthening.	Evaluate the tools utilized in these processes
Confidentiality restrictions hinder full data sharing between DCFS and DPH	DCFS and DPH are actively working on implementing enhanced data sharing including a formal data sharing agreement.
Limited current data collection and maintenance is used by DDC-contracted providers.	Engage and support contracted providers in data collection processes.
More dynamic engagement is needed with the Juvenile Dependency Court.	Coordinate team meetings with Court management to establish shared understanding of program needs and goals.

In order for DCFS, DPH-SAPC and Juvenile Court to share and collaborate there needs to be an implementation of a uniform and consistent way of collecting data on clients served by the DDC Program. By developing and implementing a memorandum of understanding (MOU), aggregated data can be analyzed to assess the benefits of the DDC Program. Unless there is a stronger collaboration with the goal of improving data sharing, the benefits of the DDC Program to meet the strategy cannot be readily or fully determined.

During the past year, DCFS: 1) continued its efforts to collaborate with the Department of Public Health Substance Abuse Prevention and Control (DPH-SAPC) through a MOU for enabling improved data sharing and comparison of data in determining children and family outcomes, and 2) continued efforts to coordinate team meetings with the Juvenile Court, DPH-SAPC, and DPH-contracted treatment providers.

Access to Substance Abuse Services for High Risk Parents and Caregivers Program

Access to Substance Abuse Services for High Risk Parents and Caregivers Project (known simply as SA Access) involves a partnership between the Department of Children and Family Services (DCFS) and the Department of Public Health (DPH). The project is funded through First 5 LA for three years. The University of California, Los Angeles (UCLA) Integrated Substance Abuse Program is the formal evaluator for the project.

Individuals served by SA Access are pregnant women, parents and primary caregivers of children 0 to 5 years old with open DCFS cases. The Department of Public Health contracted with substance abuse providers to place Substance Abuse Navigators in DCFS regional offices. The Navigators provide on-site Screenings, Brief Interventions, and Referrals to Treatment (SBIRT) for eligible individuals. A summary of DCFS cases with substance abuse (SA) issues is contained in Table 3. The percentage of cases with SA issues has remained consistent over the past five years.

An evidence-based screening tool is used by the Navigators along with motivation interviewing techniques during the assessment process. If SUD treatment is determined to be required, the Navigator provides a warm hand-off to a local treatment provider that specializes in perinatal SUD services for pregnant women and families. Various treatment modalities are offered by the provider to meet the specific and unique needs of the individual.

TABLE 3
DCFS Open Cases Including Those That Have Substance Abuse (SA) Issues
Los Angeles County

Measure	Calendar Year				
	2010	2011	2012	2013	2014
Cases with SA issues	11,931	11,889	12,107	12,854	12,660
Percentage of total cases	54.0%	53.8%	53.8%	54.7%	57.7%
Cases without SA issues	10,140	10,194	10,397	10,640	9,287
Percentage of total cases	46.0%	46.2%	46.2%	45.3%	42.3%
Total number of cases	22,071	22,083	22,504	23,494	21,947

SA Access has had a positive impact on the early identification, intervention, and timely connection to services for families under the care and supervision of DCFS. It contributes to positive outcomes for children placed with their families. SA Access also impacts the performance indicators for Exits to Reunification, No Recurrence of Maltreatment, and Re-entry Following Reunification.

Since its introduction in February 2013, SA Access continued to be well-received by DCFS. The Substance Abuse Navigators are viewed by DCFS social workers as helpful not only by delivering SA Access services but also by answering questions and navigating the SUD assessment and treatment processes. Some DCFS offices have had higher rates of referrals to SA Access than other offices. An overall increase in referrals across DCFS is desired.

Evidence-based Aspects

DCFS has maintained an ongoing count of referrals to SA Access. As of March 2015, 4,385 pregnant women, and parents and primary caregivers had been referred to SA Access.

An identifier unique to each referred individual is used by DCFS, DPH, and UCLA to track the child of the individual referred to SA Access as they move through the child welfare system and SUD treatment system. There could, of course, be more than one child in a family, and the Navigators enter the same unique identifier into the SUD data system.

DCFS, DPH, and UCLA have worked to resolve the challenges of correct identifiers being used by the DCFS social worker who made the referrals and the Navigator who enters information into the SUD data system. Steps have been taken to assure that correct identifiers are used. For example, an information sheet was distributed to DCFS social workers and Navigators that has a simple and straightforward visual of how identifiers are assigned and used.

An annual report on SA Access was completed by UCLA in 2013, which includes an evaluation of the first year after implementation. The report gives a review of process and outcome measures related to individuals who had been referred to SA Access by DCFS, and who received the SBIRT services from the Navigator and then may have entered SUD treatment.

The UCLA report noted discrepancies in the data in the SUD database. The report did not include a review of data for movement through the child welfare system, principally due to the challenges involved in using correct identifiers. On the other hand, useful data were presented on the results of screening of the individuals who participated in SA Access, including the risk levels associated with substances and their usage levels. Data were provided on drugs of choice of program participants along with their discharge status.

DCFS, DPH and UCLA increased their partnership and engagement to address the discrepancies and recommendations identified in the report. One key recommendation was to help the Navigators get the word out about SA Access to the DCFS regional offices. Work is underway to rectify the problems in the use of correct identifiers so that individuals who are referred to SA Access and who receive the SBRIT intervention and possibly treatment can be matched in both the child welfare system and SUD data system. The intended result is to collect information on outcomes to determine the

effectiveness of what is considered a valued program that serves DCFS children and their families.

The 2014 annual report was released UCLA in September 2014. The report included a survey completed by the Navigators that showed improved collaboration between DCFS and the DPH-contracted Community Assessment Services Centers (CASC) (i.e., treatment providers). Fewer administrative barriers were encountered as a result of the SA Access Project. Most importantly, SA Access increased the availability of resources to parents and caregivers.

The 2014 report indicated the most common abuse categories were general neglect (64.9%), followed by emotional abuse (11.8%), caregiver absence (8.1%), substance abuse-sibling (5.5%), and other forms of abuse (9.7%). The outcomes for DCFS-served families were not reported due to challenges in data sharing. These challenges have since been resolved so that data can now be shared and outcomes determined. The 2015 annual report, due to be released in September 2015, will identify outcomes for DCFS-served families.

During the past year (Q2 2014 –Q1 2015, DCFS:

1. Worked on identifying a new funding source for SA Access since First 5 LA funding ended as of June 30, 2015 (DCFS learned that DPH will use block grant funds for six months to continue SA Access);
2. Continued tracking the number of referrals to the program;
3. Consulted with DPH and UCLA on the recruitment of DCFS supervising social workers and social worker to participate in interviews for determining the benefits of the project and assisting with implementation; and
4. Consulted with DCFS Business Information Systems (BIS) staff on data sharing between DCFS and UCLA to better assess outcomes of the project for DCFS children and families.
5. Maintained on-going contact with stakeholders which include the Department of Public Health Substance Abuse Prevention and Control (DPH-SAPC), Substance Abuse Navigators, treatment providers, DCFS Staff and child welfare clients.

A long-term funding source remains to be identified to assure the future stability of SA Access. DCFS identified 2011 State realignment funds as a possible funding source. As part of the interdepartmental teaming arrangement, DPH-SAPC will develop and submit a comprehensive proposal for review and approval by the DCFS Executive Team on the use of proposed funding.

Time Limited Family Reunification

An additional DCFS program related to Re-entry Following Reunification included in the screening, assessment and treatment strategy is Time Limited Family Reunification

Program (TLFR). The TLFR Program is part of the federally funded Promoting Safe and Stable Family (PSSF) Program; a County-wide program that partners DCFS and the Los Angeles County Department of Public Health (DPH) – Substance Abuse Prevention and Control (SAPC) to address the issue of substance abuse and its impact on families with DCFS court cases. Through TLFR, select groups of Community Assessment Service Centers (CASC), working with treatment agencies, provides a continuum of assessment and treatment services for the families.

The families, who may need SUD treatment services, are identified by DCFS staff. They are then referred to the CASC; an assessment is done and eligible parent participants who qualify are referred to treatment providers, for residential or out-patient services. These services are limited to 15 months from the time a child is removed from the parent's home and placed in foster care or is placed by the Court with a relative caregiver.

During the System Improvement Plan Q2 2014 -Q1 2015, DCFS have engaged in the following activities;

1. Tracked all referrals by the Time-Limited Family Reunification (TLFR) program;

2. Attended every-other-month Community Assessment Service Center (CASC) meetings and quarterly provider meetings to discuss CASC and treatment issues for DCFS clients;

3. Engaged with stakeholders;
    - Department of Public Health – Substance Abuse Treatment and Control (SAPC) program staff as well as Public Health Audit staff;
    - CASC Directors and staff;
    - Treatment Providers and their staff counselors and support staff;
    - DCFS CSWs and support staff;
    - DCFS Clients.

4. Held individual TLFR training meetings in DCFS Regional Offices to ensure that staff are aware of Substance Use Disorder (SUD) treatment assessment and treatment opportunities for DCFS clients; and

5. Visited CASC and Treatment Provider locations to ensure smooth and warm hand-offs between DCFS, Public Health, CASC and Treatment providers.

Fiscal year 2014 - 2015 was the first time the $2.2m program was under-spent by $4,000, (0.2%). An analysis of the expenditures for FY 14-15 is underway.

DCFS and the Department of Public Health (DPH) share data related to TLFR. DCFS is pending a response from DPH for data regarding:

- Client list and dates of all CASC referrals,
- Client list of all assessed by each CASC and date of assessment; and
- Client list of all entering treatment; their admission and discharge dates.
    - Include type of treatment, (residential or out-patient),
    - Include client progress status at time of discharge.

Future analysis will be completed upon receipt of requested data from DPH. The DPH data will be utilized by DCFS staff to search CWS/CMS TLFR client's case records for re-entry outcomes.

Further, Q2 2014 – Q1 2015 data results will be compared to past findings and challenges which were:

- Since this is a time-limited program, 15 months of services from the date a child is removed from the home, sometimes there is not enough time to complete an effective treatment program;
- About 30% of our DCFS parent participants start their treatment with less than 6 months of eligibility left; and
- Engaging all parties to participate in gathering data for a better understanding of the TLFR program and of client outcomes.

Time Limited Family Reunification services will continue to be provided in Los Angeles County to those eligible parents with substance use disorder. Evaluation will be completed quarterly and reported to applicable DCFS executive team management.

Expansion of Wraparound Services and Access

The Wraparound contract solicitation was completed and released on September 20, 2013. Additionally, Public Comment meetings were held with external stakeholders. Consistent with the State's Katie A. lawsuit settlement agreement and the County's historical trend toward improved identification and service for youth with mental health needs, the new Wraparound contract solicitation and Wraparound redesign is an effort to focus Wraparound service delivery on better meeting the mental health needs of youth who could be described as Katie A. subclass members.

Forty-nine service providers were awarded Wraparound contracts in May 2015. In April and May 2015, orientation session and several trainings were provided by Los Angeles County to all new service providers on the Wraparound model and the service delivery protocols and expectations. All Wraparound providers are currently completing training on the Core Practice Model (CPM) as required by their contracts.

During the transitional year for the new contract, the Wraparound service providers can receive a higher case rate of up to 50% of their service costs. Recent analysis revealed that the providers, as a group, were claiming approximately 50 percent of their costs to Early Periodic Screening, Diagnosis and Treatment (EPSDT) and 50 percent to the

case rate. Some agencies were outliers in this regard by claiming more than 50 percent of their costs to their case rate dollars. During the next few months, the Department of Mental Health (DMH) and DCFS will work collaboratively to improve the claiming practices of these providers to bring them in line with the 50/50 ratio envisioned for the first year of the new Wraparound contract. In achieving this goal, Los Angeles County expects an increase in claims for clinical services to maximize use of the Early Periodic Screening Diagnosis and Treatment (EPSDT) funding allotment by the second year of the new contract.

New Wraparound enrollments exceeded 3,000 in FY 2014-15, an increase of over 200 cases from the previous year and the highest number of new enrollments since the inception of the program in Los Angeles County. The average number of children served on a daily basis by Wraparound was about 2,500 in FY 2014-15, compared to the previous year's average of about 2,300. Program meetings were held on a monthly basis with Wraparound providers, DCFS, Department of Mental Health (DMH), and Probation Child Welfare. The meetings included discussions on program capacity and expansion. Los Angeles County holds a weekly meeting in each Service Planning Area (SPA) to assign new cases to the Wraparound service providers on a rotational basis depending on available capacity.

Other recent DCFS steps included: 1) reinstating a Management Appraisal and Performance Plan (MAPP) goal for a 25 percent performance goal in new enrollments to the Wraparound Program, 2) implementing an automated Wraparound Referral System to enable an easier and more time-efficient referral process for social workers, and 3) establishing an expedited Wraparound consent process, where Wraparound providers obtain written consents from families upon Interagency Screening Committee (ISC) case assignment.

The Wraparound Program will transition from DCFS to DMH as the lead department by June 2015, based on a Los Angeles County Board of Supervisors motion. At this time, it is unclear if the current strategies for program expansion will remain the same when under DMH management.

DCFS Summary

In summary:

- Re-entry rates steadily increased from 2008 through 2011 and flattened out in 2012. Most recent data for Q1 2015 shows re-entry performance at 12.0%.
- Efforts related to addressing substance use disorder, specifically in Dependency Drug Court (DDC), show that:
    - Families involved with DDC are less likely to have their case re-opened; but for those that do it is in a shorter timeframe than those families who were not involved with DDC;
    - DDC cases remain open longer, than those case without DDC intervention;

- There remains a need for enhanced data collection and data sharing; and
- Substance Abuse navigators are seen by DCFS social workers as a support for family and staff.

- Approximately 55% of Los Angeles County child welfare cases have substance abuse issues;
- Los Angeles County DCFS will continue to focus on efforts around assessment and treatment related to substance abuse;
- Time Limited Family Reunification Services underspent for the first time during this period of review and will be using shared data with DPH to complete an analysis of the current FY performance;
- Wraparound program has completed contract solicitation and has awarded 49 service providers with contracts.
- Wraparound Program will transition from DCFS to DMH as the lead department by June 2015, based on a Los Angeles County Board of Supervisors motion.

Probation SIP Strategies ~ Measure C1.4: Re-entry Following Reunification:

Measure C1.4: Re-entry Following Reunification

- Cross-systems training plan to include all partnering agencies, as well as internal and external stakeholders
- Exploration of the availability of new resources for all children related to family reunification, adoption and legal guardianship with emphasis on increasing resources for communities with a high population of African American foster children and their families consistent with studies on disproportionality and disparity.
- Exploring options for and enhancing existing resources

FIGURE 4

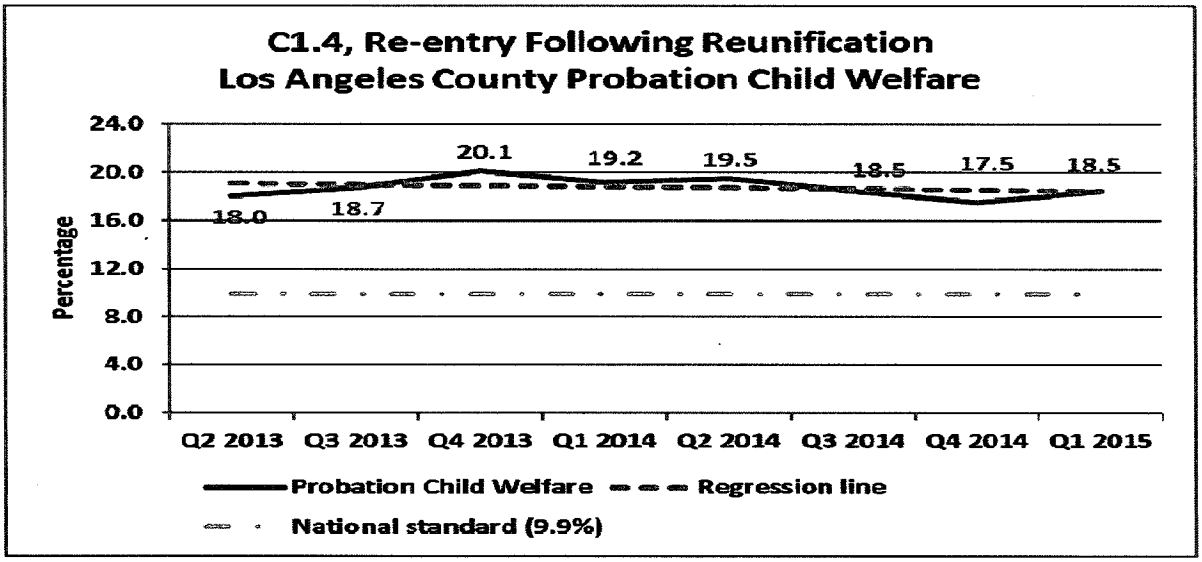


TABLE 4

C1.4 Re-entry Following Reunification (Exit Cohort)

Percentage of all children discharged from foster care to reunification during the year, who re-entered foster care in less than 12 months from the date of discharge.

Quarter/ Year	2nd Qrt 2013	3rd Qrt 2013	4th Qrt 2013	1st Qrt 2014	2nd Qrt 2014	3rd Qrt 2014	4th Qrt 2014	1st Qrt 2015	National Standard Goal
Los Angeles Probation	18	18.7	20.1	19.2	19.5	18.5	17.5	18.5	9.9

Probation did not meet the </= 9.9% national standard, but has had some improvement since the fourth quarter of 2013, with the most improvement in the fourth quarter of 2014. In the first quarter of 2015, there was a slight increase of youth that re-entered after reunification from the previous quarter; however, in comparison with Quarter 1 of 2014 Probation Child Welfare has improved re-entry performance by 3.6%. Probation continues to work toward improving this goal through cross- trainings between partnering agencies, improved permanency efforts, internal and external stakeholder feedback and strengthening in-home, Evidence-Based services.

Cross-systems training plan to include all partnering agencies, as well as internal and external stakeholders

Under this strategy, there were three action steps to accomplish the development of a comprehensive training plan; however, the first action step, which involved focus on legislative and confidentiality, morphed into the other two action steps as it was a consistent element as all training was discussed and not just a focus solely on its own. Therefore, there are only two action steps, which were addressed in the last progress report, and both were completed.

Exploration of the availability of new resources for all children related to family reunification, adoption and legal guardianship with emphasis on increasing resources for communities with a high population of African American foster children and their families consistent with studies on disproportionality and disparity.

This strategy was initially developed with the thought in mind that one collaborative would be developed to accomplish the goal of identifying and exploring availability of new resources, but it was quickly determined that each new resource basically had a work group of its own, so several work groups were developed to focus solely on each new resource. Two of the three Action Steps have been completed. The last Action Step of implementation of the plan to obtain new resources was extended to 2015. However, it was delayed or terminated for reasons described below.

ANALYSIS

Probation Parent/Caregiver Corps Project (P^2C^2)

In May of 2013, various sections of Juvenile Probation, including Probation Child Welfare, began to work with one of its delinquency Judges to begin the development of a Parent Partnering Program, which DCFS developed and utilized for several years with incredible success and positive impact on reunification. A workgroup was developed and consisted of Probation, current VISTO volunteers and Court Advocate (CASA). This group met on a monthly basis to develop a program specific to Probation parent/caregivers that have children detained and need assistance with reunification. Probation was able to recruit five (5) volunteers, each undergoing an extensive background check mandated for all Probation staff and volunteers. A pilot location in Compton Superior Court has been determined. The days and schedule are based on the needs assessed by the Delinquency Judge and Probation Court Officer. The initial "Kick-Off" date for the program was originally scheduled for late fall of 2014. It was determined that a Memorandum of Understanding (MOU) was needed between Probation and the court, and due to the delay in getting it approved and finalized, the implementation has been placed on hold until final MOU approval. This goal Action Step will be continued in the new System Improvement Plan (SIP).

Diligent Recruitment Grant

Although not directly related to Family Reunification, but having an indirect impact, the Diligent Recruitment Grant was developed to service youth that are typically very

challenging to place in adoptive care. Since Probation youth are generally labeled as "hard to place", the grant was set in place in order to find families that are open to adopting probation youth who do not have any relatives or non-relatives available to care for them. In addition to Probation foster youth, the grant also serviced youth that fit the following criteria: Deaf and Hearing Impaired, African American, Hispanic and Lesbian, Gay, Bi-Sexual, Trans-gender and Questioning (LGBTQ), with a special focus on those youth that are close to aging out of foster care.

However, since so much time spent in just obtaining the contracts and developing relationships with the partnering agencies, the process had just started as the grant is ending. The grant has ended and this is no longer a resource; however, Probation child welfare's relationship with Kidsave grew stronger as a result of this grant, and three (3) more youth have been identified this past year to take place in the recruiting events.

Exploring options for and enhancing existing resources such as Placement Assessment Centers (PAC), Aftercare Programs, Mentors, Faith Based Community, Employment, Housing, Child Care, higher education network and Transportation for parents/children, as well as surveying Group Homes for existing/untapped resources.

Two of the three Action Steps have been completed. The last Action Step of implementation of the plan to utilize, expand and share existing resources was extended to 2015.

ANALYSIS

This strategy was initially developed with the thought in mind that one collaborative with representatives from each part of the Placement Bureau would be developed to accomplish the goal of identifying and exploring availability of existing resources, but it was quickly determined that the exploration and enhancing of most of these resources would require specialized funding through the Child Welfare Services Outcome Improvement Project (CWSOIP) managed by Placement Permanency & Quality Assurance and Title IV-E Waiver funds managed by the Title IV-E Waiver Director. Therefore, these operations became the work group with input from all areas of the Placement Bureau.

Through Title IV-E Waiver funds, Probation Child Welfare expanded the Placement Assessment Centers (PACs) from four (4) agencies to six (6) agencies, where youth are placed for a 30-day period in order to obtain a comprehensive assessment of youth to ensure that he/she is placed in an environment that would best serve them and meet all aspects of their needs. The purpose of the PACs was to improve the outcome of placement stability by decreasing the number of AWOL incidents. For the reporting period of April 1, 2014- March 31, 2015, the number of AWOLs was tracked with youth placed in PACs and compared to the number of AWOLs from non-PAC facilities. Probation Child Welfare's internal data shows that the average AWOL rate for the PAC's is 11.8% and the average AWOL rate for the other group homes is 14.3%, a difference of 2.5 % showing that PAC positively impacts AWOL occurrences. Reasons for this positive impact are being explored.

Also, through the Waiver funds, there was considerable effort and planning to obtain an additional Probation Public Health Nurse and to continually explore expansion of Aftercare Programs. In July 2014, the approval to add two (2) additional PHNs was given and funding has been set aside. The Probation Contracts Department is currently working on finalizing the contract so that the hiring process can begin.

Probation Child Welfare was invited in 2014 to participate in planning to utilize CWSOIP funds for two beds for Probation Foster youth in the dual agency home participating in the Residential Based Services (RBS) pilot program. In August 2015, the first Probation foster youth was placed in the RBS program at Hathaway Sycamores Residential Home. CWSOIP funds were utilized to expand training to the new Functional Family Probation (FFP) staff through California Institute of Mental Health (CIMH). The Probation Department is also in the process of utilizing Waiver funds to make enhancements to the current Probation Case Management System (PCMS).

ACTION STEP STATUS

To date, the action steps of developing and convening the work group are completed. The next step of implementing the plan to continually tap into and share these resources on a consistent basis is in process and will move into the next SIP and continue over the next five (5) years.

METHOD OF EVALUATION AND MONITORING

The managers of the Placement Permanency & Quality Assurance and the Title IV-Waiver have oversight of the funds utilized for this action step and have a strict accounting system for these funds that is monitored on a consistent basis. Further evaluation monitoring is provided by the Probation Fiscal section.

Additionally, the group homes self-report the number of AWOLs to PPQA via a shared database, i-Track and through monthly reports submitted to a PPQA Program Analyst (PA). PA reviews data from both PACs and non-PACs facility to do a comparison of information collected and work with agencies to improve in this area and analyze challenges and barriers.

PROGRAM REDUCTION

Non-Applicable

Probation Summary
In summary:

- Re-entry rates successfully peaked to 17.5 in Quarter 4, 2014 but slowly regressed within the next quarters. Even with the improvement, Probation Child Welfare still did not meet the national standard of 9.9%.
- Collaborative workgroups have transformed to create additional resources that promote family reunification, legal guardianship and other permanency options.
- P^2C^2 is has been placed on hold due to delay in finalizing the MOU required by the court to pilot the program at the Compton courthouse. This action step will be continued in the next SIP.
- Due to various challenges, Probation Child Welfare's recruitment efforts were unable to identify a substantial amount of eligible youth to participate in the Diligent Recruitment grant, and the grant has now ended.
- Utilizing Title IV-E Waiver funds, a third PHN item has been approved and the hiring process has begun.
- The first Probation foster youth was accepted and placed in the RBS pilot program at Hathaway Sycamores and has benefitted from the program immensely.
- Data shows that PACs have been sufficient in increasing placement stability by decreasing the number of AWOLs in comparison to non-PAC facilities
- Family reunification has been positively impacted by identifying and expanding new and existing resources.

Federal Measure C4.2: Placement Stability for Children in Care for 12-24 Months

Methodology:

This measure computes the percentage of children with two or fewer placements; while in foster care for at least 12 months, but less than 24 months. Time in care is based on the latest date of removal from the home. The denominator is the total number of children who have been in care for at least 12 months and less than 24 months; the numerator is the count of these children with two of fewer placements.

FIGURE 5

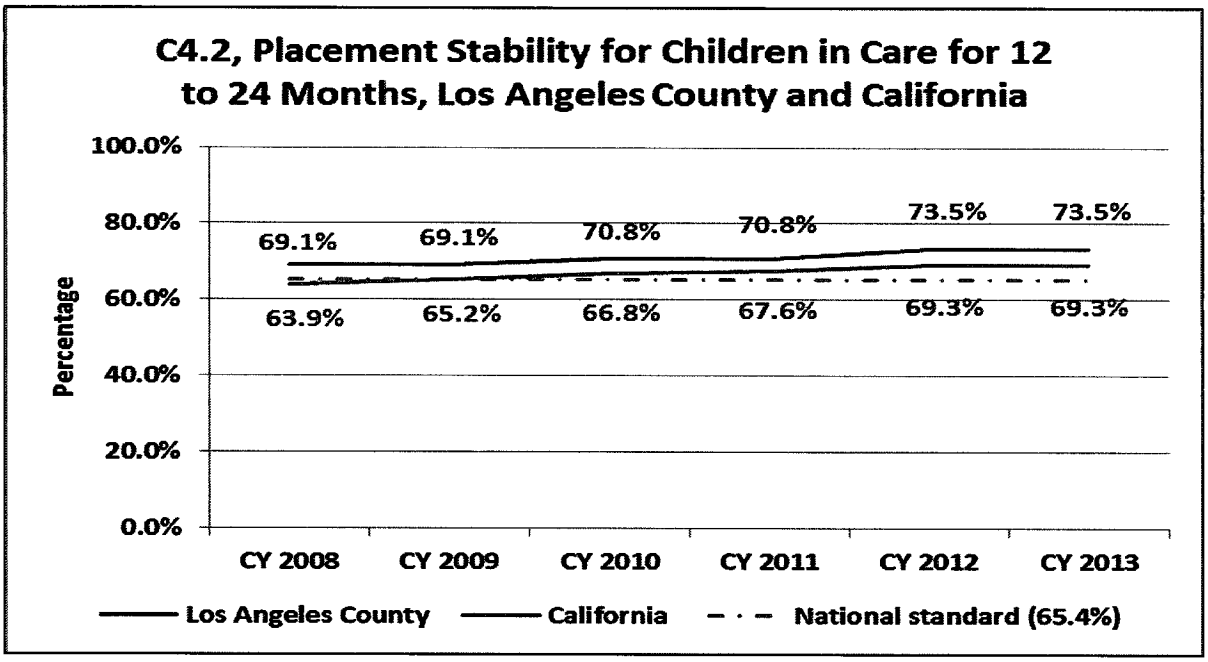
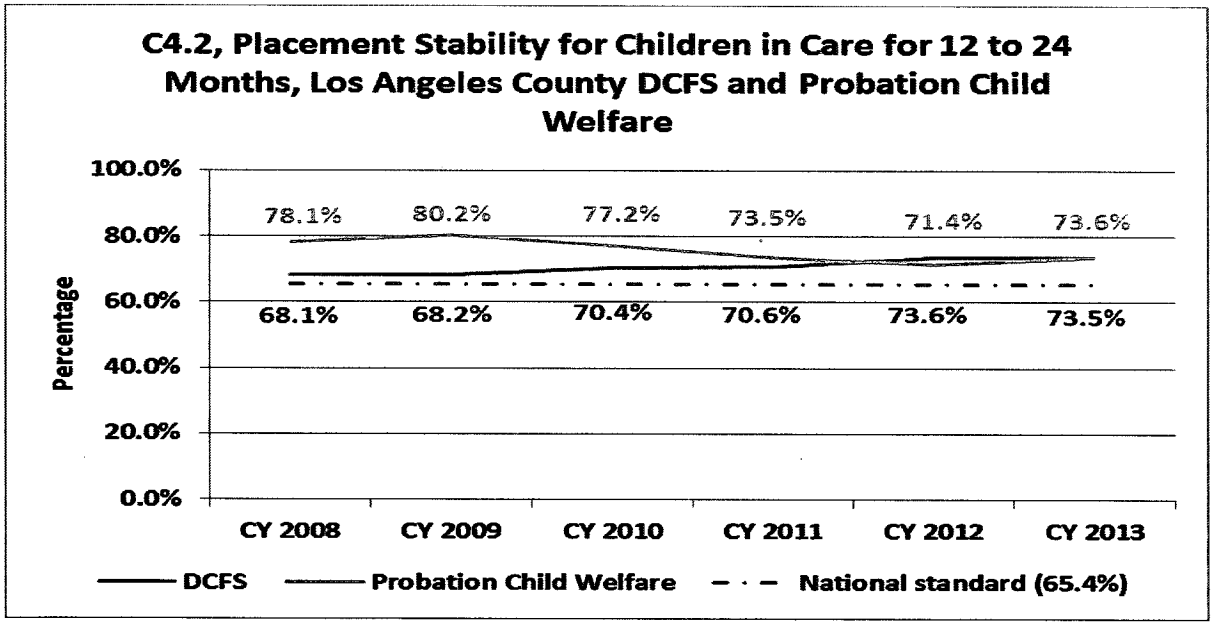


FIGURE 6

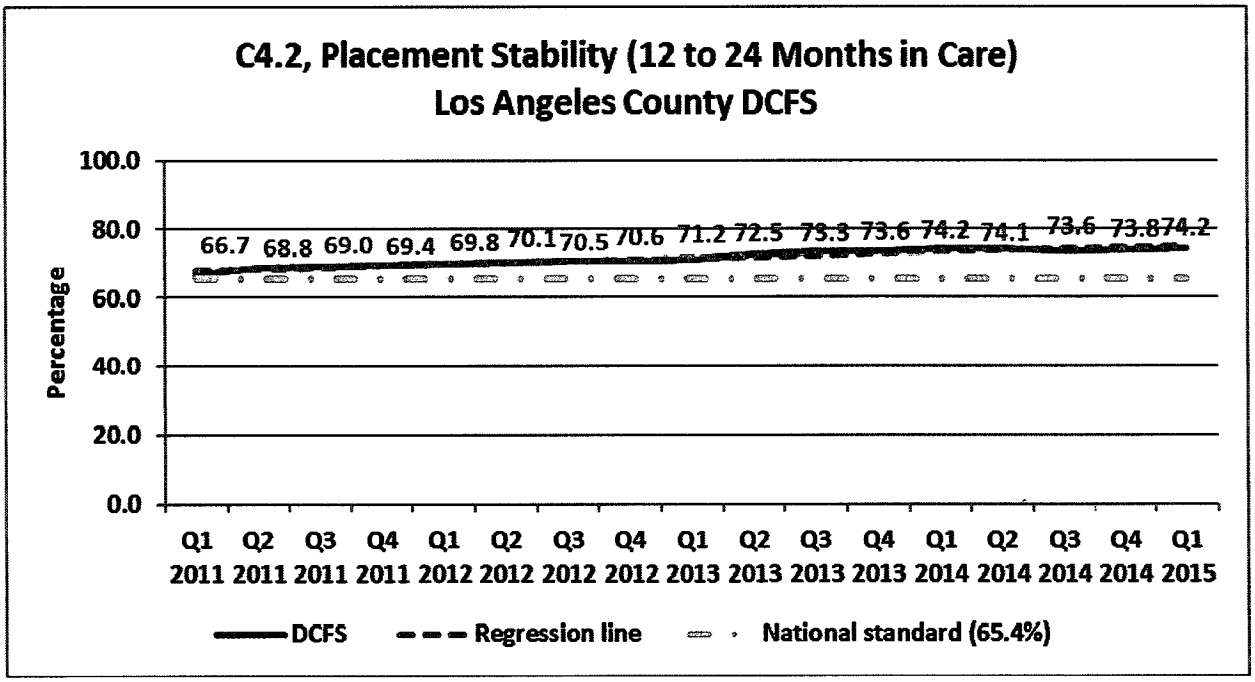


Current Performance C4.2 Placement Stability (12 to 24 Months in Care):

SIP Goal

By January 2016, Los Angeles County will increase stability of placement (children in care 12 – 24 months) from 66.6% to 72.0%.

FIGURE 7



Since 2011, child welfare has seen a gradual increase in placement stability for those children in care 12 – 24 months. In quarter 1 of 2015, Los Angeles County DCFS surpassed the 65.4% national standard by 8.8%.

DCFS SIP Strategies ~ C4.2 Placement Stability (12 to 24 Months in Care):

- Increase relative and non-relative extended family member (NREFM) placement by 20%;
- Continue with training and implementation of Ice-breaker Meetings (Completed 2013 SIP Progress Report);
- Complete a placement stability study (Completed 2013 SIP Progress Report);
- Implement County-wide Expedited response pilot; and
- Evaluate the D-rate Program.

Increase relative and non-relative extended family member (NREFM) placement by 20%

A SIP pilot effort related to increased relative placement, completed in the first two quarters of the system improvement plan (Q4 2011, Q1 2012), was successful in moving the Compton Regional Office from 51% initial relative placements to 63% initial relatives placements (DCFS Data Dashboard – Cognos Data, utilizes data from CWS/CMS). The pilot included the addition of Kinship Support staff at TDM meetings at the time of removal. Following the pilot a review of efforts noted that once the additional

Kinship staff was removed from the Office, initial relative placement performance percentages were not maintained.
From Quarter 2, 2012 through Quarter 1 of 2013 a new strategy lead worked on developing next steps. The SIP strategy of expanding initial relative placement was combined with a DCFS Strategic Plan objective related to the same desired outcome. The goal, increase relative and Non-relative Extended Family Members (NREFMs) placements across the county by 20%, was taken on as the SIP strategy. The baseline data being used for this goal is taken from Child Welfare Services Report data for September 2012. The total number of children in out of home care in September 2012 was 15,619. Of that 8,232 (52.7%) of the children were placed in relative care. The target goal was that by December 2014 62.2% of all Los Angeles County, child welfare children will be placed in relative care or with NREFMs.

In each of the three months of Quarter 4 of 2014 (27,676 relative NREFM/54,138 out-of-home care) and Quarter 1 of 2015 (27,536 relative NREFM/53,781 out-of-home care) 51% of the children in out-of-home care reside with relatives caregivers or NREFM. The county is still working to towards the goal of 62.2% of all children in out-of-home care living with relatives or Non-related Extended Family Members (NREFM).

During this period of review, quarter 2 2014 through quarter 1 2015, the following efforts and actions have been in place.

1. DCFS made plans to re-emphasize the importance of compliance with Procedural Guide 0300-508.30, which requires social workers to conduct an investigation to locate all adult relatives within 30 days of a child's detention, providing written, and where appropriate, oral notification to relatives who are potential care providers. This is expected to occur by Quarter 3 of 2014.

2. The Kinship Education Preparation and Support (KEPS) program, a curriculum specifically tailored to meet the information and support needs of relative care providers, has been recently revised and planning for its release and implementation is beginning in Quarter 2 2014. The plan is for it to be rolled out by the beginning of Quarter 3 2014.

3. In June 2013, the Department began utilizing a bifurcated California Law Enforcement Telecommunications System (CLETS) referral submission process, through which approximately 95% of CLETS results for emergency placements were returned within 2 hours and 61% of CLETS requests for emergency response investigations have been returned within one week. These gains will continue to be monitored and discussed with the California Department of Justice (DOJ).

4. The increased frequency and ongoing flow of Livescan downloads opened the door for increased computerization and technology. As a result, Livescans flow directly to DCFS Children Social Workers (CSW), often within an hour and without delay, for staff conducting new investigations. Also, approximately 90% of CLETS results on new investigations are returned to our Livescan stations

within 2 hours, and all within a period of 2 days. The DOJ is working with DCFS to use their developed technology to have instant return of CLETS (that discussion will continue on 4/10/14). These breakthroughs enable even faster relative approvals of qualified adults with no criminal histories.

5. The DCFS Strategic Planning Workgroup concluded work in March 2014, and made three-tiered proposals to the Executive Team.

    a. Encouraged enforcement of existing policies that instruct staff to immediately and systematically seek out and notify appropriate relatives and Non-Related Extended Family Members (NREFM) when detentions are imminent;

    b. Affirm DCFS commitment to embrace and support the relatives with which we place children; and

    c. Improve DCFS internal systems for outreach, obtaining documents and information, and consideration of Adoption Safe Family Act (ASFA) assessment restructuring to best meet the needs of clients and regional operations.

6. In March 2014, the DCFS Executive Operations Team was provided a model, which is under pilot consideration, to decentralize the ASFA function and staff into regional offices, to expand and expedite placement with relatives.

Continue with training and implementations of Ice-breaker Meetings

As documented in the Quarter 4 2011 – Quarter 1 2012 SIP Progress report, this strategy was "completed" in Quarter 1 of 2012. Lessons learned related to the value of establishing a relationship between the parent and caregiver has been integrated into practices outlined in the Core Practice Model, thus redirecting the techniques to broad utilization in day to day practice.

Complete a placement stability study

To more fully understand current performance related to placement stability, Los Angeles County completed a formal study of Placement Stability (12 to 24 Months in Care). As documented in the Quarter 2 2012 – Quarter 1 2013 SIP Progress report, this placement stability study was completed. Highlights of findings were shared at the June 26, 2013 Annual SIP Stakeholder meeting and included

Placement findings:

1. Placement Types: From the first placement to the last placement, there is an increased reliance on Relative Homes and a decreased dependence on FFA Certified Homes.

2. Ethnic group differences indicated that Black/African American children experienced a higher number of placements and had the lowest percentage of children who experienced placement stability.

3. Placement Change Reasons – nearly half of initial, first, and last placements were coded as other, therefore not providing any meaningful information. The next largest percentage of placement moved was categorized as moves for a positive reason.

4. Placement Direction – For almost half of the children in the sample, the placement trajectory was to a less restrictive environment. Only 10% of the children required a more restricted placement on their last placement.

5. A majority of the children in the sample experienced placement stability during the first 12 months, especially those children under ten years of age.

6. A small percentage (2.8%) of placement changes were "paper moves", meaning the child did not physically move but computer data entry requirements record moves (i.e. agency or licensing changes) on CWS/CMS as a placement change.

Additional findings included; More placement stability was noted for children who were younger when entering foster care and for those who had their case closed sooner; A higher percentage of children who were initially placed with relatives upon removal experienced more stable placements compared to children in other types of placement; and children who achieved legal permanency at the time of case closure were more likely to have stable placements.

The findings from the placement stability study strategy are utilized and referenced as Los Angeles County continues focus efforts on increasing relative placements.

Implement County-wide Expedited Response Pilot

This strategy was to pilot a County-wide Expedited response process. The pilot concluded in Quarter 4 of 2011. This strategy theorized that the placement stability measure impact would show itself by a reduction in hospitalizations realized as crisis stabilization services continue to be provided within the context of a safety plan vetted by key members of the joint response team.

Department of Mental Health (DMH) and DCFS discovered that the degree of DCFS involvement in the Field response Operations – Expedited response Protocols (FRO-ERP) Joint Response Pilot (Protocol) is negatively related to the rate of children's hospitalization; the more DCFS staff involvement, the less the hospitalization rate. The data team recommended that the county consider adding more resources for the FRO-ERP Joint Response Pilot. In an effort to provide more resources, high-risk children who receive FRO-ERP services and are not hospitalized are provided DMH follow-up mental health linkage services and hospitalized children continue to receive a multidisciplinary assessment and recommendations through our DMH/DCFS Hospital Discharge Teleconference process and/or continued mental health service linkage

through the Department's Coordinated Services Action Team process. Beginning in April 2014, all children who received services through Exodus (a psychiatric emergency facility) or those who are hospitalized are reviewed for their appropriateness for Wraparound or Intensive Field Capable Clinical Services (IFCCS). At this time, further follow-up as a part of the SIP is no longer needed based on our findings and supportive services that the county now has in placement to support the safety of these high-risk children.

Evaluate the D-rate Program

The D-Rate redesign is structured around a team approach with the goal of identifying a child's underlying needs and tailoring services and supports to meet those needs. Another critical aspect of the redesign is to make certain caregivers feel supported and have access to a team, especially during crisis situations. The D-rate redesign values the linking of caregivers to supportive services such as support groups, or access to a WRAP team 24/7 hoping that such an effort will decrease 7 day notices and increase a child's overall stability.

Following the completion of the D-Rate program review in January 2013, the D-Rate redesign workgroup made decisions to modify the tools utilized to determine D-Rate eligibility and to modify the D-Rate payment structure to a 3 tiered approach. In addition, the workgroup reviewed the Community College training curriculum and found that additional training modules, to include training on the County's Core Practice Model and the Katie A. lawsuit would greatly strengthen the initial D-Rate certification for caregivers.

D-Rate evaluators are encouraged to hold Child and Family Team (CFT) meetings for all annual D-Rate reassessments, as time permits, pending full implementation of the re-design.

During the March 2015 Katie A. Lawsuit Panel retreat, the DCFS Bureau of Clinical Resources and Services (BCRS), presented detailed elements of the proposed D-Rate redesign, including the tiered rate for D-Rate youth. The Plaintiff's attorneys strongly objected to the D-Rate redesign and expressed concern about the lack of integration with Intensive Case Coordination (ICC) and Intensive Home Based Services (IHBS). Based on the panel's feedback, all D-Rate redesign efforts are on hold at this time.

During Quarter 2 2014 through Quarter 1 2015, D-Rate redesign efforts included ongoing stakeholder in-put and collaboration. DCFS worked extensively with Community College trainers to refine and enhance D-Rate caregiver trainings to include modules on the Department's Core Practice Model and Trauma Focused Treatment. D-Rate Foster Parents were consulted about needed services and supports to assure permanency and placement stability for D-Rate youth under their care. Children's advocates and the Katie A. Panel were consulted on proposed D-Rate programmatic and policy changes.

Throughout the process of redesigning D-rate, lessons learned have includes a strong need to focus on regular and frequent D-Rate screenings for newly detained and

detained youth. In April 2015, DCFS began ensuring that children receiving wraparound services were simultaneously screened for the D-Rate. Out of the 295 children receiving the Basic Rate and Wraparound services, 201 children were found eligible for the D-Rate.

Based on the Katie A Panel's recommendation that D-Rate children receive more ICC/IHBS services, the department will continue its efforts to ensure all children newly approved for the D-Rate are also screened and linked to Wraparound services or Intensive Field Capable Clinical Services (IFCCS). One of the barriers to linkage to Wraparound and IFCCS stems from D-Rate caregiver's unwillingness to allow these services in their home. Additional outreach and engagement to D-rate caregivers about the benefits of intensive in home services was identified as a need.

Efforts to enhance the services and supports given to D-Rate children and caregivers will continue over the next SIP period of 2016 - 2020. Areas to develop include increasing the number of D-Rate homes, providing individualized training to D-Rate caregivers and ensuring all D-Rate children receive trauma focused treatment.

DCFS Summary

In Summary:

- Los Angeles County has been successful in showing improvement in Placement Stability for 12- 24 months in care, surpassing the national standard.
  - Los Angeles County Q1 2015 performance: 74.2
  - National Standard: 65.4

- The Placement Stability study affirmed DCFS' placement with relative SIP strategy, by identifying findings that link increased placement stability for children in relative care. Findings are being utilized and referenced as other strategies are being implemented.

- SIP efforts around relative placement will continue through alignment with DCFS Strategic Plan [5] Objectives.

- Expedited Response has on-going data collection that allows for tracking of contacts and activities of DCFS, Department of Mental Health (DMH) and Field Response Operations – Emergency Response Protocol (FRO-ERP) joint response efforts.

- The completion of the D-rate evaluation has prompted further review and there is on-going evaluation through engagement with the Katie A. Panel. Efforts to enhance the services and supports given to D-Rate children and caregivers will continue over the next SIP period of 2016 - 2020.

[5] DCFS Strategic Plan Attachment 2

- D-rate Evaluation recommended D-rate training and engagement with providers include close alignment with the Core Practice Model and the use of Child and Family team meetings.

Probation SIP Strategies ~ Measure C4. 2 Placement Stability (12 to 24 Months in Care):

- Improve report compliance through revision of current court reports and case plan, which will include training and enhancing current monitoring system, with a quality assurance process implemented to ensure effectiveness;

- Enhance and expand upfront cross-system assessment through increased Placement Assessment Centers (PACs), development of assessment team and collaboration with partners such as DMH, LACOE and DCFS;

- Expand Evidence-Based Programs (EBP) and practices, well as Family Preservation (FP) and Wrap Around (WRAP) services. Develop and implement use of Multi-Dimensional Team (MDT) processes; and

- Increase safety for Probation Placement Officers serving dual roles.

FIGURE 8

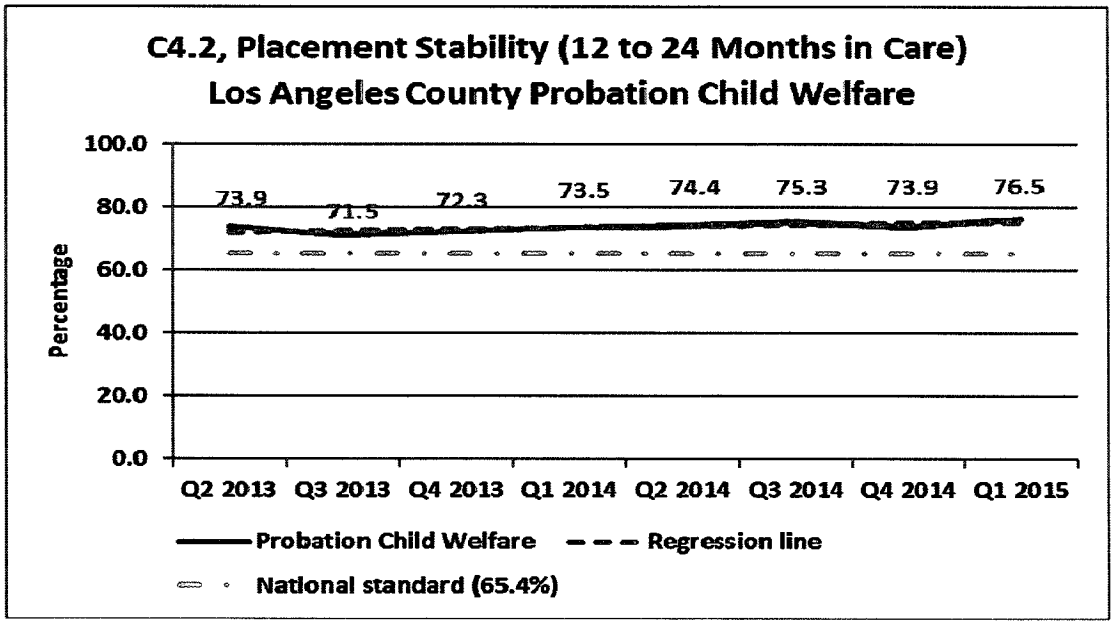


TABLE 5

C4.2 Placement Stability (12 To 24 Months In Care)
Of those children who have been in care for at least 12 months and less than 24 months, what percent of these children have had two or fewer placements.

Quarter/ Year	2/ 2013	3/ 2013	4/ 2013	1/ 2014	2/ 2014	3/ 2014	4/ 2014	1/ 2015	National Standard Goal
Los Angeles Probation	73.9	71.5	72.3	73.5	74.4	75.3	73.9	76.5	65.4

Probation is consistently meeting and exceeding the national standard goal of 65.4% in placement stability. The percentage has remained constant for the quarters reported.

Improve report compliance through revision of current court reports and case plan, which will include training and enhancing current monitoring system, with a quality assurance process implemented to ensure effectiveness.

The remaining Action Step under this strategy has not yet been completed and will move into the new SIP. The action step is as follows: Develop a monitoring system for NSPs/Case Plans related to Family Reunification outcomes and effectiveness of treatment and services, with additional monitoring to ensure Public Health Nurses (PHNs) information is incorporated into the case planning process. "Group Home" was removed from the "monitoring system" since this is a collaborative effort of both Group Home treatment staff who complete NSPs and Placement Officers, Compliance Officers and Group Home monitors who complete and conduct quality assurance on Case Plans.

ANALYSIS

The purpose and ultimate goal of a monitoring and quality assurance (QA) system for these service and case plan processes is to increase and improve an effective teaming process between Group Home Providers and Case Workers. A collaborative workgroup was convened to engage and partner with all involved in the Case Planning process and to ensure that everyone is working together with the same written goals and services for the youth. The new policy includes the requirement for signatures on both documents (Case Plan, completed by the DPO/Caseworker and the NSP, completed by the Group Home Provider) to implement the NSP and Case Plan goals, with the goal of eventually removing "efforts made" to obtain signatures. The other component is to ensure that the PHNs are a part of the case planning process, especially with the medically fragile children and overall medical information. Additionally, Probation will implement a new monthly monitoring system, where a PPQA Group Home Monitor and a PPQA Compliance Officer will work together to compare NSPs and Case Plans and ensure they have the same goals.

ACTION STEP STATUS

The first meeting was conducted on June 4, 2014, and since this time, the workgroup has met continuously through November 2014. The goal was to meet once a month until a pilot program is established, and continue the workgroup to provide oversight to the new QA process. Barriers/challenges were discussed regarding obtaining the required signatures for both documents, along with possible solutions. The workgroup focused on one of the main barriers to teaming with the Placement Officers and Social Workers to attend the Multi-Disciplinary Team (MDT) meetings, where goals are discussed and agree upon for both the NSP and Case Plan and signatures are obtained in order to implement the unified plans. Ways to motivate and get all involved and more invested in the process and outcomes for the child were discussed at length. Solutions discussed were mostly about improving the MDT process and making it more of a priority, possibly instilling consequences for failure to comply with failure to be involved in the MDT process. A positive that came from this workgroup was the Providers

agreement that the team aspect of developing NSPs was a priority; they felt that teaming was occurring fairly consistently. The workgroup agreed that signatures should be obtained at the team meeting, rather than trying to gain the caseworkers signature after the case plan and NSPs have been written up.

METHOD OF EVALUATION AND/OR MONITORING

The Probation Department's PPQA operation monitors and oversees compliance in all areas requiring State and Federal mandates. Therefore, a QA review process is currently being developed to ensure that the Case Plans and Needs & Services Plans have the same goals with required signatures. This quality assurance process will involve one PPQA Compliance Officer and one PPQA Group Home Monitor, to pick one or more cases per month to review a sample of Case Plans and Needs & Services Plans to review the goals and signatures.

The workgroup concluded its preliminary work in November 2014, as it was agreed upon that the workgroup would collapse into the on-going monthly Provider Sub-Committee to achieve PHNs involvement in the case plans, focusing on criteria for medically fragile youth and determining what the specific criteria is. An additional effort that supported the work of this collaboration was the Group Home Monitoring Compliance Tool Revision workgroup that involved both Probation and DCFS. The workgroup was initiated to streamline and improve the former tool focusing on improving the teaming process related to the coordination of the NSP and the Case Plan. A check sheet was created to ensure that all monitors are reviewing the content, accuracy, uniformity and efforts to obtain caseworker signature in the same manner. This new tool, which includes the NSP check sheet, will be incorporated into the 2015-2016, fiscal year, and will guide the collaborative group in next steps towards developing and implementing the QA process for reviewing case plan and NSPs together.

PROGRAM REDUCTION

The only issue of program reduction to address under this action step is the recent staff turnover and difficulty filling the vacancies left as staff promote and transfer out of the Placement Bureau and the Group Homes represented at the work group.

Enhance and expand upfront cross-system assessment through increased Placement Assessment Centers (PACs), development of assessment team and collaboration with partners such as DMH, LACOE and DCFS

The only Action Step that has not completed for this strategy is as follows: Convene collaborative group to meet quarterly to ensure progress and enhance the assessment process and implement quality assurance process to ensure effectiveness. The timeframe for this Action Step was extended to 2015, with most of the steps put in place; however, since this Action Step is ongoing, it will be carried over to the next SIP. The current progress is discussed below.

ANALYSIS

This workgroup comprised of managers from Placement Permanency & Quality Assurance, Residential Based Services and Placement Administrative Services developed the initial work of this group and has set the standard for the assessment of all new cases entering placement for the first time, whether to a Foster Family Agency or a Group Home. This workgroup also makes assessments and placement decisions for replacement on a case-by-case basis. The goal of this Assessment Team is to work in alignment with the PACs in making the best placement decision for the youth from the very beginning in order to positively impact placement stability. In cases of replacement, the Assessment Team works in alignment with the Probation Officer, Permanency Officer, if applicable, and the Provider Treatment Team to make the best decision for replacement in an equivalent setting or a step-down placement.

ACTION STEP STATUS

This workgroup met consistently for several months and finalized the Assessment Team Protocol, along with the screening tool that will be utilized in the assessment. The draft protocols and guidelines and the screening tool have been submitted for approval, and the Department Directive is in the process of being drafted. The Assessment Team has begun the early implementation of the process and successfully placed its first foster youth in a foster home.

METHOD OF EVALUATION AND MONITORINGPROGRAM REDUCTION

The Probation Department's Placement Permanency & Quality Assurance operation, along with Residential Based Services, monitors and oversees compliance in all areas requiring State and Federal mandates. Therefore, a process will be put in place whereby both operations will work in conjunction to consistently track the progress of each youth placed to ensure the effectiveness of the Assessment Team decision. Data will be collected and analyzed along the course of the youth's time in placement. This data will provide feedback to the Probation Officer, Permanency Officer, youth, the Assessment Team and the Provider Treatment Team to ensure that everyone is on course with the best plan for the youth, in order to limit the number of placements.

PROGRAM REDUCTION

Non-applicable

Expand Evidence-Based Programs (EBP) and practices such as Functional Family Therapy (FFT), Functional Family Probation (FFP) and Multi-Systemic Therapy (MST) as well as Family Preservation (FP) and Wrap Around (WRAP) services. Develop and implement use of Team Decision Making and Multi-Dimensional Team (MDT) processes to enhance the use of all services at strategic points in each child's case.

The three action steps under this strategy are utilization of the Placement Authorization Utilization Review (PAUR), increased services and referrals for DBP, FP and WRAP and full implementation of 3-phase MDT process. Due to multiple changes in these

programs, including administrative and staff reassignment and promotions and transfers, the completion of these goals has been delayed; therefore, all Action Steps will be extended into the next SIP. The progress of each is detailed below.

Utilization of PAUR & EBP/FP/WRAP Services and Referrals

The consistent use of the PAUR operation directly impacts the increase of appropriate referrals and effective services provided to all youth and their families. PAUR functions as a support system to juvenile operations by assessing referrals and assisting with determining the best treatment approach for youth and families. Referrals are submitted regarding prevention services that juvenile probation staff may consider in lieu of out of home placement or exemplify a higher propensity of an out-of-home placement absent FFP supervision services (cases should not be referred for FFP supervision services when there are existing probation violations). Services are available to all youth meeting the eligibility criteria and demonstrating a need for community-based services. Examples of community based alternative programs include: Family Preservation, Multi-Systematic Therapy, Functional Family Therapy, Functional Family Probation, Substance Abuse Prevention Control, Group Home Aftercare Services, etc.

The Wraparound program is linked in a continuum of care to ensure the physical, emotional, social, and educational development of children in a safe and nurturing environment. The Wraparound program is a broad, integrated community-based, collaborative approach to providing services to DCFS and Probation families experiencing family functioning challenges related to child abuse, neglect, and/or exploitation. DCFS and the Probation Department partner with community-based contractors and the Department of Mental Health (DMH) to provide mental health services when appropriate. Services include in-home outreach counseling visits, clinical direction and the Multidisciplinary Case Planning Committee.

The WRAP Community Based Organization (CBO) contracts were renewed in 2015 and expanded with up to 49 service providers. Due to the services being limited to only Medi-Cal eligible youth, it prohibits participation from youth with private insurance. There were only 250 slots available to Indigent (non-Medi-Cal eligible and have no private insurance) youth, and DCFS and Probation are positioned to share the current 20% usage (50 slots).

ANALYSIS

Due to a recent organizational change in which PAUR is currently accepting referrals from an expanded list of Probation units and camps, there is a justifiable reason to expand the FFT program. Statistical reports are extracted monthly to capture fidelity to model percentages for each intervention staff (interventionist). The examination of data revealed an increase in session completion percentages, increased graduation rate percentages and fewer gaps in service.

Based on an evaluation conducted by an external partner, monitoring fidelity is a critical focus for Probation. The intended outcomes of the FFT program are to improve mental

health functioning as shown on pre and post assessment measures and reduction in criminal recidivism. The measures for monitoring success include completion of all phases of treatment and reduction in post assessment mental health scores for all family members. Another measure of fidelity is the graduation rate, which is the percentage of clients who completed the FFT intervention, with a target goal of 80% or higher. The data for the time period January 1, 2012- December 31, 2014 indicated a 69% graduation rate which is a 10% increase over the previous evaluation period of 57%. The disenrollment rate also dropped from 43% (2007-2011) to 31% (2012-2014). Post mental health assessment scores taken after receiving a full dosage of FFT dropped from pre assessment to post 73% for minors, 72% for parents and 82% for the parents report on their minor's mental health functioning.

ACTION STEP STATUS

The increase in developing the aforementioned evidence-based programs has regressed due to departmental and administrative changes. The PAUR Unit is no longer with the Placement Bureau, but has moved to the Juvenile Field section. The rationale is to expand the referral base to all Probation youth and is not strictly limited to youth on a Suitable Placement order. Although the expansion was hindered for the current reporting period, a more comprehensive update will be provided on the next progress report.

METHOD OF EVALUATION AND MONITORING

Casey Families conducted an evaluation of the FFT and FFP program implemented by Probation using data from 2007-2011. The evaluation revealed the absence of a consistent pattern of findings across the intervention spectrum, preventing Probation from drawing stronger conclusions regarding the effectiveness of FFT and FFP. Probation has implemented more rigorous and systematic data collection processes to ensure the accuracy of the data, particularly in measures of model fidelity. Probation continues to work closely with the California Institute for Behavioral Health Solutions (CIBHS) and Casey Family Programs to ensure the quality and fidelity of the FFT and FFP data.

WRAP Around (WRAP) Services are rendered by contracted CBOs. The shared administrative functions of WRAP consist of a strong collaboration between Probation, DCFS and DMH. The three departments each have a representative for the Interagency Screening Committee. The aforementioned committee screens cases to determine if the youth is a candidate for WRAP. The committee also develops the initial Plan of Care, which is delegated to the contracted CBO that provides direct services to the youth and families. The committee reviews the Plan of Care, the development, and progress of the youth and families every six (6) months from the start date. To maintain the fidelity of the care plan, the WRAP DPOs work with the case carrying DPOs and CBOs to ensure its objectives are being fulfilled by the CBO. Any variances are immediately addressed within or through additional community resources prior to a decision to terminate services.

A recent departmental change has shifted the focus on obtaining data and evaluation for youth and families receiving WRAP services. The measures will include graduation rates (completion of the program); pre and post Los Angeles Risk and Resiliency Check Up (LARRC) scores, a self-assessment document utilized by Los Angeles County to determine risk factors and protective factors; case closure reasons; and length of time in the program, with a targeted goal of one year or less.

Family Preservation services are rendered by contracted CBOs. In the CBO contract, the agency is required to collect and enter data in a collection instrument developed by the Inter-University Consortium and the Family Preservation program. The data collected must include, but is not limited to: demographic information, primary allegations, client profiling, client characteristics, number of prior case openings and again at case closing, and services recommended and received.

PROGRAM REDUCTION/BARRIERS TO IMPLEMENTATION

There are two areas that have become barriers to fully implementing this process for all Probation foster youth or those at risk of entering foster care. One is this year's internal staffing unavailability, which should be restored in the near future. The other barrier that still remains, although it has increased somewhat, is lack of referrals for African American youth. Based on available data on disproportionality, FFT DPOs are strategically concentrated on areas with a higher number of African American populations. However, even with a systemic outreach approach, and having staff and services available, there are difficulties receiving referrals and clients that will benefit from such assistance. Exploration of systemic change to generate more referrals for these youth is necessary. One idea is to have an intake specialist for FFT who will make the appropriate referrals on all cases in this concentrated area.

3-Phase Multi-Disciplinary Team (MDT) Implementation

In February 2012, Placement Bureau staff and Group Home Providers were trained on the MDT process, which includes all three phases (Initial, Mid and Transition) and documentation requirements of all three team meetings. Although not all phases of this process are consistently utilized on every case, this process is being successfully utilized by Placement Officers and Group Home Providers in a collaborative fashion as evidenced by the reduced number of youth in care and returning to care. The successful MDT process has also assisted with increased referrals to after-care and evidence based program services.

ACTION STEP STATUS

Due to recent staff turnover and multiple changes in Probation administration, the development, improvement and increase of these services has been slowed, but has begun to move forward with a fresh perspective based on the new administrators and staff. Additionally, the PAUR unit is no longer under the Placement Bureau, but has been moved to the Juvenile Field section. In spite of this reassignment, it will still be addressed and completed by the end of this System Improvement Plan. All three action

steps will continue to be monitored with a full update on the completion of all by the next reporting period.

METHOD OF EVALUATION AND MONITORING

The Probation Department's PPQA operation monitors and oversees compliance in all areas requiring State and Federal mandates. Therefore, a review process is being developed to ensure that MDTs are taking place across all three phases of the youth's placement and program. Additionally, Placement to Community Transition Services (PCTS) Supervisors have strict accountability and oversight to the fidelity of the evidence based program and services model, and the quality assurance provided by the Supervisors and mental health on a national level is quite successful. Both operations' oversight will ensure continued improvement and development of these action steps.

PROGRAM REDUCTION/BARRIERS TO IMPLEMENTATION

Although collaborations within multiple units are in place, there is room for improvement to include FFT DPOs in MDT meetings. FFT is on a limited timeframe with the family (3 months). Utilizing the MDT meetings will enable the DPOs to engage the families, answer questions and develop an appropriate aftercare plan.

Increase safety for Probation Placement Officers serving dual roles, through developing a safety protocol ad obtaining resources such as training and equipment (cell phones, safety vests, Oleoresin Capsicum (OC) Spray, handcuffs/mechanical restraints). Explore ways to retain and reduce the turnover of Placement Officers.

Of the three Action Steps under this strategy, there is only one that has not been completed as follows: Work closely with Camp Community Placement to develop a process that will identify children residing in camp with no family in order to expedite permanency. Due to barriers and challenges, this action step is on-going and will move into the new SIP.

ANALYSIS

It is a known fact that the key to effective permanency is early identification and planning. There are many youth in Camp Community Placement that will be placed in a Foster Home, Group Home or in a homeless shelter, if they are not placed before 18 years of age, due to having no family or suitable family members to whom they can return. It is imperative that a consistent process is put in place to identify those youth who will enter foster care upon release from camp, especially those fast approaching the age of 18, and ensure placement in foster care as early as possible.

ACTION STEP STATUS

Probation's PPQA, along with Residential Based Services continues with the process of developing a process with the Juvenile Camp Intake Coordinator, the MDT Coordinators

in each camp and the Camp After-Care Program to identify youth with no family connections early in the case. PPQA Administrators will work with the Juvenile Field Consultant during the next reporting period to meet with all MDT Coordinators to provide a Department-wide training and increase the number of permanency referrals from camp. Once this is established, there will be better communication among all involved parties to ensure that family finding and permanency options are expedited and plan in place prior to the youth transitioning from camp to placement.

METHOD OF EVALUATION AND MONITORING

The Probation Department's PPQA operation monitors and oversees compliance in all areas requiring State and Federal mandates. Therefore, a review process will be put into place to ensure that all youth entering camp are evaluated for permanency and assigned to a Permanency Officer immediately upon identification.

PROGRAM REDUCTION

Non-Applicable

Probation Summary

In summary:

- Probation Child Welfare is consistently meeting and exceeding the national standard goal of 65.4% in placement stability. The percentage has remained constant for the quarters reported.

- Although a QA system for the NSPs and case plans had not yet been fully developed to increase and improve an effective teaming process between Group Home Providers and Case Workers, the revision of the Monitoring Tool for increased quality review of the NSP will support this effort into the next SIP.

- The Assessment Team has been developed and implemented for placement of all youth in a Foster Family Agency (FFA) or a group home and placed the first successful youth in a FFA.

- Based on findings from an outside evaluation, the priorities of Probation units that provide evidence based programs have shifted to expand and improve the overall process of gathering and analyzing data that will drive a strong conclusion on the effectiveness of the programs, model fidelity, and developing a QA process.

- FFT has shown success with data for the time period January 1, 2012-December 31, 2014 indicating a 69% graduation rate, which is a 10% increase over the previous evaluation period of 57%.

- The Placement Bureau staff and group home providers have been successful in completing most initial and transition MDTs; however, the QA process for ensuring that all three phases are completed timely must be fully developed and

implemented for continued success. The success of the MDT process assists in placement stability and the increase of referrals to after-care and evidence based program services.

- Increased officer safety and job satisfaction through improved tools and programs has made an impact on reduction of staff turnover in Placement
- PPQA is in the process of developing a protocol with the MDT coordinators in each camp and the Camp-After-Care program to identify youth that do not have family connections. The goal is to assess the youth's lack of familial support in the forefront of the case plan to improve timeliness of services.

Self-Sufficiency

Measure C3.3: In Care 3 Years or Longer (Emancipated/Age 18)

Methodology:

This measure computes the percentage of children in foster care for 3 years or longer, who were then either discharged to emancipation or turned age 18 while still in foster care. The denominator consists of all children discharged to emancipation or who turned 18 while still in foster care during the year; the numerator included those children for whom the time from the date of the latest removal from home to the date of discharge to emancipation, or date the children turned 18, was equal or greater than 3 years.

FIGURE 9

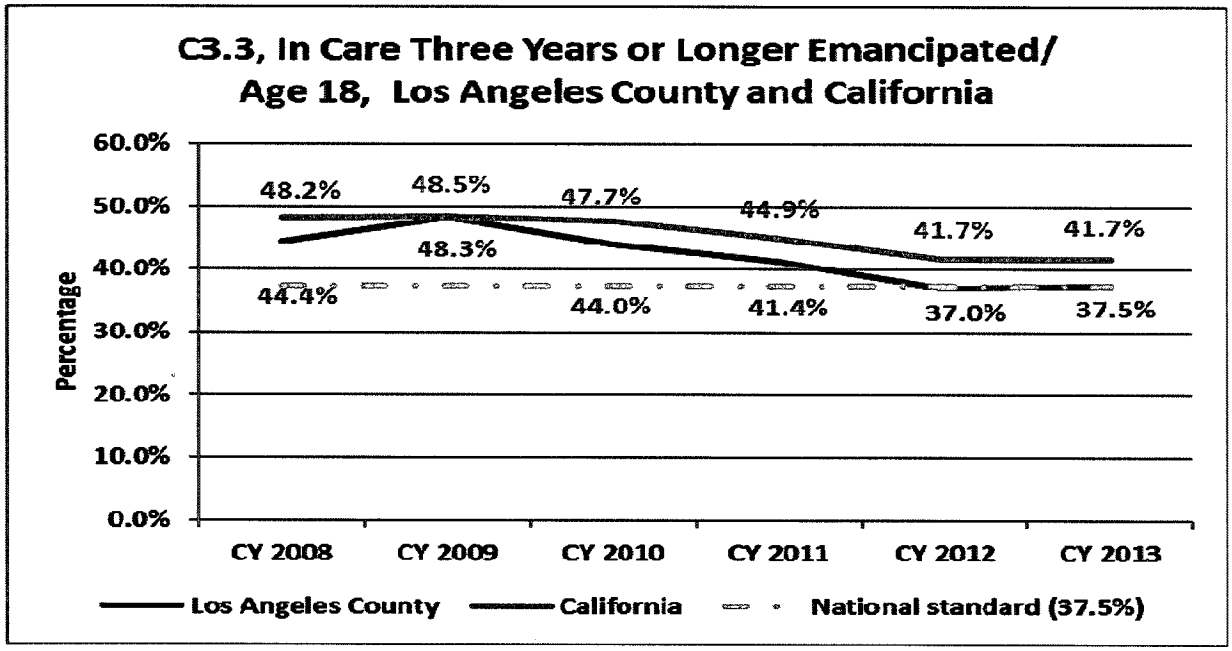
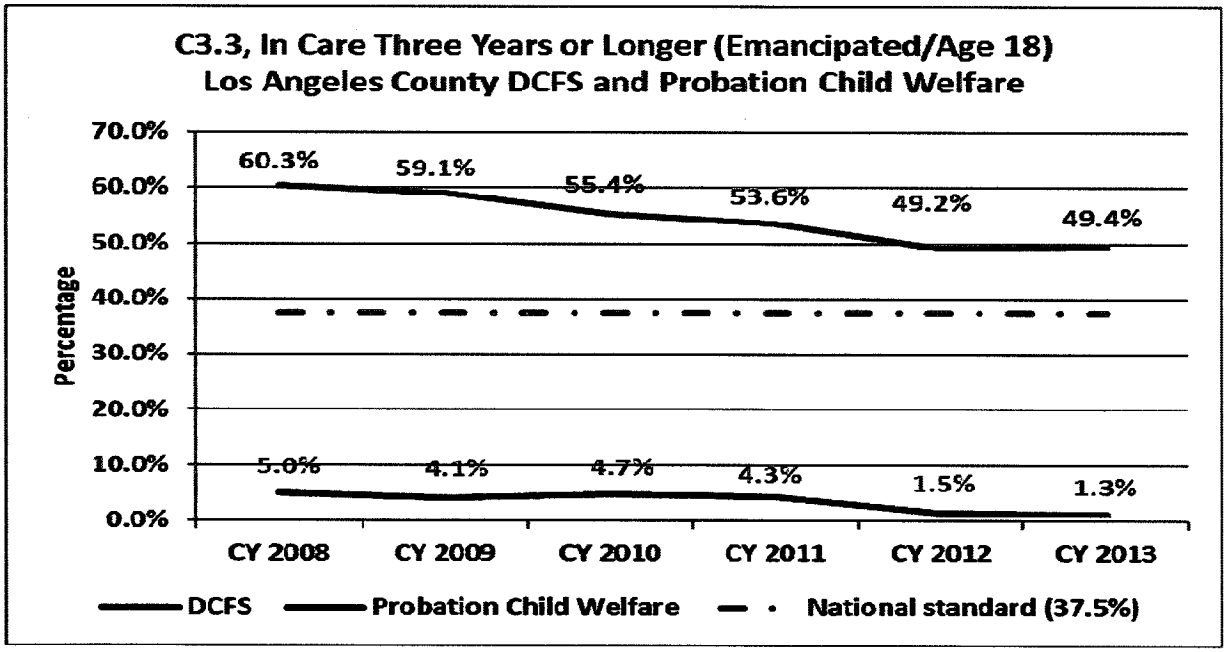


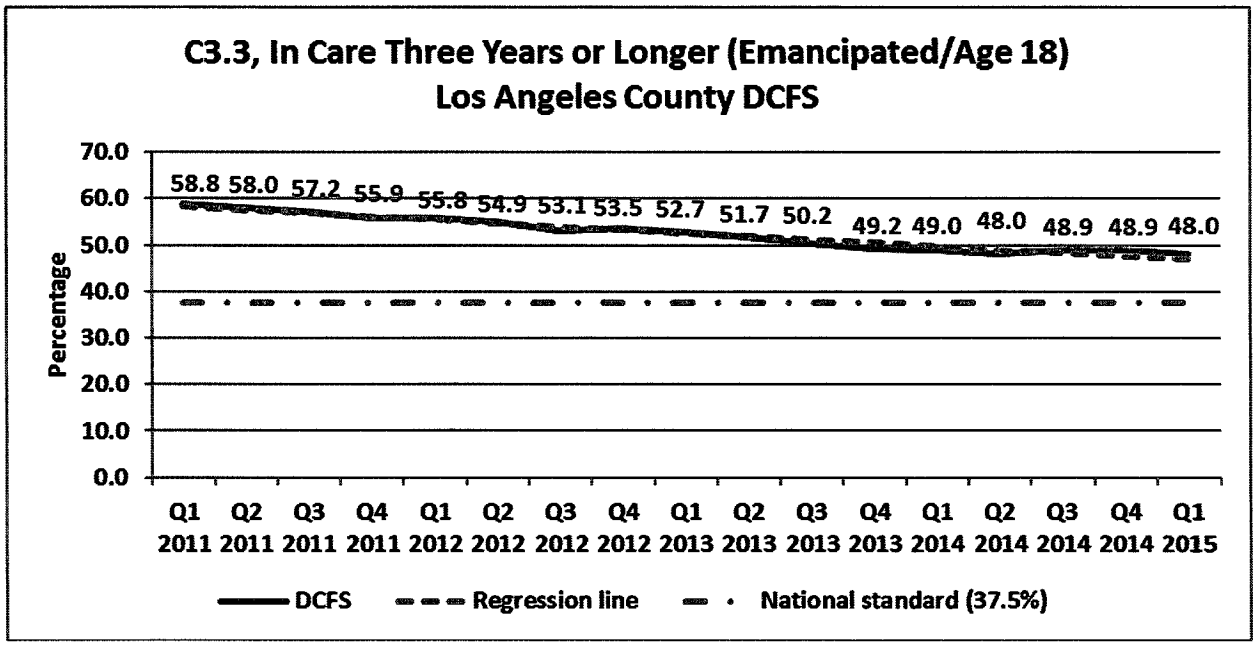
FIGURE 10



Current Performance C3.3: In Care 3 Years or Longer (Emancipated/Age 18)

SIP Goal:
By January of 2016, LA County will reduce the percentage of youth in care 3 years or longer by 10% (emancipated/age 18) from 60.2% to 54.0%.

FIGURE 11



The SIP goal established for the "in care three years of longer" outcome measure, took into consideration baseline performance of 60.2% in Quarter 2 2010. Los Angeles County's target to reduce the percentage by 10% meant County performance for this measure would be reflected in an outcome measure performance of approximately 54% of youth emancipating or turning age 18 youth having been in care 3 years or longer.

Since 2011, child welfare has seen a gradual decrease in the percentage of youth emancipating or turning age 18, having been in care three years or longer. The 48.0% performance of Quarter 1 of 2015 is a positive move towards the national performance standard of 37.5%. Los Angeles County has met and surpassed the SIP goal of a 54.0% performance.

DCFS SIP Strategies ~ C3.3 In Care 3 years or Longer (Emancipated/Age 18):

- Improve current data tracking systems and reporting process for youth *(Completed 2013 SIP Progress Report)*;
- Continue Mental Health Screening and Assessment *(Completed 2013 SIP Progress Report)*;
- Provide newly detained children with a comprehensive needs assessment *(Discontinued 2013 SIP Progress Report)*; and
- Utilize the California Partners for Permanency (CAPP) Grant.

Improve current data tracking systems and reporting process for youth

At the start of the System Improvement Plan (SIP), an analysis of Exit Outcome reporting accuracy for Quarter 1 of 2011 showed that DCFS offices were reporting data for approximately 44% of the total number of youth exiting care. This strategy was created, anticipating that by utilizing a developed data collection system, Los Angeles County would see improved, more accurate tracking of information for all the youth exiting care and better able to track the number of youth reported by the DCFS offices as exiting.

DCFS continues to utilize two tracking reports for National Youth in Transition Database (NYTD) and for the Federal Exit Outcomes reports. The tracking reports provide DCFS Regional offices information on youth needing NYTD data information and those who will be exiting so that the appropriate transitional conferences can be convened.

During this period of review the Department has tracked data collection for 17 year olds within 3 months of their 18th birthday. Exit Outcome reports for this population across the Department are at 99.0% completion (September 2015).

The Department has been successful in coordinating tracking and access to information on an internal data collection center called The Site. Data is displayed and tracked by Regional Offices making it readily accessible for tracking needed updates. Data will continue to be tracked, but not formally in the System Improvement Plan.

Continue Mental Health Screening and Assessment

DCFS continues to work diligently with Department of Mental Health (DMH) co-located partners to ensure timely and appropriate linkage to mental health services for the youth served by both agencies. Coordinated Service Action Teams have been fully integrated into every DCFS office. The Bureau of Clinical Resources and Services is maintaining timely mental health screenings.

Provide newly detained children with a comprehensive needs assessment

DCFS continues to utilize and track Multi-disciplinary Assessment Team (MAT) assessment but not as a formal SIP goal. Multi-Disciplinary Assessment Teams were in place prior to this current SIP and the SIP strategy completed during the last review allowed DCFS to track MAT assessments and study the effect of the assessment.

Utilize the California Partners for Permanency (CAPP) Grant

During this period of review, with the support of the CAPP grant and associated technical assistance, coaching and implementation strategies associated with the practice model have continued. Additionally, the Department has utilized an outside consultant to assist in transitioning from Team Decision Making (TDM) meeting efforts to a more comprehensive Child and Family Teaming (CFT) process that involves staff preparation, case exploration, family engagement and a child and family team meeting.

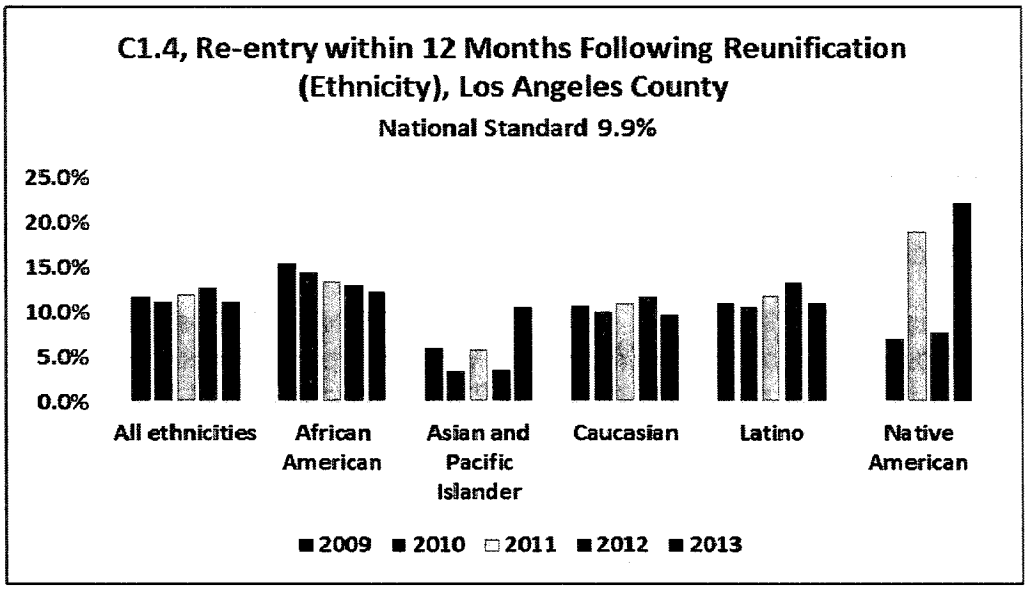
The Department has set in place a transition plan for the facilitation of Team Decision Making (TDM) meetings and (eventually) Child and Family Team (CFT) meetings utilizing resources from the pool of Team Decision Making facilitators who will be re-purposed as coach facilitators.

Lead coaches (referred to now as *Coach Developers*) are being trained and certified to lead an extensive testing of CFT teaming process in various offices aside from Pomona, Torrance and Wateridge. DCFS' Metro North, San Fernando Valley and West San Fernando Valley, as well as the South County, Vermont Corridor, Compton East and West, Santa Fe Springs and Belvedere Offices have been provided coaching opportunities for CSWs, SCSWs and management. Coaching sessions can be individual or in group form.

A critical component of the CAPP grant is related to Fidelity Assessments. These assessments are an evaluation method and are required of every case carrying worker in the Pomona and Wateridge offices. The Torrance office is not involved in the evaluation aspect of the CAPP grant, but has received technical assistance in the areas of coaching and implementing the practice model. The technical assistance provided by CAPP to Pomona and Wateridge has assisted in developing a detailed and coherent plan to ensure that all fidelity assessments are completed in the timeframe allotted.

The utilization of the CAPP Grant creates an opportunity to focus on outcomes for African American youth and American Indian/Native American youth. A review of SIP outcome areas shows information related to trends for various ethnic and age groups.

FIGURE 12



During a five year time from 2009 – 2013, across all ethnicities, there has been a reduction in re-entry following reunfication. African American children consistently have the highest re-entry percentages. In 2013 the Caucasion and Latino children experienced a reduction from the previous year in re-entry. Native American and Asian and Pacific Islander children show greater variance from year to year in re-entry rates.

Their smaller overall numbers of children involved in child welfare create more dramatic changes in percentages.

TABLE 6

Ethnicity	Calendar Year				
	2009	2010	2011	2012	2013
All ethnicities	11.8%	11.2%	12.1%	12.8%	11.2%
African American	15.4%	14.4%	13.5%	13.0%	12.3%
Asian and Pacific Islander	6.1%	3.5%	5.9%	3.6%	10.6%
Caucasian	10.8%	10.0%	11.0%	11.8%	9.7%
Latino	11.0%	10.6%	11.9%	13.3%	11.0%
Native American	0.0%	7.1%	19.0%	7.7%	22.2%

C1.4 Re-entry Within 12 Months Following Reunification ~ By Age

FIGURE 13

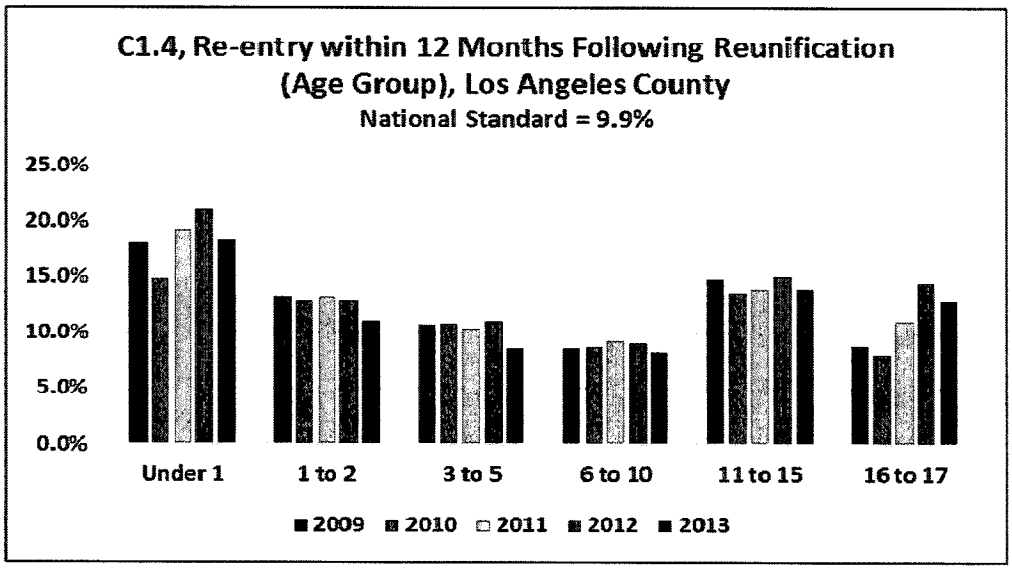


TABLE 7

Age Group	Calendar Year				
	2009	2010	2011	2012	2013
Under 1	18.0%	14.8%	19.3%	21.0%	18.3%
1 to 2	13.2%	12.8%	13.2%	12.8%	11.1%
3 to 5	10.7%	10.8%	10.3%	11.1%	8.6%
6 to 10	8.6%	8.8%	9.3%	9.1%	8.3%
11 to 15	14.8%	13.6%	14.0%	15.1%	14.0%
16 to 17	8.9%	8.1%	11.1%	14.5%	12.8%

Children under the age of one, experience the highest percentage of re-entry following reunification. Table 7 clearly documents the re-entry trends for children under the age of one. It is notable that children ages 11-15 also have higher re-entry percentages and there has been an increase in percentage re-entry for youth ages 16 and 17.

C4.2 Placement Stability, at Least 12 months but Less Than 24 Months 2010-2014

C4.2 Placement Stability Trend (all & by ethnicity)

FIGURE 14

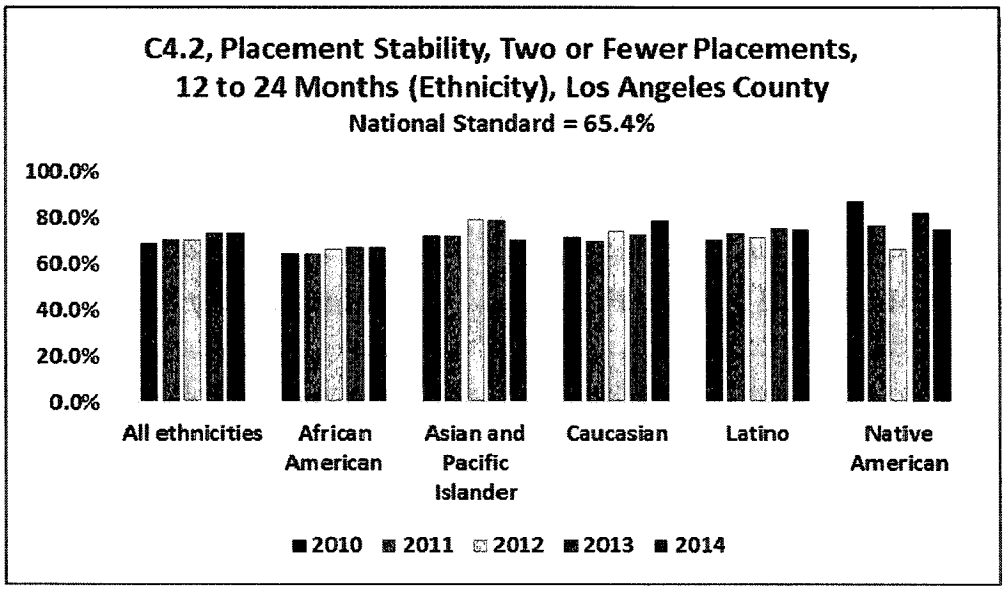


TABLE 8

Ethnicity	Calendar Year				
	2010	2011	2012	2013	2014
All ethnicities	69.1%	70.9%	70.8%	73.5%	73.7%
African American	64.5%	64.8%	67.0%	67.5%	67.4%
Asian and Pacific Islander	72.1%	72.5%	79.6%	78.7%	70.5%
Caucasian	71.9%	70.3%	74.3%	72.7%	79.2%
Latino	70.5%	73.6%	71.5%	75.7%	75.3%
Native American	87.2%	76.9%	66.7%	82.4%	75.0%

Overall all ethnicities have experienced improved performance in placement stability since 2010. Native American youth have seen reduced stability since 2010. Although there has been improvement in stability for African American youth, as a whole the group has the greatest need for improved stabiity. All ethnicities have surpassed the 64.4% national standard.

C4.2 Placement Stability Trend (by age)

FIGURE 15

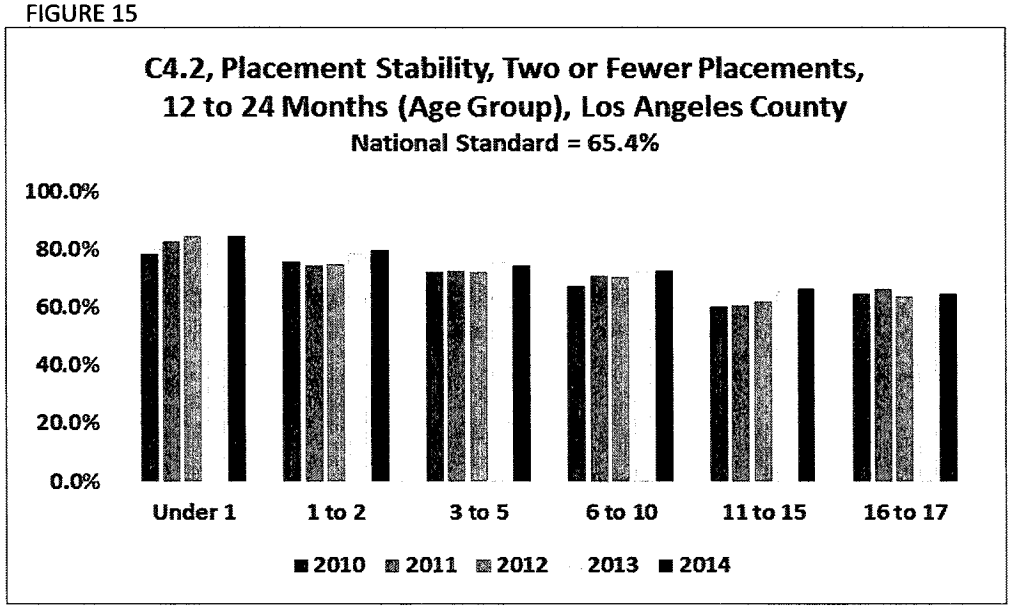


TABLE 9

Age Group	Calendar Year				
	2010	2011	2012	2013	2014
Under 1	78.3%	82.6%	84.5%	85.0%	84.5%
1 to 2	75.8%	74.6%	75.0%	78.9%	79.9%
3 to 5	72.0%	72.6%	72.3%	75.7%	74.2%
6 to 10	67.2%	70.8%	70.5%	72.6%	72.4%
11 to 15	60.0%	60.5%	62.0%	65.4%	66.5%
16 to 17	64.7%	66.5%	63.6%	62.9%	64.5%

Los Angeles County has seen consistent improvement in placement stability for children under the age of one. Teenage youth have the greatest challenges with placement stability. Children ages 11 to 15 have had the greatest improved performance when compared to CY2010 stability.

C3.3 In Care 3 Years or Longer (Emancipated or Age 18 in Care) 2010-2014

C3.3: In Care 3 Years or Longer (Emancipated/Age 18)

FIGURE 16

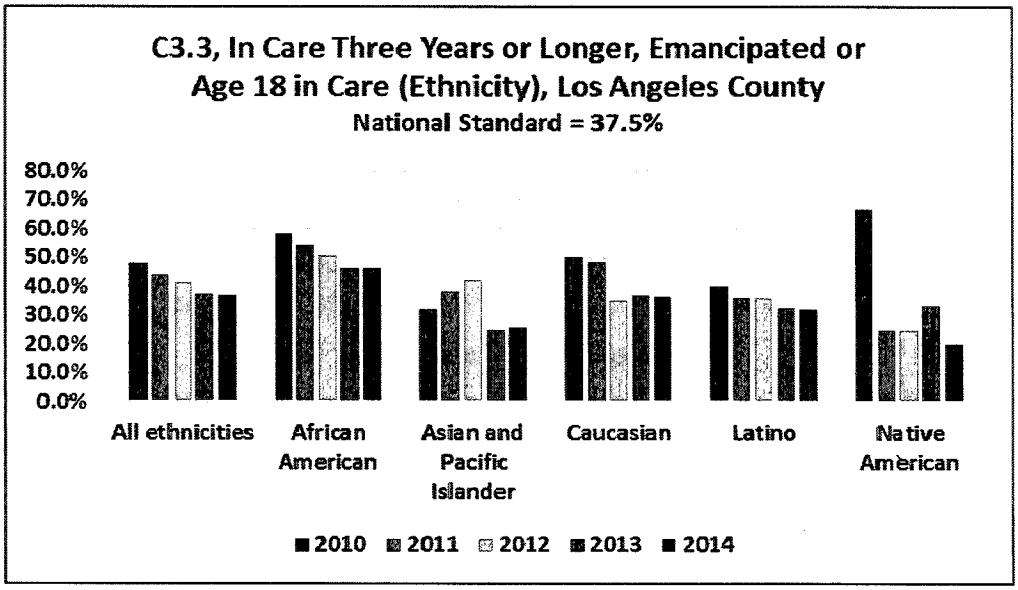


TABLE 10

Ethnicity	Calendar Year				
	2010	2011	2012	2013	2014
All ethnicities	48.3%	44.1%	41.3%	37.6%	36.9%
African American	58.4%	54.2%	50.7%	46.4%	46.1%
Asian and Pacific Islander	32.1%	38.5%	42.1%	25.0%	25.8%
Caucasian	50.3%	48.5%	35.0%	36.9%	36.6%
Latino	40.3%	36.3%	36.0%	32.6%	32.1%
Native American	66.7%	25.0%	25.0%	33.3%	20.0%

There has been a reduction in the percentage for all ethnicities since 2010. However, African American youth are notably the most likely ethnicity to emancipate or turn age 18 having been in care for three years or longer.

DCFS Summary

In Summary:

- DCFS System Improvement Plan strategies around measure C3.3: In Care 3 Years or Longer (Emancipated/Age 18); *Continue Mental Health Screening* and *Assessment and Newly Detained Children Receive Comprehensive Needs Assessment* remain in place and are being tracked.
- SIP strategy *Improve Current Data Tracking Systems and Reporting Process for Youth* has addressed challenges with data collection. Through the utilization of ready access tracking on an internal data collection center called the SITE. As of September 2015, the department is collecting 99% of Exit Outcome report for youth age 17 and within 90 days of their 18th birthday.
- Los Angeles will continue with Utilization of CAPP Grant strategy as there is opportunity for focused efforts on outcomes for African American youth and American Indian/Native American youth. The CAPP grant strategy is also aligned with Enhanced Organizational Performance SIP strategies: Implement Core Practice Model and Managing for Results ~ Data-driven Decision Making and will continue through 2016.

Probation SIP Strategies ~ Measure C3.3 In Care 3 years of Longer (Emancipated/Age 18):

- Increase self-sufficiency through the development of resources and housing for Transition Age Youth (TAY) such as education, employment, housing, permanency options (adult adoptions), mentors and life-long connections
- Obtain Foster Family Agencies/Foster Homes for Probation foster children and recruit adoptive families for freed youth.
- Improve Relative/Non-Related Extended Family Member (NREFM) approval process and funding.

FIGURE 17

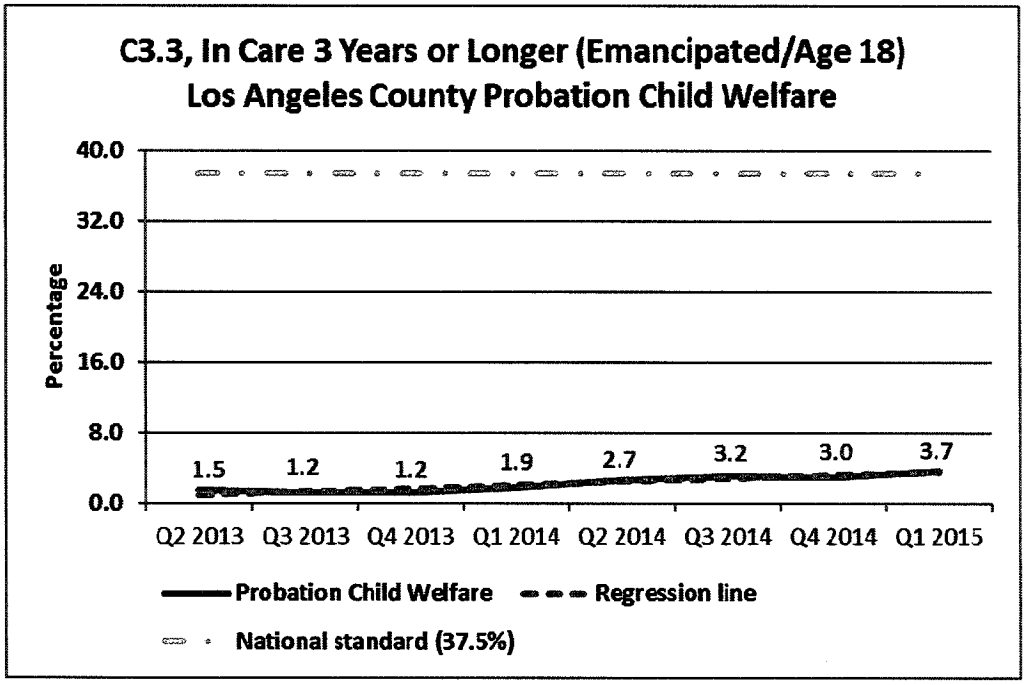


TABLE 11

C3.3 In-care 3 Years or Longer (Emancipated/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?

Quarter/ Year	2nd Qrt 2013	3rd Qrt 2013	4th Qrt 2013	1st Qrt 2014	2nd Qrt 2014	3rd Qrt 2014	4th Qrt 2014	1st Qrt 2015	National Standard Goal
Los Angeles Probation	1.5	1.2	1.2	1.9	2.7	3.2	3.0	3.7	37.5

Probation is consistently meeting and exceeding the national standard goal of 37.5% in permanency for children in care for three years or longer. Although there has been steady movement away from the goal for the past year, there was a slight improvement in the fourth quarter 2014.

Increase self-sufficiency through the development of resources and housing for Transition Age Youth (TAY), such as education, employment, housing, permanency options (adult adoptions), mentors and life-long connections.

One of the key vehicles Probation utilized to provide resources and housing for youth was through the Child Welfare Services Outcome Improvement Project (CWSOIP) funds. Approximately $28,000 of the CWSOIP funds was utilized this period to assist Transition Age youth and their families with rent and living expenses, household items and furniture and school supplies. Another key vehicle Probation utilized to increase resources for youth was to speak directly to foster and former foster youth to find out what they needed so various focus group forums was the most effective way to do this. Initially, the action step was to develop and convene one work group; however, due to the transient nature and unavailability of this population, convening them into a consistent work group proved to be impossible. Of the three Action Steps under this strategy, two have been completed with one remaining related to implementing the solutions and plan developed with assistance from TAY youth to increase their permanency and self-sufficiency goals. This step is ongoing and will be transitioned into the next SIP.

ANALYSIS

The two operations that Probation has that solely focus on TAY Youth are Youth Development Services (YDS) and Transition Jurisdiction Services (TJS). These operations have the largest impact on the success of these youth transitioning into adulthood, over this progress report period, much work has been accomplished to improve outcomes for these youth.

Youth Development Services

Statistics have shown that only seventy percent (70%) of youth actually graduate from high school. One of the strategies that Probation has implemented to thwart these statistics and improve the number of youth that graduate from high school and continue to be successful in college involved Probation Youth Development Services (YDS) Independent Living Program (ILP) sponsoring two main events. One event was the ***"College Summit."*** This year was the second College Summit event developed, facilitated and hosted by TAY specifically for TAY. The event celebrated youth's academic achievements and assisted in the planning of continuing education. The strategy included TAY youth that have successfully transitioned out of placement attending college to encourage high school graduates to enroll in college. The goal was to have 100 or more youth participate. More than 130 college and college-bound youth participated at the Summit. Over 15 colleges and universities and several vendors participated to inform youth about higher educational opportunities and paid internships. The College Summit offered several workshops for youth with the following topics:

- College Life Getting Over the Hump/Los Angeles
- Mentoring and Life-Long Connections and iFoster/California AB
- Personal Health Protection and Awareness

- College Housing, AB12 and Transitional Housing Program (THP)
- Financial Aid

"Success Is Our Future" is another event that YDS utilized as a strategy to increase self-sufficiency and permanency for TAY youth. This event celebrates youth academic achievements rewarding youth with academic scholarships in various amounts. The goal is to involve school counselors to be proactive in identifying the youth to track progress towards graduating from high school.

Transition Jurisdiction Services

AB 12 and AB 212, known collectively as The California Fostering Connections to Success Acts, were passed during September of 2010 and 2011 respectively, and went into effect on January 1, 2012. Probation developed a new program, Transition Jurisdiction Services (TJS), to provide supervision, support and guidance to youth in Extended Foster Care (EFC) under the WIC 450 Jurisdiction. There are two populations of youth in Extended Foster Care that come under the supervision of Probation: 1) youth under WIC 602 Jurisdiction who are on a placement order (Suitable Placement) on their 18th birthday; and 2) youth 17 years and over up to 20 year old as of 2014, on a placement order who have completed their rehabilitative goals may elect to remain in foster care under WIC 450 – Transition Jurisdiction. Youth who are at least 18 years old are called Non-Minor Dependents, while those youth between 17 years and six months and less than 18 years old are called Transition Dependents.

Between the periods of April 1, 2013 through March 31, 2014, Probation had a total of 292 WIC 450 youth. During this period, a total of 30 youth were attending high school, 77 youth were in college or vocational schools, 83 youth were working at least 80 hours per month, 32 youth participated in a program/activity that helps youth find or remove barriers to employment and 2 youth (African American) were unable to perform any of the criteria due to a medical or mental health condition. Below shows the breakdown of the Completed high school/GED, enrolled in high school and enrolled in college or vocational school criteria based on ethnicity:

TABLE 12

Extended Foster Care Eligibility Criteria Categories				
Ethnicity	Total Youth	Completed HS/GED	Enrolled in HS	College/Vocation
Hispanic	158	23	17	43
African Am	105	11	11	29
White	25	11	1	5
Other	4	1	1	0

Based on Probation's internal data, African Americans have the lowest percentage of Probation foster youth that are enrolled in high school, have graduated from high school/ received GED, and are attending college/vocation schools, which are the main eligibility criteria for receiving extended foster care benefits. In order to assist the young adults into transitioning into adulthood, TJS works in conjunction with the Youth

Development Services (YDS) to provide additional access and resources and programs as mentioned in the forthcoming section.

Since AB12 is a fairly new legislation, TJS is still in the process of formulating the most viable method of evaluating the effectiveness of the bill. TJS has determined that the measures to indicate the effectiveness of AB12 shall include:

- Number of transition youth/ NMD enrolled in high school or equivalent program,
- Number of transition youth/ NMD enrolled in college/ vocational school,
- Number of transition youth/ NMD that are employed (at least 80 hours per month);
- Number of transition youth/ NMD that participate in a program/ activity that helps him/her find or remove barriers.

Probation anticipated caseloads under WIC 450 Transition Jurisdiction increasing from the number of 150 in 2013 to approximately 200 by January 2014 and at least 300 by 2015. The number of WIC 450 Transition Jurisdiction youth increased to approximately 202 for the reporting period of April 1, 2013 through March 31, 2014, thereby meeting Probation's projected number of caseloads.

During the last reporting period, there was a need to increase the number of Deputy Probation Officers for this program to ten (10). During that time, Probation had three (3) DPOs working with TAY youth in the AB 12 program. During the reporting period of April 1, 2013 and March 31, 2014, Probation increased the number of Deputy Probation Officers working with TAY youth. In spring 2014, Probation hired three (3) more DPO's; two (2) in April 2014 and one (1) to begin on October 1, 2014 increasing the total number of DPOs working with this population by 50%.

Based on the data provided by these two operations, the Action Step of developing an opportunity for TAY to have a consistent voice in their own outcomes was born. In March through April 2014, TAY focus groups were convened to obtain input, thoughts and opinions about their experiences, challenges, successes and barriers in placement and when transitioning out of placement. A total of three (3) groups were conducted: one (1) of youth already transitioned from placement and two (2) of youth in placement (one male group and one co-ed group). Of the two groups conducted in group homes, one was a small-bed home with a capacity of six (6) males and one was a large residential facility with the capacity of ninety-seven (97) youth, both males and females.

Telephone interviews were conducted for those TAY youth who had already transitioned that could not make it to the focus group. Additionally, in June 2015, youth focus groups were conducted at the annual SIP Stakeholder Convening/Peer Review Kick-Off at the beginning of the month and at the Peer Review week during the latter part of the month.

ACTION STEP STATUS

Due to the transient nature of this group, it has been challenging to work with a set group of youth to develop a plan for the implementation of solutions with the assistance from TAY youth to increase their permanency and self-sufficiency goals. Since this action step has not been completed, it will be transitioned into the next SIP.

METHOD OF EVALUATION AND/OR MONITORING

TAY Focus Groups will continue to be facilitated in order to track fidelity of services and TAY youth experiences in placement and during transition out of placement.

Annual Client Satisfaction Surveys is one of the methods Probation child welfare will utilize in the near future to evaluate and monitor programs and fidelity of services. The Client Satisfaction Survey will be completed annually by stakeholders to track fidelity of services externally and internally and to receive feedback on the quality of services. The goal is to provide a survey youth, parents, caregivers and Providers when youth is discharged.

PROGRAM REDUCTION

Non-Applicable

Obtain Foster Family Agencies/Foster Homes for Probation foster children and recruit adoptive families for freed youth.

The first Action Step of obtaining Foster Family Agencies (FFAs) was successfully completed in April 2014. The two areas under this strategy that have not been completed are the increase of permanency collaborations across systems and obtaining at least two adoptive families through the Diligent Recruitment grant. This last Action Step has been revised to remove utilizing the Diligent Recruitment grant due to the barriers detailed on page 21 and has been completed in 2015 with on-going recruitment through Media-Based services and activities and the Kidsave program built into the process. The focus of this process is to continue working with Community partners and the Faith-Based Community to recruit adoptive families. With the increased need for foster families due to the Continuum Care Reform and Resource Family Approval (RFA), this Action Step will transition into the next SIP.

ANALYSIS

In December 2012, the Los Angeles County Probation Department conducted a Foster Family Program Statement Review to obtain foster family agencies/foster homes for Probation foster children. Six (6) FFAs submitted program statements to provide services to probation youth and were approved by Probation. The Department of Children and Family Services (DCFS) Contracts and Community Care Licensing Division (CCLD) were notified of their approval. On January 29, 2014, DCFS made recommendations for Probation to amend specific documents pertaining to the respective Foster Family Agency contracts to add Probation, and Probation was added to the FFA Contracts. The FFAs and Probation received the executed amendments

and the Start Work Notices, which then provided additional placement options for probation youth.

Additionally, the foster family agencies provide placement options for Non-Minor Dependents (NMDs) and Pregnant and Parenting Teens in "Whole Foster Family Home" (WFFH). Five (5) of the six (6) FFAs have approved components in their program statements to place and service Pregnant and Parenting Teenagers. The projected start date to place probation youth was April 2014. Lack of structured foster care placements was one of the challenges with WIC 450 Transition Jurisdiction youth; however, several of the FFAs are approved to services Non-Minor Dependents, which increase the number of placement options for youth 18 and over.

In relation to increasing youth permanency units across systems and recruitment of adoptive families, there are many barriers to completing these goals. However, the number of youth needing permanent families due to having no family or suitable family is increasing, specifically those difficult populations such as sex offenders and transgender youth. Therefore, it is necessary that the barriers and challenges are overcome to create more options for these youth languishing in residential care. This action step is on-going and will move into the new SIP.

ACTION STEP STATUS

The first Probation foster youth was placed in February 2015, and the second youth, who was a transgender (male to female), was placed in a female foster home on April 24, 2015. Unfortunately, neither placement was successful due to the youth not being prepared to handle the freedom they had or the intimacy and accountability of a family setting. However, on June 19, 2015, the first successful placement was made with a youth who had graduated from several sex offender programs simply because he could not return home. He has begun his senior year in High School with hope for a new future.

Regarding increased permanency collaborations across agencies, Probation child welfare has recently begun working with Department of Mental Health and, Community Care Licensing and continues to work with DCFS to improve permanency outcomes for youth. Probation Child Welfare continues to work closely with KidSave, a community based organization committed to recruiting adoptive families for children and has made some progress with routine identification of Probation foster youth who will benefit from this program. This relationship will be utilized even more during this next year as new permanency collaborations are formed and the recruitment process for adoptive families intensifies through media relations and outreach.

METHOD OF EVALUATION AND/OR MONITORING

Probation did not need an evaluation or monitoring process to obtain the FFAs since they were already existing Providers and simply revised their contract to include for Probation foster youth. However, there will be annual and periodic evaluation and monitoring conducted on all foster family homes, where Probation foster youth are placed, and their effectiveness on permanency. PPQA's Group Home Monitoring will conduct monitoring and investigations for foster family homes where Probation foster youth reside in the upcoming fiscal year. PPQA Program Analysts will develop a survey and conduct focus groups that include the residents to evaluate needs, strengths and effectiveness of the FFAs. In addition, the Provider Sub-Committee, a work group of small and mid-to-large capacity group homes, and the Permanency Collaboration Committee meet on a monthly basis to work on policies, conduct case conferences and discuss current events and activities utilizing a best-practices approach. Pilot items are typically initiated at this level prior to an official implementation to the rest of the providers for testing to ensure quality and validity.

PROGRAM REDUCTION
Non-applicable

Improve Relative/Non-Related Extended Family Member (NREFM) approval process and funding
The final Action Item that remained under this category was related to cross-systems training for Probation Child Welfare staff and caregivers. The training has been completed and will be an on-going process as we continue to improve practices and outcomes for Probation foster youth and their caregivers.

Cross-systems training for Placement staff, Probation Adoptions of Safe Families Act (ASFA) Team and Caregivers

ANALYSIS

In August 2014 and again in May 2015, the Probation Child Welfare ASFA Team, made up of DPOs who conduct the home assessments for Probation foster youth, attended training facilitated by the DCFS ASFA Team. All applicable laws are identical in approving the home for both dependency and delinquency youth. However, due to the vast difference in the number of staff, the internal policies may differ in some areas.
Another major difference is the availability of CWS/CMS to view the abuse/neglect history of potential caregivers without submitting a CACI request. The Probation Child Welfare ASFA Team was able to observe DCFS' processes and will be able to utilize some of those processes in order to be more efficient. DCFS County Counsel was also present during the convenings and was able to clarify common questions also experienced by CSW counterparts.

The trainings highlighted common issues faced by both DCFS and Probation ASFA. One is the home assessment referral is submitted by the case carrying CSW/DPO. Other issues in common for both Probation Child Welfare and DCFS is that the potential caregiver was never initially contacted by the CWS/DPO to determine if they are willing

to accept the youth into the home, relationship has not been established between the caregiver and the youth, potential caregivers were not made aware of the extensive background check process, etc. Probation Child Welfare has requested for DCFS ASFA to extend the training to Probation's Placement Officers, and this resource will be explored in the new SIP.

ACTION STEP STATUS

This Action Step has now been completed and will be include in the next SIP as related to continued training.

METHOD OF EVALUATION AND/OR MONITORING

N/A

Legislative change related to funding requirements for relative caregivers.

ANALYSIS

Approved Relative Caregiver (ARC) Funding Option Program

The approval of home assessments and federal funding for relative/NREFM is dependent solely on federal and state legislative laws. Probation Child Welfare's original SIP strategy to facilitate a legislative change to assist relative/NREFM with funding opportunities has been removed due to the passage of a new legislation that will provide the assistance necessary. This new legislation introduced the ARC Funding Option Program that was signed into law on June 20, 2014 and is scheduled to start on January 1, 2015. The intent is to pay approved relative caregivers equal to the basic rate paid for other children who are AFDC-FC eligible. The new strategy for Probation shall be to collaborate with DCFS and Department of Public Social Services (DPSS) to ensure that the County opts into the program by the October 1, 2014. Once the County opts into the program, Probation Child Welfare shall ensure that any policies and procedure changes related to the foster home assessment process are in place for the smooth transition of the new program.

According to Probation Child Welfare's internal data for 4/1/2014-3/31/2015, Probation's Foster Home Assessment Unit conducted 259 home assessments, with an approval rate of 24%, showing a 1% decrease from the previous year. The decrease in the number of approved homes may be due to receiving less Foster Home Assessment Referral's than the previous year. The Probation Child Welfare ASFA Team has continued to access Child Welfare Service Outcome Improvement Project (CWSOIP) funds to assist potential caregivers with temporary relief, furniture and household items. There are homes that are close to meeting the ASFA standards, but may need additional furniture, beds, etc. to accommodate the youth. The Probation Child Welfare ASFA Team has been able to access funds in a more expedited matter to approve the home.

TABLE 13

Period of:	4/1/2012-3/31/2013	4/1/2013-3/31/2014	4/1/2014-3/31/2015
% Homes Approved	14%	25%	24%

Due to the increased number of approved homes, there was also an increase in the number of approved homes receiving AFDC-FC funding. There was a 5% increase in comparing 4/1/2012- 3/31/2013 with 4/1/2013-3/31/2014. The increase in the approval may also be attributed to the closer collaboration between Probation Placement Administrative Services and PPQA with DCFS Revenue Enhancement to discuss and streamline processes to meet each of the departments' objectives. There are also current discussions to automate the process to further improve the information sharing process between the two departments.

TABLE 14

Period of:	4/1/2012-3/31/2013	4/1/2013-3/31/2014	4/1/2014-3/31/2015
% Homes Approved Funding	25%	30%	17%

ACTION STEP STATUS

DCFS Revenue Enhancement provides the necessary updates on the development of the ARC Funding Option Program. In April 2015, CDSS issued instructions to Counties on how to opt into the program. Probation, DCFS and DPSS are beginning to collect data on those caregivers benefiting from this program.

METHOD OF EVALUATION AND/OR MONITORING

The current method of monitoring the approval of federal and state funding consists of manual entries due to the difference in systems used by DCFS and Probation. Probation Program Analysts have access to CWS/CMS to track the payment status. In addition, DCFS Revenue Enhancement provides a list of paid clients on a monthly basis. Ideally, a database that has the capability to communicate with both systems in order to capture a more accurate count of approved payments and running balance paid out to each individual family would be one solution.

PROGRAM REDUCTION/BARRIERS TO FUTURE IMPLEMENTATION

Now that the program has been implemented, the initial obstacles and barriers have been overcome; however, due to current experiences working with different departments to process funding and the addition of another department (DPSS), has added another layer of bureaucracy to the process so future barriers and challenges may unfold as the process moves forward. Probation is unaware of the systems used by DPSS, and additional training may be required in the future. It will be beneficial to ensure that proper representatives from each department are included during the ongoing implementation to maintain and strengthen the collaboration partnerships of all entities.

Additional Legislative Developments

Harris Appeal Hearing Process

On April 23, 2012, the Superior Court in Sacramento County issued an order in *Harris v. CDSS.* CDSS was ordered to provide state hearings in cases where any county child welfare agency denied a relative or non-related extended family member (NREFM) approval to provide care to a juvenile court dependent. Once Probation was notified by DCFS of the new legislation, Probation attended trainings available to implement an internal process to handle the new legislation. Probation collaborated with the State's Administrative Law Judge to provide a contact liaison between Los Angeles County Probation and CDSS. A relationship has been established, and Probation received the first appeal case in September 2014 and the second in April 2015. Los Angeles County was the first Probation department to implement the Harris legislation statewide, and worked alongside the State of California to formulate a procedure on how to proceed with future delinquency court cases.

ANALYSIS

The *Harris Hearings* for Probation families will ultimately increase the number of home assessments approved, while maintaining the health and safety of the youth. Based on conversations from DCFS ASFA Unit, they have approximately 100 Harris cases thus far. Since Probation is anticipating a lower number of appeals, Probation will collaborate with DCFS to increase the sample population. With an increase number of the target population, discussions on common trends and methods to avoid overturned appeals shall lead to better practices.

ACTION STEP STATUS

To date, two hearings were conducted on Probation Child Welfare families for the State of California to determine if the appeal fell under the category of the *Harris Hearing.* These hearings have assisted with the full development of the hearing process. One was conducted over the phone with a Spanish interpreter and the other was in person in a more formal setting; therefore, the varying experiences have set policy for the different types of hearings. Due to the home assessment denial based on Title 22 regulations, the State of California oversees all cases. The Statement of Position completed on all cases, describes the issues, regulations violated, justification of the appeal, etc. are submitted to the State of California and the claimants' attorney, and then the hearing date is set and confirmed for all parties.

METHOD OF EVALUATION AND MONITORING

The evaluation to determine if the Harris hearing is assisting to increase the number of approved home assessments to ultimately increase placement stability and decrease the number of years in foster care is to track the appeals received, the determination of the appeal, and to monitor the movement of youth within the system or possibly exiting the system. As an example, a record of all appeal cases will be maintained to determine the number of overturned cases in a given year. Once the sample population is available, an in-depth analysis of the movement/re-placement or stability of the youth

until he/she exits the system via termination of jurisdiction, opting in for AB12 services, etc. will be conducted. It may also be beneficial to develop a scoring mechanism to define what may be considered successful versus unsuccessful exits.

PROGRAM REDUCTION/BARRIERS TO FUTURE IMPLEMENTATION

The legislation has only been in effect since January 2014. Based on past conversations with the State of California and DCFS, the caseload amount was higher than anticipated, and the numbers do not account for Probation child welfare cases. It is still too early to determine the effects of increased caseloads once other counties with separate child welfare and Probation departments are mandated to follow the legislation in ensuring that proper timelines are met. However, on Probation's end, the procedure has been structured and County Counsel is thoroughly involved in the process.

Probation Summary

In Summary:

- Probation Child Welfare is consistently meeting and exceeding the national standard goal of 37.5% in permanency for children in care for three years or longer. The percentage has remained constant for the quarters reported.
- There were successful outcomes for some youth as a result placement in group home care. Many accomplished their Youth Transition Tasks, i.e., Education Planning, Daily Living Skills, Money Management, Self-Care, Social Development and Relationship Building.
- FFA contracts have been executed and are in full effect. Three (3) youth have been placed in 2015 resulting in two (2) failed placements and one (1) successful placement. Strategies are in place to identify youth who can step down from congregate care into FFA care.
- Increasing collaborations of youth permanency units has met with challenges; however, progress in this area is a major goal for the next SIP.
- Recruitment of Adoptive Families through Community Partners and the Faith-Based Community will continue to be explored.
- Cross-system trainings on the ASFA home approval process were conducted by DCFS. The Probation Child Welfare ASFA Team attended the training and were able to gain additional knowledge of how to be more efficient in executing similar protocols.
- Although Probation Child Welfare was not able to make legislative changes to assist relative caregivers, new legislation that has been in effective since January 2015, will be able to financially assist caregivers that have an approved home, but previously would not be eligible for AFDC-FC funding.

Outcome/Systemic Factor: Enhanced Organizational Performance/ Data Collection Utilization

SIP Goal: Stakeholder feedback will identify improvement in teaming, communication, and managing for results.

Why Los Angeles County chose this system area

PQCR, CSA, SIP Stakeholder Meeting

Feedback from the PQCR, CSA, and SIP Stakeholder meeting (Related to the 2011 CSA and SIP reports) identified a need for improved communication and teamwork between agencies, as well as a need for more complete understanding of cultural differences, family stressors, the challenges of timelines for parents and the unique struggles for those families involved with substance use and/or abuse. In addition, Suggested next steps included; increased visitation in order to build stronger relationships between parent and child, building parent capacity to protect the child, and having increased family and community supports in place prior to reunification.

During this period of review, stakeholder feedback from the June 4, 2015 System Improvement Plan Annual Stakeholder meeting, identified that there had been improvement in teaming and communication and obvious use of data in managing for results. However, there was feedback suggesting that DCFS and Probation have room to grow in the area of communication, especially in making communication easier between the two agencies and with external partners.

The Annual System Improvement Plan Stakeholder meeting, held on June 4, 2015 allowed for the Department of Children and Family Services (DCFS) along with Probation Child Welfare to engage with internal and external stakeholders and obtain feedback related to Enhanced Organizational Performance through a survey. The survey provided three questions for each of the following areas: collaborative teaming, communication, and managing for results. The survey utilized a scale rating; with 5 being strongly agree to 1 being strongly disagree.

A stakeholder survey has been conducted annually for the five-year duration of the SIP (2011 - 2015). During early years of the plan the County struggled with getting surveys completed by participants. In 2014, a reward system was introduced for those completing surveys. In 2014 and 2015 the increased number of surveys allowed for comparison analysis.

The basic statistics for the 2014 and 2015 stakeholder surveys are listed in Table 15.

TABLE 15
SIP Stakeholder Surveys, 2014 and 2015

Survey Participation		
Measure	**2014 Stakeholder Survey**	**2015 Stakeholder Survey**
Number of Meeting Participants	250	317
Number of Survey Respondents	153	174
Survey Participation Rate	61.2%	54.9%
Respondents		
Roles	**2014 Stakeholder Meeting**	**2015 Stakeholder Meeting**
Government Employees	85 (55.6%)	106 (60.9%)
Contracted Service Providers & other Community Partners	36 (23.5%)	45 (25.9%)
Clients (former foster youth, foster parents, and relative caregivers)	8 (5.2%)	20 (11.5%)
Other roles	2 (1.3%)	0 (0%)
Unidentified roles	22 (14.4%)	3 (1.7%)

The respondents included: 1) government employees from DCFS, Probation Child Welfare, and other agencies, 2) contracted service providers and other community partners, and 3) clients including former foster youth, foster parents, and relative caregivers. In 2014 and 2015, the respondents were principally government employees 55.6% (85/250) and 60.0% (106/317). The participation rates of contracted services providers and other community agencies remained almost constant between 2014 and 2015; 23.5% (36/250) and 25.9% (45/317). Client participation rates doubled from 5.2% (8/250) to 11.5% (20/317) from 2014 to 2015.

Survey Results

Table 16 below contains a summary of the overall survey results. For seven of the eight items, the percentage of respondents who "agreed" or "strongly agreed" increased by at least 10% from 2014 to 2015. The eighth item, improved teaming with DCFS and/or Probation Child Welfare, increased by 3.1%. In no instance did the rates decline from 2014 to 2015.

Teaming

Teaming is defined as two or more people working together toward a common goal along with internal and external stakeholders, including foster youth. This area was

assessed by three scale items: 1) whether government agencies understand and apply the meaning of teaming, 2) whether clients and partners felt included in the teaming process, and 3) whether all parties experienced improvement in this area over the past 12 months.

Seventy-six percent of the government employees agreed or strongly agreed with the statement that DCFS and/or Probation Child Welfare understand and apply the meaning of teaming. Among contracted agencies and community partners the percentage was 79%, and for clients the percentage was 95%. Overall agreement (all groups combined) was 79%.

Sixty-nine percent of the government employees agreed or strongly agreed with the statement that partners and clients of DCFS and/or Probation Child Welfare were included in the teaming process with their respective departments. Among contracted agencies and community partners the percentage was 80%, and for clients was 75%. Overall agreement was 73%.

Sixty-nine percent of the government employees agreed or strongly agreed with the statement that all parties have experienced improved teaming when engaging with DCFS and/or Probation Child welfare over the past year. Among contracted agencies and community partners the percentage was 63%, and for clients was 89%. Overall agreement was 73%.

Clients were the most enthusiastic about the three aspects of teaming. The government group tended to be less enthusiastic about the inclusion aspect. Contracted agencies and community partners tended to be less enthusiastic about improvements during the past year.

Communication

Communication is defined as consistently sharing information, ideas, and concerns among all parties through common systems of symbols, signs, behavior, and language. This area was assessed using three scale items: 1) DCFS and/or Probation Child Welfare made inquiries and shared information that was in the best interest of all parties; 2) DCFS and/or Probation Child Welfare made communication easy so that their partners could contact the departments at any time; and 3) that improvement in communication with DCFS and/or Probation Child Welfare were evident over the past 12 months.

Sixty-two percent of government employees agreed or strongly agreed with the statement that DCFS and/or Probation Child Welfare made inquiries and shared information that was in the best interest of all parties. Among contracted agencies and community partners the percentage was 75%, and for clients the percentage was 95%. Overall agreement was 67%.

Forty-six percent of government employees agreed or strongly agreed with the statement that DCFS and/or Probation Child Welfare made communication easy so that

their partners could contact the departments at any time. Among contracted agencies and community partners the percentage was 49%, and for clients the percentage was 50%. Fairly sizeable percentages in the three groups disagreed or strongly disagreed with the statement indicating room for improvement. Overall agreement was 50%.

Sixty-three percent of government employees agreed or strongly agreed with the statement that they observed improvement in communication with DCFS and/or Probation Child Welfare over the past 12 months. Among contracted agencies and community partners the percentage was 79%, and for clients the percentage was 67%. Overall agreement was 67%.

All three groups expressed more concern about the quality of communication with DCFS and/or Probation Child Welfare than teaming or managing results. Clients were slightly more positive about the communication aspect of the partnership, although the survey results suggest need for improvement in this area.

Managing Results

DCFS and Probation Child Welfare worked on establishing a continuous quality improvement process to impact outcomes for children and their families. Included in the process was the providing information and other feedback to partners and clients. The area of managing for results was assessed using two scale items: 1) DCFS and/or Probation Child Welfare used data to improve practices that affected their clients and partners; and 2) partners and clients received feedback on how DCFS and/or Probation Child Welfare were improving performance and outcomes.

Seventy-six percent of government employees agreed or strongly agreed with the statement that DCFS and/or Probation Child Welfare used data to improve practices that affected their clients and partners. Among contracted agencies and community partners the percentage was 69%, and for clients the percentage was 65%. Overall agreement was 73%.

Fifty-nine percent of government employees agreed or strongly agreed with the statement that partners and clients received feedback on how DCFS and/or Probation Child Welfare were improving performance and outcomes. Among contracted agencies and community partners the percentage was 61%, and for clients the percentage was 75%. Overall agreement was 62%.

Clients were least positive about managing results than either teaming or communication. Government employees were most positive about DCFS and/or Probation Child Welfare using data to improve practices and outcome; in comparison their partners were slightly less positive about these efforts. Clients were more positive than the other groups regarding periodic feedback from the departments on efforts to improve outcomes.

SIP Stakeholder Surveys, 2014 and 2015
Los Angeles County
Agree or Strongly Agree with the Survey Items

↑ 10% percent or greater improvement
↔ Less than 10% improvement

TABLE 16

Teaming		
Survey Item	**2014 Stakeholder Survey**	**2015 Stakeholder Survey**
DCFS and Probation Child Welfare understand and apply the meaning of teaming.	66%	79% ↑
We feel included in the planning processes with DCFS and/or Probation Child Welfare.	63%	73% ↑
Over the past 12 months we have experienced improved teaming when engaged with DCFS and/or Probation Child Welfare	61%	73% ↑
Communication		
Survey Item	**2014 Stakeholder Meeting**	**2015 Stakeholder Meeting**
DCFS and/or Probation Child Welfare make inquiries and shares information that is in our best interest.	56%	67% ↑
DCFS and/or Probation Child Welfare make communication easy so that we can contact someone at any time.	44%	50% ↑
Over the past 12 months we have experienced improved communication when engaged with DCFS and/or Probation Child Welfare	65%	67% ↔
Managing Results		
Survey Item	**2014 Stakeholder Meeting**	**2015 Stakeholder Meeting**
DCFS and/or Probation Child Welfare use data to improve issues and practices that directly affect us.	63%	73% ↑
We receive periodic feedback from DCFS and/or Probation Child Welfare on how we are improving outcomes together.	48%	62% ↑

Survey Results—Comments

In addition to specific responses to scaling questions, stakeholders had the opportunity to document any free flowing comments. The most frequent themes of comments were communication, teaming, collaboration, and inclusion. Of these themes, comments

related to communication and teaming were common to service providers and other community organizations, DCFS employees, and Probation Child Welfare employees. A prevailing concern involved the need for improvement in areas of communication and teaming. Comments were reflect as such: "(Although) there have been improvements, (DCFS and Probation Child Welfare) still face some challenges with communication." and "DCFS and Probation Child Welfare don't communicate enough—need better engagement." There was noted expressed interest in being more involved in partnering, "We have been working with DCFS and Probation Child Welfare—all school districts should reach-out to their county partners." and " DCFS, Probation Child Welfare (should), and Community Care Licensing work more closely—same with contractors and community organizers."
Respondents shared that working together made sense in that efforts are directed towards shared clients and common purposes.

Los Angeles County's goal for Enhanced Organizational Performance is stakeholder feedback of improved performance in areas of teaming, communication and managing for results. The 2015, feedback received from stakeholders validates that DCFS and Probation Child Welfare have improved in all three areas and have succeeded in accomplishing the set goal for this organizational outcome area.

DCFS SIP Strategies ~ System Factor Enhanced Organizational Performance

- Complete Contract Re-design;
- Develop and Utilize a DCFS Practice Model; and
- Implement a Data-driven Decision Making Process.

Strategy: Complete Contract Re-design

During this reporting period, DCFS cancelled the Family Preservation (FP) and Partnership for Families (PFF) portions of the Safe Children Strong Families (SCSF) Request for Proposal (RFP) as the FP and PFF portions of the RFP were contested by many community organizations/providers due to an error in the evaluation instrument. However, other portions of the PSSF/CAPIT redesign, Child Abuse Prevention, Prevention and Aftercare and Adoption Promotion and Support Services contracts were awarded and became effective January 1, 2015.

On July 23, 2014, Agencies were informed that the FP and PFF RFPs were cancelled.

Department of Children and Family Services staff in Support Programs, Contract and Budget staff have been involved with revising the evaluation tool.

On May 21, 2015, a stress test was completed by three evaluators (Two from other County Departments) to test the viability of the evaluation tool. Recommendations were made and incorporated into the evaluation tool.

On February 19 and April 16, 2015, Community Stakeholder meetings were held to obtain the community's input into the design of the RFP and Statement of Work (SOW)

to address any concerns or questions the community may have had in regards to the RFP process and SOW. Where possible, their feedback was incorporated into the SOW and RFP process.

Currently, the RFP process and evaluation instrument is being reviewed by the Los Angeles County Internal Services Department. We will conduct another stress test on the evaluation instrument once we receive their feedback. On-going evaluation of the RFP process will be integrated in the operational components of contracting.

The strategy of contract redesign as initiated in 2011 will not be included in 2016 System Improvement Plan. Release of the FP and PFF RFPs is pending.

Strategy: Develop and Utilize DCFS Core Practice Model

Coaching to the Core Practice Model (CPM) continued through Q1 2015. At the direction of leadership and consistent with the County and State Practice Model components, the focus deepened to include individual coaching and learning the Child and Family Teaming (CFT) process including facilitation of team meetings. This includes utilization of a comprehensive 4-step process:

1. Case Exploration and Staff Preparation/Engagement;
2. Family Engagement;
3. Child and Family Team Meeting; and
4. Debrief.

All offices, in addition to the CAPP offices of Pomona, Torrance and Wateridge, have been involved in the process of learning the concept of teaming using the meeting with families as a vehicle. Facilitators were selected by each regional office to remain dedicated to the facilitation of family meetings. These facilitators are being trained to the 4-step process so that they can utilize this in their respective offices. Additionally, Supervising Children Social Workers (SCSWs) will be coached and trained in Q2 and Q3 of 2014 to support incorporation of CPM into their daily work. Specific timelines for SCSW training will be established by each office based on workload and in cooperation with the local office Implementation Team.

The next phase of practice model training and coaching involved engaging DCFS Offices county-wide to support practice changes, outcome achievement and improvement in Quality Service Review (QSR) scores in accordance with the Katie A. Settlement Agreement.

Documentation of additional Core Practice Model activities includes:

- 2014 through Q1 2015: Coaching continued and increased through the identified timeframe due to the introduction of the teaming process. However, coaching hours were tracked for the year as the focus shifted to the CFTM process.
- May 2015: Participated as a presenter at the Global Implementation Conference in Dublin, Ireland on "Community Partnering in Real Time – All the Time: The new norm for getting to social impact." The presentation was a collaborative

effort from all 4 CAPP counties with Los Angeles and Santa Clara counties being featured by doing the presentation piece;

- 2014 through Q1 2015: Continued working with Tricia Mosher Consulting (TMC) to develop Facilitators, Coaches and Coach Developers.

TABLE 17

Level	DCFS developed	TMC developed
Facilitator	147	41
Coach	11	24
Coach Developer	0	2

- Worked with Policy division and the central Implementation team members to identify ways to connect the CFTM process with aspects of policy, including developing a draft policy for the CFTM process itself;
- Conducted Fidelity Assessments orientations (in Pomona and Wateridge) and set timeframes for an initial set of assessments to be completed to test the process; and
- Held sessions of *Underlying Needs* with Marty Beyer, PhD for Lead CPM Coaches from DCFS, DMH and Los Angeles Training Consortium (LATC). Also held a Training for Trainers session and produced a video of a portion of Marty Beyer's training session in an effort to reach more people.

Strategy: Managing for Results – Data-driven Decision Making

DCFS has been developing, improving and refining its Data-driven Decision Making process since November of 2011. During this period of review, DCFS has engaged in:

1. 12 DCFS (Department level) Stat meetings;
2. 1 Annual Review;
3. 4 Data Champion Conferences;
4. 10 Pre-meet and Dry runs related to Practice Based Case Reviews;
5. 12 Data Analytic Team meetings;
6. On-going Office and Program Stat liaison work;
7. Monthly collaborative work with Casey Family Programs;
8. Development and implementation across the department of a Continuous Quality Improvement (CQI) 9-Step Model of performance improvement;
9. Integration of qualitative Quality Service Review (QSR) data into the Data-driven Decision Making process and DCFS Stat meeting;
10. Coordinating with DCFS Regional Offices and Support Programs to develop individual improvement plans tied to a chosen Federal Outcome measure; and
11. Tracking of Department performance on Federal, State and Department outcome and process indicators.

Data-driven Decision Making (DDDM) moved through 2014 in a direction of enhancing the process by developing and implementing a formal continuous quality improvement plan for a chosen improvement area (the Department identified four improvement areas of focus; No Recurrence of Maltreatment, Exit to Reunification within 12 Months (Entry Cohort), Exit to Permanency 24+ Months in Care, Re-entry Following Reunification). In July 2014, QSR qualitative practice data and lessons learned were introduced into the agenda of the monthly DCFS Stat meeting. Managers were engaged in QSR practice scoring and aligning practice to performance outcomes. Throughout 2011 and 2012 the focus of DDDM was on quantitative data; knowing outcome indicators and understanding methodology. In 2013 DCFS Managers engaged in department level discussions around qualitative data and the story behind the performance numbers. During this period of SIP review, the DDDM process has been focused on the utilization of quantitative and qualitative data information in a formal improvement plan in order to impact a chosen change area.

The Department continued to build on the skill set of designated Data Champions who support offices and programs in the collection and dissemination of data. Four conferences were held specifically for "Data Champs", to highlight office and program performance and demonstrate how to move toward formal improvement plans.

A next step for system improvement planning will be dynamic alignment of the Department's Strategic Plan and Management Appraisal and Performance Plan (MAPP). In November of 2015 DCFS will be holding a Leadership Organizational Group (LOG), engaging DCFS managers and external partners in aligning child welfare strategic priorities. The LOG will incorporate quantitative and qualitative performance information as well as on-site improvement plan development.

The Data-driven Decision Making (DDDM) process continues to include looking at outcome quantitative data and qualitative data. The process has been expanded, including external partners in a dynamic fashion. During this period of review, DCFS began to formalize improvement planning in a CQI 9-Step process. The DDDM process will be a strategy in the 2016 System Improvement Plan.

DCFS Summary

In Summary:

- Contract Redesign has been completed with applicable service contracts being awarded. Currently, the overall process is being reviewed and fine-tuned. On-going evaluation will be integrated into the operational components of contracting.
- A Core Practice Model has been developed and implemented. The current focus is on individual coaching and learning the concept of teaming in the form of a child and family team (CFT). On-going, the department is engaging staff in supporting practice change and outcome achievement by utilization of Quality Service Review (QSR) scoring in accordance with the Katie A. Settlement Agreement.
- Los Angeles will continue with Managing for Results ~ Data-driven Decision Making (DDDM) into the upcoming 2016 – 2020 System

Improvement Plan. The DDDM process has been able to move from the introduction of outcome data and understanding to efforts of formal continuous quality improvement planning.

Probation SIP Strategies ~ Data Collection Utilization

- Analyze all data elements to be collected and tracked, which includes identifying areas of disproportionality and racial disparity, and develop a plan for creating a data driven decision making process.
- Create a dynamic process to share data and gain internal and external stakeholder feedback regarding the use of the data.

Analyze all data elements to be collected and tracked, which includes identifying areas of disproportionality and racial disparity, and develop a plan for creating a data driven decision making process.

Of these Action Items, the first has been revised due to the inability to make substantial progress on a goal that includes so many Probation operations. Not only have there been many changes in Probation Administrative staff, but all operations are inundated with the many demands for data from various sources all over the State. Therefore, the goal now focuses strictly on the Placement Bureau data and great strides have been made. With this revision, two of the Action Items have been completed, with only the implementation plan to improve child welfare outcomes left to complete. This Action Item will be moved into the new SIP.

ACTION STEP STATUS

Probation has made great strides in engaging the multiple Placement Units to gather and collect qualitative and quantitative data to determine if outcomes are met. In turn, the data shall also include trends and commonalities of the barriers that hinder meeting such outcomes. The entire section for data collection utilization is still a work in progress, and shall be continued onto the next SIP progress report.

METHOD OF EVALUATION AND MONITORING

The Probation Department's PPQA operation monitors and oversees compliance in all areas requiring State and Federal mandates. Therefore, a review process will be put into place to ensure that all youth entering camp are evaluated for permanency and assigned to a Permanency Officer immediately upon identification.

PROGRAM REDUCTION

Due to Probation's antiquated case management system, collecting viable data is a problematical task. Data collection is the responsibility of each unit, per operation requiring specific staff to input on a consistent and accurate basis. The lack of a centralized database causes a hardship in gathering and analyzing data across units, and the methodology may also differ; thus, potentially lacking reliability and validity. Probation is aware of the issue and is in the process of revamping the Probation Case

Management System (PCMS), which will ease the availability of extracting reports and other quantifiable data.

Implementation of plan to improve child welfare outcomes, including the decrease of disproportionality and disparity in all areas, with quality assurance process implemented to ensure effectiveness of plan.

ANALYSIS

Probation's Placement Permanency Quality Assurance Unit receives an average of 40 referrals annually and manages an average caseload of 80-90 youth divided among five (5) Permanency Officers. Permanency statistics routinely show that the highest percentage of permanency and family finding referrals are African American. Below are the ethnic statistics from July 2015

ETHNIC BREAKDOWN OF PERMANENCY REFERRALS

TABLE 18

ETHNICITY	NUMBER OF YOUTH	PERCENTAGE OF YOUTH
AFRICAN AMERICAN	43	57%
AMERICAN INDIAN	2	3%
ASIAN	0	0
CAUCASIAN	3	4%
HISPANIC	35	35%
OTHER	1	1%
TOTAL	75	100%

TABLE 19

GENDER	NUMBER OF YOUTH	PERCENTAGE OF YOUTH
FEMALES	21	28%
MALES	54	78%
TOTAL	75	100%

Cross-Over Youth Committee Related to Permanency

Placement Permanency and Quality Assurance did not receive any 241.1 dual supervision crossover referrals between the periods of April 1, 2014 through March 31, 2015. There was a drastic decline in referrals due to the discontinuance of the 241.1 workgroup, which took place on a monthly basis. The workgroup was initially established several years ago, to identify crossover youth that were in need of family finding services. Once the youth were identified as having no permanent connections in their lives, the 241.1 unit would submit a referral to the Permanency & Compliance Unit in order to locate relatives/non-relatives that would be considered as permanent connections through Legal Guardianship and Adoption Services.

Placement Permanency and Quality Assurance received 1,490 new case referrals that are crossover youth between the periods of April 1, 2014 through March 31, 2015. Out of the 1,490 referrals, 960 were 300 WIC with prior DCFS history, and 580 were 17+ years of age. The crossover youth with prior DCFS history average 64%. During this period, there were no Adoptions.

Based on the shared collected data between DCFS and Probation, Probation Child Welfare has enhanced the ability to identify crossover youth in need of permanency planning. On the average, 85% of all youth ordered into Suitable Placement have either had an open case under 300 WIC or have had some contact with the Dependency system, in the form of referrals that were either unfounded or inconclusive. In the month of July 2015, approximately 29% of those youth were referred for permanency planning and family finding. Of the 29%, 57% are African American and make up a large part of the 85% of all placement youth who have either had an open case under 300 WIC or have had some contact with the Dependency system.

ACTION STEP STATUS

Probation Child Welfare has made great strides in engaging the multiple Placement Units to gather and collect qualitative and quantitative data to determine if outcomes are met. In turn, the data shall also include trends and commonalities of the barriers that hinder meeting such outcomes. The entire section for data collection utilization is still a work in progress, and shall be continued onto the next SIP progress report.

METHOD OF EVALUATION AND MONITORING

The Probation Department's PPQA operation monitors and oversees compliance in all areas requiring State and Federal mandates. Therefore, a process is being developed through the PPQA Program Analysts to work closely with the Administrators of the Placement Bureau to capture accurate and valid data on a consistent basis.

PROGRAM REDUCTION/BARRIERS TO FUTURE IMPLEMENTATION

Many operations currently have staff shortage, specifically TJS as the newest operation, but efforts are being made to ensure that Probation is compliant with all legislative mandates. Data collection is still in the planning phase, but discussions have been made to include TJS data in a centralized Placement Bureau database to gather valid data for analysis. The database is currently still being created, but will greatly improve the quality of data produced regarding all Probation youth under a Suitable Placement order.

Probation Summary

In Summary:

- There has been a vast improvement in the sharing of data between Probation operations, but the lack of a centralized departmental database is an ongoing issue for collecting and analyzing viable data.

- Due to the availability of a cross system between CWS/CMS and PCMS, Probation is able to track the number of crossover youth.

- Statistics continue to support that families of color are disproportionately represented in the dependency and delinquency system. African American children are most likely to have poor educational outcomes and receive the highest number of permanency and family finding referrals.

- Substantial progress has been made for Probation to utilize data- driven decision making for continuous quality improvement, but is still an area of improvement, which shall be reported on the next SIP progress report.

OBSTACLES AND BARRIERS TO FUTURE IMPLEMENTATION

System improvement planning includes the following criteria;

1. Information collection (quantitative and qualitative data);
2. A process for critical thinking and analysis;
3. Strategizing and Action Steps;
4. Tracking and Adjusting; and
5. Communication with Stakeholders and Decision-makers

In considering obstacles and barriers to future implementation of SIP strategies, Los Angeles County DCFS and Probation Child Welfare agree that the obstacle or barrier under any given strategy will fall into one of the system improvement planning criteria.

Examples of this would include

1. Probation Child Welfare's caseloads under WIC 450 Transition Jurisdiction have increased from the number of 150 in 2013 to approximately 200 by January 2014 and close to 300 by 2015. For the reporting period of April 1, 2014 through March 31, 2015, thereby meeting Probation's projected number of caseloads.

   By October 1, 2014, Probation hired three (3) more DPO's, increasing the total number of DPOs working with this population by 50%.

   The **tracking and adjusting** that was required in order to address the increased number of 450 Transition Jurisdiction, delayed full readiness to implement strategies to work with the population.

2. Probation Child Welfare and DCFS are challenged in each strategy by the **collection of data, quantitative and qualitative.** Data is available in varying forms, but it may not be available in a form that will allow the strategy leads to fully analyze outcomes or drill down to the actual case level. Additionally, cross county development of data analytic skill set is an important step in system improvement planning and one being implemented in the Enhanced Organizational Performance part of the SIP. Probation Child Welfare and DCFS joining together to track data and share case review; which occurred in May and June of 2014; is one step in a positive direction towards addressing this obstacle. Probation Child Welfare's increased utilization of CWS/CMS has helped in tracking outcomes as well as DCF'S on-going enhancement of the Data-driven Decision Making process to expand to more dynamically include external partners in the DCFS Stat meeting.

3. Input from our Community Partners for this progress report included their noted observation that DCFS and Probation have challenges with communication. The communication challenges were identified not only internally for each agency, but between agencies and with external partners. This impacts multiple areas of system improvement. **Critical thinking and analysis** cannot be completed in silos. **Communication with stakeholders** as well as between agencies brings forward more comprehensive understanding of child and family experiences with Child Welfare and Probation Child Welfare as well as engages others in teaming around outcomes. Probation and DCFS have taken steps, through county-wide collaborative workgroups to improve communication and teamwork.

4. **Communication with Decision-makers** can be a barrier to system improvement strategies. As DCFS and Probation respond to pressures from external forces which move priorities, strategy leads are often compelled to refocus attention in a different direction. Long-term system improvement strategies remain in place, but can go into a hold status as other areas take priority. An example of this would be activities around a report in the local newspaper. As various agency policies or activities are highlighted, staff focus is turned toward responses to the public scrutiny and away from the strategy at hand. As Probation Child Welfare and DCFS face this resource challenge, continued discussions are focused on strategies for this barrier.

PROMISING PRACTICES/ OTHER SUCCESSES

Los Angeles County Probation Child Welfare and DCFS identify the following as the three most impactful promising practices to county child welfare system improvement:

1. A Shared Core Model of Practice: Both county departments are focusing on enhanced practice that includes teamwork, engagement, assessment, and planning, as well as tracking and adapting. With a shared view, especially in the area of teamwork, there is an expectation that outcomes for children and families involved in both agencies will move in a positive directions.

2. Collaborative workgroups across the county: Probation and DCFS are jointly engaged in multiple workgroups around various shared efforts related to child welfare. These include but are not limited to placement and recruitment, permanency, focus on Transition Aged Youth, Eliminating Racial Disparity and Disproportionality, Commercial Sexual Exploitation of Children, just to name a few. The workgroup efforts are further enhanced in effectiveness by the inclusion of community partners in the discussion and action developed during the meeting.

3. A shared vision of California-Child and Family Services Review (C-CFSR) process: Probation Child Welfare and DCFS have established a working relationship around the C-CFSR process that has fostered a plan to develop a joint agency Continuous Quality Improvement Governing Body. With a shared focus, Los Angeles County will move to coordinate system improvement planning

to shared strategies and joint agency leadership over strategies. Additionally, by engaging in more complete joint focus on C-CFSR reports, there will be greater alignment in other shared State and Federal Initiatives such as the Title IVE Waiver. The shared C-CFSR vision works well in Los Angeles County which has recent Board approval for an all-county Office of Child Protection that will coordinate child safety responsibilities across county agencies.

Performance Indicators—Outcomes Summary

Los Angeles County DCFS
Q2 2014 through Q1 2015

TABLE 17

No.	Performance Indicator	Q1 2015 Performance	One-Year Percentage Change	National Standard	Met the Standard in Q1 2015?
C1.1	Reunification Within 24 Months (Exit Cohort)	59.9%	-1.2%	75.2%	
C1.2	Median Time to Reunification	9.5 months	+2.2%	5.4 months	
C1.3	Reunification Within 12 Months (Entry Cohort)	37.1%	-3.2%	48.4%	
C1.4	Reentry Following Reunification (Exit Cohort)	12.0%	-1.4% ↑	9.9%	
C2.1	Adoption Within 24 Months (Exit Cohort)	20.3%	-21.6%	36.6%	
C2.2	Median Time to Adoption (Exit Cohort)	33.2 months	+2.8%	27.3 months	
C2.3	Adoption Within 12 Months (17 Months in Care)	17.5%	+7.7% ↑	22.7%	
C2.4	Legally Free Within Six Months (17 Months in Care)	10.0%	+33.2% ↑	10.9%	
C2.5	Adoption Within 12 Months (Legally Free)	65.0%	-2.4%	53.7%	Yes
C3.1	Exit to Permanency (24 Months in Care)	25.3%	+8.2% ↑	29.1%	
C3.2	Exit to Permanency (Legally Free at Exit)	97.2%	+0.7% ↑	98.0%	
C3.3	In Care Three Years or Longer (Emancipated/Age 18)	48.0%	-1.9% ↑	37.5%	
C4.1	Placement Stability (8 Days to 12 Months in Care)	88.5%	+0.1% ↑	86.0%	Yes
C4.2	Placement Stability (12 to 24 Months in Care)	74.2%	0.0%	65.4%	Yes
C4.3	Placement Stability (At Least 24 Months in Care)	47.3%	+9.1% ↑	41.8%	Yes

In the column labeled, "one-year percentage change", an up-arrow (↑) signifies overall improved performance over the past four quarters. In most instances, a positive (+) change indicates improvement. However, in a few instances a negative change (-) indicates improvement (for example, see performance indicator C1.4, where a lower percentage for re-entry following reunification is the desired goal).

**Data based on Los Angeles County Child Welfare CDSS Static Report*

ANALYSIS

Child Welfare performance on the federal indicators in Quarter 1, 2015, shows that the county continues to exceed the national standards for the three indicators for placement stability. For C4.3, Placement Stability (At Least 24 Months in Care), DCFS showed a 9.1 percent improvement in Q1 2015. Additionally child welfare exceeded the national standard for C2.5, Adoption Within 12 Months—Legally Free).

In the column labeled, "one-year percentage change", an up-arrow (↑) signifies an overall improvement in performance over the past four quarters. In most instances, a positive (+) change indicates performance improvement. However, in a few instances a negative change (-) indicates improvement (for example, see the performance indicator C1.4, where a lower percentage for re-entry following reunification is the desired direction).

In Q1 2015, child welfare remains challenged in meeting the national standards on 11 of the 15 performance indicators. However, the county is showing some performance improvement on six of the 11 indicators (and lack of improvement on five indicators). Improvement on the six indicators ranged from very modest: +0.7 percent (C3.2, Exit to Permanency—Legally Free at Exit) to substantial: +32.2 percent (C2.4, Legally Free Within Six Months—17 Months in Care).

Further outcome analysis will take place in the 2016 County Self-Assessment.

Los Angeles County is engaged in the Title IV-E Child Well-being Project and has recently received state and Los Angeles County Board of Supervisor approval for a five year extension of the Waiver. The Title IV-E Waiver allows Los Angeles County to take full advantage of public and private support for children and families through community partnerships, quality service delivery and an accountability tracking structure. Probation Child Welfare and DCFS have identified key staff who either work on the Waiver full-time or a significant portion of their time. The departments work closely and meet regularly.

Probation Child Welfare and DCFS cross walked the current Los Angeles County System Improvement Plan and the Waiver Implementation Plan to identify the following Title IV-E Waiver goals and outcomes:

- Provide preventative services as well as increase the array of services to allow children to remain safely in their homes;
- Reduced timeline to reunification through the use of enhanced Child and Family Team meetings and Family Finding efforts. If reunification is not possible, decreased timeline to adoption and legal guardianship;
- Reduced length of stay in out-of-home care, while ensuring that individualized case planning and appropriate community alternatives and services are in place prior to youth returning home to ensure successful and permanent reunification;
- Enhanced cross-system case assessment and case planning. Additionally, improved and timely case planning to reduce reliance on out-of-home care through the provision of intensive focused and individualized services.
- Decreased recidivism for Probation youth.

Specific Title IV-E Waiver interventions include:

Child Welfare:	Core Practice Model (Also a SIP Strategy)
	Enhance Prevention and Aftercare
	Partnerships for Families (PFF)
Probation Child Welfare:	Wraparound (Also a SIP Strategy) Functional Family Therapy (Also a SIP Strategy)
	Functional Family Probation

Los Angeles County plans to utilize local advisory councils, committees and workgroups as a means of ensuring ongoing oversight and feedback related to Waiver goals. It continues to be the county intention to conduct waiver planning from the local level up and the group forums help to ensure community participation as initiative progress is evaluated and adjustments are formulated.

In support of the Title IV-E Waiver, we anticipate technological solutions in the following areas:

1. Baseline – Establish baseline date and measurement framework for utilization in tracking outcome measurements for program effectiveness;
2. Progress Management – Track the progress of the IV-E Waiver programs through meaningful data reports that will provide monitoring tools for measuring program effectiveness and outcomes;
3. Fiscal Management – Track financial IV-E Waiver allocation and costs to ensure cost effectiveness methodologies are applied to programs; and
4. Performance and Service Management – referral and tracking of services provided to families and children to identify qualitative and quantitative benefits as they relate to outcomes.

Using qualitative and quantitative data to track progress and coordinating group opportunity to evaluate performance effectiveness is in line with the county's SIP Goal area of Enhanced Organizational Performance – Implementation of a Data-driven Decision Making process.

Katie A. Settlement Agreement

Los Angeles County Department of Children and Family Services and the plaintiffs in the Katie A., et al. v. Diane Bonta, et al., entered into a Settlement Agreement in May, 2003. The Agreement was described as a "novel and innovative resolution" of the claims of the plaintiff class against the County and DCFS and it was approved by the Court and became effective in July 2003.

The agreement imposes responsibility on DCFS for assuring that children engaged in child welfare:

a. Promptly receive necessary, individual mental health services in their own home, a family setting or the most homelike setting appropriate to their needs;

b. Receive the care and services needed to prevent removal from their families or dependency or, when removal cannot be avoided, to facilitate reunification, and to meet their needs for safety, permanency, and stability;

c. Can be afforded stability in their placement whenever possible, since multiple placement are harmful to children and are disruptive of family contact, mental health treatment and the provision of other services; and

d. Receive care and services consistent with good child welfare and mental health practice and the requirements of federal and state law.

To achieve these four objectives, DCFS committed to implement a series of strategies and steps. They include the following:

Multidisciplinary Assessment Teams (MAT) – tracking included in System Improvement Plan strategies related to Measure C3.3 In Care 3 years or Longer (Emancipated/Age 18).

Medical Hubs – Newly detained children are referred to a Medical Hub for initial examination.

Mental Health Screening – tracking included in System Improvement Plan strategies related to Measure C3.3 In Care 3 years or Longer (Emancipated/Age 18).

Coaching - Tracking included and reported on in System Improvement Plan Strategy under Enhanced Organizational Performance.

Wraparound – Evaluate strengths and challenges; Expansion of Wraparound services and access is a strategy included in System Improvement plan related to measure C1.4; re-entry Following Reunification.

Young Children in Group Homes – reduce the number of children under the age of 13 in group home setting.

Department efforts related to the Katie A. settlement, which are aligned with the SIP, have been documented in the strategy updates as applicable.