

California – Child and Family Services Review Signature Sheet

For submittal of: CSA SIP Progress Report

County	Mendocino
SIP Period Dates	5/14/2011 – 4/14/2016
Outcome Data Period	4/14/2014 – 4/14/2015

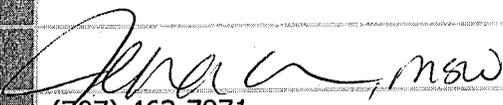
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California - Child and Family Services Review

Annual SIP Progress Report

APRIL 2015



CDSS

CALIFORNIA
DEPARTMENT OF
SOCIAL SERVICES

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Introduction

The Child Welfare System Improvement and Accountability Act (AB 636) of 2001 provides a framework for measuring and monitoring each county's child welfare services performance in ensuring the safety, permanence and well-being of children. The system established by AB 636 builds upon standards established by the federal government and adds outcome and accountability measures developed by California-- the California Child and Family Services Review (C-CFSR).

One component of the C-CFSR is the County System Improvement Plan (SIP). The County SIP outlines how the County will improve its system of care for children and youth and provides a method for reporting on progress toward meeting improvement goals using the C-CFSR outcomes and indicators.

This is Mendocino County's final SIP Progress Report in its five year cycle. The following are the focus outcomes for our Child Welfare Services (CWS) Division for this SIP Progress Report: 1) Reunification Within 12 Months, 2) In Care 3 Years or Longer, 3) Placement Stability, 4) Improve Use of Our SDM Assessment Tools, and 5) Improved Collaboration between CWS and Probation. The focus outcomes for Juvenile Probation are: 1) Exit Outcomes for Youth Aging Out, and 2) Improve Successful Transition into Adulthood for Youth in Foster Care. For each of the focus outcomes, the CWS and Probation Department have established specific goals and strategies for achieving those goals. This SIP progress report describes how well the strategies have been implemented and the status of our progress toward the established goals.

SIP Progress Narrative

2011 SYSTEM IMPROVEMENT PLAN

1. Local Planning Bodies and SIP Team

In Mendocino County, the primary planning body that was used in development of the Self Assessment and System Improvement Plan (SIP) was the Policy Council on Children and Youth/Child Abuse Prevention Commission (PCCY/CAPC). The PCCY/CAPC has been in existence as a community and agency partnership for children since 1992. Key public and private agencies providing services to children are represented on this group, as well as community members and parents. The

PCCY/CAPC serves as the Mendocino County Child Abuse Prevention Coordinating Council and is the advisory body for planning and allocating funds for a variety of child abuse prevention efforts. The PCCY/CAPC publishes a Status Report on Children and Youth and has developed an interagency plan for children's services. Several other councils and cabinets are linked to PCCY/CAPC by having representatives seated on PCCY. These include the Children's System of Care (CSOC), First 5 Commission, the Alliance for Rural Community Health (ARCH), the Workforce Investment Board (WIB) Youth Council and the Child Care Planning Council:

- The **FIRST 5 Commission** is a partnership of representatives from County agencies and the community. The Commission has developed a multi-year plan with priorities for Parent Education and Access to Health Care and has funded programs throughout Mendocino County with tobacco tax funds. Regional grants have ensured that services are provided in all geographic areas. FIRST 5 has provided funding to most of the Family Resource Centers. FIRST 5 also brings together all the grantees in each area to share information about their projects and to coordinate services.
- **CSOC** is an established collaboration that is directed toward preventing high-level residential placements for youth or reducing the levels of placement, and bringing youth back into the county. It serves children and youth countywide and involves Mendocino County Health and Human Services Agency, Redwood Quality Management Company, Probation, and the County Office of Education.
- All of the Community Health Clinics countywide work together to serve the people of Mendocino County. The six organizations have clinic sites in Ukiah, Willits, Long Valley, Potter Valley, Anderson Valley, Fort Bragg, Gualala and Point Arena. All six are founders and members of the **ARCH** a non-profit providing clinics with advocacy, training, technical and other support services.
- The **WIB Youth Council** has oversight responsibility for Workforce Investment Act (WIA) youth employment funding. It also coordinates a Youth Summit every other year and provides mini grants for youth-driven projects, with funding from Social Services. The Policy Council on Children and Youth and the Youth Council have linked together to channel youth development planning and coordination through the Youth Council.
- The **Child Care Planning Council** is focused on improving the availability, accessibility, and quality of childcare throughout Mendocino County. Community members, parents, and allied agencies are represented on this group.

Children's Services and Probation Representatives

- Bryan Lowery, HHSA Assistant Director
- Jena Conner, HHSA Deputy Director
- Jim Mockel, HHSA Senior Program Manager
- Deborah Lovett, HHSA Senior Program Manager
- Sue Norcross, HHSA Senior Program Manager
- Thelma Giwoff, HHSA Senior Program Manager
- Albert Ganter, Chief Probation Officer
- Kevin Kelley, Juvenile Probation Division Manager
- All Child Welfare Services supervisors
- Probation Placement Officers

2. Data Sources and Collection

For this SIP PROGRESS UPDATE REPORT, we used the AB 636 data summary reports produced by the Center for Social Services Research at UC Berkeley. We also used Safe Measures and/or Business Objects reports.

CURRENT PERFORMANCE TOWARDS SIP IMPROVEMENT GOALS

CHILD WELFARE SERVICES

Our current SIP is in keeping with the themes that emerged from our latest County Self-Assessment and our Peer Quality Case Review (PQCR) of May 2011. Each unit in the division was met with individually for ideas and input which was then merged with input from the County Self-Assessment and PQCR as well as feedback via the PCCY/CAPC.

Challenges:

Staffing Issues

Mendocino County continues to have significant staffing shortages within our division. During the last year we experienced ongoing turnover in our social worker staff. We continue to find it difficult to recruit a large enough pool of qualified candidates willing to go through our lengthy Merit Systems and County hiring process and take a job with us at less competitive pay and/or benefits offered by neighboring counties. Factor in the cost of living, shortage of housing, and a complexity and stress of child welfare work, we have numerous challenges finding and keeping staff. As of March 12, 2015, we have 30 social workers, 1 extra help social worker and 13 social worker vacancies. 9 of our social workers have been in a social worker position a year or less. We have hired a



second extra help social worker to fill in and have hired four Social Worker I's who are set to start during the month of March 2015 and we have been continuously working to fill all vacancies. We have hired a number of entry level Social Worker I's who require extensive mentoring, training, and time to become familiar with the job requirements of a child welfare social worker. To attract and retain master's level social workers, we have reinstated offering clinical supervision for social workers who are working towards their clinical social work license. We also try to hire within, by promoting our social worker assistants into Social Worker I positions when we can. In October 2014, our Assistant Health and Human Services Agency Director, Child Welfare Services Deputy Director, Staff Resources Deputy Director and two of our Senior Program Managers attended the Northern and Mountain Valley County Welfare Directors Association (CWDA) Annual Joint Meeting where the following workforce topics were discussed:

- Organizational culture
- Recruitment and retention
- Strategies for hiring and training
- Mobilizing to create a learning organization

Promising Practices:

Engaging Parents

We are providing intensive services to our parents at the beginning of our involvement with the family. We believe that engaging families in these services at the start we will:

- Reduce the number children needing to be detained and thereby reduce the number of cases needing court involvement.
- Give additional support to families when needed most.
- Provide parents with in home services to assist parents in behavior changes designed to enhance child safety.
- Return children to their parents sooner.
- Provide services for children who accompany their parents to residential treatment and for children with parents in intensive outpatient programs.
- Lessen the recurrence of maltreatment by creating a healthier family environment.
- Utilize our social worker assistants to provide and help families obtain supportive services.

These practices include:

- Formal Supervision
- RED Team
- Safety Organized Practices

- Child and Family Team Meetings
- Family Dependency Drug Court

Formal Supervision

We have implemented Formal Supervision for those families at risk of court involvement. Formal supervision is a voluntary service in which the family gets the intensive support they need to ensure the safety and protection of the child in lieu of a dependency court action being initiated. However, should the family not address the harm or danger to the child, dependency court proceedings are initiated. We work closely with these families including increased contact between the Agency and the family to ensure success.

RED Team (Review, Evaluate and Direct)

The RED team is a group of social workers, supervisors and collaborative staff who are charged with making sound decisions regarding how our Child Welfare Services responds to referrals of maltreatment. All non-immediate referrals coming into the Agency through the emergency response hotline are reviewed four days a week by the team. A Safety Organized Practice format of mapping is done on each referral, with questions about harm, risk, safety, complicating factors, strengths and next steps.

The team process is a shift from a single social worker or supervisor making a decision on the action that will be taken on a referral, to representatives from the whole agency. The RED team provides both structure and process in the review of reports of alleged child maltreatment, evaluation of the available information, and direction regarding the Agency's response.

Safety Organized Practices (SOP)

Our Integrated Service Unit (ISU) supports the division's goal of conducting SOP Family Mapping meetings on all appropriate court cases between Jurisdiction and Disposition Hearings. The Emergency Response Court social workers send a referral to the ISU for a mapping meeting. The ISU sets up a day, time and place to hold the meeting and provides a facilitator and scribe. These meetings establish Harm and Danger Statements and Safety Goals for the case plan. Family mappings are also occurring on some cases pre-dismissal. We intend to review cases prior to each six month family reunification and family maintenance review as well. We have worked with 122 families in 2014 in the SOP mapping process.

Most of our social workers are now familiar with Harm and Danger Statements and Safety Goals. As part of the assessment process, the "Three Houses" tool is used when

meeting with children. The "Future House" is used as a frame work in Family Empowerment Groups with parents as they move through the case plan process.

Additionally, we are using the SOP mapping format to structure our internal case conferences. We are establishing Harm Statements, Danger Statements, Safety Goals, and Next Steps in case conference.

Katie A. Class Action Lawsuit (Child and Family Team Meetings)

The Katie A. Class Action lawsuit requires that Mental Health and Child Welfare Services work together in collaboration to provide specific mental health services for children who meet the Katie A. subclass eligibility requirements. We are using our Wraparound teams which are comprised of Mental Health Clinicians, Mental Health Rehabilitation Specialists and Child Welfare Services Parent Partners to provide the specific Katie A. subclass services of Intensive Care Coordination and Intensive Home Based Services to eligible children and youth. Our community mental health partners are also providing Katie A. subclass services to eligible children and youth.

All children and youth with open Child Welfare Services cases are screened within 30 days of the case opening to determine if a mental health assessment is needed and annually thereafter. If a child or youth is a potential subclass member, our community mental health providers complete a full mental health assessment within 14 days of receiving the referral to determine medical necessity.

The focus of safely maintaining children in their homes or the least restrictive setting, reduces the need for foster care or higher level group home care. The earlier intervention of intensive Wraparound and mental health services beginning from the start of the child welfare case as outlined in the Katie A. Core Practice Model, offers the Agency a chance to establish genuine engagement with the family and improve the probability of change to take place within that family system. Quicker access to services along with a higher level of collaboration between all service providers and the child and family through child and family team meetings allows the family more engagement and helps keep families together when safety can be assured. We have been successful in implementing a more efficient system to ensure these goals are met.

Family Dependency Drug Court

We are in our eighth year of our Family Dependency Drug Court. Because of the extensive use of methamphetamine, alcohol, opiate and prescription drugs in our county and the effect it has on the entire family, we currently provide intensive substance abuse services including residential treatment with Juvenile Court oversight. Currently there are three Substance Use Disorder Treatment counselors at two of our Child

Welfare Services offices who work directly with our clients. We have seen some positive outcomes in reunification with these cases. This program is also a collaborative with other partners including First Five Mendocino, the Ford Street Project, and dependency attorneys.

State Family Preservation (SFP)

The current State Family Preservation Program Summary is attached as an addendum to this SIP update. The SFP plan fits with our SIP goals, specifically issue #1- reunification within 12 months (exit cohort).

SIP Goals

Status of Strategies

Measure C1.1, Reunification Within 12 Months (Exit Cohort)

This is an area we have continued to struggle with. We experienced a 2.9% decline in our Reunification within 12 Months rate from 2013-2014. Our most recent reporting period indicates we are at 53.6%, whereas the national goal is 75.2%.

C1.1 Reunification Within 12 Months (Exit Cohort)					
Mendocino	OCT 2009- SEP 2010	OCT 2010- SEP 2011	OCT 2011- SEP 2012	OCT 2012- SEP 2013	OCT 2013- SEP 2014
	%	%	%	%	%
Reunified in less than 12 months	70.5	64.6	70.7	56.5	53.6
Reunified in 12 months or more	29.5	35.4	29.3	43.5	46.4
Total	100	100	100	100	100

Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Sandoval, A., Yee, H., Mason, F., Benton, C., Pixton, E., Lou, C., & Peng, C. (2015).

Child Welfare Services Reports for California

Retrieved 2/25/2015, from University of California at Berkeley California Child Welfare Indicators Project website.

URL: http://cssr.berkeley.edu/ucb_childwelfare

We continue to implement family engagement activities during referral investigation, voluntary or Formal Supervision cases and dependency court cases to help ensure successful reunification within 12 months. These activities include:

- Complete SOP mapping process
- Complete Family Safety Networks process
- Implement Formal Supervision for appropriate cases
- Increase number of monthly contacts for Formal Supervision cases
- Utilize our social worker assistants to provide and help families obtain supportive services

Our three Substance Use Disorder Treatment (SUDT) counselors located in our Willits and Ukiah offices continue to work with our clients with substance abuse issues. Those clients are able to receive immediate assessments and rapid entry into treatment. With the expedited assessments and entry into services, this should help improve our reunification time, as research (Attachment 2, page 1, Action Step D) shows substance abuse is one of the primary reasons family reunification exceeds 12 months.

SDM

We recognize the need to improve our use of the Structured Decision Making tools throughout the life of cases that are in family reunification and family maintenance. By working on our compliance with the use of the SDM tool, we hope this will also help address our reunification time. Staff has affected our goal of reunifying children within 12 months. On Attachment 2, page 1, Action Step A was to evaluate the SDM when children returned home from FR. Our staff shortages allowed only slight improvement in this action step, but it was not consistently applied. SDM training is being provided again to social worker staff by U.C. Davis (Attachment 2, page 1, Action Step B) and the Leadership Team (Deputy Director, Sr. Program Managers, Program Administrators and Supervisors) continues to make consistent use of the SDM tool a priority by individualizing training during conference time and reviewing SDM information weekly to ensure timely completion (Attachment 2, page 1, Action Step C.)

We have begun sampling cases to determine what trends cause reunification to surpass 12 months. Using the Safe Measures extraction of cases during the 2013 calendar year that were coded "reunification," our Quality Assurance Program Administrator reviewed 10 of the 41 cases that had the most time in placement after the initial 12 months. The predominant factors causing reunification beyond 12 months were due to mental health issues, substance abuse, housing or a combination of two or more of those factors. This will be taken into consideration for our next SIP revision.

Measure C3.3 In Care 3 Years or Longer

This is another area we have continued to struggle with but have made an improvement. We saw a 13.6% decrease in our rate of youth in care 3 years or longer between fiscal years 2012-2013 and 2013-2014. Our most recent reporting period indicates we are at 43.5%, whereas the national goal is 37.5%. We attribute this decrease to expanded services provided under AB12 to non-minor dependent foster youth ages 18 – 21. With the extended foster care benefits afforded to youth who voluntarily stay in the system to assist them in more successfully transitioning to adulthood, we anticipate we will continue to have more youth staying in care longer. (Attachment 2, page 3, Action Step A).

C3.3 In Care Three Years or Longer					
Mendocino	OCT 2009- SEP 2010	OCT 2010- SEP 2011	OCT 2011- SEP 2012	OCT 2012- SEP 2013	OCT 2013- SEP 2014
	%	%	%	%	%
In care less than 3 years	35.7	55.6	50.0	42.9	56.5
In care 3 years or longer	64.3	44.4	50.0	57.1	43.5
Total	100	100	100	100	100

Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Sandoval, A., Yee, H., Mason, F., Benton, C., Pixton, E., Lou, C., & Peng, C. (2015).

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URL: http://cssr.berkeley.edu/ucb_childwelfare

The following have been recommended as useful in minimizing the negative impact of long-term foster care:

- Concurrent permanency planning
- Family finding
- Involvement of older youths in permanency planning

Our strategies were:

- Continue and expand our recently revitalized Family Finding efforts through the life of a case as needed (Attachment 2, page 2, Strategy 1.). A program specialist is currently assigned to locate all possible caretakers

for a child during the first 30 days of a dependency court case. During calendar year 2014, 105 cases were researched to find family and possible relative caretakers. Action Step A of this goal was to identify staff to do Family Finding during the first 30 days. In February 2014 additional staff was assigned to assist with Family Findings in an effort to increase locating relatives for placements and connections. We have designated two staff members to process Family Finding. An update for Action Step B is that we are working on performing Family Finding at each 6 month status review hearing, and creating monthly reports to determine the rate of placements with relatives or nonrelated extended family members (Action Step C.).

- Work with youth to ensure a transition plan is in place and to review the transition plan at least every six months (Attachment 2, page 3, Strategy 2.). CWS/CMS has been updated to capture ILP services. With the passage of AB12, Action Steps A and B are being re-evaluated as the number of teens in placement has increased. We have continued to enter ILP services to satisfy NYTD requirements. This information is reviewed and updated on a quarterly basis. Our ILP liaison works with our transition youth to help them develop future plans and make wise life decisions.
- Work with Probation to incorporate mentoring with CWS youth (Attachment 2, page 4, Strategy 3.) Mentoring programs continue to be developed (Action Step A) and evaluated for appropriateness. This is happening through AB12 and our youth that we both serve. Action Step B, including mentoring programs at FRCs in our RFP for CBCAP funds aimed at young parents and homeless or potentially homeless youth, was completed.
- Strategy 4 (Attachment 2, page 5), was to continue our current model to strengthen family supports and systems (Action Step A). We revised it to implement SOP instead of Personal Village, as an ongoing goal.
- Although not previously identified as a strategy, but important to note is that Mendocino County Child Welfare Services is working with one of our in-county Foster Family Agencies to submit a proposal to CDSS in March 2015 to become a Residentially Based Services (RBS) county. We expect this will help keep our children and youth in-county, will help reduce the time they spend in group home care and help get children and youth to permanency faster.

Measure C4.3, Placement Stability (at least 24 months in care)

Placement changes for children in the Child Welfare System are inevitable at times. There are circumstances which make it more beneficial and needed. The review highlights how important it is to minimize the number of changes children experience.

The last column shows the percentage change that was in the time period between 10/1/13 and 9/30/14. We have decreased by 10.2% the number of children experiencing more than two placements and decreased by 2.2% the number of children experiencing less than two placements in this time period.

Mendocino 10/1/2013 to 9/30/2014	C4.3 Placement Stability (At least 24 months in care)						
	Age Group						
	Under 1	1-2	3-5	6-10	11-15	16-17	All
	%	%	%	%	%	%	%
<=2 placements		100	0.0	12.5	10.0	11.1	11.6 13.8 (Last) ↓2.2%
>2 placements (prior)		0.0	75.0	43.8	53.3	38.9	47.8 35.4 (Last) ↑12.4%
>2 placements (recent)			25.0	43.8	36.7	50.0	40.6 50.8 (Last) ↓10.2%
Total		100.0	100.0	100.0	100.0	100.0	100.0

Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Sandoval, A., Yee, H., Mason, F., Benton, C., Pixton, E., Lou, C., & Peng, C. (2015). *Child Welfare Services Reports for California*. Retrieved 3/2/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL:http://cssr.berkeley.edu/ucb_childwelfare

Our strategies for improvement are as follows:

- Reduce the number of placements children experience while in foster care. According to statistics gathered by the Berkeley Center for Social Services Research, our statistics show that we have reduced our greater than two placements by 10.2%. However, we still show a marked difference between our 88.4% placement rate with three or more settings than the national goal of 41.8%. A major contributing factor is our practice to place a child in our emergency shelters until an appropriate foster or relative care home can be located.
- Attachment 2, page 6, Strategy 1 - Continue Family Finding during the first 30 days of cases and on into the life of the case. As mentioned previously,

two staff are currently assigned in locating all possible relative caretakers for a child during the first 30 days of detention. Staff were assigned to assist with Family Findings in an effort to increase locating relatives for placements and connections (Action Step A – completed.). Family Finding is being included in concurrent planning at every six-month review (Action Step B) and we create monthly reports to determine the rate of placements with relatives or NREFMS (Action Step C.).

- Increase social worker visits at foster placements for highest-risk kids (Attachment 2, page 7, Strategy 2.). Despite our short staffing, we have done a good job ensuring children in open child welfare cases are seen in person at least once a month by a social worker to ensure child safety and promote placement stability. Our average compliance rate during calendar year 2014 was 90.3% as compared to the national goal of 95%. In addition, the majority of the contacts are done in the child's residence. Our average compliance rate for calendar year 2014 was 65.8% as compared to the national goal of 51%. All three Action Steps are ongoing to continue this trend.
- Explore with FFAs the possibility of having some of their foster parents having open communication with/mentoring birth parents. (Attachment 2, page 8, Strategy 3.). Currently we have one foster family agency who is actively participating and encourages their foster parents to stay in close contact with biological parents in regards to medical, educational and behavioral needs of children in placements. We are collaborating (Action Step A) with the other agencies in our county to have them implement. Action Step B is an ongoing process.

Improve the use of our Structured Decision Making (SDM) assessment tools, specifically at case closure to assure the safety of families into the future.

Strategies we plan to use are:

- Retrain social workers on SDM Case Closure Risk and Safety assessment (Attachment 2, page 9, Strategy 1.) Although social workers were re-trained in January 2012 and May 2013 by U.C. Davis on SDM in Ukiah (Action Step A), we have not had adequate staffing to ensure full compliance with this while ensuring other mandates are met such as timely court reports, contacts with children, etc. Certain staff attended the Signs of Safety training provided by First 5 (Action Step B.). Staff training is an ongoing process. We will provide additional intensive SDM training to social worker staff by U.C. Davis during the months of April, May and June 2015.
- Management will monitor monthly SDM compliance reports and read cases for appropriateness of assessments (Attachment 2, page 10, Strategy 1.). Our supervisors review SDM reports with their social worker staff on a monthly basis (Action Step A.). However, this is an area in which Management needs to focus

more specifically to ensure improved compliance. We use Safe Measures to monitor improvement.

Improving exchange of information between CWS and Probation

An issue that was raised repeatedly through our PQCR and CSA processes was the need for CWS and Probation to work together better for the best continuum of care for children who pass from one agency to the other. Strategies include:

- Evaluate the current usage of the 241 Referral Form (Attachment 2, page 11, Action Step A)
This has been completed.
- Create a checklist for transferring case
This has been completed.
- Link Probation with CWS/CMS (Attachment 2, page 12, Strategy 2)
This has been completed.
- Train Probation workers to use CWS/CMS (Attachment 2, page 12, Action Step B)
This has been completed.

Probation officers have been trained to enter contacts, Independent Living Program information, etc. The Probation clerk does the majority of the work when it comes to entering CWS/CMS information.

PROBATION SERVICES

Our current SIP is also in keeping with the themes that emerged from our latest Self Assessment and our PQCR of May 2011.

Challenges:

Staffing

During this past year, probation continued to focus on the implementation of AB 109. AB 109 is the legislative mandate that returns adult offenders from the State Prisons to our community for supervision by local probation instead of parole. Initially there was a great impact felt in the juvenile division with movement of senior trained officers to the new positions in adult probation created by AB 109 mandates. Over the past year we have hired several new staff which have now completed basic probation mandated training. We continue to struggle with staff turnover from promotions and/or senior trained staff moving to other counties seeking hirer pay incentives. Currently, we have

5 new probation staff that have less than 2 years' experience in the juvenile division. We have 1 open position for DPO I/II and will be interviewing to fill that vacant position.

In our last SIP update we announced that we had been able to fill the support staff position to assist our placement unit with data entry into CWS/CMS and family finding. Unfortunately that staff person moved from a different clerical position and we had to go through the promotional process to replace her. We had fully trained this support staff who was working out well in our placement division but she was never able to take on the duties to assist with family finding options as she continued to be required to assist in covering the duties of the vacant position she left. Unfortunately this trained support staff has now given her notice and has taken a position at Child Welfare Services so we are training yet another support staff who is new to probation and placement. In August, the Juvenile Division Manager was moved to the adult unit and our placement supervisor was promoted to the Juvenile Division Manager position. The placement supervisor position has been left vacant and another juvenile supervisor was reassigned to the adult division (half-time). We now are down to 1.5 supervisors in the juvenile division. These changes have occurred due to less juvenile probationers overall, Title IV-E funding issues and to meet the needs of the growing population of the adult probation division and meeting the needs of AB109.

Title IV-E

In October, all the probation departments in the state received notice that our Title IV-E funding claims for juveniles was at risk due to the outcome of a federal audit that was conducted on two random counties. We are proactively working with CDSS, the federal government and the Chief Probation Officers of California to develop a Corrective Action Plan regarding Title IV-E claiming process and time studies. We have also brought in JBI. Title IV-E claims are accurate but down significantly leading to further movement to the adult division by DPO's. Currently it looks like we will lose a substantial amount of funding from the previously allowed billing for preventative case management services due to changes being required by CDSS as to what will be the point of entry for all probation youth to define eligibility of "at eminent risk". This will assure compliance with federal mandates however it will also have impact on our department budget and most likely reduce the number of juvenile probation officers in our department even further. That is yet to be determined with our Chief Probation Office, CEO and Board of Supervisors.

Loss of 26.5 Mental Health/Education AFDC-FC Placements

As was mentioned in the Child Welfare Services narrative above, Probation has also been impacted by the 2011 realignment of foster care cost and the loss of 26.5 mental

health/education AFCD-FC placements. Probation has experienced an increase in the number of youth booked into juvenile hall who have severe mental health and developmental disabilities. Once incarcerated, they are not eligible for Medi-Cal and therefore do not receive treatment from their previous providers nor the Regional Center who is the "last provider of resources" however, they are not able to attain competency to stand trial. We continue to use New Horizons however we are still having youth who continue to struggle with their issues. These youth are a real change to our county in order to meet their high level needs for services. Both Child Welfare and Probation are experiencing pressure to fill the void.

2011 Realignment of Foster Care Cost impact on Probation

Due to several events including the 2011 realignment and Katie A. Class Action Lawsuit, Child Welfare has made some changes that have impacted Probation. The largest impact has been limiting the utilization of Wraparound teams for probationers who are identified as at risk of removal. In the past we have had the luxury of utilizing as many teams as were available. However, we are now limited to a maximum of three slots at any time due to staffing capacity in the Child Welfare Services' Wraparound program and the requirements to serve the children and youth in the child welfare system who meet the Katie A. subclass. However, we have been able to use more than three slots when Child Welfare usage is down. This was a loss of preventative services for our highest at risk probation families. Additionally, in the past we were able to access services of the parent partners and parenting classes offered for all families under wraparound teams that were conveniently occurring at our probation school site (New Beginnings). These Triple P parenting classes are no longer available to Probation at the campus. However, Triple P parenting classes are offered to the general public at various locations throughout the county. We continue to have the New Beginnings school which is a collaboration run with the Mendocino County Office of Education, Substance Use Disorder Treatment (SUDT) and the Mendocino County Youth Project (a local private provider) for 602 WIC wards on probation who are identified as at high risk of substance abuse problems and mental health issues while in their school setting. Their families are also included in group counseling if needed. However some of the funds for this program are now at risk and this program will be impacted in June. We suffered funding reductions to New Beginnings last year, however kept staff for SUDT and mental health. We have lost funds for after school activities which included yoga. Our goal is to add photography classes and mentoring. It is yet unknown if we will be able to sustain the services offered at New Beginnings in the future.

Probation is in a time of transition due to staffing and funding changes. We continue to use our risk/needs assessment tool (PACT) and case management system through Assessment.com and the Forward Thinking Journals on all probationers who are made

wards of the court who are identified as medium and high risk offenders. Our goal is to maintain the current level of intervention and supervision. Child Welfare continues to offer the use of any programs offered through their family centers including parenting classes for probation youth and families. We are using forward thinking now in groups at New Beginnings and we also have the opportunity to utilize the Child Welfare Services Integrated Service Unit to conduct Safety Organized Practices (SOP) mappings for probation families who are in the Wraparound program.

Improving exchange of information between CWS and Probation

This outcome improvement plan and our strategies have been covered in the Child Welfare narrative beginning on page 14.

Measure 8A, Exit Outcomes for Youth Aging Out

Probation continues to work closely with our Juvenile Justice Commission, the Young Parents Program, Youth Project and the Arbor on Main to develop avenues for life long connections to increase the likelihood of success in transitioning our at risk youth to adulthood. We have focuses on transitional skill development and mentoring programs offered such as teen peer court and we are developing anger management, gang education and social skill programs. These classes will be conducted by officers and will be done both at the schools and probation dept. We continue to use the independent living skills programs at the Arbor on Main and through transitional housing with the Youth Project. We had a new opportunity through a Youth Build grant acquired by Pinoleville Tribe for all at risk youth from 16 to 21 who are in need of completion of high school or obtaining their GED, which includes education and skill training in construction and leadership skills. This includes support to transition to employment or continuing education into junior college or vocational school opportunities. The Youthbuild grant finished last year and is no longer available, and we have lost the parent partner program.

Probation also continues to work to improve family engagement and assuring timely accurate data collections in N.Y.T.D and to improve family finding efforts utilizing the tools we have put in place.

2011 SIP FOCUS AREAS

CHILD WELFARE SERVICES

- **Reunification Within 12 Months (C 1.1)**
- **In Care 3 Years or Longer (Emancipated/Age 18 (C3.3))**

- **Placement Stability (at least 24 months in care (C4.3))**
- **Improve the use of our Structured Decision Making (SDM) Assessment Tools**
- **Improved collaboration between CWS and Probation**

PROBATION

- **8A Exit Outcomes for Youth Aging Out**
- **Improve successful transition into adulthood for youth in foster care**

CWS		Applicable Outcome Measure(s) and/or Systemic Factor(s): C1.1 Reunification Within 12 Months (Exit Cohort)	
Strategy 1:	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		
Action Steps:		Timeframe:	Person Responsible:
A. Evaluate current practice of SDM at return of children home from FR.		May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers, Prog. Administrators and Supervisors
B. Increase use of SDM for FM assessments		May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers, Prog. Administrators and Supervisors
C. Improve quality of FM assessments		May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers, Prog. Administrators and Supervisors
D. Evaluate a sampling of cases to determine overarching issues as to why children are unable to reunify within 12 months.		January 1, 2014 – November 13, 2015 Ongoing	Quality Assurance Program Administrator

CWS

Strategy 1: Continue Family Finding efforts during the first 30 days of cases and on into the life of the cases	Applicable Outcome Measure(s) and/or Systemic Factor(s): C3.3 In Care Three Years or Longer	
	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Identify staff to do Family Finding during the first 30 days of cases	May 13, 2011 – November 13, 2015 Completed	Emergency Response/Court Supervisors, Court Liaison, Integrated Services Unit Supervisor
B. Fold Family Finding in with Concurrent Planning at every six-month review hearing	May 13, 2011 – November 13, 2015 Ongoing	Continuing Supervisors
C. Review effectiveness of Family Finding and statistics	May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers, Prog. Administrators and Supervisors

CWS

Strategy 2: Transition Plan for each youth, to be reviewed every six months.	<input type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): C3.3 In Care Three Years or Longer
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Evaluate current practice of transition planning and inclusion in Case Conferencing template	May 13, 2011 – November 13, 2015 Ongoing (Revised due to AB12 implementation)	Social Worker Supervisors
B. Increase youth participation in transition planning. Potential for Youth Resource Center to support buy-in for participation (unfunded)	May 13, 2011 – November 13, 2015 Ongoing	Social Workers

CWS

Strategy 3: Collaborate with County Probation to incorporate mentoring with CWS youth.	Applicable Outcome Measure(s) and/or Systemic Factor(s): C3.3 In Care Three Years or Longer		
	X	CAPIT	
	<input type="checkbox"/>	CBCAP	
	<input type="checkbox"/>	PSSF	
	<input type="checkbox"/>	N/A	
Action Steps:	Timeframe:	Person Responsible:	
A. Evaluate current mentoring program put together by Juvenile Justice Commission for appropriateness of including CWS youth	May 13, 2011 – November 13, 2015 Ongoing	ILSP Coordinator	
B. If opportunities exist, consider including mentoring programs at FRCs in our RFP for CBCAP funds aimed at young parents and homeless or potentially homeless youth	May 13, 2011 – November 13, 2015 Completed	Contracts Administrator	

CWS

Strategy 4: Continue SOP family mapping for strengthening family supports and systems	X CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): C3.3 In Care Three Years or Longer
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Continue our current model with as many families as appropriate and possible	May 13, 2011 – November 13, 2015 Revised	Specialists, Administrators, Social Workers

CWS

Strategy 1: Continue Family Finding efforts during the first 30 days of cases and on into the life of the cases	Applicable Outcome Measure(s) and/or Systemic Factor(s): C4.3 Placement Stability (at least 24 months in care)	
	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Identify staff to do Family Finding During the first 30 days of cases	May 13, 2011 – June 30, 2011 Completed	Emergency Response/Court Supervisors, Court Liaison
B. Fold Family Finding in with Concurrent Planning at every six-month review hearing	May 13, 2011 – June 30, 2012 Ongoing	Continuing Supervisors
C. Review effectiveness of Family Finding and statistics	May 13, 2011 – December 31, 2012 Ongoing	Deputy Director, Sr. Program Managers, Prog. Administrators and Supervisors

CWS

Strategy 2: Increase Social Worker visits at foster placements for highest risk kids	CAPIT		Applicable Outcome Measure(s) and/or Systemic Factor(s): C4.3 Placement Stability (at least 24 months in care)
	<input type="checkbox"/>	CBCAP	
	<input type="checkbox"/>	PSSF	
	<input checked="" type="checkbox"/>	N/A	
	Timeframe:		
A. Define highest risk kids	May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers, Placement Team	
B. Establish frequency of visit and coordinate communication for highest risk kids	May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers, Placement Team	
C. Review efficacy of increased visits using CMS quarterly reports	May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers, Placement Team	

CWS

Strategy 3: Explore with FFAs having some of their foster parents openly communicate with/mentor birth parents	Applicable Outcome Measure(s) and/or Systemic Factor(s): C4.3 Placement Stability (at least 24 months in care)	
	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Conduct conversations with FFAs to see if this is a feasible idea	May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers
B. If this concept is deemed feasible, select one or two foster parent/family pairs as pilot families	May 13, 2011 – November 13, 2015 Ongoing	Social Worker Supervisors, FFAs

CWS

Strategy 1: Retrain continuing social workers on SDM Case Closure Risk and Safety Assessments	<input type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): SDM Assessment Compliance	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
Action Steps:	Timeframe:		Person Responsible:
A. Conduct In-House or UC Davis training on Case Closure Assessments	May 13, 2011 – November 13, 2015 Ongoing		Training Coordinator
B. Have Social Work staff participate in Signs of Safety training being brought to our county by First 5	May 13, 2011 – November 13, 2015 Completed		Training Coordinator

CWS

Strategy 2: Monitor performance on SDM Case Closure Assessments	<input type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): SDM Assessment Compliance
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Monitor monthly SDM Compliance reports	May 13, 2011 – November 13, 2015 Ongoing	Deputy Director, Sr. Program Managers

CWS/Probation

<p>Strategy 1: Convene workgroup to address these issues</p>	<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF X N/A</p>	<p>Applicable Outcome Measure(s) and/or Systemic Factor(s): Reported in our POCR and CSA that valuable information (i.e. psychological evaluations, treatment need assessments, discharge summaries) are not being passed between Probation and Child Welfare Services. Improved collaboration should make CWS and Probation better partners and improve the continuity of care.</p>
<p>Action Steps:</p>	<p>Timeframe:</p>	<p>Person Responsible:</p>
<p>A. Redesign the 241 referral form and develop a checklist for documents to be transferred between agencies</p>	<p>May 13, 2011 – November 13, 2015 Ongoing</p>	<p>Court Supervisors, Liaisons of both agencies</p>
<p>B. Determine if a court order is required to share documents such as psychological, mental health, AODP assessments and placement discharge summaries between agencies</p>	<p>May 13, 2011 – November 13, 2015 Ongoing</p>	<p>Departments heads, Court Supervisors, Liaisons of both agencies</p>
<p>C. Determine if targeted documents are located in CWS/CMS or only in hard copies in department files. Identify who will pull files and copy identified documents.</p>	<p>May 13, 2011 – November 13, 2015 Ongoing</p>	<p>Court Supervisors, Liaisons of both agencies</p>

CWS/Probation

Strategy 2: Link Probation with CWS/CMS	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input checked="" type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Applicable Outcome Measure(s) and/or Systemic Factor(s): Reported in our PQCR and CSA that valuable information (i.e. psychological evaluations, treatment need assessments, discharge summaries) are not being passed between Probation and Child Welfare Services. Improved collaboration should make CWS and Probation better partners and improve the continuity of care.
Action Steps: A. Train Probation on Safe Measures for access to CWS cases B. Train Probation workers to use CWS/CMS	Timeframe: May 13, 2011 – November 13, 2015 Ongoing May 13, 2011 – November 13, 2015 Completed	Person Responsible: Probation management, CWS/CMS Administrator US Davis Training Academy, CWS/CMS Administrator

CWS/Probation

Strategy 3: Re-evaluate the possibility of Dual Jurisdiction and the current WIC 241.1 process	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		Applicable Outcome Measure(s) and/or Systemic Factor(s): Reported in our PQCR and CSA that valuable information (i.e. psychological evaluations, treatment need assessments, discharge summaries) are not being passed between Probation and Child Welfare Services. Improved collaboration should make CWS and Probation better partners and improve the continuity of care.	Person Responsible:
	Timeframe:			
	Action Steps:			
A. Convene task force to review AB12 incremental impacts upon both Probation and CWS systems	May 13, 2011 – November 13, 2015 Completed		CWS and Probation Management	CWS and Probation Management
B. Review MOU between CWS and Probation for best service to families	May 13, 2011 – November 13, 2015 Completed		CWS and Probation Management	CWS and Probation Management
C. Re-write MOU and protocols as needed	May 13, 2011 – November 13, 2015 Completed		CWS and Probation Management	CWS and Probation Management
D. Cross-train CWS and Probation staff on implementation of AB12	May 13, 2011 – November 13, 2015 Ongoing		CWS and Probation Training Coordinators	CWS and Probation Training Coordinators

Probation

Strategy 1: Provide mentoring services for youth in foster care	Applicable Outcome Measure(s) and/or Systemic Factor(s): We chose Measure 8A as a result of our PQCR to identify areas of deficiency in our current transitional services and improve outcomes for entering adulthood.			
	<input type="checkbox"/> CAPIT			
	<input type="checkbox"/> CBCAP			
	<input type="checkbox"/> PSSF			
	<input checked="" type="checkbox"/> N/A			
Action Steps:	Timeframe:	Person Responsible:		
A. Work with the Juvenile Justice Commission on their project to identify current resources and gaps in agencies providing mentoring. Coordinating county mentoring efforts.	May 11, 2011 – November 13, 2015 Ongoing	Probation supervisor, Juvenile Justice Commission, Arbor on Main		
B. Increase mentors through educating the public on the needs and rewards of mentoring.	May 11, 2011 – November 13, 2015 Ongoing	Probation supervisor, Juvenile Justice Commission		
C. Develop website for easier access to available mentoring options and/or becoming a volunteer mentor.	May 11, 2011 – November 13, 2015 Ongoing	Probation supervisor, Juvenile Justice Commission		
D. Develop peer mentoring both individually and through peer support group facilitated by emancipated youth.	May 11, 2011 – November 13, 2015 Ongoing	Arbor on Main, Big Brothers/Big Sisters		

Probation

Strategy 2: Develop Family Finding resources and strategies	Applicable Outcome Measure(s) and/or Systemic Factor(s): We chose Measure 8A as a result of our PQCR to identify areas of deficiency in our current transitional services and improve outcomes for entering adulthood.	
	<input type="checkbox"/> CAPIT	
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Develop internal procedures to ensure process of Family Finding occurs	May 11, 2011 – November 13, 2015 Completed	Division Manager, Probation Placement Supervisor
B. Develop training on Family Finding (US Davis, CWS and Family Finding training disc)	May 11, 2011 – November 13, 2015 Completed	Division Manager, Probation Placement supervisor, Field Officers
C. Build and encourage on-going family involvement (family tree)	May 11, 2011 – November 13, 2015 Ongoing	Probation Supervisors, Probation Officers

Probation

Strategy 3: Improve Transitional Planning	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		Applicable Outcome Measure(s) and/or Systemic Factor(s): We chose Measure 8A as a result of our POCR to identify areas of deficiency in our current transitional services and improve outcomes for entering adulthood.			
	Timeframe:			Person Responsible:		
	May 11, 2011 – November 13, 2015 Completed				Placement Probation Officer and Child	
	May 11, 2011 – November 13, 2015 Completed					Placement Probation Officer and Child
	May 11, 2011 – November 13, 2015 Ongoing					
Action Steps:						
A. T.I.L.P. (Transition Plan)						
B. 90 day transition plan. Hold "formal" transition conference (assure out of county transition plans include services from the county where the child intends to reside)						
C. N.Y.T.D. – Utilize data produced from NYTD to identify gaps and needs						
D. Develop independent skills classes for transitional age youth (Change Company workbooks, Arbor on Main, employer vocational workshops)						

Probation

Strategy 4: Family Engagement	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Applicable Outcome Measure(s) and/or Systemic Factor(s): We chose Measure 8A as a result of our POCR to identify areas of deficiency in our current transitional services and improve outcomes for entering adulthood.
Action Steps:	Timeframe:	Person Responsible:
A. Develop educational and support classes for parents (Parent Partner support group, probation parent support group and teen parenting classes). UPDATE: Parent partner support group only available for wrap families or through DSS family center; no longer at new beginnings. Probation providing teen parenting and parent support group.	May 11, 2011 – November 13, 2015 Ongoing	Foster Kin and adjunct agencies, Parent Partners, Probation Officer, Youth Project
B. Provide transportation assistance for parents to attend classes, counseling and visitation to placement.	May 11, 2011 – November 13, 2015 Ongoing	Probation

ATTACHMENT B-REVISED



**STATE FAMILY PRESERVATION (SFP)
PROGRAM PLAN
PLAN PERIOD OCTOBER 1, 2014 TO JUNE 30, 2015**

County: MENDOCINO		
Designated County SFP Liaison		
Name (First and Last)	Title	Agency
Jena Conner, MSW	Deputy Director, Family & Children's Services	Mendocino County Health & Human Services Agency
Address (City, State, Zip)		
727 S. State St. (P.O. Box 839), Ukiah, CA 95482		
Phone	Fax	Email
(707) 463-7971	(707) 463-7960	connerj@co.mendocino.ca.us
Provide a response to items 1-4 for the county's SFP programs/services.		
<p>1. Describe the programs/services to be funded with the SFP funds. (Character limit 1,500)</p> <p>Our SFP funds are being used to fund substance use disorder treatment services for parents who have an open court ordered Family Maintenance (FM) or Family Reunification (FR) Child Welfare Services case, substance use disorder treatment is a required component of their case plan and they are in our Family Dependency Drug Court (FDDC) Program. The SFP funds are paying for two full time outpatient substance use disorder treatment counselors who are employed by HHS/Behavioral Health & Recovery Services (BHRS), but are housed with CWS and serve CWS clients only, as well as paying for residential detox and residential treatment services for clients in the FDDC program who need more intensive treatment.</p>		
<p>2. For each of the SFP programs/services, identify the population to be served. (Check all that apply)</p> <p><input type="checkbox"/> Children <input checked="" type="checkbox"/> Family <input checked="" type="checkbox"/> Parents/Caregivers</p>		
Identify if any of the populations listed will be served with SFP funds by checking yes or no.		
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Children who have been adjudged wards of the court pursuant to Sections 801 and 802.
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Families of children subject to Sections 726 and 727.
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Children who are determined to require out-of-home placement pursuant to Section 7572.5 of the Government Code.
<p>Does the county probation department have an interagency agreement with the county welfare department for the direct provision of the SFP funded services?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		
<p>Has the county established family preservation programs that serve more than one geographic area of the county?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>If yes, list geographic areas here: (Character limit 250)</p> <p>Our FDDC program is available to all eligible CWS clients in our inland region (both north and south). FDDC is not available in our coastal region.</p>		

ATTACHMENT B-REVISED

According to statute, your funded SFP program must achieve the following outcomes:

- A. 75% of children receiving services remain in their own homes for six months after termination of services and if 60% remain at home one year after services are terminated;
- B. For children in foster care at the time of services, if the average length of stay (LOS) for children receiving these services is 50% less than the average LOS in out-of-home care of children who do not receive program services;
- C. Two years after the termination of Family Preservation services:
 - I. The average length of out-of-home stay of children selected to receive services under this section who, at the time of selection, are in out-of-home care, is 50% less than the average LOS in out-of-home care for children in out-of-home care who do not receive services pursuant to this section;
 - II. At least 60% of the children who were returned home pursuant to this section remain at home.

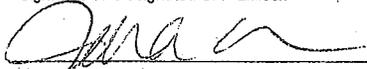
3. How will you monitor progress of your program to ensure these outcomes are met? (Character limit 1,000)

We have been operating our FDDC program for the past 7 years and have an established tracking system in place to monitor the outcomes of children/youth and families who have participated in our FDDC program. We will continue to monitor their outcomes compared to children/youth and families who did not participate in the program to ensure we are meeting the required SFP outcomes. The primary goals of our FDDC program are to reduce children/youth's length of stay in foster care and to ensure the long term success of families that complete the program to reduce our re-entry into foster care rates. Our FDDC program is a collaboration between CWS, BHRS, Juvenile Dependency Court, dependency attorneys and First Five Mendocino. All of the partners are aware of and support the goals of FDDC and the outcomes required by the SFP program and understand the expectations of meeting the required outcomes.

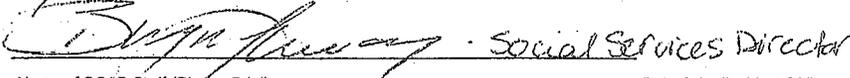
4. Describe how the SFP programs/services are coordinated with the array of services available in the county. (Character limit 1,000)

All FM and FR services offered by CWS, including substance use disorder treatment services, are coordinated with the array of services available in the county including wraparound services, parenting education, family empowerment groups, mental health services, domestic violence treatment services, subsidized housing programs, etc. The CWS social workers are responsible for working with the parents and team of professionals to coordinate schedules and services to ensure the parent's needs are being met and all the professionals on the parent's team are working together.

Signature of Designated SFP Liaison



Approved by:



Name of OCAP Staff (Please Print)

Date Submitted to OCAP

Date Approved by OCAP

Alicia Bernstein

Signature of OCAP Staff