

California Child and Family Services Review

Annual System Improvement Plan (SIP) Progress Report

2012-2017



County of San Diego



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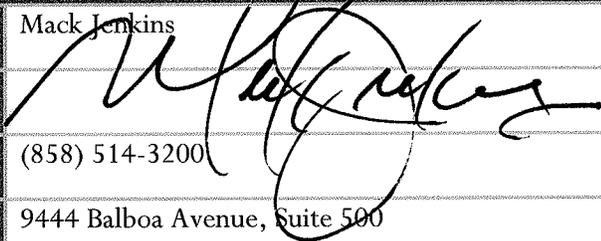
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California – Child and Family Services Review Signature Sheet

For submittal of: CSA SIP Progress Report

County	San Diego
SIP Period Dates	March 2014 – February 2015, Year 3
Outcome Data Period	CWS Data Extract Q2 2014; Probation Data Extract Q3 2014 http://cssr.berkeley.edu/icb_childwelfare
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System Improvement Plan (SIP) Progress Narrative

INTRODUCTION

This is San Diego's year three update submitted March 2015.

Child Welfare Services (CWS)

CWS continues to make progress on the System Improvement Plan (SIP) goal of Placement Stability. We have exceeded the stated goal and continue to make efforts for ongoing improvement. An emphasis on trauma-informed practice is one factor that has contributed to the increase in placement stability as well as improving relationships with caregivers through the implementation of the Quality Parenting Initiative (QPI)

CWS's reunification within 12 months goal is more elusive. Strengthening social work practice is a core strategy supported by education, coaching and a defined practice framework. This investment in the practice of social work is a long term strategy and will continue throughout the duration of the SIP. A Lean Six Sigma project was initiated this year and we are hopeful that we will have results and recommendations by Spring 2015 to help guide additional strategies toward improving the rate of timely reunification.

Probation

The Probation Placement Unit has continued to experience significant staffing changes this year. In order to assist with mandate compliance, operational oversight, and the reduction of caseload sizes, with the overall intent of improving the case management and placement stability for our foster care youth, the Placement Unit underwent additional expansion. Two additional Supervising Probation Officers, one Senior Probation Officer, six Deputy Probation Officers, one Probation Aide, and one Retiree positions were added. The previously assigned Supervising Probation Officer transitioned to another division, which resulted in another period of transition and training at the supervisory level.

As noted in last year's progress report, a significant systematic gap regarding data entry into CWS/CMS was identified. It was anticipated that it would require approximately two years of data entry work to close this gap. However, due to the realignment of resources, Probation successfully opened and entered data for all existing cases, and closed out all the terminated cases. All of the new placement staff have been trained in CWS/CMS and continue to receive on-going support and guidance to ensure compliance with maintaining CWS/CMS data entry. While, this was a significant accomplishment, Probation acknowledges this has been a step in closing the overall data gap. With the additional resources reallocated to the Placement Units, we anticipate this gap will continue to close and the timely entry of CWS/CMS data will be maintained.

STAKEHOLDERS' PARTICIPATION

Engaging stakeholders is an ongoing effort, primarily through the regular meeting of the Child Abuse Prevention Coordinating Council (CAPCC). In conjunction with the CAPCC, a prevention framework is

being created. Child Welfare Services, Probation and the prevention community have the opportunity to discuss issues and set the direction of our ongoing work. There have also been some targeted engagement efforts throughout the year. A SIP update and feedback session for the community, including the SIP Stakeholders will be held in early 2015 at the Child Abuse Prevention Coordinating Council meeting.

San Diego has strengthened the SIP goals by embedding their SIP strategies and activities into the Title IV-E Well-Being Demonstration Project. Although these two projects are not on the same timeline, San Diego is committed to moving these SIP strategies forward with the assistance of our many stakeholders.

Although year three accomplishments have not been presented to our staff yet, the plan is to present these findings to CWS leadership teams in early 2015. For internal CWS staff, annual update meetings are held in each CWS region where SIP progress is presented and feedback is documented.

During year one, CWS started development of a practice framework that supports the SIP and draws on the SIP goals to inform CWS practice. The development of this practice framework continued through year 2. The plan is to roll out the practice framework in March 2015 and the following year will be spent embedding the behaviors into our policies, procedures, and Continuous Quality Improvement system.

The full SIP report remains available for stakeholder access on the County website. The main San Diego County website for C-CFSR is:

http://www.sdcounty.ca.gov/hhsa/programs/cs/child_welfare_services/child_welfare_improvements_C-CFSR.html

The link to the SIP 2012-2017 report is as follows:

http://www.sdcounty.ca.gov/hhsa/programs/cs/documents/SIP_Report_5-15-12.pdf

SIP IMPROVEMENT GOALS: CURRENT PERFORMANCE

CWS

C4.1 Placement Stability

- Baseline = 80.8%; National Standard = 86%; SIP Goal = 83%
- **Current Performance = 84% for the period 07/1/13 to 6/30/14**
- The County's performance is moving in the right direction and we are now at 97.5% of the federal goal. The performance on Measure 4B First Placement with Relative has continued to improve from 21.4% on 6/30 2013 to 24.8% on 6/30/14. Similarly, our performance on Measure 4B PIT Placement with Relative showed a slight decrease from 40.1% as of 7/1/2013 to the current 39%. At 66.3% our performance on the Placement Stability Measure C4.2 met and passed the federal goal of 65.4.

C1.3 Reunification within 12 Months (entry cohort)

- Baseline = 43.6%; National Standard = 48.4%; SIP Goal = 47%
- **Current Performance = 35.1% for the cohort of children who entered between 1/1/13 to 6/30/13**
- The County's performance on this measure has again decreased from 39.4% to 35.1%. Currently the County is at 72.5% of the federal goal. The median time to reunification (C1.2) decreased from the prior year's 9.5 months to 9.3. Currently the County is at 58.1% of the federal goal of 5.4 months. Barriers include court continuances and the number of cases that are set for trial.

Probation

4B Relative Placement: Point in Time

- Baseline = 19%; SIP Goal = 30%
- **Current Performance = 11.4%**
 - The County's performance on this measure has decreased from 31.4% to 11.4%. Probation has been seeing an increasing trend of youth entering the system with higher risk and need factors. In correlation, we are experiencing a declining trend in relative placements and an increase in RCL 14 placements. Our youth are requiring a higher level of care and intervention to meet their needs, beyond what can be provided in a relative care setting.

STRATEGIES STATUS

Placement Stability (CWS)

Strategy 1: Maintain a child's connection to familiar environments and culture by ensuring consistency in CWS placement process

Action steps on this strategy commenced in July 2012.

Part of assessing and planning for this strategy was conducting a Lean Six Sigma Black Belt Project focusing on the relative home identification and approval process. This resulted in several recommendations and many are being implemented. By reviewing the assessment process, the agency is able to explore new tools and procedures to help expedite the relative home assessment which allows children to be placed in a familiar environment quickly.

The project recommendations resulted in the formation of a documentation workgroup. This workgroup focused on consistency in documentation procedures across the county. A fill-in documentation form was implemented countywide (includes criminal history, financial information, family composition, daycare plan, etc.). The form has been revised and continues to be used. The exemption and waiver process has been combined into one form and is expected to be implemented in early 2015. The contributing factors included competing priorities and time.

The Relative Home Approval workgroups continue to meet regularly to build and maintain consistency throughout the regions.

A CWS Policy Analyst attended kinship support groups countywide to evaluate the needs of formal and informal kinship caregivers. The kinship caregivers asked for more kinship navigators and fewer support groups. The navigators assist the caregiver with resource referrals and advocacy. Kinship caregiver feedback was utilized in our new procurement for Kinship Support Services kinship navigator positions were expanded.

Strategy 2: Maintain a child's connection to familiar environments and culture by improving the relative search process

Action steps on this strategy commenced in July 2012.

The Lean Six Sigma Black Belt project that was mentioned in Strategy 1 also helped to inform and guide this strategy. As a result, the Relative Search Workgroup meets monthly to develop and promote improved processes for communication, training, performance measures and documentation.

The ongoing efforts of the workgroup continue to include:

- Creating performance measures for the search clerks,
- Providing a more in depth training for searching, and
- Creating a training manual for the search clerks.

The main focus is the training manual. This strategy will be supported by San Diego's Title IV-E Well-Being Demonstration Project. We are working towards issuing a RFP for a family finding contract to be in place by October 1, 2015.

Strategy 3: Maintain a child's connection to familiar environments and culture by ensuring a child remains connected to school and community (friends, activities)

Action steps for this strategy commenced in October 2012.

After reviewing social work practices and supporting tools, Genograms and Ecomaps were identified as essential to assisting in identifying the people, activities and places that are important and familiar to each child. Additionally, the use of Genograms and Eco-Maps is supportive of Safety-Organized Practice concepts by helping to identify potential safety network members. The completion of Genograms and Ecomaps are behaviors outlined as part of our practice framework.

The assigned Child Welfare Services Policy Analyst regularly reviews practice and policy concerning the use of Eco-Maps and Genogram. The current policy requires social workers to complete a Genogram with families when children come into protective custody. There is currently no policy requiring the use of Eco-Maps. The Policy Analysts are developing an Eco-Map policy, and practice support tools.

Research was conducted and an online software program has been chosen. We are initiating the process to purchase software for the social worker's computers. This will assist them with creating Genograms and Ecomaps. It is expected that having this tool will increase not only the use of creating Genograms and Ecomaps but also the accuracy. The goal is to have a Genogram and Eco-Map that could follow the child from the initial investigation through to permanency and case closing and can be updated periodically.

There have also been ongoing CQI efforts to accurately track children/youth who are maintaining enrollment in their school of origin. New processes have been put in place to track each month the number of youth who are able to attend their school of origin.

As with strategy two, this strategy will also be supported by San Diego's Title IV-E Well-Being Demonstration Project.

Strategy 4: Improve placement support and services by utilizing emergency funds for relatives to include child care, respite, and transportation

Action steps for this strategy commenced in July 2012.

San Diego has a contract with the YMCA in which the YMCA disburses emergency funds for relatives. The emergency fund assists relatives with pool fences, beds, child care and other needs. We are trying to work with community organizations to help support our kinship families in emergency situations. This has been more difficult to implement because of multiple initiatives happening and the amount of time and effort needed to build community and business relationships.

211iFoster is building a web-based resource sharing venue that is expected to kick off in January 2015. The sharing venue will house and provide tailored resources for both formal and informal kinship caregivers, nonminor dependents and former foster care youth.

In working with a large stakeholder group facilitated by Aging and Independent Services (AIS), called Grandparents Raising Grandchildren (GRG), funding was to support for child care slots for both informal and formal caregivers.

Strategy 5: Improve placement support and services by utilizing kinship specific support activities (e.g. Kinship Navigators and support groups)

Action steps for this strategy commenced in July 2012.

In 2014, the YMCA was awarded the county kinship contract. The contract allows the YMCA to call each relative provider and offer case management services and provide links to resources. We published an information bulletin informing staff that the YMCA was awarded the kinship placement support program contract and to let staff know that this resource is available. Further, the caregivers receive training and are provided a list of kinship support groups where there are additional mini-trainings provided.

Starting in September 2014, we met with a local community college (Grossmont College) Foster, Adoptive and Kinship Care Education program to create a plan to encourage kinship providers to attend caregiver trainings. Ongoing meetings are being held and this activity will be something that is worked into Grossmont College's training plan. QPI encourages joint trainings with social workers and caregivers and we are working to integrate our trainings.

The 211iFoster Kinship Navigator services is described in Strategy 4.

Strategy 6: Improve placement support and services by implementing quick response teams

Action steps for this strategy commenced in January 2014.

CWS is researching the current use and success of quick response teams in San Diego and other jurisdictions. We are forming a workgroup consisting of regional representation and plan to have the first discussion in Spring 2015. The discussion will allow CWS staff to provide input into what the quick response teams would look like when operational.

The quick response team approach will be used to handle placement crisis after hours and on the weekend.

Strategy 7: Improve placement support and services by enhancing trauma-informed practice

Action steps for this strategy commenced in September 2012.

The National Child Traumatic Stress Network (NCTSN) updated the Comprehensive Guide that we use in “Viewing Child Welfare Through a Trauma Lens” training. This training has been updated and enhanced for all incoming social workers.

Continuing efforts include:

- Trauma champions in all CWS offices meet every other month
- HHSA Trauma Workgroup with representation from all HHSA departments meet quarterly

The “Caring for Children Who Have Been Exposed to Trauma” training was given to 40 kinship caregivers in Spring 2011. It was then offered again in July 2012 and no caregivers attended. It was again offered in July 2013 where only a few caregivers attended. The training was then provided to substitute care providers in February 2014 in which three kinship caregivers attended. Getting caregivers to attend this training has been difficult and other ways of providing trauma informed training and support to caregivers is being explored. For more information on what we are doing to overcome this barrier, see Strategy 5.

In our last report, we discussed that all contracts between CWS and service providers will have appropriate trauma language added as the contracts are created or are due for renewal. This continues to be a work in progress as the contract procurements and renewals occur at different times.

Our contractors were surveyed regarding trauma informed practice.

Question	Response
The County of San Diego, Health and Human Services Agency is taking steps to become trauma-informed in every aspect of the organization, management and service delivery system. Traumatic experiences untreated are the root cause of many pressing problems including addiction, mental health problems, low academic achievement and poor health outcomes. To mitigate the risk of re-traumatization service delivery stems must integrate a “trauma lens” into all services provided. Contractors are vitally important to this effort. To what degree are you familiar with what it means to be a trauma-informed organization?	The contractors responded that they were very familiar or familiar with Trauma-Informed Practice for: 2013: 82% 2014: 84%
Trauma informed services are designed specifically to avoid re-traumatizing those who seek assistance as well as staff working in service settings. To what extent do your program or agency administrators support the integration of knowledge about trauma-informed practice into all program practices?	The contractors responded that they were very supportive or supportive of Trauma-Informed Practice for: 2013: 89% 2014: 92%

Strategy 8: Improve placement support and services by evaluating and expanding use of Family Team Meetings (Team Decision Making (TDM), Family Group Conferencing, Safety Networks)

Action steps for this strategy commenced September 2012.

We are currently waiting for the Federal report outlining the results of the grant for Family Group Conferencing.

San Diego embraces the use of family centered meetings or family team meetings because families are the experts on themselves. Families can make well informed decisions about keeping their children safe when supported. Under the broad heading of family centered or family team meetings are specific types of meetings. Child and Family Team meetings (CFT) are a component of San Diego's Pathways to Well-Being initiative (Katie A). The meetings have been begun in our residential services area of CWS and CFT meetings began in June, 2014. Staff specifically for screening and care coordination has been hired and will be trained in January 2015 and CFT meetings will be rolled out region wide following the training.

TDM meetings continue to be held in support of every placement decision, including as a service to avoid placement disruptions. We received data from Children's Research Center (CRC) on Team Decision Making meetings. The data analysis shows:

- There is no differentiation for TDM based on age and ethnicity of child.
- There was virtually no impact of the average number of placements.
- 90% of the youth who had TDMs did not have placement disruptions after 90 days.
- TDMs did not impact placement. However, anecdotally participants (parents, family members and SW staff) believed that the TDM meetings were worthwhile.
- There was a statistical significance difference of 5% increase on TDMs being held on general neglect allegations than other child abuse allegations.

As a part of Safety-Organized Practice, mapping is a tool that is used with a focus of safety, permanency, well-being or independence. Mapping is a process to assist CWS, the family and the safety network in gathering and organizing information related to the case and moving to joint agreements about next steps. Mappings can be done with a focus on safety and identifying actions of protection the family needs to demonstrate in order to safely maintain or return the child home. With permanency focused meetings, the purpose is to build permanent connections. When the focus is on well-being, the purpose is to address the educational and emotional needs of the child/youth. When an independence meeting occurs the mapping is intended to assist the youth to make a successful transition into adulthood.

San Diego is not currently doing any formal Family Group Conferencing. Until September, 2014 the YMCA had a Federal grant to conduct FGCs on voluntary cases. The YMCA is completing their report for the federal grant. It is expected that we will have the report soon and we will be reviewing the report regarding service effectiveness.

Strategy 9: Improve placement support and services by improving initial and ongoing assessments of children to promote and maintain first/best placement and support placement fit

Action steps for this strategy commenced in January 2013.

In last year's report, several recommendations were made and some of those recommendations have been changed. The current recommendations are:

- Expand screening for all children in an open child welfare case (FM, FR, VS) within 30 days

- If there is a positive screen Child and Family Team meetings will be established to determine mental health assessment process
- Re-screening of all children annually.
- Involve caregivers and parents in the screening, assessment, and service delivery process.

Pathways to Well-Being Care Coordination started in Residential Services in February 2014. Care Coordination was the first step to serving youth in need of enhanced services and to address youth's mental health needs. Mental health screening for enhanced services started in July 2014 in Residential Services with plans to roll out county wide in early 2015 (See strategy 8 for more information.)

Child and family teams are incorporated into our Title IV-E Demonstration Well-Being Project. This effort will expand the use of CFT meetings and help ensure that youth with identified mental health concerns are connected to services suited to their needs in a timely manner. We have hired a Pathways to Well-Being team who will provide screenings regionally. Stabilizing the placement occurs when teaming happens. When kids with difficult behaviors are indentified we are able to provide faster services to stabilize the placement.

Placement Stability (Probation)

Strategy 10: Improve kinship support services

Action steps for this strategy commenced in January 2013.

Over the past two years, the Placement Unit has been increased by two Supervising Probation Officers, one Senior Probation Officer, one Probation Aide; and seven Deputy Probation Officers. This has enabled Probation to reduce caseload sizes to 10 for the Crossover Youth/Dual Jurisdiction population and from 35 to 20 for all other foster care caseloads. Having three Supervising Probation Officers has allowed Probation to improve in our management of administrative assignments and federal mandates and has assisted in equalizing the span of control for supervisory oversight. This span of control relief has allowed supervisors to focus on quality assurance monitoring for this goal. These changes also have enabled officers to enhance their case management abilities, increase their participation in multi-disciplinary team meetings, increase the number of visits for youth in kinship care, and to provide more support for caregivers; thereby, reducing the likelihood of youth requiring a higher level of care.

With these changes, Probation also has been able to designate a Deputy Probation Officer position to focus on furthering our kinship support services and outreach to the families. The Placement Supervising Probation Officers continue to network and collaborate with CWS, particularly with the kinship support contact in the Relative Home Approval Unit. They are collaborating on the shared utilization of kinship support services.

The Placement Supervising Probation Officers also participate in the 211 iFoster collaborative (which includes CWS, Probation and community providers) which is focusing on the development of a website, similar to our Community Resource Directory, for support and referral information for caregivers and those making referrals for support. This website is currently scheduled for implementation on January 29, 2015. Probation's Community Resource Directory became active for Juvenile Field Services in November 2013 and provides officers with an automated directory and referral process for approved service providers. This strengthens officers' ability to identify and make referrals for family support services. This new process also requires the service providers to provide weekly progress reports, which further enhances the case management process.

In efforts to improve kinship support services, the Probation Department also continues to actively utilize Wrap Around referrals and services to enhance case management. Probation also has been expanding our utilization of Multi-Disciplinary Team Meetings.

Beyond these efforts, in August of 2014, Probation engaged in a cross-systems training with approximately 30 CWS staff who are involved in caregiver support and home approvals. Probation presented on firearms safety as related to home approvals and the resultant caregiver education.

Strategy 11: Fully implement Relative Noticing Process to Aid in Placing Youth with Family Members

Action steps for this strategy commenced in January 2013.

The implementation of the relative notification remains in progress. The department drafted a letter and information sheet to mail to relatives when a child is removed from their home. The policy and procedure as well as the training continue to be developed to ensure proper implementation and compliance with AB 938. In addition to training via UC Davis, internal training on this topic is being developed. April 2015 is the targeted implementation date for the training of juvenile probation staff on the relative notification process.

The Probation Department currently has three staff that are trained and operating as the home evaluators for all potential relative and non-relative placements. They also serve as the relative notification and home evaluation Subject Matter Experts for the Juvenile Field Services Division.

In November 2014, a third supervisory position was added to the Placement Unit; however, the position is currently filled with a temporary assignment to a higher class. Currently, supervisor interviews are targeted to be held in January 2015. As such, it is anticipated that this position will be permanently filled in the spring of 2015. This will be an administrative supervisory position which would assist in the oversight and implementation of this strategy. This position, however, will also be responsible for the oversight of the Title IV-E Well-Being Demonstration Project and other administrative duties.

Strategy 12: Implement Team Decision Making Strategies to improve placement stability

Action steps for this strategy commenced in July 2012.

Probation continues to work on the implementation of Team Decision Making (TDM) meetings to improve placement stability. Initially in November 2013, three staff participated in the TDM Facilitator Training provided by CWS. However, subsequent to training, two of the three staff transitioned out of the unit/division. In August 2014, six additional staff participated in the TDM Facilitator Training provided by CWS. The Probation Department has enrolled an additional five staff to participate in the January 2015 TDM Facilitator Training provided by CWS. Once the additional training is completed, the development of an implementation plan will commence in 2015.

In November of 2013, the Probation Department began to implement TDMs associated with our Crossover Youth population. However, implementing TDMs throughout the Juvenile Field Services Division is a significant task for the Placement Unit. Currently, youth residing in relative/non-relative care are supervised by placement officers, as well supervision officers. The expansion of this practice beyond the Placement Unit is a labor and staffing sensitive undertaking; however, a strategy, including the identification of staffing resources has been developed. In January 2015, two of approximately six

identified line positions (deputy probation officer) will be reallocated to the Placement Unit, which will allow us to begin to realign all foster care youth into the Placement Unit, with the exception of youth requiring supervision by our Gang Suppression Unit. With the expansion of staffing and training we will be able to realign workload assignments to accommodate the need for TDM facilitators.

See strategy 11 regarding Supervising Probation Officer status impact on implementation.

Reunification (CWS)

Strategy 13: Strengthen social work practices

Action steps for this strategy commenced in July 2012.

In December 2013, University of California Davis researchers did a review of San Diego's Safety-Organized Practice (SOP) to help assess the infusion and depth of SOP concepts and tools into daily social work practice. The evaluation consisted of case review and worker interviews.

The overall impressions of the researchers from the report were:

- The SWs exhibited a depth in practice and critical thinking (both in the interviewing and documentation) in working with families that included expertise in solutions focused interviewing, the three questions and an understanding of trauma informed practice.
- Harm and Danger statements were developed and well documented throughout the continuum of care. SWs did not deviate from the harm and danger into contributing factors; they stayed focused throughout their work.
- Safety Goals were developed and well documented throughout the review.
- Case plans were well developed with mostly behaviorally specific objectives that aligned with the decisions and risk levels on the SDM tools. All case plans had a danger statement and a safety goal.
- SWs accessed and appreciated the coaching that is available to them.
- Expanding the use of safety mapping and network building with families, further developing understanding of family strengths and continued support for the on-going use of SOP on a daily basis (especially with supervisor support) will continue to develop and deepen SOP practice.

A "SOP for Supervisors" curriculum was developed to enhance supervisors and managers knowledge and skill in safety organized practice. The training is two days and consists of four modules. This training was created specifically for supervisors. Trainings were held throughout 2014 and all supervisors were required to attend. The following data is current as of December 19, 2014:

- Module 1: 90 supervisors completed
- Module 2: 81 supervisors completed
- Module 3: 70 supervisors completed
- Module 4: 62 supervisors completed

Sonja Parker, an international expert in engagement conducted a 3-day training on safety networks to line staff, supervisors, Public Child Welfare Training Academy and Casey Family Programs staff in May 2014. Safety networks is the next step in San Diego's SOP implementation and efforts to engage families and deepen social work practice.

To monitor implementation SD will utilize Continuous Quality Improvement process. There is a practice framework review tool being developed and it is expected that this tool will be ready for use late Spring or early Summer 2015.

Strategy 14: Strengthen social work practice by supporting coaching and field-based instruction

Action steps for this strategy commenced in July 2012.

Two more days of coaching by PCWTA were added for fiscal year 2014/2015 for CWS Managers and new social workers. In the past year, we had 47 days of coaching with each day being 6 hours. We continue to work with the PCWTA to implement and expand field-based instruction.

Previously, supporting in-house coaching positions was a barrier but now that San Diego is part of the Title IV-E Well-Being Demonstration Project, this is no longer a barrier. The recruitment for the coaching positions will start in early 2015. The plan is to have a coach for each regional office and program providing hands on coaching for social workers and supervisors.

Strategy 15: Strengthen social work practice by enhancing engagement through family-centered meetings

Action steps for this strategy commenced in July 2012.

Family centered meetings include child and family team meetings, TDM's and Family Group Conferencing. See strategy 8 for more information.

Strategy 16: Improve access to immediately available family specific services by researching best practices nationwide

Action steps for this strategy commenced in February 2013.

In an effort to improve access to family specific services, we decided to look at this from different ways including an IT component that would encompass a referral method and service provider database, a Lean Six Sigma reunification project, improved resource list as well as a one stop reunification center.

For the IT component, our team examined at UCLA's LA Resource Project, 211 and Probation's community resource directory (CRD). Based on San Diego's needs, the Probation system seems to be the best fit. We are moving forward by researching cost and availability of such a program.

We started a Lean Six Sigma project on timeliness reunification because we wanted to take a deep dive into our reunification process. Lean Six Sigma is systematic methodology of removing waste in a process. It is a powerful tool and the key principles are:

- Focus on the customer;
- Identify and understand how the work gets done;
- Manage, improve and smooth the process flow;
- Remove non-value added steps and waste;
- Manage by fact and reduce variation;

- Involve and equip the people in the process;
- Undertake improvement activity in a systematic way.

The customer for this project was the social worker and because of this input was received from social workers, supervisors, managers. Part of this project included conducting focus groups with service providers and other stakeholders to identify gaps and barriers to reunification service delivery.

It is expected that the results from the Lean Six Sigma reunification project will be available late Spring or early Summer 2015. Once the recommendations are made, they will be reviewed for possible implementation.

The concept of a one stop reunification center is still being evaluated. With the presence of substance abuse treatment centers in each region of the county, it is thought that adding services and resources to an already existing and established service provider will enhance support of parents. To make a substance abuse treatment center more comprehensive, housing and therapy for parents and older teens is needed. More research is still needed. We provided this type of service in a previous federal grant and we continue to work with those partners in Behavioral Health Services and Alcohol and Drug Services.

This SIP strategy is closely tied with our Title IV-E Well-Being Demonstration Project and we expect to be able to move forward although it is still too early to tell.

Strategy 17: Improve access to immediately available family specific services by developing the “resource specialist” concept

Action steps for this strategy commenced in October 2012.

Research was conducted to identify current programs with a “resource specialist” role and no established model was found. The vision of a resource specialist identified in the SIP development meetings was a staff person who is knowledgeable about what services are available in the area and what client needs would be best served by which providers. The resource specialist would develop relationships with the service providers and know who has capacity to serve clients’ specific needs. This person would be a support and consultant to the social worker. At this time, it is difficult for us to take social workers off the line to do what is necessary to make this endeavor successful because of the number of other strategies we are working on. However, with the implementation of Pathways to Well-Being there will be workers who specialize in mental health services for youth and a Behavioral Health Services staff person co-located in each office. These staff will be available to help workers identify the right mental health services for children and youth. See strategy 16 for more information.

Strategy 18: Improve parent-child interaction/visitation by evaluating current visitation services and practices

Action steps for this strategy commenced in January 2013.

One practice that has been successful in San Diego is Incredible Families, a program that combines evidenced based Incredible Years parenting program with a parent/child visitation, a meal and parenting education., This program is now available countywide and was expanded from two regions to Countywide. Our CQI unit reviewed the Incredible Families Program and found that:

- Of the 105 families reviewed 80 families (80%) had at least one parent complete the IFP.
- Of the 105 families reviewed only 5 families (5%) dropped out of the IFP.
- Sixty-three families (71%) of the 89 families that reached permanency had at least one child in the family reunify with at least one parent. Forty-one families (66%) of the 62 families that reunified did so within 12 months.
- The families that reunified did so in an average of 10 months.
- There were significant differences in the reunification rate between mothers and fathers:
 - Of the 65 families with fathers who did not reunify, there were 39 families (60%) with mothers who did reunify.
 - Of the 35 families with mothers who did not reunify, there were only 9 families (26%) with fathers that did reunify.
- The 6 Voluntary Services families included in this study did not receive any referrals within 12 months of beginning the IFP.

This review indicates that the families in this study who completed the IFP have better outcomes than the families who dropped out or were terminated from the IFP. The better outcomes included:

- Faster time to reunification (average of 10 months for the families that reunified, which is faster than the current county average time to reunification of 11 months (Safe Measures average of children who exited placement with a termination reason of "reunification" during the 12-month period between 10/01/2013 and 09/30/2014).
- Successful reunification, meaning the child went home to one or more parent, opposed to the 5 families that dropped out and 7 or the 9 families who were terminated, as none of these families reunified.

An online three part visitation training has been developed and is currently being formatted for an e-learning. This is expected to be rolled out to staff in early 2015.

The visitation policies have been reviewed and are being updated to reflect Safety-Organized Practice. Most recently the policy files related to visitation for incarcerated parents were reviewed and are in the approval process.

Part of our strategy to use coaches (See strategy 14) will assist with visitation. We are pursuing a contract with an identified expert in the field to come to San Diego to provide training around visit coaching. We are augmenting an existing contract so that we can have a contractor support the regional coaches with visitation coaching.

The County of San Diego Child Welfare Services and Oregon Social Learning Center Developments have received a *Frontiers of Innovation* grant to improve the experiences, developmental trajectories and outcomes for babies removed from their families and placed in foster care. For more information on this grant, see the CWS Promising Practices section.

Visitation is part of San Diego's Title IV-E Well-Being Demonstration Project.

Strategy 19: Improve parent-child interaction/visitation by developing a plan to improve visitation

Action steps for this strategy commenced in March 2013.

Through research of different visitation theories and programs, one that stood out is Visit Coaching, developed by Marty Beyer. Marty Beyer is working with Children's Research Center (CRC) to align her model with Safety-Organized Practice. It is expected that this will be completed before Summer 2015. Our plan to have our staff trained in visit coaching during the summer 2015. The Visit Coaching service will start in a new contract in fiscal year 2015-2016.

See strategy 18.

Visitation is part of San Diego's Title IV-E Well-Being Demonstration Project.

Agency Collaboration (CWS)

Strategy 20: Strengthen communication and coordination with community partners by reviewing confidentiality guidelines to improve information sharing and ensure appropriate disclosures

Action steps for this strategy commenced in January 2013.

Developing confidentiality guidelines is complex as partner agencies weigh in on the laws that support their individual agencies' ability to share information.

An e-learning for social work staff including line workers, supervisors and managers on confidentiality guidelines was started in early 2014 and should be complete in early 2015. Substitute care providers will be able to access the training. This will help support strategy 4 and 5.

Our CWS Policy Analyst assigned to confidentiality has updated the confidentiality guide and is doing presentations throughout Child Welfare Services. She is also presenting at meetings where there is cross representation but includes child welfare staff.

Strategy 21: Strengthen communication and coordination with community partners by exploring co-location of County and community service providers

Action steps for this strategy commenced in July 2012.

This year new co-locations were explored. There are 43 agencies involved with co-location with 94 CWS or agency staff co-located. CWS and agencies have come together to provide consolidated and coordinated legal, social, and health services to women, men, children, and families in need.

Another way to strengthen communication and coordination with community providers is by creating smaller regions or communities within each region. In San Diego this is known as Neighborhoods for Kids (N4K). In each region, there are smaller sections or neighborhoods which are defined in part by zip codes and school boundaries. Of the 6 regions in San Diego, one region already implemented N4K and four more regions are in the process of implementing with roll out expected in 2015.

Countywide, CWS co-location opportunities will continue to be encouraged.

Strategy 22: Develop a shared definition of child abuse prevention and intervention through community engagement and dialogue to support community child abuse/neglect prevention framework

Action steps for this strategy commenced in July 2012.

The Child Abuse Prevention Council partnered with Children’s Bureau-Strategies to conduct community trainings and dialogues on the Five Protective Factors Framework. This community training dialogue included members of the San Diego Family Strengthening Network and was conducted throughout San Diego County in 2014. The kickoff to start the community dialogues was March 20, 2014.

The CAPCC formed a small workgroup to assist in the development of the Prevention Framework. This committee will review the findings of the Community Dialogues and organize the findings into the framework. The Prevention Framework will serve as a guide to future CAPCC programs and projects. A draft of the Prevention Framework was presented to the CAPCC board on January 20, 2015.

Strategy 23: Develop a shared definition of child abuse prevention and intervention through community engagement and dialogue to understand and support alternative response

Action steps for this strategy commenced in January 2013.

CWS sent a staff member to the 9th National Conference on Differential Response in Child Welfare in November 2014 to learn and gather information about how other jurisdictions implement alternative response concepts. The staff member reported their learning to the Policy and Program leadership team. Although differential response was a consideration for the Title IV-E Well-Being Demonstration Project, it was not selected as the focus of California’s waiver. There are some pieces of Differential Response that are under consideration. There are significant barriers to implementing Differential Response such as the SACWIS system and state regulations.

BARRIERS TO IMPLEMENTATION

Child Welfare Services (CWS)

Challenges were addressed in the strategy updates.

Probation

Barriers were addressed in the strategy updates above.

OTHER SUCCESSES/PROMISING PRACTICES

CWS

A. Caring for Babies

The County of San Diego Child Welfare Services and Oregon Social Learning Center Developments have received a *Frontiers of Innovation* grant to improve the experiences,

developmental trajectories and outcomes for babies removed from their families and placed in foster care.

Our objective with this project is that all infants and toddlers under the supervision of Child Welfare Services have the opportunity for stable and caring relationships, essential for healthy development. The goal of this project is to design and test science-based interventions that can impact the parenting issues that led to the removal of the baby while simultaneously supporting substitute caregivers so that the well-being of the baby is developed and protected while the baby is separated from the biological parents. The project will focus on building an environment that develops a healthy working relationship among birth parents, foster parents, Kinship caregivers, social workers and babies. Overall, the focus areas are: Transitions, Visitation, and Shared Learning.

The *Frontiers of Innovation* Initiative was created to advance the mission of the Center on the Developing Child at Harvard University to drive science-based innovation that will lead to breakthrough outcomes for children facing adversity. The goal of this one year planning grant is to generate ideas and pilot a project that can lead to outcomes for babies in foster care that are substantially better than the best current practice.

B. Permanency Round Tables

CWS has a focus on permanency for youth with the “long-stayers” by partnering with Casey Family Programs to initiate Permanency Roundtables. A “long-stayer” is defined as a youth in group home care for 3 years or longer. A Permanency Roundtable is an intervention designed to facilitate the permanency planning process by identifying realistic solutions to permanency obstacles for youth. Key players (a permanency consultant, a master practitioner, a youth’s case manager and supervisor, etc.) convene to create individual permanency plans. CWS is considering expanding the program to our adoptions program.

C. Safety Enhanced Together (SET)

The County of San Diego’s Child Welfare Services practice framework-**Safety Enhanced Together (SET) Through Teamwork and Family Engagement: In San Diego, Our Families are SET to Live Well**-outlines beliefs and guiding principles, creates a decision-making framework and defines a practice structure to guide work within all levels of CWS. It is our goal to make our vision for safety, permanency and well-being outcomes a reality.

The SET practice framework:

- Defines what we do, how we do it and why we do it the way we do;
- Establishes how we work internally and how we partner externally with families, service providers, and other stakeholders to focus on safety, permanency and well-being;
- Links agency values and priorities to daily engagement practice with families;
- Provides clear, written explanations of key agency policies and procedures of how services should be provided as stepping stones to reaching the goal of enhancing safety for children;
- Defines effective casework practice while allowing for appropriate flexibility and professional discretion; and
- Supports consistent and collaborative practice through CWS.

D. Continuous Quality Improvement (CQI) unit

A fairly new newly formed Continuous Quality Improvement (CQI) unit composed of Senior Protective Services Workers will assist with monitoring SIP strategies and providing feedback to the SIP team. The CQI unit will do case reviews can look deeper into cases to help understand the data and practice implications.

Joint CWS/Probation

A. Title IV-E Well-Being Demonstration Project

San Diego opted to participate in the Title IV-E Well-Being Demonstration Project which runs from October 1, 2014 to September 30, 2019. Many of our SIP strategies were folded into our waiver activities using Safety-Organized Practice as the intervention.

B. Commercially Sexually Exploited Children (CSEC)

In 2012, San Diego began implementation of the Crossover Youth Practice Model (CYPM) developed by the Center for Juvenile Justice Reform at Georgetown University. The CYPM provides a mechanism whereby agencies will strengthen their organizational structure, enhance efforts at cross-system collaboration and implement or improve practices that directly affect the outcomes for crossover youth, their families and communities. Crossover youth are youth who have experienced maltreatment, have a child welfare history and engaged in delinquency behaviors.

CWS, Probation and the Juvenile Court are working on a protocol and it is expected to be signed in early 2015.

The purpose of CYPM is to:

- Promote the appropriate and timely sharing of information between agencies to better inform workers at key decision points.
- Develop and adapt specific policies and practices to better coordinate case assessment, planning and the management of services for crossover youth.
- Establish a process that maximizes the services utilized by each system to prevent crossover from occurring.

Probation

A. Positive Youth Justice Initiative (PYJI)

In October 2013, the Probation Department was awarded a two year technical assistance grant funded by the Sierra Health Foundation, The California Endowment, and the California Wellness Foundation for the implementation of PYJI practices. The grant/funding is managed by the Center for Health Program Management.

The Positive Youth Justice Initiative is a specialized unit designed to serve high need delinquent youth with previous histories in the Child Welfare system. The operation of the unit is a collaboration of both juvenile justice system and community partners who work together to identify target youth and engage them in youth and family focused wraparound services. The program is focused on strengthening the youth and family's resilience areas and shortening the youth's stay in the delinquency system. The program focuses on the understanding and implementation of trauma informed care and positive youth development practices.

In April, 2014 a PYJI Unit consisting of a Supervising Probation Officer, two Deputy Probation Officers, a Youth and Family Counselor and a Juvenile Recovery Specialist became operational.

Targeted outcomes for this initiative include: increased youth and family resiliency; reduced recidivism; strengthened partnerships with a shared vision for statewide enhancements; shortened duration of youth in the juvenile justice system and increased school success.

B. Trauma Informed Care

Probation has been actively committed to the furtherance of officer training and awareness as it relates to Trauma Informed Care practices. In this past fiscal year, Trauma Informed Care training for Probation Officers was developed. Approximately 500 probation staff completed the four hour training. Additional training is scheduled for February 2015.

State and Federally Mandated Child Welfare/Probation Initiatives

INVOLVEMENT IN STATE AND FEDERAL MANDATES

CWS

A. Commercially Sexually Exploited Children (CSEC)

Under SB855 (2014), San Diego is planning to participate. We are working on developing a CSEC protocol, training SW staff and foster youth. Although we have not made any decisions regarding a screening tool, we are reviewing the different tools that are available.

B. Pathways to Well-Being

CWS continues its work in “Pathways to Well-Being” (San Diego’s implementation of Katie A.). Pathways to Well-Being has a joint governance structure with Behavioral Health Services to screen and provide relevant mental health assessments to children in out-of-home care. CWS continues its participation in the Continuum of Care workgroup that seeks to step children down to lower levels of care as a part of the Pathways to Well-Being.

C. Extended Foster Care (EFC)

CWS created a dedicated unit of workers to serve Extended Foster Care (EFC) clients. Having the EFC workers centralized in one unit helps to pool the expertise of this emerging program and increase learning. Since the implementation of EFC, the number of units has been expanded. We have nearly four units of social workers serving the extended foster care youth.

OUTCOME MEASURES NOT MEETING STATE/NATIONAL STANDARDS

CWS

Following is a description of the outcome measures for which the County of San Diego’s performance is below 95% of the federal or state goals and/or that show a consistent trend in a negative direction. Data were obtained from the CWS Outcomes System Summary for San Diego County, Data Extract Q2 2014 (http://cssr.berkeley.edu/icb_childwelfare).

No recurrence of maltreatment

Measure	Performance 1 Yr Prior	Current Performance	Federal Standard	% of Federal Standard Achieved
S1.1 No recurrence of maltreatment	93.6%	91.3%	94.6%	96.5

San Diego did not reach the federal standard for measure S1.1. This measure is influenced by factors such as, family poverty, multiple family stressors, socio-economic status and substance abuse. One effort that helps minimize the recurrence of maltreatment is the development of preventive services. As a waiver county, we are implementing different prevention services which we expect to help us move in a positive direction with this measure.

Reunification Composite Measures

Measure	Performance 1 Yr Prior	Current Performance	Federal Standard	% of Federal Standard Achieved
C1.1 Reunification within 12 months (Exit Cohort)	59.3%	62.4%	75.2%	75.2
C1.2 Median Time to Adoption (in months)	9.5	9.3	5.4	58.1
C1.4 Reentry following Reunification	10.8%	10.8%	9.9%	92%

The County has not yet reached the federal standards for measures C1.1 and C1.2. Reunification within 12 months showed a positive percent change of 4.9% from the previous year. Measure C1.2 is also going in the right direction with a downward percent change of -7.9% over the last five years. Performance on C1.4 held steady.

Since San Diego is not performing as well as we would like in the C1.1 strategy, we are doing a Lean Six Sigma project which was initiated in 2014. We are hopeful that we will have results and recommendation by Spring 2015 and that the results and recommendations will help guide San Diego toward improving the rate of timely reunification.

Adoption Composite Measures

Measure	Performance 1 Yr Prior	Current Performance	Federal Standard	% of Federal Standard Achieved
C2.1 Adoption within 24 Months	19.3%	22%	36.6%	60.2%
C2.2 Median Time to Adoption (in months)	32.9	32.9	27.3	83.0%
C2.5 Adoption within 12 Months (legally free)	36.5%	29.6%	53.7%	55.1%

Looking at the past five years, overall the County is moving in the right direction for all of the adoption measures. Measure C2.1 showed positive movement with a five year percent change of 44.8% and C2.2

had a -8.4% decrease in the median time to adopt over the five year period. The current performance on Measure C2.5 was below the previous year's performance, a one year percent change of -18.6%.

A Lean Six Sigma Green Belt project began in December 2013 with the purpose of examining and making recommendations on the work flow process for adoption services. The goal for a Lean Six Sigma project is to eliminate waste and to create the most efficient system possible by eliminating unnecessary steps in the process that do not add value to the finished product. By eliminating steps in the process that do not add to the overall value of the adoption process, the process was simplified and made easier for social workers. As a result, our numbers have improved.

The action plan is as follows:

- **Action:** By January 2014, implement Lean Six Sigma (a managerial concept that evaluates system processes to eliminate waste) recommendations. The Lean Six Sigma project was a thorough review of the foster and adoptive parent process to eliminate duplication, bottlenecks and delays in processing adoptive applicants while also developing improvements to the home study process.

Outcome: Effective June 2014, a comprehensive review of the home study process to identify ways to become more efficient was completed using focus groups and other feedback mechanisms. As a result, the following enhancements are underway:

- The Adoption Orientation process has been updated. Applicants are now provided the timeline to adoption and information about the "Exceptional Children" needing placement as well as consistent messaging about the children available and time it takes to complete the process.
- The Adoption website has been updated and is being redesigned to provide current and comprehensive information and resources to the consumer. A pre-orientation video has been completed to inform applicants about the process of fostering or adopting in San Diego County.
- A Foster/Adoption Program Administrator position was established to oversee, monitor and implement system improvements and coordinate training for Adoption staff.
- An Adoption Quality Assurance position was established to develop monitoring and tracking tools, such as dashboards and statistical reports, which will document timeliness, customer satisfaction, training and activities essential to adoption finalization and identify cases that are not progressing quickly.
- Applicant surveys were developed for ongoing input and review of system improvements.
- Training and coaching for Adoption staff were increased to strengthen their capacity to provide support and services to adoptive families.
- Policy to allow additional cases to be outsourced was developed, thus decreasing the workload of County staff, and increasing the timeliness of home study completion. This has doubled the number of cases outsourced (51 in FY 21-13, 100 in FY 13-14, estimated 150 in FY 14-15).
- The Adoption Program received consultation and strategies from a state and nationally recognized consortium to decrease the timeframe for applicant workers to conduct an adoption home study within our county. As a result, the program has created a specialty position to handle "in home" cases that do not meet the criteria to be outsourced. This worker will have a reduced caseload get families through the home study process more quickly.

- **Action:** By November 2013, upgrade current technology available to both Adoption staff and consumers; implementing software enhancements to improve and expand both internal and external (customer) user capability.

Outcome: Effective September 2014, technology will be used that provides features that are compatible and customized to meet Adoption program functions; ultimately providing a more efficient method for timely processing of applicant information.

- In November 2013, My Adoption Portal (MAP) software was implemented and is moving the Adoption Program from a paper-based tracking and filing system to electronic case management format. To date, over 400 applicant records have been uploaded into MAP and training support is provided to employees who are learning and using this system. MAP provides the ability to efficiently perform functions formerly handled by multiple employees, decreasing the probability of unnecessary delays, errors and lost documents.
- MAP will also provide “public portal” log-in access for applicants to register for orientation, submit documents, and effectively communicate with social workers regarding their progress in the adoption process. The Adoption Program anticipates introducing public portal access in Spring 2015.
- As of October 2014, the Adoption Program is receiving technical assistance to implement automation enhancements which include imaging and bar-coding forms, as well as improvements to the website. Packets that are frequently used have been uploaded to the copy, and are not accessible via a one touch keypad, making this clerical function much more seamless.
- To better serve consumers, the “Kids Line” is expanding to provide multiple caller options and customer support (Monday through Friday, 8 to 5 pm). Calls will be triaged and responded to promptly. Retention Specialists will respond to inquiries pertaining to foster or adoption placement, resources, training, and general questions regarding foster care. Inquiries and mediation requests will be monitored and tracked for quality assurance.

Long Term Care Composition Measures

Measure	Performance 1 Yr Prior	Current Performance	Federal Standard	% of Federal Standard Achieved
C3.3 In Care 3 Years or Longer	68.4%	57.9%	37.5%	64.8%

The County is moving in the right direction for this measure and on all of the long term care measures by continuing its efforts to understand who “long stayers” are and the barriers that prevent these youth from achieving permanency. On the measure C3.1 In care for 24 months our most recent performance was 29.2 with the federal standard at 29.1%. We continue to work with the Casey Family Program to analyze and understand the predictors for the youth, the parent, the community, and the systemic factors. CWS began the process of conducting Permanency Round Tables, a process supported by Casey Family Programs, to re-think permanency options for youth in group homes who have been in care for three years or longer. The County’s Interagency Placement Committee focuses on permanency and lowering lengths of stay in congregate care. The impact of AB12, Fostering Connections to Success Act, continues to be a factor on performance on this measure as more youth, who would have emancipated, now elect to remain in foster care.

Placement Stability Composite Measures

Measure	Performance 1 Yr Prior	Current Performance	Federal Standard	% of Federal Standard Achieved
C4.2 Placement Stability (12 to 24 Months in Care)	63.4%	66.3%	65.4%	101.3
C4.3 Placement Stability (at least 24 months in care)	32.4%	36.3%	41.8%	86.8%

The County is moving in the right direction on C4.2 and met (66.3) and exceeded the federal standard (65.4) for placement stability. There are also positive changes for C4.3 with a steady pace toward the federal goal.

The County's CWS Continuous Quality Improvement Unit will spotlight placement stability to better understand who these children are and how to further refine our practice and training to improve on these measures. Measure C4.3 is problematic because it includes numerous entry cohorts. A child with multiple placements prior to the analysis year would continue to negatively impact the measure until the child leaves out of home care. These measures make no distinction between placement moves that are beneficial and least restrictive such as a move from a group home to relative care.

Well-Being: Timely Dental Exams

Measure	Performance 1 Yr Prior	Current Performance	State Standard	% of Standard Achieved
5B Rate of Timely Dental Exams (children aged 3 or older)	65.1%	67.4%	90%	74.8%

The County's performance on timely dental exams remains below the State standard of 90%. In the most recent quarter, Q2 2014 children in Relative/NREFM made up 41% (289 of 703) of those not receiving a timely dental exam.

The barriers identified in our last report remain the same and they are:

- Lack of Medi-Cal card
- Clinics unable to schedule exams within 30-day requirement
- Provider back-logged
- Provider limits time for scheduling Medi/Denti-cal clients
 - No appointments available
- How information is presented to Substitute Care Providers (SCP)
 - Amount of information presented at one time
 - Importance of exams
 - Initial placements
 - Change of placements
- Conflict with other scheduled activities (school, work, therapy, visitation etc.)
- SCPs have trouble leaving work to attend medical appointments
- Relative caregivers not prepared to care for grandchildren, nieces etc.

- Children’s fear of going to dentist
- Personality conflicts with providers
- Hard to find providers accepting Denti-cal

Potential solutions were identified in our last report. The suggestion to remind SCPs by phone and by letter is being done. A partnership with the Public Health Nurses under the Health Care Program for Children in Foster Care (HCPCFC) will start later in January 2015. Through this collaboration it is anticipated that the following potential solutions will be explored:

- Establish providers/networks specifically for children in foster care (Medical Hub ex: Los Angeles)
- Establish relationships with providers and clinic management staff
 - Provide Public Health Nurses (PHN) with access to electronic records
 - Provide “foster care” point of contact at clinic for direct communication
 - Education for service providers (medical needs, vulnerabilities)
 - Make foster children priority when scheduling
- Maintain fee for service Medi-cal over managed care Medi-cal
- Education for caregivers
 - Create a team/network of providers
 - Find a good clinic/provider and stay with provider
 - Make sure Medi-cal information is available
 - Utilize PHNs for assistance

Probation

Probation Reunification Composite Measures

Measure	One-year Percentage Change	Current Performance	Federal Standard	% of Federal Standard Achieved
C1.1 Reunification Within 12 Months (Exit Cohort)	-12.1	50.0	75.2	66.5%
C1.2 Median time to Reunification (Exit Cohort)	3.4%	12.2	5.4	44.3%
C1.3 Reunification Within 12 months (Entry Cohort)	126.6%	48.2	48.4	99.6%

Probation has demonstrated considerable improvement in these areas as compared to last year’s progress report. As mentioned in last year’s progress report, we identified that our barrier in meeting these performance measures was due to inaccurate and incomplete data entry into CWS/CMS. Over the year, we have actively focused on addressing our CWS/CMS data entry gaps through on-going training and the reallocation of resources. Our efforts to improve our data reliability appear to be directly linked to our noted improvement in these measures.

Regarding C1.1, C1.2 and C1.3, with our continued utilization of collaborative case management practices to include multi-disciplinary team meetings and team decision making meetings, we anticipate these outcomes to improve. We also acknowledge, as previously mentioned, our youth in foster care tend to struggle with significant mental health issues as well as delinquency issues, resulting in a population of

higher risk youth with high needs. In addition to these factors, in November of 2013, we began to supervise dual jurisdiction youth as part of our Crossover Youth Practice Model. We believe our supervision of this population of high needs and high risk youth may also be a barrier to our meeting C1.1C1.2 and C1.3. These youth are dependent youth who often do not have a parent or legal guardian with whom to reunify.

Probation Adoption Composite

Youth on probation typically experience more delinquency issues that make the likelihood of adoption more challenging. As such, Probation's focus has been on identifying treatment needs and providing appropriate services to redirect behavior and promote positive change. In the future, Probation may look into building strategies to explore adoption.

Probation Long Term Care Composition Measures

Measure	Performance 1 Yr Prior	Current Performance	Federal Standard	% of Federal Standard Achieved
C3.1 Exits to Permanency (24 months in Care)	112.6%	15.9	29.1%	54.7%
C3.2 Exits to Permanency (Legally Free at Exit)	N/A	N/A	98%	N/A

Probation youth are primarily placed in foster care due to treatment needs coupled with delinquency issues. As such, family reunification is most often the case plan goal; however, data for C3.1, while improved from last year's progress report, continues to indicate otherwise. Possible explanations for this include our sex offender population who require lengthier treatment and often cannot reunify due to the victim being a family member (in the home), and youth with significant mental health issues that require more time in care. Additionally we are seeing an increasing trend of youth transitioning over to Extended Foster Care. More youth are exiting after 18 years of age, but are not reunifying as a result of AB 12 and their transitioning to extended foster care. Since 2012, we have seen a 75% increase in youth transitioning to extended foster care.

Probation Federal Measure 2F

Measure	Performance 1 Yr Prior	Current Performance	Federal Standard	% of Federal Standard Achieved
2F Timely Monthly Caseworker Visits	N/A	62.6	90%	69.6%
2F Timely Monthly Caseworker Visits in Residence	N/A	52.6	50%	105.2%

Probation has demonstrated considerable improvement in these areas as compared to last year's progress report. As mentioned in last year's progress report, we identified that our barrier in meeting these performance measures was due to inaccurate and incomplete data entry into CWS/CMS. Over the year, we have actively focused on addressing our CWS/CMS data entry gaps through on-going training and the reallocation of resources. Our efforts to improve our data reliability appear to be directly linked to our noted improvement in these measures. In addition, we believe our reallocation of staff to the placement

units and the resultant reduction in caseload sizes also has positively contributed toward our improvement and successes in these measures.

We currently are exceeding the measure as related to Timely Monthly Caseworker Visits in Residence and are making progress toward meeting the measure for Timely Monthly Caseworker visits. We continue to attribute incomplete CWS/CMS data entry as a barrier to meeting the Timely Monthly Caseworker visits. We will continue to focus on staff training and continuous quality improvement practices in this area.

5-year SIP Chart

San Diego's SIP chart goals remain unchanged.

The following edits/updates to the SIP chart were made:

- **CWS**
 - No changes were made.

- **Probation**
 - Strategy 10 – Action Step B: Changed Timeframe from July 2014 to July 2015. Action Step C: Changes timeframe from July 2015 to July 2016.

<p>CWS</p> <p>Priority Outcome Measure or Systemic Factor: C4.1: Placement Stability: Two or Fewer Placements</p> <p>National Standard: 86%</p> <p>Initial Performance: 80.8% (1536 of 1900)</p> <p>Current Performance: 84% (1449 of 1725)(for the period of 7/1/13 to 6/30/14)</p> <p>Target Improvement Goal: 83% (goal met, no additional children needed at this time to meet goal)</p>
<p>PROBATION</p> <p>Priority Outcome Measure or Systemic Factor: 4B: Relative Placement: Point in Time¹</p> <p>National Standard: N/A</p> <p>Initial Performance: 19%</p> <p>Current Performance: 11.4%</p> <p>Target Improvement Goal: Maintain at or above 30%</p>
<p>CWS</p> <p>Priority Outcome Measure or Systemic Factor: C1.3: Reunification within 12 months (entry cohort)</p> <p>National Standard: 48.4%</p> <p>Initial Performance: 43.6% (332 of 762)</p> <p>Current Performance: 35.1% (211 of 601) (for the period of 1/1/13 to 6/30/13)</p> <p>Target Improvement Goal: 47% (283 of 601)(72 additional children)</p>
<p>CWS</p> <p>Priority Outcome Measure or Systemic Factor: Agency Collaboration</p> <p>National Standard: None has been determined</p> <p>Initial Performance: Measured by co-location 59 community staff co-located at CWS and 7 CWS staff co-located in the community</p> <p>Current Performance: Measured by co-location 58 community staff co-located at CWS (89% of our target goal) and 28 CWS staff co-located in the community (80% of our target goal)</p> <p>Target Improvement Goal: 65 community staff co-located at CWS and 35 CWS staff co-located in the community.</p>

¹ Because Probation is already meeting the federal standard for measure C4.1: Placement Stability, the target improvement goal for Probation will address State measure 4B: Relative Placement.

Placement Stability		Applicable Outcome Measure(s) and/or Systemic Factor(s):
Strategy 1: Maintain a child's connection to familiar environments and culture by ensuring consistency in CWS placement process (PQCR Recommendation)	<input type="checkbox"/> CAPIT	C4.1: Placement Stability: Two or Fewer Placements
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Evaluate current policy, procedures and get regional feedback re: actual practice vs. policy	July 2012 Update: Completed	Central Child Welfare Services(CCWS) and CWS Operations
B. Provide recommendations for changes to Executive Management Team	January 2013 Update: Completed	CCWS
C. Implement approved recommendations	March 2013 Update: Ongoing	CCWS and CWS Operations
D. Evaluate and monitor implementation (one venue for evaluation is Relative Home Approval meetings)	July 2013 Update: Ongoing	CCWS

Placement Stability		Applicable Outcome Measure(s) and/or Systemic Factor(s):	
Strategy 2: Maintain a child's connection to familiar environments and culture by improving the relative search process	<input type="checkbox"/> CAPIT	C4.1: Placement Stability: Two or Fewer Placements	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
Action Steps:	Timeframe:	Person Responsible:	
A. Evaluate current policy and procedures regarding relative search and obtain regional feedback on actual practice	July 2012 Update: Completed	CCWS and CWS Operations	
B. Provide recommendations for changes to Executive Management Team	January 2013 Update: Completed	CCWS	
C. Implement approved recommendations	March 2013 Update: Ongoing	CCWS and CWS Operations	
D. Evaluate and monitor implementation	July 2013 Update: Ongoing	CCWS	

Placement Stability

Strategy 3: Maintain a child's connection to familiar environments and culture by ensuring a child remains connected to school, community (friends, activities)

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
C4.1: Placement Stability: Two or Fewer Placements

Action Steps:

Timeframe:

Person Responsible:

A. Evaluate current policy, procedures and practice regarding Eco-Maps and Genograms

October 2012 Update: Completed

CCWS and CWS Operations

B. Incorporate/integrate into placement process

March 2013 Update: Ongoing

CCWS and CWS Operations

C. Identify child's cultural needs (location, language, ties, religion) in placement process

March 2013 Update: Ongoing

CWS Operations

Placement Stability		Applicable Outcome Measure(s) and/or Systemic Factor(s):	
Strategy 4: Improve placement support and services by utilizing emergency funds for relatives to include child care, respite, transportation	<input type="checkbox"/> CAPIT	C4.1: Placement Stability: Two or Fewer Placements	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
Action Steps:	Timeframe:	Person Responsible:	
A. Explore use of community philanthropic organizations/ support for goods such as beds, mattresses, car seats, etc.	January 2013	Update: Ongoing	East Region (lead), CWS Operations and CCWS
B. Develop resource sharing venue (e.g. social media)	July 2013	Update: Ongoing	CCWS, CWS Operations and Community Providers
C. Explore partnerships with community child care providers and after school programs	July 2013	Update: Ongoing	CCWS, CWS Operations and Community Providers
D. Evaluate the scope of current respite services in relation to need and develop and release a new solicitation for respite services with a new contract start date of January 1, 2013.	June 2012	Update: Completed	CCWS

Placement Stability

Strategy 5: Improve placement support and services by utilizing kinship specific support activities (e.g. Kinship Navigators and support groups)

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

C4.1: Placement Stability: Two or Fewer Placements

Action Steps:	Timeframe:	Person Responsible:
A. Support and sustain Kinship Navigator concepts based on available funding	Fiscal Year 2012/13 Update: Completed	CCWS
B. Explore caregiver mentor program for kinship caregivers (in lieu of or in addition to support groups)	October 2012 Update: Completed	CCWS
C. Develop kinship placement support program	January 2013 Update: Completed	CCWS, CWS Operations and Community Providers
D. Ensure existing resources are advertised/known	October 2012 Update: Completed	CCWS, CWS Operations and Community Providers
E. Create a plan to encourage kinship caregivers to attend caregiver training(s)	October 2012 Update: Ongoing	CCWS, CWS Operations and Community Providers

Placement Stability		Applicable Outcome Measure(s) and/or Systemic Factor(s):	
Strategy 6: Improve placement support and services by implementing quick response teams	<input type="checkbox"/> CAPIT	C4.1: Placement Stability: Two or Fewer Placements	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
Action Steps:		Person Responsible:	
Timeframe:			
A. Define purpose, composition and when/how to provide services	January 2014	Update: Ongoing	CCWS, CWS Operations and Community Providers
B. Make recommendations to executive team	July 2014	Update: Ongoing	CCWS
C. Implement approved recommendations	September 2014	Update: Ongoing	CCWS, CWS Operations and Community Providers
D. Evaluate and monitor	September 2015		CCWS

Placement Stability

Strategy 7: Improve placement support and services by enhancing trauma-informed practice

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
C4.1: Placement Stability: Two or Fewer Placements

Action Steps:

Timeframe:

Person Responsible:

- A. Provide "Caring for Children Exposed to Trauma" training for all relative caregivers
- B. Distribute and review "trauma" brochure with caregiver
- C. Acknowledge and address secondary trauma with/to caregivers (resources for caregiver therapy/education/group support)

September 2012 Update: Completed

September 2012 Update: Completed

September 2012 Update: Ongoing

CCWS and Community Provider

CWS Operations

CCWS, CWS Operations and Community Providers

Placement Stability		Applicable Outcome Measure(s) and/or Systemic Factor(s):	
Strategy 8: Improve placement support and services by evaluating and expanding use of Family Team Meetings (TDM, Family Group Conferencing, Safety Networks)	<input type="checkbox"/> CAPIT	C4.1: Placement Stability: Two or Fewer Placements	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
Action Steps:	Timeframe:	Person Responsible:	
A. Evaluate current utilization/processes and develop recommendations	September 2012 Update: Completed	CCWS	
B. Implement recommendations	July 2013 Update: Postponed	CCWS, CWS Operations and Community Providers	
C. Partner with YMCA on FGDM (Family Group Decision Making) federal grant	July 2012 Update: Completed	CCWS, CWS Operations and YMCA	
D. Evaluate effectiveness	January 2014 Update: Ongoing	CCWS and YMCA	

Placement Stability

Strategy 9: Improve placement support and services by improving initial and ongoing assessments of children to promote and maintain first/best placement and support placement fit

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

C4.1: Placement Stability: Two or Fewer Placements

Action Steps:

Timeframe:

Person Responsible:

A. Evaluate existing contracts/providers for initial and ongoing assessment services.

January 2013 Update: Completed

CCWS-Contracts

B. Identify gaps

March 2013 Update: Completed

CCWS – Contracts and Policy

C. Develop recommendations for comprehensive initial and ongoing assessment program to support placement stability

July 2013 Update: Completed

CCWS – Contracts and Policy

D. Implement pilot program as funds are available

July 2014: Update: Ongoing

CCWS

Placement Stability		Applicable Outcome Measure(s) and/or Systemic Factor(s):	
Strategy 10: Improve kinship support services (Probation)		<input type="checkbox"/> CAPIT	C4.1: Placement Stability: Two or Fewer Placements
		<input type="checkbox"/> CBCAP	
		<input type="checkbox"/> PSSF	
		<input checked="" type="checkbox"/> N/A	
Action Steps:		Person Responsible:	
A. Increase number of staff and frequency of in-home visits aimed at providing resources and supports to families.		January 2013 <i>Update: Completed</i> Probation Placement Unit	
B. Develop training model/program for kinship caregivers (similar to the YMCA or CHOICE program) with youth involved with the juvenile justice system.		July 2014 July 2015 <i>Update: Ongoing</i> Probation Placement Unit	
C. Evaluate effectiveness of strategy as it relates to placement stability		July 2015-July 2016 Probation Placement Unit Supervisor	

Placement Stability

Strategy 11: Fully implement Relative Noticing Process to Aid in Placing Youth with Family Members (Probation)

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
 Least Restrictive Placement
 C4.1: Placement Stability: Two or Fewer Placements

Action Steps:	Timeframe:	Person Responsible:
<p>A. Ensure designated staff for evaluating family placements</p>	<p>January 2013 Update: Ongoing</p>	<p>Probation Placement Unit</p>
<p>B. Ensure County Probation staff are aware of Relative Notification Processes through trainings, supported by the Resource Center for Family Focused Practice at UC Davis or internal training.</p>	<p>July 2015</p>	<p>Probation Placement Unit</p>
<p>C. Monitoring and Evaluation</p>	<p>January 2017</p>	<p>Probation Department Placement QA</p>

Placement Stability	
Strategy 12: Implement Team Decision Making Strategies to improve placement stability (Probation)	Applicable Outcome Measure(s) and/or Systemic Factor(s):
	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A
	C4.1: Placement Stability: Two or Fewer Placements
Action Steps:	Person Responsible:
Timeframe:	Person Responsible:
A. Present recommendations to Chief Probation Officer and Executive Staff regarding Team Decision Making process, the benefits to youth and improved stability that will be provided	Probation Placement Unit
B. Identify funding stream to support TDMs, develop policy and procedures for identification of appropriate candidates for TDMs and implementation.	Probation Placement Unit
C. Partner with Child Welfare Services to develop training for Probation Officers in the process of TDM's.	Probation Placement Unit
D. Complete Training for Probation Officers and commence TDMs.	Probation Placement Unit
E. Monitoring and Evaluation	Probation Department Placement QA

Reunification		Applicable Outcome Measure(s) and/or Systemic Factor(s):							
Action Steps:		Timeframe:		Person Responsible:					
						Timeframe:		Person Responsible:	
						Timeframe:		Person Responsible:	
						Timeframe:		Person Responsible:	
Strategy 13: Strengthen social work practices		<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): C1.3: Reunification within 12 months (entry cohort)					
A. Continue implementation of integrated Structured Decision Making (SDM)/Safety Organized Practice (Signs of Safety) began from previous SIP		July 2012	Update: Ongoing	CCWS and CWS Operations					
B. Evaluate training delivery and transfer of learning strategies for 13A.		July 2013	Update: Ongoing	CCWS					
C. Implement changes based on evaluation completed in 13B		January 2014	Update: Ongoing	CCWS and CWS Operations					
D. Monitor social worker monthly contacts with children in family reunification services to develop and implement practice improvements.		July 2013	Update: Ongoing	CCWS and CWS Operations					

Reunification		Applicable Outcome Measure(s) and/or Systemic Factor(s):
Action Steps:	Timeframe:	Person Responsible:
Strategy 14: Strengthen social work practice by supporting coaching and field-based instruction <input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		C1.3: Reunification within 12 months (entry cohort)
A. Assess partnership with Public Child Welfare Training Academy to implement expanded field-based instruction	July 2012 Update: Completed	CCWS and Public Child Welfare Training Academy (PCWTA)
B. Evaluate feasibility of in-house coaching positions	July 2012 Update: Completed	CCWS
C. Implement items 14 A and B as resources permit	January 2013 Update: Ongoing	CCWS and PCWTA
D. Evaluate effectiveness of 14 C if implemented	July 2015	CCWS

Reunification		Applicable Outcome Measure(s) and/or Systemic Factor(s):	
Strategy 15: Strengthen social work practice by enhancing engagement through family-centered meetings	<input type="checkbox"/> CAPIT	C1.3: Reunification within 12 months (entry cohort)	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
Action Steps:	Timeframe:	Person Responsible:	
A. Evaluate current TDM utilization/processes and develop recommendations (ensure use at case decision points)	September 2012 Update: Ongoing	CCWS	
B. Expand use of other family team meetings	July 2013 Update: Ongoing	CCWS CWS Operations and Community Providers	
C. Partner with YMCA on FGDM (family group decision making) federal grant – existing grant	July 2012 Update: Ongoing	CCWS, CWS Operations and YMCA	
D. Evaluate effectiveness of 15C	January 2014 Update: Ongoing	CCWS and YMCA	

Reunification		Applicable Outcome Measure(s) and/or Systemic Factor(s):
Strategy 16: Improve access to immediately available family specific services by researching best practices nationwide	<input type="checkbox"/> CAPIT	C1.3: Reunification within 12 months (entry cohort)
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Evaluate practice models	Feb 2013	Update: Completed CCWS
B. Assess local service gaps	July 2013	Update: Ongoing CCWS
C. Assess funding needs to implement appropriate practice models	November 2013	Update: Ongoing CCWS
D. Develop implementation plan and present recommendations to CWS Director and Executive Team	February 2014	Update: Ongoing CCWS
E. Implement plan as funding available	January 2015:	Update: Ongoing CCWS, and CWS Operations
F. Evaluate implementation	July 2015	CCWS

Reunification

Strategy 17: Improve access to immediately available family specific services by developing the “resource specialist” concept

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
C1.3: Reunification within 12 months (entry cohort)

Action Steps:

Timeframe:

Person Responsible:

- A. Gather information: nationwide best practices, local practices
- B. Evaluate current resource hubs
- C. Complete needs assessment
- D. Make recommendations to the Executive Team
- E. Implement approved recommendations contingent upon available funding
- F. Evaluate implementation

October 2012
Update: Completed

December 2012
Update: Completed

June 2013
Update: Ongoing

September 2013
Update: Ongoing

March 2014
Update: Ongoing

September 2014
Update: Ongoing

CCWS

CCWS

CCWS or Community Contractor

CCWS

CCWS, CWS Operations and Community Providers

CCWS

Reunification		Applicable Outcome Measure(s) and/or Systemic Factor(s):	
Strategy 18: Improve parent-child interaction/visitation by evaluating current visitation services and practices	<input type="checkbox"/> CAPIT	C1.3: Reunification within 12 months (entry cohort)	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
Action Steps:		Person Responsible:	
Timeframe:			
A. Review and monitor use of visitation plans	January 2013	Update: Ongoing	CCWS and CWS Operations
B. Demonstrate to social workers the effectiveness of graduated visitation (decreasing supervision as case progresses)	January 2013	Update: Ongoing	CCWS and CWS Operations
C. Review Visitation policy and procedures to ensure they reflect best practices and make recommendations to revise	January 2013	Update: Ongoing	CCWS
D. Revise policy and procedures to support recommendations	July 2013	Update: Ongoing	CCWS

Reunification

Strategy 19: Improve parent-child interaction/visitation by developing a plan to improve visitation	<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): C1.3: Reunification within 12 months (entry cohort)
Action Steps:		Person Responsible:
A. Research nationwide best practices		CCWS
B. Explore "Visitation Consultations" (information sharing for best practices and case presentation)		CCWS and Pilot Region
C. Utilize family support circles (safety network) to move families towards unsupervised visits		CCWS, and CWS Operations
	Timeframe: July 2013	Update: Completed
	September 2013	Update: Ongoing
	March 2013	Update: Ongoing

Agency Collaboration

Strategy 20: Strengthen communication and coordination with community partners by reviewing confidentiality guidelines to improve information sharing and ensure appropriate disclosures

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
Agency Collaboration

Action Steps:

Timeframe:

Person Responsible:

A. Create tutorials for community and CWS staff	January 2013 Update: Ongoing	CCWS
B. Ensure consistency of practice	January 2013 Update: Ongoing	CCWS and CWS Operations

Agency Collaboration

Strategy 21: Strengthen communication and coordination with community partners by exploring co-location of County and community service providers

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
Agency Collaboration

Action Steps:

Timeframes:

Person Responsible:

A. Identify current models that provide an array of services under one roof

July 2012 Update: Completed

CCWS

B. Conduct gap analysis

January 2013 Update: Completed

CCWS

C. Develop matrix of current co-located staff

January 2013 Update: Completed

CCWS

D. Evaluate researched nationwide programs and local programs and make recommendations to executive team

July 2013 Update: Completed (research) and Ongoing (recommendations)

CCWS

E. Implement approved recommendations contingent upon available funding

January 2014 Update: Ongoing

CCWS and CWS Operations

F. Evaluate 21E

July 2016

CCWS

Agency Collaboration		Applicable Outcome Measure(s) and/or Systemic Factor(s):
Strategy 22: Develop a shared definition of child abuse prevention and intervention through community engagement and dialogue to support community child abuse/neglect prevention framework	<input type="checkbox"/> CAPIT <input checked="" type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	Agency Collaboration
Action Steps:	Timeframe:	Person Responsible:
A. Review state and national models and current research	October 2012	Update: Completed CCWS
B. Convene community stakeholders to dialogue and provide recommendations	March 2013	Update: Completed County of San Diego Child Abuse Prevention Coordinating Council (CAPCC); CCWS
C. Develop and publish prevention framework	January 2014	Update: Ongoing County of San Diego Child Abuse Prevention Coordinating Council (CAPCC) and CCWS
D. Implement, monitor and evaluate 22C	January 2015	Update: Ongoing County of San Diego Child Abuse Prevention Coordinating Council (CAPCC) and CCWS

Agency Collaboration

Strategy 23: Develop a shared definition of child abuse prevention and intervention through community engagement and dialogue to understand and support alternative response

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
Agency Collaboration

Action Steps:

Timeframe:

Person Responsible:

A. Assess readiness of community	January 2013	Update: Ongoing	County of San Diego Child Abuse Prevention Coordinating Council (CAPCC) and CCWS
B. Evaluate current efforts/local demonstration projects	January 2013	Update: Completed	County of San Diego Child Abuse Prevention Coordinating Council (CAPCC) and CCWS
C. Engage partners for funding and leveraging opportunities	July 2013	Update: Ongoing	County of San Diego Child Abuse Prevention Coordinating Council (CAPCC) and CCWS
D. Develop implementation plan	July 2013	Update: Ongoing	County of San Diego Child Abuse Prevention Coordinating Council (CAPCC) and CCWS
E. Implement based on available funding	January 2014	Update: Ongoing	County of San Diego Child Abuse Prevention Coordinating Council (CAPCC) and CCWS
F. If implemented, evaluate	July 2015		County of San Diego Child Abuse Prevention Coordinating Council (CAPCC) and CCWS

