

SITE VISIT 3 GUIDE—CDSS CAP OVERALL
10.14.10

1. General Overview

- 1.1 What is your understanding of the intent or purpose of the CAP?
- 1.2 What is your understanding of the ways in which flexible Title IV-E funding can be utilized under the CAP?
- 1.3 How important is the use of flexible Title IV-E funding compared with other child welfare funding sources?

2. Implementation Requirements

2.1 Policies, Rules, and Procedures

- 2.1.1 What changes in CDSS policies, rules, or procedures have been necessary to effect the *external* implementation of the CAP?
- 2.1.2 What changes in CDSS policies, rules, or procedures have been necessary to effect the *internal* implementation of the CAP?

2.2 External Oversight and Monitoring

- 2.2.1 What is your structure and process for overseeing and monitoring the CAP?
- 2.2.2 Does this differ from other projects?
- 2.2.3 What systems and procedures are in place for tracking CAP allocations, reinvestment savings, and expenditures?
- 2.2.4 What challenges have you experienced monitoring the fiscal aspects of the CAP and how have you addressed the challenges?

2.3 Internal Oversight and Monitoring

- 2.3.1 What is your structure and process for overseeing and monitoring the CAP?
- 2.3.2 Does this differ from other projects?

2.4 Problem Resolution

- 2.4.1 Have you encountered any problems during the implementation phase of the CAP?
- 2.4.2 What have you done to resolve those issues?
- 2.4.3 Do you have a mechanism for inter-organizational problem resolution?

2.5 Internal Staffing

2.5.1 Has there been staffing changes required to implement the CAP (i.e., new staff and/or restructuring)?

2.6 Internal Training and Education

2.6.1 Have new trainings been necessary to facilitate the implementation of the CAP?

2.6.2 What has been the process for educating State staff on the CAP?

2.6.3 What has been the process for educating outside organizations on the CAP?

2.7 Leadership

2.7.1 What kind of leadership has been necessary for the implementation of the CAP?

2.8 Other

2.8.1 Are there any additional implementation requirements not previously discussed?

2.8.2 Are there any other challenges/solutions not previously discussed?

3. Contextual Factors

3.1 Are there political issues or political forces (e.g., organized labor, the media, advocacy groups) that have had an impact on your ability to implement the CAP?

3.2 Have there been any mandated requirements that have had an impact your ability to implement the CAP?

3.3 How does the CDSS's relationship with its internal State partners influence the implementation of the CAP?

3.4 How have economic factors influenced your implementation of the CAP?

4. Services

4.1 What categories of child welfare expenditures have grown as a result of the CAP?

4.2 If there had been no CAP, could the counties have implemented similar changes and services using other funding sources?

4.2.1 If yes, what some examples of alternative funding sources?

4.2.2 If no, what are examples of programs and services that the counties would not be able to provide?

4.3 Is the CDSS satisfied with the way the counties have chosen to use their CAP funds?

4.4 Are there gaps in the array of county programs and services that could be filled by the use of CAP funds?

4.5 If the CAP expires on April 30, 2013, is it expected that certain types of programs and services will be eliminated, or will there just be a curtailment in certain types of programs and services?

4.6 Have the programs and services developed and implemented by the counties during the CAP met the original intent of the Waiver?

5. Expected Impacts

5.1 How has the CDSS been affected by the implementation of the CAP?

5.2 Are there concerns about the long-term viability of operating in a capped allocation environment, both for the counties and the CDSS?

6. Lessons Learned

6.1 What is the most important thing you have learned to date from implementing your waiver?

6.2 If you could do it over again, what would your agency do differently in planning and implementing the waiver in terms of its:

- Scope/scale
- Planning and decision-making processes
- Budgeting/financing mechanisms
- Types of programs and services funded
- Monitoring and encouraging counties' use of flexible funds
- Evaluation
- Other factors?

**SITE VISIT 3—CDSS KEY INFORMANT INTERVIEW
10.13.10**

1. General Overview

- 1.1 What is your understanding of the intent or purpose of the CAP?
- 1.2 What is your understanding of the ways in which flexible Title IV-E funding can be utilized under the CAP?
- 1.3 How does the CAP fit into the big picture of improving child welfare outcomes in California, particularly as they relate to CFSR outcomes?
- 1.5 Describe how the availability of flexible Title IV-E funds fits into the CDSS's fiscal strategy and the bigger picture of how it makes decisions regarding child welfare budgets and service expenditures?

2. Expected Impacts

- 2.1 How has the CDSS been affected by the implementation of the CAP?
- 2.2 Are there concerns about the long-term viability of operating in a capped allocation environment, both for the counties and the CDSS?

3. Contextual Factors

- 3.1 Are there political issues or political forces (e.g., organized labor, the media, advocacy groups) that have had an impact on your ability to implement the CAP?
- 3.2 Have there been any mandated requirements that have had an impact your ability to implement the CAP?
- 3.3 How does the CDSS's relationship with its internal State partners influence the implementation of the CAP?
- 3.4 How have economic factors influenced your implementation of the CAP?

4. Lessons Learned

- 4.1 What is the most important thing you have learned to date from implementing your waiver?
- 4.2 If you could do it over again, what would your agency do differently in planning and implementing the waiver in terms of its:
 - Scope/scale
 - Planning and decision-making processes
 - Budgeting/financing mechanisms
 - Types of programs and services funded
 - Monitoring and encouraging counties' use of flexible funds

- Evaluation
- Other factors?

5. Implementation Requirements

5.1 Policies, Rules, and Procedures

5.1.1 What changes in CDSS policies, rules, or procedures have been necessary to effect the *external* implementation of the CAP?

5.1.2 What changes in CDSS policies, rules, or procedures have been necessary to effect the *internal* implementation of the CAP?

5.2 External Oversight and Monitoring

5.2.1 What is your structure and process for overseeing and monitoring the CAP?

5.2.2 Does this differ from other projects?

5.3 Internal Oversight and Monitoring

5.3.1 What is your structure and process for overseeing and monitoring the CAP?

5.3.2 Does this differ from other projects?

5.4 Problem Resolution

5.4.1 Have you encountered any problems during the implementation phase of the CAP?

5.4.2 What have you done to resolve those issues?

5.5 Leadership

5.5.1 What kind of leadership has been necessary for the implementation of the CAP?

**SITE VISIT 5 GUIDE—CHILD WELFARE OVERALL
08.01.10**

1. Internal Case Management

1.a Screening process

- 1.a.1 Describe process from call/referral to opening of case:
- 1.a.2 What are the criteria used by DCFS to screen out at the initial referral?
- 1.a.3 Does DCFS have a screening tool that is used to systematically determine whether a case should be opened?
- 1.a.4 Does the screening tool:
 - Include Risk Assessment items
 - Focus on family strengths?
- 1.a.5 Is there designated screening staff?
- 1.a.6 If so, what are the qualifications of the staff that screens cases?
 - Ordinary workers
 - Additional education
 - Additional training
 - Other (i.e. supervisor)
- 1.a.7 What are the referrals/resources/diversion services for screened out cases?
- 1.a.8 How long have you been using this screening approach?
- 1.a.9 Is data on all referrals/calls (and their disposition) systematically kept in an automated system?

1.b Intake/Investigation

- 1.b.1 Describe intake/investigation process.
- 1.b.2 For what cases do you use SDM (or another risk-assessment tool)?
 - Open cases of alleged abuse or neglect
 - Delinquent cases (601, 602)
 - Dependency cases
 - For every case opened to services
 - Others
- 1.b.3 When did you initiate the risk assessment process?

1.c TDMs/FGDM

- 1.c.1 What is the role of TDMs/FGDM in determining whether cases are opened?

1.c.2 What is the role of TDMs/FGDM in determining how placements are made?

1.c.3 How has this affected overall caseload size, thus far?

1.d Cases in Reunification: What are the decision-making processes regarding initial placement and placement changes?

1.d.1 What level of discretion do child welfare workers have in making these decisions?

1.d.2 Is there an explicit order of preference for placement choice (e.g., relative home, non-kin FH, concurrent placement-fost/adopt, FFA)?

1.d.3 How is that preference communicated (e.g., requires supervisor approval)?

1.d.4 What issues impact these decisions (e.g., need for approval of relative homes and limited staff time to do so; inadequate pool of concurrent placements)?

1.e Cases in Permanency: What are the decision-making processes regarding permanency?

1.e.1 What level of discretion do child welfare workers have in making these decisions?

1.e.2 What permanency options are available?

1.e.3 What issues impact these decisions (e.g., need to go through approval of supervisor; or can access non-kin concurrent placements via a special committee; or an explicitly communicated willingness to use Kin-Gap if adoption is not acceptable to the family)?

1.f Relative Placements: What is your approach to relative placements?

1.f.1 Informal/Voluntary (are these done) vs. Court-ordered (only these)?
--Who might have custody (parent, relative, county)?

1.f.2 Under what conditions would a relative's home be licensed? Approved in another way?

1.f.3 Under what conditions would a relative be paid a foster care rate (vs. eligible for TANF)?

1.f.4 If a relative is paid a foster care rate, is it the same as the regular foster care rate?

1.f.5 Are there any other subsidies or assistance provided to relatives?

1.f.6 Are there any system/resource issues impacting the use of kin placements?

1.g Unit structure (Verify DCFS unit structure)

1.g.1 What is *current* DCFS unit structure for bulk of cases?
--Traditional: separate intake and ongoing unit
--Integrated teams of intake and ongoing workers together
--Integrated team with additional support staff in the same unit

--Intake unit and ongoing unit which carries cases to finalization or reunification (i.e. through adoption)

1.g.2 When was the most recent change in unit structure?

1.g.3 Do you have any specialized unit to serve different populations (beyond usual units for adoption, home finding, etc).

1.h Caseload Monitoring

1.h.1 Are you doing any caseload monitoring in your case management processes?

1.h.2 What is the caseload size in different units?

2. Court Involvement

2.a How would you describe DCFS's relationship with the Court?

2.b Are there specific issues? (e.g., not dismissing, ordering particular services)

3. Service Array (child welfare programs, foster care placement types, discrete services)

3.a What are three services (internal or external) that are most sufficient in your county (can access whenever needed)?

3.b What are three services (internal or external) that are most problematic to access for your clients?

3.b.1 Service Gaps: How are these services insufficient?

3.b.2 How do you deal with the insufficiency?

3.c New services: In the last year or two, what new services (internal and external) have been developed in your county?

3.d Have there been changes in the way you are using particular services (e.g. using family pres now to support reunification, rather than last effort to prevent placement)?

3.d Has DCFS consciously shifted service focus (of services provided to DCFS clientele) in the last 3 years?

3.d.1 If yes, in what direction (prevention, placement, concurrent planning, permanency)?

3.e How is this shift in service focus reflected in internal staffing and in contracting?

3.f How geographically accessible are DCFS services (direct or contract provided) to families? How has this been addressed (e.g. transportation, community-based branch)? Describe improvements or issues that need to be addressed.

3.g Generally, who decides what services a family receives?

3.h Generally, who decides what providers serve a family?

3.i How much discretion do workers have in what services to provide to a family?

- Very clear and formal practice guidelines
- Consultation with supervisor
- Alone or in consultation with peers
- How much specific direction does the court provide/dictate services?

4. Targeting

4.a Is DCFS providing services (directly or by contract) to a demographic/cultural subgroup?
If yes, what subgroup is targeted?

4.b What unique services are provided to these special populations (dedicated unit, dedicated services)?

4.c What services are not sufficiently available for this population?

4.c What are your plans for change in the area of population targeting?

5. External Case Management

5.a Who carries case management responsibility: what proportion is internal/external?

If any external: What level of monitoring/control is in place?

6. Provider Competition

6.a What proportion of services that clients obtain through the DCFS (excluding case management) currently come through contract, or referral out (paid for through grant), or direct provision by DCFS?

6.b Has that pattern changed in the last 12 months?

6.c To what extent do providers use subcontractors?

6.d Any changes made in the last year in rates being paid for particular services to stimulate growth (e.g. foster care per diem)?

If yes, in what service areas and what percentage changes?

7. Finance Methods

7.a Any capitated or case rate contracts by DCFS (alone or as part of interagency effort where DCFS has committed funds)?

7.b If yes, get more detail: Obtain a copy of payment section of contract that describes how the contractor can spend funds

7.c Extent to which capitated contractor has discretion over how to use funds

7.d What are your plans for changes in the future in capitation financing arrangements (changes to existing or new plans)?

8. Utilization Review

8.a How does DCFS oversee/monitor use of OOH placements? (pre-placement reviews, periodic reviews during placement)

- decision to place a child?
- type/level of placement to use?
- choice of FFA vs. county foster care?
- length of stay?

8.a.1 How long has the process(es) been in place?

8.a.2 How much has it reduced or increased placement use?

8.b Does DCFS operate with any *formal* limitations on number of placements (planful use of placements)?

- Is there an overall target?
- Target by placement type (e.g. residential)?
- Strict ceiling amount by type, so that need special approval to exceed?
- Strict overall ceiling?

8.b.1 How long have these limits been in place?

8.c Does DCFS use any types of rational decision rules to control access to services (at management level)?

- Using outcome data
- Using best practice guidelines
- Based simply on service provider capacity
- Case by case or provider by provider

8.d What plans for changes in UR activities?

8.e Have you identified any trends in service utilization (this question added 04.24.08)

9. Quality Assurance

9.a What types of quality control (*compliance*) does DCFS use with foster care providers?

- Monitoring visits to network foster homes to assess safety and compliance with regulations
- Automated tracking of mandatory reviews and filings
- Contractual sanctions for non-compliance
- None

9.b What types of quality *enhancement* does DCFS use for child welfare workers?

- DCFS training beyond minimal state requirements
- Worker access to technical experts
- Ongoing supervisor mentoring (i.e. on a weekly or monthly basis), peer shadowing (formalized)
- Consumer satisfaction surveys

- Cross-specialty or cross-agency training
- Contractual rewards for performance
- Staff rewards for performance

10. Expenditures

10.a Who has control over where to spend money and how agency changes program direction?

10.b Availability of flexible funds:

10.c Access to flexible funds:

11. Revenue

11.a Has the department had access to non-categorical funds in the last 3 years: levy, donations, etc.?
(decrease, increase, no change)

11.a.1 What has the DCFS been able to do with the funds?

11.b How important are Medicaid funded services for DCFS kids?

11.c How much consideration does DCFS give to Medicaid match, in making service decisions?

11.d Have there been issues accessing Medicaid funding?

12. Morale

12.a Worker Morale

12.a.1 Staff feel supported by supervisor?

12.a.2 Administration shares information and is trusted?

12.a.3 Staff understand and agree with vision/direction of agency?

12.a.4 Staff have input into developing agency policy?

12.b Supervisor Morale

12.b.1 Staff feel supported by managers?

12.b.2 Administration shares information and is trusted?

12.b.3 Staff understand and agree with vision/direction of agency?

12.b.4 Staff have input into developing agency policy?

13. Leadership

13.a How important is leadership in the successful operation of the department?

13.b What forms of leadership are important to the successful operation of the department?

14. Interagency Collaboration

14.a Strength of relationship between DCFS and mental health board/its providers:

14.b Strength of relationship between DCFS and juvenile court:

14.c In addition, any collaborative efforts to develop programs/services to improve service delivery?

15. Contextual Factors (formerly Community Well-Being—changed 04.24.08)

15.a What community factors affect the work of the department?

- demographic characteristics
- politics
- media
- interest groups

16. Waiver Comprehension and Impact

16.a How would you characterize your knowledge of your county's Waiver Project?

16.b Describe the Waiver Project's influence on your day-to-day work with children and families.

16.c Do you feel the Waiver Project is having a positive effect on the child welfare environment in your county?

16.d Do you feel a wider array of services for your clients have become available in the last 9 months?

17. Implementation

17.a The Waiver and Other DCFS activities.

17.a.1 How does the Waiver fit in with the overall philosophical approach being taken by DCFS?

17.a.2 What is the relationship between DCFS's Waiver Plan and the county system improvement plan (SIP)?

17.b Monitoring Implementation

17.b.1 Describe the structure and the process for monitoring the implementation of the Waiver project.

17.b.2 How are external groups involved in the monitoring process of the Waiver project?

17.c Management Information System

17.c.1 Describe DCFS's Management Information System (MIS) capacity?

17.c.2 What are the various sources (internal/external) of information necessary to inform decision-making?

17.c.3 Are the information sources integrated and linked to outcomes?

17.c.4 Are there plans for changes in MIS capacity?

17.d Decision-Making

17.d.1 Who has the authority to make decisions made about future Waiver activities/directions?

17.d.2 What is the process for arriving at those decisions?

17.e Implementation of the Department's Project Plan (program)

17.e.1 What is the status of the current sequence of service programs to be implemented?
(insert the specific service programs depending on county and agency)

17.e.2 What have been some of the barriers to getting those programs implemented and how has the agency responded?

17.e.3 What kinds of policy, program, and staffing changes have been necessary for implementation of the programs?

17.e.4 What has been the role of the union in this process?

17.f Fiscal Implementation

17.f.1 Describe the ongoing mechanisms for implementing the fiscal aspects of the Waiver including tracking revenue and reporting expenditures.

17.f.2 Describe the results of monitoring expenditures and assessing the effectiveness of services to date.

17.f.3 What expenditures have been claimed for expanded services to date under the Waiver?

17.f.4 Describe any efficiencies in spending achieved in the most recent state fiscal year. Describe any savings that have occurred to date under the Waiver.

17.f.5 Describe any fiscal barriers that have occurred to date in administering the Waiver.

17.g Implementation Inputs

17.g.1 What kinds of changes in the organization of the agency have been necessary
(i.e., Waiver coordinator positions)

17.g.2 What kinds of technical assistance have been necessary to implement the Waiver?

17.g.3 How crucial to a successful implementation is the involvement of Casey Family Programs?

17.g.4 Are there other kinds of “inputs” necessary for a successful implementation (e.g., other waivers)

17.h Implementation Barriers and Facilitators (internal or within the professional community)

17.h.1 What kinds of barriers have inhibited implementation? How have you over come them?

17.h.2 What kinds of things have facilitated implementation?

17.i Leadership

17.i.1 What kind of leadership is necessary for a successful implementation of the Waiver?

17.i.2 Has that idea shifted as the Waiver has gone on?

17.j Contextual Factors

17.j.1 What community factors affect the implementation?

- demographic characteristics
- politics
- media
- interest groups

17.j.2 Describe the relationship with the Board of Supervisors.

17.j.3 What strategies have been used to inform external groups and keep them involved?

17.j.4 What has been the impact of other local and/or state initiatives?

**Site Visit 5—Child Welfare Key Informant Interview
08.01.10**

17. Operations

17.e Implementation of the Department's Project Plan (program)

- 17.e.1 What is the status of the current sequence of service programs to be implemented?
- 17.e.2 Is reinvestment savings being used for things beyond the stated programs (one-time costs)?
- 17.e.3 What have been some of the barriers to getting those programs implemented and how has the agency responded?
- 17.e.4 What kinds of policy, program, and staffing changes have been necessary for implementation of the programs?
- 17.e.5 What has been the role of the union in this process?

17.a The Waiver and Other DCFS activities.

- 17.a.1 How does the Waiver fit in with the overall philosophical approach being taken by DCFS?

17.b Monitoring the Waiver

- 17.b.1 Describe the structure and the process for monitoring the operations of the Waiver.
- 17.b.2 How are external groups involved in the monitoring process of the Waiver project?

17.d Decision-Making

- 17.d.1 Who has the authority to make decisions made about future Waiver activities/directions?
- 17.d.2 What is the process for arriving at those decisions?

17.c Management Information System

- 17.c.1 What is the status of the data system or systems in the department?
- 17.c.2 Are the information sources integrated and linked to outcomes?
- 17.c.3 Are there plans for changes in MIS capacity?

17.f Fiscal Implementation

- 17.f.1 Describe the ongoing mechanisms for implementing the fiscal aspects of the Waiver including tracking revenue and reporting expenditures.
- 17.f.2 What expenditures have been claimed for expanded services to date under the Waiver?

17.f.3 What expenditures are claimed under Program code 701?

17.f.4 Describe any efficiencies in spending achieved in the most recent state fiscal year. Describe any savings that have occurred to date under the Waiver.

17.f.5 Describe any fiscal barriers that have occurred to date in administering the Waiver.

11. Revenue

11.a How has the department worked to maximize its revenue?

11.b Has the department had access to non-categorical funds in the last three years: levy, donations, etc.?

11.b.1 What has the DCFS been able to do with the funds?

17.g Implementation Inputs

17.g.1 What kinds of changes in the organization of the agency have been necessary (i.e., Waiver coordinator positions)

17.g.2 What kinds of technical assistance have been necessary to implement the Waiver.

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17.j.2 Describe the relationship with the Board of Supervisors.

17.j.3 What strategies have been used to inform external groups and keep them involved?

17.j.4 What has been the impact of other local and/or state initiatives?

**County Department Strategy/Intervention Description Template
05.06.11**

1. Problem Addressed by the Strategy

- a. What specific need is the strategy intended to meet?
- b. How was this need determined (e.g., anecdotal evidence, data, other)?
- c. Why is the need important (i.e., why address this need versus any other need)?

2. Description of the Strategy

- a. How is the target population defined (i.e., criteria) and included (i.e., referral strategy)?
- b. Who does what to whom, where, when, and how?
- c. How does this strategy fit into the larger organizational structure?
- d. Where changes required in other strategies as a result of this strategy?

3. Explanation of the Strategy Theory

- a. What is the explicit or implicit rationale underlying the program?
- b. Why do program staff believe that the strategy should have any effect on the problem the strategy is intended to address?
- c. Is this theory derived from some behavioral, social, or economic theory; what theory?

4. Program Objectives

- a. What are the implementation objectives, measures (e.g., staffing level, contracts initiated, numbers served, timelines met, etc.), and timeframes?
- b. What are the outcome objectives, measures, and timeframes?

5. Cost, Savings, and Funding Sources

- a. What are the annual costs associated with the strategy? By categories?
- b. What are the annual costs associated with ancillary strategies? By categories?
- c. What are the sources of funding for the strategy?

d. Are there any savings associated with the strategy?

6. Staffing

a. What is the staffing criteria necessary for the strategy (i.e., numbers, qualifications)

b. How are staff recruited and/or selected?

7. Training/Consultation/Coaching

a. What kinds of pre-service training/consultations/coaching was necessary?

b. What kinds of in-service training/consultation/coaching was necessary?

c. Are the training/consultation/coaching provided by department staff or outside providers?

8. Management Information Systems (MIS)

a. Has it been necessary to develop a separate MIS for the strategy?

b. How is the standing MIS (i.e., the department's data system) used to assist the strategy?

c. How are data used for monitoring and to inform decision-making about the strategy?

9. Facilitative Administrative Support

a. Have contracts been necessary to implement the strategy (obtain copies)?

b. Have policy changes (internal or external) been necessary to implement the strategy?

10. Timeline of Implementation

a. What is the timeline for implementation?