Initial Design and Implementation Report and Subsequent Quarterly Progress Reports

Title IV-E Waiver California Well-Being Project

The California Department of Social Services

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TITLE IV-E CALIFORNIA WELL-BEING PROJECT
Initial Design and Implementation Report and
Subsequent Quarterly Progress Reports

The Administration for Children and Families (ACF) issued a Waiver Demonstration Authority allowing participating states the expanded eligibility, expanded claiming and expanded services otherwise not covered under Part E of the Title IV of the Social Security Act. This authority provides states flexibility in their use of federal funds to test innovative approaches to child welfare service delivery and financing.

The California Department of Social Services (CDSS) began its Demonstration Project on July 1, 2007 with Alameda and Los Angeles counties and continued under three short-term bridge extensions through September 30, 2014. The ACF approved a five-year extension and expansion of the Demonstration for seven additional counties through September 30, 2019. The CDSS refers to this Demonstration expansion as the Title IV-E California Well-Being Project (Project). This Initial Design and Implementation Report will address Project implementation and will be updated on a quarterly basis.

PROJECT OVERVIEW AND OVERALL THEORY OF CHANGE

Project Vision

- Increase permanency for children and youth and promote a successful transition to adulthood for youth;
- Increase positive outcomes and improve safety and well-being for children, youth and families; and
- Prevent child abuse and neglect and decrease the re-entry of children and youth into foster care.

Population Served and Desired Outcomes

The Project's target population will include Title IV-E eligible and non-Title IV-E eligible children and youth aged zero-17, inclusive, who are currently in out-of-home placement or who are at risk of entering or re-entering foster care. The Project's outcome goals are to improve entries into out-of-home care; entries into the most appropriate and least restrictive placement settings; re-entries into out-of-home care; recurrence of maltreatment; re-offenses among children and youth on probation; and child and family functioning and well-being.

Population Needs

The predominant reason for removal of children entering into foster care is neglect. The predominance of neglect among families in child welfare may be a result of deficiency in parenting skills, behavior management and/or a lack of knowledge and connection to available resources. The Conceptual Model of Child Neglect shared by the Children's Bureau (CB) Office of Child Abuse and Neglect asserts child behavior is a risk factor for

neglect and that social support and community connections are protective factors. According to CB, families with healthy social networks and support have "more access to models of suitable parental behavior." In addition, the California Legislative Analyst's Office (LAO), *Protecting Children from Abuse and Neglect: Trends and Issues (2013)*, report cites research supporting the premise that children that require greater levels of care and supervision are more vulnerable to maltreatment. The prevalence of child neglect may also be due to undeveloped protective factors among families. Engaging families and fostering resilience, social connections, concrete support, knowledge of parenting and child development and children's social and emotional competence are key in addressing child neglect. These children, youth and families need family-centered interventions that focus on family engagement and strengths and use critical thinking to analyze information and enhance and promote safety along with services that address their immediate safety needs and help them recognize their own strengths and networks of support. In addition, these populations need interventions that are individualized, trauma informed and culturally aware and engage as they evaluate their own strengths and needs.

Theory of Change

The CDSS theory of change infers that if counties are able to exercise the use of unrestricted federal Title IV-E funds to provide alternative services that strengthen family functioning, then children, youth and families will be more likely to be engaged, benefit from direct services and remain safely in their homes. The Project's funding flexibility will allow participating County Welfare Departments (CWDs) and County Probation Departments (CPDs) to create a more responsive array of services and supports for families, target subpopulations and expand current efforts that align with other state level initiatives.

The CDSS intends to reach Project goals through collaboration with participating CWDs and CPDs in implementing two family-centered practices that, in theory, will improve safety, permanency and well-being outcomes for children, youth and families: Safety Organized Practice/Core Practice Model (SOP/CPM) and Wraparound. The CWDs will implement the SOP/CPM model and its critical elements include engaging families through relationship, promoting safety through assessment, safety driven service, support planning and implementation, monitoring and adapting, transition and after care planning. The SOP/CPM aims to build upon families' protective factors as it will help social workers and families identify strengths and coordinate service delivery. The SOP/CPM is a strength-based approach improving the coordination of services and the collaboration of mental health and child welfare system. The second identified practice, Wraparound, is an intensive, individualized care planning and management process. According to the Resource Guide to Wraparound, the model consists of four phases: engagement and team preparation, initial plan development, implementation, and transition planning. The long-term outcomes for Wraparound are placement in stable home-like environments, improvements in youth and caregiver mental health, improved functioning in school/vocation and community, program specific outcomes, team mission achievement, increased assets, resilience and quality of life improvement.

SOP/CPM Outcome Chain

The Project will implement SOP/CPM as it fosters engagement, critical thinking and safety and is family centered, strengths based and behavior focused

SO THAT

Families are engaged and team with Social Workers in identifying strengths

SO THAT

Families and Social Workers become partners throughout planning

AND

Families develop and/or improve upon critical thinking skills

AND

Social Workers develop behaviorally based case plans that include family's input

SO THAT

Families' needs are identified and they are referred to relevant services

AN

Families are engaged in services

SO THAT

Families are better equipped to improve functioning

SO THAT

Families are better equipped to safely care for children

AND

Families' functioning is improved

SO THAT

Family stability is increased

AND

Children who can be kept safely in the home remain in the home and are kept from entering care

AND

Children who are in care have a decreased length of stay in out-of-home care

SO THAT

Children and families will have less reliance on the foster care system and children and families achieve better outcomes.

SO THAT

Entries and re-entries into foster care are reduced, entries into group home care decrease, relative placements increase, placement stability increases, permanency and timeliness increases.

Wraparound Outcome Chain

A referral/petition is received by the PD

AND

The two-tier screening process begins

SO THAT

Eligible youth are identified and referred to Wraparound

SO THAT

Additional information can be gathered by Wraparound service providers

AND

Youth and families identify team members and community connections

SO THAT

A service plan is developed

SO THAT

Families are engaged in the four phases of Wraparound with fidelity

AND

Families are referred to additional services as needed

AND

Families are engaged in services

SO THAT

Families' needs are met

SO THAT

Family Functioning Improves

AND

Families experience improved social, emotional, behavioral functioning

SO THAT

Family stability is increased

AND

Families are better able to safely care for their children at home

SO THAT

Entries into foster care are reduced, entries into group home care decrease, relative placements increase, placement stability increases, permanency and timeliness increase, re-entries into foster care are reduced and recidivism is decreased.

California Well-Being Project Outcome Chain

CWDs and CPDs are provided the opportunity to use title IV-E funds flexibly to implement SOP/CPM and Wraparound

AND

Workers can implement a systematic practice model that is strengths-based and family focused

AND

Funds can be used for prevention services rather than placement

SO THAT

Workers can engage children/parents in a process to develop their own system of support and be less reliant on formal services

SO THAT

Parents increase their knowledge of natural and community supports

SO THAT

Parents participate in services that are individualized, trauma informed and culturally appropriate

SO THAT

Parents increase their level of functioning and parenting skills

SO THAT

Children who can be kept safely in the home remain in the home and are kept from entering care

AND

Children who are in care have a decreased length of stay in out-of-home care

AND

Decreased re-entry into out-of-home care

AND

Decreased recidivism and further penetration into system

SO THAT

There is improved child and family well-being

The CDSS plans to collaborate with the evaluator by providing all models and outcomes chains developed with county partners. The CDSS will also seek further information from the evaluator in adapting theories of change for SOP/CPM and Wraparound as needed.

Assumptions

The CDSS believes children, youth and families that receive the SOP/CPM or Wraparound services will be better equipped to improve interactions and family functioning. In turn, families with improved functioning will be able to provide safe and permanent homes for their children. This assumption draws from the SOP/CPM and Wraparound's emphasis on family engagement, teaming and safety.

The SOP/CPM is informed by Solution-focused practice, Signs of Safety, Structured Decision Making, child and family engagement, risk and safety assessment research, group supervision and interactional supervision, appreciative inquiry, motivational interviewing, consultation and Information Sharing Framework, cultural humility and

Trauma-informed practice. This practice promotes meeting the individual needs of each family and long-lasting change. The SOP/CPM provides techniques and guidance for building a family safety network to enhance daily safety and well-being for children.

The SOP/CPM will foster the development and improvement of families' critical thinking skills as they will: 1) be engaged and be active participants in conversations focusing on detailed and pertinent information; 2) be active participants, have an active role in analyzing their own situation; 3) Become full partners as they work toward increasing safety for their children. Partnering with social workers will also improve critical thinking skills as families will engage in conversations that reveal descriptions of behaviors and their impact on children's safety, allowing the family to look at their current situation and come to a conclusion as to their own strengths, supports, needs, and the changes in behavior required to keep their children safe.

In addition, the SOP/CPM is an innovative practice in social work as it shifts focus from services and compliance to identifying complicating factors and addressing specific behavior changes needed to achieve safety. The SOP/CPM tools enable case workers to engage families through collaborative case planning, involving and including parents and children's voices in case plans. Although action steps identified in case plans may include services, the focus throughout the case planning process will be the changes in behavior needed to keep children safe.

Wraparound involves a family-centered, strengths-based, needs-driven planning process for the individualization of services and supports for youth and family. Wraparound principles such as Voice and Choice and Team based collaborative planning are research supported.

The SOP/CPM and Wraparound are family-centered and strengths-based approaches in partnering with children, youth and families in making decisions, setting goals and achieving desired outcomes.

TARGET POPULATION(S)

The CDSS will implement the Project in nine counties: Alameda, Butte, Lake, Los Angeles, Sacramento, San Diego, San Francisco, Santa Clara and Sonoma. These counties vary in population size and represent a variety of geographic locations within California including populous urban settings as well as counties with suburban and rural populations.

The CDSS and the University of California at Berkeley collaborate in an effort to centralize California's child welfare data through the California Child Welfare Indicators Project (CCWIP). The CCWIP utilizes Child Welfare Services/Case Management System (CWS/CMS) data submitted by all counties, including those participating in the Project. Unless this report otherwise notes, the data presented will be generated from the CCWIP and include data representing Project counties, from calendar years 2010 through 2014 (or as data availability allows). This report derives county specific data,

such as the estimated number of children and families to receive services, from the Project county plans.

Characteristics and Needs of SOP/CPM Target Population

The target population for the SOP/CPM is Title IV-E eligible and non-eligible children and youth aged zero-17, inclusive, who are currently in out-of-home placement or at risk of entering or re-entering foster care or have been reported as having, allegedly, been maltreated. The Project will serve children, youth and families through funding of preventative family service practices. Serving all children and youth is a practice shift and no population will be excluded under the SOP/CPM.

SOP/CPM Target Populations

Characteristic	Evidence[1]
Child characteristics	
Age of child	Data from 2010-14 show children age six to ten and 11 to 15 experience the highest number of allegations. These data demonstrate a need for preventative services that team with families and include the children's voice in the planning process. Children under one have the highest substantiations as percent of allegations. This data shows a need for preventative, family-centered and strength-based services. The SOP practice does not focus solely on the needs of families with children under age one. This intervention's objectives are to guide casework and create a shared focus through engagement, sort meaningful information and engage in critical thinking and provide a path to engage in rigorous, sustainable, on-the-ground child safety efforts. The SOP will guide families in identifying their strengths and unique needs to foster behavior changes that will protect their children.
Race or ethnicity of child	Data from 2010-14 demonstrate that Native American, Latino, and Black children have the highest substantiations as percent of allegations. State disparity indices from 2014 show Black and Native American children have the highest disparity index rates across all analysis including allegations, substantiated allegations and entries and in care. These data indicate a need for practices and models that include culturally aware and trauma focused case planning.
History of child abuse/neglect:	In 2012, there were 82,000 children with substantiated child abuse/neglect (maltreatment) cases and 62% of substantiated cases were due to general neglect. This information indicates there is a need to improve preventative measures and decrease child abuse and neglect.
Placement characteristics	
Initial reason for removal	80% of children are removed due to neglect; physical abuse is the second most prevalent reason for removal. There is a need to engage families and cultivate exchanges regarding strengths and protective factors.
Type and number of living arrangements	Data from 2010-14 indicate an average of 27% and 9.96% days are spent in Foster Family Agencies and Foster placements. Child Welfare placement stability data of children in Foster Family Home (FFH), Foster Family Agency, Court Specified, group, or shelter, non-relative placement and in care for less than one year shows 15.74% are placed in three or more placement settings; 31.36% in care for less than two years are placed in three or more placement settings; and 42.78% in care for two or more years are placed in three or more placement settings. Currently, CCWIP data regarding the number of days in out of home care is only available from 2010-12 and by kin and non-kin placement type only. The average of the median number of days in non-kin care among Project counties was 385. These figures indicate a need to reduce the duration of placement days outside of guardian or kin care.

[1] Unless otherwise noted, the data presented are from the CCWIP and include data representing Project counties, from calendar years 2010-14 or as data availability allows.

Characteristic	Evidence[1]
Other: Time in Care (First Entries)	Data from 2008 through 2012 first entries shows the median length of stay across Project counties and for children under one month, one to 11 months, one to two years, three to five years, and six to ten years is: 547, 468, 423, 406, and 409 days respectively. Children 11 to 15 years old have a median length of stay of 448 days, while children 16 to 17 years old respectively have a median length of stay of 366. The median length of stay for children under one year old is higher than that of children in other age groups. This data shows a need for individualized, strength-based, and family centered interventions with behaviorally based case plans that will help families provide safe homes for their children.
Family characteristics	
Siblings	Statewide point-in-time data regarding children in foster care shows 50.3% of children are placed with all their siblings. According to the California Welfare and Institutions Code (WIC), Section 16002, preserving and strengthening sibling relationships are crucial and the authority and responsibility are granted to the court's jurisdiction and to the responsible local agency. Please see Attachment #2 for WIC, Section 16002. This indicates a need to adopt family-centered practices that include children and youth's voice, engage families, and assist in the identification of family team members. The FFH recruitment process is planned and implemented by each county and the CDSS provides information to the public regarding the foster parent recruitment processes, training resources, and information about becoming a foster parent. In addition, the CDSS participates in California's Quality Parenting Initiative (QPI), a network that shares information and ideas about how to improve parenting, recruit and retain foster families. The CDSS also collaborates with CWDA, the University of Southern Florida and the Youth Law Center in the launch of the QPI California website, which contains training resources and recruitment tools.
Substance abuse	Due to data collection mechanisms, there are no state-level child welfare data in the CCWIP outlining substance abuse and child maltreatment. The National Survey of Substance Abuse Treatment Services (N-SSATS) 2010 California profile shows 88.3% of clients were treated for alcohol and drug abuse, 74.3 % of clients were treated for drug abuse only and 67.1% were treated for alcohol abuse. A survey by the CDSS Office of Child Abuse Prevention asked counties "What is the most frequent risk factor that is driving children into the County's child welfare system?" Survey results show that in FY 2013-14, six of nine Project counties reported substance abuse as the most frequent risk factor driving children into the county child welfare system. Currently, there is no collaboration with the courts to see how many child abuse and neglect cases are related to issues of substance abuse. However, Children's Bureau, Child Welfare Information Gateway (CWIG) reports one to two-thirds of child maltreatment cases in the nation involves substance use. The CCWIG also reports 61% of infants and 41% of older children in out-of-home care came from families actively involved in alcohol and drug abuse. The Judicial Branch of California has a collaborative justice court system that combines judicial supervision with rehabilitation services that are rigorously monitored and focused on recovery to reduce recidivism and improve offender outcomes. The collaborative justice court system includes adult drug courts, DUI courts, and courts where the defendant may be a minor or where the child's welfare is at issue. These include dating/youth domestic violence courts, drug courts, DUI court in schools program, mental health courts, and peer/youth courts. Adult drug courts provide access to treatment for substance-abusing offenders in criminal, dependency, and family courts while minimizing the use of incarceration.

Children age six to ten and 11 to 15 have the highest number of allegations while children under one have the highest rate of substantiations as percent of allegations. The CCWIP disparity indices examine the degree to which groups of children have contact with the child welfare system at higher or lower rates than their presence in the general population (Please see Attachment #1 for CCWIPs methodology). Native American, Latino and Black children and youth have the highest rates of substantiations as percent of allegations; however, Black and Native American children have the highest disparity index rates. Approximately 80% of children are removed due to

neglect. In addition, data from 2012 show 62% of substantiated maltreatment cases were due to general neglect; these cases involve the failure of a parent or caretaker to provide a child with adequate food, clothing, shelter, medical care or supervision. The median length of stay for children increases when children reach 11 to 15 years of age; however, children under one have the highest median length of stay. The Children's Bureau, Child Welfare Information Gateway (CWIG) reports 61% of infants and 41% of older children in out-of-home care came from families actively involved in alcohol and drug abuse.

Data from the National Institute of Health (NIH) estimate 20% to 60% of children and youth entering the foster care population have a developmental disability or delay. In addition, the prevalence of emotional and behavioral problems in children in foster care is higher than rates of children living in poverty. Estimates of emotional and behavioral health problems among children entering foster care range from 35% to 50%. The NIH also states youth in foster care have an increased risk for sexual activity and substance abuse, which may contribute to additional health needs.

The health needs of children and youth entering foster care are not being addressed. According to data from CCWIP the predominant reason for removal of children entering into foster care is neglect. 80% of children are removed from their homes due to neglect; physical abuse is the second most prevalent reason for removal. The predominance of neglect within the families of children and youth in foster care may point to a lack of parental skills, abilities to manage youth and children's behavior and mental health needs and/or a lack of knowledge and connection to community resources.

Children and youth also face additional challenges after removal. The CCWIP data from 2010-14 indicate an average of 27% and 9.96% days are spent in foster family agencies and foster placements. State-wide time in care data from 2008 through 2012 first entries show the median length of stay (in days) decreases as children get older but increases when children reach 11-15 years of age. Children under one have the highest median length of stay, 514 days. The overall median length of stay for children zero to 17 is 415 days. This data may indicate children are not only staying in Foster Family Agency and Foster placements; they are placed in these settings for long periods. In addition, statewide point-in-time data shows only 50.3% of children are placed with all their siblings. The CWIG published, *Sibling Issues in Foster Care and Adoption;* this bulletin shows placing siblings together provides natural and mutual support and enhances a child's sense of safety and well-being. It also shows that children placed with kin are more likely to be placed with their siblings; children placed in-group care are less likely to be with their siblings. This data indicates a need for family-centered practices that include children and youth's voice, engage families and assist in the identification and engagement of next of kin who may become part of the family's network and be involved in kin care.

Data analysis of race and children in the child welfare system in California is troubling. Figures show Latino children and youth have the highest percentage of one or more allegations in the system. The second and third highest percentages are White and

Black children and youth. Although figures show no allegations for multi-racial children, it is possible children in this ethnic group may be identified in the system as being members of another ethnic group. The percentage of allegations for black children may be influenced by no allegations for multi-racial, as there is a possibility some multi-racial children may be entered in the system as Black. Furthermore, the CCWIP data show children and youth from Native American and Black families have high disparity index rates. This data shows a need for child welfare practices and models that include culturally aware and trauma informed case planning.

The aforementioned data depicts a need for family-centered practices that involve teaming with families in making decisions, goal setting and achieving desired outcomes. There is a need for increased family engagement, the increased collaboration across systems, individualized plans and services based on children, youth, and their families' needs. In addition, these practice and services must reflect cultural awareness and trauma informed.

Characteristics and Needs of the Wraparound Target Population

Youth ages 12-17, inclusive, who are at imminent risk or at risk of being removed from their homes and placed in foster care or delinquent facilities. The CDSS plans to continue to confer with participating counties in finalizing a definition of "at risk" for the Project. The definitions outlined in the CDSS All County Letter (ACL) 14-36 and in the California WIC will be a baseline for the Project. According to the CDSS ACL 14-36, "the Federal definition of a candidate for foster care is a child at 'imminent' or 'serious' risk of removal when placement in foster care is the planned arrangement. In order for the child or youth to be considered a candidate for foster care, the CWD or CPD must be involved for the specific purpose of either removing the child or youth from the home or referring them to services, such that if the services are unsuccessful, the plan is to remove the child or youth from the home and place him/her into foster care." According to the WIC, Section 601.5 (d), a minor is "at risk" when there is risk of justice system involvement and outlines the risk factors as "...chronic disobedience to parents, curfew violations, repeat truancy, incidents of running away from home, experimentation with drugs or alcohol, or other serious behavior problems." The participating PDs have collaborated with the CDSS in developing a list of targeted outcome measures they will use to assess their population for Wraparound services. This information will be forthcoming in subsequent reports.

Characteristic	Evidence[2]
Child characteristics:	
Age of child	Probation data shows youth age 16 to 17 have the highest rate of entries to foster care. Population of probation youth, age 11-15, in foster care has decreased but remains 16.2% of probation's foster care population. These data show a need for preventative and family-centered, and strength-based services and include youth's voice in the planning process.

[2] Unless otherwise noted, the data presented is from the CCWIP and include data representing Project counties, from calendar years 2010-14 or as data availability allows.

Characteristic	Evidence[2]
Race or ethnicity of child	Probation data from 2010-14 show Latino and Black youth have the highest rates of care, with eight days or more in care. State disparity indices from 2014 show Black and Native American youth age 11 to 15 have the highest disparity index rates across all analysis including allegations, substantiated allegations, entries and in care. These data indicate a need for culturally aware practices and models.
Mental health diagnoses/ problems	The California Health Care Foundation (CHCF), 2013 Health Care Almanac examines California mental health data from 2009. The CHCF found that one in 13 children suffers from a mental illness that limits participation in daily activities. The rates of Children with Severe Emotional Disturbance (SED) showed one in 10 children below the poverty level suffered from SED. Latino, African American and Native American children experiencing higher rates than White, Asian and multiracial children. Depression was reported as one of the most prevalent mental health disorders among adolescents; between 2005 and 2009, approximately 8% of teens in California and the US reported experiencing an episode of major depression in the previous year. The CDSS and the Department of Health Care Services (DHCS) are in the process of addressing the intersection of mental health issues with child welfare cases. However, there are currently no data showing how many children eligible for Wraparound services will have a medical or mental health diagnosis.
Substance abuse	According to the WestEd, California Healthy Kids Survey (CHKS), *Substance Use and Other Problems Among Youth in Foster Care*, *Facts Sheet Number 6*, youth in Foster Care report higher substance abuse rates, poor school attendance, poor grades, more behaviors related to violence, as well as higher harassment and depression risks than youth who live with parents and youth living with a relative. The WestEd CHKS is a statewide survey capturing information from local education agencies.
Initial reason for removal	Reason for removal involves a law violation by the youth, which is entered as “Other” into CWS/CMS system. According to CWS/CMS data from 2010-2014, the average percentage of youth removed due to “Other” reasons is 98.42%. Reasons for removal included in the “other” category are: Child's Disability or Handicap; Disrupted Adoptive Placement (now an inactive code); Emotional Abuse; Exploitation; Law Violation; Relinquishment; Status Offense; Voluntary Placement (now an inactive code); Safely Surrendered Baby; and Non-CWD Mental Health/Kin-GAP (now an inactive code).
Type and number of living arrangements	CWS/CMS data shows the majority of youth who are in care for eight days or more are placed in group homes. Probation placement stability data for youth ages 12 to 17 in a Foster Family Home, Foster Family Agency, Court Specified, group, or shelter, non-relative placement, and in care for less than one year shows 5.16% are placed in more than two placement settings; 19.88% in care for less than two years are placed in three or more placement settings; and, 35.42% in care for two or more years are placed in three or more placement settings. This indicates a need to increase placements in kin care.
Family characteristics:	
Homelessness/ housing instability	According to the WestEd, California Healthy Kids Survey, Facts Sheet Number 6, youth in Foster Care experience high levels of transience as they change residence two or more times a year. The survey also indicates a need for supportive and caring family environments.

These data show a need for preventative, family-centered, and strength-based services that include youth’s voice throughout planning process. These data also indicate a need for culturally aware practices and models. There is a need for increased family engagement, increased collaboration across systems, individualized and coordinated

plans and services based on the youth and family needs and a reduction in recidivism. Wraparound will meet these needs as it is evidence informed program and brings families, youth, community members and agencies together and assists youth in setting and achieving goals. The increase in family engagement and collaboration may decrease the number of Group Home placements for youth as their needs and goals will be at the forefront of treatment and care.

Estimated Number of Children and Families to be Initially Enrolled in the Demonstration

The figures outlined in this section derive from the Project county plans (as reported by participating counties) including child welfare and probation intervention(s). The estimated target number for the SOP/CPM and Wraparound interventions are 433,434 and 3,182, respectively. The overall estimated target number of children and families to be served over the life of the Project is 436,616. Each county has provided a breakdown of the estimated number or percentage of children, youth and families served throughout the duration of the project.

Alameda County Social Services Agency (ACSSA)

SOP/CPM

- Year 1: None
- Year 2: 4,478 children and families
- Year 3: 8,956 children and families
- Year 4: 8,956 children and families
- Year 5: 8,956 children and families

Triple P (Evidenced based parent training program)

- Year 1: None
- Year 2: 127 children and families
- Year 3: 506 children and families
- Year 4: 506 children and families
- Year 5: 506 children and families

Commercially & Sexually Exploited Children (CSEC)

- Year 1: None

- Year 2: 75 children and families
- Year 3: 125 children and families
- Year 4: 50 children and families
- Year 5: 175 children and families

Alameda County Probation Department (ACPD)

Wraparound

- Year 1: 57 children
- Year 2: 57 children
- Year 3: 57 children
- Year 4: 57 children
- Year 5: 57 children

Collaborative Court

- Year 1: 60 children
- Year 2: 60 children
- Year 3: 60 children
- Year 4: 60 children
- Year 5: 60 children

Parenting with Love Limits (PLL)

- Year 1: Request for Proposals will be issued with contractor being a Community Based Agency who will be staffed and ready to receive training on PLL with the goal of serving 25 youth in the first year of implementation.
- Year 2: 66 youth will be served at full program capacity
- Year 3: 66 youth will be served at full program capacity
- Year 4: 66 youth will be served at full program capacity
- Year 5: 66 youth will be served at full program capacity

Butte County Department of Employment and Social Services (BCDESS)

SOP/CPM

- Year 1: 125 children and their families
- Year 2: 200 children and their families
- Year 3: 275 children and their families
- Year 4: 350 children and their families
- Year 5: 400 children and their families

Kinship Support Services Program (KSSP)

- Year 1: N/A
- Year 2: 70 children and their families
- Year 3: 77 children and their families
- Year 4: 85 children and their families
- Year 5: 94 children and their families

Expand the Supporting Our Families in Transition (SOFT) Program

- Year 1: 75 families in the Dependency Court System
- Year 2: 75 families in the Dependency Court System
- Year 3: 100 families: 75 families in the Dependency Court System; 25 families prior to Child Welfare intervention
- Year 4: 105 families: 75 families in the Dependency Court System; 30 families prior to Child Welfare intervention
- Year 5: 110 families; 75 families in the Dependency Court System; 35 families prior to Child Welfare intervention

Butte County Probation Department (BCPD)

Wraparound

- Year 1: Five families (one cycle of the Strengthening Families Program)
- Year 2: 12 families (6 families per cycle of the Strengthening Families Program)

- Year 3: 14 families (7 families per cycle of the Strengthening Families Program)
- Year 4: 16 families (8 families per cycle of the Strengthening Families Program)
- Year 5: 18 families (9 families per cycle of the Strengthening Families Program)

Lake County Department of Social Services (LCDSS)

SOP/CPM

- Year 1: Approximately 600 families, including 800 children, per year receiving Emergency Response investigations and services, and approximately 160 children and 115 parents per year receiving FM, FR and PP services.
- Year 2: Based on first year numbers, with a slight increase in family maintenance cases
- Year 3: By year three and ongoing the plan is all families referred to Differential Response will continue to receive SOP services through contract providers. Based on current data, that will average approximately 85 families and 125 families per year, with an increase in family maintenance cases.
- Year 4: Based on first and third year numbers but anticipating more children and families receiving family maintenance services
- Year 5: Same as year four, but a decrease in referrals and in family maintenance cases

Wraparound

- Year 1: 15 families; 25 children
- Year 2: 30 families; 50 children
- Year 3: 40 families; 65 children
- Year 4: 50 families; 85 children
- Year 5: 60 families; 100 children

Lake County Probation Department (LCPD)

Wraparound

- Year 1: 22 youth
- Year 2: 45 youth

- Year 3: 60 youth
- Year 4: 75 youth
- Year 5: 90 youth

Los Angeles County Department of Children and Family Services (LACDCFS)

CPM

- Year 1: 37,000 children
- Year 2: 36,500 children
- Year 3: 35,900 children
- Year 4: 35,350 children
- Year 5: 34,900 children

Enhance Prevention and Aftercare

- Year 1: 200 Case Navigation + 660 with additional Title IV-E funding (six month contract year)
- Year 2: 600 Case Navigation + 2640 with additional Title IV-E funding (six month contract year)
- Year 3: 600 Case Navigation + 2640 with additional Title IV-E funding (six month contract year)
- Year 4: 600 Case Navigation + 2640 with additional Title IV-E funding (six month contract year)
- Year 5: 600 Case Navigation + 2640 with additional Title IV-E funding (six month contract year)

Case Navigation is a process utilized by Los Angeles County. The Navigator acts as a family liaison to services, determining the family's needs and providing necessary referrals. One Case Navigation equals one family. Case Navigation is a process whereas the case navigator; the contracted staff, assesses the needs of the family. Once the navigator does the assessment, they will recommend and link the family to the needed services. Case Navigation targets children, parents, and families for the assessment of needs and direct linkage/warm hand-off to services. Case Navigator would be the staff that assists the family in accessing these services.

Partnerships for Families (PFF)

- Year 1: This program will not be implemented in Plan Year 1
- Year 2: This program is currently managed by First 5 LA and the projected number of children and families is pending
- Year 3: This program is currently managed by First 5 LA and the projected number of children and families is pending
- Year 4: This program is currently managed by First 5 LA and the projected number of children and families is pending
- Year 5: This program is currently managed by First 5 LA and the projected number of children and families is pending

Los Angeles County Probation Department (LACPD)

Wraparound

- Year 1: 200-250 families
- Year 2: 200-250 families
- Year 3: 200-250 families
- Year 4: 200-250 families
- Year 5: 200-250 families (these numbers are subject to change contingent upon the needs of our youth, families and the Department)

Functional Family Therapy (FFT)

- Year 1: Approximately 250 youth and families
- Year 2: Approximately 250 youth and families
- Year 3: Approximately 250 youth and families
- Year 4: Approximately 250 youth and families
- Year 5: Approximately 250 youth and families (these numbers are subject to change contingent upon the needs of our youth, families and the Department)

Functional Family Probation (FFP)

- Year 1: Approximately 450 youth and families
- Year 2: Approximately 450 youth and families

- Year 3: Approximately 450 youth and families
- Year 4: Approximately 450 youth and families
- Year 5: Approximately 450 youth and families (this capacity is contingent upon the needs of our youth, families and the Department)

Sacramento County Department of Health and Human Services (SCDHHS)

SOP/CPM

- Year 1: Full implementation of SOP began on Feb. 2015. Therefore, our projections for eight months of service provision during year 1 are as follows: Children= 19,535; Biological Parents= 24,667.
- Year 2: Children= 19,535; Parents= 24,667
- Year 3: Children= 29,529; Parents= 36,946
- Year 4: Children= 29,603; Parents= 36,908
- Year 5: Children= 29,478; Parents= 36,951

Family Finding and Kinship Support

- Year 1: None
- Year 2: 50
- Year 3: 75
- Year 4: 100
- Year 5: 120

Sacramento County Probation Department (SCPD)

Wraparound

- Year 1: 75
- Year 2: 100
- Year 3: 125
- Year 4: 125
- Year 5: 125

Multisystemic Therapy (MST)

- Year 1: 35
- Year 2: 50
- Year 3: 65
- Year 4: 65
- Year 5: 65

Functional Family Therapy

- Year 1: 60
- Year 2: 80
- Year 3: 100
- Year 4: 100
- Year 5: 100

San Diego County Health and Human Services Agency (SDCHHSA)

SOP/CPM

- Year 1: 4,869 families
- Year 2: 9,738 families
- Year 3: 14,607 families
- Year 4: 19,476 families
- Year 5: 21,910 families

San Diego County Probation Department (SDCPD)

Wraparound

- Year 1: Developmental year
- Year 2: The projected number of youth and families to be served is 50
- Year 3: The projected number of youth and families to be served is 75

- Year 4: The projected number of youth and families to be served is 100
- Year 5: The projected number of youth and families to be served is 100

Family Finding

- Year 1: Development year
- Year 2: 15-20 youth in placement will be served
- Year 3: 15-20 youth in placement will be served
- Year 4: 15-20 youth in placement will be served
- Year 5: 15-20 youth in placement will be served

San Francisco County Health and Human Services Agency (SFCHHSA)

SOP/CPM

- Year 1: Staff will be trained by the end of this year; therefore, half will be served
- Year 2: All children will receive services (est. 3,400)
- Year 3: All children will receive services (est. 3,400)
- Year 4: All children will receive services (est. 3,400)
- Year 5: All children will receive services (est. 3,400)

Wraparound for children not eligible for SB163 Wraparound

- Year 1: Targets for all years are based on the average number of first and subsequent admissions. Plan to target 43 children annually as follows: age zero: eight; age one-five: nine; age six-12: ten; and age 13-17: 16
- Year 2: Same goal as Year 1
- Year 3: Same goal as Year 1
- Year 4: Same goal as Year 1
- Year 5: Same goal as Year 1

San Francisco County Juvenile Probation Department (SFCJPD)

Wraparound

- Year 1: About 32 juvenile justice-involved youth ages 12-17 will be referred for Wraparound services
- Year 2: Same goal as year 1
- Year 3: Same goal as year 1
- Year 4: Same goal as year 1
- Year 5: Same goal as year 1

Probation: Families of out-of-home placement youth

- Year 1: 50 families will be served in a peer support group setting
- Year 2: 70 families will be served in a peer support group setting and though individual coaching by Parent Partner
- Year 3: 70 families will be served in a peer support group setting and though individual coaching by Parent Partner
- Year 4: 70 families will be served in a peer support group setting and though individual coaching by Parent Partner
- Year 5: 70 families will be served in a peer support group setting and though individual coaching by Parent Partner

Santa Clara County Social Services Agency (SCCSSA)

SOP/CPM

The relatively small numbers are based on the Fidelity Assessments on the cases of continuing staff that are trained on the Child and Family Practice Model (CFPM). The small number is a reflection of the fact that Fidelity assessments are not being done on every case. In addition, the CFPM training for Front End staff was completed, but Fidelity Assessments for investigations are not a part of the California Partners for Permanency (CAPP) project. Once SOP is fully implemented under the Project, the use of SOP tools will be required and the SCCSSA anticipates an increase in the number of cases receiving the intervention.

“Reduction in overall caseload” refers to the target goal of reducing the number of children in the child welfare system, which would reduce the number of cases per social worker.

- Year 1: Zero children/families served- Implementation planning and development
- Year 2: Reduction in overall caseload by 2.5 in child welfare caseloads (57 children); reduction in group home utilization (seven-14 less children); increase in

relative placement (11-28 children); increase three-four children placed in Foster Family Homes; increase of 4-5 children placed in Foster Placement agency; decrease of seven-eight children being removed.

- Year 3: Reduction in overall caseload by 2.5 percent in child welfare caseloads (55 children); reduction in group home utilization (seven-13 less children); increase in relative placement (additional five-12 children); increase five-six children placed in Foster Family Homes; increase of six-seven children placed in Foster Placement agency; decrease of eight-12 children being removed.

- Year 4: Reduction in overall caseload by 2.5 percent in child welfare caseloads (55 children); reduction in group home utilization for RCL 9/10 placements by 20 percent and reduce RCL 12 placements by five percent (six less children in RCL 9/10 and four-five children less in RCL 12 placements (seven-13 less children); increase in relative placement (11-12 children); increase three-four children placed in Foster Family Homes; increase of four-five children placed in Foster Placement agency; decrease of eight children being removed.

- Year 5: Reduction in overall caseload by 2.5 percent in child welfare caseloads (52-53 children less); reduction in group home by five percent (six-seven children); increase in relative placement (12 children additional); increase three-four children placed in Foster Family Homes; increase of four-five children placed in Foster Placement agency; decrease of seven-nine children being removed.

Santa Clara County Probation Department (SCCPD)

Wraparound

- Year 1: Zero (0) children/families served, implementation planning and development

- Year 2: Plan to serve up to 30 youth and families in Wraparound services

- Year 3: Add an additional 10 youth, for a total of 40 youth and families served

- Year 4: Add an additional 10 youth, for a total of 50 youth and families served

- Year 5: Full service operation with 50 youth and families served

Sonoma County Health and Human Services Agency (SCHHSA)

SOP/CPM

- Year 1: 400 children and their families

- Year 2: 1,200 children and their families

- Year 3: 2,400 children and their families

- Year 4: 2,400 children and their families
- Year 5: 2,400 children and their families

Behavioral Health Treatment Liaison

- Year 1: No children and their families
- Year 2: No children and their families
- Year 3: 85 children and their families
- Year 4: 135 children and their families
- Year 5: 200 children and their families

Sonoma County Probation Department (SCPD)

Wraparound

- Year 1: No youth
- Year 2: 15 youth
- Year 3: 20 youth
- Year 4: 25 youth
- Year 5: 25 youth

Family Finding Activities

- Year 1: None
- Year 2: 50
- Year 3: 50
- Year 4: 50
- Year 5: 50

CLEARLY DEFINED DEMONSTRATION INTERVENTION AND ASSOCIATED COMPONENTS

Intervention 1: SOP/CPM

Core components of the intervention

The State of California has established the CPM as a means to provide guidance to child welfare, community service providers and mental health agencies. This guideline states that the involvement of the child, youth and family is key in all aspects of goal setting, plan development and transitioning from services. The CPM is a framework for integrated practice in child welfare and mental health agencies, service providers and community/tribal partners working with youth and families. The SOP is a collaborative practice that supports the CPM framework guidelines. The SOP/CPM model incorporates Cultural Awareness, Trauma-Informed Lens and Focus on Trauma philosophies throughout its practices.

The SOP/CPM critical elements include: Solution Focused Interviewing; Coaching; Appreciative Inquiry; Family/Child Teams and Networks of Support; Strategies for engaging children, capturing the children's voice and perspective in decision-making; Safety Mapping/Information and Consultation Framework; Partnership-Based Collaborative Practice; effective safety planning at foster care entry and exit; and Case Teaming. All core components of Title IV-E California Well-Being Project interventions are centered on the premise that children, youth and family members are an integral part in the achievement of positive outcomes.

Family-Centered Practice is a family-centered and strengths-based approach to partnering with families in making decisions, setting goals, and achieving desired outcomes. This Practice is a way of working with families, both formally and informally, across service systems to enhance their capacity to care for and protect their children. It focuses on children's safety and needs within the context of their families and communities and builds on families' strengths to achieve optimal outcomes. Families are defined broadly to include birth, blended, kinship and foster and adoptive families.

The following is the practice model for the SOP/CPM intervention; please see the *Safety Organized Practice/Core Practice Model Critical Elements Glossary* (Attachment #3) for definitions.

Safety Organized Practice/Core Practice Model Critical Elements

The Core Practice Model (CPM) is a framework for integrated practice in child welfare and mental health agencies, service providers and community/tribal partners working with youth and families. Safety Organized Practice (SOP) is a collaborative practice model that fulfills CPM framework guidelines. The SOP/CPM model incorporates Cultural Awareness, Trauma-Informed Lens and Focus on Trauma philosophies throughout its practices.

Component	SOP/CPM	Process Measures and Outcomes
Engaging Families through Relationship Join and partner with families to establish common goals concerning child safety, well-being and permanency.	Solution Focused Interviewing* Teaming/Network of Support Child and Family Team Meetings** Family Connections** Family Meetings Parents in Partnership** Appreciative Inquiry Voice of the Child (Three Houses and Safety House) Voice and Choice** Three Questions Safety Mapping Safety Planning* Coaching* CAPP Practice Behaviors**	**Process Measures:** Improved evaluation of safety and danger Improved parent/child engagement Improved engagement of the network of support/family connections **Outcomes:** Increased relative placement [AB636—4B, 4E] Increased speed and likelihood of permanency [CFSR3—3-P1, 3-P2, 3-P3] Reduced recurrence of maltreatment [CFSR3—3-S2] Reduced re-entry into care [CFSR3—3-P4]

Component	SOP/CPM	Process Measures and Outcomes
Promoting Safety through Assessment Ensure children are first and foremost protected from abuse and neglect and are maintained safely in their homes. Gather information regarding families' concerns and needs; evaluate the relevance of that information and identify families' strengths and community resources that may address their needs.	SDM*/CAT Safety Mapping Harm and Danger Statements Teaming/Networks of Support Child and Family Team Meetings** Family Connections** Three Houses/Safety House Three Questions Safety Planning* Coaching* CAPP Practice Behaviors**	**Process Measures:** Improved evaluation of safety and danger Increased alignment of assessment results and service referrals **Outcomes:** Reduced entries [AB636—Entry Rates] Increased permanency and timeliness [CFSR3—3-P1, 3-P2, 3-P3] Reduced recurrence of maltreatment [CFSR3—3-S2] Reduced re-entry into care [CFSR3—3-P4]

Component	SOP/CPM	Process Measures and Outcomes
Safety Driven Service and Support Planning and Implementation Tailor plans to build on strengths and protective capacities and meet families' needs. Provide culturally sensitive supports and services including family and communities' perspectives.	Solution Focused Interviewing* Teaming/Network of Supports Child and Family Team Meetings** Family Connections** Safety Planning* Safety Goals Behaviorally Based Case Plans* Coaching* CAPP Practice Behaviors**	**Process Measures:** Improved evaluation of danger and safety Improved engagement of network of support/family connections Improved identification of behavioral changes in case plans that enhance the safety and well-being of the child. **Outcomes:** Decrease group home care [AB636—4B] Increase relative placement [AB636—4B, 4E] Reduced entries [AB636—Entry Rates] Increased permanency and timeliness [CFSR3—3-P1, 3-P2, 3-P3] Increased placement stability [CFSR3—3-P5] Reduced recurrence of maltreatment [CFSR3—3-S2] Reduced re-entry into care [CFSR3—3-P4]

Component	SOP/CPM	Process Measures and Outcomes
Monitoring and Adapting Team members share the responsibility of monitoring and adapting the plan. Monitoring includes on-going assessment for further trauma exposure impacting children and families' progress. The team identifies and links goals and interventions to observable or measurable indicators of success; continually revisits progress on tasks and goals, revising the plan accordingly.	Safety Mapping Solution Focused Interviewing* Teaming/Network of Support Child and Family Team Meetings** Family Connections** Safety Planning* Safety Goals SDM*/CAT Behaviorally Based Case Plans* Coaching* CAPP Practice Behaviors**	**Process Measures:** Increased accuracy and timeliness of safety and risk assessments Improved engagement of the network of support/family connections **Outcomes:** Decrease group home care [AB636—4B, 4E] Increased permanency and timeliness [CFSR3—3-P1, 3-P2, 3-P3] Reduced recurrence of maltreatment [CFSR3—3-S2]

Component	SOP/CPM	Process Measures and Outcomes
Transitions and After Care Planning Ensure children have permanency and stability in their living situation. Transition plans reflect children and families' voice and choice and delineate action plans they have identified as working for them. The support team's involvement beyond the time of child welfare and/or mental health services is emphasized throughout all components.	Safety Mapping Solution Focused Interviewing* Teaming/Network of Support Child and Family Team Meetings** Family Connections** Voice of the Child/Three Houses/Safety House Voice and Choice** Safety Planning (Aftercare)* Safety Goals Coaching* CAPP Practice Behaviors**	**Process Measures:** Increased accuracy and timeliness of safety and risk assessments Improved engagement of network of support/family connections Increased development of behaviorally specific after care plans that include the network of support/family connection to sustain child safety **Outcomes:** Reduced entries [AB636—Entry Rates] Increased permanency and timeliness [CFSR3—3-P1, 3-P2, 3-P3] Reduced re-entry into care [CFSR3—3-P4] Reduced recurrence of maltreatment [CFSR3—3-S2]

Appendix: Outcome Measure Description

AB636 [C-CFSR California Outcomes and Accountability System State Measure]

- Entry Rates
- 4B Least Restrictive (Entries First Placement)
- 4B Least Restrictive (PIT Placement)
- 4E (1&2) ICWA Placement Preferences

CFSR3 [Federal Child & Family Services Review Round 3 Measure]

- 3-S2 Recurrence of maltreatment
- 3-P1 Permanency in 12 months for children entering foster care
- 3-P2 Permanency in 12 months for children in foster care 12-23 months
- 3-P3 Permanency in 12 months for children in foster care 24 months or more
- 3-P4 Re-entry to foster care
- 3-P5 Placement stability

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* Common element throughout counties implementing SOP/CPM.

** Element practiced by the Los Angeles Department of Children and Family Services.

The State of California has a training system including the Regional Training Academies (RTA), which provides in-service training and continuing professional education to public child welfare staff. Regional RTAs provide SOP training, coaching, and implementation support. The RTA partners, who provide services to counties that are participating in the Title IV-E California Well-Being Project, are:

- The Bay Area Academy;
- The Public Child Welfare Training Academy/Academy for Professional Excellence;
- The Northern California Training Academy (NCTA) at University of California at Davis Extension; and
- The Central California Child Welfare Training Academy at Fresno State University

Please see Attachment #4 SOP Training Menus.

Populations that will receive demonstration programs and services

The Project's target population will include all Title IV-E eligible and non-Title IV-E eligible children and youth aged zero–17, inclusive, who are currently in out-of-home placement or who are at risk of entering or re-entering foster care. The SOP/CPM is a practice approach that will be used for any child that comes into the child welfare system. Not all of the above practice elements will be used for every child; however, child and family teaming, safety planning and capturing the children's voice and perspective in decision-making will be common elements provided to every child.

The CDSS will continue to convene with participating CWDs and CPDs to review SOP/CPM and Wraparound practices. Project counties will identify activities, tools, and desired outcomes associated with SOP/CPM and Wraparound. These activities are anticipated to be completed in October, 2015. Although SOP/CPM and Wraparound are primary interventions implemented, some counties have chosen to add or expand upon existing interventions.

The SOP/CPM intervention is organized into foundational skills and core components. The foundational skills, which are common throughout all participating counties, will be Solution Focused Interviewing, Appreciative Inquiry, and Cultural Humility. The core components/tools will be Behaviorally Based Case Plans, Child's Voice (Voice and Choice), Coaching, Safety Planning (may include Safety Mapping, Harm & Danger Statements, and Safety Goals), and Teaming (Networks of Support). These core tools are utilized on a case-by-case basis, as social workers will individualize their approach to meet each family's needs.

The CDSS and Project counties are developing fidelity tools for SOP/CPM evaluation and monitoring and anticipate completion in January 2016.

How the intervention will address the needs of the target population

The SOP/CPM goals are to improve family engagement through an individualized casework approach emphasizing family involvement; involve families in identifying necessary behavior changes; identifying pertinent services and supports that will help families improve upon their functioning; increase child and youth safety without an over-reliance on out-of-home care; improve permanency outcomes and timelines; and improve child, youth and family well-being.

The CWDs in eight out of nine Project counties make critical assessments and decisions through Structured Decision Making (SDM) model. The California SDM model includes: a Hotline Tool, to screen referrals received and determine how quickly a response must be made; a Safety Assessment, to determine if it is safe for a child to remain home; a Family Risk Assessment, to determine if the future risk is enough to warrant a case to be open; a Family Strength and Needs Assessment, to determine the needs, strengths and services that the family will need; a Reunification Assessment, to determine if children are able to return home; and an In-Home Family Risk Assessment, to determine if a Family Maintenance case can be closed or if the children will remain home. The Santa Clara County SSA uses the Comprehensive Assessment Tool (CAT). The CAT model includes assessments at the response determination, referral disposition, continuing services (case opening and ongoing services), and case closing phases of a case.

Example of how SOP/CPM is used in a case:

Hotline
(Use of foundational skills - Solution-Focused Interviewing, Appreciative Inquiry, and Cultural Humility)
↓
Assessment
(SOP/CPM strategies and tools, SDM, CAT, risk/safety assessment)
↓
Social Worker contacts family
(Assess family using SOP/CPM lens; utilize SOP/CPM tools such as Three Houses, Safety Map; Family Meeting to identify strengths, needs, supports)
↓
If placement is foster care
(Case Plan is built upon information above; SDM, CAT)
↓
Referral to Services
↓
Reunification and Reduced Re-Entry

(Use of Safety Plan (with Safety Goal); demonstration of behavior change; communication with providers and courts)

The SOP/CPM intervention provides tools needed to make accurate assessments, resulting in pertinent services being provided to the family; and in turn, assisting families in making the necessary behavior changes. The referral and case review process allows counties to gage whether case plans correspond with protective issues and service needs. Also, aggregate data from SDM and CAT models' assessments will assist implementing counties in making programmatic decisions regarding service offerings.

The engagement of families through SOP will also assist CWD staff develop an accurate assessment of strengths and needs for each family. The discovery of strengths and needs will also aide in identifying specific and measurable goals and objectives and the services that will assist the family in meeting them. Engagement will also assist in identifying and documenting specific behaviors and expectations in behaviorally based case plans. Increased engagement will also help the CWD and family identify kinship support and provide linkage to community based systems and services that meet family's needs and promote sustained behavior changes needed to enhance the safety of their children.

SOP's behaviorally based case plans will identify services that will help families learn and/or sharpen skills and specific sets of behaviors needed to enhance the safety of their children. Behaviorally based case plans also help CWD staff identify, document and share specific actions and behaviors to be demonstrated. Also allowing parents and attorneys to work in a partnership and create accountability for staff and families.

Outcomes associated with the intervention

The CDSS anticipates counties participating in the Project will experience a decrease in entries and re-entries into out-of-home care and recurrence of maltreatment. Increases in entries into the most appropriate and least restrictive placement settings and in child and family functioning and well-being are anticipated.

Once the evaluation contract is executed, the evaluation contractor will work with the counties and the CDSS to finalize the operational definition of "well-being" and identify appropriate assessment tools. The evaluation plan (that must be submitted to ACF within 90 days of awarding of the evaluation contract) will identify the definition of well-being, outcomes and assessment tools.

The RFP for the Title IV-E evaluation asks each proposer to submit a proposed methodology for assessing the Project. The CDSS Program staff have hosted convenings with all counties to define critical elements of the SOP intervention. Once the evaluation contract is executed, the evaluator will work with the counties and the CDSS to identify measures of program fidelity and include those measures in the overall evaluation plan.

Supporting evidence for the intervention

The NCTA defines SOP as a collaborative practice approach that emphasizes the importance of teamwork in child welfare. The State of California defines CPM as a

value system for both child welfare and mental health administrators and practitioners. The CPM provides a framework for integrated practice for all child welfare and mental health agencies, service providers and community/tribal partners working with youth and families. The CPM is organized into five practice components, which align with SOP practices: Engagement, assessment, service planning and implementation, monitoring and adapting, and transition. California does not mandate its counties to utilize a specific set of practices. The state offers the flexibility to choose from practices administrators feel is the most relevant to the needs of those receiving services in their respective counties. The LACDCFS opted to use the CPM framework within their jurisdiction. The CDSS and participating CWDs merged SOP and CPM in developing the model for the Project as it is believed both approaches value safety, cultural sensitivity and strength-based planning while placing the child, youth and family at the center of all teaming efforts.

The SOP has not been rigorously tested to be rated as an evidenced based practice, however it is informed by, and integrates practices and approaches including: Solution-focused practice, Signs of Safety, Structured Decision Making, child and family engagement, risk and safety assessment research, group supervision and interactional supervision, appreciative inquiry, Motivational Interviewing, Consultation and Information Sharing Framework, cultural humility and trauma-informed practice. According to the California Evidence-Based Clearinghouse, Motivational Interviewing has been well supported by research and Structured Decision Making is a promising research. SOP is informed by an integration of practices that includes Motivational Interviewing; however, the practice included in the Project's SOP/CPM model is Solution Focused Interviewing.

The CDSS will engage a third party to conduct an evaluation and test the hypothesis that the use of Title IV-E funds to provide alternative services in the area of family-centered practice, as appropriate, will result in improved safety, permanency, and well-being outcomes for children. The evaluation will consist of three components: a process evaluation, an outcome evaluation and a cost analysis.

Program development and adaptation work needed to be done to prepare each intervention for implementation

As all counties are at different levels of implementation, it is imperative that each develop the infrastructure to take this practice to scale county wide. Training and coaching is needed to further develop engagement and assessment skills. Project counties report training as key to implementation. Countywide changes needed to adhere to the SOP/CPM include policy modifications and coaching. Counties of Alameda, Lake, San Diego, Santa Clara and Sonoma will not need to implement additional changes to adhere to the SOP/CPM model. The BCDESS and SCDHHS will modify SOP policies and procedures. The BCDESS is shifting its policies and procedures from an optional SOP to a mandatory SOP practice. New policies and procedures will provide clear expectations of SOP practice throughout the life of a referral or case from the initial phone call to the termination of dependency. The new policy has been drafted and is in the final stages of revision, the anticipated date to implement and train all staff is August 2015. The BCDESS is also developing a policy

regarding SOP and Quality Assurance (QA). In addition to the required Child and Family Services Review (C-CFSR) process, our QA Supervisors will be examining cases for SOP compliance and activities. Policy changes in Sacramento County address when, what, and at what point SOP practice will be used and how SOP will be documented as required.

San Francisco County is currently hiring internal coaches to account for coaching needs. In addition, Los Angeles County has adopted an immersion strategy to support satisfactory implementation of CPM.

Child and family team facilitation will need to be implemented to scale for individualized service planning and implementation to capture the child, youth and family voice and to ensure there is monitoring and on-going adaption of the family plan as needed. Some counties have already begun implementing the training and coaching aspects of SOP/CPM, while others are building their infrastructure but all will be using the model of SOP/CPM that has been developed.

The participating counties developed their SOP/CPM implementation plans, including training and coaching components. For the purpose of evaluation and data collection time periods, implementation will commence as the first cohort of social workers is trained and begin the coaching process. The CDSS will continue to include this information in upcoming Semi-Annual Progress Reports.

The following notes input regarding SOP/CPM implementation and whether it was implemented prior to the Project:

- **ACSSA**: Implementation began after the start of the current Waiver, in March 2015.

- **BCDESS**: The BCDESS implemented SOP in 2010 on a voluntary basis; however, SOP became a mandatory practice under the Project. SOP implementation under the Project began in October 2014.

- **LCDSS**: LCDSS implemented SOP in 2010. The LCDSS trained staff and committed to using SOP as the practice model. While some practice activities became fully implemented across all programs, others were not fully implemented by all staff. The LCDSS fully implemented SOP at the start of the Project and retrained all staff, added a coaching component, began to create policies, and hired an evaluator to assist with the development of tracking and evaluation of SOP activities. The LCDSS anticipates the Project will provide resources for advanced training, increased coaching and identifying and funding services that better address the individualized needs of children and families, as well as the opportunity to fully evaluate our SOP practice. The support, resources and accountability provided by the Project will strengthen practice and ensure fidelity to the model. SOP implementation under the Project began in October 2014.

- **LACDCFS**: Began implementing CPM prior to start of this Waiver period; however, staff initially had some apprehension with implementing a new practice model. The LACDCFS has had six Directors over the last 10 years, each with different practice models. With the waiver, staff will have the security that the practice model will not change for the wavier five-year period and allow for increased confidence and fidelity in implementation. Since the start of the waiver on October 1, 2014, detentions have decreased. Staff report that they are using CPM and CFT during referral investigations and these processes have led to more children being able to remain in their own home. As of July 14, 2015, the LACDCFS has 28 Coach Developers, 43 Coaches and 286 Facilitators. The LACDCFS is projecting that 1,000 new staff will be hired, trained and have a full caseload by February 26, 2016. CPM implementation under the Waiver will begin in February 2016.

- **Sacramento**: In 2010, Sacramento County began implementation of Signs of Safety (a model that incorporates many of the same tools as SOP). Sacramento County CW staff at all levels have been trained on the various SOS tools and implementation was strongly encourage by all staff, but not mandatory. Under the Waiver, SOP/CPM is mandatory for CW staff. SOP/CPM becoming a mandatory practice, requires CW management to determine what tools will be mandated at what stage of the referral/case, how will the use of tools be tracked and how will the tools be evaluated. Most CW staff have been trained and are integrating the tools into practice and SOP will be fully implemented on January 1, 2016. SOP implementation will begin in January 2016.

- **San Diego**: Implementing SOP since 2010. Under the Waiver, San Diego County added six SOP coaches and plans to add three more in the next two months. San Diego County will also be providing additional support for teaming efforts through the implementation of family finding and providing visit coaching to support parents and children during visitation. SOP Coaches started May 1, 2015. SOP implementation under the Waiver will begin in May 2015.

- **San Francisco**: San Francisco County began to train for SOP about a year before the waiver started. Under the waiver, San Francisco County will have all staff trained, from hotline to aftercare FM, including private provider contractors. Implementation at the individual level can be defined as a staff member being both trained and coached. SOP implementation under the Waiver will begin in October 2016.

- **Santa Clara**: Santa Clara County has implemented the Child and Family Practice Model (CFPM) as part of the CAPP, which includes elements of SOP, the use of which is optional. Under the Waiver, the expectation will be that staff will utilize some of the SOP elements in their work with family. Santa Clara County will begin SOP implementation on October 1, 2015.

- **Sonoma**: Sonoma County is new to SOP. The first group of newly trained workers began using SOP in April 2015. Sonoma County will implement all SOP components by December 2016.

Intervention 2: Wraparound

Core components of the intervention

The CPD's prevention programs will focus on older youth exhibiting delinquency risk factors that put them at risk of removal from their home and placed in foster care. The CDSS, in collaboration with participating CPDs, termed older youth as individuals 12-17 years, inclusive.

The following lists CPDs' input regarding their determination of risk factors and PO expectations:

- **ACPD**: Risk Assessment Tools: Child and Adolescent Needs and Strengths (CANS), Youth Level of Service/Case Management Inventory (YLS/CMI), Probation Risk Assessment, and the Response Grid. All POs are expected to utilize the tools and particularly, the POs use the SOS as a response to help make decisions for screening out of home placement.

- **BCPD**: The POs determine risk factors through the Positive Achievement Change Tool (PACT).

- **LCPD**: In LCPD, POs determine risk factors through the PACT assessment.

- **LACPD**: Delinquent risk factors are determined by utilizing the Evaluation of Imminent Risk and Reasonable Candidacy and with the support of the Title IV-E Pre-Placement Case Plan, which affect his/her and the family's safety and well-being. This preliminary review used by all Deputy POs. This is to identify and to indicate the youth/family need the services in order for the youth to safely remain in his/her home. In addition, the LACPD uses the Los Angeles Risk and Resiliency Checkup (LARRC) to assess the risks and needs of each Probationer under our jurisdiction. This assessment is conducted every six months.

- **SCPD**: Delinquency risk factors will be determined through the use of a general criminogenic needs assessment and a non-structured family evaluation by both the Providers and POs. Criminogenic needs will be evaluated on a pre/post basis. Family needs will be assessed through the treatment model collaborative treatment teams throughout the family's participation.

- **SDCPD**: All POs in SDCPD will utilize Motivational Interviewing in order to complete our validated risk and needs assessment tool, the San Diego Risk and Resiliency Check-up (SDRRC). This assessment will identify the risk and need factors for the youth.

- **SFCPD**: The POs in SFCPD complete a risk and needs assessment to determine delinquency risk factors.

- **SCCPD**: The SCCPD uses a Juvenile Assessment and Intervention System (JAIS) developed by National Council on Crime and Delinquency (NCCD). This tool is used by all Juvenile POs to identify risk level (Low, Moderate or High).

- **SCPD**: The SCPD employs the PACT. All POs are trained on this tool and use assessment results to identify risk factors.

The following outlines county input regarding their Wraparound implementation, differences under the project and implementation date:

- **ACPD**: The ACPD implemented Wraparound in 2012. There were ten slots added under the Project to include Medi-Cal recipients. Youth receive services through the Season of Sharing program or are assigned to the FPU.

- **BCPD**: The Project is not an expansion of the county's existing Wraparound program, it is a separate program implemented in February 2015.

- **LCPD**: Lake County's implementation date was March 2015. There was a contract in place for Wraparound and needed modification before beginning the referral process. The LCPD expects to see if the targeted area of their Project will pinpoint areas of need that can be improved upon in a measureable amount.

- **LACPD**: Wraparound began in November 2000 and is fully implemented during this Project period. In the Demonstration extension, the LACPD is redefining the target population and expects to serve adjudicated Probation youth, to include those on deferred entry of judgment status. Current Wraparound contracts started on May 1, 2015.

- **SCPD**: The SCPD has been utilizing Wraparound services for quite some time. The Wraparound services utilized by the Placement Division is coordinated through Cross Systems and managed by the Department of Mental Health to serve youth who are in foster care. Wraparound services in placement is utilized to transitional a youth to a lower level of care or reunify the youth back into the home of the parent/guardian. The Wraparound services provided through the Project is being utilized as a front-end preventative measure in hopes of keeping youth from entering into the foster care system by immediately assessing and identifying treatment needs. The youth identified through the Project are non-candidates, thus not at imminent risk of removal from the home or currently in foster care. These youth were not eligible prior to the Project.

- **SDCPD**: The SDCPD implemented Wraparound prior to the Project. Their subsequent changes include the identification of two distinct populations who would benefit from Wraparound services, targeting high needs youth and reasonable candidate youth. The SDCPD will utilize the SDRRC, their evaluation

tool, the Evaluation of Imminent Risk and Reasonable Candidacy (EIRRC), and case planning. As part of the Project, they have now defined our "high needs" waiver population through established criteria and will now focus on providing this population Wraparound service.

- **SFPD**: The SFPD is continuing and expanding Wraparound services. The continuing population was served under SB 163 and included only those youth for whom wardship was declared. The expansion of Wraparound services, funded in part by the Project, is directed toward a population that previously was not eligible. These youth are either pre-adjudicated youth or youth who have been declared incompetent by the court and who rate as high or moderately high needs under a mental health assessment. Implementation with these youth began in March 2015.

- **SCCPD**: The SCCPD implemented Wraparound prior to the Project for dependent and probation youth eligible under SB 163. However, under the Project the SCCPD will implement Wraparound for preadjudicated youth (court is pursuant to WIC 654.2, DEJ, six months NonWard and younger youth pending competency and restoration). The youth receiving Wraparound services will go through the four described phases.

- **SCPD**: Prior to the waiver, the SCPD provided Wraparound services for youth at imminent risk of home removal through SB 163. This was a preventative measure (pre-placement), but was occasionally utilized as an aftercare measure (post-placement). These practices are continuing, but under the Project, Wraparound is being expanded to serve the targeted “high needs” population.

The four phases of Wraparound are:

1. **Engagement and Team Preparation**: During this phase, the groundwork for trust and shared vision among the family and Wraparound team members is established, so people are prepared to come to meetings and collaborate. The tone is set for teamwork and team interactions that are consistent with the Wraparound principles. This phase provides an opportunity to begin to shift the family’s orientation to one that they understand they are an integral part of the process and their preferences are prioritized.

2. **Initial Plan Development:** During this phase, team trust and mutual respect are built while the team creates an initial plan of care using a high-quality planning process that reflects the Wraparound principles. Youth and family should feel that they are heard, that the needs chosen are ones they want to work on, and that the options chosen have a reasonable chance of helping them meet these needs.

3. **Implementation:** During this phase, the initial Wraparound plan is implemented, progress and successes are continually reviewed, and changes are made to the plan and then implemented, all while maintaining or building team cohesiveness

and mutual respect. These activities are repeated until the team's mission is achieved and formal Wraparound is no longer needed.

The following outlines CPDs' input regarding Wraparound delivery including implementation of Wraparound plans and team consensus:

- **ACPD**: Project Permanence utilizes the Wraparound service delivery model to provide intensive youth-centered, family driven services. Alameda County Behavior Health holds a contract with a community based agency, Lincoln Child Center (LCC), to provide Wraparound services. The ACPD will utilize this intervention model intentionally as an alternative to out-of-home placement and for aftercare services for youth returning home from placement when appropriate. Leadership from Probation, BHCS and LCC have identified indicators and a methodology for quality assurance to program fidelity and to monitor program outcomes. Program census has also been added to the Waiver Executive Team data dashboard for monthly review.

- **BCPD**: The PO and contract staff collaborate to complete and implement the Wraparound plan. The plan is reviewed at a minimum of one time per month. The whole team requires a consensus.

- **LCPD**: Their provider implements the Wraparound plan and hold meetings with Wraparound providers on a bi-weekly basis. A general consensus between the Wraparound team and LCPD on the progression of the youth typically determines whether or not a youth progress through the program.

- **LACPD**: The Wraparound Child and Family Team (CFT) develops and implements the family's plan, address unmet needs, crisis stabilization and works toward the consensus youth and family's goals. The contracted providers complete the plan every six months for all Probation youth receiving Wraparound services under Deputy POs' supervision. The evaluation allows the Deputy PO and the contracted providers to identify the risks and needs of the youth and family, including services necessary to prevent removal of the youth from the home, which is supported in the Title IV-E Pre-Placement Case Plan.

- **SCPD**: The Wraparound plan is developed in collaboration between the family, treatment provider and PO. The team needs to have consensus on the plan before it is implemented and all team members review the plan regularly.

- **SDCPD**: The provider is contractually obligated to develop and implement an individualized strength based, culturally competent, and family driven client plan. Wraparound services are delivered through a collaborative process involving the youth and family as well as any other identified team members. The plan is reviewed and is modified and/or changed as the

goals are met and as the family's needs change, at minimum monthly. Through the collaborative process, the youth will move to the transition stage once the desired outcomes have been met and the family has developed a natural support system, which no longer requires the need for the formal Wraparound process. This is a collaborative process and decision, which engages the entire team.

- **SFCPD**: The contracted agency implements the Wraparound plan for a youth/family. The contractor, in collaboration with probation and welfare staff, completes a comprehensive mental health assessment in order to identify strengths and resources, needs and concerns, and potential pathways for success. They utilize the CANS to help guide the assessment process and clinicians write a clinical formulation summarizing insights gleaned. They conduct formal assessments according to specific time-lines, view assessment as an on-going process and continually seek to refine and enlarge their understanding of clients and their circumstances.

  Based upon the assessment, they work with clients and families to craft a highly individualized treatment plan based on individual strengths, behaviors, and needs. This treatment plan incorporates positive behavioral interventions, behavior modification and clinical therapeutic approaches. The treatment plan provides a framework for intervention, and is formally reviewed and revised every six months. Micro-level treatment planning and adjustments also occur on an ongoing basis via treatment team meetings, family team meetings and treatment reviews.

  Preparation for transition begins in the Engagement Phase at the start of the Wraparound process. From the time of initial meetings with team members, discussion focuses on the team's foundational goals. Having clear consensus about the team's foundational goals is the first step toward transition, as it establishes a shared vision of what "success" will look like at the close of services.

- **SCCPD**: The Wraparound providers complete and implement the Wraparound plans with the family's voice and PO's input. The first Wraparound plan has to be developed within 30 days of the referral being open. After the initial plan, subsequent plan must be developed every six months. The Resource and Intensive Service Committee (RISC) reviews the plan at the monthly oversight meeting with each provider. RISC is a multi-disciplinary committee comprised of representatives from Department of Family and Children's Services, the PD and the Mental Health Department. RISC is responsible for approving all Wraparound referrals, Level 13/14 residential placement, out of state placement, Multidimensional Treatment Foster Care (MFTC) and Intensive Treatment Foster Care (ITFC) placement. In a case where the RISC committee does

not approve the Wraparound plan, it will be return to the providers to resubmit with changes to the plan.

- **SCPD:** The contracted Wraparound facilitator, following an assessment of the family and youth, implements the Wraparound plan. This plan is reviewed and updated every six months at a minimum. Wraparound staff creates the plan with feedback from the youth and family and the supervising PO regarding identified goals. The Wraparound team, youth and parents – but not the PO – sign the plan.

4. **Transition**: During this phase, plans are made for a purposeful transition out of formal Wraparound to a mix of formal and natural supports in the community (and, if appropriate, to services and supports in the adult system). The focus on transition is continual during the process, and preparation for transition is apparent even during the initial engagement activities.

   The transition referenced in the Wraparound model is not a physical/community transition, but rather a phase in a process. The transition occurs when the desired outcomes have been achieved and the family has developed a natural support system, which no longer requires the need for the formal Wraparound process. This is a collaborative process and decision, which engages the entire team. This is a preparation for the youth and family to have natural support without the assistance from the Wraparound providers. Once the goals set forth in the Wraparound plan are met by the family, as determined by all members of the team, the family transitions out of the program.

   The CDSS will work with counties to further define the process measures for Wraparound. The CDSS is currently collecting information on counties' methods of assessing risk and will continue to work with counties to identify common tools and measures.

Wraparound Critical Elements

The Wraparound Critical Elements Phases and Practices are as indicated in the National Wraparound Initiative, The Resource Guide to Wraparound and The Wraparound Process User's Guide.

Phases	Practice	Outcomes
Engagement and Team Preparation: Establish groundwork for trust and shared vision among the family and wraparound team members. Sets tone for teamwork and interactions that are consistent with wraparound principles. Includes conversations about strengths, needs and culture. Informs families of their integral role and the importance of prioritizing their preferences throughout the entire process.	**Activities:** Discussion of strengths, beliefs and traditions with family Explain process and choices to the family Discuss what has worked in the past for child and family Family selects team members Discuss team meeting logistics Identify what leads to crises or dangerous situations **Documents:** Strength Summary or Discovery Strength list or inventory List of Potential Youth/Child & Family Team members **Forms:** Form providing initial permission to provide services Release(s) allowing Facilitator to speak with other team members	Reduced entries [AB636—Entry Rates] Decrease group home care [AB636—4B] Increase relative placement [AB636—4B, 4E] Increased placement stability [CFSR3—3-P5] Increased permanency and timeliness [CFSR3—3-P1, 3-P2, 3-P3] Reduced re-entry into care [CFSR3—3-P4] Decrease Recidivism

Phases	Practice	Outcomes
Initial Plan Development: Build team trust and mutual respect and create a team mission and goals. Create strength, community and outcome based initial plan of care reflecting family voice and choice, teaming, cultural awareness, individualization and natural supports. Evaluate need for bilingual facilitators or translators and completed at a rapid time frame to promote team cohesion and shared responsibility toward achieving mission and goals.	**Activities:** Team develops written mission or vision statement Family and team creates a written plan of care including needs, goals, outcomes, strategies, action steps Plan connects to the child and family's strengths and abilities and includes community connections Create crisis or safety plan Complete documentation and logistics **Documents:** Plan of Care that includes Team Mission, most important needs, actions that detail who is responsible to follow through and when Written crisis plan that includes who will do what when things go wrong and who should be called in what order Schedule of future team meetings **Forms:** Permission(s) and release(s) if new service providers are called	Reduced entries [AB636—Entry Rates] Decrease group home care [AB636—4B] Increase relative placement [AB636—4B, 4E] Increased placement stability [CFSR3—3-P5] Increased permanency and timeliness [CFSR3—3-P1, 3-P2, 3-P3] Reduced re-entry into care [CFSR3—3-P4] Decrease Recidivism

Phases	Practice	Outcomes
Implementation: Implement plan and review progress and success adjusting the plan accordingly. Carry out action steps, track progress, evaluate success of strategies, celebrating successes and considering new ones as needed. Continue to build and address issues of team cohesion.	**Activities:** Implement action steps for each strategy Track progress on each action step and celebrate successes Team generates new plan ideas as needs change Continue informing team members of activities and procedures Team assigns specific tasks to all members Complete documentation including meeting minutes, progress, successes and changes to plan **Documents:** Team minutes that detail team accomplishments, changes to the plan and schedule of meetings Regular progress reports that reflect progress made from the original plan **Forms:** Updated releases for team members especially if new ones are added	Reduced entries [AB636—Entry Rates] Decrease group home care [AB636—4B] Increase relative placement [AB636—4B, 4E] Increased placement stability [CFSR3—3-P5] Increased permanency and timeliness [CFSR3—3-P1, 3-P2, 3-P3] Reduced re-entry into care [CFSR3—3-P4] Decrease Recidivism

Phases	Practice	Outcomes
Transition: Purposeful transition out of formal Wraparound services to a mix of formal and natural supports in the community. Create a transition plan including a post-transition crisis management plan and documentation of the team's work and strengths. Also documenting youth/child and family's strengths.	**Activities:** Create transition plan Create post-transition crisis management plan Add new team members reflecting identified post-transition strategies, services and supports Celebrate successes **Documents:** Transition plan that describes how ongoing services will be accessed if necessary Crisis plans that includes communication protocols for those who will be contacted in the event of an emergency Follow-up phone numbers for all team members who might be contacted Formal discharge plan that describes strengths of the family, the interventions that were successful and those that were not **Forms:** Discharge summary	Reduced entries [AB636—Entry Rates] Decrease group home care [AB636—4B] Increase relative placement [AB636—4B, 4E] Increased placement stability [CFSR3—3-P5] Increased permanency and timeliness [CFSR3—3-P1, 3-P2, 3-P3] Reduced re-entry into care [CFSR3—3-P4] Decrease Recidivism

Appendix: Outcome Measure Description

AB636 [C-CFSR California Outcomes and Accountability System State Measure]

- Entry Rates
- 4B Least Restrictive (Entries First Placement)
- 4B Least Restrictive (PIT Placement)
- 4E (1&2) ICWA Placement Preferences

CFSR3 [Federal Child & Family Services Review Round 3 Measure]

- 3-P1 Permanency in 12 months for children entering foster care
- 3-P2 Permanency in 12 months for children in foster care 12-23 months
- 3-P3 Permanency in 12 months for children in foster care 24 months or more
- 3-P4 Re-entry to foster care
- 3-P5 Placement stability

Populations that will receive demonstration programs and services

The Project's target population will include Title IV-E eligible and non-Title IV-E eligible youth aged 12–17, inclusive, who are at imminent risk or at risk of entering or re-entering foster care. The CDSS and Project counties will consult with the evaluation contractor to define both imminent risk and the target population for Wraparound.

How the intervention will address the needs of the target population

The goals are to improve the array of services and supports available to youth and families involved in the juvenile probation systems; engage families through a more individualized casework approach that emphasizes family involvement; increase youth safety without an over-reliance on out-of-home care; improve permanency outcomes and timelines; improve youth and family well-being; and decrease recidivism and delinquency for youth on probation.

The Chief Probation Officers of California (CPOC) asserts locally planned and designed strategies that are key in crime prevention. The Wraparound intervention will empower children, youth, and families as it utilizes a strength-based teaming approach and develops connections to community based resources. These connections will, in turn, have a positive effect on recidivism and delinquency among youth in Project counties.

Outcomes associated with the intervention

The CDSS anticipates counties participating in the Project will experience a decrease in entries and re-entries into out-of-home care, recurrence of maltreatment, and re-offenses among children and youth on probation. Increases in entries into the most appropriate and least restrictive placement settings and in child and family functioning and well-being are also anticipated.

Once the evaluation contract is executed, the evaluation contractor will work with the counties and the CDSS to finalize the operational definition of "well-being" and identify appropriate assessment tools. The definition of well-being, outcomes and assessment tools will be identified in the evaluation plan that must be submitted to ACF within 90 days of awarding of the evaluation contract.

The RFP for the Title IV-E evaluation asks each proposer to submit a proposed methodology for assessing the Project. The CDSS Program staff have hosted convenings with all counties to define critical elements of the Wraparound intervention. Once the evaluation contract is executed, the evaluator will work with the counties and the CDSS to identify measures of program fidelity and include those measures in the evaluation plan.

Supporting evidence for the intervention

Wraparound is an established practice for PDs in California; however, extending intervention to non-IV-E eligible youth is a new practice. Wraparound has been rated a three, promising research evidence, on the California Evidence-Base Clearinghouse. The intervention is designed for youth with severe emotional, behavioral or mental health difficulties and their families where the youth is at imminent risk or at risk for, out of home, institutional, or restrictive placements.

The CDSS will engage a third party to conduct an evaluation of the program to test the hypothesis that the use of Title IV-E funds to provide alternative services in the area of prevention, as appropriate, will result in improved safety, permanency, and well-being outcomes for children. The evaluation will consist of three components: a process evaluation, an outcome evaluation and a cost analysis.

Participating counties will implement the full Wraparound model that is organized into four phases: Engagement and Team Preparation, Initial Plan Development, Plan Implementation and Transition. Section B, Part 1 details activities performed throughout each phase.

Assessment and fidelity tools vary across participating counties. The following lists Wraparound providers and their assessment and fidelity tools.

Wraparound Assessment and Fidelity Tools

The CDSS has drafted a list of the Wraparound fidelity tools utilized in each county and will utilize the list to inform the development of the evaluation and monitoring plans. The

Project will not require participating counties to use the same Wraparound fidelity tool; rather, each county agency will be responsible for achieving fidelity in their planned implementation. The anticipated completion date for the evaluation and monitoring plans is January 2016.

County	Provider, Assessment and Fidelity Tools
Alameda	**Provider**: Project Permanence **Assessment Tools**: Child and Family Satisfaction Surveys and CANS **Fidelity Tools**: Project Permanence does not utilize a specific fidelity tool, however it uses the following measurements: Project Permanence: Clients Referred by ACPD Contractor shall meet the following client outcomes as measured by arrest and placement data: • 70 percent of youth shall have no new sustained arrests during the time of treatment to be reviewed at discharge and six months post-discharge. • 70 percent of youth will be living at home or a home-like setting in the community and not in congregate care at discharge. This is for all clients whether SSA or Probation All Clients: • Contractor shall meet the following parent/family deliverables as measured by Project Permanence Youth and Family Satisfaction Surveys administered at discharge: • At least 65 percent of participating Youth and Caregivers will respond to the Youth and Family Survey; • 70 percent of parents shall indicate agree or strongly agree on parent survey question "I have people in my community to whom I can turn"; • 70 percent of participant families shall be actively involved in at least one community, athletic, or spiritual activity at discharge; • 85 percent of youth surveyed shall agree/strongly agree that "staff were sensitive to my cultural/ethnic background"; • 85 percent of youth surveyed shall agree/strongly agree that "staff respected my family's religious/spiritual beliefs"; • 85 percent of participants shall agree/strongly agree they felt they were included in the team planning and decision making; • 85 percent of the participants shall agree/strongly agree they felt that the team never gave up on him/her despite all the ups and downs experienced; • 85 percent of participants shall agree/strongly agree they remembered to talk about success, strengths, or accomplishments at team meetings; • 85 percent of parents/caregivers shall agree/strongly agree they felt the team developed a service plan to fit their family's or child's needs; and • 85 percent of participants shall agree/strongly agree they felt working with Project Permanence was a positive experience. • Contractor's staff shall complete initial CFT meeting/FTM within 50 days of each episode opening, and ISP shall be developed for each client at the initial CFT meeting/FTM. Regular CFT meetings/FTMs shall continue to be initiated by Contractor's staff at a minimum of once a month • An individualized safety plan shall be developed for each client within 30 days from the date of client's entry into the program.
Butte	**Provider**: Awakening Solutions Counseling (local agency). **Assessment Tools**: The Risk Sophistication Treatment Inventory. The RSTI is an interview and rating scale designed to help you plan treatment for juvenile offenders. **Fidelity Tool**: Wraparound Fidelity Index, brief version (WFI-EZ)
Lake	**Provider**: Redwood Community Services (formerly Redwood Children's Services). **Assessment Tools**: Positive Achievement Change Tool (PACT) **Fidelity Tools**: Wraparound Fidelity Index Tool - WFI 4 and WFI 4 EZ; use this tool every six months, at closing and if the family consents three months after closing. Beginning to look into implementing the Team Observation Measurement -TOM to increase our fidelity in care coordination.
Los Angeles	**Providers**: • ALMA Family Services • Amanecer Community Counseling Service • Bayfront Youth and Family Services

County	Provider, Assessment and Fidelity Tools
	• Bienvenidos Children's Center, Inc. • Child and Family Center • Child and Family Guidance Center • Children Youth and Family Services, Inc. • Children's Bureau of Southern California • Children's Institute, Inc. • Counseling and Research Associates • Dignity Health • Drew Child Development Corporation • D'Veal Corporation • El Centro Del Pueblo • Ettie Lee Youth and Family Services • Families First, Inc. • Five Acres – The Boys' and Girls' Aid Society of Los Angeles County • Florence Crittention Services of Orange County, Inc. • Foothill Family Service • Hamburger Home • Hathaway – Sycamores Child and Family Services • Help Line Youth Counseling • Hillsides • Institute for Multicultural Counseling and Education Services, Inc. • Leroy Haynes • Los Angeles Child Guidance Clinic • Maryvale • Olive Crest Treatment Centers • Pacific Lodge Youth Services • Penny Lane Centers • Personal Involvement Center, Inc. • Phoenix House • Rosemary Children's Services • San Fernando Valley Community Mental Health Center, Inc. • San Gabriel Children's Center, Inc. • South Central Health and Rehabilitation Program / Southern California Health and Rehabilitation Programs • Special Service for Groups, Inc. • SPIRIT Family Services • St. Anne's Maternity Home • Star View Children and Family Services, Inc. • Sun Bridge Harbor View Rehabilitation Center • Tarzana Treatment Center, Inc. • Tessie Cleveland Community Services • The Help Group Child and Family Center • The Village Family Services • Vista Del Mar Child and Family Services • AspiraNet • Institute for Family Centered Services Inc. **Assessment Tools**: Wraparound providers administer the CAFAS and Probation uses the Los Angeles Risk and Resiliency Check (LARRC) to assess every youth under our supervision. The LARRC is administered every six months or as needed. **Fidelity Tools**: Wraparound Fidelity Index.
Sacramento	**Provider**: Stanford Youth Solutions, River Oaks and EMQ Family First **Assessment Tools**: • Child and Adolescent Functional Assessment Scale (CAFAS) • Wraparound Team Observation Measure, • CANS, Youth outcome questionnaire (YOQ) • Youth outcome questionnaire self report (YOQ – SR) **Fidelity Tool**: Wraparound Fidelity Index
San Diego	**Providers:** Fred Finch, Families Forward, San Diego Center for Children

County	Provider, Assessment and Fidelity Tools
	Assessment Tools: San Diego Risk and Resiliency Check Up, CANS, CAMS, CFARS, PAF, PTSD-RI, CRAFFT **Fidelity Tools:** • Fred Finch and Families Forward: Internal agency tool (auditing process based on Wraparound standards, along with internal coaching and observation strategies). • San Diego Center for Children: Observation tools, adapted from the TOM
San Francisco	**Providers:** San Francisco Juvenile Probation, in partnership with and with the SF Human Services Agency as the lead agency, is in the middle of a new bidding process for Wraparound services. Currently, the provider is Seneca Family of Agencies. **Assessment Tool:** CANS **Fidelity Tool:** WiFi EZ Fidelity Tool
Santa Clara	**Providers:** Eastfield Ming Quong (EMQ) Families First, Rebekah Children's Services, Unity Care Group, Seneca Family of Agencies and Starlight-Starview **Assessment Tools:** • EMQ Families First: Comprehensive Mental Health Assessment (full narrative, MSE, and other risk factor evaluations all within the document); CANS (Child and Adolescent Needs and Strengths); CEDE (Core Evaluation Data Elements) – in home, in school, out of trouble measures; YSS, YSS-F (satisfaction measures). • Rebekah Children's Services: CANS • Unity Care Group: five Pillars monthly; CANS 30 days and every six months; Initial and Annual County MH Assessment. • Seneca Family of Agencies: CANS • Starlight-Starview: CANS; COR (Client Outcomes Report) internally. However, this is more of an Outcome measure and not an assessment tool. This is an SBHG generated tool. Screening tool at intake to determine safety concerns and help generate Safety Plans. This is called the Dangerous Behavior Screening. Again, this is an internal tool, generated by SBHG. **Fidelity Tools:** • EMQ Families First: Wraparound Index Fidelity and Team Observation Measure (TOM). • Rebekah Children's Services: Wraparound Fidelity Index (WFI). • Unity Care Group: TOM tool for FST meetings. Do not use WFI. • Seneca Family of Agencies: WFI • Starlight-Starview: WFI and TOM
Sonoma	**Provider:** Seneca Family of Agencies **Assessment Tools**: CANS **Fidelity Tool**: WFI

Program development and adaptation work needed

Engagement and Team Preparation, Initial Plan Development, Implementation and Transition.

COUNTY INTERVENTIONS AND ESTIMATES

CWDs

Intervention	Definition	Target Population	Projected Caseload Over the Five Year Period

Intervention	Definition	Target Population	Projected Caseload Over the Five Year Period
SOP/CPM (Alameda, Butte, Lake, LA, Sacramento, San Diego, San Francisco, Santa Clara and Sonoma County)	The SOP is in support of CPM and further enhances social work practice. Specific elements of SOP include family engagement and assessment, behaviorally based case planning, transition planning, ongoing monitoring, and case plan adaptation as appropriate. Specific services to be implemented as part of SOP include Safety Mapping/Networks, effective safety planning at foster care entry and exit, Capturing the Children's Voice, solution-focused interviewing, motivational interviewing, and case teaming. The CPM provides alternative services in the area of prevention and family centered practice through parent training, child development, concrete support and parental resilience.	All Title IV-E eligible and non-IV-E eligible children and youth aged zero–17, inclusive, who are currently in out-of-home placement or who are at risk of entering or re-entering foster care, or have been reported as having, allegedly, been maltreated.	433,434
Evidence Based Parent Training Program: Triple P (Alameda)	Evidence-Based Parent Training Program provides parent education to promote healthy development for children and to manage behavioral problems for parents and children.	Children involved in or at risk of involvement with child welfare	1,645
Kinship Support Services Program (Butte)	Kinship Support Services Program provides supportive services to relative caregivers and children placed in their care.	Children and Relative Caregivers	326
Enhanced Prevention and Aftercare (Los Angeles)	Enhanced Prevention and Aftercare is a program of service strategies to strengthen families in areas that are related to protective factors in programs, such as Supporting Father Involvement, Safecare and Parents as Teachers.	Children and Families at High Risk of Abuse or Neglect	13,820
Family Finding and Kinship Support (Sacramento)	Family Finding and Kinship Support is a structured model to build permanent, caring relationships for the youth, who otherwise would not have a	Children in out of home placement without identified family	345

Intervention	Definition	Target Population	Projected Caseload Over the Five Year Period
	permanent family, by helping adults make realistic decisions on how to be involved in a youth's life. It also provides supportive services to relative caregivers and children placed in their care.		
Behavioral Health Treatment Liaison (Sonoma)	Coordinates assessment, treatment planning and service process for each child with identified treatment needs.	All open child welfare cases	420
Commercially Sexually Exploited Children (Alameda)	This intervention creates a process for developing advocates, increasing intensive foster care placements and caregivers through screenings to identify youth and develops training and tools to support services to youth. Under PACT, the ACSSA, Department of Children and Family Services (DCFS) receives technical assistance and participates in statewide phone calls to discuss best practices for CSEC youth. Participation in PACT allows Alameda County to identify best practices for CSEC youth to better serve this population, as well as share lessons learned when developing the Alameda County CSEC protocol and expanding CSEC services. Alameda County is not receiving any additional federal funding through its participation in the PACT grant.	Identified youth	To be determined
Supporting Our Families in Transition (Butte)	Supporting Our Families in Transition provides supportive services to families as they transition from family reunification (FR) to family maintenance (FM) utilizing parent education and life skills.	Children Transitioning from FR to FM and Up Front Prevention	465
Partnerships for Families (PFF) (Los Angeles)	The PFF Program is designed to prevent child abuse by addressing gaps in the current child welfare system. Voluntary prevention services of PFF	0-5 with high risk factors and a closed referral disposition	To be determined

Intervention	Definition	Target Population	Projected Caseload Over the Five Year Period
	are offered to pregnant women and families with children five and younger at high risk for child maltreatment. All of Los Angeles County's Areas are served by PFF, which collaborates with other organizations to improve outcomes at the agency, family and community levels.		
Family Wraparound (Lake and San Francisco)	The Wraparound model will involve a family-centered, strengths-based, needs-driven planning process for creating individualized services and supports for children, youth and families. Specific components of the Wraparound model are engagement and team preparation, initial case planning, implementation and transition.	Family with SDM, at high risk levels	540

PDs

Intervention	Definition	Target Population	Projected Caseload Over the Five Year Period
Wraparound (Alameda, Butte, Lake, Los Angeles, Sacramento, San Diego, San Francisco, Santa Clara and Sonoma)	The Wraparound model will involve a family-centered, strengths-based, needs-driven planning process for creating individualized services and supports for children, youth and families. Specific components of the Wraparound model are engagement and team preparation, initial case planning, implementation and transition.	Youth ages 12-17, inclusive, who are at risk of being removed from their homes and placed in foster care or delinquent facilities.	3,182
Collaborative Court (Alameda)	Collaborative Court focuses on providing an alternative disposition for youth with high mental health needs, emphasizing family engagement and teaming.	Youth at risk of out of home placement with high mental health needs	300
Parenting with Love and Limits (Alameda)	Parenting with Love and Limits is an evidence-based model to increase family engagement and reunification, and to reduce foster care re-entry through services and	Youth 14-17 years old who need supportive services to reside with their caregiver	264

Intervention	Definition	Target Population	Projected Caseload Over the Five Year Period
	therapy.		
Functional Family Therapy (Los Angeles)	Functional Family Therapy is a community based therapy program that engages the youth and family in recognizing negative behavior and relational patterns by providing skills training in problem solving, parenting and conflict management.	Youth 11-17 year olds in or at risk of out of home placement	1,690
Multi-Systemic Therapy (Sacramento)	Multi-Systemic Therapy is a family and home based treatment that strives to change how youth function in their natural settings - home, school and neighborhood - in ways that promote positive social behavior.	The target population for MST is youth ages ten-17 who have a low level/moderate risk to reoffend and high level of family and criminogenic needs. Recommended age is 12 to 17.5 year old youth with low and moderate risk levels. Eligibility considerations given to offenders with factors in their life that are pulling them out of the home (Behavioral issues to include gangs, running away, anti-social peers, etc.)	280
Family Finding (San Diego and Sonoma)	Family Finding and Engagement is a structured model to build permanent, caring relationships for the youth, who otherwise would not have a permanent family, by helping adults make realistic decisions on how to be involved in a youth's life.	Children in out of home placement without identified family	280
Parent Partner Program (San Francisco)	The Parent Partner Program allows parents who have successfully achieved family stabilization to participate in peer support groups in order to provide individualized coaching and encouragement to parents with children in out of home care.	Families with out of home placement youth	330
Functional Family Probation (Los Angeles)	Functional Family Probation is a family-focused case management approach for the family and youth to better manage crisis, refer youth to programs that will match their particular risks and needs, and offer strength	Youth 13-17 year olds in or at risk of out of home placement	2,250

Intervention	Definition	Target Population	Projected Caseload Over the Five Year Period
	based supervision.		

Please see Attachment #8 for a breakdown of all optional interventions including a description, eligibility, referral process, service delivery, fidelity, implementation timeframe and expected outcomes.

ASSESSING READINESS TO IMPLEMENT THE DEMONSTRATION

Fit of each intervention with community values, culture and context

Interventions utilized in the Title IV-E California Well-Being Project align with local community stakeholders, county, and state outcome and accountability goals as California has an established Child and Family Services Review process (C-CFSR). The C-CFSR process is cyclical beginning with identifying and analyzing county systems, implementing tested solutions, continuously evaluating and revising solutions, and continuously repeating the process. All of these interventions were identified through a variety of stakeholder processes, which may include County Self Assessments, County Peer Reviews and other areas identified by the county as needs for their individual community.

The County Self-Assessment (CSA), Peer Review (PR) and System Improvement Plan (SIP) are elements of the C-CFSR process. The CSA includes information and analysis of current CWD and PD programs, including prevention, protection, permanency and aftercare. The PR process involves an exchange of qualitative information between counties, where child welfare practices and policies impacting outcomes for children, youth, and families are examined. The PR also fosters the exchange of information regarding promising practices across counties. The SIP is an agreement between the CDSS and counties and is approved by county Board of Supervisors. The SIP is developed through collaboration within local communities, including the input from early intervention partners and includes annual progress reports.

Agency capacity to implement the waiver interventions

Organizational systems capacity

The following table outlines information regarding implementation status, contracts, and service capacity for Project counties:

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
ACSSA			
SOP Implementation Team (IT) has attended SOP training and has begun to determine the implementation plan and tasks necessary to	N/A	Existing contracts will be modified as necessary. If needs arise that cannot be met through existing contracts, then new contracts may be	SOP: Anticipates reducing caseloads and hiring additional child welfare workers to carry out SOP once fully implemented. Alameda DCFS does

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
implement SOP. Anticipated SOP training in summer/fall of 2015.		developed, through the RFP process.	anticipate hiring additional caseworkers to reduce caseloads, but because DCFS is just beginning the implementation of SOP, the numbers of staff that will be hired is unknown at this time. Page 44 of the IDIR indicates that Alameda DCFS will hire additional staff as additional staffing needs are identified. Alameda DCFS plans to have SOP fully implemented by July 2016.
ACPD			
Wraparound was an existing interventions, so implementation phase is not applicable.	N/A	N/A-No contract that will need to be modified.	Wraparound Project Permanence - same slots are still available. Full capacity is uncertain.
BCDESS			
Near to completion of the CSA and conducting a case review of SOP with RTA. The CSA and Case Reviews will help to further inform enhancement efforts as it relates to SOP. The final CSA report is due to the CDSS in July 2015. SOP training continues to be provided. Planning and program development is in process for the addition of a part time SOP coach, anticipated start date of contract 7/1/15.	New service provider contracts will be developed for SOP coaching.	N/A	Yes. Utilizing existing service contracts, programs and internal practice, Butte County DESS anticipates sufficient service capacity.
BCPD			
Butte Probation began serving seven families in the Wraparound program in February. The contract for therapists was finalized in February as well. The Strengthening Families Program component is approximately half way through the 14-week cycle.	There are no other service provider contracts that will be needed other than the previously reported therapist contract.	No modification of contracts is expected at this time.	At this time, it is believed that the number of probation staff identified as needed to support the number of families in the Wraparound program may have been insufficient. Evaluation of the need for additional staff is currently underway. Butte County will be modifying their Wraparound implementation plan to include one more probation staff member.
LCDSS			
SOP is already implemented in Lake	They have met with the RTA to discuss a contract	No	Yes

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
County, but they are now in the process of evaluating their ongoing training and coaching needs with the RTA. They are determining the next steps of our implementation.	for SOP training and coaching that exceeds the training already allotted. They expect to have that in place by the fall.		
LCPD			
Implementation stage; working with the same agency that manages our full Wraparound program, our newer program, the family Wraparound (under the Project) has been fairly easy to kick-off. Lake County Probation has had several meetings to "tweak" the process, and has a long working relationship with the Wraparound provider.	None	Contract modifications were expected; however, they are unnecessary at this time and the contracts were renewed for five years.	The service capability had already been established.
LACDCFS			
CPM continues to be implemented as planned for the Waiver with an accelerated process for Child and Family Team (CFT) meetings in two DCFS officer response to a request by our Katie A. panel. The accelerated process is designed to immerse these offices' staff in the CPM process. Prevention and Aftercare began on January 1, 2015. Partnership for Families services is provided by First 5 LA.	N/A	Yes	Hired 897 new CSWs and has 47 new hires scheduled to start an up-coming academy. Expecting to hire 90 interns at the end of this school term (July 2015).
LACPD			
All interventions have been implemented. LA County Probation is in the process of gathering data in order to track outcomes moving forward.	LA County Probation will not be entering into any new contracts at the time. New contracts executed as of May 1, 2015, increased the current number of Wraparound providers from 32 to 49.	LA County Probation will be modifying the Wraparound contract in the coming months. The new contract will have more of a mental health focus.	Yes, probation has access to enough program slots to accommodate their juvenile population.
SCDHHS			
SOP: Planning for full implementation is in progress. SCDHHS is consulting with their labor organization to address implementation. The SCDHHS is also	None	SOP: Yes, The RTA contract will be modified to include an additional SOP coach to work with all staff to strengthen SOP practice.	SOP: Yes

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
developing coaching contracts and language addressing staff expectations. The expected date to commence SOP implementation is January 1, 2016. Planning is underway, including meeting with the respective labor organizations, and supportive services as it relates to training and needs is occurring. Sacramento County is following a detailed implementation plan including: 1. Convening with coaches - August 2015 2. Roll-out discussion with the CPS Executive Management Team – September 2015 3. Roll-out discussion with CPS Supervisors – October 2015 Also conducting readiness assessment by reviewing sample cases (30 per each of the four regions) to determine level of implementation as well as gaps to be addressed. Sacramento CPS has developed the following documents: 1. Sacramento County Coaching Training Plan 2. SOP Supervisor Checklist 3. Case review tool – with Social Worker interview 4. Case File Review Baseline Assessment 5. Coaching Activity Log In terms of gathering qualitative data about utilization of SOP practice components, Sacramento will use existing and ongoing case reviews. The coaching contract has been modified and sent to the Northern California Training Academy for approval on June 29,			

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
2015. Sacramento County is waiting for the Northern California Training Academy signature to finalize the contract.			
SCPD			
Has two providers who provide MST and FFT services. Contracts to be expanded to include identified Wraparound population. Wraparound services began on July 1, 2015, along with the MST and FFT programs for our targeted clients.	See left	See left	Yes
SDCHHSA			
We have hired six out of the nine SOP coaches with the intent to hire the three other coaches by the end of the summer. The coaches will be writing specific and tailored case plans for families, the use of SDM, integrating SOP into Intensive Family Preservation Program (IFPP) and safety planning. As a result of a review of the existing practices and contract capacities, we have determined that augmentation of the existing contracts and expansions will not be required at this point, but we will continue to closely monitor. Should this change, we will proceed accordingly. Therefore, our current contractors will begin servicing identified waiver youth in October 2015.	N/A	N/A	We anticipate that we will have sufficient capacity with the new and/or augmented contracts.
SDCPD			
Wraparound: Currently negotiating the terms for augmenting service provider contracts through Health and Human Services (HHSA) and Behavioral Health Services (BHS) Departments.	Wraparound: Working closely with HHSA and BHS to determine the number of providers and hence the number of contracts needed to accommodate the expansion of a total of 100 slots. Some providers are at capacity and would	Wraparound: Yes, currently have three contracts. Expansion will involve two or more of these contracts.	Wraparound: No, as the three current Wraparound providers (contracted) report they are at or nearing capacity as determined by their current contracts. New augmented contracts will reflect the total overall number (100) per the

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
	have to expand their current contracts.		waiver and how many each provider will accommodate.
SFCHHSA			
Last cohort of staff are receiving training on SOP and planning a session for all new staff hired. The RTA is providing coaching on SOP and has begun integrating this practice at the hotline in our referral documents. All staff is utilizing SOP strategies. Management is requiring that staff in the court dependency units utilize the SOP tools and begin using SOP language in the case plans. The SFCHHSA's Katie A implementation utilizes SOP as a framework for the CFT and shared family care plan.	N/A	Some contracts may be modified.	Almost half of children are placed out of county. The SFCHHSA is limited in ensuring adequate service provision for children placed out of county. At any point in time, about 60% of children (roughly 600 children) are placed out-of-county. Most children are placed in a Bay Area county; few are placed in other Project counties. The SFCHHSA provides and pays for services to children placed outside of the county. All counties participating in the Project are implementing SOP/CPM; however, the SFCHHSA has the additional challenge of coordinating services across surrounding counties that do not practice SOP/CPM. The SFCHHSA prioritizes relative placement, however, the exodus of families seeking more affordable places to live has complicated placement decisions. The CDSS provides support through OCAP including review of CSA and SIP as part of the statewide outcomes and accountability system.
SFCJPD			
San Francisco County Probation has completed an RFP and selection of the provider for their expanded Wraparound and is beginning contract negotiations. There are opened slots for IV-E Waiver Eligible youth under the existing contract. Completed a RFP for a parent partners program and have just selected a provider so in the beginning stages of	New Wraparound and peer parent RFP's and contracts	Yes, some of our contracts may be modified; however, San Francisco County Probation is still determining that for some of their efforts now.	Yes. The contractors that will be providing expanded Wraparound services bid on the expected population count, as did the contractor selected for peer parent services provision.

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
contract negotiations. The Wraparound contract will be finalized by October 2015. October is likely when contracts will be finally signed, but the effective date for the contract is July 1, 2015. Additionally, we have a primary contractor who will be subbing the work to three other subcontractors.			
SCCSSA			
A Title IV E Oversight Committee has been formed and is meeting regularly. Two high level positions have been created and are in the process of being filled. These two positions will serve to manage the implementation, oversight and evaluation of SOP. SOP is a tool that is part of the Child and Family Practice Model in SCC.	While it is projected that contracts for an array of services that can be used to safely maintain children in their homes to prevent the need for removal or for placements in higher levels of care, the specific nature and design of such services still needs to be determined.	There are contacts with various service providers that may be modified to reflect use of SOP, but this has not yet been determined and additional contracts may be needed.	It is likely that service capacity to support the number of families that we are projecting to serve may need to be expanded.
SCCPD			
Santa Clara County Probation is in the process of revising their plan. They have not implemented the interventions.	Santa Clara County Probation will continue to use the five current Wraparound providers. Santa Clara County is currently using five Wraparound providers to provide services to all Dependent Ward and Probation Ward youth eligible under SB 163. In the waiver project, they plan to utilize Wraparound services for PreAdjudicated youth that are not eligible under SB 163 such as (Non Wardship youth under WIC 654.2, Deferred Entry of Judgment, six months without Wardship, youth pending competency or restoration hearings.) Once they have identified the criteria and work with contracts to extend Wrap slots to serve the Pre-Adjudicated population then they can implement.	Probation/DFCS/Behavioral Health will review existing contracts for potential amendment to serve non-adjudicated youth and continue or initiate Wraparound services for youth in Juvenile Hall and/or Ranch for Re-Entry services.	Yes, the current providers have the capacity to service the families.

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
	Currently Santa Clara County has the capacity to serve up to 200 slots shared between Department of Family and Children's Services and Probation for eligible youth under SB 163. In order to serve the Pre-Adjudicated youth, they need to expand Wraparound slots.		
SCHHSA			
Has completed SOP training of one third of its staff. The second cohort is in the midst of training and the final cohort is slated to begin the training series in July 2015. The Implementation Committee is focusing on harm, danger and safety statements as the initial implementation target for Cohort 1. Sonoma County will implement all components of SOP including Child's Voice (and associated SOP tools where appropriate), Family Team Meetings and Building Support Networks, Behaviorally based Case Plans, and Staff Coaching. They anticipate a staggered rollout of these elements, beginning with Harm and Danger Statements. All components will be fully implemented by December 2016. Beginning July 2015, Sonoma County has funded new service contracts in support of SOP: Parent Mentor Program, Parent Orientation and Emergency Housing Services.	None	Yes	Yes
SCPD			
Increased 15 additional high needs youth/family. Sonoma County Probation has hired a PO to cover this caseload and moved all existing Wraparound	Expanding their contract with Seneca to provide Wraparound services for 15 additional youth/families. The contract is expected to go	See left.	Yes, Seneca in in the process of hiring additional staff to work with this new target population and Probation has hired a line staff and supervisor to

Status of implementation for each intervention	If any, new service provider contractor will be needed for interventions	Existing contracts that will be modified	Sufficient service capacity to support projected number of families
services into one unit overseen by a supervisor experienced in Title IV-E. Probation has room in their existing contract for family finding services and is developing procedures to utilize these slots more effectively.	into effect July 1, 2015.		meet the increased workload demands.

Leadership Support

All counties obtained support and approval from their County Board of Supervisors. Counties participating in the Project obtained approval from county Board of Supervisors (BOS) by submitting MOUs between the CDSS, CWDs and CPDs. BOS in Butte County also reviewed contracts reaching financial thresholds, while Sacramento BOS reviewed related contractual arrangements. Participating counties communicate with their BOS on a regular basis, and provide updates and additional information as requested. Participating counties will also report implementation information to the CDSS during monthly and quarterly county calls, convenings, and semi-annual progress reports. Please refer to Attachment #5, "CWD and CPD Memorandum of Understanding Sample" for the standard memorandum of understanding (MOU) language between the CWDs and CPDs. This document includes the same standard language for all counties.

Staff Characteristics

Project counties have identified staff characteristics and provided feedback. Please see Attachment #6, "County Staff Characteristics" for this information.

Availability of Technical and Financial Resources

All counties have received technical and fiscal support from the State, many have received additional support from other organizations such as Casey Family Programs (CFP), and on-going support will continue in the form of site visits, webinars and individual county technical assistance.

- The ACSSA receives SOP implementation TA from CFP and the Children Research Council.
- The ACPD has received TA from the CDSS through in person meetings, Probation waiver calls and other contact with Fiscal and Program-specific training; and, also received assistance regarding cases from CPOC and from Justice Benefits Inc. regarding case plan training and quality control.
- The BCDESS and LCPD have received individual county training and TA from the Northern RTA.

- The LACDCFS receives strategic planning and communication TA from CFP, including media campaign for staff regarding CPM and community engagement. Los Angeles County also receives support for implementation of CPM and CFTs from Patricia Mosher, whose services were previously funded by CFP and now assumed by LACDCFS.

- The LACPD has received on-going implementation and evaluation strategy TA from CFP since the beginning of the first project period in 2007.

- The SCDHHS received SOS implementation TA from 2010-14.

- The SDCHHSA receives Visit Coaching and Permanent Connections TA from CFP.

- The SDCPD is currently receiving Family Finding/Permanent Connection planning and contracting TA from CFP.

- The SFCHHSA receives TA from the Bay Area RTA as it provides local training; they also receive CQI System and strategic communication development and implementation TA from CFP.

- The SCCSSA receives Waiver Oversight Committee TA from CFP and the SCCPD has received TA through an overview of Title IV-E Demonstration Waivers Fiscal Considerations and Steering Committee facilitation.

Linkages To and Support from Community Organizations

Counties work with a variety of community organizations within their jurisdictions. These can include the provider community, the advocate community and stakeholders.

The following notes county input regarding local community support:

- **ACSSA:** Does not currently receive any support from local communities, specifically related to the Project. However, the Department of Children and Family Services has partnerships with local communities and stakeholders, and maintains communication related to Department activities.

- **ACPD:** Held formal conversations with Delinquency Prevention Network (DPN) and community partners. The ACPD also made presentations to the Courts, Behavioral Health Care Services (BHCS), SOS, Seneca, Lincoln Childcare Center and DPN providers. The ACPD also collaborated with the Social Services Agency and provided a presentation to the County Board of Supervisors.

- **BCDESS:** Is building on and expanding current efforts to partner with community stakeholders and community partner agencies, to increase usage of SOP practices and approaches throughout our community. Community partners are

encouraged to, and have been attending, SOP trainings provided to staff. Local community partners have received Project information through the County Self-Assessment and updates have been provided to the Children's Services Coordinating Council and the Child Abuse Prevention Council.

- **BCPD:** The project was discussed at a public Board of Supervisors meeting and Project information is disseminated through a department's social media site.

- **LCDSS and LCPD:** The LCDSS' routinely communicates with community partners, service providers and contractors regarding SOP and Wraparound. It is well known in Lake County that CWS uses this practice model. Presentations have been provided to our local Child Abuse Prevention Council and other community agencies. Many partners have participated in SOP training. These include staff from Probation, Differential Response, Wraparound, Employment Services, and Behavioral Health. There is much support in Lake County for SOP and Wraparound.

- **LACDCFS:** Is broadening community efforts to implement CPM and working with the County Office of Child Protection to ensure that implementation is a countywide intervention. In addition, CFT coaches are providing one-on-one support to both internal and external stakeholders to assist in the implementation of CFTs. CPM training is being developed for our Department of Mental Health and community partners.

- **LACPD:** Has a strong relationship with the communities through our Waiver funded community-based programs. The communities were informed about the demonstration and interventions through contracted agencies providing services in all eight Service Planning Areas (SPA). The contracted providers are expected to share the knowledge and available services such as Wraparound through community outreach and interactions with community members.

- **SCDHHS:** Held a community stakeholder meeting in October 2014 to disseminate Project information, obtain community input regarding the initiatives chosen and explore additional strategies for reinvesting savings. The event drew participants from advocacy groups as well as representatives from private and public agencies.

- **SCPD:** Along with the Department of Health and Human Services held a community forum at the Board of Supervisors to disseminate Project information to community members including and gathered feedback. The presentation discussed improved array of services and supports available to youth and families involved in the probation system, fiscal impact and savings, statistical analysis regarding projective outcomes of increase youth safety without an over-reliance on out-of-home care, improved permanency outcomes and timelines, and decrease recidivism and delinquency for youth on probation.

- **SDCHHSA:** Provided handouts to interagency programs that in turn, inform providers and community partners. The SDCHHSA has a Waiver Steering Committee with a cross representation and provides and presents information to region and community partners.

- **SDCPD:** Held presentations to the County BOS and stakeholders including the Courts and Behavioral Health Services. The SDCPD also engaged in discussions with service providers.

- **SFCHHSA:** Established communications strategies including discussions regarding SOP/CPM with community partners, providers, resource families/foster parents and community-based organizations.

- **SFJPD:** Received extremely positive feedback from community-based organizations and other partners regarding their service expansion to a population not previously served; these organizations are excited to assist in implementation.

- **SCCSSA:** Works closely with community members of African ancestry as part of the CAPP, including foster parents, birth parents, youth, and community stakeholders. This support has increased to include representatives from the Latino community and the SCCSSA anticipates the trend to continue as SOP/CPM practices are implemented.

- **SCCPD:** Meets with community partners and they show support for Project activities. The SCCPD announced the Project in March 2014 at the Silicon Valley Council for Nonprofits meeting, where local community partners were present.

- **SCHHSA:** Engaged stakeholders such as court staff, service providers, behavioral health clinicians and tribal representatives. The SCHHSA will also provide tailored training to community stakeholders such as foster parents, along with education and service providers throughout 2016.

- **SCPD:** Is involved in multi-disciplinary teams and committees focusing on serving at-risk youth and families and building stronger communities. The SCPD provided information regarding the Project's expansion of Wraparound services, and included the Juvenile Court and other juvenile justice stakeholders. The contracted Wraparound provider (Seneca) utilizes community-based services to address specific needs of youth and families.

Current Processes and Systems Functioning Requiring Attention

While the actual claiming process remains relatively unchanged, the CDSS has developed and implemented tools that will track overall county costs to ensure financial accountability and reporting accuracy relative to the Project. In addition to existing claiming procedures, the CDSS will require participating counties to complete an in-

depth Quarterly Fiscal Supplemental Form (QFSF), which will include detailed county expenditure information specific to the Project. Additionally, the CDSS has established a new unit within the CDSS' Fiscal Policy Bureau, whose sole functions will be to provide technical assistance and training on claiming procedures and policies, and to conduct onsite monitoring and reviews of participating counties' claiming processes. The QFSF, along with current county claiming systems and routine onsite fiscal monitoring of participating counties will ensure effective management of both Project expenditures and claiming.

The QFSF, encompassing each county's specific allocation and interventions, has been distributed to participating Project counties. The counties receive an allocation as a whole (http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2014-15/14-15_36.pdf), http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2014-15/14-15_36E.pdf, http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/cfl/2014-15/14-15_36EII.pdf. The breakout between Child Welfare and Probation is determined by the two agencies. The methodology for the inter-agency breakout is an attachment of each county's MOU.

Additionally, the CDSS has conducted onsite technical assistance and training on the use of this form for each of the participating counties. The first claim incorporating the use of the QFSF was submitted to the CDSS in February. The CDSS will conduct a comprehensive review of the information contained in the form and revise as necessary.

Implementation Supports

The participating CWDs have been collaborating with our Regional Training Academies to support staff trainings and coaching development with respect to SOP/CPM. The participating CPDs have been collaborating with the Resource Center for Family Focused Practice to support ongoing training and development for Wraparound as well as any implementation support necessary for the new population of youth. The state has also provided several convenings to assist counties with implementing both interventions, and the state will continue these efforts through a variety of venues including but not limited to site visits, webinars, teleconferences and other communication materials.

Updating policies and procedures is also a common implementation support needed among Project CWDs and CPDs. Counties will also need to develop updated desk guides reflecting new practice standards. Changes in work also need to be discussed with employee labor unions. Counties such as Los Angeles and Alameda have online manuals that outline countywide practices and resources and these need to be updated.

The following is a synopsis of policy and procedure updates needed among Project counties:

- **Alameda:** The ACSSA will update policies and procedures as a part of its SOP implementation, which ACSSA anticipates to fully occur in July 2015. The ACPD policies and procedures are in place and will be updated and modify as needed.

- **Butte:** The BCDESS drafted new policies for SOP and anticipates training staff in August. The BCDESS also developed a policy regarding SOP and QA. In addition to the required CFSR-case Reviews, QA Supervisors will be examining cases for SOP practice compliance and activities.

- **Lake:** The LCDSS is currently updating and expanding draft Policies and Procedures and will have them complete by January 2016.

- **Los Angeles:** The LACDCFS anticipates completion CPM policy and procedures updates on October 31, 2015. The CPM workgroup, including Policy staff, meets regularly and a rough draft has been sent to the workgroup for review and feedback. Once this has been received, the feedback will be integrated and the Executive Team will send the policy for official review.

- **Sacramento:** The SCDHHS included policy and procedure changes as part of their SOP implementation plan. The changes include when and what SOP practices will be used, at what point in a case and how SOP will be documented. The Permanency Initiatives are not new programs. We have increased the capacity of each program in order to serve more children and youth. The SCPD is in the early Implementation stages and is still refining the program. The majority of the process is already in place; however, their goal is to have it fine-tuned by October 1, 2015. In addition, the SCPD is waiting response from the CDSS regarding the assignment of an evaluator and plans to collaborate with the organization to ensure adhering to Project requirements. The SCPD has contracted with a third party to assist with the establishment of feasible data collection and storage strategies for the Project.

- **San Diego:** The SDCHHSA is updating policies as they implement the Project. The SDCHHSA distributes notices to staff with the overall plan to overhaul the policy manual as changes emerge. The SDCPD will finalize policies and procedures in November 2015.

- **San Francisco:** The SFCHHSA is in the process of systematically revising and re-formulating all of our policies and procedures. The SFCHHSA integrated Hotline/Emergency Response/Safety and Risk Assessment (SDM)/After Hours policies, SOP/CPM language and concepts into new policies. The Hotline/Emergency Response/Safety and Risk Assessment (SDM)/After Hours policies are scheduled to be published in July 2015. Subsequent policies will be completed on an ongoing basis through July of 2016. The SFCPD's policies and procedures are constantly under development, as they are living documents as laws, programs, and best practices change.

- **Santa Clara:** The SCCSSA updates policies and procedures regularly and began with their implementation of CFPM. This process will continue with existing policies and will be integrated into new policies throughout the Project period. Target date for completion will be September 2019. Santa Clara PD expects to update policies and procedures in December 2015.

- **Sonoma:** The SCHHSA expects to implement all SOP components in December 2016 and will integrate into policies and procedures accordingly. The SCPD expects to update policies and procedures by December 31,2015.

In Santa Clara County, buy-in from Juvenile Court and court system partners is needed to ensure successful implementation. The on-going strategy to obtain Court buy-in is to utilize existing forums (such as the Dependency Oversight Committee, Court Systems and Court Permanency Meetings as well as topic specific meetings) to inform and educate the Court regarding changes in approaches or initiatives. As with the CAPP, the SCCSSA will likely have a specialized overview for the Court regarding SOP. In addition, the SCCSSA has been utilizing the County Counsel to advocate for changes in Court processes that are inconsistent with CAPP/CFPM and SOP approaches. The SCCSSA continues to infuse the CFPM and SOP approaches and tools into assessments presented to the Court so that those can become part of the legal considerations.

The SCHHSA reports a need for more evaluation plan information; however, the evaluation plan will be finalized later in the year as the third party evaluator joins the Project. Counties also site the need to adapt a Fidelity Assessment process into their systems.

WORK PLAN

Developmental Activities

The CDSS Internal Project Team (IPT) and county internal teams are responsible for the completion of developmental activities. The CDSS IPT is comprised of staff from the Child and Family Services Division, Resources Development and Training Support Bureau (RDTSB) and Foster Care Rates Bureau; the Administration Division, Fiscal Forecasting and Policy Branch (FFPB), Financial Services Bureau (FSB), Budget Bureau, and Financial Analysis Bureau; and the Performance Monitoring and Research Bureau (PMRB). Workgroups within counties vary depending on the infrastructure and size of each county. Each county has dedicated staff from program, evaluation and fiscal departments. In smaller counties, the program and evaluation contact may be the same.

The purpose and focus of monthly calls include program implementation, fiscal and research updates and review of current and upcoming Project events and activities. The CDSS contacts counties and gathers input regarding items of discussion before drafting call agendas. Monthly calls also allow Project counties to engage in open dialogue or add additional items of discussion with the CDSS IPT.

Assigned To	Activity	Due Date
Oct 2014		
CDSS/County	Implementation Commences	10/1/2014
CDSS RDTSB	Communications Document	10/1/2014

Assigned To	Activity	Due Date
CDSS FFPB	County Fiscal Letter (CFL NO. 14/15-22)	10/1/2014
CDSS IPT/County	Fiscal Training Webinar	10/21/2014
CDSS IPT/County	Monthly Update Call for Participating Counties	10/23/2014
CDSS FSB	Schedule of Payments to ACF	10/30/2014
Nov 2014		
CDSS IPT/County	Evaluation Convening	11/3/2014
CDSS FFPB/County	Regional Fiscal Training - Los Angeles	11/19/2014
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	11/24/2014
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San Diego	11/25/2014
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	11/26/2014
Dec 2014		
CDSS PMRB	Draft Evaluation RFP to ACF	12/1/2014
CDSS FFPB/County	Regional Fiscal Training - San Diego	12/9/2014
CDSS FFPB/County	Regional Fiscal Training - Butte and Sacramento	12/16/2014
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	12/22/2014
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San Diego	12/23/2014
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	12/24/2014
CDSS RDTSB	Quarterly Progress Report to ACF	12/29/2014
CDSS RDTSB	Initial Design and Implementation Report to ACF	12/29/2014
Jan 2015		
CDSS FFPB/County	Regional Fiscal Training - Lake and Sonoma	1/6/2015
CDSS FFPB/County	Regional Fiscal Training - Alameda, San Francisco and Santa Clara	1/13/2015
CDSS IPT/County	Quarterly Update Call With All Participating Counties	1/22/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	1/26/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San Diego	1/27/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	1/28/2015
CDSS RDTSB	Communications Document	1/31/2015
Feb 2015		
CDSS IPT/County	Quarterly County TA Calls (Fiscal)	2/10/2015
County Fiscal	Quarterly Fiscal Supplemental Form to the CDSS	2/13/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	2/23/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San Diego	2/24/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	2/25/2015
CDSS RDTSB	Send Drafted Instructions to Counties for Semi-Annual Progress Report	2/29/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	3/23/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San	3/24/2015

Assigned To	Activity	Due Date
	Diego	
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	3/25/2015
CDSS RDTSB	Legislative Document	3/30/2015
Apr 2015		
CDSS PMRB	Evaluation Steering Committee Call	4/2/2015
CDSS PMRB	Evaluation RFP posted to BidSync	4/7/2015
CDSS FFPB	Fiscal Pre-Monitoring visit/discussion with LACDCFS and LACPD	4/13/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	4/22/2015
CDSS IPT/County	Quarterly Update Call With All Participating Counties	4/23/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	4/27/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San Diego	4/28/2015
CDSS RDTSB	Communications Documents (Waiver and Non-Waiver Counties)	4/30/2015
May 2015		
CDSS IPT/County	Quarterly County TA Calls (Fiscal)	5/12/2015
County Fiscal	Quarterly Fiscal Supplemental Form to the CDSS	5/14/2015
CDSS FFPB	Fiscal Pre-Monitoring visit/discussion with LCDSS and LCPD	5/19/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	5/25/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San Diego	5/26/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	5/27/2015
Jun 2015		
CDSS FFPB	Fiscal Pre-Monitoring visit/discussion with SCHHSA and SCPD	6/11/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	6/22/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San Diego	6/23/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	6/24/2015
CDSS IPT/County	Tentative Site Visits (Program)	TBA
Jul 2015		
CDSS PMRB	Evaluation Steering Committee Call	7/2/2015
CDSS FFPB	Fiscal Pre-Monitoring visit/discussion with SDCHHSA and SDCPD	7/15/2015
CDSS PMRB	Evaluation Bidders Vetted	7/16/2015
CDSS IPT/County	Quarterly Update Call With All Participating Counties	7/23/2015
CDSS RDTSB	Communications Documents (Waiver and Non-Waiver Counties)	7/31/2015
CDSS IPT/County	Tentative Site Visits (Program)	TBA
Aug 2015		
CDSS PMRB	Evaluation Steering Committee Call	8/6/2015
CDSS PMRB	Evaluation Contract drafted	8/17/2015
CDSS IPT/County	Quarterly County TA Calls (Fiscal)	8/11/2015
County Fiscal	Quarterly Fiscal Supplemental Form to the CDSS	8/14/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	8/24/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San	8/25/2015

Assigned To	Activity	Due Date
	Diego	
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	8/26/2015
CDSS IPT/County	Tentative Site Visits (Program)	TBA
CDSS FFPB	County Fiscal Letter (CFL 15/16-02)	8/28/2015
Sep 2015		
CDSS FFPB	County Fiscal Letter (CFL 15/16-10)	9/2/2015
CDSS RDTSB	Send Instructions to Counties for Semi-Annual Progress Report	9/15/2015
CDSS IPT/County	Annual Convening in Sacramento	9/16/2015
CDSS FFPB	Begin full onsite county fiscal monitoring reviews CWDs and CPDs	9/21/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Los Angeles, Sacramento, San Diego	9/22/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - San Francisco, Santa Clara, Sonoma	9/23/2015
CDSS/County	1st SOP Collaborative Meeting	9/25/2015
CDSS IPT/County	Monthly Individual County Calls (Program) - Alameda, Butte, Lake	9/28/2015
CDSS RDTSB	Legislative Document	9/30/2015
CDSS RDTSB	Evaluation Contract executed; Evaluation begins	TBA
Oct 2015		
CDSS IPT/County	Evaluation Orientation with Evaluator	10/6-7/2015
CDSS IPT/County	Quarterly Update Call With All Participating Counties	10/22/2015
CDSS RDTSB	Communications Documents (Waiver and Non-Waiver Counties)	10/30/2015
CDSS RDTSB	Quarterly Progress Report to ACF	10/30/2015
Nov 2015		
CDSS IPT/County	Quarterly County TA Calls (Fiscal)	11/10/2015
County Fiscal	Quarterly Fiscal Supplemental Forms to the CDSS	11/13/2015
CDSS/County	1st Annual California Well-Being Project Meeting	11/16-17/2015
Jan 2016		
CDSS RDTSB	Submit Evaluation Plan to ACF	TBA
CDSS/County	Quarterly Update Call With All Participating Counties	1/28/2016
CDSS RDTSB	Communications Documents (Waiver and Non-Waiver Counties)	1/29/2016
Mar 2016		
CDSS RDTSB	Legislative Document	3/30/2016
Apr 2016		
County	Semi-Annual Progress Report	4/15/2016
CDSS IPT/County	Quarterly Update Call With All Participating Counties	4/28/2016
CDSS RDTSB	Semi-Annual Progress Report to ACF	4/29/2016
CDSS RDTSB	Communications Documents (Waiver and Non-Waiver Counties)	4/29/2016

Cost Estimates for Each Intervention

See Schedule of Payments

Allocation of Title IV-E Dollars and Projection of Savings

See Schedule of Payments

Currently, the CDSS has provided a fixed schedule of payments for the five-year Project period and foresees the need to modify this schedule once there is actual expenditure data for one full fiscal year. The CDSS is planning to provide an updated schedule of payments around September 2015. This should allow time to revise our terms and conditions based on the revised California Necessity Index for the next fiscal year. It will also provide adequate time to see how expenditures are trending, based on the percentage of federal funds the counties are using per quarter.

California does not project savings in the first years of the project due to ramp up activities and time needed to execute new service contracts. Additionally, as assistance costs are reduced in subsequent years the CDSS anticipates that services will be increased to fully expend the federal allocation annually.

Since the federal share of these dollars is based on the federal fiscal year, the CDSS' Fiscal Year (FY) 2014-15 allocation reflects only nine months of the federal fiscal year with the remaining federal share to be allocated in the following state fiscal year.

Since Probation receives funds as a pass through of Child Welfare, there is not a MOU set up separately between the state and each county PD. Rather, MOUs are established between CWDs and the respective CPDs. As part of the Project extension, the CDSS requested an attachment be included in the MOU that specifies the methodology of how the base funding, growth and any savings would be split between the Departments. Please refer to Attachment #7, "Distribution Methodology Sample" as it provides an example of how two different counties determined to distribute the funds between the CWDs and CPDs.

Selection of and Contracts with Partnering Agencies

All counties have individual procurement processes for contracting with partnering agencies. The CDSS does not require service contracts to reflect performance-based standards.

Processes, Dates and Schedules for Hiring and Training Staff

All counties have both begun hiring and training staff, or are in the process of increasing staff. The following table contains updated information from each Project county and addresses hiring timeframes and concerns regarding hiring staff with necessary qualifications.

Question posed to the counties: "What is the timeframe for having all required staff hired and trained?"

Answers:

- **ACSSA:** Staff will be hired as additional staffing needs are identified. A training plan for SOP is under development, which will include plans for training new staff as they are hired.

- **ACPD:** Providers are responsible for training their staff. POs are responsible for supervising youth receiving Wraparound services through the FPU.

- **BCDESS:** Butte County Quality Assurance Unit - June 2015.

- **BCPD:** All staff for the Wraparound intervention have been hired. Requests have been made for Wraparound training through RTA.

- **LCDSS:** All staff has been trained in the foundations of SOP. Many staff have already received additional advanced SOP training. The LCDSS is in the process of determining the ongoing training and coaching needs.

- **LCPD:** Not applicable.

- **LACDCFS:** All new staff are projected to be hired, trained and have a full caseload by February 29, 2016.

- **LACPD:** Has most of the required staff in place.

- **SCDHHS:** No additional staff is required for full implementation of SOP.

- **SCPD:** Not applicable.

- **SDCHHSA:** September 1, 2015.

- **SDCPD:** September 30, 2015.

- **SFCHHSA:** The bulk of new staff are part of the HSA 15/16 budget proposal, which is currently being finalized with the SF Mayor's Budget Office (MBO). The Mayor will release his proposed budget in early June, and then the Board will begin deliberations. Approved positions will be hired after the budget is certified by the Controller's Office.

- **SFCJPD:** The bulk of new staff are part of the JPD 15/16 budget proposal, which is currently being finalized with the SF Mayor's Budget Office (MBO). The Mayor will release his proposed budget in early June, and then the Board will begin deliberations. Approved positions will be hired after the budget is certified by the Controller's Office.

- **SCCSSA:** Plans to hire and train a Management Analyst Program Manager and Project Manager by September 1, 2015. The SCCSSA also plans to hire and train social work staff by October 1, 2017. In the event additional SOP training is needed, the SCCSSA will train staff through in cohorts and provide coaching

support. The implementation will be on-going, as some staff have had SOP training; the training module maybe be modified for previously trained staff. The SCCSSA trained 14 cohorts throughout a three-year period in their CAPP/CFPM implementation.

- **SCCPD:** Wraparound providers are responsible for training their staff. POs are responsible for supervising youth receiving Wraparound services through the Family Preservation Unit. The SCCPD is exploring the transfer of two additional POs to the FPU to supervise additional youth.

- **SCHHSA:** January 2016.

- **SCPD:** The SCPD hired additional staff to cover the expansion of services and will continue to monitor the need for more staff, based on workload demands.

Question posed to the counties: "Are there concerns regarding the ability to hire staff with the necessary qualifications?"

Answers:

- **ACSSA:** No.

- **ACPD:** No.

- **BCDESS:** No.

- **BCPD:** No.

- **LCDSS:** Staffing challenges in filling all CWS social work positions may impact SOP practice. The challenge filling social worker positions in Lake County has been ongoing for many years. There has been a recent increase in social worker supervisor vacancies with experienced supervisors leaving due to retirement or higher paying positions in other counties/agencies. The two most obvious factors contributing to the vacancies are salary and location. Lake County is one of the lowest paid counties in the state and the location and lifestyle of the county does not attract applicants. Lake County more often hires and develops social worker I's (with BA's), but that is challenging as well. The good news is that there has been a steady increase in the number of social workers with MSW's as existing staff complete Title IV-E MSW programs. Because of this inability to recruit applicants, CWS is currently working with county administration to increase the SW salaries by 7.5%. It is hoped this will implemented in September, 2015. Lake is also currently exploring more creative recruitment and retention strategies.

- **LCPD:** No, because we will be training staff as they are hired.

- **LACDCFS:** No.

- **LACPD:** No.
- **CWDHHS:** No.
- **SCPD:** No.
- **SDCHHSA:** No.
- **SDCPD:** Yes, currently trying to secure an analyst to assist with data collection and research.
- **SFCHHSA:** No.
- **SFCJPD:** No.
- **SCCSSA:** Anticipate filling two high level positions with staff with the necessary qualifications. Human Resources is recruiting candidates for Social Worker positions and is expanding the minimum qualifications to increase the potential applicant pool.
- **SCCPD:** No.
- **SCHHSA:** No.
- **SCPD:** No.

Supervision and Coaching Plans

The SOP/CPM has a coaching element, which counties has been or will begin using depending upon where they are in their implementation. Training within participating counties in the Project is supported by the state's RTA system. Butte, Lake, Sacramento, San Diego, San Francisco, Santa Clara are familiar with the SOP curriculum from their respective RTAs. The SOP curriculum is being introduced to staff and supervisors in Alameda and Sonoma counties. The LACDCFS staff and supervisors are familiar with the CPM.

Training feedback loops for SOP and CPM training and curriculum related issues include training and facilitator evaluations and on-going reviews by RTA staff and directors. Issues regarding curriculum implementation are addressed by local implementation teams comprised of staff, supervisors and managers. Project county implementation teams also gather information regarding SOP and CPM as they hold regular meetings with staff. Concerns regarding Wraparound are addressed by supervisors and contract monitors.

Coaching for SOP and CPM involves managers, supervisors, and analysts. The ACSSA is collaborating with Casey Family Programs and their regional RTA in developing and supporting a coaching plan. Butte and Sonoma county program managers and supervisors will ensure coaching is implemented as intended. Lake, San

Diego, and San Francisco supervisors and managers are collaborating with their regional RTA in obtaining coach training and feedback. Los Angeles county regional office leadership and Deputy Director oversees coaching and practices in each regional office. The SOP implementation teams in Sacramento and Santa Clara counties will ensure coaching practices are implemented.

Wraparound has individual monitoring tools for supervision, and in February of 2015, the state convened with all nine PDs to identify the tool or tools that will be used for all counties, which will also assist in the evaluation.

Installation or Modification of Required Data Systems

The current state SACWIS system cannot be modified for this project. The state has executed MOUs with all participating counties wherein the counties have agreed to participate in the state evaluation and work with the third-party contractor, as well as assisting with the establishment of feasible data collection and storage strategies for the Project.

The counties have begun to discuss alternative ways to capture data on SOP/CPM and Wraparound during the various state-sponsored convenings held since December 2014. The state also started conducting monthly Evaluation Steering Committee Meetings in April 2015 to address any evaluation or data-related issues at the county level ahead of the evaluation contract being executed. Additionally, the State has begun efforts to include Outcomes and Accountability staff that have significant experience with county-level data and CQI/QA in discussions related to the evaluation. Through these various modes of communication, the counties have begun identifying their current data collection methods, and are prepared to assist in the creation of new data collection tools and methods. In addition, as stated in the RFP for the evaluation contractor, the CDSS expects that the contractor may need to work with the CDSS and the counties to develop data-collection surveys and instruments.

The state is exploring data collection options, including Efforts to Outcomes and will also discuss data collection processes with the evaluator as part of the development of the evaluation contract. The CDSS expects to execute a contract with its evaluator in early September. We anticipate that the data will be delivered directly to the evaluator from the counties but that the CDSS would be able to access the data as needed. The evaluator's proposal for the evaluation contract includes a detailed plan for working with the CDSS and the counties to identify appropriate data to collect for the probation evaluation and a timeframe for developing data-collection systems. At the conclusion of the contract, the evaluator will return all data used during the evaluation period back to the CDSS. The CDSS will be able to provide more specific information about the data systems and timeframe once it begins discussing the evaluation contract with the chosen evaluator.

Participating counties have reported the following mechanisms to capture SOP/CPM and Wraparound critical elements data:

SOP/CPM

County	Child's Voice (CPM: Voice and Choice)	Teaming (CPM: Child/Family Team Meeting)	Behaviorally-based Case Plans	Coaching	Safety Plans (includes safety mapping and safety goals)
Alameda	Hard copy or electronic case plan	Efforts to Outcomes (ETO)	Still under development; information will be available by June 2016	Still under development; information will be available by June 2016	Still under development; information will be available by June 2016
Butte	Hard copy or electronic case plan	In case file, and/or uploaded into Contacts in CWS Case or Referral.	Added into case plan in CWS in the Service Objectives Section. The behavior-based objectives are entered in the Additional Description of Responsibilities field.	Butte County currently does not utilize official SOP coaches, but will be contracting for this service later this fiscal year. Supervisors and the Staff Development Officer may use the UC Davis Northern California Training Academy SOP Practice Profiles with social workers. This is documented in meeting minutes or training agendas.	Safety Plans are included in the CFT meeting notes. Hard copy of Safety Plan in case file and/or uploaded to Contacts in CWS Case or Referral. Safety Plans are incorporated into Case Plans.
Lake	Hard copy or electronic case plan	Will enter the FTM as a contact using the Family Engagement Effort category as a delivered service. Also entering a special project code with the date for each FTM event.	Case file review.	Not capturing that information.	Scanned into CWS/CMS and documented in the contacts.
Los Angeles	Recorded in safety goals/ planning, court docs.	DCFS is in the process of converting our old TDM	DCFS has monthly a Quality Service Reviews, which qualitatively reviews	DCFS manually tracks the number of	DCFS has monthly a Quality Service Reviews, which qualitatively

County	Child's Voice (CPM: Voice and Choice)	Teaming (CPM: Child/Family Team Meeting)	Behaviorally-based Case Plans	Coaching	Safety Plans (includes safety mapping and safety goals)
	Hard copy or electronic case plan	tracking system into a system that will capture the results of the Child and Family Team Meeting. In addition, DCFS has monthly a Quality Service Reviews, which qualitatively reviews random cases in each office. DCFS tracks the progress of each office (each office is reviewed yearly); this is part of LA County's settlement of the Katie A. lawsuit.	random cases in each office. DCFS tracks the progress of each office (each office is reviewed yearly); this is part of LA County's settlement of the Katie A. lawsuit.	facilitators, coaches and coach developers per each DCFS office.	reviews random cases in each office. DCFS tracks the progress of each office (each office is reviewed yearly); this is part of LA County's settlement of the Katie A. lawsuit.
Sacramento	Hard copy or electronic case plan	ETO	Case file review.	Coaching Training Plan and Activity Log.	Case file review.
San Diego	Hard copy or electronic case plan	ETO	In cases (court or voluntary), we must do a case plan every six months and we will capture this information there. Documentation is in the case plan document itself, not necessarily the drop down menus in CWS/CMS. CWS/CMS menus do not allow for the type of behaviorally based case planning that we are asking for so workers make changes actually in the Word document.	This information can be found in our LMS system as well as the LMS of our RTA.	Safety planning may be referenced-in different places within CWS/CMS: court reports, contacts, investigative narrative and our case consultation forms but the safety plan itself may be imported into CWS/CMS and/or may be in the hard Case file.
San Francisco	Hard copy or electronic case plan	ETO	Case reviews.	Case reviews and comparison of coaching logs that document coaching sessions and topics.	Case reviews.

County	Child's Voice (CPM: Voice and Choice)	Teaming (CPM: Child/Family Team Meeting)	Behaviorally-based Case Plans	Coaching	Safety Plans (includes safety mapping and safety goals)
Santa Clara	Hard copy or electronic case plan	My Time and Family Conferences are recorded in CWS/CMS. JDM/TDM's are captured in ETO. Informal teaming meetings should be captured in CWS/CMS Contacts.	This should be captured in the CWS/CMS Contacts. It would be reflected in the CWS/CMS Case Plan if the system were flexible enough to permit this.	Coaching log	Information regarding Safety Planning (Harm and Danger Statements, Three Houses, safety Mapping would be kept in the case (hard files). There should also be a CWS/CMS Contact that records the discussion.
Sonoma	Hard copy or electronic case plan	ETO	We plan to create a data system to track the responses contained in the case review tools.	Sonoma and the Bay Area Academy logs and tracks participants who access formal coaching through the BAA (RTA). Also considering adding coaching to the QA process utilized with the case review tool.	We plan to create a data system to track the responses contained in the case review tools.
NOTES	Is it clear what this would look like in the case plan?	ETO used to track who attended TDMs and when they occur.	Difficult to capture in CWS/CMS		

Wraparound

County	Screening		Referral		Wraparound Implementation		Ending Wrap-around
	Risk Assess-ment	Informa-tion Gathering (MDTs & Liaison)	To Wraparound	To Other Services	Four Phases	Ongoing Oversight	
Summary of Data	**Automated, quanti-**	**Qualitative**	**Data will be available**	**Data will be available**	**Mostly qualitative,**	**Qualitative**	**A mix of quantitative**

Type	tative data		electronically	electronically	review of case files		and qualitative
Alameda	VLS; CANS	SOS Screening MDT	Paper/fax email etc.	Paper, email, Fax referral form	Provider responsible for this	In development	Assessment in process
Butte	PACT	CASE Management System/ Paper	Paper/Uploaded to CASE	Email/Paper	Team Notes/CASE System	Weekly Staff/ team meetings	Re-pre / Re-assess w/Pact, Notes-in CASE
Lake	PACT	PACT; Caseload Pro after 7/1/15, word case notes; FTM written notes	Paper/Fax	Paper/Fax	Plan of Care, Data Collection Spreadsheet	IPRT (monthly reports)	Data Collection Spreadsheet; PACT (changes in risk/protective factors)
Los Angeles	PCMS/Case Notes (paper)	PCMS/Case Notes (paper)	Paper/Access/ Excel	Paper/Access/ Excel	Case Notes Plan of Care	MDT/Monthly Reports	Case/ Excel/ Access
Sacra-mento	Pact (JPIP)	Automated Case Notes/ Plans Chronos	Paper (Developing)	Paper (Developing)	Initial Implementation Start July 1	MDT/Monthly Reports	
Santa Clara	PRE JAIS-Auto	PRE SCRN/ Team Excel Meeting	Paper Referral	Universal Ref. Database, Provider makes referral non-standardized method	Case Plan in File	Site Review Report Monthly Oversight Meetings	In Case Notes Database (qualitative), Could ask provider for data (quantitative)
San Diego	SDRRC PCMS	Social Study, Interview PCMS	Paper referral, two step screening, CRD spreadsheet tracking	CRD	Provider case notes	Monthly multiagency meeting	Bi-Weekly MDT meeting (committee)
San Francisco	CANS (DPH or Provider)	Case Notes/ MDT., MAST (paper, some automated)	MAST/MDT paper-possible auto	MAST/MDT paper	Provider, Welfare Agency	Monthly Meetings, paper, if anything new (July) will be elect	Unknown, welfare agency/ Provider, likely paper

Plans for initiating service delivery

County CWS has been developing their work force to begin the changes of engagement and assessment as part of the SOP/CPM framework. County probation has been revising many contracts with existing Wraparound service providers, while also building in-house resources to focus on the new youth population.

Project counties have a pool of providers meeting their Wraparound needs. The following outlines Wraparound service provider updates/changes, if any:

- **Alameda:** ACPD has a pool of Wraparound provides meeting county needs. Currently, Wraparound is contracted with one agency, and the contract is executed and in place.

- **Butte:** Has one contract provider for this project and the contract was executed in February 2015. This is the only provider deemed necessary for the project.

- **Lake:** No updates/changes reported. The Wraparound contract is completed between DSS and our provider. The current pool of providers is sufficient.

- **Los Angeles:** As of May 1, 2015, Los Angeles County Probation has 48 contracted agencies to provide the Wraparound services. The current number of contracted provider is sufficient to provide the Wraparound throughout the eight Service Planning Areas (SPA) in the County of Los Angeles.

- **Sacramento:** The PD has contracts with two Community Based Service Providers to be deliver Wraparound services. On July 1, 2015, the providers began services. Although the contracts are being presented for final approval to the Sacramento County Board of Supervisors in late July, we anticipate the current pool of providers sufficient.

- **San Diego:** San Diego County has been undergoing a rigorous review of our existing Wraparound contracts and services. As a result of these rigorous reviews and on-going discussions, it has been determined that contract argumentations and expansions will not be required at this juncture. Their existing pool of providers has been determined to have the capacity to meet the need for the Waiver population.

- **San Francisco:** Wraparound contracts are in place as of July 1, 2015. The current pool of providers is sufficient.

- **Santa Clara:** Santa Clara County currently is utilizing five Wraparound providers. Yes, the current Wraparound providers are sufficient. They will be working to amend the current contract to add additional Wraparound slots to serve the Pre-Adjudicated population.

- **Sonoma:** Probation's contract with Seneca Family of Agencies was renewed and approved by the County Board of Supervisors effective July 1, 2015. Wraparound services under this contract target youth who are at imminent risk of home removal. After entering the waiver, Sonoma County developed a scope of work to serve the 'high needs' population that would benefit from Wraparound interventions and are in the process of developing another contract with Seneca Family of Agencies to serve this expanded population. The current pool of Wraparound providers is sufficient.

Development of Proactive Problem-Solving Protocols

The state has developed a technical assistance schedule for the 2015 calendar year to further support counties with the program, fiscal and evaluation aspects of the project. The state will continue to communicate with and gather input from all nine counties and eighteen different departments to share successes, lessons learned and brainstorm problems as they arise in each project site. Additional communication efforts are currently underway with the assistance of Casey Family Programs and the Resource Center for Family Focused Practice.

Teaming and Building an Accountable, Collaborative Governance Structure

Project Areas	Tasks (Including Correspondence/ Communications)	Current Priority Level (1,2,3)	Target Date	Current Status	Comments / Action Needed	Bureau / Lead Contact
Program	Structure for State Reporting (Semi-Annual Reports)	2		Ongoing	Due semi-annually 1/31 and 7/30	RDTSB
Program	Submission of Semi-Annual Report to ACF	2		Ongoing	Due semi-annually 1/31 and 7/30	RDTSB
Program	Develop Template for County Progress Reports	2		Ongoing		RDTSB
Program	Meet with C-CFSR & OCAP team members	2		Ongoing	Structure for plan review	RDTSB
Fiscal	Monitor county's federal allocations and expenditures	2		Ongoing		FSB
Fiscal	CB 496 Reporting	2		Ongoing		FSB
Fiscal	Review of Quarterly Fiscal Supplemental Form for state oversight	2		Ongoing		FFPB
Fiscal	CFL with Allocations	2		Ongoing		FAB
Fiscal	Training and technical assistance to counties	2		Ongoing		FFPB and FSB
Fiscal	Developing Monitoring Protocols	2		Ongoing		FFPB
Fiscal	County on-site fiscal monitoring	2		Ongoing		FFPB and FSB
Evaluation	Submit draft of RFP/Evaluation specifications to ACF	1		Completed 10/28/14	Due 60 days following accepted T&Cs	PMRB
Evaluation	Develop RFP/Scope of Work	1		Completed 4/7/15		PMRB
Evaluation	RFP Release	2	12/31/2014	Completed 4/7/15		PMRB
Evaluation	Development of Review Team	2	05/2015	Completed 6/22/15		PMRB
Evaluation	Selection of Contractor	2	07/2015	Completed 7/1/15		PMRB
Evaluation	Contract Execution	2	08/2015	Open		PMRB
Evaluation	Training/TA to counties re: evaluation (State/Casey)	2		Ongoing		PMRB
Evaluation	Evaluation Plan Due to ACF	2		Open	Due 90 days following contract award	RDTSB
Evaluation	Review Interim Evaluation (project team also reviews)	2	4/1/2017	Open		PMRB
Evaluation	Review Final Evaluation (project team also reviews)	2		Open		PMRB

Project Areas	Tasks (Including Correspondence/ Communications)	Current Priority Level (1,2,3)	Target Date	Current Status	Comments / Action Needed	Bureau / Lead Contact
Evaluation	Interim Evaluation Report	3	5/31/2017	Open	Due 60 days after the conclusion of the 10th quarter following the effective date of the demonstration's extension period	PMRB
Evaluation	Final Evaluation Report	3	3/30/2020	Open	Due six months after project ends	PMRB
Evaluation	Make Public-Use Data Available	3	3/30/2020	Open	Due six months after project ends	PMRB
Program	Technical Assistance (TA) for Cohort 1	1		Ongoing		RDTSB
Program	TA for Cohort 2	1		Ongoing		RDTSB
Program	Webinar development	2		Ongoing	As needed	RDTSB
Program	Quarterly 'Waiver Update' call schedule	2		Ongoing	Fourth Thursday	RDTSB
Program	Agenda template for county conference call	2		Ongoing	Send to Counties one week prior to call	RDTSB
Program	Q&A Development	2		Open		RDTSB
Program	Tools/process for State quarterly reviews	1		Open		RDTSB
Program	Tools/process for County quarterly reviews	1		Open		RDTSB
Program	Probation Webinar regarding Wraparound	2	2/18/2015; 4/13/2015; 4/27/2015	Open	Facilitated by Los Angeles county	RDTSB
Program	Project Charter	2		Open		RDTSB
Program	Communication Plan	2		Open		RDTSB
Program	Project Scope of Work	2		Open		RDTSB
Program	Strategic Planning with Casey	2		Open		RDTSB
Program	Issue Log	1		Ongoing		RDTSB
Program	Work Breakdown Schedule Update	2		Ongoing		RDTSB
Program	Agenda Template for Project Meetings	2		Ongoing		RDTSB
Program	Monitoring	2		Ongoing		RDTSB
Program	Quarterly County Project Meetings	2		Ongoing		RDTSB
Program	Annual Convenings	2		Ongoing		RDTSB
Program	Continue TA	2		Ongoing		RDTSB
Program	Site Visits	2		Ongoing		RDTSB

Project Areas	Tasks (Including Correspondence/ Communications)	Current Priority Level (1,2,3)	Target Date	Current Status	Comments / Action Needed	Bureau / Lead Contact
Program	Monthly Internal Project Team Meetings	2		Ongoing		RDTSB
Program	Weekly Program Check-In	1		Ongoing		RDTSB

The following is a summary of county input regarding Teaming and Building an Accountable, Collaborative Governance Structure:

Collaborative Partner Roles, Responsibilities and Financial Commitments

- **Alameda:** ACSSA, as the lead agency, is responsible for the full implementation of SOP, which includes training, setting policies and procedures, hiring staff, partnering with community and partner organizations, funding, and internal evaluation and data collection. SSA is the lead agency. BHCS holds contract for Wraparound service and with Seneca Center.

- **Butte:** Butte County DESS is the lead agency and will continue to claim costs incurred as a result of specific activities related to the Waiver Project on the County Expense Claim Form (CEC) or the CA 800 Assistance Claim (for both CWS and the PD). Expenses will be tracked on the Quarterly Fiscal Supplemental Form in further detail. For contracted services, each department will be responsible for payment to vendors for services provided. Probation: All referrals are generated by the PD and are subsequently staffed with the contract provider. The contract provider is responsible for therapeutic services and collaborative case management. The Butte PD is responsible for coordination of services, supporting the family and facilitating the Strengthening Families Program. No other organizations are involved in the project at this time. The financial commitments are as listed previously in the initial project plan.

- **Lake:** Lake County CWS is the lead agency for the Waiver implementation. The CWS Deputy Director is overseeing the project and working closely with the Deputy Director over fiscal and her staff to monitor the fiscal aspects of the Waiver. We contract with Cathy Ferron and Associates for evaluation and technical support, and receive SOP training and coaching from UC Davis, Northern Training Academy. We will be adding a contract with UCD for additional coaching support.

- **Los Angeles:** The LACDCFS, the LACPD and the Department of Mental Health are the lead agencies for the implementation of CPM. Collaborative partner roles and responsibilities are Casey Family Programs (TA and strategic planning); Patricia Mosher (consultation for implementation of CPM and CFTs); courts; schools, attorneys, Regional Centers and contracted service providers (child

welfare and mental health). The LACDCFS' financial commitment is the contract for Patricia Mosher.

In Los Angeles County, Wraparound provided through a partnership between the DCFS, Department of Mental Health (DMH) and LACPD. Currently, the lead agency is DCFS that also handles the financial obligations. The 48 contracted agencies provide services to children and youth who are referred by Child Welfare, Probation, and Mental Health.

- **Sacramento:** Sacramento County DHHS/CPS is the Lead Agency. There is a contract with Sacramento County Child Abuse Prevention Center (CAPC) to act as the lead partner/fiscal/training agency. There is a Collaborative Provider Network, made up of an additional six CBO's subcontracted to CAPC for the nine Birth & Beyond (B&B) Family Resource Centers (FRCs) and Home Visitation (HV) activities for families with children six years of age or older. An additional partner is First 5 Sacramento, which funds these services to families with children younger than six years of age. Each FRC has subcontracted or connected via MOU's to the following entities: Domestic Violence (DV) Providers; School Districts; Youth Sports providers; Women, Infant & Children (WIC) providers, as well as Alcohol and Other Drug Providers (AOD). DHHS/CPS's role includes contract monitoring, invoice approval, collaborative membership and quality assurance monitoring. CAPC's role is to act as the fiscal agent (contracts; invoicing, etc.); the training provider, as well as AmeriCorps Members (used as line staff) lead agency. CAPC also staffs the multiple committees that encompass the Collaborative. The providers manage daily operations at nine FRC's, which also serve as a platform for Home Visitation services in the surrounding community. The providers are also responsible for partnering with other mandated service providers, such as DV and WIC providers.
  DHHS's fiscal commitment is to provide funds to CAPC for the B&B FRC Collaborative through Title IV-E, as well Child Abuse Prevention Intervention and Treatment (CBPIT) funds & Community Based Child Abuse Prevention (CBCAP) funds. First 5 Sacramento enhances these funding streams with local First 5 funds. B&B provider's contract with and invoice to CAPC, who invoices to DHHS. Local funds are used as match for federal dollars; this program is a true example of braided/blended funding.
  Permanency (aka Family Finding and Kinship Support)

  The roles, responsibilities and financial commitments of the partner agencies are delineated in the respective contracts and include but are not limited to:

  Partner Agency Programmatic Roles and Responsibilities:

  - Provide Intensive Child/Youth Specific Permanency Services including Family Finding, Family Recruitment and Engagement, Preparation and Support Services.

  - Conduct assessments.

- Create service plans
- Provide individualized case management
- Provide permanency competent mental health services consisting of both pre- and post-permanency support services as needed.

County Programmatic Roles and Responsibilities:

- Provide consistent and appropriate referrals to the services.
- Notify existing and new relative and non-related extended family member caregivers of program availability
- Collaborate with partner agencies on service plans and permanency efforts.
- Appoint a CPS Division staff person to be responsible for program coordination between partner agencies and county.

County is the fiscal agent and shall provide overall administrative, program and fiscal management.

The PD's role is to monitor the State waiver of specific statues and regulations under the State authority. The Department will issue program and fiscal guidelines and procedures to implement and oversee the program. In addition, the Department will provide administrative and program technical assistance and oversight. The Department will also coordinate and facilitate all meetings with the provider. The partner organizations responsibilities include; the exchange of information, in order to perform its duties, function and appropriate procedures. Quarterly meetings are mandatory between the Department and partner organizations.

Funding for the program consists of a capped allocation of federal Title IV-E funds. It should be noted that in regards to the Wraparound Waiver Program flex funding is available and must be agreed upon between the Treatment Team Meeting, to include Probation.

- **San Diego:** San Diego County has contracted with four community agencies to provide a practice that we are implementing as part of the waiver. The county already working with Casey and will continue their partnership with them as they move forward in the waiver. Regarding contracts for Wraparound providers, the county's Behavioral Health Services (BHS) will be the lead agency. With respect to financial oversight of the use of Wraparound services, CWS will take the lead but will work in collaboration with Probation in determining payments and reinvestment dollars.

- **San Francisco:** The lead agency, HSA, has financial responsibility for training all staff and private provider staff through our contract with the Bay Area Training Academy. Trained and coached staff is responsible for fidelity to the model, which will be tested.

- **Santa Clara:** This is still in the process of being determined. Santa Clara County is the lead agency responsible maintaining current contract and amending the current contract with Wraparound providers to serve the Pre-adjudicated population in this waiver project. Wraparound providers are responsible for providing services and abide by the terms and conditions of the contract.

- **Sonoma:** Sonoma County Probation and Human Services Departments are the lead agencies in Waiver implementation. The CWS agency has the lead role in implementing SOP and has dedicated significant financial resources into the hiring of staff (infrastructure) and the procurement of additional community services. The role of Court staff is to understand, accept, and reinforce the framework and terminology embedded in SOP. Court has not been asked to contribute financially to the implementation of SOP.

  Seneca is the provider of Wraparound case management services for the targeted youth population. HSD serves as the primary fiscal agent for the county. HSD and Probation staff meet regularly to discuss policy and operations, examine data and preliminary outcomes, and review the Well-Being Project budget. The two agencies have reached agreement on distribution of funds and funding for services/positions, as well as ongoing cooperation in managing the initiative.

  The Sonoma County Youth and Family Partnership committee provides advisory and administrative oversight of the Wraparound Program. The committee monitors the implementation of Wraparound, assesses the quality and effectiveness of services delivered, identifies and evaluates community resources, and institutes changes for program improvement.

  The Mid-Level Committee of the Partnership addresses client and provider issues, training and progress of the program implementation during regularly scheduled meetings. Fiscal and programmatic staff are cross-trained to ensure appropriate funding streams are identified to meet family-driven plans of care. Human Services and PD staff both are involved in these committees, as are other partner agencies.

Service Providers, Quality Safety Standards and Practice Requirements

- **Alameda:** All new contracts executed by DCFS incorporate Results Based Accountability (RBA) measures into the scope of work, which provides a mechanism to measure the outcomes service providers achieve during the contract period. In addition, as existing agreements are renewed, RBA measures are being added to those agreements.

- **Butte:** Agreements with service providers include direction to utilize a modified Family Team Decision Making model and SOP strategies and techniques when working with families within the Butte County CWS system. In addition to the required CFSR-case Reviews, our QA Supervisors will be examining cases for SOP practice compliance and activities.
  If you contract with Butte County, you must meet certain quality standards, which vary, based on the product or services that you are providing. A standard template is used for our County contracts to ensure that the considered interest of the County and our funding sources are uniformly asserted in all business agreements. The contract is subject to specific terms and conditions, developed by the County, to cover a multitude of safety and ethical business practices. In addition, each contractor must adhere to the County's standard insurance requirements. Within our contracts, a detailed Scope of Work is developed and the contract is continually monitored by the assigned Administrative Analyst to verify that those deliverables are being met.

- **Lake:** Wraparound provider to follow these principles:

  - Family Centered – Voice and Choice
  - Persevering – Unconditional
  - Individualized
  - Consumer-Needs Driven
  - Community Based
  - Flexible-Accessible and Comprehensive
  - Accountable Outcome based
  - Collaborative – Team Based
  - Strengths Based
  - Sustainable Natural Supports
  - Culturally Competent and Relevant

  Following are staff positions and responsibilities:

  - Wraparound Services Supervisor: Oversees and supervises Family Wraparound staff and service delivery; works directly with County partners in developing strategies and protocols for the Family Wraparound program; works closely with the RCS Program Manager on program goals and outcomes; is available to Family Wraparound teams when the need

arises for emergency problem solving and action step development; and, supports staff trainings of best practices.

- Care Coordinator: Initiates the family assessments and completes the Plan of Care, identifies the areas of concern and the steps needed to address issues (on an ongoing basis); facilitates Family Team Meetings through SOP and Wraparound Principles; identifies strengths; collaborates routinely with Child Welfare Worker or PO; holds no more than 15 cases; coordinates families' access and engagement with services; acts as point person for communication for the Family Team; and provides psychoeducation.

- Family Partner: Will be present to support all family members in engaging and accessing the Family Wrap and other services; supports the Plan of Care, communicating regularly with the Care Coordinator and as needed with the Child Welfare Worker or PO; understands and models SOP and Wraparound Principles; provides psychoeducation; develops resources; attends Family Team Meetings.

- Family Support: Support access and transportation to other services throughout Lake County; provides childcare support if needed to increase families' participation in services; communicates with Care Coordinator; understands and models SOP and Wraparound Principles.

- Administrative Support: Receives and manages referrals; maintains case files; supports and manages scheduling for RCS team members and family; understands and models SOP and Wraparound Principles; communicates regularly with Care Coordinator.

Contractor will participate in regular meetings as required by LCDSS or Probation, including case management meetings, supervisory level meetings and administrative level meetings.

- Reporting Requirements: Contractor shall submit timely any reports required by the CDSS. Further, Contractor agrees to develop a reporting procedure agreeable to both LCDSS and Probation.

- Monitoring: Contractor shall be subject to monitoring by LCDSS, allowing full access to the information requested for monitoring purposes.

- Records Retention: Contractor shall prepare, maintain and/or make available to LCDSS upon request, all records and documentation pertaining to this Contract, including financial, statistical, property, recipient and service records and supporting documentation for a period of four (4) years from the date of final payment of this Contract. If at the end of the retention period, there is ongoing litigation or an outstanding audit involving the records, Contractor shall retain the records until resolution of litigation or audit. After the retention period has expired, Contractor

assures that confidential records shall be shredded and disposed of appropriately.

  - Grievance: Contractor agrees to provide a procedure through which recipients of Contract services shall have the opportunity to grieve or complain regarding service.

- **Los Angeles:** The County is incorporating CPM into the DCFS' Contracting Request for Proposal (RFP) process and DCFS is providing the infrastructure for CPM implementation.

  The contracted service provider is expected to develop a family safety and crisis plan under the Wraparound model. The provider will also develop a Quality Assurance Plan to include observations of its CFT meetings for each Facilitator and report its findings in its monthly and quarterly reports. The Contractor is expected to ensure a safe environment, which provides for the well-being of each child receiving Wraparound and leads to permanence for each Wraparound child.

- **Sacramento:** Staff working in any of the Family Resource Centers are required to attend from 40 – 160 hours of training, 40 of which must be completed prior to interacting with any client family. Multiple trainings address safety, including: Mandated Child Abuse Reporting; Critical Incident Documentation; Child Safety and Personal/Site Safety. Basic Training for B&B staff includes, but is not limited to Family Engagement; Strengths-Based Approach to Families; Standard Documentation and Data requirements, as well as a thorough knowledge of community resources to assist families with their current needs. There is an expectation (included in the contract Scope of Work) that families will be seen weekly in their homes (if Home Visitation clients) and weekly at the FRC (if class/group clients).

  Permanency (aka Family Finding and Kinship Support)

  The contracts executed with partner agencies include quality, safety and practice requirements that include: staffing requirements/qualifications (staffing levels, arrest and conviction records review, mandated reporter requirements); training requirements; reporting requirements, including audits and record keeping requirements; and outcomes measures requirements.

  The PD requires quality assurance and safety standards in all of our provider contracts. These requirements include; however are not limited to model adherence, outcome measurement collaboration, and various forms of group and other observations.

- **San Diego:** These are numerous and outlined in the contract and include areas such as: intensive case management an comprehensive community-based behavioral health services; diagnostic and treatment specialty behavioral health services; psychiatric services; medication management and support; data

collection; client specific case planning; practice in accordance with models; trauma informed service delivery; safety plan development; and adherence to the Organizational Provider Operations Handbook.

- **San Francisco:** Partners provide training and coaching, but FCS staff provide SOP services/interventions. Service providers will be informed and trained on SOP/CPM principles so that they can support the work as they provide related services, such as mental health, substance abuse, etc.

  The provider contract will address quality and practice requirements through the requirement for the use of the Wraparound Fidelity Index for all providers. Monitoring of the WFI will be conducted through regularly scheduled administrative oversight meetings to ensure fidelity is maintained. Safety procedures are also outlined in the provider and will be monitored through regularly scheduled programmatic oversight meetings.

- **Santa Clara:** As with the CFPPM, contractors have been trained on the practice model and SOP tools and language has been incorporated into new contracts and as existing contracts are renewed. The expectations are that staff and contractors will utilize the common language and SOP principles and tools such as harm and danger statements, three houses, safety mapping, etc.

  Quality and Safety Standards:

  - Oversight Committee: Resource and Intensive Services Committee (RISC) comprise of Probation, DFCS and Behavioral Health members attend the oversight meeting on a monthly basis to ensure the Child Family Service Plans are developed, completed and up to standard by the Wraparound Provider Facilitator. This also includes the presenting and modification of the Safety Plan, updating the respites, resources needed. If the plans do not meet standard, the RISC team does not approve the plan until is updated with requirements.

  - Annual Site Reviews: Monitor the performance of the contract to determine whether standards are being met and whether improvements can be implemented.

  Contract Practice Requirements:

  Wraparound services available to clients 24 hour a day, seven days a week, 365 days per year.

  Providers responsible for full coordination, facilitation, notifying all parties, convening the Child Family Team (CFT) Meetings. Coordinate and assign all staff for CFT, Facilitate Wraparound service planning process, make initial contact with family within 24 hours of referral, face to face meeting within three days of referral, coordination planning and delivery of services with County

system partners, Community based organizations, families, schools and community members.

Develop, coordinate and provide formal supports and service to address the family's identified needs.

Facilitate the development of the Child and Family Service Plan and integrate Court Orders in the service plan with in the first 60 days and present it to the Oversight Committee within 90 days.

A Child Family Team meeting will take place a minimum of one time per month, and the Social Worker and or PO must be present at a minimum of one CFT a month. The CFT meeting minutes must be disseminated within one week of CFT taking place.

RISC Committee assigns clients to Wraparound Provider, provider assigns the family a facilitator within on business day of assignment, face to face scheduled with identified "key players," safety plan developed addressing high risk behaviors immediately following the first face to face visit, revise within two months of assignment, conduct first Family Support Team (FST) meeting within two weeks of RISC assignment, complete Individualized Family Support Plan within two months of RISC assignment, provide 24-hour crisis intervention and management, submit a Discharge/ Graduation Plan within 30 days prior to a client leaving program services.

The Individualized Family Support Plan (IFSP) will be presented at the Oversight Meeting within 60 days of the referral and six months thereafter. All parties must sign all IFSP's prior to presenting to Oversight Committee.

- **Sonoma:** Seneca Sonoma Intensive Case Management (ICM) program will provide linkage and stabilization services to youth and their families when the youth are stepping down from residential care or experiencing difficulties in at least two life domains. ICM services are designed to link youth to mental health, educational, and community services in an effort to reduce symptomatology and increase functionality. ICM services will also work to promote healthy and positive interactions within the family, school and community through the provision of parent education, behavioral coaching, and the development of natural supports.

  Objectives

  - Stabilize youth on probation who are experiencing difficulties in at least two life domains.
  - Support youth transitioning back to the community from residential care.
  - Offer parent education to improve parent /child interactions. Education and training will be offered on a variety of topics including child

development, positive parenting strategies, communication, conflict resolution and limit setting.

- Encourage engagement with and utilization of natural supports.

Activities and Timelines

Referrals:

- Within 24 hours of receiving a referral, the Seneca ICM Facilitator or Supervisor will contact the referring party to review goals for service.
- Contact with the family and youth will be made within 48 hours of receiving the referral.
- Location and Duration of Service:
- Families referred into the ICM program will receive 3-6 months of service, depending upon need.
- Services will be provided in the home, school, community or Seneca office, as appropriate and convenient for the family.

Service Activity

- The first ICM meeting will be held within 30 days of intake.
- ICM meetings will be held every two to four weeks, depending upon need.
- Intensive case management services will be provided to facilitate linking families to necessary mental health, educational, and vocational services.
- The ICM Facilitator will provide parent education, coaching, modeling, supportive problem solving and modeling in an effort to improve functioning.
- The ICM Facilitator will offer family communication guidance designed to improve interactions between parent and child.
- The Support Counselor will directly support referred youth through the provision of one-to-one behavioral coaching.
- The Support Counselor will connect the youth to community resources and support school attendance through transportation and engagement facilitation.

Documentation

- The Facilitator will complete all intake paperwork and begin the assessment within three days of youth enrollment in services.
- The assessment and treatment plan will be completed within 30 days of intake.
- A documentation note will be completed by the staff after service delivery.
- Quarterly Reports will be completed and submitted to probation for review.
- ICM meeting minutes and action plan will be completed within 72 hours of each meeting and distributed to all team members.

Outcomes

- Youth will stabilize and experience increased functioning across at least two life domains.
- The family and youth will be successfully connected to services and resources in the community.
- Family interactions will reflect development of improved communication, problem solving, and conflict resolution skills.
- Youth will successfully transition from a residential setting to a family setting.

Evaluation

- Seneca will maintain records to track the frequency and duration of meetings in order to document service delivery and program effectiveness.
- ICM Facilitators will track the number of positive connections on the quarterly report.
- Session notes will monitor progress.
- The discharge summary will reflect the number of goals that were met.

Staffing and Resources

- Facilitation and clinical services will be provided by a master level, licensed or licensed-eligible staff.
- Behavioral coaching provided to the youth will be delivered by a BA level staff Support Counselor.

- To ensure individualized, strength-based and culturally responsive services the Facilitators and Counselors will have completed specialized training in best practices for effectively serving this population, including cultural competency training.

- At all times, if possible, services will be provided in the language preferred by the client and family. Translation services will be available if necessary.

- The number of staff needed on each case will be determined by need, and in close collaboration with Sonoma Juvenile Probation.

- In certain cases, as needed and mutually agreed upon, additional counselor services may be required to meet a particular need. These additional services will be made available and reimbursed at a rate of $75 per hour.

Implementation Teams

- **Alameda:** The ACSSA created the SOP Implementation Team (SOP IT) to serve as a focused, accountable structure for assisting in the countywide implementation of SOP and make recommendations that will increase the likelihood of consistent, successful implementation. The SOP IT is made up of managers, supervisors, youth and parent advocates, training and evaluation staff and DCFS's technical assistance providers (Casey Family Programs and Children's Research Council) and will make implementation recommendations to the Department Executive Team and communicate about SOP implementation to the Department and the Department's key partners and stakeholders. The SOP IT has created a Charter to outline the SOP IT's scope of work.

- **Butte:** The CWS Assistant Director, Program Managers and Administrative Analysts meet monthly to monitor the progress of Butte County's interventions under the Waiver.

  An Enhanced SOP Implementation team has been created and meets on a regular basis to discuss the activities to be implemented for Enhanced SOP. The implementation team created a Planning Document outlining the activities to be implemented under the Waiver. The Enhanced Implementation team consists of CWS Staff Development Officer, Program Managers and CWS Administrative Analysts. The Analyst assigned to the Waiver communicates with the Assistant Director on next steps or actions to be taken on an as needed basis. The Staff Development Officer and Administrative Analyst communicate with county staff regarding policy and training as needed.

- The implementation team consists of a Supervising PO, a PO (case manager), a PO (assessment), a Probation Technician and the contract therapeutic staff. The assessment PO is the first person to receive and screen the referrals from law

enforcement. This officer conducts a PACT Prescreen to determine risk level. If it appears the risk level is appropriate for Wraparound, the youth's case is forwarded to the case management officer. The PO screens all initial Wraparound referrals. If deemed appropriate, the referral is then staffed with the therapeutic team, and ultimately a collective decision is made by the entire team to begin services.

- **Lake:** Being a small county, the implementation team is the CWS management team.

  The implementation team includes: Kathy Maes (CWS director), Terri Rivera (Probation Juvenile Division Manager), Cather Ferron (Consultant), Steven Carter (CWS fiscal), Marcie Cadora (Probation fiscal), Leila Hadad (CWS Senior Staff Analyst), Wendy Mondfrans (Probation Juvenile Division Supervisor), Victoria Schader (RCS, Wraparound Provider Manager) and Kari Van Brackle (RCS, Wraparound Provider Supervisor). The team meets at least once a month to track the progression of the Wraparound Services and iron out on-going issues. There are other meetings where only portions of the teams are needed such as fiscal or higher levels of decisions need to be made. The County does not have specified positions other than the consultant who directs the conversation of what is needed from the Wraparound Program and the information needed to identify and track our outcomes. Communications happens at the meetings, telephone or by email. Management oversees the entire program with separate meetings with each of their agencies. They function to determine the overall direction of the programming for the youth.

- **Los Angeles:** Implementation Teams include CPM Management Staff and Regional Office Staff. CPM staff includes eight Coach Developers that assist offices with the implementation of CPM by training Coaches and Facilitators. Coaches are Supervising Children's Social Workers (SCSW) ensures that their social work staff (Facilitators) maintains model fidelity and provides the families that they service with needed services and support. SCSWs and CSWs are encouraged to team as dictated by a family's needs and the principles of CPM and are authorized to team with families including CFTs and other family meetings. Multidisciplinary Assessment Team Meetings, Wraparound Child and Family Team Meetings and Family Preservation Multi-disciplinary Case Conferences will continue to occur to support families. Over time, the structure of these meetings will be aligned with the CFT approach.

  The Child Family Team (CFT) consists of a facilitator, a Child and Family Specialist (CFS), a Parent Partner (PP) and Psychiatrist (on call). They also have five Deputy PO liaisons serving eight Service Planning Areas. The Facilitator is the lead, and the CFS works directly with the child and family to achieve permanent placement. The PP assists the parent in navigating the various systems as well as friendly support for parent. The DPO Liaisons present each probation case in the screening process. The DPO Liaisons also monitor the provider and assist in communication between the provider and the

case-carrying DPO. DPO liaisons conduct oversight of providers to maintain quality assurance, screen cases for eligibility, review documentation such as plans of care and safety plans, generate referrals, collaborate with other Departmental liaisons, maintain communication with the youths' DPOs of Record and families to establish rules and their expectations of providers and conduct training for Wraparound.

- **Sacramento:**

  SOP/CPM

  The SOP Implementation team is comprised of Managers and Program Specialists from all Sacramento County CPS programs. The purpose and function of the Implementation team is to plan and develop consistent communication of expectations, protocols, procedures, and policies regarding SOP. Additionally, the SOP Implementation Team will develop a plan for tracking after full implementation for continuous quality improvement.

  Prevention activities are being provided under a contract with DHHS/CPS. The B&B Executive Management Team, including the DHHS Planner Liaison responsible for contract monitoring, directs and approves the work of a variety of Collaborative Committees. For example, the Policies and Procedures (P&Ps) Committee has worked to develop, modify and implement a standard set of practices across all provider agencies to address Title IV-E waiver services. This committee is comprised of staff from all levels, from direct service, to data, to management representing all nine FRC's, CAPC and the county. P&Ps are approved by the group and then forwarded to the Program Managers Operational Committee (PMOC) for final approval. PMOC is also made up of the Program Managers from all sites, a CAPC facilitator and County Staff. Final approved policies/forms are communicated via email and posted to a shared web location. The Collaborative hosts multiple committees comprised of staff from each site in a like position, and those committee's report up the chain. As an example, the Team Leaders from all the sites report their committee work to PMOC, which is made up of the Program Managers who supervise the Team Leaders at each site.

  Permanency (aka Family Finding and Kinship Support)

  There is a planning team for each of the two Permanency Initiative programs. Each planning team includes managers from Sacramento County CPS, Lilliput Children's Services and Sierra Forever Families. The Sierra Forever Families planning team also includes a Sacramento County CPS supervisor that currently oversees the CPS side of the program. The planning teams for each program have met, at the least, on a monthly basis to ensure good communication. The purpose of the planning teams has been to review the current program and process and to make improvements for the expansion of services as needed. The planning teams for each program have reviewed each program as it was

originally created and have revised the referral forms and the referral process. In addition to the planning team there have been subcommittee meetings as needed which have met regarding budgets, data collection and reports, revising the referral process and staffing the programs.

In terms of engaging key partners in planning and implementation efforts, the PD plans to conduct stakeholder outreach activities; which may include, but not limited to focus groups, joint trainings, and data/outcomes sharing.

In regards to the implementation team, the Departments Waiver Unit will include a Division Chief, an Assistant Chief Deputy, a Supervising PO, two Senior Deputy POs (one of which will be a quality assurance officer who will monitor the program and conduct site visits) and five Deputy POs (one of the Officers will have the role as the PO Program Coordinator for the referral process). The Waiver Project will also consist of two Administrative Services Officers and one Program Planner.

Contracted Agency Representative to include but not limited to Facilitators, Parent Partners (peer parents), Youth Partners (mentors) and a clinical support team. Additional members may be added to the team based on the youth and/or family needs.

The Wraparound service provider will have on-call capacity for staff within the Wraparound agencies availability 24 hours a day, seven days a week. The Wraparound Team will have regular Team Decision Making and Family Group Conferencing involving the PO. There will be documentation of the TDM's, which will consist of consents, team minutes, progress reports, discharge summaries and crisis plans. If necessary, there will be the availability of flex funding that must be agreed upon during TDM's.

Since the implementation of the Waiver Project on July 1, 2015, Probation has been conducting bi-weekly administrative meetings with the provider to ensure clear communication and positive collaboration. In addition, the Service Providers have bi-weekly treatment team meeting with the assigned PO to discuss specific case goals for the identified youth and family. This meeting is in addition to regular TDM's. During these discussions, programing issues is also discussed if necessary.

- **San Diego:** The County created a waiver steering committee (SC), which is a cross section of program and staffing levels. The SC communicates waiver information to their program/region. For the new interventions that the County will implement, the County created or will create an implementation team.

  Probation's implementation team includes juvenile field services (JFS)/operations division, fiscal division and executive staff over each division. The purpose of the JFS operations team is to develop the policy, procedure and function of the waiver procedures. The fiscal team is responsible for navigating through and

developing a financial plan for implementation. The executive team reviews progress and work of fiscal and operational teams and makes final decisions for implementation. The County's broader implementation team also includes CWS and Behavioral Health Services. This is related to contracts and teaming regarding the strategies and service provision. Communication occurs through regular team and departmental meetings at line and executive levels. In addition, the communication occurs through email, phone, electronic messaging, newsletters and presentations to County Executive staff.

- **San Francisco:** Under our waiver implementation team structure, which includes work groups for each waiver strategy, the SOP work group meets regularly on implementation design. The group reports up to the implementation team monthly. In turn, that team reports to the waiver leadership team quarterly.

  Under the waiver implementation team structure, which includes work groups for each waiver strategy, work groups meet regularly on implementation design. The group reports up to the implementation team monthly, who reports to the waiver leadership team every quarter.

- **Santa Clara:** Santa Clara County has a Title IVE Steering Committee, with four reporting subcommittees: Communications (responsible for implementing communication goals), Program (to implement intervention strategies), Data and Evaluation (to develop logic Model) and Fiscal (to work on accounting structure).

- **Sonoma:** SDM/SOP Implementation committee meets monthly to oversee the training and implementation of SOP including staff and stakeholder communication and policy/procedure development. Sonoma County Probation does not require an implementation team as Wraparound was an existing service when we opted into waiver. Probation, Child Welfare (Human Services Department) and Seneca staff have established meeting times to review practices, address any communication issues and adjust protocols as necessary to ensure Wraparound assessments; referrals and service delivery are functioning smoothly.

Management Procedures, Positions and Functions

- **Alameda:** The Department Executive Team (DET) is comprised of the Assistant Agency Director (AAD) and three Division Directors of Alameda DCFS. Any program or policy changes that occur in DCFS are discussed and decided upon by DET. DET will receive recommendations from the SOP IT and approve, modify, or reject those recommendations before the recommendations are implemented. In the ACPD, the Deputy Chief manages and coordinates Juveniles Services including the Waiver. Directors assigned to the Waiver strategies oversee SOS and monitor youth in appropriate interventions. Supervisors work with providers to oversee and collaborate with POS and provider and supervise DPOs. Management Analyst completes reports as required as well as monitor and assess data.

- **Butte:** Shelby Boston, Children's Services Assistant Director, who is responsible for oversight, leadership and management of the program. Program Managers David Bradley, Karen Ely and Jennifer Allen are responsible for program oversight in their respective functions. Staci Parisi, Administrative Analyst, reports to AD and is responsible for procurement process, contract development, oversight for the Waiver interventions, project coordination between Probation and CWS and reporting for the Waiver Project.

  Tamara Ingersoll, Fiscal Supervising Administrative Analyst, is responsible for completing Quarterly Fiscal Supplement Form and Quarterly CEC for claiming.

  The Supervising Probation Officer (SPO) oversees the Wraparound program, attends all weekly meetings and audits the referral process and case management activities to ensure fidelity to the tenants of the Wraparound model. The SPO works closely with the therapeutic staff to ensure deliverables of the contract are met. Additionally, the SPO reports to the Chief Deputy PO who represents another layer of ensuring fidelity to the program.

- **Lake:** The Deputy Director oversees the project and works directly with the management team, local evaluator and UC Davis to develop and monitor policy and procedure, training and evaluation. CWS Program Managers and supervisors oversee social worker implementation of the SOP activities. The Deputy Director works with the fiscal Deputy Director and team to monitor the fiscal aspects of the waiver.

- **Los Angeles:** Management positions include:

  - Waiver Program Manager – Liaison with the State, represents DCFS at all waiver related activities, monitors results, participating in waiver workgroups and reporting.

  - Waiver Fiscal Manager – Represents DCFS with waiver fiscal matters, provides waiver budget and monitors spending.

  - Waiver Claiming Manager – Monitors and reports claiming, tracks' spending as it relates to the waiver.

  - CPM Program Manager – Provides oversight of the CPM implementation; tracks the number of Coach Developers, Coach Facilitators and Coachers.

  The Title IV-E Waiver Management Team in Los Angeles County Probation consists of one Director, one Administrative Services Manager I (ASM I), two Program Analysts and three clerical support staff.

  The Waiver Management team manages the implementation of all services and programs funded by the Waiver. The team manages the contracts, budgets and any evaluation associated with the administration of these services. The Waiver

Team is responsible for reporting to the State and other stakeholders on the progress of the Waiver project.

The Director oversees the daily operations of the program. The ASM I is the lead on reconciliation of fiscal-expenditures and manages the in-house data system with the support of the two program analysts. The three clerical support staff provides assistance in gathering data for the Waiver strategies.

- **Sacramento**

SOP/CPM

Program Managers and Program Planners participate on the SOS Implementation Team. A Program Planner will take the lead on facilitating meetings. All managers will participate in communicating expectations to staff, developing protocols and policies and enforcing them.

Prevention

DHHS/CPS has a Human Services Program Planner (management class) whose responsibilities it is to act as a Liaison between the B&B FRC Sites, CAPC, and CPS. This individual reports to a CPS Program Manager and Division Manager. CAPC has a Collaboration Manager, as well as dedicated Fiscal and Training staff to ensure that all milestones in the Prevention Contract are met. In addition, each B&B site has an on-site Program Manager who oversees the work of the Team Leader, the FRC Coordinator and the Intervention Specialist. The Team Leader oversees/supervises the Home Visitation staff and the FRCC oversees/supervises the work of the FRC staff.

Permanency (aka Family Finding and Kinship Support)

A Permanency Initiative Steering Committee is being created to oversee the two programs – Sierra Forever Families Destination Family and Lilliput's Children's Services Kinship Support Services Program 2 (KSSP2). The Steering Committee will meet on an ongoing basis and include managers, supervisors, and staff from Sacramento County CPS, Lilliput Children's Services, and Sierra Forever Families. Some of the managers that are currently on the planning team will be members of the Steering Committee. The committee will review the progress of each program, address any needs that arise and will problem solve as needed.

The Sacramento County CPS managers that will be involved will include a program planner that will monitor each program contract. The planner will facilitate the Steering Committee, receive and review the quarterly reports from each agency and review and approve invoices as they are received. There will also be program managers and supervisors whose staff will be utilizing these services on the committee.

The staff from Lilliput Children's Services and Sierra Forever Families will be managers and supervisors who are running the specific program.

The following is list of the duties for Probation Administration who oversees the Waiver Program:

The role of the Division Chief is to ensure the staff has the resources necessary to carry out their job duties, attend program meetings with collaborative partners, to include contractual providers, DHHS and the CDSS.

The role of the Assistant Chief Deputy will also have the above responsibilities and monitor fiscal expenditures and contractual guidelines. The ACD will also review statistical analysis and outcome measures to ensure fidelity.

The role of the Supervising PO will consist of supervising the program to ensure fidelity of the program, organizing and attending meetings with contracted program administration, collecting statistical analysis, supervising line staff, and reporting out to upper management. The Senior Deputy Probation Officer's duties include potential case assignment, mentoring Deputy Probation Officers, internal auditing to ensure fidelity of the program, attending meetings, reviewing reports and recording of statistical analysis. As a result of the implementation of the Waiver Program, the Department has added the position of an officer who is designated the Probation Officer Program (POP) Coordinator. The POP Coordinators role is to review all non-candidate youth for eligibility determination of waiver services. Once a youth is identified, being eligible for waiver services the POP Coordinator will then complete a referral and submit to the appropriate contracted services providers to meet the specific treatment needs of the minor and their family.

- **San Diego:** The main waiver oversight is in CWS Policy and Program Support and the Deputy Director is Roseann Myers followed by Kim Giardina who is the manager over the waiver followed by Corey Kissel who is the Policy Analyst responsible for the waiver.

  Mike Weissenburger heads the County's fiscal team for CWS fiscal and Amy Thompson for HHSA fiscal

  San Diego works together as a team to provide the program interventions and activities needed for the waiver, which is influenced by our financial outlook.

  Our positions associated with the waiver included a Supervising and Senior PO to oversee the implementation of the Waiver and to serve as our operational and technical experts and implementation monitors. They will also develop policies and procedures related to the Waiver and manage the oversight of the strategies, in addition to providing quality assurance and staff training. We also have a Deputy Probation Officer assigned to the waiver who is the Wraparound liaison and referral agent. This officer works directly with line staff, CWS and the

providers regarding Wraparound referrals and serves on the review committee. We continue to need to either hire or re-organize one- two staff to meet our needs for an administrative analyst to assist with data collection and analysis, monitoring, outcome development and monitoring, and evaluation. We will be contracting with providers for Wraparound and family finding.

- **San Francisco:** Leadership and management have completed training on SOP/CPM and will work with internal coaches to support quality practice consistent with SOP. An Implementation Coordinator has been selected who will coordinate implementation activities of the work groups and the implementation team.

  Under our waiver implementation team structure, which includes work groups for each waiver strategy, work groups meet regularly on implementation design. The group reports up to the implementation team monthly. That team, in turn, reports to the waiver leadership team quarterly. SFJPD will be hiring an IV-E coordinator who will assist in assuring compliance with IV-E guidance, monitor implementation and facilitate processes.

- **Santa Clara:** The County created two additional positions to support the IV E Waiver: a Management Analyst Program Manager (hired and started on July 20, 2015) and a Project Manager.

  Administration is responsible for hiring Program Manager and analyst, prepare Report to the Board of Supervisor and the CDSS.

- **Sonoma:** A program development manager is the assigned lead for SOP to ensure consistent and thorough implementation of SOP agency wide. A DPO IV (Supervisor) position has direct operational responsibility for all Wraparound functions in the Department. Oversight of the Well-Being Project is primarily the responsibility of the Division Director, who manages the Department's Juvenile Probation Services Division. The Deputy Chief Probation Officer (over Juvenile and Adult Probation Services) provides guidance and is available for consultation to discuss policy, financial and operational issues that may arise. Probation's Administrative Services Officer oversees all aspects of fiscal, contracting and claiming matters. The ASO meets regularly with her Accounting staff as well as operational staff in the Department. Additionally, she meets with her counterpart at HSD to review revenue/budget forecasts and determine corrective action as necessary. Probation and HSD management meet regularly to discuss implementation and operational activities of the Well Being Project.

SOP/CPM and Wraparound Monitoring

- **Alameda:** The SOP IT co-chairs meet with the Department Executive Team (DET) monthly to provide updates on SOP implementation and communicate recommendations. In addition, DCFS participates in all statewide Waiver meetings, monthly and quarterly Waiver calls and will complete semi-annual

reports submitted to the CDSS. Alameda DCFS and PDs hold a monthly Waiver Executive Team meeting to discuss Waiver implementation, finance, evaluation and other issues.

PD Project Permanence: Clients Referred by ACPD.

Contractor shall meet the following client outcomes as measured by arrest and placement data:

- 70 percent of youth shall have no new sustained arrests during the time of treatment to be reviewed at discharge and six months post-discharge.
- 70 percent of youth will be living at home or a home-like setting in the community and not in congregate care at discharge.

This is for all clients whether SSA or Probation.

All Clients:

Contractor shall meet the following parent/family deliverables as measured by Project Permanence Youth and Family Satisfaction Surveys administered at discharge:

- At least 65 percent of participating Youth and Caregivers will respond to the Youth and Family Survey;
- 70 percent of parents shall indicate agree or strongly agree on parent survey question “I have people in my community to whom I can turn”;
- 70 percent of participant families shall be actively involved in at least one community, athletic, or spiritual activity at discharge;
- 85 percent of youth surveyed shall agree/strongly agree that “staff were sensitive to my cultural/ethnic background”;
- 85 percent of youth surveyed shall agree/strongly agree that “staff respected my family’s religious/spiritual beliefs”;
- 85 percent of participants shall agree/strongly agree they felt they were included in the team planning and decision making;
- 85 percent of the participants shall agree/strongly agree they felt that the team never gave up on him/her despite all the ups and downs experienced;
- 85 percent of participants shall agree/strongly agree they remembered to talk about success, strengths or accomplishments at team meetings;

- 85 percent of parents/caregivers shall agree/strongly agree they felt the team developed a service plan to fit their family's or child's needs; and
- 85 percent of participants shall agree/strongly agree they felt working with Project Permanence was a positive experience.

Child and Family Team (CFT) meeting/Family Team Meeting (FTM)/Individual Service Plan (ISP): Contractor's staff shall complete initial CFT meeting/FTM within 50 days of each episode opening, and ISP shall be developed for each client at the initial CFT meeting/FTM. Regular CFT meetings/FTMs shall continue to be initiated by Contractor's staff at a minimum of once a month.

Individualized Safety Plan: An individualized safety plan shall be developed for each client within 30 days from the date of client's entry into the program.

- **Butte:** The CWS Assistant Director, Program Managers, Staff Development Officer and Administrative Analysts meet monthly to monitor the progress of Butte County's Enhanced SOP plan.

  An Enhanced SOP Implementation team has been created and meets on a regular basis to discuss the activities to be implemented for Enhanced SOP. The implementation team created a Planning Document outlining the activities to be implemented under the Waiver. The Enhanced Implementation team consists of CWS Staff Development Officer, Program Managers and CWS Administrative Analysts. The Analyst assigned to the Waiver communicates with the Assistant Director on next steps or actions to be taken on an as needed basis. The Staff Development Officer and Administrative Analyst communicate with county staff regarding policy and training as needed.

  By meeting on a weekly basis, the Wraparound team is able to communicate the successes and challenges of Wraparound implementation and make adjustments as needed.

- **Lake:** Monthly meetings are in place with the management team, evaluator and fiscal staff to monitor all aspects of implementation. At least monthly discussions occur with management, the supervisors, and SOP coach who oversees SOP activities. Lake County is working with the evaluator to put processes in place to document and measure the use of SOP activities (for example using CWS/CMS special project codes and special SOP time study codes). Lake County plans to utilize the UC Davis SOP case review tool when completing federal case reviews.

  Lake County meets with the Wraparound service providers on a bi-weekly basis. Any questions are reviewed at higher-level monthly meeting.

- **Los Angeles:** DCFS has monthly Quality Service Reviews (QSR) in one regional office on a rotating basis. It reviews a random sample of cases and monitors the qualitative implementation of the CPM. Regional offices also conduct

workgroups to receive feedback for staff about their experiences with CPM. The Waiver Manager will monitor the State Waiver indicators to monitor quantitative progress. The manager for CPM and their staff track the number of Coach Developers, Coach Facilitators and Coaches that are in each office.

The WFI is expected to be administered every six months by each contracted service provider to assess the quality of individualized care planning and management for children with complex needs and their families. In addition, quarterly meetings are held involving service providers, County departments and other community stakeholders to provide updates on the implementation process.

- **Sacramento**

SOP/CPM

The Implementation Team will be the entity responsible for monitoring SOP/CPM Implementation. Members from each program will monitor their staff's use of SOP/CPM through supervisory and management case discussions and case reviews. Northern California Training Academy Coaches will also assess and provide feedback on CW Staff use of tools to the Implementation Team.

For the Prevention Initiative, data is gathered by the sites daily and reported to an external evaluator monthly. Monthly data reports, based on site data, are reported by an external evaluator and shared with the CPS Planner, CAPC and Management Staff at all sites. Site-specific data is shared (without identifying information) across the Collaborative. This is used as a learning and quality improvement tool (i.e., if one site is doing an outstanding job on a particular milestone, others may want to learn from them what is working). Quarterly Contract Milestone Reports are generated by CAPC and shared with CPS Management. The CPS Planner and CAPC will have site-specific discussions, as needed, based on the site's ability to meet its outcomes. In addition, on a quarterly basis, the CPS Planner completes random case reviews at sites, ensuring that policies are being followed and milestones adequately met.

Permanency (aka Family Finding and Kinship Support)

Providers are contractually required to:

- Submit progress/activity reports and other reports as required by the County.
- Maintain all documentation necessary to support costs of service delivery, to track all expenditures and to report the same to the County in a manner determined by the County and the evaluator.
- Provide the County with any information, data, etc. needed to comply with the state's semi-annual reporting requirements.

- Participate in federal, state or local evaluations as needed and provide any data, information, documentation, etc. as required for evaluation purposes, keeping in mind that the state is planning to do a process and outcomes evaluation as well as a cost analysis for specific interventions.

- Work collaboratively with the County to develop and implement a phase-down plan should the Title IV-E Project not continue.

- Work collaboratively with the County to plan, and participate in, progress reports to the Board of Supervisor, stakeholders, etc. if needed.

- Attend any local, state or federal meetings, convening, etc. if needed, as required by the state or requested by County.

In collaboration with the County develop and implement Quality Assurance and Continuous Quality Improvement processes.

The implementation of Wraparound will be monitored through bi-weekly meeting at the Management and line staff level between probation and the providers to ensure a positive working collaboration. In addition, Probation Administration assigned to the Waiver program will meet with DHHS for quarterly county project meetings.

- **San Diego:** San Diego County has a CQI unit who will do referral/case reviews. In the review, our SOP tools will be monitored. For their SOP coaches, San Diego County created a log to monitor the region, worker and types of coaching the worker is receiving. San Diego County can then monitor trends and provide additional supports if necessary.

  The Wraparound implementation process is monitored through regular meetings with San Diego County's staff assigned to the waiver to include Probation operational and fiscal staff, as well as with CWS, BHS and the contract providers. At minimum, San Diego County has monthly waiver specific meetings with these partners. Through our established data collection and review committee processes, San Diego County will be able to monitor wraparound referrals, progress and the overall implementation of Wraparound.

- **San Francisco:** CWS: San Francisco County will use regular extracts of training and coaching data from the Bay Area Academy to track training timing and dosage at the individual level. Staff who have been both trained and coached will be tested for fidelity using fidelity tools described above.

  Under San Francisco County's waiver implementation team structure, which includes work groups for each waiver strategy, work groups meet regularly on implementation design. The group reports up to the implementation team monthly. That team, in turn, reports to the waiver leadership team quarterly.

- **Santa Clara:** With the CFPM (CAPP), implementation progress is being monitored through Fidelity Assessment processes, Monitoring of implementation of CFPM also was supported through coaching and use of Reflective Practice and Reflective Supervision, It is anticipated that a Fidelity Assessment process and coaching support (as well as reflective practice/supervision) will also be used for SOP implementation.

  The Wraparound Implementation Team (Executive Steering, Communication, Program, Fiscal and Research and Evaluation) meets on a monthly meetings to follow up with progress. Probation and DFCS continues to have ongoing bi-monthly meetings with Wraparound Provider-Executive regarding implementation.

- **Sonoma:** SOP monitoring is still under development. Researching processes in place in other counties including case review, fidelity checklists and database development. Wraparound is an existing service the number of youth/families referred for the newest Wraparound caseload will be monitored, as will existing caseloads to ensure adequate slots are available through the contracted service provider and resources sufficient to meet identified needs.

Fiscal Monitoring

- **ACSSA:** The fiscal team participates in statewide fiscal calls, attends the Alameda County Waiver Executive Team meetings and completes the quarterly fiscal supplemental reports to monitor the fiscal aspects of the Project.

- **ACPD** has a MOU with Behavioral Health Care (BHCS) to cover costs associated with Wraparound services provided to youth supervised by ACPD and not reimbursable under Medi-Cal. In order to provide Wraparound services to Probation, BHCS has a contract with Lincoln Child Center; the program name is Project Permanence. Quarterly BHCS chargeback Project Permanence costs to ACPD using inter-agency journal entry with supporting documents showing the list of clients and amount of services provided. Upon receipt of these entries, fiscal unit will review charges for mathematically accuracy then forward the client list to Program for approval. Fiscal will track the expenditure with budget continuously throughout the year.

- **BCDESS:** The Fiscal Supervising Administrative Analyst is responsible for the preparation of all County Expense Claim Forms, and the Quarterly Fiscal Supplemental Form. She participates in monthly, quarterly and fiscal county calls with the CDSS and provides Technical Assistance to program staff as needed.

- **BCPD:** There are many aspects to overseeing the financial processes of the waiver project. As a condition of receipt of these funds, the department must allocate funds according to the requirements of the federal funding source. Butte County's department has devoted an Administrative Analyst to accomplish the

fiscal monitoring of the program. This staff member ensures that all costs assigned are accurate, appropriate and ethical. This is accomplished through quarterly financial reconciliations, on-site review of project and fiscal records to ensure that funds expended are accounted for properly.

- **LCDSS:** Lake County has standard monthly fiscal meetings, but they added a special Well-Being Project meeting to review both fiscal and programmatic effects of how the waiver is working for our county. Fiscal staff, Deputy Directors (over CWS and Fiscal), the Director and the evaluator attend the meeting. There are plans to include Probation. Lake County's fiscal staff prepares the fiscal supplemental form, claim forms, and keep track of how Lake County is progressing financially in the waiver. This information is reviewed at the meeting. In addition, we use the meeting to work out process issues that are unique to the Waiver projects. Lake County is developing ways to track spending for specific services that are identified and provided through Waiver activities to use for internal evaluation purposes.

- **LCPD:** Lake County's fiscal aspects our monitored by their CWS fiscal staff as well as their fiscal staff.

- **LACDCFS:** The fiscal aspects of the CPM will be monitored by the Quarterly Time Study, which is completed by all social work staff. During the first year of this waiver, LA County looked at five offices and used the "case-management" time study hours for these offices. The number of staff is based on the number of staff that time study under the case management code in these offices.

- **LACPD:** The State's fiscal supplemental form and other fiscal reports will be used to monitor the fiscal component of the waiver. The Waiver team also monitors Administration and Assistance expenditures on a monthly basis. Probation holds regular meetings with CWS to discuss funding and expenditures to ensure that the Waiver dollars are being expended throughout the course of the project.

- **SCDHHS:** The fiscal monitoring for all of our programs usually follows the guidelines established by the grantor if necessary or by following the rules and regulations established by the CDSS in conjunction with Federal requirements for procurement of goods and services. Sacramento County also established guidelines for employees to follow while reporting their work distribution on these programs; the data are gathered from the timesheets the employee entered through the Employee Self Service (ESS) on the MySacCounty website. The use of this system eliminate the need to complete and mail in a paper copy of a Work Distribution Report (WDR); minimize errors and omissions, and are safe guided. Supervisors and employees are responsible for accurate and thorough Timesheet/WDRs, since their electronic signatures certify each Timesheet/WDR to be correct. As always, order numbers are directly linked to the CDSS time study program codes, which are also sources of funding. Therefore, the Supervisors ensure that the hours are reflected correctly and approved the

timesheet. All invoices for payment of goods and services are reviewed for accuracies and to ensure they are in compliance with the terms and conditions of the contracts or purchase orders, as the case may be. The approvals of the Program Division Manager or Supervisor are required. The Sacramento County, Department of Finance (DOF), performs the acceptance for payments and issuance of checks. All sub-recipients of Federal or State funds are monitored according to grantor's requirements by our Program Staff, Contract Staff and in some cases review of their financial report are conducted periodically by the Sacramento County, Auditor Controller division.

- **SCPD:** The PD will utilize its Fiscal Division in coordination with the Operational Division to monitor the fiscal aspects of the program and ensure contractual guidelines are being met. The Fiscal Division will also coordinate with other county agencies involved in the Waiver program.

- **SDCHHSA:** falls into a an agency grouping known as Health and Human Services Agency so our fiscal monitoring will be done by a CWS team as well as a HHSA team.

- **SDCPD:** The fiscal aspects will be monitored through the use of Justice Benefits Institute for time studying, the Oracle system for the tracking of costs, and regular operational and fiscal meetings, as well as collaborative meetings with CWS to review and monitor the fiscal aspects.

- **SFCHHSA:** San Francisco is developing a data system and dashboard that provides basic information to leadership on outcomes and fiscal outlays related to the waiver activities.

- **SFJPD** will be using the State's template to track fiscal aspects of waiver implementation.

- **SCCSSA:** Social services Agency Financial management Services (FMS) is and will continue to monitor the fiscal aspects of the Waiver.

- **SCCPD:** the Fiscal Officer will monitor fiscal aspects of the Waiver. Fiscal Officer continues to work with DFCS fiscal team to monitor funding.

- **SCHHSA:** Collaboratively between program and fiscal staff on an ongoing basis informally and formally through the local Waiver Collaborative on a quarterly basis. Fiscal staff from the County's Human Services Department have lead responsibility for managing all fiscal aspects of the Well-Being Project.

- **SCPD:** Probation's fiscal staff are maintaining data on the number of youth/families participating in Wraparound as well as continuing to track placements and coding for any allowable claiming with this population. Probation and Human Services staff confer regularly and on a quarterly basis go over detailed budget data. This includes review of budget spreadsheets prepared by HSD.

The CDSS Teaming and Building an Accountable, Collaborative Governance Structure

Lead Agency, Partner Organizations and Collaborative Partners

The CDSS mission is to serve, aid, and protect needy and vulnerable children and adults in ways that strengthen and preserve families, encourage personal responsibility, and foster independence. California is a state supervised, county administered system. Consequently, it administers most programs in partnership with California's 58 counties and sovereign tribes. The CDSS is comprised of more than 4,000 employees located in 54 offices throughout the State and is the state agency responsible for:

- Ensuring efficient, accurate and equitable delivery of payments and benefits.
- Providing services that foster self-sufficiency and dignity.
- Providing social services to the elderly, blind, disabled and other children and adults.
- Licensing and regulating foster homes, group homes, residential care facilities, day care facilities, and preschools.
- Evaluating eligibility of applicants for federal and State programs.

The Children and family Services Division (CFSD) is responsible for ensuring the safety, permanency and well-being of California's children and providing oversight of CWS, which is the primary responsibility of the division. The CFSD collaborates with many stakeholders, including:

- Other State and local agencies
- Tribal representatives
- Foster/kinship caregivers
- Foster youth
- Foster care service providers
- Community-based organizations
- Judicial Council
- Researchers
- Child advocates
- Legislature

- Private foundations

The CDSS has an agreement and signed MOU with each of the nine Project counties. The purpose of the MOU is to define the Project stakeholders' roles and responsibilities. These include, but are not limited to:

- The CDSS will authorize the participating counties, pursuant to the Project, to participate in a five-year waiver Project.
- Allow the counties to expand federal foster care funds for children and families who were not previously eligible for Title IV-E, and to allow the counties to make payments for services under the Project that are not otherwise covered under Part E of Title IV of the Act.
- Specify the role and responsibilities of all parties, including participating counties, State and joint responsibilities.
- Specify the mechanisms/procedures to be used for claiming, collecting, reporting and tracking data on children and families served in the Project.

The State will conduct an evaluation of the waiver demonstration to test the hypothesis that the use of Title IV E funds to provide alternative services in the areas of prevention and family centered practice, as appropriate, will result in improved safety, permanency and well-being outcomes for children. The State is required to engage a third party to conduct an evaluation of the demonstration program. The evaluator shall be an independent organization that is not affiliated with state or local government, except that state universities may be engaged to conduct the evaluation. The evaluator shall be responsible for the development of the final evaluation design and will develop a research design and sampling plan; develop and execute the data collection and analysis plans; and prepare interim and final reports. The CDSS has announced an intent to award the contract for the Project's evaluation and anticipates that the contract will be executed and begin in September 2015.

Service Providers and Quality safety standards and practice requirements

The CDSS will, or where appropriate, ensure that CWS and PD case managers, supervisors and staff from contracted providers:

- Work closely with the evaluator to maintain the integrity of the evaluation.
- Develop and deliver services to meet the individual needs of each child and family.
- Ensure that any services provided to a child or family member at the time the demonstration ends will be completed.
- Ensure the confidentiality of the information collected on the children and families under the demonstration.

- Ensure that the rights of children and their families are protected, and that the safety of the children is a paramount concern of the demonstration project.
- Ensure that title IV-E eligibility determinations are made for all children who are involved in the demonstration project, throughout the life of the demonstration project, to ensure that eligible children retain their eligibility after the demonstration ends.
- Bear any costs that exceed the amount of Federal funds provided for the demonstration.
- Ensure that the State is organizationally and legally prepared for all aspects of demonstration project implementation.
- Ensure that a conventional title IV-E program is maintained for those children and families that are not designated to receive demonstration services, and that these children and families continue to receive services that are consistent with the "traditional services" available to such children and families in the State at the time the demonstration begins.
- Ensure that all applicable provisions of the Act apply to all demonstration components except for those provisions that are explicitly waived above.
- Ensure that children who are eligible for the Medicaid program will retain their eligibility for a full range of Medicaid services under the demonstration.
- Ensure that any "savings" resulting from the demonstration, whether they are savings to the Federal government, to the State, or to a county or to another jurisdiction within the State, will be used for the further provision of child welfare services. For the purposes of this provision, "savings" means any amount that would have been expended for conventional title IV-E purposes in the absence of this demonstration, or that could have been expended under title IV-B of the Act.
- Ensure that in each year throughout the duration of this demonstration the appropriate State officials and evaluators will attend and participate in an annual meeting of the Child Welfare Demonstration States in the Washington, D.C. area.

For the duration of the demonstration project, assure that the State shall provide health insurance coverage to any child with special needs (as determined under Sec. 473(C) of the Act) for whom there is in effect an adoption assistance agreement between the State and an adoptive parent or parents.

Implementation Teams

The CDSS implementation team includes the Children and Family Services Division (CFSD), Administration Division (AD), and Legal Division (LD). The team is comprised of staff from the Resources Development and Training Support Bureau (RDTSB), Fiscal

Forecasting and Policy Branch (FFPB), Fiscal Systems and Accounting Branch (FSAB), Research Services Branch (RSB), and Program Litigation Branch (PLB).

RDTSB

The RDTSB within CFSD is responsible for the full implementation and oversight of the Project. The RDTSB provides assistance, clarification, guidance and direction to ensure the correct implementation and operation of the project in accordance with the federal Terms and Conditions. History with the current project has shown that there is extensive turnover in the counties for CWS and Probation, which has created additional training and technical assistance needs around compliance with the federal mandates of the Project.

Responsibilities of these resources include:

- Provide policy interpretation, program monitoring to ensure counties are implementing interventions in accordance with their project plans, county technical assistance to ensure waiver plans are in alignment with federal Child and Family Services Review requirements and federal child abuse prevention grants, conduct site visits, participate in county Project meetings and training.

- Coordinate with state and county staff to prepare federal program reports, ensure compliance with federal Terms and Conditions and provide staffing support for the CDSS across the divisional Project implementation team.

- Participate and represent California in the federally mandated annual Child Welfare Demonstration Project meetings in Washington, D.C. along with a fiscal representative from the CDSS.

- Act as the Project management lead within the CDSS, liaison with the federal government and coordinate the Project deliverables across divisions within the CDSS, participating counties and stakeholders.

- Provide legislative analyses including preparing proposals, analyzing bills and recommending the CDSS positions, as well as preparing legislative testimonies and responses to questions from stakeholder agencies such as Department of Finance and the Legislative Analyst's Office.

- Provide federal legislative analysis and policy proposals around federal finance reform efforts.

The RDTSB is also responsible for the statewide implementation of the Katie A. Settlement Agreement. Without dedicated staffing for the Project, meeting court and federal requirements for both the Settlement Agreement and Waiver Project could be at risk.

The Administration Division is responsible for budget development, cost analysis, fiscal analysis of legislation, review and analysis of county expenditure reports, cost claiming

policy, county technical assistance, county fiscal monitoring, system development of county claims, audit and payments, state and federal financial reporting, federal data reporting and evaluation contract coordination and oversight.

FFPB

The FFPB is the lead organization for the coordination of all County Expense Claim and County Assistance Claim related issues and on-site fiscal monitoring related to the Project and the county welfare and probation costs reported on these claims. Programmatic and budget changes in the CWS program have and will continue to affect the Project. The FFPB will continue to be the fiscal liaison to CWS and PDs for all costs reported on these claims, as well as other state departments regarding fiscal claiming issues related to the Project.

FSAB

The FSAB is solely responsible for the audit and payment of all claims submitted by the counties for all local assistance activity, including administrative costs and assistance payments. The federal reporting requirements for the waiver project are significantly different from for any other federally funded program. In addition, the waiver requires FSAB to differentiate between waiver and non-waiver expenditures within the same program code, closely monitor the spending between the county CWS and PDs, and must also ensure that all waiver counties stay within the federal allocations. As a result, the current waiver project is a labor-intensive manual process.

A total of 17 separate reports are prepared for each county for each quarter, including adjustment quarters. For each fiscal year, 612 reports are produced for the nine counties currently participating in the IV-E Waiver Project starting October 1, 2014. These reports are then used to determine the waiver expenditures and the non-waiver expenditures for each county, as well as to produce the federal reports. The complexity and level of effort to complete the financial reports for the waiver project is the same for each county, regardless of size, as it is a function of the number of program codes and data elements that must be reviewed and keyed into the spreadsheets. Each program code has up to eight different financial data elements, including federal, state, county and health (Medi-Cal reimbursements from the Department of Health Care Services) funding for staff development, in addition to the federal, state, county and health funding for all other activities.

RSB

The RSB staff acts as the CDSS lead in the oversight of federal requirements for evaluation of the Project. The RSB provides the CDSS, as well as external stakeholders, with accurate and timely program data. The RSB provides technically advanced program evaluation research and analysis used for budgetary projections, assessment of program policies, federal reporting and evaluation of outcomes. The RSB is comprised of the Child Welfare Data Analysis Bureau (CWDAB), the Data Systems and Survey Design Bureau (DSSDB), the Federal Data Reporting and

Analysis Bureau (FDRAB) and the Performance Monitoring and Research Bureau (PMRB), which includes the staff members who will oversee the Title IV-E Waiver Demonstration Evaluation contract.

The PMRB fosters, oversees and interprets social welfare research and evaluation studies to inform and support the CDSS program and public policy decision-making. The PMRB also drafts and monitors research and data-sharing contracts and agreements. Additionally, the PMRB is responsible for performing oversight and field monitoring of county procedures and validation of case documentation for TANF recipients' work participation hours at the county level.

PLB

Provides legal consultation and support to the Project. Legal Division staff review and negotiations of revised federal Project Terms and Conditions and the drafting of a new state/county MOU for an increased number of counties. Review issues precipitated by contextual changes, such as legislation and lawsuits and assess their potential impact on the Project and also review documents related to the operation of the Project including, but not exclusively for contracts, MOUs, All County Information Notices, All County Letters, County Fiscal Letters and correspondence. Legal Division staff also provides legal advice when there are new requests by intent counties for opinions on the applicability of current and new laws related to the Project and on requests for waivers from specific statutes and the CDSS regulations, and review and provide assessment of the impact on the Project from proposed legislation and fiscal issues.

The CDSS Project Team Members and Roles

Project Team Member	Project Team Role	Project Area
Pete Cervinka	Project Sponsor	CDSS
Greg Rose	Project Sponsor	CFSD
Kevin Gaines	Project Sponsor	CFSD
Mary Sheppard	Project Lead	RDTSB
Cathleen Kloose	Project Manager	RDTSB
Aaron Tobler	Subject Matter Expert	RDTSB
Migdalia Wade	Subject Matter Expert	RDTSB
Trang Le	Subject Matter Expert	RDTSB
Salena Chow (Acting)	Operating Manager	FFPB
Donna Richardson	Operating Manager	FFPB
Shauna Gilliam	Subject Matter Expert	FFPB
Elisa Tsujihara	Operating Manager	FFPB
Bill Mullinax	Resource Manager	FFPB
Beau Baker	Subject Matter Expert	FFPB
Shalin Cooney	Subject Matter Expert	FFPB

Didi Okamoto	Operating Manager	FSAB
Eric Lau	Operating Manager	FSAB
Georgette Awad	Resource Manager	FSAB
Rich Diep	Subject Matter Expert	FSAB
Amanda Pace	Subject Matter Expert	FSAB
Svetlana Glushku	Subject Matter Expert	FSAB
Alex Formanyuk	Subject Matter Expert	FSAB
Salena Chow	Operating Manager	FMCB
Robert Gonzalez	Resource Manager	FMCB
Manjit Bhatia	Subject Matter Expert	FMCB
Natalie Villanueva	Resource Manager	FMCB
Ahktar Khan	Operating Manager	RSB
Vicky Lovell	Resource Manager	RSB
JaRita Booker	Subject Matter Expert	RSB
Sue Diedrich	Operating Manager	PLB
Fran Bremer	Resource Manager	PLB

Management Procedures, Positions and Functions

Please see previous section.

SOP/CPM and Wraparound Monitoring

The CDSS is developing SOP/CPM and Wraparound monitoring tools. The SOP/CPM monitoring tool will be informed by SOP monitoring resources developed by the UC Davis, Center for Human Services. Wraparound monitoring tools will be informed by the Wraparound Fidelity Index. Monitoring tools will also reflect the SOP/CPM and Wraparound practice models and glossaries vetted by participating counties. The CDSS is also exploring if and how the on-site Review Tool can be utilized in capturing performance SOP/CPM performance data.

Fiscal Monitoring

The CDSS has developed and is currently refining, its monitoring protocols and tools for participating counties. The CDSS plans to visit all nine participating counties within the next twelve months (and annually thereafter) to conduct comprehensive fiscal monitoring of all expenditures claimed under the Project. The monitoring process will entail a desk review of Project counties' CEC and CA 800 claims to identify all Project expenditures within the claims. The CDSS will then pull a random sampling of all identified Project claims, and will request, in advance of the CDSS' onsite review, that all back-up documentation for each claim identified in the random sampling be made available for review.

Upon arrival, the CDSS will hold an entrance conference with each participating county's CWD and CPD in order to introduce the CDSS staff and fully explain the monitoring process. The CDSS will then look at each randomly sampled claim and verify that the documentation provided supports the expenditures claimed. This will involve verifying the following:

- Supporting documentation of the payment reported matches the amount of the reported expenditure;
- Expenditures are reported to the correct Program Code;
- The expenses incurred are within the Project period;
- The expenses incurred are approved expenses; and
- The documentation supports the payment being reasonable and appropriate.

The CDSS will also review county time study procedures and documents, as well as conduct interviews with both CWD and CPD staff to ensure that staff understands the time study process and purpose. The CDSS will also review county contracts with service providers to ensure that services rendered support the cost of the billed and reported services being charged to the waiver intervention(s).

Upon concluding the county review, the CDSS will hold an exit conference with both the CWD and CPD to discuss any identified irregularities within their respective claims/supporting documentation. The CDSS will subsequently develop a full written report of our observations as a result of the review and will submit this report to the county for response, which shall include a plan to correct any deficiencies identified in the report.

It should be noted that the CDSS has conducted three onsite visits to date in an effort to learn county claiming systems/processes. The CDSS performed a "mock" review in San Diego in July of 2015 to further refine and test the CDSS' monitoring tools and protocols prior to full monitoring implementation, scheduled to begin in September of 2015.

In addition to the CDSS' planned annual onsite fiscal monitoring of all participating counties, the CDSS will also continue to perform desk reviews of county claims on a regular and ongoing basis. This will involve reviewing both the CEC and CA 800 in order to identify any irregularities in county claims. The CDSS will also perform a quarterly review of the Quarterly Fiscal Supplemental Form, which the CDSS has required all counties to complete and submit on a quarterly basis. This form further details county expenditures per identified intervention(s) and tracks the counties' capped allocation.

Further, the CDSS plans to share with all participating counties, via a quarterly all-county fiscal conference call, common observations resulting from the CDSS' onsite monitoring activities. This will allow the CDSS to provide instructions so that counties

may correct any common claiming deficiencies as quickly as possible and prior to the CDSS conducting an onsite review.

Lead agency, partner organizations and collaborative partner roles, responsibilities and financial commitments

Please see information above.

Quality and safety standards, as well as practice requirements to be incorporated in any agreements with service providers

This will be incorporated at the county level based on their procurement processes.

Identification of implementation teams, including their purpose, core features, functions and communication protocols

Please see information above.

Identification and description of management procedures, positions and functions

Please see information above.

Processes for monitoring implementation progress

Please see information above.

The CDSS has established a California Well-Being Project Monitoring Unit within the Fiscal Policy Bureau in the Fiscal Forecasting and Policy Branch. The unit's primary responsibilities will be to:

- Provide technical assistance and training to counties on the appropriate use of Title IV-E funds;
- Ensure counties are appropriately claiming expenditures related to the Project;
- Conduct on-site fiscal monitoring of participating counties to ensure that participating counties are appropriately documenting Project expenditures in accordance with the Title IV-E Waiver Terms and Conditions;
- Ensure effective management of Project expenditures; and
- Develop Quality Improvement Plans based on results of county reviews.

The CDSS is currently conducting initial onsite meetings with counties and is in the process of establishing effective protocols for county fiscal monitoring. Additionally, the CDSS will require participating counties to submit Quarterly Fiscal Supplemental Forms, which will provide further, specific details of county expenditures as the relate to the

identified interventions. The CDSS has established a Specialist position to analyze and evaluate this form and the data contained within the form.

Communication plan and strategies

The CDSS documents (All County Letters, All County Information Notices, County Fiscal Letters, Individual County Letters), the CDSS Webpage, Waiver email address established, conference calls and email communications, press releases and presentations, County Forums, Webinars, Convenings, Monitoring, Site Visits, Training and Technical Assistance, County Welfare Directors Association (CWDA) and CPOC monthly meetings. Additional webinars, convenings, site visits, and technical assistance visits as well as conference calls may be added as needed.

The California Well-Being Project Monitoring Unit in the Fiscal Policy Bureau developed and distributed an initial implementing County Fiscal Letter (CFL) (http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2014-15/14-15_22.pdf). Additionally, the unit conducted onsite technical assistance meetings with all participating counties to explain the information contained in the implementing CFL and to provide additional implementation instructions. The Financial Management and Contracts Branch (FMCB) also developed and distributed the FY 2014-15 Title IV-E California Well Being Project Allocation CFL (http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2014-15/14-15_36.pdf), http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2014-15/14-15_36E.pdf, http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/cfl/2014-15/14-15_36EII.pdf relaying the individual county allocations for the Project. There were three additional CFLs developed to address additional questions and procedural issues that have been identified subsequent to the implementation of the project. The CFLs were for overpayments http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2014-15/14-15_62.pdf, updated claiming instructions http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2015-16/15-16_02.pdf and questions and answers for the Project http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2015-16/15-16_10.pdf. The CFLs are sent to all County CWS and PDs, in addition to being posted on the CDSS website. Further, the unit conducts scheduled quarterly fiscal conference calls, and holds additional conference calls with all participating counties as needed or as requested by counties. The unit also maintains regular contact with each individual participating county to address county-specific concerns/questions. The unit also maintains a list of Frequently Asked Questions (FAQs) to share with counties. The unit will also be conducting regular, onsite visits with all participating counties to provide technical assistance and to monitor fiscal processes.

Quality Assurance

California operates a state-supervised/county administered CWS system. Under this system, California counties administer their CWS programs and the CDSS monitors and provides support through regulatory oversight, administration, and the development of program policies and laws. The standards for quality and safety, and practice

requirements as specified in federal and state law, state regulations, and the CDSS policy and procedures that counties are required to meet are identified below. These same standards and requirements are identified by the state to be incorporated into any agreements with county level public and private providers that would be providing support and services to children and families under the waiver Project.

- Federal laws and policy regarding child welfare.
- California's state statutes and Welfare and Institutions Codes regarding child abuse, substance abuse, mental health, and education requirements.
- Child Welfare System Improvement and Accountability Act of 2001 (AB 636) requirements.
- The CDSS Manual of Policy and Procedures issued to the local County Welfare Departments regarding child welfare organizations and management requirements.
- All County Letters and County Fiscal Letters issued to County Welfare Departments to inform or clarify mandated requirements regarding safety, well-being, and practice requirements.
- County Expense Claim and Assistance Claim Forms.
- Federal cost principles (A-87 and the new Supercircular contained in 2 Code of Federal Regulations 200).
- TA Calls – Monthly Individual Calls and Quarterly Calls for all waiver counties (Program & Fiscal separately)
- Training – Ongoing training will be provided, as needed.
- Monitoring - Fiscal Technical Assistance on-site visits November 2014 through January 2015. Fiscal on-site visits will continue to be available, as needed. Program and Evaluation on-site visits are projected to be scheduled April through July 2015 and Fiscal Monitoring on-site visit dates will be TBA.
- Annual Convening – To be held in the month of September.

Evaluation Schedule

	FY 2014-15										**FY 2015-16**
Component	**Sep 14**	**Oct 14**	**Nov 14**	**Dec 14**	**Jan 15**	**Feb 15**	**Mar 15**	**Apr 15**	**May 15**	**Jun 15**	**First Qtr.**
Quarter of the waiver		1	1	1	2	2	2	3	3	3	4
Terms and Conditions	Signed 9/30/14										

Waiver		Begins 10/1/14									
EVALUATION CONTRACT (dates are tentative)		RFP to ACF for review 10/28/14		RFP to the CDSS Contracts Bureau				RFP posted to Bid Sync		Bidders vetted; contract drafted	Contract to the CDSS Contracts Bureau; contract executed; evaluation begins
Deliverables due from contractor											
Attend orientation with the CDSS and counties											Within five days of contract execution
Submit summary of orientation meeting											Within five days of meeting
Monthly call								x	x	x	x
Quarterly progress report											x
Quarterly meeting in Sacramento											x
Semiannual report per ACF											
Annual ACF waiver meeting											x (tent.)
Submit evaluation plan to ACF											x (90 days from contract exec.)

Phase-Down Plan

As stated in the federal Waiver Terms and Conditions, participating counties will be required to determine Title IV-E eligibility during the five-year Project based on current federal regulations. Therefore, upon the conclusion of the waiver Project, this eligibility determination will be the documentation to transition from the capped allocation to the current federal program requirements for Title IV-E reimbursement. CWS and PD case managers, supervisors, and staff from contracted providers will also ensure children retain their eligibility after the demonstration ends. County responsibilities include ensuring services being provided to a child or family member at the time of the Project ends will be completed and/or the case plan for children and their families are adjusted if necessary for the post-demonstration period.

The State of California has a state supervised, county administered CWS system. Boards of County Supervisors and administrators within each local agency have the authority to add the implementation of specific interventions within their respective CWS. In the absence of the waiver, the CDSS would continue to provide technical assistance and continue supporting the CQI process by monitoring CSA and SIP activities, and improve State performance through the C-CFSR.

The following is a synopsis of county input regarding SOP/CPM and Wraparound implementation absent of the Project:

- **ACSSA:** Alameda DCFS views SOP as a shift in the practice of child welfare, and a change in how Child Welfare Workers interact with families, therefore anticipates the core tenants of SOP will continue absent the Waiver. Any services established under the Waiver will be evaluated by DCFS, and decisions to eliminate or sustain such services will be based on the results of internal evaluations. Alameda Probation has built in a fiscal sustainability component where funds to support the cost of Wraparound are maintained in spite of limited capacity.

- **Butte County:** Butte County intends to continue the Enhanced SOP activities implemented after the Waiver has ended by continuing the activities, expectations, and policies implemented under the Waiver. The anticipated cost savings and reduced number of foster care entries expected to be achieved during the Waiver will allow for continued service delivery and/or on-going reinvestments in programs designed for the betterment of children and their families in our community. It is expected the Wraparound program will result in fewer youth further penetrating the juvenile justice system. This should reduce out of home placement and other intensive services that are currently being funded through other resources. Those resources have the potential to shift to fund Wraparound should it be a proven intervention with the current target population.

- **Lake County:** CWS: Lake County is committed to the SOP model. They have been implementing SOP activities since 2010. The Waiver now provides extra resources to enhance and expand the practice, formalize policy and procedure and monitor the outcomes. By the end of the Waiver SOP will be fully imbedded and sustained within our organizational structure. Probation: During the next 4 years, Lake County hopes that they gain the experience and knowledge to understand how to implement their own programming and to see our service provider will continue seeking different sources of funding.

- **Los Angeles County:** CPM will remain the practice for DCFS absent the waiver. With the implementation of CPM overall caseloads shall decrease, out-of-home care population shall decrease and overall outcomes shall improve. The decrease in caseloads shall allow DCFS to maintain its level of staffing that occurred with the waiver. Los Angeles County is still operating under the Katie A settlement agreement. We will maintain implementation of Wraparound by leveraging other county or mental-health related funds.

- **Sacramento County:** Sacramento CWS will define a sustainability plan as it moves forward with implementation. Sacramento County is committed to the safety, permanency, and well-being of families, children and youth served by Probation. Accordingly, Sacramento would not terminate any of these initiatives without first considering the continued well-being of the population served. The

Department will develop a sound sustainability plan. Sacramento's Title IV-E Well-Being Project Steering Committee will designate a Sustainability Subcommittee during the first project year in order to identify alternative sources of funding; leverage existing contracts, services, and resources; recommend organizational and programmatic shifts needed to continue provision of services; and develop/implement a sustainability work plan. The sustainability work plan will include a contingency process for assessing the needs of families, and youth linking them to appropriate community-based services, in the event sustainability efforts are not successful.

- **San Diego County:** CWS: Since San Diego County implemented SOP prior to the waiver, they have had an existing commitment to SOP and will continue this absent the waiver. Probation: San Diego, as a county, is committed to the use of Wraparound. They will continue to support contracts and our collaborative relationships to continue with this service provision. They will continue to utilize existing funding streams such as Medi-Cal.

- **San Francisco County:** SF is adopting the CA Core Practice Model independent of the waiver. The similar principles will carry over beyond the waiver period. Depending on evaluation results, SFJPD would negotiate with the County executive to determine the feasibility of continuing the Wraparound expansion under the Waiver.

- **Santa Clara County:** SCC already has elements of SOP that are part of the CFPM, which would continue, even in the absence of the Waiver. Santa Clara County's funding structure consists of federal, state, and local general funds. In the event the Title IV-E Waiver demonstration period concludes, it is hoped that funding will be identified for continuity of services, which may include County general funds.

- **Sonoma County:** SOP is a practice model. When it is integrated into the policies and procedures of standard child welfare programming, it will be considered part of everyday social work practice. Since Wraparound was a pre-existing service prior to the waiver, Probation anticipates continuing to provide this intervention for youth at imminent risk of home removal, absent the waiver, through SB 163 funds. Probation, in conjunction with the Human Services Department, would seek requisite funding from County General Funds assuming implementation of the waiver project yields favorable results. This would address service needs of the 'high needs' population which are not eligible for SB 163.

In addition, if a county determines that it must terminate participation in the waiver project and exercises the opt-out election, as specified in the State/County MOU, the county must successfully implement a transition strategy from the capped allocation to the current federal program requirements for Title IV-E reimbursement. The CDSS approved five-year County Implementation Plan specifies each county's transition plan ensuring services being provided to a child or family member at the time the Project ends will be completed, as needed, for the post-waiver period.

TRAINING AND TECHNICAL ASSISTANCE ASSESSMENT

The CDSS will have SOP/CPM and Wraparound claiming training before implementation and throughout the project, and has issued a County Fiscal Letter detailing claiming procedures for counties on core interventions. Additionally, the CDSS has provided onsite technical assistance trainings with all participating counties. These trainings consisted of a detailed explanation of allowable (claimable) activities under the Project, including SOP/CPM, and Wraparound services. Additionally, through the onsite technical assistance meetings and regularly scheduled conference calls with participating counties, the CDSS has identified other county-specific needs and has developed a comprehensive, ongoing list of Questions and Answers, which was released in a County Fiscal Letter http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2015-16/15-16_10.pdf. In addition, new claiming instructions were released http://www.dss.cahwnet.gov/lettersnotices/EntRes/getinfo/cfl/2015-16/15-16_02.pdf. Lastly, the CDSS is in the process of developing protocols for regular onsite monitoring/technical assistance. The CDSS will review all county claiming documents and processes to ensure proper claiming of Project funds, and will provide further training and technical assistance as a result of findings.

Furthermore, the Children's Bureau (CB) has devoted resources to supporting implementation of title IV-E waiver demonstration projects through the Capacity Building Center for States' Capacity Building Collaborative (CBC). The CBC includes brief and intensive tailored services and is available to the CDSS and participating counties.

The CDSS is planning to look at SOP/CPM case reviews currently in development and will incorporate a finalized SOP/CPM and Wraparound models to support the evaluation process.

ANTICIPATED MAJOR BARRIERS AND RISK MANAGEMENT STRATEGIES

Contracting delays at the county level, federal legislative mandates with large fiscal impacts and any impending litigation similar to that experienced in the first part of the project could negatively impact counties participating in the project. (The reference of legislative mandates refers to the 32 percent rate increase to group homes. There were also increases to other placement settings that those counties participating in the waiver did not receive any increases in the federal funds). The state is currently working with each county to support any possible changes that could be made to expedite procurement processes. The CDSS is researching to draft a Director's Waiver requesting the extension of contract terms beyond the current two-year limit, as the Project will be implemented throughout five years. This exemption would support participating counties, as they would not be required to submit requests to renew their contract extensions. The State anticipates finalizing the Director's Waiver in January 2016. In addition, the state will continue to monitor federal legislation and litigation to identify the fiscal impact and if it meets the threshold as stated within the executed Terms and Conditions.

PROGRAM IMPROVEMENT POLICIES

Not applicable under new waiver authority.

QUARTERLY UPDATES

The CDSS will update on a quarterly basis.

10/30/14-1/30/15

Internal Steps

- Established internal communication channels including a Project Team meeting schedule and finalization of SharePoint naming conventions to share project-related documents and work plans.
- Established a Project Team Work Breakdown Schedule addressing deliverables and tasks for the project.
- California Well-Being Project overview: the CDSS Employee convening introducing the project, objective, goals, methodology and project team members to interdepartmental bureaus.
- Developed an RFP to acquire a third-party evaluator for the project.
- Developed a quarterly newsletter to engage and inform public of the project.

Technical Assistance

- Provided guidance template document outlining project intervention requirements and providing format accommodating year-to-year projections needed in each County Plan.
- Webinar: CFL presentation, eligibility criteria, claiming procedures, the QFSF, and Wraparound claiming and population.
- Held bi-monthly conference call with Project counties' PDs to address questions and concerns unique to their function.
- Held individual conference calls with CWS and Probation representatives from participating counties to address questions and items of concern regarding program implementation.
- Assisted counties in developing CWS and PD interventions.
- Held convening with CWS departments to discuss SOP/CPM outcomes and project evaluation.

- Established a committee comprised of CWS and the CDSS representatives to finalize agreement on SOP/CPM outcomes.

1/30/15-5/30/15

Internal Steps

- Drafted second project newsletter.
- Provided project briefing to internal project sponsor.
- Updated IDIR as needed.
- Held monthly Project Team meetings.

Technical Assistance:

- Provided a QFSF template along with instructions to assist both CWS and PDs.
- Provided individualized assistance and responses to inquiries from county representatives.
- Held monthly conference call with participating PDs to address questions and concerns unique to their function. The February conference call was centered on the QFSF as DSS Fiscal answered specific questions regarding filling out the QFSF.
- Held monthly individual conference calls with CWS and Probation representatives from participating counties to address questions and items of concern regarding program implementation.
- Held convening with PDs to discuss Wraparound outcomes and project evaluation.
- Held convening/webinar with CWS departments and finalized SOP/CPM Model Critical Elements and Glossary.
- Held call with PDs and came to consensus on content of Wraparound Critical Elements document and Glossary.
- Held Fiscal Q&A session and call with CWS and Probation representatives to address fiscal related questions.

6/01/15-9/22/15

Internal Steps

- Project unit has partnered with Casey and I.E. Communications to develop a comprehensive communications plan.
- Provided information to IE Communications and released third newsletter.
- Provided the third quarter project briefing to internal project sponsor.
- Updated IDIR as requested.
- Held monthly Project Team meetings.
- Held Evaluation Steering Committee calls with county partners to discuss statewide evaluation.
- Project unit continues to hold monthly county specific information sessions with Outcomes and Accountability, Office of Child Abuse Prevention, and Fiscal Policy Bureau team members.
- Fiscal team conducted site visits to develop an informed fiscal monitoring plan and schedule.
- Fiscal team developed the fiscal monitoring plan and schedule.
- Research team reviewed Request for Funding Proposals, selected a third party evaluator and will execute the contract award soon.
- Project Managers from Program, Fiscal Policy and Evaluation attended the 17th Annual Child Welfare Waiver Demonstration Projects Meeting.

Technical Assistance:

- The CDSS and Project counties convened with Children's Bureau (CB) and James Bell Associates (JBA) to discuss the Theory of Change on June 4, and June 5, 2015.
- Project counties received information regarding available Technical Assistance through the Capacity Building Collaborative (CBC).
- The CDSS held conference calls with CBC and ACF and received an overview of the Capacity Building Center for States.
- Provided individualized assistance and responses to inquiries from county representatives.
- Forwarded convening and IDIR notes to county partners and requested input as needed.

- Held monthly conference call with participating PDs to address questions and concerns regarding Project implementation.

- Held monthly individual conference calls with CWS and Probation representatives from participating counties to address questions and items of concern regarding program implementation.

- CWS and PD representatives from San Diego and Sacramento counties attended the 17th Annual Child Welfare Waiver Demonstration Projects Meeting.

- Formed the SOP Peer Learning Collaborative, a platform where Project counties will share information regarding implementation stages, updates, and areas for continued growth.

- Planning and implementing a series of trainings for Project PDs.

ATTACHMENT #1

Methodology for Disproportionality and Disparity Indices

These reports compute ethnic Disproportionality and Disparity Indices based on population projections from the California Department of Finance. Please refer to the Population Data Index methodology for information on these data: http://cssr.berkeley.edu/cwscmsreports/methodologies/default.aspx?report=Population

Disproportionality is the degree to which groups of children are present in the child welfare system at rates that are higher or lower than their presence in the general population. Although we compute a Disproportionality Metric (DM) for descriptive purposes, we do not recommend that it be used as a measure for comparing racial representation. The Disproportionality Metric is problematic due to its mathematical construction (which imposes a theoretical maximum based on the size of the minority group population). (For additional details, please see Shaw, T. V., Putnam-Hornstein, E., Magruder, J., and Needell, B. (2008). *Measuring racial disparity in child welfare. Child Welfare, 87(2), 23-36.)*

Instead, we recommend using a relative risk or relative rate ratio, which we refer to as a Disparity Index (DI). Disparity is used to refer to the lack of equity between groups and derived in one of two ways: either by computing a ratio based on the rates per 1,000 for two groups or by computing a ratio based on the disproportionality metrics for two groups.

These reports are based on the population of children who had child welfare system contact during a given year while between the ages of zero and 17. Indices are stratified at the level of child welfare contact: Allegations, Substantiated Allegations, Entries, and In Care. Allegations are unduplicated counts of children for whom a child maltreatment allegation was received during the analysis year. Substantiated Allegations are unduplicated counts of children with a substantiated case during the analysis year. Entries to care are based on the count of unique children who entered care (both entries and re-entries) without restriction on the days spent in care. Entries and In Care Rates are restricted to cases supervised by a Child Welfare Agency.

Children with missing county assignment are included in the statewide calculation. Given the methods outlined above, county values may not sum to statewide total.

Disparity is computed for each ethnicity as it compares with every other ethnicity (i.e., Black vs. White, Black vs. Hispanic, etc.). In addition, disparity is computed for each ethnicity as it compares to “all others”, or the population of children who are not of the specified ethnicity. Please note that these Indices should be interpreted cautiously, especially at the county level. As is the case whenever a rate is computed based on a small population, large fluctuations and margins of error are common. For this reason, we have not included “Native American” as a comparison group in these reports. The population of Native American children in California is sufficiently small such that

computed rates are quite inflated. If an examination of this population is desired, the Disparity Matrix Tool can be downloaded and used to compute rates for this and any other groups of interest.

Please note there are slight discrepancies for a few time periods between frequencies in this report and those in allegation, substantiation, entries, and in-care reports found elsewhere on this site.

Note: Cells containing a period (".") represent a value of zero. In cells representing quotients, a period may also indicate the indeterminate form 0/0.

Disparity Indices are broken out by age and ethnicity.

ATTACHMENT #2

California Welfare and Institutions Code (WIC), Section 16002

16002. (a) (1) It is the intent of the Legislature to maintain the continuity of the family unit, and ensure the preservation and strengthening of the child's family ties by ensuring that when siblings have been removed from their home, either as a group on one occurrence or individually on separate occurrences, the siblings will be placed in foster care together, unless it has been determined that placement together is contrary to the safety or well-being of any sibling. The Legislature recognizes that in order to ensure the placement of a sibling group in the same foster care placement, placement resources need to be expanded.

(2) It is also the intent of the Legislature to preserve and strengthen a child's sibling relationship so that when a child has been removed from his or her home and he or she has a sibling or siblings who remain in the custody of a mutual parent subject to the court's jurisdiction, the court has the authority to develop a visitation plan for the siblings, unless it has been determined that visitation is contrary to the safety or well-being of any sibling.

(b) The responsible local agency shall make a diligent effort in all out-of-home placements of dependent children and wards in foster care, including those with relatives, to place siblings together in the same placement, and to develop and maintain sibling relationships. If siblings are not placed together in the same home, the social worker or PO shall explain why the siblings are not placed together and what efforts he or she is making to place the siblings together or why making those efforts would be contrary to the safety and well-being of any of the siblings. When placement of siblings together in the same home is not possible, a diligent effort shall be made, and a case plan prepared, to provide for ongoing and frequent interaction among siblings until family reunification is achieved, or, if parental rights are terminated, as part of developing the permanent plan for the child. If the court determines by clear and convincing evidence that sibling interaction is contrary to the safety and well-being of any of the siblings, the reasons for the determination shall be noted in the court order, and interaction shall be suspended.

(c) When there has been a judicial suspension of sibling interaction, the reasons for the suspension shall be reviewed at each periodic review hearing pursuant to Section 366 or 727.3. In order for the suspension to continue, the court shall make a renewed finding that sibling interaction is contrary to the safety or well-being of either child. When the court determines that sibling interaction can be safely resumed, that determination shall be noted in the court order and the case plan shall be revised to provide for sibling interaction.

(d) If the case plan for the child has provisions for sibling interaction, the child, or his or her parent or legal guardian, shall have the right to comment on those provisions. If a person wishes to assert a sibling relationship with a dependent child or ward, he or she may file a petition in the juvenile court having jurisdiction over the dependent child

pursuant to subdivision (b) of Section 388 or the ward in foster care pursuant to Section 778.

(e) If parental rights are terminated and the court orders a dependent child or ward to be placed for adoption, the county adoption agency or the State Department of Social Services shall take all of the following steps to facilitate ongoing sibling contact, except in those cases provided in subdivision (b) where the court determines by clear and convincing evidence that sibling interaction is contrary to the safety or well-being of the child:

(1) Include in training provided to prospective adoptive parents' information about the importance of sibling relationships to the adopted child and counseling on methods for maintaining sibling relationships.

(2) Provide prospective adoptive parents with information about siblings of the child, except the address where the siblings of the children reside. However, this address may be disclosed by court order for good cause shown.

(3) Encourage prospective adoptive parents to make a plan for facilitating post adoptive contact between the child who is the subject of a petition for adoption and any siblings of this child.

(f) Information regarding sibling interaction, contact, or visitation that has been authorized or ordered by the court shall be provided to the foster parent, relative caretaker, or legal guardian of the child as soon as possible after the court order is made, in order to facilitate the interaction, contact, or visitation.

(g) As used in this section, "sibling" means a child related to another person by blood, adoption, or affinity through a common legal or biological parent.

(h) The court documentation on sibling placements required under this section shall not require the modification of existing court order forms until the Child Welfare Services Case Management System is implemented on a statewide basis.

16002.5. It is the intent of the Legislature to maintain the continuity of the family unit and to support and preserve families headed by minor parents and nonminor dependent parents who are themselves under the jurisdiction of the juvenile court by ensuring that minor parents and nonminor dependent parents and their children are placed together in as family-like a setting as possible, unless it has been determined that placement together poses a risk to the child. It is also the intent of the Legislature to ensure that complete and accurate data on parenting minor and nonminor dependents is collected, and that the State Department of Social Services shall ensure that the following information is publicly available on a quarterly basis by county about parenting minor and nonminor dependents: total number of parenting minor and nonminor dependents in each county, their age, their ethnic group, their placement type, their time in care, the number of children they have, and whether their children are court dependents.

(a) To the greatest extent possible, minor parents and nonminor dependent parents and their children shall be provided with access to existing services for which they may be eligible, that are specifically targeted at supporting, maintaining, and developing both the parent-child bond and the dependent parent's ability to provide a permanent and safe home for the child. Examples of these services may include, but are not limited to, childcare, parenting classes, child development classes, and frequent visitation.

(b) Child welfare agencies may provide minor parents and nonminor dependent parents with access to social workers or resource specialists who have received training on the needs of teenage parents and available resources, including, but not limited to, maternal and child health programs, child care, and child development classes. Child welfare agencies are encouraged to update the case plans for pregnant and parenting dependents within 60 calendar days of the date the agency is informed of a pregnancy. When updating the case plan, child welfare agencies may hold a specialized conference to assist pregnant or parenting foster youth and nonminor dependents with planning for healthy parenting and identifying appropriate resources and services, and to inform the case plan. The specialized conference shall include the pregnant or parenting minor or nonminor dependent, family members, and other supportive adults, and the specially trained social worker or resource specialist. The specialized conference may include other individuals, including, but not limited to, a public health nurse, a community health worker, or other personnel with a comprehensive knowledge of available maternal and child resources, including public benefit programs. Participation in the specialized conference shall be voluntary on the part of the foster youth or nonminor dependent and assistance in identifying and accessing resources shall not be dependent on participation in the conference.

(c) The minor parents and nonminor dependent parents shall be given the ability to attend school, complete homework, and participate in age and developmentally appropriate activities unrelated to and separate from parenting.

(d) Child welfare agencies, local educational agencies, and childcare resource and referral agencies may make reasonable and coordinated efforts to ensure that minor parents and nonminor dependent parents who have not completed high school have access to school programs that provide onsite or coordinated childcare.

(e) Foster care placements for minor parents and nonminor dependent parents and their children shall demonstrate a willingness and ability to provide support and assistance to minor parents and nonminor dependent parents and their children.

(f) Contact between the child, the custodial parent, and the noncustodial parent shall be facilitated if that contact is found to be in the best interest of the child.

(g) For the purpose of this section, "child" refers to the child born to the minor parent.

(h) For the purpose of this section, "minor parent" refers to a dependent child who is also a parent.

(i) For the purpose of this section, "nonminor dependent parent" refers to a nonminor as described in subdivision (v) of Section 11400 who also is a parent.

ATTACHMENT #3

Safety Organized Practice/Core Practice Model Critical Elements Glossary

Appreciative Inquiry: A questioning approach to organizational, team, and individual change drawing on the core belief that positive outcomes are achieved when focusing the most attention on positive works, qualities, and habits.

Behaviorally Based Case Plans: Case plans emphasizing detailed actions focused on behaviors that increase child safety, agreed upon by the network of support.

California Partners for Permanency Practice Behaviors: The integrated standards of practice, the guidelines that govern how systems, organizations, agencies, communities and tribes work together to improve outcomes for children and youth in foster care.

Child and Family Team Meetings: A meeting to establish, plan, and communicate goals established by the Child and Family Team, supporting the premise that no single individual, agency or service provider works independently but rather as part of the team for decision-making. Meetings held by a group of people who are involved with the child and family to achieve positive outcomes of safety, permanency, and well-being.

Coaching: The process by which the coach creates structured, focused interaction and uses appropriate strategies, tools, and techniques to promote desirable and sustainable change for the benefit of the learner, in turn making a positive impact on the organization and families.

Cultural Awareness: A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among providers, that enables that system, agency or those providers to work effectively in cross-cultural situations with awareness of and respect for the diverse experiences, customs and preferences of individuals and groups.

Danger Statements: Detailed, short, behaviorally based statements using non-judgmental language and describing specific worries for the future safety of children while with their caregiver. Danger statements describe the potential caregiver's behavior and the potential future impact on the child.

Family Meetings: Meetings supporting the on-going involvement of families in decision-making and case planning.

Focus on Trauma: Being trauma-sensitive, acknowledging the many types and layers of trauma a child and/or family may have experienced (historically and culturally; past experiences of violence, loss, abuse, removal, etc.; recent trauma/loss experiences of child).

Harm Statements: Detailed, short, behaviorally based statements using non-judgmental language and describing past actions/inaction by the caregiver that have

hurt the child either physically, sexually, developmentally or emotionally. Harm statements describe the caregiver's behavior and the impact on the child.

Network of Support/Family Connections: A group comprised of family members, friends, community, child welfare and other professionals that comes together to support a family in keeping the child safe. Members of the network are part of a family's support system for the long-term.

Parents in Partnership: A supportive team of parents who have successfully reunified with their children who work with the parents to provide support and help navigate the child welfare system.

Protective Capacities: Demonstrated abilities/qualities that could be used to create safety.

Safety Goal: Detailed, short, behaviorally based statements using non-judgmental language and describing specific actions the parents and network will demonstrate to create and sustain child safety.

Safety House: A child interviewing technique facilitating the inclusion of the child's voice in safety planning.

Safety Mapping: Is a process of gathering and organizing information regarding the safety of the child; moving toward the joint understanding and agreement with key stakeholders about what has happened in the family and what needs to happen next to enhance protection of the child.

Safety Planning: The practice of co-developing a plan with the child, family and network of detailed actions made in response to specifically identified dangers. The safety plan document contains concrete and sustainable steps enhancing daily, on-the-ground safety for children. Safety planning involves the documentation of the plan as well as communicating the plan to all included in it.

Safety Planning (Aftercare): The practice of co-developing a plan or document with the child and family Network of Support or Child and Family Team as they transition; including concrete and sustainable steps enhancing daily, on-the-ground safety, and helping the child sustain permanency and stability.

Solution Focused Interviewing: An interview approach focusing on a family's goals, targeting the desired outcome of the intervention as a solution. This technique involves developing a vision of one's future, determining skills, resources, and abilities a person already possesses and enhancing those in order to attain the desired outcome.

Structured Decision Making (SDM)/Comprehensive Assessment Tool (CAT): SDM is a suite of assessment instruments that promote safety and well-being for those most at risk. The CAT is an assessment system consisting of tools addressing response determination, initial safety, and referral, placement, continuing services and case closure.

Teaming: The network of support or family connections coming together with the goal of enhancing the relationships and clarifying their role in the safety and well-being of the child.

Three Houses: A child interviewing technique facilitating the inclusion of the child's voice in the assessment of danger and safety. These houses are called: House of Good Things, House of Worries and House of Hopes/Wishes/Dreams.

Three Questions: A set of questions used during the interviewing and assessment process. These questions are: What are we worried about? What's working well? What needs to happen next?

Trauma Informed Lens: The awareness and incorporation of trauma assessment and symptoms into all routine practice; ensuring children and families have access to interventions that treat the consequences of traumatic stress.

Voice and Choice: The practice of soliciting and incorporating input through interviews and/or other methods and engaging in dialogue regarding choices with children and families throughout the SOP/CPM practice.

Voice of the Child (Three Houses and Safety House): The input from the child; solicited and incorporated through interviews and/or other methods.

Sources:

California Partners for Permanency Glossary

Core Practice Model Guide

Los Angeles County Shared Core Practice Model

Los Angeles County Practice Model Emergency Response Module(s)

Los Angeles County DCFS Model of Practice Continuing Services

UC Davis Extension, Center for Human Services, Northern Training Academy: http://humanservices.ucdavis.edu/Academy/SOP/index.aspx?unit=ACADEMY

ATTACHMENT #4

SOP Training Menus

Northern California Training Academy:

Practice Institute: SOP

Safety-organized practice seeks to form a constructive, purposeful focus among all the stakeholders involved with children and families by generating a clear, shared understanding of the problems facing that family and a straightforward vision of what future safety for the children needs to look like. SOP's use of methods including Signs of Safety, appreciative inquiry, solution-focused therapy, and motivational interviewing, when integrated with the reliability and validity of the Structured Decision Making tools created by the Children's Research Center, create a powerful and deepened approach to child welfare practice.

The three-day institute explores the possibilities of this integrated approach and examines questions like:

- What kinds of partnerships between workers and families are possible in situations involving conflict?
- How can protective workers maintain a rigorous focus on child safety while promoting hope and change for family members?
- How can our conversations with families be a useful tool for change?
- How can the Signs of Safety tools be linked with the Structured Decision Making tools in regular practice? What are the best strategies for teaching this kind of approach to others?

Instructor qualifications/certification process for teaching the Practice Institute

- Instructor/coach has completed the three-day Practice Institute
- Instructor/coach has completed the Training for Trainers (T4T)
- Instructor/coach has fully participated in the coaching sessions after the T4T
- Instructor/coach has observed and then conducted at least two to three safety mapping sessions with a family

Other trainings available to support safety-organized practice

- Family Meeting Facilitation
- Group Supervision

- Court Reports, Case Plans and Safety-Oriented Practice
- Exploring Transformative Supervision
- SOP: Direct Impact of Being Trauma Informed
- The Art of Asking Questions: Motivational Interviewing and SOP
- Three Houses

Other modules in development

- Cultural Humility and SOP
- California Partners for Permanency and SOP
- Structured Decision Making and SOP
- Team Decision Making and SOP

Training for Trainers: Safety-Organized Practice Modules

These are beginning modules for trainers, which provide a foundational understanding of various aspects of safety-organized practice. This is not a complete list of training curricula related to SOP, just those modules that provide a basic understanding of SOP.

1. Interviewing for Safety and Danger
2. Three Questions
3. Small Voices, Big Impact
4. Solution-Focused Inquiry
5. Mapping Part One: Use in the Office
6. Harm Statements, Danger Statements and Safety Goals
7. Mapping with Families
8. Safety Networks
9. Safety Planning
10. Landing Safety-Organized Practice in Everyday Work
11. Organizational Environments: Reflection, Appreciation and Ongoing Learning
12. Summary and Looking to the Future

Prerequisites to attend Training for Trainers modules

- Must have attended the three-day Practice Institute: Safety-Organized Practice
- It is recommended the trainer or coach has observed a mapping session with a family
- Have an understanding of Structured Decision Making or the Comprehensive Assessment Tool

Bay Area Training Academy

The list below is a summary of the available trainings the Bay Area Academy has to offer to support your county with training, coaching, or implementation of Signs of Safety. Please note: BAA is always working to increase resources as it relates to Signs of Safety. There is not a prescribed order for training; however, please work with your training specialist to develop a plan that will best meet your county's needs.

Signs of Safety: An Overview

This three-hour presentation will provide an overview of Signs of Safety. How Signs of Safety can be integrated with SDM or CAT, Family Decision Making meetings and other current child welfare practices to strengthen the practitioners focus on safety.

Introducing Signs of Safety and Integrating It with Your Practice

This one-day training will introduce the Signs of Safety approach to child protection casework focuses on the question, "How can the worker actually build partnerships with parents and children in situations of suspected or substantiated child abuse and still deal rigorously with the maltreatment issues?" This is a partnership and collaboration grounded, strengths-based, safety-organized approach to child protection work, expanding the investigation of risk to encompass strengths and Signs of Safety that can be built upon to stabilize and strengthen the child's and family's situation. The approach is designed to be used from commencement through to case closure and to assist professionals at all stages of the child protection process. This one-day training will focus on specific areas of practice:

Family Engagement:

- Using solution-focused questions with families
- Strategies to improve interviews with children
- Critical Thinking:
- How to integrate Signs of Safety Principles with assessment tools to "map" a case

Enhancing Safety:

- How to create Harm & Danger Statements
- Developing well-formed goals for case planning
- Building a Safety Network
- Safety Planning

Signs of Safety: Mapping Cases and Building Safety Plans

This practical two-day workshop builds on the themes presented in Signs of Safety An Overview and Introducing Signs of Safety and Integrating It With Your Practice. The focus on the two central aspects of the Signs of Safety approach to equip practitioners to immediately begin using this approach.

Day one will focus on using the Signs of Safety assessment and planning framework that enables professionals and family members to think themselves into and through the situation so they can work together in building safety for the children. The following areas will be described: the elements of the framework, the practice and questioning skills that bring it to life, how to present a number of Signs of Safety assessments, how to undertake a live demonstration and get the participants to practice the skills.

On the second day of this workshop, participants will explore the specifics of family-owned and enacted safety plans (a list of services that parents must attend is not a safety plan!) and how to create such safety plans together with families. Numerous examples will be presented and participants will again have lots of opportunity to practice the safety-planning skills.

Signs of Safety/Structured Decision Making

The Signs of Safety approach seeks to form a constructive, purposeful focus among all the stakeholders involved with children and families by generating a clear, shared understanding of the problems facing that family and a straightforward vision of what future safety for the children needs to look like. When this is integrated with the reliability and validity of the Structured Decision Making tools, a powerful and deepened approach to child welfare practice is created. This can be delivered as a one to three day series depending on the depth of counties request. The three-day training explores the possibilities of this integrated approach and addresses such questions as:

- What kinds of partnerships between workers and families are possible in situations involving conflict?
- How can protective workers maintain a rigorous focus on child safety while promoting hope and change for family members?
- How can our conversations with families be a useful tool for change?

- How can the Signs of Safety tools be linked with the Structured Decision Making tools in regular practice?

Art of Conversation: Integrating SOS with Motivational Interviewing

Provides participants with concrete skills to both receive necessary information from clients for case/safety planning but also to engage and empower the client to direct their own change process while in the child welfare system. Topics include:

- Questions to ask/skills to use when engaging clients in case planning.
- How to frame questions so that clients are not put on the defense.
- How to appropriately honor clients' success and strengths to promote further success.

Participants should have experience in Signs of Safety, motivational interviewing and/or solution-focused therapy prior to attending this workshop.

3 Houses

SOP has evolved through the work of CPS workers in many countries. Their concept is to put together the practices that workers have already found successful and build a process that is engaging and simple enough for families to understand, yet still respect the complexity of issues facing families. The Three Houses is part of SOP and is designed to elicit children and youth's views about what is happening in their lives and what they want for their future. The Safety House is a way to engage children and youth in the safety planning process and to learn what they need to feel safe. Both interview tools incorporate the three key questions in SOP in a way that engages children and youth, and gives the worker and families a broader and more detailed view of a child's perspective and what the child needs to be safe. This class will explore these interview tools and the best uses for them in practice. Participants will have an opportunity to see and practice both The Three Houses and The Safety House.

Signs of Safety Family Team Meeting Facilitation

This training is designed for anyone who is engaged in facilitating family meetings. It teaches research-based skills and knowledge about family meetings, and will enhance and develop skills in facilitation of family meetings with an emphasis on the use of Signs of Safety (SofS) tools and techniques. This training primarily targets counties that are using SofS and will not address TDMs.

Leadership is Frenzied Times

In the daily frenzy, that often characterizes community and non-profit organizations, many individuals complain that they have "no time to think" and are "working too hard to work smart." Sadly, just when shared purpose and solidarity are needed most, organizational leaders can become distracted by competing demands, overwhelming

pressures, and inadequate resources. In this climate, hidden and polarized conflicts can exacerbate tensions, threaten staff morale—and even jeopardize organizational survival.

Integrated Safety-organized Practice Training Series: Bringing Together the Best of the Structured Decision Making System and Signs of Safety for Better Outcomes for Children and Families

These mini-modules are designed to be given one module per month. They take participants through each of the major practices of Signs of Safety with links to the Structured Decision Making® (SDM) system, and allow time in the interim for participants to practice in the field with support from a coach and/or peer leader. Each module is designed to be two to three hours in length, and delivered in small-group settings to no more than 30 social work practitioners. The modules can be customized for jurisdictions, and can include elements of trauma-informed practice.

Module 1) Interviewing for Safety and Danger: What is a Balanced, Rigorous Assessment?

- Overview of Signs of Safety and the SDM system: Why might these help each other?
- Definition of safety: What does it mean to have a safety-organized practice?
- Example of a balanced, rigorous assessment
- Basic terms and connection to the SDM system
- Distinguishing between harm, danger, safety, and strengths
- Introduction to three questions as the thread that holds this together
- Values and principles
- What can “implementation” of this material look like?

Module 2) Three Questions

- Three questions that guide practice
- Deepening inquiry for first two questions
- Impact on child
- Avoiding generalizations
- What needs to happen? Small steps toward change

- Linking three questions to the SDM system

Module 3) Interviewing Children

- Purpose of interviewing children
- Engaging children
- Connecting to trauma-informed practice
- Three houses
- Safety house

Module 4) Solution-focused Inquiry

- What is solution-focused inquiry?
- Why should we use solution-focused inquiry?
- Five specific solution-focused questions (exceptions, scaling, coping and preferred future, and position questions)
- Connection to the SDM system
- How solution-focused questions land in practice: first contact with a family; investigation and assessment; forming case plans; ongoing assessment of safety; adoptions

Module 5) Safety Mapping Part One – Use in the Office

- Definitions in the mapping
- Two kinds of maps
- Questions that facilitate mapping
- Connection to the SDM system

Module 6) Harm and Danger Statements

- Description and examples
- Ways of eliciting and ways of using
- Connection to the SDM system
- Decision tree: Linking risk and danger statements

Module 7) Safety Mapping Part Two: With the Family

- Three-column map: Uses and examples
- Connections with solution-focused questions
- Introduction of EARS
- Connection to the SDM system

Module 8) Network Development

- Purpose and uses
- Examples
- Safety circles
- Connection to the SDM system

Module 9) Safety Planning

- Insight vs. action
- Three kinds of safety plans (immediate, ongoing, and aftercare)
- Elements needed in all safety plans
- Uses of network
- Connection to the SDM system

Module 10) Organizational Environments: Reflection, Appreciation, and Ongoing Learning

- Concepts of organizational climate and culture
- Uses of appreciative inquiry by the organization
- Ideas of internal networks, diffusion, and how organizations change

Module 11) Conclusion

- A look back at the material
- A look at what social work practitioners have done with the material
- Celebrating the accomplishments and planning for the future

Public Child Welfare Training Academy: Academy for Professional Excellence

SOP: Old Modules

Integrated SOP T4T Call Back Session

Integrated SOP T4T Modules 1-4

Integrated SOP T4T Modules 5-8

Integrated SOP T4T Modules 9-12

SOP for Supervisors Module 1

SOP for Supervisors Module 2

SOP for Supervisors Module 3

SOP for Supervisors Module 4

SOP Module 1: Interviewing for Safety and Danger

SOP Module 2: The Three Questions

SOP Module 3: Keeping Children at the Center

SOP Module 4: Solution Focused Inquiry

SOP Module 5: Introduction to Safety Mapping

SOP Module 6: Harm, Danger Statements, and Safety Goals

SOP Module 7: Safety Mapping

SOP Module 8: Safety Networks

SOP Module 9: Safety Planning

SOP Module 10: Landing SOP in Everyday Work

SOP Module 11: Organizational Environments: Reflection, Appreciation, and Ongoing Learning

SOP Module 12: Organizational Environments: Series Conclusion

T4T SOP Three-Day Overview

SOP New Modules with Combined Modules 1 and 2, Combined Modules 5 and 7 the Lost Modules

Integrated SOP Training for Trainers Modules 1-4 (One Day Version)

Integrated SOP T4T Modules 5-7

SOP Implementation Training: Getting Clear on Safety Mapping and Complicating Factors

SOP Leadership Overview

SOP Module 1: Interviewing for Safety & Danger and Three Questions to Organize Your Practice

SOP Module 2: Small Voices, Big Impact: Keeping Children at the Center of Our Work

SOP Module 3: Solution Focused Inquiry

SOP Module 4: Introduction to Safety Mapping

SOP Module 5: Harm Statements, Danger Statements and Safety Goals

SOP Module 6: Mapping with Families

SOP Module 7: Safety Networks

SOP Module 8: Safety Planning

SOP Module 9: Permanency

SOP Module 10: Landing SOP in Everyday Work

SOP Module 11: Organizational Environments: Reflection, Appreciation and Ongoing Learning

SOP Module 12: Summary and Looking to the Future

SOP One-Day Overview

SOP Three-Day Orientation

ATTACHMENT #5

CWD and CPD Memorandum of Understanding Sample

Title IV-E Well-Being Project

MOU Between Alameda County Social Services Agency and Probation Departments

This MOU supplements and does not supersede the MOU between Alameda County and the California Department of Social Services (State-County Demonstration MOU) that implements the County's participation in the Title IV-E California Well-Being Project (Demonstration).

The Federal Terms and Conditions governing the Demonstration require that both the county Social Services and the Probation Department participate in the Demonstration. This MOU between the county Social Services and Probation Department requires a description of the methodology to be used to allocate the federal title IV-E funding available to the Probation Department under the County's budget for the Demonstration, consistent with the federal Terms and Conditions fiscal methodology. Both county departments must execute this MOU prior to the Demonstration implementation date of October 1, 2014. The county will not be able to participate in the Project if this MOU is not executed 30 days prior to the implementation date. The executed document must be submitted to CDSS no later than 15 days prior to implementation. A county will not be able to participate in the Demonstration without this document.

Responsibilities

1. The county Social Services and Probation Departments agree to comply with the State-County Demonstration MOU, and agree to cooperate with each other as needed to ensure compliance with the terms of the State-County Demonstration MOU.

2. The county Social Services and Probation Departments shall calculate and agree upon the amount of Title IV-E funds that are available to the Probation Department for the five-years of the Demonstration. A description of the methodology that will be used to determine this amount is attached to this MOU See Attachment 1.

3. The Social Services and Probation Departments shall calculate and agree on the match and amount of savings that result from the Demonstration consistent with Paragraph J of the state-county MOU that is available to the Probation Department not less than semi-annually, and both Departments will reinvest any

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2. The county Social Services and Probation Departments shall calculate and agree upon the amount of Title IV-E funds that are available to the Probation Department for the five-years of the Demonstration. A description of the methodology that will be used to determine this amount is attached to this MOU See Attachment 1.

3. The Social Services and Probation Departments shall calculate and agree on the match and amount of savings that result from the Demonstration consistent with Paragraph J of the state-county MOU that is available to the Probation Department not less than semi-annually, and both Departments will reinvest any

savings produced by participating in the Demonstration in child welfare services. A description of the methodology that will be used to determine the amount of the savings available to each Department is attached to this MOU. See Attachment 2.

4. Probation must develop a five-year budget for the Probation Department based on the fiscal methodology in the terms and conditions including any growth or trigger factors. The five-year Probation budget must be included as an attachment to the County Project Plan.

5. The county Social Services Department agrees to accept claims for federal reimbursement from the Probation Department for all Demonstration administrative and maintenance costs in support of strategies identified in the county plan. This is in addition to the normal Title IV-E claiming of costs not included in the Demonstration. Project.

6. The Probation Department will complete quarterly the Title IV-E Well-Being Fiscal Workbook with expenditures for Demonstration administrative and maintenance costs. The Probation Department will send the completed fiscal workbook to the county Social Services Department in order for the county to compile a joint fiscal workbook for both departments and to submit one county fiscal workbook to CDSS.

7. The county Social Services and the Probation Departments will reconcile on a quarterly basis the federal funds budgeted for that fiscal year against the claims submitted.

8. The Probation Department is responsible for data collection regarding program strategies, funding expenditures and evaluation activities that are required to participate in the Demonstration.

9. The Social Services and Probation Departments agree they will establish a mutually satisfactory method for the exchange of information that is necessary for the completion of required reporting for the progress reports and fiscal workbook in order to submit <u>one county document to CDSS.</u>

10. The Social Services and Probation Departments agree to establish mutually satisfactory procedures for the adjustment of claims, increase or decrease in the allocation of IV-E funds, and other requirements of the Demonstration.

11. The Probation Department will bear any costs incurred if any federal disallowance is found to a claim with regard to Probation Department costs. The adjustment will be made against a future claim. The county Social Services Department will bear any costs incurred if any disallowance is found to a claim with regard to Social Services Department costs.

12. The Probation Department will bear the costs if the expenditures exceed the portion of the federal capped allocation allotment for Probation.

This agreement shall take effect upon the implementation of the Title IV-E Waiver Demonstration and shall remain in effect until September 30, 2019. If the county decides to "opt out" of the waiver, this MOU will cease on the last date of the quarter in which the county participated in the Demonstration.

County
Department of Social Services

Lori Cox
Director

Probation Department

LaDonna M. Harris
Chief Probation Officer

Approved as to Form
DONNA R. ZIEGLER, County Counsel
By
Print Name VICTORIA WU

Attachment #6

County Staff Characteristics, Staffing Needs and Reorganization Needs

ACSSA

Staff Required: All DCFS staff will be involved in Alameda County's demonstration project. DCFS currently has approximately 400 child welfare workers, supervisors and managers.

Staff Roles: Staff roles will range from implementing interventions, managing contracts, providing direct services and setting policy, as appropriate

Qualifications: A master's degree is required for all child welfare workers, supervisors and managers.

Staffing Levels: DCFS anticipates needing to reduce caseloads and hire more child welfare workers and supervisors as waiver interventions are implemented. DCFS will continue to monitor staffing levels and program need throughout the demonstration project.

Reorganization: DCFS anticipates needing to reduce caseloads and hire more child welfare workers and supervisors as waiver interventions are implemented. DCFS will continue to monitor staffing levels and program need throughout the demonstration project.

ACPD

Staff Required: Wraparound: No DPOS assigned to Wraparound cases. Any case that meets qualifications through SOS process is assigned to receive Wraparound services. This is a staff driven case management meeting involving various stakeholders where POs present cases to the committee. SOS staff determines if referral is appropriate for Wraparound. Four staff total: one director and three supervisors.

Staff Roles:

- Wraparound: Case managers coordinate with Wraparound agency staff. Every supervising DPO has an opportunity to present cases that include an intervention or escalate to out of home care. DPO also reports information back to the court.

- Collaborative Court: Beginning October 2014, the POs were assigned to Collaborative Court as the primary case managers for the youth.

- Parenting with Love Limits (PLL): N/A RFP in process.

Qualifications:

- Wraparound: n/a. Staff is not responsible to conduct interviews. This service is contracted out to a provider.

- Collaborative Court: Officers are responsible for all case reports, MDTs and court appearances.

- PLL: Estimate to TBD based on status of the RFP.

Staffing Levels:

- Wraparound: Does not apply.

- Collaborative Court: Yes, since the caseload is no more than 60, we do have sufficient staff to have 20 cases per DPO. We will continue to review the staff to caseload ratio to determine if an increase staffing capacity is needed.

- PLL: not applicable; RFP in process.

Reorganization:

- Wraparound: no.

- Collaborative Court: We did plan for DPOs to be case managers at the start of the project.

- PLL: Not applicable, RFP in process.

Butte County CWS

Staff Required:

- Intervention #1 – Enhanced SOP: All of our current Children's Services staff will utilize Enhanced SOP: 92 staff total (80 Social Workers and 12 Social Worker Supervisors).

- Intervention #2 – Implement Kinship Supportive Services Program (KSSP): Identify one Social Worker to act as liaison between KSSP vendor providing contracted services, licensing and social work staff.

- Intervention #3 – Expand and enhance Supporting Our Families in Transition (SOFT) Program: All services for this intervention will be provided by a contracted vendor.

Staff Roles:

- Intervention #1 – Enhanced SOP: All Children's Services Social Workers and Social Worker Supervisors will be implementing enhanced SOP practices at

every stage of a case, including increased SOP tool utilization. Supervisors will take on increased SOP coaching and assessment roles with their staff.

- Intervention #2 – Implement Kinship Supportive Services Program (KSSP): One Social Worker will be identified to act as liaison between KSSP vendor providing contracted services, licensing and social work staff.

- Intervention #3 – Expand and enhance Supporting Our Families in Transition (SOFT) Program: All services for this intervention will be provided by a contracted vendor.

Qualifications:

- Social Worker Minimum Requirements: Education, certifications and licenses: Master's degree in Social Work or Bachelor's degree in Social Work or Behavioral Sciences; and one year of work experience in a public or private social services agency working with children and/or adults, or one year experience performing duties comparable to an Employment Case Manager in a California county CWS department and a valid State of California driver's license.

- Social Worker Supervisor Minimum Requirements: Education, certifications and licenses: Master's Degree in Social Work or Behavioral Sciences; and two years work experience performing increasingly responsible social work duties in a public or private social work agency or Bachelor's Degree in Social Work or Behavioral Sciences; and four years work experience performing increasingly responsible social work duties in a public or private social work agency. A State of California Driver's license is required.

- Intervention #1 – Enhanced SOP: In addition to Social Worker Supervisor Minimum Requirements above: All Children's Service staff to attend SOP Foundational Institute training. All Social Worker supervisors to attend SOP Group Supervision training. All Children's Services staff to attend follow up SOP training specific to Butte County's Policies and Procedures for SOP.

- Intervention #2 – Implement Kinship Supportive Services Program (KSSP): In addition to Social Worker Minimum Requirements above, one Social Worker identified for KSSP Program will complete appropriate training related to KSSP functions, to be determined.

- Intervention #3 – Expand and enhance Supporting Our Families in Transition (SOFT) Program: Services for this intervention will be provided by a contracted vendor.

Staffing Levels:

- Intervention #1 – Enhanced SOP: Yes. In addition to the above stated roles of staff in the intervention, Enhanced SOP Intervention will be supported by

contracting with vendors to provide Child Family Meetings and coaching activities.

- Intervention #2 – Implement Kinship Supportive Services Program (KSSP): One existing Full Time Equivalent Social Worker will be reassigned to meet the needs of the demonstration. A vendor will be contracted to provide KSSP training, recruitment, retention, and other supportive activities for relative caregivers.

- Intervention #3 – Expand and enhance Supporting Our Families in Transition (SOFT) Program: All services for this intervention will be provided by a contractor vendor.

Reorganization: The following staff have been hired or reorganized to meet the needs of the demonstration. One FTE Administrative Analyst, Senior for Evaluation of all three interventions under the Title IV-E Waiver. The following staff will be reorganized to meet the needs of the demonstration: I FTE Social Worker as liaison for Intervention #3 KSSP.

Butte County Probation

Staff Required: Estimated: nine.

Staff Roles: PO Supervisor will be part of the Wraparound team and administer the Strengthening Families Program. In addition, she will supervise all staff assigned to the demonstration project. The POs will be part of the Wraparound team and administer the Strengthening Families Program. In addition, they will perform some of the regular Officer duties: under limited supervision, acts as officer of the court and conducts the daily operation and functions of rehabilitative services; controls and monitors the movement of probationers; enforces the policies and terms of probation; physically restrains and arrests violators; prepares and reviews a variety of reports to the court; and performs a variety of duties associated with the PD. The Juvenile Hall Counselor will be part of the Wraparound team and administer the Strengthening Families Program. Legal Office Specialist performs a variety of legal clerical work to support the activities of a County department; involves review and analysis of information contained in legal files and records; updates computer database; assures accuracy of filing systems. PO II will perform assessments on juveniles to determine if they are appropriate for the demonstration project. Probation Technician will be part of the Wraparound team. She will perform a variety of support and administrative duties and assists POs in performing basic operations and functions of probation services in the office.

Qualifications: Below are the minimum education and experience staff must have to conduct the intervention. However, we are only assigning staff who possess a higher degree of experience with the target population. PO II Bachelor's degree in Criminology, Social or Behavioral Sciences or related field; and one year of experience as a PO. Must obtain and maintain a valid California 832 Peace Officer Certificate. PO III must have a Bachelor's degree in a related field and three years' experience as a

PO. Must obtain and maintain a valid California 832 Peace Officer Certificate. Juvenile Hall Counselor II must have a high school diploma or GED and one year of experience as a Juvenile Hall Counselor I. Legal Office Specialists must have a high school diploma or GED and one year of legal experience. Probation Technician must have an Associate's degree in Criminology, Psychology or related field.

Staffing Levels: There currently are enough staff with the appropriate characteristics to conduct the interventions.

Reorganization: Staff will be hired to fill in the gaps of reorganization as needed. Qualified staff with experience will be assigned to the demonstration project.

Lake County CWS

Staff Required: All CWS social workers and social worker supervisors are required to conduct the intervention. Currently we have five social worker supervisor positions and 26 social worker positions.

Staff Roles: All ER, FR, FM, PP and adoption social workers will use SOP as their practice model for case management and investigations. In addition, other CWS staff that have specialized assignments will use SOP in their practice. These include Family Team Meeting facilitators, Parenting Class facilitators, Parent Engagement Group facilitators, CANS screeners, ILP worker and visitation supervisors. CWS social workers hold all these positions. All CWS staff have received SOP foundational training and are currently using some aspects of SOP in their assignments. Family Team Meetings, Red Team, Group Supervision, Harm/danger statements and Safety Mapping are examples of SOP activities that are used routinely. We are already implementing SOP and all staff has been trained. The skill level of staff will gradually increase with supervision, coaching and advanced training, but full implementation has already occurred.

Qualifications: All staff must qualify as a Social Worker I/II/II, Social Worker IV, Social Worker Supervisor I or II. A MSW is preferred but they must at least hold a BA degree.

Staffing Levels: All current staff hold the appropriate characteristics to conduct the intervention.

Reorganization: We anticipate the need to add an additional Family Team Meeting Facilitator and a SOP coach to supplement the coaching services we are currently receiving from the Northern Training Academy. There is the potential need to add an additional ER social worker to handle the added workload created by the RED Team.

Lake County Probation

Staff Required: All staff will participate in referring a family to the intervention (currently seven POs) and meeting with the family to conduct a Family Team Conference to assess viability. Following that, one PO will oversee all families involved in the intervention.

Staff Roles: They will complete referrals, meet with families throughout intervention time frame, meet with agency staff that will be implementing the intervention, monitor compliance with terms and conditions of probation, and complete court documents as required.

Qualifications: Staff will be trained POs and additional training in the Wraparound philosophy and workings.

Staffing Levels: No. Training is being conducted to bring additional POs to the necessary level of competency.

Reorganization: Yes. A PO will be assigned to supervise this new caseload.

LACDCFS

Staff Required:

- **SOP/CPM:** Regional Operations: Approximately 2,200 Children Social Workers (CSW), 435 Supervising Children's Social Workers (SCSW). In addition, there are 43 SCSW Coach Developers that report to specific regional offices. Training: nine Trainers (CSA I). Program Staff: one Program Manager (CSA III) and seven Coach Developers (CSA I).

- **Prevention and Aftercare:** Program staff assigned include two full-time (CSA I) Contract Monitors, one full-time (CSA II) Asst. Program Manager, one 25% time (CSA III) Program Manager. One additional (CSA I) Contract Monitor is required to provide comprehensive program management over this program. In addition, a CSA II with several other assignments has been placed into providing coverage over this program.

- **PFF:** Currently there are no program staff assigned. This program requires two full-time (CSA I) Contract Monitors, one full-time (CSA II) Asst. Program Manager, one clerical staff (ITC or STC), and a 25% time (CSA III) Program Manager

Staff Roles:

- **SOP/CPM:** Engage families through a more individualized casework approach that emphasizes family involvement, increased child safety, improved permanency outcomes and timeline, improved child and family well-being and improve the array of services and supports available, deepen understanding about trauma, improve relationship with the community, only serve families who need intervention, work collaboratively with partners as well as families and communities and develop awareness of DCFS' impact.

- **Prevention and Aftercare:** Monitor the contractors via regular on-site technical reviews, e-mail, and telephone contact. Provide support to the contractors in understanding and meeting the contract deliverables; develop targeted outcome

measures and regularly track indicators; facilitate monthly stakeholder meetings; engage the 17 DCFS Regional Offices in collaborating with the contractor and making appropriate client referrals; present at DCFS staff meetings; review monthly invoices and management reports; liaison with Budgets, Accounting, Contracts, and County Counsel on programmatic issues; work with BIS, DCFS line staff, and the contractors in the development and implementation of a web-based reporting system.

- **PFF**: Monitor the contractors via regular on-site technical reviews, e-mail, and telephone contact. Provide support to the contractors in understanding and meeting the contract deliverables; develop targeted outcome measures and regularly track indicators; facilitate monthly stakeholder meetings; engage the 17 DCFS Regional Offices in collaborating with the contractor and making appropriate client referrals; present at DCFS staff meetings; review monthly invoices and management reports; liaison with Budgets, Accounting, Contracts, and County Counsel on programmatic issues; work with BIS, DCFS line staff and the contractors in the development and implementation of a web-based reporting system.

Qualifications:

- **SOP/CPM:** (Regional Operations) CSW must have a Master's Degree, from an accredited College or University, in Social Work, Marriage and Family Counseling or Psychological Counseling or Clinical Psychology: SCSW must have at least three years' experience as a CSW. (Training) CSA I, for the various roles identified in question #1, hold the following requirements: minimum of two years in a highly responsible staff capacity. (Program) CSA I and CSA III for the various roles identified in question #1, all hold the following requirements: minimum of two years in a highly responsible staff capacity, with an additional two years of experience at the each lower level for the CSA II and CSA III.

- **Prevention and Aftercare:** CSA I, II and III for the various roles identified in question #1, all hold the following requirements: minimum of two years in a highly responsible staff capacity, with an additional two years of experience at the each lower level for the CSA II and CSA III.

- **PFF:** CSA I, II and III for the various roles identified in question #1, all hold the following requirements: minimum of two years in a highly responsible staff capacity, with an additional two years of experience at the each lower level for the CSA II and CSA III.

Staffing Levels:

- **SOP/CPM:** (Regional) No, Los Angeles is currently hiring staff and will continue to fill behind attrition. (Training and Program) Yes, at DCFS there are 251 CSA I budgeted items and 38 CSA III budgeted items.

- **Prevention and Aftercare:** This is a contracted service. There is enough DCFS agency staff with appropriate characteristics to manage the program and monitor the contracts (Items requested).

- **PFF**: This is a contracted service. There is enough DCFS staff with appropriate characteristics to manage the program and monitor the contracts (Items requested).

Reorganization:

- **SOP/CPM:** (Regional) Yes, Los Angeles is currently hiring staff and will continue to fill behind attrition. (Training) No, Los Angeles is sufficiently staffed. (Program) Los Angeles needs to hire one CSA I.

- **Prevention and Aftercare:** Most likely, it could be accomplished through a Departmental re-organization. There are no CSA items within the Community Based Support Division that could be re-deployed without having a negative impact on the programs they oversee. Total staff requested: one CSA I and one CSA II.

- **PFF:** Most likely, it could be accomplished through a Departmental re-organization. There are no CSA items within the Community Based Support Division that could be re-deployed without having a negative impact on the programs they oversee. Total staff requested: two CSA I, one CSA II and one ITC/STC/other clerical item.

Los Angeles County PD

Staff Required:

- **Wraparound:** We currently have five DPO liaisons serving eight Service Planning Areas (SPAs).

- **Functional Family Therapy:** There is a maximum of eight per team, with six vacancies. Currently there are two teams but Probation will be expanding to hire these six additional staff. There is ten staff currently, with one supervisor supervising two teams.

- **Functional Family Probation**: FFP is currently comprised of two teams of DPOs, each with an assigned SDPO. Currently team one has eight DPOs and team two has six DPOs.

Staff Roles:

- **Wraparound:** Deputy liaisons conduct oversight of providers to maintain quality assurance, screen cases for eligibility and review documentation such as plans of care and safety plans, generate referrals, collaborate with other Departmental

liaisons, maintain communication with DPOs and families to establish rules and their expectations of providers, conduct training for Wraparound.

- **Functional Family Therapy:** The DPO/Therapists conduct the FFT sessions with the youth and family. The team lead conducts oversight on staff, conducts staff meetings and rates staff. The team lead also ensures that Interventionists are maintaining fidelity to the model.

- **Functional Family Probation:** FFP DPOs provide case management utilizing FFP skills; develop case plans, reducing risk factors and increasing protective factors, ensuring youth meet conditions of their probation

Qualifications:

- **Wraparound:** The Wraparound liaisons must have a Bachelor's degree and two years' experience as a Deputy PO.

- **Functional Family Therapy**: DPO/therapist must have a BA degree. The FFT team lead requires a clinical master's degree. All staff and supervisors are required to complete annual FFT training and participate in regular consultation meetings conducted by the California Institute of Behavioral Health Services.

- **Functional Family Probation:** FFP DPOs must have a BA degree, attend annual FFP training and participate in regular consultation meetings conducted by the California Institute of Behavioral Health Services.

Staffing Levels:

- **Wraparound**: No. The contract calls for a minimum of one Liaison per SPA.

- **Functional Family Therapy:** No. Probation is currently in the process of hiring another supervisor and six more FFT staff.

- **Functional Family Probation**: FFP currently has five DPO vacant items and Probation is attempted to fill these items.

Reorganization:

- **Wraparound**: Yes. The number of Wraparound providers will grow from 32 to 49. Currently, Probation is unable to attend all Interagency Screening Committee (ISC) and Plan of Care meetings. Therefore, an increase in providers will exacerbate this problem. Probation will pursue hiring three DPOs to cover the remaining SPAs.

- **Functional Family Therapy**: Yes.

- **Functional Family Probation:** Yes.

Sacramento County CWS

Staff Required:

- **SOP:** Sacramento County CPS will require all 426 social workers, supervisors and managers to incorporate SOP into practice.

- **Family Finding and Kinship Support:** Any CPS social worker that has a child/youth on their caseload in need of permanency services or family finding would make a referral to one of the two contracted agencies. This includes our social workers who have Court Services, Family Reunification and Permanency Placement cases. Contractor #1 will have three FTE Youth Permanency workers and 0.6 FTE supervisors. Contractor #2 will have one FTE Family Finder and two FTE Case Managers.

- **Prevention Initiative:** Contractor will utilize a total of 6.1 FTE per site (54.9 FTE Total) direct service staff and .4 FTE per site (3.6 FTE Total) supervisors and admin staff.

Staff Roles:

- **SOP**: The role of CPS social workers and supervisors in the demonstration of SOP is to implement SOP/CPM tools in practice to lead to a deeper understanding of a family's strengths and needs by providing a framework for critical thinking to promote safety, permanency and well-being. CPS supervisors and managers' role are to plan implementation strategies to include defining expectations; developing guidelines; facilitating training and coaching opportunities; and monitor and tracking progressing for continuous quality improvement.

- **Family Finding and Kinship Support:** The social worker's role is to: refer children/youth needing the service; monitor the progress of the child/youth; work with the child/youth and agency to ensure the child/youth receive the needed services Staff from Contractor #1 will perform case management duties, engage youth, prepare youth for permanency, conduct youth specific recruitment and strengthen placement until finalization. Staff from Contractor #2 will find conduct specialized searches to identify and connect with kin, and provide case management.

- **Prevention Initiative:** Contractor will utilize direct service staff as follows: community liaison to engage families in the community through other service providers and schools; activities specialist to coordinate activities and classes; aides will facilitate parenting classes, including court mandated classes, as well as other classes in the FRC; crisis intervention specialist to provide crisis support to families to assist with their immediate needs so they can focus on parenting; home visitor to provide evidence-based Nurturing Parenting Program (NPP) home visitation services to families. Contractor will also utilize supervisorial and

administrative staff to support direct service staff as follows: program manager to oversee staff; team leaders; coordinators to manage activities; and data specialists for data entry of all services into one shared database to track families served and outcomes.

Qualifications:

- **SOP:** Staff will require the same education and experience for their current job classification. CPS social workers either have a BA or Master's degree and their experience varies. In addition to continued training and coaching on the SOP tools to deepen skills.

- **Family Finding and Kinship Support:** CPS social workers either have a BA or Master's degree and their experience varies. Staff from Contractor #1 have a BA degree with 3 years of youth permanency experience or a Master's degree. Contractor #2 will utilize Family Finders who are required to have a Bachelor's in Social Work or related degree and/or direct experience in conducting family finding and engagement work. Case Managers with Contractor #2 are required to have at least a Bachelor's in Social Work, although a Master in Social Work degree is preferred in addition to working within a child welfare setting.

- **Prevention Initiative:** Contractor staff have varied experience and education requirements ranging from AA to MA degrees.

Staffing Levels:

- **SOP:** Existing staff will continue to incorporate SOP into practice with families. As new staff are hired, SOP/CPM training and coaching will be required.

- **Family Finding and Kinship Support:** CPS is looking at increasing kinship workers in order to increase placement with relatives. Contract #1 will be hiring one supervisor. Contractor #2 will need to hire additional staff to meet the additional needs.

- **Prevention Initiative:** CPS is may increase Informal Supervision staff in order to prevent entries for children six to 12 years of age. Contractor is currently hiring and training new staff.

Reorganization:

- **SOP:** No, existing staff will continue to implement SOP with families.

- **Family Finding and Kinship Support**: CPS is hiring staff to increase relative placements. Contract #1 is currently reorganizing staff for this project. Contractor #2 will need to hire additional staff to meet the additional needs.

- **Prevention Initiative:** CPS is considering hiring staff for the Informal Supervision program in order to prevent entries of children six to 12 years of age. Contractor is currently hiring and training new staff.

Sacramento County PD

Staff Required: During Plan Year One, Sacramento looks to utilize, at minimum, the below mentioned staff:

- Wraparound Services: four contracted staff, four probation staff
- Multi-Systemic Therapy (MST): two contracted staff, three probation staff
- Functional Family Therapy (FFT): two contracted staff, three probation staff

Staff Roles:

- **Deputy PO:** Assesses juvenile probationer's needs, makes necessary program or counseling referrals based on assessment results, and assists with the coordination of re-entry services. Supervises juvenile probationers in the community and/or office setting participating in preventative services that will ensure caseload growth and costs do not occur, which includes enforcing conditions of probation, providing alternative sanctions, making arrests, and completing searches. Engages ongoing support in the community for the probationer, through collateral contacts with employers, public, private and community based organizations as well as counseling agencies. Manages and maintains case information and other records relating to assigned cases.

- **Senior Deputy PO**: Assesses juvenile probationer's needs, makes necessary program or counseling referrals based on assessment results, and assists with the coordination of re-entry services. Supervises juvenile probationers in the community and/or office setting participating in preventative services that will ensure caseload growth and costs do not occur, which includes enforcing conditions of probation, providing alternative sanctions, making arrests, and completing searches. Engages ongoing support in the community for the probationer, through collateral contacts with employers, public, private and community based organizations as well as counseling agencies. Manages and maintains case information and other records relating to assigned cases. Acts in a supervisory capacity in the absence of a supervisor and may act as a lead in training new employees.

- **Supervising Deputy PO:** Manages the day-to-day operations of the program. Plans, assigns and reviews the work of POs. Supervises the analysis of cases, and formulation and modification of treatment plans according to probationers' risk and needs. Engages community support and collateral agencies, and oversees and assists with the coordination of re-entry services for juvenile probationers. Explains and interprets department policies and procedures, law

and evidence based standards to staff members. Evaluates staff performance, provides feedback and encourages staff development. Treatment Clinicians: MST – Carry small caseloads of four to six families, Work as a team. Are available 24 hours a day, seven days a week, Provide services at times convenient to the family. FFT – They will provide short-term, high intensity therapeutic intervention programming. Use a strength-based treatment modality to promote protective factors associated with delinquent behaviors. Help participants objectively analyze their actions' impact on themselves and those around them.

Qualifications:

- **Probation staff:** Must have a Bachelor's degree and be a sworn PO. Probation Deputy POs must have the following experience and qualifications: Knowledge of policy, laws and regulations pertaining to probation and the criminal justice system. The ability to use a high level of skill and judgment under pressure in complex human situations. In-depth knowledge of principles and techniques of social and correctional case management. The ability to work and communicate with persons of diverse backgrounds. Probation Senior Deputy POs and Supervising Deputy POs must have the same experience/qualifications as a Deputy PO and the following: The ability to plan, organize and review the work of others. The ability to communicate effectively and apply analytical judgment to written reports and make accurate decisions under stressful circumstances.

- **Treatment Clinicians:** (Wraparound) Program specifications are not currently available at this time. (MST) Clinicians must meet full licensure, which signifies that the Organization is currently meeting all of the required criteria in the following areas: Quality Assurance data collection, program drift monitoring data collection, contract status and payment status. (FFT) Must have knowledge of the conceptual and theoretical elements of the FFT model, have experience and guided practice in applying FFT, and be able to demonstrate successful application of FFT. By completing the three training phases results in a clinician/team being a self-sufficient and certified FFT Practice Center. The three phases are as follows: Phase I focuses on implementation and planning. Phase II training is directed to the development of adherence and competent FFT therapists. Phase III training is aimed at developing on site clinical supervisors and implementing quality assurance and improvement procedures to maintain high model fidelity.

Staffing Levels: No issues.

Reorganization: Yes. Probation has been authorized to employ 12 staff, which includes four Deputy POs, two Senior Deputy POs, one Supervising Deputy PO, two Senior Information Technology Analysts, two Administrative Service Officers and one Program Planner. Probation will be requesting permission to add one Assistant Division Chief, one Supervising Deputy PO and one Senior Deputy PO in March.

San Diego County CWS

Staff Required: In addition to our regular staffing, we believe we need 30 additional staff to appropriately staff SOP.

Staff Roles: We need care coordinators, coaches and administrative support positions.

Qualifications: Same level we currently require

Staffing Levels: There is enough staff with the appropriate characteristics to conduce the interventions in the agency.

Reorganization: We are handling this internally by promotions or transfers. We have hired and have ongoing initial training for new social workers so we are able to fill vacant positions.

San Diego County PD

Staff Required: San Diego County Probation has identified the need for five positions related to the implementation of the demonstration interventions for Wraparound Around and Family Finding. The identified positions are for a Supervising PO, a Senior PO, a Deputy PO, an Administrative Analyst III and an Administrative Analyst II.

Staff Roles:

- Supervising PO – This position will assume responsibility for the overall oversight and implementation of the demonstration project as well as for the supervision of the staff associated with the project. This person would be our internal liaison as well as our external liaison with our local CWS, the CDSS and other agencies regarding the Project.

- Senior PO – This position will serve as the Wrap-around liaison and coordinator.

- Deputy PO – This position is related to the family finding and family engagement strategy. This position will serve as the liaison, coordinator and departmental trainer regarding the family finding process and procedures. In addition, this position will provide education, training and kinship support to the family members regarding the foster care process and services. This position will serve as a kinship advocate to help ensure family members are engaged and supported in order to maintain the placement.

- Administrative Analyst III – This position will be responsible for data collection, outcome measurements, analysis and tracking.

- Administrative Analyst II – This position will be responsible for contract review and oversight responsibilities.

Qualifications: The education and experience for these positions will be commensurate with the existing departmental qualifications.

- Supervising PO – Requires a bachelor's degree from an accredited U.S. college or university, or a certified foreign studies equivalency; and one year of experience as a Senior PO for the PD of the County of San Diego.

- Senior PO – Requires a bachelor's degree from an accredited U.S. college or university, or a certified foreign studies equivalency; and two years of experience as a Deputy PO in the County of San Diego.

- Deputy PO – Requires a bachelor's degree from an accredited U.S. college or university or a certified foreign studies equivalency; and one year of full-time work experience as a Correctional Deputy PO, or equivalent position in a correctional facility; or one year of full-time work experience in a sworn position in a criminal justice agency; or one year of full-time work experience providing functions of treatment counseling and performing duties related to case management.

For all the above positions, a degree in Criminal Justice, Psychology, Social Work, Sociology or Social Welfare is highly desirable.

- Administrative Analyst III – Requires a bachelor's degree from an accredited U.S. college or university, or a certified foreign studies equivalency in public, personnel or business administration, finance, statistics, economics or a field of study closely related to the duties and the knowledge requirements of this option, and four years of full-time professional journey level experience performing tasks in one or more of the following areas: budget/fiscal impact on departmental programs, or eight years of full-time professional journey level experience performing tasks in one of more of the following areas: budgeting, fiscal planning, statistical analysis, analysis of revenue, cost and other financial records, legislative analysis relative to budget/fiscal impact on departmental programs.

- Administrative Analyst II – Requires a bachelor's degree from an accredited U.S. college or university, or a certified foreign studies equivalency in public, personnel or business administration, finance, statistics, economics or a field of study closely related to the duties and the knowledge requirements of this option, and three years of full-time professional journey level experience performing tasks in one or more of the following areas: budgeting, fiscal planning, statistical analysis, analysis of revenue, cost and other financial records, legislative analysis relative to budget/fiscal impact on departmental programs, or seven years of full-time professional journey level experience performing tasks in one of more of the following areas: coordination of procurement activities and negotiations, contract certification, contract management/compliance and/or grants preparation and administration.

Staffing Levels: With the exception of the Administrative Analyst II and III positions, there are currently enough staffs with the appropriate Supervising PO, Senior PO and Deputy PO characteristics to conduct the interventions in the PD. At this point in time, an internal assessment of the Administrative Analyst II and III positions is being done in order to determine if there are currently enough staffs with the appropriate characteristics available to meet these needs.

Reorganization: The Supervising PO, Senior PO and Deputy PO positions will be reorganized from within the department to meet the demonstration needs. At this point in time, an internal assessment of the Administrative Analyst II and III positions is being done in order to determine how these needs will be met.

San Francisco County CWS

Staff Required: Infrastructure for IV-E Waiver, one staff and SOP, three staff.

Staff Roles: Implementation Team Coordinator/Analyst: Manages infrastructure to identify new investment strategies and implement them consistently and with fidelity. SOP: Trainer/Coach: Supports line staff and supervisors in delivering with fidelity.

Qualifications: Master's degrees in Social Work, Public Policy or related field; experience with FCS. SOP: Master's degree in Social Work or related field; experience with FCS; experience in supervising and/or coaching staff.

Staffing Levels: Have staff with these characteristics. SOP: Have staff with these characteristics.

Reorganization: Will need to hire dedicated staff for this. SOP: Will need to hire dedicated staff for this.

San Francisco County PD

Staff Required and Roles: For Wraparound, JPD will be contracting with a service provider through the county welfare agency. For the Peer Parent Program, JPD will also be contracting with a service provider to assist in providing this program. JPD may hire one to three staff in the future to assist in programming. It should be noted that for general coordination, JPD anticipates creating a position to coordinate all aspects of IV-E, the well-being project and related activities.

Qualifications: For Wraparound, no PD requirements due to contracting. For the Peer Parent program, if hiring occurs in the future, a supervisor would have a college degree (possibly in social work or a related field) and experience with the juvenile justice system in order to coordinate the logistics of the program and to supervise hired peer parents of formerly delinquency-involved youth and help them navigate the internal bureaucracy. For the general coordination position, education and experience would include a minimum of a bachelor’s degree with both fiscal and programmatic skills/experience.

Staffing Levels: For both Wraparound services and peer parent interventions, there is not enough staff with the appropriate characteristics to conduct the interventions in JPD. For the general coordination position, there is no position and no staff with the appropriate characteristics to serve in this role.

Reorganization: Staff will need to be hired to meet the needs described on the left for the general coordination position. San Francisco CWS recently reissued our Wraparound RFP and are preparing to go to our Commission in August. The current provider, Seneca, will continue to be the Wraparound contractor. The county expects full ramp up for the additional waiver slots by the end of December 2015. Additionally, Community Behavioral Health is issuing a small Wraparound contract focusing on families with children aged zero to five. This contract will serve a small number of child welfare clients. That contract is being finalized and we are planning to serve ten families the first year of implementation.

Santa Clara County CWS

Staff Required: All child welfare social workers, supervisors and managers will be expected to utilize elements of SOP in some form. This would translate currently to approximately 359 social workers (269 case carrying social workers and 90 non-case carrying social workers), 56 social work supervisors and 19 managers. There are also approximately 34 social worker I's who do not carry cases and who support the case carrying social workers. These numbers are prior to any additional requests for social work positions.

Staff Roles: The social workers, supervisors and managers will all be implementers of SOP. The supervisors and managers will be expected to coach SOP to staff and the social workers will be expected to practice child welfare utilizing SOP tools and concepts.

Qualifications: The case carrying social workers are primarily Master's level staff (primarily MSWs). The supervisors and managers are all MSW level staff. The social worker I's are Bachelor's level staff.

Staffing Levels: The Department is looking to add some social worker positions back into the infrastructure after several years of cutting positions and not hiring staff during the late 2000s and early 2010 years.

Reorganization: Yes, some staff will need to be hired to facilitate be the implementation, as well as to rebuild the Department's infrastructure. However, it is not anticipated that any reorganization will be necessary for the purposes of the Well-Being Project.

Santa Clara County PD

Staff Required: Wraparound Services: One Deputy PO is assigned to each youth. Each youth has a team assigned, which is operated through several contracted Wraparound provider: one Program Manager, one Facilitator, one Family Specialist,

and one Parent Partner assigned per youth who participates in Wraparound. Currently Santa Clara County has approximately 80 youth receiving Wraparound services involving approximately 43 Deputy POs.

Staff Roles: Wraparound is designed to deliver strength-based needs-driven services therefore it is important for the Deputy PO to work in tandem with the Wraparound team, attend family/team meetings, spend time in the youth's home, and work closely with the child's caretakers/guardians. The Deputy PO collaborates with the Wraparound team to develop joint case plans that address all life domain areas (Behavior, Safety, Legal, Restitution, and Respite). These duties are in addition to conducting field visits, checking attendance and educational progress and contacting the youth at home or at school to ensure follow up with other treatment or services referrals. Contract Providers: The Wraparound Contract Provider will have a Clinical Program manager assigned to administer and supervise the overall program, and approve team decisions. Facilitators will supervise the family specialist, plan and coordinate family team meetings, and write service plans and present them to the community Wraparound team for approval. The Family specialists carry out the service plan. They are the front-line staff who provide services in the family's home. Generally, specialists are younger than other staff members and use this to their advantage in establishing relationships with youth in the program. Family specialist engages youth in prosocial activity is a large part of their effort. Parent partners are those that have successfully used Wraparound services. As parents of youth that have experienced with the child welfare or juvenile justice systems, they are uniquely able to gain the trust of new parents participating in the program. Parent Partners provide parents with emotional support and teach parenting skills. Parent partner will link parents to community resources to bridge the gap in their support networks. Parent partners may also represent parents' perspectives in meetings with the program and other service systems.

Qualifications: The Deputy PO has a minimum of a Bachelor of Art/Science degree. They have been trained in Evidence Based Practice (EBP), Brief Intervention Tools (BITS) that help staff effectively address key skills deficits with youth, Motivational Interviewing, Cultural Diversity, Ensuring Fairness and Respect for LGBT youth in the Juvenile Justice System, and Crisis Diffusion. In addition, the DPO utilizes the Juvenile Assessment Intervention System (JAIS) to identify risk and criminogenic needs of youth in order to develop an effective supervision strategy. Contract provider staff: Facilitators have masters' degrees and are licensed clinical social workers or in clinical supervision. They have experience in working with youth with complex needs including severe emotionally disturbed and/or residential setting. Facilitators are trained to administer the Child and Adolescent Needs and Strength (CANS). It is an assessment strategy that is designed to be used for decision support and outcomes management. Family specialists have a bachelor's degree, but those who do not have a degree do have previous experience working with youth. Parent partners require direct experience as the parent or caregiver of a special needs child. In general, all staff should have experience in family and group setting, understand Wraparound philosophy-family centered and strength based approach, and sensitivity to family culture.

Staffing Levels: We are in the process of assigning several additional staff to carry a probation caseload of only youth receiving Wraparound services. Wraparound services are available to staff in various units and are not all centrally located or carry only Wraparound cases.

Reorganization: Deputy POs will be reorganized to meet the needs of the demonstration project. With respect to the Wraparound providers, some staff may need to be hired. We are currently reviewing our contracts for a possible contract addendum to serve the added population and provide payment for youth in detention for short stays if already engaged in Wraparound services and to cover the cost of a 30-60 day period when youth are in our Ranch program pending re-entry with Wraparound services.

Sonoma County CWS

Staff Required: One child welfare social worker staff at a time, across programs (emergency response, placement, adoptions). Sonoma County does not have a lot of reinvestments funds and has already increased staff and contracted services in anticipation of available funding. Therefore, their reinvestment fund balance is expected to be low or in the red. They already hired the additional staff we anticipated we would need to implement SOP.

Staff Roles: Direct service provider in support of harm reduction and safety network development.

Qualifications: Child welfare staff have Master degrees in Social Work and all Social Workers will be trained in SOP over the next year.

Staffing Levels: There are currently enough staff with the appropriate characteristics to conduct the interventions.

Reorganization: No, however child welfare agency will use reinvestment funds to hire additional staff. Additionally, probation is expanding its population served by external contractors. Sonoma County has trained or is in the process of training a total of 112 social workers, supervisors and managers.

Sonoma County Probation

Staff Required: All Juvenile Probation staff are required to be trained on case planning and identifying youth in need of Wraparound services; however, five staff are identified as Wraparound or services akin to Wraparound officers. Three of these staff are trained specifically in the Wraparound Model and will be supervising delinquency caseloads applying Wraparound standards/model. The two additional officers are assigned to caseloads of youth with mental health issues and the treatment team follows Wraparound principles (i.e., family centered, team based, strength-based, individualized) to deliver services. The provider is contracted through Behavior Health and is paid for through Medi-Cal. They receive training specific to working with youth with mental health issues, which includes training on how to be part of a mental health

treatment team. Since these caseloads adhere to Wraparound principles, these PO's will participate in training specific to the Wraparound Model in the fiscal year 2015.

Staff Roles: Caseloads of these staff should be the primary focus of the evaluation, and the staff consulted to determine supervision methods, fidelity to model, and any other factors impacting outcomes with these youth and their status on supervision.

Qualifications: Basic qualifications and KSAs for DPO III are attached for your perusal. We have trained Wraparound/ACT/PRIDE staff twice on IVE and R/C identification, with ongoing training planned. Placement CORE may be used, case planning training through UC Davis Extension and the Annual Wraparound Seminar are likely trainings for these staff. These five staff are assigned to a specialized unit supervised by a Probation Supervisor who is well versed in Title IV-E, Wraparound, Placement, case planning and probation case management.

Staffing Levels: Currently there is a sufficient number of PO IIIs supervising R/Cs and Wraparound cases. Should the Court wish to expand services we will need to identify resources to support allocation of additional positions.

Reorganization: The DPO III in the third Wraparound position has been hired and recruitment is under way for the ACT caseload DPO. All other positions in the specialized unit have been selected and assigned. As mentioned above, caseloads and functions have already been reorganized into a specialized Wraparound Unit.

Staffing and Reorganization Updates

Alameda

- Alameda DCFS anticipates needing to hire additional Child Welfare Workers and coaches to fully implement SOP. However, as DCFS is in the early stages of SOP implementation, the exact numbers and types of positions that will be needed are unknown at this time.

- The ACPD does not need to hire additional staff at this time.

Butte

- CWS: Children's Services has hired or reorganized the following staff to meet the needs of the demonstration: one FTE Administrative Analyst; two FTE Social Workers for the Quality Assurance Unit; and one FTE Social Worker for the Kinship Support Services Program.

- Probation: It is expected that an additional PO will need to be added to assist with the case management of the Wraparound families. The needs of these families have proven to be more complex than initially expected and in order to maintain fidelity with the Wraparound model, and serve the number of families in need, an additional PO will need to be added.

Lake

- CWS: Does not need to reorganize staff.
- Probation: Need a full time PO for the Wraparound caseload.

Los Angeles

- CWS: As stated above, DCFS is projecting that all 1,000 new staff will be hired, trained and have a full caseload by February 26, 2016.
- Probation: The department does not need to hire additional staff at this time.

Sacramento

- CWS: A total of 24 FTEs was added to CPS under the Waiver plan.
- Probation: 12 Positions were added in December, which have been filled. Three positions were just approved by the Board of Supervisors and those have not been filled. The Waiver program is estimated to serve approximately 154 youth annually with 70 designated for Wraparound, it appears the Department should have sufficient staffing to maintain a caseload of 20 per officer. The Department will continue to review the Officer's caseload ratios to determine if an increase of staffing capacity is needed. In reference to the service providers, they are in the processing of hiring qualified employees to support the youth who enter into the Waiver Program.

San Diego

- CWS: Reorganized staffing to support SOP coaching and our mental health component, which in San Diego we call Pathways to Well-Being. The department is in the process of adding additional contracts, fiscal staff, data staff and policy staff to help support the waiver.
- Probation: Has re-organized our staff to allow for the assignment of a Supervising and Senior PO to oversee the implementation of the Waiver. The department also has re-assigned duties of existing Deputy PO staff to serve as the Wraparound liaison and referral agent; also needs to either hire or re-organize one- two staff to meet the need for an administrative analyst to assist with data collection, monitoring and evaluation.

San Francisco

- CWS: San Francisco has created some new positions to support the infrastructure for the waiver, as well as the specific interventions. These include the Implementation Coordinator and internal coaches to support SOP practice.

- Probation: SFJPD will be hiring an IV-E coordinator for all aspects of ensuring compliance and to monitor implementation and facilitate processes under the waiver. An IV-E coordinator was necessary previously, however, with the additional reporting and coordination and implementation efforts, it will be necessary to assure that one person is attentive to all aspects of IV-E and the waiver.

Santa Clara

- CWS: The department is in the process of hiring a Management Analyst Program Manager and a Project Manager. There are no reorganization or other changes anticipated.

- Probation: The FPU, which consists of case carrying POs supervising youth with Wraparound services. Effective July 20, 2015, two additional POs were transferred to the Family Preservation Unit totaling six POs.

Sonoma

- CWS: Sonoma funded an additional two social workers dedicated specifically to SOP. Recruitment of these positions is currently underway. Additionally, Sonoma County added six new social work positions to be added to adoptions, permanency planning and family maintenance in anticipation of increased workload associated with SOP.

- Probation: Sonoma County Probation has hired a DPO IV (Supervisor level position) to supervise all functions within the newly created “Wraparound Unit”, as well as another DPO III to supervise the new Wraparound caseload addressing supervision requirements of this ‘high needs’ population. A .5 FTE Account Clerk position was also added to handle increased accounting workload associated with participation in the Well-Being Project.

ATTACHMENT #7

Distribution Methodology Sample #1

LAKE

Well-Being Project

Methodology for calculating Probation funds

For the last several years, the Probation Department's expenditures have been approximately 25% of the total program costs, with the remaining 75% spent by the Social Services Department.

For the Well-Being Project our departments have decided to use this ratio as our methodology for determining the amount of base funding, as well as investment funds, available to the Probation and Social Services Departments.

While the ratio of 25% for Probation and 75% for Social Services is being used a baseline moving into this project, both departments also understand the need to ensure all Project costs are adequately covered and all investment funds are reinvested appropriately.

Distribution Methodology Sample #2

BUTTE

ATTACHMENT A

There are two components of the Title IV-E budget, maintenance and administrative costs. All maintenance costs shall be claimed by DESS as all county foster care payments are claimed through the DESS County Expense Claim. Administrative costs shall be distributed based on Project fiscal provisions (consistent with the fiscal methodology in the Federal Terms and Conditions).

Current breakdown is calculated as follows:

- DESS – 100% of Maintenance Costs
- DESS – 87% of Administrative Costs
- Probation – 13% of Administrative Costs

By mutual agreement of both DESS and Probation, funding percentages can be adjusted, as needed, by 5% during the life of the Project.

ATTACHMENT #8

ACSSA

Evidence Based Parent Training Program (such as Triple P)

Description: Evidence Based Parenting programs are shown to reduce entries into the child welfare system. By implementing an evidence based parenting system, families will receive a level of service appropriate to their specific needs, allowing for decreased entries into the child welfare system, and increased reunification for those families that do enter the child welfare system.

Eligibility: Children and families involved in, or at risk of involvement with, the child welfare system.

Referral Process: Alameda County will contract out for a currently unselected Triple P provider. The county anticipates the releasing the Request for Proposal (RFP) in early 2016.

Delivering Service: This intervention will be contractor provided. By the final year of the project, 100 percent of Alameda County children and families involved in the child welfare system will participate in this intervention.

Fidelity: Child welfare worker surveys one year post implementation. The county will also utilize family feedback. County will be able to provide case level data.

Implementation Timeframe: Alameda County is planning to release an RFP for a contract provider in early 2016, with services to begin in July 2016. The county anticipates all interventions to be implemented by July 2016. The services and needs for each intervention will be continually evaluated, and adjustments will be made as necessary throughout the Waiver.

Outcomes: Increase parents' competence in promoting healthy development and managing common behavior problems and developmental issues. Reduce parents' use of coercive and punitive methods of disciplining children. Increase parents' use of positive parenting strategies in managing their children's behavior. Increase parental confidence in raising their children. Decrease child behavior problems (for families experiencing difficult child behavior). Improve parenting partners' communication about parenting issues. Reduce parenting stress associated with raising children. Reduced entries into the child welfare system. Increase the percent of children reunified safely, permanently and timely. Reduce the number of children who must re-enter foster care.

Commercially and Sexually Exploited Children (CSEC)

Description: Evidence Based Parenting programs are shown to reduce entries into the child welfare system. By implementing an evidence based parenting system, families will receive a level of service appropriate to their specific needs, allowing for decreased

entries into the child welfare system and increased reunification for those families that do enter the child welfare system.

Eligibility: Contracts will need to be developed for: development of a CSEC training tool; Services targeted to CSEC youth; and, training for DCFS staff regarding identifying and serving CSEC youth.

Referral Process: Contracts will need to be developed for: development of a CSEC training tool; services targeted to CSEC youth; and, training for DCFS regarding identifying and serving CSEC youth.

Delivering Service: Services for CSEC youth will be a combination of county-provided and contractor-provided services.

Fidelity: Youth and Community Partner feedback, Evaluation of services provided to CSEC youth (tools to be developed). County will be able to provide case level data.

Implementation Timeframe: During project year one (2014-2015), ACSSA will need to develop its implementation plan. In the second year (2015-2016), Alameda will: train staff; develop a CSEC youth screening tool; coordinate with partner agencies in developing CSEC multidisciplinary teams; develop tools and resources for caregivers of CSEC youth; and, contract for direct services for CSEC youth.

Outcomes: Increase the number of CSEC advocates. Increase availability of intensive foster care placements. Create a provider network for caregiver of CSEC youth, to provide support and technical assistance. Create targeted recruitment efforts for caregivers of CSEC youth. Incorporate information about CSEC into child abuse prevention efforts, including mandated reporter training. Develop and implement a tool for the screening of CSEC youth that informs the development of safety plans. Conduct a census count of all foster care involved CSEC youth. Develop and implement trauma informed practice for CSEC youth. Add additional child welfare staff as appropriate. Identify system-wide best practices for providing services to CSEC youth Increase the number of services available to CSEC youth.* Increase coordination of services available to CSEC youth within Alameda County.* Develop resources and trainings for caregivers of CSEC youth.* Create a Multi-Disciplinary Team for CSEC youth with DCFS' partners including: Probation, Health Care Services, Behavior Health Care, District Attorney, Public Defender, Law Enforcement agencies and service providers.* (*These activities are included in SB 855, which establishes the Commercially Sexually Exploited Children Program effective January 1, 2015.)

ACPD

Collaborative Court

Description: Collaborative Court focuses on providing an alternative disposition for youth with high mental health needs and emphasizes family engagement. This intervention is a team approach involving key stakeholders that include POs and intensive case management services delivered by a community provider. Services are

aimed to reduce out-of- home placement for this specific population. Collaborative Court has been underutilized for the female population and it is intended to increase utilization as an effort to avoid out-of-home placement and increase family engagement.

Eligibility: Youth at risk of removal to out-of-home placement with high mental health needs.

Referral Process: The Public Defender's Office identifies and refers clients who can benefit from these services and advocates for them to be accepted to the program. Once the child is accepted into the program, the Public Defender's Office will continue to work in collaboration to develop an individualized plan for the youth and his or her family, appear with the youth at all court appearances and continue to advocate for the best interest of the youth until completion. The collaboration between the Public Defender's Office, Court, Behavioral Health Care Services, District Attorney, Probation, and civil advocates is an excellent program for children who have found themselves in the delinquent system and are at risk of being removed from their families.

Delivering Service: POs and clinicians are dedicated to providing community support and services for youth and provide critical input to the Court on a weekly basis. This weekly, dedicated Court docket exists for youth involved in the program. Youth and families receive intensive case management services through a contracted community provider for up to 12 months.

Fidelity: Child and Adolescent Needs and Strength (CANS) screening, Youth Level of Service/Case Management Inventory (YLS/CMI), and Probation Risk Assessment. County will be able to provide case level data.

Implementation Timeframe: Collaborative Court is an existing intervention, so implementation phase is not applicable.

Outcomes: Placement avoidance and reduced recidivism; improved family functioning

Parenting with Love Limits (PLL)

Description: Services will be outcome-driven aiming to reduce a youth's overall length of stay in placement, improve timely family reunification, reduce recidivistic behaviors, reduce returns to placement, and enhance re-entry services for youth returning home and to their communities. Connections with family shall be made in order to help facilitate and improve youth and family relationships for timely reunification.

Eligibility: Youth ages 14 to 17, who are in need of continued supportive transitional services returning to reside with their caregiver/parent/guardian, and youth at risk of removal to out-of-home placement.

Referral Process: RFPs will be issued with contractor being a Community Based Agency who will be staffed and ready to receive training on PLL with the goal of serving 25 youth in the first year of implementation

Delivering Service: PLL combines group and family therapy to treat youth and help families reestablish adult authority through consistent limits while reclaiming a loving relationship. It includes six multi-family sessions. Families will receive up to 20 intensive therapy sessions in a home-based setting to practice the skills learned in the group setting.

Fidelity: CANS, YLS/CMI, and Probation Risk Assessment. County will be able to provide case level data.

Implementation Timeframe: PLL's anticipated implementation period is September 2015, as soon as a provider is established post review of applications received from recently held bidders' conference. Evaluation with RFP set for the week of June 1, 2015.

Outcomes: PLL is an evidence-based model that has been proven to increase family engagement, increase successful reunification, and reduce foster care re-entry, while being a strategy aimed to reduce recidivism. Improving outcomes for delinquent youth in out-of-home care, and community based strategies for re-entry youth transitioning home after being in out-of-home care.

Butte County CWS

Kinship Support Services Program (KSSP)

Description: The goal of this program is to further strengthen a family's ability to maintain a supportive and stable environment for a child in their care.

Eligibility: Develop KSSP contract (anticipated contract timeline of July 1, 2016, through September 30, 2019). Contracted services will include training, recruitment, retention, and other support activities for relative caregivers. Participation in the County Self-Assessment (CSA) will help identify need and strategies for KSSP.

Referral Process: Develop KSSP contract (anticipated contract timeline of July 1, 2016, through September 30, 2019). Contracted services will include training, recruitment, retention, and other support activities for relative caregivers. Participation in the CSA will help identify need and strategies for KSSP.

Delivering Service: Develop KSSP contract (anticipated contract timeline of July 1, 2016, through September 30, 2019). Contracted services will include training, recruitment, retention, and other support activities for relative caregivers. Participation in the CSA will help identify need and strategies for KSSP.

Fidelity: Utilize all aspects of Continuous Quality Improvement (CQI) including analysis of data reports from CWS/CMS (including Business Objects), Safe Measures, University of California (UC) Berkeley data (C-CFSR reports), contractor reports, case reviews, surveys, and interviews. County will be able to provide case level data. Case level data for KSSP program will be collected by the contractor including but not limited to: number of caregivers served; number of youth served; racial demographics for both caregivers

and youth; and, narrative description of activities conducted by contractor on behalf of the KSSP Program.

Implementation Timeframe: The RFP for KSSP Program is to be issued by June 1, 2015 with anticipated contract start date of October 1, 2015. Social worker to be identified to work with new program by October 1, 2015. Expected date for full implementation: January 1, 2016.

Outcomes: Short-term outcomes include earlier family engagement and family finding efforts, increase placements with kin caregivers, and provide appropriate supportive services. Long-term outcomes include improvement in the following Federal Outcome Measure C4.1 Placement Stability (8 days to 12 months in care).

Supporting Our Families in Transition (SOFT) Program

Description: Expansion of the SOFT Program will incorporate specific Wraparound principles and elements to the SOFT Program to provide additional therapeutic services around participating families. This enhancement will allow for Wraparound principles to be incorporated in the existing program, and to allow for more prevention services to be provided.

Eligibility: Children and their families as they transition from Family Reunification to Family Maintenance, and will add prevention based services for families prior to intervention in year three.

Referral Process: Dependency Court System.

Delivering Service: Develop enhanced SOFT Program contract(s) (anticipated contract time frame of July 1, 2015, through September 30, 2019).

Fidelity: Utilize all aspects of CQI including analysis of data reports from CWS/CMS (including Business Objects), Safe Measures, UC Berkeley data (C-CFSR reports), contractor reports, case reviews, surveys, and interviews. County will be able to provide case level data.

Implementation Timeframe: Current contracted program model will continue until June 30, 2016. RFP will be issued in spring 2016 to add enhanced strategies for fiscal year 2016/2017. Expected date for full implementation is January 1, 2017.

Outcomes: Short-term outcomes include increased family stabilization, shortened time to reunification, and decreased higher level of care. Long-term outcomes include improvement in the following Federal Outcome Measures: S1.1 No Recurrence of Maltreatment (increase); C1.2 Median Time to Reunification (decrease); C1.4 Reentry Following Reunification (decrease); and, PR Entry Rate (decrease).

Lake County CWS

Family Wraparound

Description: Wraparound Principles will be blended with the SOP Model to deliver collaborative and family based services. The waiver project will increase the array of services available to children and families involved in the child welfare system, allowing children to remain or return safely to the care of their families. It will provide more intense and specialized casework to engage families, and increase child safety and wellbeing of children and families.

Eligibility: In Lake County, Family Wraparound applies Wraparound principles and philosophy through a family instead of identified client or individual. Therefore, a need could be represented anywhere within a family context and not specifically through a child or youth. Family Wraparound will be used to prevent out of home placement and to provide after care services to families who are reunifying, with the goal of shortening time to reunification and to prevent reentry.

Referral Process: Services will be individualized based on the families identified needs and strengths. A significant way of addressing these needs will be through referral and collaboration with other agencies and resources. There will be a focus on connecting these families with services, organizations, and sustainable community supports that will be in place when the family graduates.

Delivering Service: The Family Wraparound Team will work in collaboration with the Family Maintenance social worker. Either it can be a voluntary or court ordered intervention.

Fidelity: The Wraparound Fidelity Index (WFI) will be utilized by RCS. CWS/CMS Special Projects codes will be used to track data and the County will contract with a local evaluator to create additional evaluation and tracking tools to be determined. County will be able to provide case level data.

Implementation Timeframe: Lake County has started both the Probation and the CWS Family Wraparound intervention. Probation has two families receiving services, two new referrals pending, and CWS has three families receiving services. It is anticipated the referrals will be quickly increasing. Lake County has a referral process in place and is meeting regularly to finalize program protocols, flow charts, and data collection. Weekly Wraparound case management meetings are being held to coordinate services.

Outcomes: Short-term outcomes include increased protective factors for families, including parental resilience, social connections, knowledge of parenting and child development, concrete support, and social and emotional competence of children. Long-term outcomes include decreased in recurrence of maltreatment, decreased entries and reentries into foster care, reduced time to reunification, improved child and family wellbeing, and improved permanency.

LACDCFS

Enhance Prevention and Aftercare

Description: Provides alternative services in the area of prevention and family-centered practice. These services will increase safety, improve permanency outcomes and timelines, and improve child and family well-being.

Eligibility: The target population is families in Los Angeles County that are at high risk of child abuse or neglect and could benefit from supportive services to strengthen their protective capacities. Prevention and Aftercare will be able to provide services for children who are not otherwise eligible to be served under Title IV-E. Previous implemented programs, such as Prevention Initiative Demonstration Project (PIDP), are part of the Prevention and Aftercare contracts. This intervention will be implemented countywide via service provider area-based contracts and will also target the American Indian and Asian/Pacific Islander communities.

Referral Process: Prevention Services are available to self-referred families as well as community stakeholders, including schools, hospitals, and law enforcement agencies in instances when child abuse and/or neglect has not occurred, but a family is in need of services. Aftercare Services are designed to prevent reoccurrences of child maltreatment

Delivering Service: Prevention and Aftercare is a program of service strategies that are provided, in their entirety, by contractors and sub-contractors. The additional $5 million in funding from the Title IV-E would support this program with specific emphasis on the evidence-based practices of Supporting Father Involvement, Safe Care, and Parents as Teachers.

Fidelity: The Los Angeles County DCFS Datamart will be used to assess outcomes. There is a potential that the Family Assessment Form (FAF) may be used by these contractors to measure changes in the areas of parental capacities/family strengths. Los Angeles County will not be able to provide case level data. As with many Prevention services, the county may not know which families receive services since they may not have had an open case or referral.

Implementation Timeframe: Fully implemented.

Outcomes: The short-term outcome is to build families' strengths in the areas related to the Protective Factors: parental resilience, social connection, knowledge of parenting and child development, increase economic opportunities and concrete supports, and children's social and emotional development. The long-term outcome is to reduce the children and families that need to receive services from county CWS.

Partnerships for Families (PFF)

Description: Provides alternative services in the area of prevention and family-centered practice. These services will increase safety, improve permanency outcomes and timelines, and improve child and family well-being.

Eligibility: The target population is DCFS referred families that have risk factors of high to very high and a closed referral disposition of inconclusive, with an emphasis on families with children five years or age or younger. An additional target population is community referred pregnant women who have the following risk factors for child maltreatment: young age (i.e., teen mothers), domestic violence, substance abuse, and mental health treated issues. This intervention will be implemented countywide via service provider area-based contracts and will also target the American Indian and Asian/Pacific Islander communities.

Referral Process: In general, the referral process for the DCFS-referred population starts within DCFS, when Emergency Response Children's Social Workers (ER CSWs) meet with and assess risk levels of families using the Structured Decision Making (SDM) Risk Assessment Tool. After deliberating with their respective Assistant Regional Administrator (ARA) about the family's appropriateness for PFF and the thoroughness of the assessment, an eligible family is passed to the Community Based Liaison (CBL). The CBL then makes contact with the PFF Collaborative lead agency and presents all relevant information. Referral sources for pregnant women vary, and include law enforcement agencies, hospitals, shelters, and self-referrals. According to two Key Informants, there are no formal relationships between the Initiative and institutions that refer pregnant women.

Delivering Service: First 5 LA currently manages this program. DCFS is scheduled to take over the management of the contract for PFF in Plan Year 2 of the Waiver extension. PFF is a program of service strategies that are provided by contractors and sub-contractors. PFF services are provided for six to 12 months and include the following case management services: linkage services, concrete services for basic family needs, targeted services for families with domestic violence, mental health services, substance abuse related needs, and access to early care and education. In addition, the contracted agencies shall engaged in both internal and external capacity building efforts, including achieving positive family outcomes and advocacy efforts to engage informal family supports and community members in the prevention of child maltreatment.

Fidelity: DCFS' Datamart will be used to assess outcomes. There is a potential that the Family Assessment Form (FAF) may be used by these contractors to measure changes in the areas of parental capacities/family strengths. County will be able to provide case level data

Implementation Timeframe: Partnership for Families services is still being provided by First 5 LA. Expected date for full implementation is July 1, 2016.

Outcomes: PFF is an evidence-based, short-term, family-centered intervention designed to diminish factors associated with child abuse and neglect. Short-term outcomes are enhanced family strengths in areas related to the Protective Factors (parental resilience, social connection, knowledge of parenting and child development, increase economic opportunities, and concrete supports and children's social and emotional development). The long-term outcome of PFF is the reduction of subsequent family involvement in DCFS.

LACPD

Functional Family Therapy

Description: Provides an evidence-based, short term and community-based therapy program. It engages the youth and family in recognizing negative behavior and relational patterns and providing skills training in problem solving, parenting, and conflict management.

Eligibility: The target population is probation youth residing in Los Angeles County returning home from suitable placement, or who are at imminent risk of out-of-home placement, and are between 13-18 years old. These are probation youth who are transitioning from residential placement to their home communities, including but not limited to those with co-occurring disorders, traumatized youth, and sex offenders. Youth enrolled directly into an alternative program upon discharge, such as Full Service Partnerships (FSP), or Wraparound, would not be included in this population. Eligibility criteria include: families that are willing to participate in treatment; youth who experience internalizing behaviors (e.g., depression), conflicts with family members, argumentative, fighting, school delinquent behaviors, destruction of property, talking back, and defiance; youth who must be placed in a stable and committed placement; youth with chronic, violent, delinquent behavior and with serious emotional problems; youth with history of drug and alcohol problems; and, youth with or without Medi-Cal are accepted.

Referral Process: Existing county contracts and two teams of in-house Deputy POs (DPOs).

Delivering Service: Services are delivered by two teams of in-house DPOs and two community-based contract agencies (SHIELDS for Families and Starview Community Services, Inc. which are utilized in cases where needs are not met in-house (e.g., due to staff capacity and language capabilities, etc.). Contracting timelines will coincide with the start of the fiscal year, subject to renewal for successive fiscal year periods thereafter for the duration of the Title IV-E Waiver Project and extension periods unless terminated. Specific services include: Sessions are conducted in the home, school, neighborhood, and community setting, and include the parents and the adolescent as well as other family members; services are available in English or Spanish; and, FFT is a short-term program lasting for a minimum of 12-15 sessions with at least one session per week.

Fidelity: The tools to be used include the Youth Outcome Questionnaire (parent report and youth self-report), Outcome Questionnaire, Client Services System (CSS), and the Los Angeles Risk and Resiliency Checkup (LARRC). Probation will evaluate the efficacy of FFT at specific intervals throughout the Waiver project period. Probation has implemented specific data management practices to measure fidelity of staff to the FFT model and the ongoing well-being of the youth and family. County will be able to provide case level data.

Implementation Timeframe: In Los Angeles County, all interventions have been implemented. The county is in the process of gathering data in order to track outcomes moving forward.

Outcomes: Expected short-term outcomes include improved mental health, improved family functioning, and reduced substance use. The long term outcomes include reduced reliance on out-of home care, reduced delinquent behavior, and reduced criminal recidivism.

Functional Family Probation (FFP)

Description: Utilizes a family-focused case management approach, working within the family as a platform to better manage crises, and refer youth to programs that will match their particular risks and needs, and offering strength-based supervision that is heavily informed by evidence-based research of "what works" in reducing recidivism.

Eligibility: The target population is Probation youth between 13-18 years old assessed as moderate to high risk.

Referral Process: Through the use of in-house DPOs, Probation will provide treatment services to Probation youth assessed as moderate to high risk.

Delivering Service: Services are provided by in-house DPOs and will not be contracted out.

Fidelity: The Department will utilize the Los Angeles Risk and Resiliency Checklist (LARRC). Probation will evaluate the efficacy of FFP at specific intervals throughout the Waiver project period. Probation has implemented specific data management practices to measure fidelity of staff to the FFT model and the ongoing well-being of the youth and family. County will not be able to provide case level data.

Implementation Timeframe: In Los Angeles County, all interventions have been implemented. We are in the process of gathering data in order to track outcomes moving forward.

Outcomes: The expected short-term outcomes include reduced caseload sizes, improved family functioning, and improved youth behavior. Long term outcomes include decreased rate of out-of-home care, reduced juvenile justice expenditures, and decreased rates of probation violations, arrests, and felony recidivism.

Sacramento County CWS

Family Finding and Kinship Support

Description: This intervention allows Sacramento County to find family members for children whose kin has not been previously identified. Via family engagement, placement support, and individualized case plans, children will have increased opportunity to achieve permanency with newly identified kin. This will lead to increased well-being of child and family, stronger family bonds, and long-term decrease of reentry into foster care. Given the cost of out of home placement, per child, per year, the family finding and kin support initiative will generate savings in the short term and improve outcomes for children in the long term.

Eligibility: This intervention will impact all children in out-of-home placement for whom a family member has not been identified.

Referral Process: Family Finding is an enhancement of current efforts. Sacramento County contracts with two community-based providers (Lilliput Children's Services and Sierra Forever Families) to conduct more extensive searches for relatives. The two providers have the resources and expertise to go beyond what we are able to do at the county level. With added capacity, the services provided through these providers will be more widespread throughout our Permanency program. There will be identified Social Workers within CPS who will partner with Sierra Forever Families social workers in a teaming approach to locating permanency for children.

Delivering Service: Both providers will have added capacity to serve more children and youth. One provider will do intensive family finding for children who do not have a permanency plan and will also provide intensive services when needed. Upon location of a relative and/or permanent care provider, they will provide the services and supports needed to secure the permanent plan and support its success. The other provider will provide two tiers: one will support relatives who are at risk of entering the child welfare system; the other tier will support relatives who have a foster child placed in their care. The agency will support the permanency plan and again provide whatever services are needed to increase the success of that plan. Both providers in different capacities will provide the Kinship Support Services. Kinship Support will occur to prepare relatives and NREFMs prior to placement of children in their home. It will also occur during the time the child is placed in their home in the form of support groups and assistance from Lilliput Children's Service. The service will also provide support through the process of acquiring permanency for the child.

Fidelity: Data will be collected at the provider level as well as county level. We will utilize CWS/CMS and Safe Measures to monitor implementation, document efforts, and extract data related to outcomes. County will be able to provide case level data.

Implementation Timeframe: These contracts are increasing the capacity of each agency and making some changes to services presently offered. The agencies are

hiring new staff and service planning is taking place in partnership with CPS. The expected date for full implementation is June 1, 2015.

Outcomes: In the short term, this intervention will increase the number of children/youth achieving permanency. The long-term goal is to reduce length of stays in foster care.

Prevention Initiative

Description: This intervention is aimed at increasing child safety without over reliance in out-of-home care and will decrease entries and re-entries into foster care.

Eligibility: Families (biological, foster, adoptive, and related caregivers) with children ages six and older.

Referral Process: During 2014/2015, 234 families referred will be contacted to provide resources and linkages to community resources; FRCs will receive 495 unduplicated referrals (families) to parenting education workshops and other support services; 135 unduplicated parents will participate in Parenting Education Workshops; 135 pre-post assessments completed; 495 youth will participate in youth activities offered by FRCs; 108 unduplicated parents will be served by FRC home visitors; Home visitors will make 1,080 total home visits; 18 unduplicated families will receive joint visits with CPS social workers; 36 unduplicated families referred for aftercare services will be contacted; 90 unduplicated children will be provided referrals, age appropriate learning activities and school support. A comprehensive list of deliverables has been included in the contract with provider. In subsequent years, 360 families referred will be contacted to provide resources and linkages to community resources; FRCs will receive 900 unduplicated referrals (families) to parenting education workshops and other support services; 450 unduplicated parents will participate in Parenting Education Workshops; 360 unduplicated pre-assessments and 270 unduplicated post-assessments completed; 900 duplicated youth will participate in youth activities offered by FRCs; 108 unduplicated parents will be served by FRC home visitors; Home visitors will make 3,960 total home visits; 45 unduplicated families will receive joint visits with CPS social workers; 72 unduplicated families referred for aftercare services will be contacted; 180 unduplicated children will be provided referrals, age appropriate learning activities and school support. A comprehensive list of deliverables has been included in the contract with provider.

Delivering Service: Sacramento CWS is contracting with the Child Abuse Prevention in order to provide the following services to families (including biological, foster, adoptive and related caregivers) with youth ages six and older: effective parenting education (Nurturing Parenting Program), crisis intervention services, differential response services, health promotion, and Information and Referral Resource Specialist. These services will be provided via the Birth and Beyond Family Resource Centers (FRCs). This contract is effective as of the second half of fiscal year 2014-2015 (January 1, 2015 thru June 30, 2015) and will be renewed for subsequent fiscal years based upon performance levels.

Fidelity: Adult Adolescent Parenting Inventory (AAPI) will be used to track outcomes. External evaluator will maintain Access Database for data. The outcomes will be merged quarterly with the Access Data base. Contractor shall continue to ensure model fidelity through quality assurance, technical assistance, and overall program evaluation for the services to be provided. County will be able to provide case level data.

Implementation Timeframe: It is expected that at the start of the next fiscal year (July 1, 2015) the nine FRCs will be fully operational and be fully implementing the expanded services Prevention Initiative Services made available through the Title IV-E Waiver funds.

Outcomes: 90% of parents will improve their parenting knowledge and skills; 90% of parents with a history of CPS referrals will have no new referrals for child abuse or neglect; 90% of parents with no history of CPS referrals will have no new referrals for child abuse or neglect; children are safe and healthy in their homes; and, parents are nurturing and self-sufficient.

Sacramento County PD

Multisystemic Therapy (MST)

Description: Proven effective with chronically delinquent and violent juveniles across many clinical trials, MST is a family and home-based treatment that strives to change how youth function in their natural settings – home, school, and neighborhood – in ways that promote positive social behavior. This interventions focuses on improving a family's capacity to overcome the known causes of delinquency, introduces youth to pro-social peers and activities, and promotes the parents' ability to monitor and discipline their children. MST assists children at-risk of out of home placement to remain in the home and function more effectively in their community. This intervention is an evidence-based intervention recognized as a Model Program by the Blueprints for Violence Prevention and has been found by the Washington State Institute of Public Policy to create substantial cost-savings, which far outweigh the program cost.

Eligibility: Youth ages 12 through 17 with conditions including conduct disorders, mood disorders, anxiety disorders, adjustment disorders, and factors "pulling" youth out of their homes (e.g., gangs, prostitution, runaway issues). Target youth have elevated need scores in any one of the following domains on the PACT: Current Relationships, Attitudes/Behaviors, Mental Health, or Family Dynamics.

Referral Process: In the first plan year, Sacramento will renew/renegotiate contract with River Oak for MST as needed (October 2014 to present); review referral process and expectations with Probation and River Oak staff (October 2014 to April 2015); update any policies and procedures after a meet and confer with union, as necessary (October 2014 to present); engage in routine meetings with Probation and River Oak to monitor program implementation and contract expenditures and adjust as necessary (October 2014 to present); ensure data tracking and reporting mechanisms are in place to support evaluation (October 2014 to October 2015).

Delivering Service: Probation currently contracts with River Oak (which has been operating in Sacramento for over 40 years) and has the ability to easily renew/expand its contract as needed through June 2015, at which time a new contract will need to be entered into. No contracting delays are anticipated due to the long-standing nature of this contract. River Oak Center for Children (River Oak) is the only locally certified provider of MST. In March 2009, River Oak's MST team was the only juvenile program in the State of California awarded the California Council on Mentally Ill Offenders (COMIO) 2009 Best practice award. Therapists have small caseloads of four to six families, work as a team, are available 24 hours a day, seven days a week and provide services at times convenient to the family. MST therapists concentrate on empowering parents and improving their effectiveness. Specific treatment techniques used to facilitate these gains are integrated from those therapies that have the most empirical support, including behavioral, cognitive-behavioral and pragmatic family therapies. This family-therapist collaboration allows the family to take the lead in setting treatment goals.

Fidelity: PACT risk and needs assessments will assist with on-going determinations of appropriate programming for youth based on level of risk for recidivism and identified needs. Data needed to track and evaluate outcomes will be pulled from PACT reports and Probation databases such as the Probation Information Program (PIP), Juvenile Arrest and Referral System (JARS), and the Booking, Intake and Classification System (BICS) and DHHS databases such as CWS/CMS. River Oak will supply the short-term outcome information via its MST Program Implementation Reviews. River Oak has internal fidelity and quality assurance measures in place in connection with routine data submissions to its parent organization, MST Services, Inc.

Implementation Timeframe: Currently Sacramento County Probation has two providers who provide MST and FFT services. Contracts, for both providers, to be expanded to include identified Wraparound population. The expected date for full implementation is July 1, 2015.

Outcomes: Outcomes include reductions in arrests and convictions for new law violations and reduced detention/commitments in the Youth Detention Facility.

Functional Family Therapy (FFT)

Description: The FFT model has been successfully replicated in juvenile justice, mental health, and child welfare settings. FFT has three phases with specific areas of assessment, therapeutic goals and therapist skills that, when followed with fidelity and competence increase dramatically the likelihood of successful outcomes with clients. The Engagement Phase focuses on decreasing the intense negativity often characteristic of high-risk families. The Behavior Change Phase aims to reduce and eliminate problem behaviors through interventions such as skill training in family communication, parenting, problem solving and conflict management. The Generalization Phase aims to increase the family's capacity to use skills learned and community resources to help prevent relapse. FFT is an evidence-based intervention recognized as a Model Program by the Blueprints for Violence Prevention and has been

found by the Washington State Institute of Public Policy to create substantial cost-savings, which far outweigh the program.

Eligibility: Youth ages 11 through 17 who have elevated need scores in any one of the following domains on the PACT: Current Relationships, Attitudes/Behaviors, Mental Health, or Family Dynamics; and have factors "pushing" them out of their homes (e.g., parents, siblings or other family members). The target population may include youth with anti-social attitudes, values, and beliefs; impulsive behavior with poor problem solving skills; anti-social peer groups; criminality in the family; siblings in the home; or inconsistent or abusive parenting.

Referral Process: In the first project plan year, Sacramento County will renew/renegotiate contract with Stanford Youth Solutions for FFT as needed (October 2014 to present); review referral process and expectations with Probation and Stanford Youth Solutions staff (October 2014 to April 2015); update any policies and procedures after a meet and confer with the union, as necessary (October 2014 to present); engage in routine meetings between Probation and Stanford Youth Solutions to monitor program implementation and contract expenditures and adjust as necessary (October 2014 to present); and, ensure data tracking and reporting mechanisms are in place to support evaluation (October 2014 to October 2015).

Delivering Service: Probation has been contracting with Stanford Youth Solutions, a well-established local community based organization, to provide Functional Family Therapy for over seven years. The current contract with Stanford Youth Solutions ends June 2015, at which time a new contract will need to be entered into. No contracting delays are anticipated due to the long-term nature of this contract. FFT is a short-term, high intensity therapeutic intervention program designed to work with at-risk youth and their families. With an average of 12 sessions (in home or at a clinic) spread out over a three to four month period, FFT uses a strength-based treatment modality to promote protective factors associated with delinquent behaviors. FFT also helps empower those involved to look at how their actions impact themselves and those around them.

Fidelity: PACT risk and needs assessments will assist with on-going determinations of appropriate programming for youth based on level of risk for recidivism and identified needs. Data needed to track and evaluate outcomes will be pulled from PACT reports and Probation databases such as the Probation Information Program (PIP), Juvenile Arrest and Referral System (JARS), and the Booking, Intake and Classification System (BICS) and DHHS databases such as CWS/CMS. Changes in thinking and behavior will be measured at the beginning and end of treatment using the Youth Outcome Questionnaire (Y-OQ), Youth Outcome Questionnaire Self-Report (Y-OQ-SR), and How I Think (HIT) Questionnaire. Stanford Youth Solutions has internal fidelity and quality assurance measures in place in connection with routine data submissions to its parent organization, Functional Family Therapy, LLC. County will be able to provide case level data.

Implementation Timeframe: Currently Sacramento County Probation has two providers who provide MST and FFT services. Contracts, for both providers, to be

expanded to include identified WRAPAROUND population. The expected date for full implementation is July 1, 2015.

Outcomes: Expected short-term outcomes include: increases in youth exhibiting desired changes in thinking and behaviors and the number of youth able to remain in their homes. Expected long-term outcomes include reductions in arrests and convictions for new law violations and reduced detentions and/or commitments in the Youth Detention Facility.

San Diego County PD

Family Finding

Description: The Family Finding process is designed to engage families, to improve child well-being, and decrease recidivism by increasing the number of youth who are placed with relatives who would otherwise be placed in foster care.

Eligibility: The population that would not be served without the waiver would be those high risk and high needs youth who are not yet at the immediate point of imminent risk for removal, but without more intensive services and stabilization might escalate to an imminent risk youth.

Referral Process: San Diego Probation is still working on their internal processes in defining a set referral process strategy and will update the CDSS once those discussions and implementation are complete.

Delivering Service: Regarding the activities for years two through five, approximately 15-20 youth will be targeted yearly, to receive Family Finding services. During this time, Family Finding/Engagement Staff will utilize mobility maps, Genograms, eco-maps, safety circle, and other tools with youth to identify connections. Family Finding will be utilized to connect or reconnect youth with their parents or other extended family members for placement. Year one activities will include: researching evidence-based practices related to family finding and kinship support; collaborating and consulting with other agencies/counties; collaborating with the Health and Human Services Agency to procure a contract for services. Year two activities will include: implementing services; identifying a family finding/kinship support liaison within the Placement Division; developing policy and procedures regarding the identification and referral of appropriate youth; developing and implementing training for probation staff regarding family finding practices, permanency planning and kinship support; developing computer systems enhancements in order to track and capture qualitative and quantitative data; monitoring referrals and case plans; developing and implementing communication strategy internally and externally with stakeholders; ensuring family feedback is included in the CQI process. Year three activities will include: completing the evaluation of year two; providing on-going training regarding family finding practices, permanency planning, kinship support, as well as the identification and referral process; ensuring monitoring and tracking systems are in place and capturing essential data and information; evaluating outcomes and savings; ensuring family feedback is included in the CQI

process. Year four activities will include: completing the evaluation of year three; evaluating outcomes, savings and reinvestment strategies; developing sustainability strategies; continuing with internal and external stakeholder communication; ensuring family feedback is included in the CQI process. Year five activities will include: completing evaluation of year four, planning for sustainability.

Fidelity: Information will be entered in the Probation Case Management System, Probation, and CWS/CMS legal system of record. Assessment, case planning, and case management information will also be generated using the San Diego Risk and Resiliency Check Up (a validated risk / need assessment tool). Additional variables will be tracked in an excel spreadsheet if necessary. County will be able to provide case level data.

Implementation Timeframe: SDCP is currently waiting ratification of a new contract with the family finding provider and county HHSA. Full implementation date is unknown.

Outcomes: Short-term outcomes include faster transition out of the foster care system, placement stability, a stronger sense of belonging, long-term outcomes, increased reunification rates, and decreased re-entry rates of youth into placement.

San Francisco County CWS

Wraparound for Children Not Eligible for SB 163 Wraparound

Description: Wraparound's casework approach should improve family engagement, participation in case planning, thereby reducing the need for foster care and improving permanency timelines when foster care cannot be avoided.

Eligibility: Children not eligible for SB 163 Wraparound. Pending contract, expand current contract to include younger children, children not at risk of group care, non-court cases, and non-adjudicated cases.

Referral Process: The current contract for SB 163 will be up for renewal in 2014/15. San Francisco will reissue an RFP.

Delivering Service: The current contract for SB 163 will be up for renewal in 2014/15. San Francisco will reissue an RFP.

Fidelity: The County will use a Special Objects Code to identify cases receiving the Title IV-E Wraparound services to track outcomes for those cases in comparison to other cases. County will be able to provide case level data.

Implementation Timeframe: We have completed an RFP and selection of the provider for our expanded Wraparound (CWS and Probation) and are beginning contract negotiations. We have also completed a RFP for a parent partners program (CWS and Probation) and have just selected a provider so in the beginning stages of contract negotiations. Wraparound expansion should be implemented by the end of this year as well as the peer parent program.

Outcomes: Reduced admissions, faster and more likely permanency, and reduced reentries.

San Francisco County PD

Families of Out-of-Home Placement Youth

Description: This program will complement the implementation of comprehensive family therapy and case management services offered to families of out-of-home placement youth being introduced in October 2014. These strategies together will promote family engagement and improve stabilization goals, leading to shorter placement durations.

Eligibility: Families, who would benefit from a peer support group therapy and starting in year two, individualized coaching by a Parent Partner.

Referral Process: Still under development, since San Francisco is currently interviewing for a service provider and released RFP. Intent is for Probation to identify those families in need and able to engage in these services.

Delivering Service: Families enrolled in family therapy services will be offered additional support through the peer support group, facilitated by a Parent Partner supervisor. Family members making progress in the program and displaying strong leadership skills will be identified for consideration as a paid Parent Partner for Year Two program implementation. Two Parent Partners will be hired by JPD and overseen by the Parent Partner supervisor to work with caseloads of 35 families each. Peer support groups will continue to be facilitated by the Parent Partner supervisor.

Fidelity: Juvenile Justice Information System (in house case management system). County will be able to provide case level data.

Implementation Timeframe: We have also completed a RFP for a parent partners program (CWS and Probation) and have just selected a provider so in the beginning stages of contract negotiations. Wraparound expansion should be implemented by the end of this year as well as the peer parent program.

Outcomes: Short-term outcomes include peer support groups will develop a cadre of parents successful in achieving family stabilization goals established in family therapy. Natural leaders will emerge from the group to provide individualized coaching and encouragement to families with children in an out-of-home placement. Long-term outcomes include decreased duration in out-of-home placement and, informed and empowered parents capable of serving as agents of change in their communities.

Sonoma County CWS

Behavioral Health Treatment Liaison

Description: An essential piece of the placement infrastructure identified in the Sonoma County System Improvement Plan (SIP) is the screening assessment process to inform case planning and determine the appropriate level of treatment and placement. In Sonoma County, the CANS will provide a common language for the multiple participants involved in the screening and assessment process including Sonoma County Behavioral Health, Valley of the Moon Children's Home, placement specialists, and case carrying social workers. The 2014-2019 SIP aligns the screening and assessment process, coordinating the various participants in the placement process with the intent to make timely, permanency-oriented placements. This Waiver Intervention provides a treatment liaison specialist to shepherd the assessment, treatment planning and service coordination process for each child with identified treatment needs. The treatment liaison position and coordination process provides a method to address five of the six Waiver Project goals. The position will allow Sonoma County to 1) improve the array of services and supports available to children by clearly identifying needs and strengths, then linking to social service resources, 2) intentionally engages family needs and strengths in case planning, 3) increase child safety by clarifying needs, 4) improves permanency outcomes by providing in depth information for placement decision making, and 5) improves child and family well-being by organizing around the child and family strengths.

Eligibility: All children in out of home placement receive the CANS screening; some receive a full CANS assessment.

Referral Process: This intervention will create a treatment liaison position in the child welfare agency. He or she will be an expert on the treatment options available to children and youth whose CANS assessment indicates a treatment need. The position will act as a consultant to case carrying social workers on treatment options and liaise with treatment providers in the mental health treatment of children and youth. Assuming a rate of new cases consistent with 2013, we expect the treatment liaison to reach up to 85 children and families a year, or 200 children and families over the course of five years of implementation

Delivering Service: The Human Services Department will hold a MOU with the Behavioral Health Division to ensure clinical capacity to conduct full assessments on which the core activities of the treatment liaison position are predicated.

Fidelity: CWS/CMS and online data system provided by tool developer. County will be able to provide case level data.

Implementation Timeframe: Sonoma CWS has yet to implement this intervention. Their county plan reports that this intervention will start in year three of the waiver (2016-2017), with the hiring and development of a Treatment Liaison position/function to

coordinate CANS screening results with potential community treatment and placement options.

Outcomes: Decreased length of stay, and increased permanent exits (including adoptions and guardianships).

Sonoma County PD

Family Finding Activities

Description: Probation intends to implement policies and guidelines that would require staff to begin the family finding process early on for all probation cases where a risk of out of home placement is identified. In particular, Probation would like to find caretaker relative homes for youthful sex offenders and other youth who can be supervised in the community in lieu of being sent out of the area to placements. Particular goals include: improve the array of service for children and families and engage families through more individualized approach that emphasizes family involvement; improve permanency outcomes and timelines; improve child and family well-being; and, decrease recidivism and delinquency for youth on probation.

Eligibility: The target population is all reasonable candidates for home removal in Sonoma's Juvenile Probation system. The intervention will be used on the front end to prevent group home placement (specifically mention hard to place situations such as sex offenders who cannot stay in their home). Consistent with Sonoma's SIP, Sonoma would use family finding for youth in placement and older youth (non-minors) who live on their own and are not getting adequate support from positive adults.

Referral Process: In the first project year, Sonoma will develop policy and procedures regarding family finding activities. Train officers in family finding and in the approval process for a caretaker relative home. In the second through fifth years, officers will use family finding early on in a case to identify extended family members to establish lifelong connections and provide alternatives to reunification with custodial parent/guardian. Establish contact with extended family identified through family finding and engage them throughout the youth's probation. Assess the appropriateness of these family members as an alternative to out of home placement or a step down from group care should reunification efforts fail with parent/guardian. Officers facilitate the caretaker relative home approval process for appropriate relatives.

Delivering Service: An existing family finding agreement with Seneca allows for intensive family finding and permanency services. This agreement would be used in a limited number of cases where the PO determines extended family is difficult to identify. The contract is already in place.

Fidelity: A proper tool will be identified in order to measures our progress toward anticipated short and long-term outcomes. At this time, Sonoma is working with their service providers on being able to provide case level data associated with Family Finding. When the Well Being Project plan was developed several months ago, Sonoma County Probation did not yet know whether meaningful case level data would

be available, but will work with the CDSS to meet reporting requirements as the county implements the intervention. County will not be able to provide case level data.

Implementation Timeframe: Family Finding has been implemented and is ongoing.

Outcomes: In combination with Probation's Wraparound intervention, Probation expects a decrease in the number of youth sent to out of home placement. Sonoma plans to serve 50 families each year during years two through five of the project.