

California – Child and Family Services Review Signature Sheet

For submittal of: CSA SIP Progress Report

County	Siskiyou
SIP Period Dates	February 1, 2015 – January 31, 2020
Outcome Data Period	Q4 2013

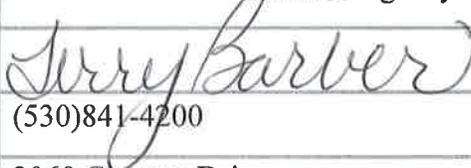
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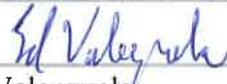
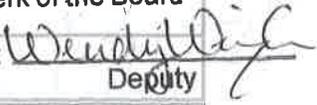
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BOS Approval Date	 2/17/15	ATTEST: COLLEEN SETZER County Clerk & Ex-Officio Clerk of the Board By:  Deputy
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Signature*		

Mail the original Signature Sheet to:
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*Signatures must be in blue ink

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California - Child and Family Services Review

System Improvement Plan

FEBRUARY 2015 – JANUARY 2020



CDSS

CALIFORNIA
DEPARTMENT OF
SOCIAL SERVICES

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Introduction

The System Improvement Plan (SIP) is a cooperative effort between the California Department of Social Services, Siskiyou County Child Welfare, and Siskiyou County Juvenile Probation Department to develop a plan for ongoing improvement in the delivery of child welfare services within Siskiyou County. The SIP is the final step in the California Child and Family Services Review process (C-CFSR) and is built upon the information gained from the Peer Review and the County Self Assessment (CSA). In April 2014, Siskiyou County invited six peer counties to participate in a Peer Review. However, due to unforeseen circumstances, only five peer counties were able to participate on the interview teams and provide peer county insights and recommendations.

Several counties were represented in the peer review process, including Colusa, Butte, Shasta, Tehama, and Trinity. These peers included three social workers, one social worker supervisor, and one probation officer. Throughout the Peer Review, CSA meetings, and System Improvement planning meetings, strengths and challenges/barriers were identified and strategies for system improvement were developed. The SIP was prepared by Child Welfare and Probation staff, with contributions by the Community Services Council, as the Child Abuse Prevention Council.

Historically, networking in Siskiyou County has occurred in the informal atmosphere of meetings held for another reason. Blue Ribbon Commission meetings, for example, draw participants from child welfare, probation, local tribes, County Office of Education, Foster Family Agencies (FFA), Court Appointed Special Advocates (CASA), and attorneys representing clients in the Juvenile Court. The CSA and the SIP have been the topic of discussion at several of the quarterly meetings and information gathered during the meetings and in informal discussion before and after the meeting has provided valuable input to the CSA and SIP process. The Advisory Committee meeting of the Siskiyou Parenting Hub and Foster Kinship Care Education is held quarterly and staff from Child Welfare, Community Services Council (CSC), and Siskiyou County Office of Education, State Adoptions, Family Resource Centers (FRCs), and foster care providers attend. This meeting provides an excellent forum to explore ideas and work on common challenges.

Data from the University of California, Berkeley, Center for Social Services Research (Q4 2013) along with SafeMeasures®, was used to review and assess the County's performance in C-CFSR Outcome Measures. This data was used to initiate discussions with stakeholders and core representatives. The Priority Outcome Measures chosen by Child Welfare and Probation staff are Placement Stability, Authorization for Psychotropic Medication, Monthly Visits (Out of Home), and Participation Rates for Entry and In Care. Focus groups comprised of social workers, social worker supervisors, Independent Living Youth (ILP), and community partners were held to address system improvement and strategies to enhance outcomes for children and families within the Child Welfare and Probation systems. It has been difficult to convene large groups of stakeholders together at one time. People are very busy and the economic downturn has caused businesses to reduce staff numbers. It has been productive to reach out to stakeholders by telephone and email and to connect at meetings mutually attended by child welfare and probation. Discussions were conducted between Child Welfare and the CSC in order to determine the CAPIT/CBCAP/PSSF Service Provision Plan.

System Improvement Plan (SIP) Narrative

C-CFSR TEAM AND CORE REPRESENTATIVES

Siskiyou County's C-CFSR Team and Core Representatives are:

Name	Job Title	Agency/Department
Terry Barber	Director	Health and Human Services Agency
Katherine O'Shea	Director	Health and Human Services Agency, Social Services Division
Debbie Walsh	Deputy Director	Health and Human Services Agency, Social Services Division
Connie Lathrop	Program Manager	Health and Human Services Agency, Adult and Children's Services Division
Alix Byrd	Staff Services Analyst I	Health and Human Services Agency, Adult and Children's Services Division
Judy Carter	Social Worker Supervisor	Health and Human Services Agency, Adult and Children's Services Division
Susan Cervelli	Social Worker Supervisor	Health and Human Services Agency, Adult and Children's Services Division
Suzanne Hogue	Social Worker III	Health and Human Services Agency, Adult and Children's Services Division
Jennifer Moody	Social Worker II	Health and Human Services Agency, Adult and Children's Services Division
Tina Thompson	Social Worker II	Health and Human Services Agency, Adult and Children's Services Division
Angeline Zufelt	Social Worker II	Health and Human Services Agency, Adult and Children's Services Division
Valerie Linfoot	Social Worker II	Health and Human Services Agency, Adult and Children's Services Division
Deborah Dickens	Drug Court Coordinator	Health and Human Services Agency, Behavioral Health Services Division
Tracie Lima	Deputy Director	Health and Human Services Agency, Behavioral Health Services Division
James Roach	Deputy Chief Probation Officer	Siskiyou County Juvenile Probation Department
Holly Speake	Adoptions Specialist	California Department of Social Services, Adoptions
Hilary Locke	Adoptions Specialist	California Department of Social Services, Adoptions
Cliff Lantz	Director	Court Appointed Special Advocates
Laura Stapp	Program Manager	Northern Valley Catholic Social Services
Jill Phillips	Executive Director	Community Services Council
Jim Roseman	Director	Siskiyou Domestic Violence and Crisis Center
Carla Charraga	Deputy Director	Siskiyou Domestic Violence and Crisis Center
Dana Barton	Deputy County Counsel	Siskiyou County Counsel
Colette Bradley	Foster Care Liaison	Siskiyou County Office of Education
Foster Youth	Independent Living Program	Siskiyou County

The C-CFSR team engaged stakeholders and core representatives by holding meetings to discuss the SIP and develop strategies to improve current performance. Core representative and stakeholder feedback was sought to identify service strengths and gaps. The feedback obtained from people working day to day with children and families is vital to systemic change.

PRIORITIZATION OF OUTCOME DATA MEASURES/SYSTEMIC FACTORS AND STRATEGY RATIONALE

Information obtained through the Peer Review, the CSA process, and the County’s performance in C-CFSR data outcome measures determined what outcomes would be addressed in the SIP. Child Welfare and Probation have agreed to focus on joint outcome measures. In doing so the County will further collaboration between agencies and provide better services to meet the needs of children and families of Siskiyou County. Child Welfare will be focusing on Participation Rates for Entry and In Care separately from Probation. Overall, Siskiyou County is meeting and/or exceeding California’s performance and the national standard for many C-CFSR measures. Child Welfare and Probation agreed to collaborate on the three federal outcome measures that need the most improvement to meet the national standard.

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

Definition

Of all children in foster care during the selected 12-month period who were in care for at least 12 months but less than 24 months, what percent had two or fewer placements?

Q4 2013 C4.2 Placement Stability (12 Months to 24 Months in Care)				
Period	Child Welfare	Probation	California	National Standard
01/01/2013-12/31/2013	45.7	18.2	68.9	65.4

<u>Trend</u>	Q4 2009	Q4 2010	Q4 2011	Q4 2012	Q4 2013
<u>Child Welfare</u>	48.7	70.6	29.0	57.9	45.7
<u>Probation</u>	100.0	58.3	60.0	37.5	18.2

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Sandoval, A., Yee, H., Mason, F., Benton, C., Lou, C., Peng, C., King, B., & Lawson, J. (2014). *CCWIP reports*. Retrieved 5/02/2014, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare

STRATEGY RATIONALE

1. PROVIDE CAREGIVER EDUCATION AND/OR ENHANCE CAREGIVER SUPPORT

As discussed in the Peer Review, foster parents/caregivers do not always have the skill set necessary to maintain placement for children with serious behavioral issues. In an effort to maintain placement stability, the County will seek ways in which foster parents and relative caregivers can gain training and support to better manage these difficult behavioral issues. Sometimes, children develop more behavior problems the longer they are in care. They may become comfortable enough to start expressing rage and grief.

However, these behaviors may cause a child to be moved or disrupt an adoption if the care providers are not prepared to deal with these difficult behaviors.

During the Peer Review process of the CSA, the need for additional caregiver support and training was identified. The peers found that caregivers did not have adequate training and sufficient support required to properly manage difficult behaviors of children/youth in foster care. Moving forward, the County will develop strategies that will connect caregivers with specific support and training. In doing so, caregivers will be provided better tools and support necessary to manage and "parent" foster children/youth with difficult behaviors. This strategy should assist in increasing placement stability.

Providing a good match between a child and a caregiver is key to a stable placement. In the future as new caregivers are identified for placement, they will be provided training and support specific to the needs of the individual child. As caregivers are trained and their skills are developed, the County will have options and the ability to provide "the best match" possible for both the caregiver and the child. These trainings will also be made available to relative and non-related extended family members (NREFM) to increase their skill in dealing with the difficult behaviors of foster youth.

Caregivers will be provided training and education regarding psychotropic medication usage with foster care youth. The training will include expectations of what the medication will do, ways to modify behavior and alternatives to seeking medication, medication adjustment and age appropriate modification. Providing caregivers with training and education regarding psychotropic medication and alternatives should assist in addressing the concerns that the County has in the usage of psychotropic medication with foster care youth.

Child Welfare and Probation want to ensure that caregivers are provided with a list of available resources that provide education and support. Child Welfare provides relative and NREFM caregivers with an orientation handbook at the time of the placement approval process. However, at this early stage caregivers may not feel that additional education and support is needed. Caregivers who do not reach out to social workers and Family Resource Centers may not be aware of the ongoing training and support groups that are available for them to access.

Child Welfare and Probation will identify relative and NREFM caregivers and develop a survey to send to the identified caregivers. Identified caregivers will be invited to participate in focus groups. The information obtained through survey and focus groups will assist Child Welfare and Probation in identifying significant gaps in resources and/or services for caregivers.

A resource list will be developed that social workers and probation placement officers can distribute to caregivers during monthly visits, or as needed. The resource list will be continuously updated to ensure that the information is accurate. Caregivers will be able

to use the list to identify any resources and/or services that would assist them in “parenting” foster youth.

2. CONSIDER REQUIRING RELATIVE AND NREFM CAREGIVERS TO HAVE FOSTER CARE EDUCATION

Counties have the discretion to require relatives and NREFM placements to participate in education and/or training. Siskiyou County will consider requiring relative and NREFM caregivers to complete training through Foster Kinship Care Education or other providers. The County will evaluate current caretaker training needs in order to develop education and training criteria for relatives and NREFMs. By requiring relative and NREFM caregivers to participate in training Child Welfare and Probation may help ensure that these caregivers have the skills necessary to properly manage the difficult behaviors of foster youth. The current procedure for conducting home studies could be modified to include the requirement for relatives and NREFM caregivers to complete the requirement for training.

3. COLLABORATE WITH FOSTER FAMILY AGENCIES (FFAs) REGARDING FOSTER PARENT EDUCATION AND PLACEMENT.

FFAs are responsible for providing training and education to FFA foster parents. The County will develop stronger collaboration with FFAs in order to maximize all available training resources and placement options. Additionally, the County and FFAs will work together to identify whether or not FFA foster parents need and/or require more intensive training. The goal is to provide FFA foster parents with the training and skills necessary to serve both child welfare and probation youth. Increasing education and skill level will assist in placement stability. Efforts will be made to conduct team meetings including foster parents, the FFA social worker and Child Welfare social worker prior to placement changes. This will also assist in identifying the “best possible” match for both the caregiver and the child.

4. DEVELOP PARENT ORIENTATION SUPPORT GROUP

Child Welfare will develop a parent orientation protocol. By engaging parents early in the child welfare case, their engagement in the process will be secured. Parents have many questions as to what is happening with their children and court case. Engaging parents in the process early should decrease their anxiety and frustration, allowing them to focus on services designed to reunify them with their children.

Additionally, Child Welfare will be identifying parent partners who will work with social workers in facilitating the parent orientation support groups. Parent partners will assist in encouraging positive behaviors and sharing their own experiences and stories. At times, parents whose children have been detained are so angry that they tell their children to misbehave in foster care thinking that they will be sent home. In the early stages of a case, parents can be extremely negative about their children’s care providers. By using parent partners to gain the parents’ cooperation, the antagonism

will be reduced and may allow the parents to support their children being in out of home care while the parents get help. The goal is to provide parents with information and support as they work to reunify with their children. The County's performance in placement stability (particularly with relative/NREFM placements) should also increase as parents will be more engaged with the case plan as opposed to "working against the system."

5. IMPLEMENT SAFETY ORGANIZED PRACTICE

Implementation of Safety Organized Practice (SOP) will assist in placement stability and participation rates as it is a solution based, family focused approach to assess the needs, strengths and challenges of the family. Identifying tools and support to safely keep the child in his/her current placement by using a holistic approach which includes the social worker, parents, caregivers, community support and the child (when appropriate) will help maintain stability.

Child Welfare social workers, supervisors and management have attended the three day SOP foundational institute facilitated through University of California, Davis (U.C. Davis). Child Welfare will ensure that new social workers also attend the SOP foundational institute. On an ongoing basis staff will be sent to additional SOP trainings to further develop skills. Child Welfare has partnered with a SOP coach from U.C. Davis and is in the planning stage of implementation of SOP.

Child welfare has developed an implementation team comprised of the deputy director of social services, program manager, emergency response supervisor, court supervisor, staff services analyst, and the SOP coach provided through U.C. Davis. Planning meetings have been scheduled with the SOP coach, the emergency response unit and the court unit. Siskiyou County has six monthly hours of coaching available and these hours will be used to provide social workers with guidance in the use of SOP. In addition, these hours may be used to assist social workers in conducting team meetings to develop safety plans with the family. SOP mapping tools can be used throughout the continuum of the case. Social workers will be able to use these tools to assess the need for "removal" or detention and parents' ability to reunify, as well as a caregiver's ability to provide a stable placement for the child.

6. RECRUIT ANOTHER FOSTER FAMILY AGENCY TO SISKIYOU COUNTY

The lack of foster homes in the county is a factor in placement stability measures. There is one fully staffed FFA in the county, another FFA in the county that has only a couple of foster homes, and a few other foster homes with FFAs that do not have offices in Siskiyou County. There are not enough local foster homes to meet the need so it is not always possible to match the child to a "best possible" placement and often children must be placed out of county. Social workers do an excellent job of seeking out relative and non-related extended family member placements, but it can take time, especially if the relatives live out of the area. If a child is temporarily placed with a foster family

agency or out of county and a home that would be a better fit for that child/family becomes available, the child is moved. If a relative is approved, the child would be moved again. The County does not have a receiving home for emergency placements. Children who are placed in protective custody are placed with a foster family agency on a temporary basis. These temporary placements may turn into a long term placement, but often the child may need to be moved due to the factors listed above.

Probation has many of the same barriers as Child Welfare regarding placement stability and dropped well below the California and the national standard. The lack of local options for placement (Siskiyou County has just one local group home placement and that program is level 12 and only accepts females) is a barrier to reunification efforts and keeping ties to relatives and non-relatives in the community intact. Instability can result when minors are far away and distance prevents intensive family counseling and limits visitation. Minors experience frustration as relationships deteriorate or become distant. When a youth has been in crisis, constantly runs away and/or reoffends while in a group home, many times they will not accept a youth back, even if eligible otherwise.

As cases move beyond 12 months in foster care without reunification or the ability to step-down to a lower level of care, some minors have adverse reactions and lose hope, even in the best placements. Some minors eventually adjust and do well and would like to try living with foster parents, but the lack of foster parents willing to take older teens involved in delinquency court, is especially acute. Although a contract was recently approved for Intensive Treatment Foster Care (ITFC) with a local foster family agency, their primary focus for ITFC appears to be training families to deal with younger children from the Child Welfare system. Foster families willing to work with older teenaged delinquent youth, especially those delinquent youth with mental health issues, are generally non-existent.

In identifying and recruiting an additional foster family agency (FFA) to serve the needs of youth in Siskiyou County, the County hopes to establish more viable local placements. Both Child Welfare and Probation would be better able to facilitate reunification efforts and build and maintain better relationships between the youth and his/her family and community if the child is placed in their county of residence.

7. ESTABLISH A RECEIVING AND/OR EMERGENCY PLACEMENT HOME.

Siskiyou County does not have a receiving or emergency placement home. This makes finding an initial "best possible" placement very difficult. Social workers must initially place with a FFA if relative(s) and/or NREFMs cannot be immediately identified and approved for placement. This impacts Siskiyou County's performance in the Placement Stability outcome measures.

Child Welfare will identify and contact other counties that have had success in establishing a receiving home. Additionally, Child Welfare will contact neighboring small

counties and initiate discussion to explore a joint receiving home. Child Welfare will evaluate recruitment of a receiving home under the County's existing licensing abilities. Child Welfare will also initiate discussions with FFAs in an effort to identify one that is willing and able to provide a receiving or emergency placement home. A model will be developed for the receiving home to ensure that the needs of foster youth and Child Welfare will be met.

An emergency placement home could assist the County to improve in Placement Stability outcome measures. The County would have a designated temporary placement for children in custody that would take care of children under seven days while relatives and/or NREFMs are identified and approved for placement. The County acknowledges that this placement would count as a placement change if the temporary placement exceeded the seven day period. However, the emotional tone in the home would be more conducive to relieving anxiety and reducing acting out behavior. Children could be told they would be in the home temporarily until a relative placement or safety plan was developed. This may reduce the children's anxiety and acting out behavior rather than being told "we don't know how long you are going to stay here." The caretakers in this home could be trained to do simple assessments and take notes of children's behaviors so that, in the event a return to parents or placement with a relative/NREFM is not possible, social workers could conduct the search for foster parents with information to identify the "best possible" match between children and caretakers. This should reduce multiple placements.

2F TIMELY CASEWORKER VISITS WITH CHILDREN

Definition

Of all completed contacts, how many occurred in the client's residence? At least 50% of contacts must occur in the client's residence.

2F Timely Caseworker Visits with Children (Out of Home)					
Period	Timely Monthly Caseworker Visits			National Standard	
	Child Welfare	Probation	California	Timely Monthly Caseworker Visits	Visits in Residence
Q4 2013	84.8	99.1	94.2	90	50
Q4 2012	85.3	84.3	93.7	90	50
Q4 2011	80.9	N/A	92.0	90	50
Q4 2010	84.6	N/A	89.1	90	50
Q4 2009	77.1	N/A	86.7	90	50

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Sandoval, A., Yee, H., Mason, F., Benton, C., Lou, C., Peng, C., King, B., & Lawson, J. (2014). *CCWIP reports*. Retrieved 5/02/2014, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare

STRATEGY RATIONALE

8. IMPLEMENT CONTINUOUS QUALITY IMPROVEMENT

The federal standard for this measure has been raised from 90% to 95%. It has been determined that some social workers do not complete their monthly visits until the last week of the month and the visits are not entered into CWS/CMS prior to the end of the month. Developing a continuous quality improvement (CQI) protocol will address identified areas such as the timely data entry of social worker and/or placement officer monthly visits. In September 2014, Child Welfare identified twenty-two contacts that were entered into CWS/CMS eight to fourteen days after the contact occurred; twenty-two contacts that were entered fifteen to twenty-eight days after the contact; and four contacts entered more than forty-two days after the contact occurred. CQI will be used to monitor data entry for accuracy and timeliness.

As part of continuous quality improvement, Child Welfare will host a U.C. Davis facilitated training that will provide social workers and placement probation officers information and tools to develop better time management skills, set priorities, organize their caseloads, and be proactive rather than reactive when managing their work. The training will emphasize the need for timely entry of social worker and placement officer monthly visits in the CWS/CMS system.

Child Welfare supervisors will use CQI as a coaching tool that will be included in the social worker performance evaluation. A comprehensive case review form will be developed to be used by Child Welfare supervisors at the time of case plan approval, case plan updates, and focused reviews. The case review and data from SafeMeasures® will assist supervisors and the program manager in monitoring timely data entry of social worker contacts, as well as, ensure that all Adoption and Foster Care Statistics (AFCARS) are entered into CWS/CMS for each child welfare case.

For timely case worker visits, the CQI strategy starts with training provided by U.C. Davis which will include associated CWS/CMS training geared for probation. The training will assist probation in readily identifying and addressing all required data entry points. Probation will focus on the continued use of Safe Measures to ensure data is being entered in the required time frames.

Many of the strategies that address placement stability will also have a positive impact on timely caseworker visits with children. As the number of local foster homes increases, more children will be able to be placed in county. Consequently, social workers and placement probation officers will not have the barriers associated with frequent travel out of county. The following strategies identified under placement stability will also impact timely caseworker visits:

- Providing and/or enhancing caregiver support;
- Collaborate with FFAs regarding foster parent education and appropriate placement;

- Implementation of Safety Organized Practice;
- Recruit another FFA to Siskiyou County.

5F PSYCHOTROPIC MEDICATIONS

Definition

What percent of children in foster care have a court order or parental consent that authorizes the child to receive psychotropic medication?

Q4 2013 5F Psychotropic Medications			
Period	Siskiyou	California	National Standard
10/01/2013-12/31/2013	18.1	12.4	N/A

<u>Trend</u>	Q4 2009	Q4 2010	Q4 2011	Q4 2012	Q4 2013
	13.3	16.8	12.6	15.0	18.1

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Sandoval, A., Yee, H., Mason, F., Benton, C., Lou, C., Peng, C., King, B., & Lawson, J. (2014). *CCWIP reports*. Retrieved 5/02/2014, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare

STRATEGY RATIONALE

9. EDUCATE STAKEHOLDERS AND THE COMMUNITY REGARDING THE USE OF PSYCHOTROPIC MEDICATION AMONG CHILDREN AND YOUTH IN FOSTER CARE.

There is new and significant body of information highlighting an increase in the dispensing of psychotropic medications to children in foster and group homes that is above the average for those youth not in foster care. Subsequently, the State of California and multiple concerned parties have focused on this outcome measure. Any rise above the average is cause for careful evaluation of current strategies to be certain there are appropriate safeguards in place. Concern has been expressed by the Juvenile Court judge, attorneys, caregivers, social workers, probation officers, and medical providers regarding the number of psychotropic medications prescribed to children in out of home care.

10. REVIEW AND REVISE CURRENT AUTHORIZATION PROCESS OF PSYCHOTROPIC MEDICATION

The current medication authorization process will be reviewed with appropriate stakeholders and revised as necessary. The desire is to devise a system in which other options are explored prior to and during treatment with psychotropic medication. The high percentage of foster children on psychotropic medication is concerning. There is also a growing concern that foster youth are prescribed too many medications. The effectiveness of the medication may not be known prior to changing or adding medication. Foster youth may not be receiving age appropriate services such as counseling, or engaging in sports to dissipate excessive energy that may assist the youth

without the need for psychotropic medication. The long term effects of psychotropic medication is not known, especially when medication has not been “normed” on children.

As identified under the strategies for Placement Stability, providing education to caregivers will also assist in addressing concerns related to psychotropic medication usage; as caregivers are provided with education and training they will develop a better understanding of the expectations and usage of psychotropic medication.

PARTICIPATION RATE: ENTRY

Definition

The rate of children entering care per every 1,000 children in the total population.

Participation Rate: Entry			
Period	Child Welfare	California	National Standard
Q4 2013	10.7	3.5	N/A
Q4 2012	8.3	3.4	N/A
Q4 2011	9.3	3.3	N/A
Q4 2010	7.8	3.3	N/A
Q4 2009	9.5	3.4	N/A

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Sandoval, A., Yee, H., Mason, F., Benton, C., Lou, C., Peng, C., King, B., & Lawson, J. (2014). *CCWIP reports*. Retrieved 5/02/2014, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare

PARTICIPATION RATE: IN CARE

Definition

The rate of children in care per every 1,000 children in the total population.

Participation Rate: In Care			
Period	Child Welfare	California	National Standard
Q4 2013	12.1	5.8	N/A
Q4 2012	10.9	5.6	N/A
Q4 2011	9.6	5.8	N/A
Q4 2010	13.3	5.9	N/A
Q4 2009	13.1	6.4	N/A

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Sandoval, A., Yee, H., Mason, F., Benton, C., Lou, C., Peng, C., King, B., & Lawson, J. (2014). *CCWIP reports*. Retrieved 5/02/2014, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare

STRATEGY RATIONALE

11. INCREASE/ENHANCE FAMILY FINDING EFFORTS

In an effort to reduce entry and in care rates there will be more focus placed on family finding. Family finding will be integrated into the investigation process of suspected child abuse referrals. Efforts will be made to identify and locate potential voluntary relative placements prior to the removal of the child(ren).

12. INVESTIGATE THE NEED FOR A SOCIAL WORKER DEDICATED TO FAMILY FINDING AND VOLUNTARY FAMILY MAINTENANCE.

Social worker caseloads and the number of suspected child abuse referrals will be reviewed and analyzed. It is necessary to review current staffing to determine the need for a dedicated family finding/voluntary family maintenance (VFM) worker. A dedicated social worker would be able to focus on family finding efforts and manage VFM cases which would assist in reducing both entry and in care rates. In the event that the County is unable to dedicate a social worker to family finding and voluntary family maintenance, all social workers will be responsible for family finding efforts. This will not impact the Differential Response program through the Community Services Council, because VFM families will have more complex issues and are served primarily by county social workers rather than the community-based organization.

As discussed under placement stability, Safety Organized Practice (SOP) will be fully implemented throughout the continuum of care. SOP implementation in the Emergency Response unit will assist in reducing the number of children entering care. SOP training will increase emergency response social workers' ability to develop effective safety plans in order for children to remain in their home.

PRIORITIZATION OF DIRECT SERVICE NEEDS

1. CAPIT

The Siskiyou Community Services Council (CSC) was selected through a competitive process, to work with the ten Siskiyou Family Resource Centers (FRCs) to provide a comprehensive, coordinated, strategic response to child abuse and neglect via local education, coordination and family support for those at risk of entry to the child welfare system. The CSC contracts with Child Welfare to coordinate Differential Response, providing voluntary and community-based services for families identified as being at-risk. Families referred by CPS receive services such as home visitation, parenting education, referrals and many other support services provided by the Resource Centers and their agency partners.

2. CBCAP

CBCAP funds support child abuse prevention network development through the Siskiyou Community Services Council (CSC)—Siskiyou County’s designated Child Abuse Prevention Council. The CSC has adopted the evidence-informed “Strengthening Families Protective Factor Framework” in the prevention of child abuse and neglect. The CSC supports the ongoing capacity development of the Siskiyou Family Resource Network of ten family resource centers (FRCs), which implement protective factor strategies in essentially every Siskiyou County community. Through the development of multiple local and foundation partnerships, the CSC leverages CBCAP funds. Matching resources support implementation of a wide array of evidence-based, evidence-informed, best practice and local innovative prevention early intervention programs and practices.

3. PSSF

As evidenced in the CSA, infants are the population at greatest risk of child maltreatment. The Time Limited Reunification, Family Support, and Family Preservation components of Promoting Safe and Stable Families (PSSF) funds are used to provide mental health, drug and alcohol, and parenting services through the newly redesigned Health, Innovation, Responsibility, Employment (H.I.R.E.) Program for identified child welfare clients. By blending CalWORKs funding and PSSF funding, Siskiyou County has been able to create a mental health/substance abuse program (H.I.R.E.) designed to meet the needs of both child welfare and CalWORKs clients.

The H.I.R.E. program partners with parents to address their mental health and substance abuse issues and remove barriers to employment. This is done by providing assessment, individual therapy and group work related to anger management, anxiety, alcohol and/or drug issues, relapse prevention, depression, stress management, trauma, and relationship/communication issues. The H.I.R.E. team is dedicated to providing holistic care with on-site clinical work and life skills coaching. Nurturing Parenting curriculum is evidence based and used in the program. The Nurturing Parenting program is designed to build nurturing parenting skills as an alternative to abusive and neglectful parenting and child-rearing practices. The program is designed to empower individuals and families with new knowledge and skills.

Adoption Promotion and Support funds are used to bring nationally known speakers to Siskiyou County to educate adoptive parents, caregivers, social workers and the community regarding adoption and issues faced by adoptive families, the children, and to support adoptive parents in their adoption of children from the foster care system. These funds are combined with funding from other community based organizations, such as First Five Commission, College of the Siskiyous Foster Kinship Caregiver Education program, Community Services Council, Oregon Parenting Education Collaborative, Karuk Tribe, McCloud Healthcare Clinic, and Remi Vista. A portion of this funding is also be used to pay for needed services (such as specialized testing) that will

help to finalize an adoptive placement when the funding is not available from other sources. This collaboration yielded extremely positive results.

Child Welfare/Probation Placement Initiatives

A. Child Welfare Placement Initiatives

Child Welfare and Behavioral Health staff have formed a close working collaboration providing appropriate mental health services to children in the Katie A. subclass. Monthly meetings are held which include a case manager from the Behavioral Health Division, the program manager of Adult & Children's Services, the court supervisor for child welfare, the site supervisor for Children's System of Care, the deputy director for the Social Services Division and the deputy director of Clinical Services. This is a skilled working group of dedicated professionals who are committed to the successful implementation of Katie A. requirements and protocols. Issues are brought forward and discussed and decisions made. The required six month update reports have been submitted to the state in a timely manner. Family team meetings are occurring on a monthly basis and thirteen children have been returned home safely due, at least in part, to this collaborative effort.

Child Welfare has successfully implemented AB 12 and has four youth currently utilizing this program. Because the foster care eligibility worker is co-located with Adult & Children's Services, questions about eligibility and Non-Minor Dependent requirements for the program can be quickly answered.

B. Probation Placement Initiatives

The Probation Department has successfully managed and continues to manage multiple youth who have entered into Non-Minor Dependency and the Fostering Connections After 18 Program. Several youth are attending college, have employment, and maintain independent and stable residency. Several youth have voiced their appreciation for the program and the continued rapport with the officers.

Probation has two cases that were eligible for Katie A. services. Probation was involved in a collaborative Katie A. planning meeting for one case where the youth ended up back in custody and placement, and one case which opted for continued services through a private provider rather than County Behavioral Health. The cooperative Katie A. planning for an eligible case has thus far met the needs of the youth to the extent they were in a position to receive them.

Through successful pre-placement efforts to keep families intact or youth placed with relatives, and successful reunification with other viable relatives through family finding efforts, the

Probation Department has reduced the need for placement from over twenty youth in group homes in 2012 to just two in group homes as of June 2014.

5 – YEAR SIP CHART

Priority Outcome Measure or Systemic Factor: C4.2 Placement stability (12-24 months in care)

National Standard: 65.4%

CSA Baseline Performance: Q4 13: 44.4% (CWS), 18.2% (Probation)

Target Improvement Goal:

CWS: By February 2020, placement stability for 12-24 months in care will increase to 54.4%.

Probation: By February 2020, placement stability for 12-24 months in care will increase to 45.4%.

Priority Outcome Measure or Systemic Factor: 2F Monthly Visits (Out of Home)

National Standard: 90.0%

CSA Baseline Performance: Q4 13: 87.1% (CWS), 99.1% (Probation)

Target Improvement Goal:

CWS: By February 2016, child welfare 2F Monthly Visits (Out of Home) will increase to 95.0%.

Probation: By February 2016, Probation 2F Monthly Visits (out of Home) will remain at a minimum of 95%.

Priority Outcome Measure or Systemic Factor: 5F Authorization for Psychotropic Medication

~~National Standard~~ **California Baseline Performance:** Q4 13: 12.4%

CSA Baseline Performance: Q4 13: 18.4% (CWS), Probation: CDCR-CPOC/Children's Mental Health Research and Policy Study 2002-2009: 17%

Target Improvement Goal:

CWS: By February 2020, authorization for psychotropic medication will decrease to 12%.

Probation: By February 2020, authorization for psychotropic medication will decrease to 11%.

Priority Outcome Measure or Systemic Factor: Participation Rates: Entry Rates

~~National Standard~~ **California Baseline Performance: Q4 13: 3.5%**

CSA Baseline Performance: Q4 13: 10.7% (Child Welfare)

Target Improvement Goal:

CWS: By February 2020, entry rates will decrease to 7% (CWS).

Priority Outcome Measure or Systemic Factor: Participation Rates: In Care Rates

~~National Standard~~ **California Baseline Performance: Q4 13: 5.8%**

CSA Baseline Performance: Q4 13: 12.1% (Child Welfare)

Target Improvement Goal:

CWS: By February 2020, in care rates will decrease to 8%.

<p>Strategy 1: Provide caregiver education and/or enhance caregiver support.</p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF	<p>Applicable Outcome Measure(s) and/or Systemic Factor(s): C4.1, C4.2, C4.3 Placement stability C2.1, C2.2 Adoption 5F Psychotropic Medication</p>
<input checked="" type="checkbox"/> N/A		<input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project
<p>Action Steps:</p>	<p>Implementation Date:</p>	<p>Completion Date:</p> <p>Person Responsible:</p>
<p>A. Identify care givers and develop survey regarding educational and/or support needs.</p>	<p>November and December 2014</p>	<p>Staff Services Analyst and Juvenile Placement Officer</p>
<p>B. Implement focus groups and surveys with current care providers and parents.</p>	<p>January 2015</p>	<p>ER Supervisor, Court Supervisor, and Program Manager</p>
<p>C. Identify resources that currently support the care giver needs and any significant gaps in resources/services.</p>	<p>February 2015</p>	<p>All staff</p>
<p>D. Develop a one page resource list and provide to social workers and/or probation officers for distribution to caregivers.</p>	<p>February 2015</p>	<p>Staff Services Analyst and Juvenile Probation Officer</p>

<p>E. Strengthen the relationship with the Foster Kinship Care Education program at COS to ensure offerings address caregiver educational needs.</p>	<p>November 2014</p>	<p>Program Manager, Deputy Director, and Deputy Chief Probation Officer</p>
<p>F. Reduce any confidentiality issues via modification of existing Memorandum of Understanding (MOU) between Siskiyou County Health and Human Services Agency and the Foster Kinship Care Education program.</p>	<p>March 2015</p>	<p>Program Manager, Deputy Director, Director of Social Services</p>
<p>G. Develop a system to connect caregivers with support.</p>	<p>June 2015</p>	<p>Program Manager, Deputy Director, and Deputy Chief Probation Officer</p>
<p>H. Identify concrete strategies for social workers and placement officers to provide support for caregivers.</p>	<p>July 2015</p>	<p>Program Manager, Deputy Director, Staff Services Analyst, and Deputy Chief Probation Officer</p>
<p>I. Develop procedure for social workers and placement officers to follow in providing caregiver support.</p>	<p>August 2015</p>	<p>Program Manager, Staff Services Analyst, and Deputy Chief Probation Officer</p>
<p>J. Train social workers and placement officers on procedure.</p>	<p>January 2016</p>	<p>Program Manager, Staff Services Analyst, and Deputy Chief Probation Officer</p>
<p>K. Monitor and evaluate social worker and Probation officer usage of resource list and providing support to caregivers.</p>	<p>January 2016</p> <p>Ongoing</p>	<p>Program Manager, Staff Services Analyst, Supervisors and Deputy Chief Probation Officer.</p>

L. Evaluate placement stability outcomes of caregivers receiving education and support.	January 2016	Ongoing	Program Manager, Staff Services Analyst, Supervisors and Deputy Chief Probation Officer.
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Strategy 2: Consider requiring relative and NREFM caregivers to have foster care education.	<input type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): C4.1, C4.2, C4.3 Placement stability C2.1, C2.2 Adoption 5F Psychotropic Medication <input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Identify and investigate other counties that have relative/NREFM education requirements.	January 2019		Program Manager, Staff Services Analyst
B. Review pros/cons of establishing caregiver education requirements.	March 2019		Director of Social Services, Deputy Director, Program Manager, and Staff Services Analyst
C. If appropriate, develop county policy for requiring relatives/NREFMs to complete an education requirement.	May 2019		Director of Social Services, Deputy Director, Program Manager, and Staff Services Analyst

<p>Strategy 3: Collaborate with foster family agencies (FFAs) regarding foster parent education and appropriate placement.</p>	<input type="checkbox"/> CAPIT	<p>Applicable Outcome Measure(s) and/or Systemic Factor(s): C4.1, C4.2, C4.3 Placement stability C2.1, C2.2 Adoption 5F Psychotropic Medication 2F Monthly Caseworker Visits (Out of Home) <input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project</p>	
	<input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		
<p>Action Steps:</p>		<p>Completion Date:</p>	<p>Person Responsible:</p>
<p>A. Determine the level of education that FFA foster parents are receiving.</p>	<p>July 2015</p>		<p>Program Manager, Supervisors and FFAs</p>
<p>B. Identify additional and/or more intensive trainings that FFA foster parents need to meet the needs of Siskiyou County youth.</p>	<p>August 2015</p>		<p>Program Manager, Supervisors and FFAs</p>
<p>C. Strengthen the relationship between Child Welfare and FFAs to align "best possible" placement match, through monthly meetings.</p>	<p>September 2015</p>		<p>Program Manager, Supervisors and FFAs</p>
<p>D. Conduct team meetings including foster parents, FFA and child welfare social worker prior to placement changes.</p>	<p>October 2015</p>		<p>Program Manager, Supervisors, Social Workers</p>
<p>E. Monitor and evaluate the effectiveness this strategy has had on placement stability.</p>	<p>November 2015</p>	<p>Ongoing</p>	<p>Program Manager, Supervisors, Staff Services Analyst</p>

Strategy 4: Develop parent orientation support group.	<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): C4.1, C4.2, C4.3 Placement stability C1.1, C1.2, C1.3, C1.4 Reunification <input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project
Action Steps:	Implementation Date:	Person Responsible:
A. Visit other counties that have developed parent orientation groups.	February 2017	Program Manager, Supervisors and Staff Services Analyst
B. Determine length and intent of the program (i.e., ongoing, or set number of sessions).	April 2017	Program Manager, Supervisors and Staff Services Analyst, Social Workers
C. Identify potential parent partners to assist with orientations.	May 2017	Program Manager, Supervisors and Staff Services Analyst, Social Workers
D. Develop a frequently asked questions (FAQs) sheet for parents with newly detained children.	August 2017	Program Manager, Supervisors and Staff Services Analyst
E. Develop pre and post program client survey.	October 2017	Program Manager, Supervisors and Staff Services Analyst
F. Identify staff to facilitate orientation.	November 2017	Program Manager, Supervisors and Staff Services Analyst

G. Develop and implement parent orientation protocol and group	January 2018		All staff
H. Modify the Orientation Group materials, such as the FAQs, building upon information gained from the participants in the group	March 2018	Ongoing	Program Manager, Supervisors and Staff Services Analyst
I. Monitor and evaluate participation in the orientation on placement stability and reunification outcomes.	March 2018	Ongoing	All staff

Strategy 5: Implement Safety Organized Practice	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF			Applicable Outcome Measure(s) and/or Systemic Factor(s): C4.1, C 4.2, C4.3 Placement stability Participation Rates: Entry, In Care
	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project	Person Responsible:	
Action Steps:	Implementation Date:	Completion Date:	Person Responsible:	
A. Supervisors to attend U.C. Davis coaching session on SOP.	November 2014		Program Manager and Supervisors	
B. Work with UC Davis facilitator to design a plan for full SOP implementation.	November 2014		Program Manager and Supervisors	
C. Incorporate individual social worker conferences, no less than twice monthly for coaching follow up on SOP practices.	December 2014		Supervisors	
D. Track training of staff and supervisors.	November 2014	Ongoing	Staff Services Analyst and Supervisors	
E. Integrate SOP as the standard for all child welfare social work interventions.	June 2015		Program Manager, Supervisors and Staff Services Analyst	
F. Develop a case review process to ensure full utilization of SOP.	June 2015		Program Manager and Supervisors	
G. Evaluate the effect of SOP implementation on participation rates.	July 2015	Ongoing	Program Manager, Supervisors and Staff Services Analyst	

<p>Strategy 6: Recruit another foster family agency to Siskiyou County.</p> <p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p>Applicable Outcome Measure(s) and/or Systemic Factor(s): C4.1, C4.2, C4.3 Placement stability 2F Monthly Caseworker Visits (Out of Home) C1.1, C1.2, C1.3, C1.4 Reunification <input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project</p>		
<p>Action Steps:</p>	<p>Implementation Date:</p>	<p>Completion Date:</p>	<p>Person Responsible:</p>
<p>A. Identify foster family agencies with a successful history of serving children/youth.</p>	<p>January 2016</p>		<p>Deputy Chief Probation Officer, Program Manager, Staff Services Analyst</p>
<p>B. Invite potential foster family agencies to tour Siskiyou County, Charlie Byrd Youth Correctional Center.</p>	<p>June 2016</p>		<p>Deputy Chief Probation Officer, Program Manager, Staff Services Analyst</p>
<p>C. Request interested foster family agencies to provide program descriptions that would meet the needs of Siskiyou County children/youth.</p>	<p>June 2016</p>		<p>Deputy Chief Probation Officer, Program Manager, Staff Services Analyst</p>
<p>D. Review information received from foster family agencies and determine the "best match" for Siskiyou County.</p>	<p>August 2016</p>		<p>Deputy Chief Probation Officer, Program Manager, Staff Services Analyst</p>
<p>E. Contact identified foster family agency and propose opening an office in Siskiyou County.</p>	<p>November 2016</p>		<p>Deputy Chief Probation Officer, Director of Social Services</p>
<p>F. Evaluate the impact this strategy has had on outcome measures.</p>	<p>January 2017</p>	<p>Ongoing</p>	<p>Deputy Chief Probation Officer, Program Manager, Supervisors and Staff Services Analyst</p>

Strategy 7: Establish a receiving and/or emergency placement home.	<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): C4.1, C4.2, C4.3 Placement stability
	<input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project		
Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Contact and visit other counties with successful receiving homes.	July 2015		Program Manager, Supervisors, and Staff Services Analyst
B. Consider and/or explore recruitment of a receiving home under the County's existing licensing abilities.	September 2015		Deputy Director, Program Manager, Supervisors, and Staff Services Analyst
C. Identify a FFA that is willing to provide a receiving and/or emergency placement home.	November 2015		Program Manager, Supervisors
D. Discuss possibility of a joint receiving home with neighboring small counties.	October 2016		Program Manager, Supervisors
E. Develop a model for receiving home to meet the needs of youth and Child Welfare.	October 2017		Program Manager, Supervisors, and Staff Services Analyst
F. Identify specific foster parent(s) willing to be a receiving and/or emergency placement.	January 2018		Program Manager, Supervisors and FFA
G. Evaluate the effect of the receiving home on placement stability outcomes.	February 2018	Ongoing	Program Manager, Supervisors and Staff Services Analyst

Strategy 8: Implement Continuous Quality Improvement (CQI)	<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): 2F Monthly Visits (Out of Home). <input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project
	Implementation Date:	Completion Date:	
Action Steps:			
A. Discuss the goals of CQI and review other counties implementation of CQI.	March 2015		Program Manager, Supervisors and Staff Services Analyst
B. Provide time management, data entry and organizational skills training facilitated by UC Davis to all social workers and placement officers.	Spring 2015		Program Manager and Deputy Chief Probation Officer
C. Identify strategies for implementing CQI according to different child welfare functions (i.e., family maintenance, family reunification, permanence, and supportive transition)	July 2015		Program Manager, Supervisors and Staff Services Analyst
D. Determine plan for implementation including training, coaching and data collection.	August 2015		Program Manager, Supervisors and Staff Services Analyst
E. Develop a case review form.	October 2015		Program Manager, Supervisors and Staff Services Analyst
F. Develop a case review procedure.	October 2015		Program Manager, Supervisors and Staff Services Analyst
G. Implement CQI and use of case review form.	January 2016		Program Manager, Supervisors and Staff Services Analyst

H. Provide additional training to identified staff for data pulls and monitoring	December 2014		Program Manager
I. Review current staffing to determine if staff reassignment would be beneficial.	January 2016		Program Manager, Supervisors, and Staff Services Analyst
J. Monitor and evaluate the effect CQI has on outcome measures.	February 2016	Ongoing	Program Manager, Supervisors, and Staff Services Analyst

Strategy 9: Educate stakeholders and the community regarding the use of psychotropic medication among children and youth in foster care.	<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): 5F Authorization of Psychotropic Medication <input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project	
	Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Identify the partners and providers.	January 2015			Program Manager, Staff Services Analyst
B. Arrange a community forum facilitated by UC Davis to share information and educate community members about psychotropic medication use in the foster care system.	March 2015			Program Manager
C. Determine what further "information" is needed and who should receive it.	April 2015			Program Manager, Deputy Director, Staff Services Analyst, and Deputy Chief Probation Officer
D. Monitor participation of caregivers and effect on placement stability.	May 2015		Ongoing	Program Manager, Supervisors, and Staff Services Analyst

Strategy 10: Review and revise current psychotropic medication authorization process	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		Applicable Outcome Measure(s) and/or Systemic Factor(s): 5F Authorization of Psychotropic Medication <input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project
	Implementation Date:	Person Responsible:	
Action Steps:	Completion Date:		
A. Analyze specifics of caseload and what is affecting stats.	June 2015		Program Manager, Deputy Director, Staff Services Analyst, Emergency Response Supervisor, Court Unit Supervisor, and Deputy Chief Probation Officer
B. Review existing authorization system.	August 2015		Program Manager, Deputy Director, Staff Services Analyst, Emergency Response Supervisor, Court Unit Supervisor, and Deputy Chief Probation Officer
C. Create/Implement a system for a more thorough review of medication necessity.	May 2016		Program Manager, Deputy Director, Staff Services Analyst, Emergency Response Supervisor, Court Unit Supervisor, and Deputy Chief Probation Officer
D. Establish workgroup meetings on a quarterly basis to discuss progress.	May 2016		Program Manager, Deputy Director, Staff Services Analyst, Emergency Response Supervisor, Court Unit Supervisor, and Deputy Chief Probation Officer
E. Monitor progress in reducing psychotropic medication usage.	July 2016	Ongoing	Program Manager, Supervisors, and Staff Services Analyst

Strategy 11: Increase/enhance family finding efforts.	<input type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): 2F Monthly Caseworker Visits (Out of Home) Participation Rates: Entry, In Care Placement Stability
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project
Action Steps:	Implementation Date:	Completion Date:
A. Review current family finding procedure and determine the need for an updated procedure.	January 2015	Emergency Response Supervisor and social workers
B. Include family finding as part of the investigation in emergency response.	February 2015	Program Manager, Emergency Response Supervisor and Staff Services Analyst
C. Review the need for additional family finding training.	March 2015	Program Manager, Supervisors, Staff Services Analyst
D. Monitor effectiveness of family finding efforts.	April 2015	Program Manager, Supervisors, Staff Services Analyst

Strategy 12: Investigate the need for a social worker dedicated to family finding/ voluntary family maintenance.	<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): 2F Monthly Caseworker Visits (Out of Home) Participation Rates: Entry, In Care <input type="checkbox"/> Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project
Action Steps:	Implementation Date:	Completion Date: Person Responsible:
A. Review current caseloads and the number of suspected child abuse referrals received.	June 2016	Program Manager, Deputy Director, Staff Services Analyst, and Supervisors
B. Review current caseloads for staff redistribution.	July 2016	Program Manager, Deputy Director, Staff Services Analyst, and Supervisors
C. Evaluate the need for an assigned or additional social worker designated to family finding/VFM and working with families prior to the removal of children.	October 2016	Program Manager, Deputy Director, Staff Services Analyst, and Supervisors
D. Implement, if appropriate, and monitor effectiveness against participation rates.	October 2016	Ongoing Program Manager, Supervisors, Staff Services Analyst

CAPIT/CBCAP/PSSF Expenditure Workbook
Proposed Expenditures
Worksheet 1

Appendix X

(1) DATE SUBMITTED: 1/9/15 thru 1/29/2015
 (2) DATES FOR THIS WORKBOOK: 1/31/20 thru Internal Use Only
 (3) DATE APPROVED BY OCAP: Internal Use Only
 (4) COUNTY: Siskiyou
 (5) PERIOD OF SIP: 2/1/15 thru
 (6) YEARS: thru

(7) ALLOCATION (Use the latest Fiscal or All County Information Notice for Allocation):		CAPIT: \$ 60,000		CBCAP: \$26,541		PSSF: \$34,067		TOTAL									
No.	Program Name	Applies to CBCAP Programs Only	Name of Service Provider	D1	D2	Service Provider is Unknown, Date Revised Workbook to be Submitted to OCAP	CAPIT	CBCAP	PSSF	OTHER SOURCES	NAME OF OTHER	TOTAL					
							E1	F1	G1	G2	G3	G4	G5	G6	H1	H2	I
							Dollar amount to be spent on CAPIT Programs	Dollar amount to be spent on CBCAP Programs	Dollar amount to be spent on Family Preservation	Dollar amount to be spent on Family Support	Dollar amount to be spent on Time Limited Reunification	Dollar amount to be spent on Adoption Promotion & Support	Dollar amount of PSSF allocation to be spent on PSSF activities (Sum of columns G1-G4)	PSSF is used for Administration	Dollar amount from other sources	List the name(s) of the other funding source(s)	Total dollar amount to be spent on this Program (Sum of Columns E, F, G)
1	Differential Response		Community Services Council				\$60,000	\$0	\$0				\$0		\$0		\$60,000
2	Prevention Network Development	Network Development	Community Services Council					\$26,541	\$0	\$0	\$0	\$0	\$0		\$891,599	First 5, Ford Family Foundation, MHSA PEI, Siskiyou County, Kinship, Oregon Parenting Education Collaborative	\$918,140
3	Adoption Promotion Activities		Community Services Council				\$0	\$0	\$0	\$0	\$0	\$6,813	\$6,813		\$0		\$6,813
4	H.I.R.E.		Behavioral Health/Social Services Collaborative				\$0	\$0	\$9,084	\$9,085	\$9,085	\$0	\$27,254		\$0		\$27,254
5							\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0		\$0
10							\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0		\$0
15							\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0		\$0
	Totals						\$60,000	\$26,541	\$9,084	\$9,085	\$9,085	\$6,813	\$34,067		\$891,599		\$1,012,207
							27%	27%	27%	27%	27%	20%	100%				

**CAPIT/CBCAP/PSSF
PROGRAM AND EVALUATION DESCRIPTION**

PROGRAM NAME

Health, Innovation, Responsibility, Employment (H.I.R.E.)

SERVICE PROVIDER

Behavioral Health/Social Services Collaborative

PROGRAM DESCRIPTION

The H.I.R.E. ground program assists CalWORKs and Child Welfare parents to address mental health and substance abuse issues and remove barriers to employment by addressing issues such as anger management, anxiety coping skills, relapse prevention, depression, stress management, trauma, and relationship/communication issues through assessment, individual therapy and group work. The H.I.R.E. ground team is dedicated to providing holistic care with on-site clinical work, life skills coaching, and group therapy.

FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Behavioral health, mental health services Substance abuse services
PSSF Family Support	Behavioral health, mental health services Substance abuse services
PSSF Time-Limited Family Reunification	Behavioral health, mental health services Substance abuse services
PSSF Adoption Promotion and Support	
OTHER Source(s): CalWORKs Mental Health/Substance Abuse Allocation	Behavioral health, mental health services Substance abuse services

IDENTIFY PRIORITY NEED OUTLINED IN CSA

- Poverty, mental illness, substance abuse and domestic violence contribute to the neglect and abuse of children. (CSA, pg. 17)

TARGET POPULATION

Parents participating in the CalWORKs program and/or Child Welfare Services.

TARGET GEOGRAPHIC AREA

Siskiyou County

TIMELINE

SIP cycle, February 1, 2015 – January 31, 2020

EVALUATION

Desired Outcome	Indicator	Source of Measure	Frequency
Increased parental resilience	Parents develop better coping mechanisms, anger management skills, and parenting skills.	Completion of program.	Beginning and/or end of the child welfare case plan.

CLIENT SATISFACTION

Method or Tool	Frequency	Utilization	Action
Satisfaction Survey	Paper-based Pre & Post Parent Survey	Improve quality and availability of services.	Issues discussed with H.I.R.E. staff and participants and steps taken to resolve issues and offer continuous quality improvement.

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM NAME

Prevention Network Development

SERVICE PROVIDER

Community Services Council (CSC)

PROGRAM DESCRIPTION

Through the development of multiple partnerships and leveraging of CBCAP funds, the CSC works to develop a comprehensive countywide framework of prevention – early intervention programs and practices. Through the ongoing capacity development of the Siskiyou Family Resource Network of ten family resource centers (FRCs), as well as a broad range of service providers, protective factor strategies and quality prevention/early intervention programming is accessible to families throughout Siskiyou County.

FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	Network Development
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	

IDENTIFY PRIORITY NEED OUTLINED IN CSA

General Neglect makes up, by far, the largest category of allegations reported to Child Welfare Services. Poverty, mental illness, substance abuse and domestic violence contribute to the neglect and abuse of children. Isolation, lack of resources and difficulty in obtaining transportation to services factor in to neglect. (CSA, pg. 17)

TARGET POPULATION

Families in the community at-large and families at risk of abusing and/or neglecting their children.

TARGET GEOGRAPHIC AREA

Siskiyou County

TIMELINE

SIP cycle, February 1, 2015 - January 31, 2020

EVALUATION**PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING**

Desired Outcome	Indicator	Source of Measure	Frequency
Increased access to quality prevention and early intervention programs and services	<ol style="list-style-type: none"> 1. Community Based FRCs offer evidence based, informed and community/culturally relevant best practice prevention and services and support programs 2. Number of parents/caregivers/families participating in services and support programs 3. Number of programs/services provided in outlying communities 	Agency/Service Provider Records	Annual reports provided to the county
Increased knowledge, skills and ability of those providing prevention/early intervention services	<ol style="list-style-type: none"> 1. Number of professional development trainings 2. Number of individuals attending professional development trainings 3. Number of organizations represented 	Flyers Sign-in sheets Registration forms Participant satisfaction /evaluation	Annual reports provided to the county
Sustainability of prevention – early intervention programs and services	<ol style="list-style-type: none"> 1. Amount of funding available to support prevention-early intervention programs and services. 2. Number of funding partners 	Program budgets Inventory of funding partners	Annual reports provided to the county
Confirmed effectiveness of prevention early – intervention program and services	<ol style="list-style-type: none"> 1. Number of programs and services utilizing evaluation tools 2. Evaluation outcomes tools demonstrating improved family 	Inventory of programs and associated evaluation tools used	Annual reports provided to the county

	functioning outcomes	Program specific evaluation tools (i.e. AAPI, Parenting Skills Ladder, FDM)	
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CLIENT SATISFACTION

Method or Tool	Frequency	Utilization	Action
Participant evaluations or satisfaction surveys Registration forms	Completed by participants upon initiation and/or completion of program, training or activity	Evaluations reviewed after each event by program staff to assist with identifying trainers and programs that provide high levels of participant satisfaction	Completed evaluations will be used to resolve issues and ensure continuous quality improvement in order to provide trainings and programs with the most successful facilitators, presenters, trainers, and outcomes.

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM NAME

CAPIT Strong Families

SERVICE PROVIDER

Community Services Council (CSC)

PROGRAM DESCRIPTION

CSC partners with child welfare services to coordinate Differential Response for implementation through Family Resource Center/Community Resource Center (FRC/CRC) sites. The CAPIT Strong Families program provides voluntary and comprehensive community based services for families identified as being at risk.

FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES
CAPIT	Differential Response, FRC
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	

IDENTIFY PRIORITY NEED OUTLINED IN CSA

Poverty, mental illness, substance abuse and domestic violence contribute to the neglect and abuse of children. Isolation, lack of resources and difficulty in obtaining transportation to services factor in to neglect and can escalate a stressful situation to physical abuse, which reflects in the higher number of allegations of General Neglect and Physical Abuse. (CSA, pg. 17)

TARGET POPULATION

Families at risk of abusing and/or neglecting their children.

TARGET GEOGRAPHIC AREA

Siskiyou County

TIMELINE

SIP cycle, February 1, 2015 - January 31, 2020

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Reducing the risk of abuse to children	At least 80% of the families who are referred to FRC/CRC sites will accept and participate in services provided by the community partner agency	Progress reports completed by the FRC/CRC	Monthly reports provided to the county

CLIENT SATISFACTION

Method or Tool	Frequency	Utilization	Action
Engagement rates tracked through monthly FRC reporting documents and compiled by the CSC	On entry and monthly	<ol style="list-style-type: none"> 1. Number of families voluntarily agreeing to services 2. Participation in identified support programs and activities 	Initial engagement and subsequent participation rates of less than 70% require reevaluation of engagement processes, staff evaluation/training and participant interviews as appropriate.

BOS NOTICE OF INTENT

THIS FORM SERVES AS NOTIFICATION OF THE COUNTY'S INTENT TO MEET ASSURANCES FOR THE CAPIT/CBCAP/PSSF PROGRAMS.

**CAPIT/CBCAP/PSSF PROGRAM FUNDING ASSURANCES
FOR SISKIYOU COUNTY**

PERIOD OF PLAN: 02/01/15 THROUGH 01/31/20

DESIGNATION OF ADMINISTRATION OF FUNDS

The County Board of Supervisors designates Siskiyou County Health and Human Services Agency as the public agency to administer CAPIT and CBCAP.

W&I Code Section 16602 (b) requires that the local Welfare Department administer the PSSF funds. The County Board of Supervisors designates Siskiyou County Health and Human Services Agency as the local welfare department to administer PSSF.

FUNDING ASSURANCES

The undersigned assures that the Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) funds will be used as outlined in state and federal statute¹:

- Funding will be used to supplement, but not supplant, existing child welfare services;
- Funds will be expended by the county in a manner that will maximize eligibility for federal financial participation;
- The designated public agency to administer the CAPIT/CBCAP/PSSF funds will provide to the OCAP all information necessary to meet federal reporting mandates;
- Approval will be obtained from the California Department of Social Services (CDSS), Office of Child Abuse Prevention (OCAP) prior to modifying the service provision plan for CAPIT, CBCAP and/or PSSF funds to avoid any potential disallowances;
- Compliance with federal requirements to ensure that anyone who has or will be awarded funds has not been excluded from receiving Federal contracts, certain subcontracts, certain Federal financial and nonfinancial assistance or benefits as specified at <http://www.epls.gov/>.

In order to continue to receive funding, please sign and return the Notice of Intent with the County's System Improvement Plan to:

California Department of Social Services
Office of Child Abuse Prevention
744 P Street, MS 8-11-82
Sacramento, California 95814

ATTEST:
COLLEEN SETZER
County Clerk & Ex-Officio
Clerk of the Board

By: Wendy Duj
Deputy

County Board of Supervisors Authorized Signature	Date <u>2/17/2015</u>
<u>Ed Valenzuela</u> Print Name	<u>Board of Supervisors Chair</u> Title

¹ Fact Sheets for the CAPIT, CBCAP and PSSF Programs outlining state and federal requirements can be found at: <http://www.cdsscounties.ca.gov/OCAP/>

BEFORE THE BOARD OF SUPERVISORS
COUNTY OF SISKIYOU, STATE OF CALIFORNIA

February 5, 2002

PRESENT: Supervisors LaVada Erickson, Bill Hoy, Anne Marsh, Bill Overman and Joan T. Smith. Chair Erickson presiding.

ABSENT: None

ADMINISTRATOR: Howard Moody

DEPUTY COUNTY CLERK: Laura Bynum

COUNTY COUNSEL: Frank J. DeMarco

PURPOSE OF MEETING: Regular

COUNTY COUNSEL - Adopt Resolution creating the Siskiyou County Community Services Council (CSC), establishing the membership of the CSC, clarifying the functions of the CSC, and removing certain functions from the Family Interagency Services Council (FISC).

County Counsel Frank DeMarco reviewed the proposed resolution establishing the membership of the Community Services Council, and answered questions from the board.

MOTION: Marsh/Smith
AYES: Erickson, Hoy, Marsh, Overman and Smith

Adopt Resolution 02-38, creating and establishing the membership of the CSC, clarifying the functions of the CSC, and removing certain functions from FISC.

Chair Erickson requested clarification from Mr. DeMarco regarding whether or not the appointment of the parent/consumer representative could be made by the board. Mr. DeMarco advised that the appointment could be made.

MOTION: Hoy/Smith
AYES: Erickson, Hoy, Marsh, Overman and Smith

Appoint Raymond Virgen, as the Parent/Consumer representative to the Community Services Council.

STATE OF CALIFORNIA)
COUNTY OF SISKIYOU) ss

I, COLLEEN BAKER, County Clerk and Ex-Officio Clerk of the Board of Supervisors, do hereby certify the foregoing to be a full, true and correct copy of the minute order of said Board Supervisors passed on February 5, 2002.

Witness my hand and seal this

c. File

cc: County Counsel
Raven Cross

_____ day of _____, 20__

COLLEEN BAKER, County Clerk and ex-Officio Clerk of the Board of Supervisors of Siskiyou County, California

By: _____
Deputy Clerk

These minutes are subject to change as approved by the Board of Supervisors

RESOLUTION OF THE SISKIYOU COUNTY BOARD OF
SUPERVISORS CREATING THE SISKIYOU COUNTY COMMUNITY
SERVICES COUNCIL, ESTABLISHING THE MEMBERSHIP OF THE
COMMUNITY SERVICES COUNCIL, CLARIFYING THE FUNCTIONS
OF THE COMMUNITY SERVICES COUNCIL AND REMOVING
CERTAIN FUNCTIONS FROM THE FISC

WHEREAS, Section 18983.4 of the California Welfare and Institutions Code states that county boards of supervisors shall make every effort to facilitate the formation and funding of Child Abuse Prevention Coordinating Councils in their respective counties,

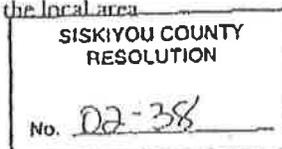
NOW, THEREFORE, THE BOARD OF SUPERVISORS OF THE COUNTY OF SISKIYOU HEREBY RESOLVES:

1. There shall henceforth be a Siskiyou County Community Services Council (CSC).
2. a. The membership of the CSC shall consist, in part, of persons who are serving in the following positions:

- (1) The Director of Behavioral Health
- (2) The Director of Human Services
- (3) The Director of Great Northern
- (4) The Chief Probation Officer
- (5) The Director of Public Health
- (6) The Superintendent of Schools
- (7) The District Attorney
- (8) The Sheriff
- (9) The Chair of the Family Interagency Services Council (FISC)
- (10) The Family Support Administrator
- (11) The Siskiyou Training & Employment Program (STEP) Executive Director
- (12) The President of the College of the Siskiyous
- (13) A member of the Board of Supervisors selected by the Board
- (14) A Superior Court Judge selected by the Presiding Judge
- (15) A Karuk Tribal Council Representative selected by the Tribe

b. The membership of the CSC shall also consist of the following persons, said membership to extend for a period of two years unless sooner terminated by the Board:

- (1) The Superintendent of a Siskiyou County school district
- (2) A member of a private, non-profit organization
- (3) A parent who is a past or present consumer of child-oriented services
- (4) A private health care provider
- (5) The owner or other representative of a business active in the local area



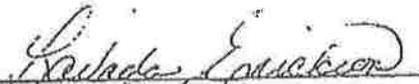
3. The CSC shall function as the Siskiyou County Child Abuse Prevention Coordinating Council as authorized by Chapter 12.5 of the California Welfare and Institutions Code, and the Siskiyou County Family Interagency Services Council (FISC) shall cease to function in that capacity.

4. The FISC shall henceforth cease to function as a Presley-Brown Interagency Coordinating Council.

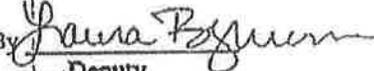
All fiscal functions on behalf of the County heretofore performed by the FISC are transferred to the CSC. Hereafter, the FISC shall not enter into any contracts or agreements on behalf of the County, and all contractual rights and obligations heretofore reposed in the FISC are, to the extent permitted by law, immediately transferred to the CSC.

PASSED AND ADOPTED THIS 5th day of February 2002, the following vote of the Siskiyou County Board of Supervisors.

AYES: Supervisors Erickson, Hoy, Marsh, Overman and Smith
NOES: None
ABSENT: None
ABSTAIN: None


Chair, Board of Supervisors

ATTEST:
COLLEEN BAKER, CLERK
Board of Supervisors

By 
Deputy

**BEFORE THE BOARD OF SUPERVISORS
COUNTY OF SISKIYOU, STATE OF CALIFORNIA**

February 5, 2002

PRESENT: Supervisors LaVada Erickson, Bill Hoy, Anne Marsh, Bill Overman and Joan T. Smith. Chair Erickson presiding.

ABSENT: None

ADMINISTRATOR: Howard Moody

DEPUTY COUNTY CLERK: Laura Bynum

COUNTY COUNSEL: Frank J. DeMarco

PURPOSE OF MEETING: Regular

MOTION:

Marsh/Smith

AYES: Erickson, Hoy,
Marsh, Overman and
Smith

COUNTY COUNSEL - Direct Auditor to transfer all fiscal functions from the Family Interagency Services Council (FISC) to the Community Services Council (CSC), effective March 1, 2002.

STATE OF CALIFORNIA)
) ss
COUNTY OF SISKIYOU)

I, COLLEEN BAKER, County Clerk and Ex-Officio Clerk of the Board of Supervisors, do hereby certify the foregoing to be a full, true and correct copy of the minute order of said Board Supervisors passed on February 5, 2002.

Witness my hand and seal this

c: file

Audi for

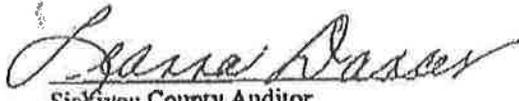
_____ day of _____, 20____

COLLEEN BAKER, County Clerk and ex-Officio Clerk of
the Board of Supervisors of Siskiyou County, California

By: _____
Deputy Clerk

These minutes are subject to change when read by the Board of Supervisors

Siskiyou County has an established Children's Trust Fund. The trust fund is dedicated to the Siskiyou Community Services Council (CSC), Siskiyou's designated Child Abuse Prevention Council, as per attached Siskiyou County Resolution No. 02-38, dated February 5, 2002. This Resolution also transferred all fiscal responsibilities from the previous Child Abuse Prevention Council, the Family Interagency Services Council (FISC), to the CSC. These fiscal responsibilities include oversight of Siskiyou County's Children's Trust Fund.


Siskiyou County Auditor

2/10/06
Date