Semi-Annual Progress Report
April 1, 2016 – September 30, 2016

Title IV-E Waiver California Well-Being Project

California Department of Social Services

December 2016
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I. Overview

The California Department of Social Services (CDSS) began operating a flexible funding child welfare demonstration project on July 1, 2007, with Alameda and Los Angeles Counties, and continued under three short-term bridge extensions through September 30, 2014. On September 29, 2014, the Administration for Children and Families (ACF) approved a five-year extension and expansion of the project, now known as the Title IV-E California Well-Being Project (Project). The Project extension period is from October 1, 2014, through September 30, 2019. Under the expansion, the Project is implemented through partnerships with Alameda, Butte, Lake, Los Angeles, Sacramento, San Diego, San Francisco, Santa Clara and Sonoma Counties’ child welfare and probation departments. The Project’s fiscal methodology consists of a two-cohort track; Alameda and Los Angeles Counties are Cohort 1, the remaining seven counties are Cohort 2.

This report is a synopsis of Project activities from April 1, 2016 – September 30, 2016.

II. Demonstration Status, Activities and Accomplishments

A. California Department of Social Services (CDSS) Activities

During the period of April 1, 2016, through September 30, 2016, the CDSS cross-division implementation team engaged the 18 participating county child welfare and probation departments in a variety of communication, implementation, technical assistance and evaluation activities. The Children and Family Services Division’s Child Protection and Family Support Branch continued providing programmatic support for Project implementation and monitoring. The Administration Division’s Fiscal Forecasting and Policy Branch and the Fiscal Systems and Accounting Branch provided fiscal support and monitoring, while the Research Services Branch continued to lead statewide evaluation efforts.

1. Program:

The Project’s on-going external communication efforts continued. Due to county and stakeholder feedback, CDSS began conducting its individual county programmatic calls on a quarterly basis. These efforts continued to include participating child welfare and probation department representatives as well as stakeholders. The monthly probation call, facilitated by the Chief Probation Officers of California, is now scheduled on a quarterly basis due to feedback
from participating probation department representatives. The CDSS continued to partner with Casey Family Programs (CFP) and held quarterly county-specific and collective calls to discuss Project implementation activities. The CDSS published the Project newsletter’s Spring 2016 issue: [http://www.childsworld.ca.gov/res/TitleIV-E/Spring2016.pdf](http://www.childsworld.ca.gov/res/TitleIV-E/Spring2016.pdf).

The CDSS continued to partner with the Regional Training Academies, the Resource Center for Family Focused Practice (RCFFP), and CFP to advance collaboration with participating counties, providers and other stakeholders. This partnership continues to support quarterly Safety Organized Practice (SOP) and Wraparound Collaboratives, focusing on implementation, critical elements, cross-agency communication and collaboration.

The CDSS began to prepare for the second Annual Title IV-E Waiver Meeting, forming a committee comprised of county child welfare and probation representatives and engaged CFP and the RCFFP. Coordination efforts during this reporting period included conference calls and surveys to identify the most relevant discussion topics to support implementation and evaluation efforts. The annual Project meeting will be held November 9 – 10, 2016. Planned discussions include updates regarding federal, state and county initiatives and their interceptions with Project implementation. Facilitated panels regarding county fiscal strategies, SOP and Wraparound implementation successes, challenges and next steps, along with fidelity assessment strategies will also be included. Participating counties and stakeholders also requested updates regarding Project evaluation activities, trends and incorporating visuals to communicate findings.

Internal communication efforts continued to include cross-division Project team meetings and county specific implementation updates. Project team discussions included consultants from the Children and Adult Programs Estimates Bureau, Financial Services Bureau, Fiscal Policy Bureau (FPB), Foster Care Audits and Rates Bureau, Office of Child Abuse Prevention, Outcomes and Accountability Bureau, Performance Monitoring and Research Bureau and the Resources Development and Training Support Bureau (RDTSB).

Representatives from CDSS’ cross-division implementation team, including Program, Research and Fiscal, and representatives from
the National Council on Crime and Delinquency (NCCD) and Westat attended the annual Waiver Demonstration meeting on August 29 – 30, 2016, with various speakers and breakout sessions.

2. Fiscal:

The CDSS continues to provide ongoing fiscal technical assistance to Project counties through a variety of avenues. One such avenue is CDSS’s onsite fiscal monitoring reviews of Project counties. The FPB conducted four county onsite fiscal monitoring reviews for Child Welfare and Probation during this reporting period. Technical assistance and direction were given onsite with findings and quality improvement suggestions detailed in each county’s post-review letter.

Another avenue of on-going fiscal technical assistance is regularly scheduled quarterly fiscal conference calls. For this reporting period, quarterly fiscal conference calls were held on May 10, 2016, and August 16, 2016. The topics covered during the calls included information on CDSS’ onsite fiscal monitoring reviews and some of the common observations observed during the reviews. Updates to the Quarterly Fiscal Supplemental Form, which is used to assist with tracking of expenditures tied to counties specific interventions, was also discussed. Additionally, FPB and Accounting staff fielded county-specific questions from participants.

Lastly, several written communications and fiscal reports were disseminated during this reporting period. The CDSS initiated a request on June 10, 2016, to renegotiate the fiscal terms and conditions as a result of new Title IV-E eligible mandated activities resulting after the establishment of the capped allocation. The March 2016 Quarter CB-496 report was submitted to the Administration for Children and Families (ACF) on May 27, 2016, and the June 2016 Quarter CB-496 report was submitted to ACF on September 1, 2016.

3. Evaluation:

Since the execution of CDSS’ contract with the NCCD and subcontractor Westat in September 2015, the Evaluation Team has made significant progress in implementing the Evaluation Plan, approved by ACF. The Evaluation Team maintains a collaborative,
developmental evaluation process with the Evaluation Steering Committee (ESC), which includes representatives from all 18 county agencies and guidance from ACF and CDSS.

Activities

The Evaluation Plan was submitted to ACF in January 2016 and approved in May 2016. During that process, the Evaluation Team began conducting thorough data inventories of state and county systems to better understand existing data sources and processes to build on. They also initiated negotiations with counties to finalize Data Sharing Agreements (DSAs), which outline usage and security expectations for county data for the statewide evaluation. Currently, 17 of the 18 county agencies have executed DSAs with NCCD, and it is expected all 18 will be completed by the end of the calendar year. Additionally, the Evaluation Team sought and was awarded approval from the California Committee for the Protection of Human Subjects, the state’s own Institutional Review Board that ensures ethical standards for research conducted using state databases. Final approval was awarded for all elements of the Evaluation Plan in June 2016. Concurrently, the Evaluation Team completed individual site visits with each agency beginning in May and ending in September 2016. Summaries of the findings from those visits are included in the Statewide Evaluation Attachment of this Semi-Annual Progress Report.

The Evaluation Team has continued to meet with the ESC on a monthly basis, individual county agencies on a quarterly basis and with CDSS on a weekly basis. The Project Team also submits quarterly progress reports to CDSS. Additional communications to counties, partners and stakeholders are provided by email, webinar, phone and other methods on an ad hoc basis.

Sub-Studies

During this reporting period, the Evaluation Team also administered readiness criteria to county agencies interested in pursuing an outcome sub study. The CDSS and the Evaluation Team agreed to a collaborative and county-focused process, allowing counties to first volunteer for sub-studies in an effort to increase buy-in and implementation fidelity. Since the process study involves tracking and assessing the success of the two mandated interventions, SOP
and Wraparound, CDSS and the Evaluation Team allowed counties to focus their sub-studies on their optional interventions of their choice. The ESC agreed that focusing on different interventions would lend tremendously to the wealth of knowledge on best practices in the Child Welfare arena. Initially, six agencies expressed interest. However, as the details and expectations were developed, some counties realized they did not have the resources and methods necessary to commit to a sub study in the second and third years of the Project evaluation.

The CDSS and the Evaluation Team reviewed proposals from the Sacramento County Department of Health and Human Services (DHHS), the County of San Diego Child Welfare Services (CWS) and the San Francisco County Human Services Agency (HSA). The final selection will be made in the next reporting period. The CDSS and the Evaluation Team are also finalizing a cost sub study that includes the Alameda County Social Services Agency (SSA). They are also considering both Los Angeles County Department of Children and Family Services (DCFS) and Probation Department for the cost sub study as well, but are in the process of developing the study design. Once all decisions have been announced to the ESC, the Evaluation Team will submit a memo explaining the decision to ACF.

Data Collection

The Evaluation Team administered the first annual Staff and Stakeholder Survey to all counties in September 2016. This survey asks staff and stakeholders to report their opinions and experiences with implementation fidelity and the Project. Initial results and response rates will be presented to counties at the 2016 Annual California Well-Being Meeting and included in the next Semi-Annual Progress Report, as well as the interim evaluation report. The Parent and Guardian Survey has been tested and reviewed, and will be administered in all counties starting November 1, 2016, for one month. These surveys will attempt to capture client satisfaction and family engagement. Additionally, the Evaluation Team has completed interviews with county program and fiscal staff to obtain data dictionaries, understand the historical context of the Project fiscal data and to discuss potential data sources to supplement fiscal data analyses.
B. County Profiles

1. Alameda County

Agency Collaboration

Alameda County Probation Department (ACPD) welcomed Chief Probation Officer (PO) Wendy Still in August 2016.

The Alameda County Waiver Executive Team is a partnership between the Alameda County SSA, Department of Children and Family Services (DCFS) and the ACPD. Representatives include: the Chief of Probation, the Social Services Assistant Agency Director and the Deputy Chief of Juvenile Field Services, DCFS and Probation Division Directors, the SSA and Probation Finance, DCFS and Probation Management Analysts, the SSA Policy Office, Alameda County Behavioral Health Care Services (BHCS) and CFP. The Waiver Executive Team was established in 2007 when Alameda County first became a Project county. The Waiver Executive Team meets monthly to provide program census and fiscal updates pertaining to the Project.

SOP

The projected number to be served during this period was zero and the actual number of children served during this reporting period was zero. Delayed SOP training and practice for child welfare workers and module training is due to negotiation agreements with their labor unions. A revised training schedule has been developed to reflect the new timeline (see Appendix A). CDSS will meet with DCFS to capture and analyze next steps to gain understanding of the current status of SOP implementation and direction for the scope of the Project. The DCFS projects it will provide SOP services to 500 children age zero-17, inclusive, during the next reporting period of October 1, 2016, through March 31, 2017.

Supervisors have completed the SOP module trainings; coaching with the Bay Area Academy (BAA) is scheduled to begin October, 2016. Child Welfare Workers attended the SOP two-day overview; the first SOP module is scheduled for October, 2016. Surveys of youth and parents, Child Welfare Workers and Supervisors were completed, collecting baseline data regarding SOP principles and current practice for the evaluation. There were 897 surveys sent to
the youth and 115 responses were received. 626 surveys were sent to parents and 70 responses were received. The DCFS will hire two internal coaches to support SOP learning and implementation and the training and curriculum task team is developing their job description.

Alameda County has evaluation, marketing, strategy and training review task teams that continue to meet to complete specific tasks and make recommendations to the SOP Implementation Team (IT). The Evaluation Task Team meets a minimum of once per month. The Marketing Task Team meets at a minimum of once per month, and, during the reporting period, has drafted communication emails and made recommendations regarding tools and mechanisms to inform staff about SOP and celebrate successes. The Strategy Task Team meets at least twice per month and is developing recommendations for SOP practice change throughout the Department. This includes the creation of matrixes that are presented during the Labor Management Team meetings, the development of new forms, the revision of court reports and related documents, and the development of practice proposals for staff after they have attended training. This Task Team also develops examples of reports prior to SOP and reports with the SOP revisions, so the Labor Union can see how SOP language will be incorporated into current practice. The Training Review Task Team meets at a minimum of once per month and reviews training material.

The Evaluation Task Team meets at a minimum of once per month and began reviewing case review tools and other fidelity tools to evaluate the delivery of SOP to children and families at the end of this reporting period. It was beneficial to wait until the Strategy Task Team had made recommendations related to the embedding of SOP into current practice before embarking on this activity. It is anticipated that recommendations on tools to track SOP implementation will be made during the next reporting period. Once implemented, it is anticipated that the SOP case review tool recommendations will facilitate the tracking of clients that receive SOP as an intervention. Fidelity monitoring will not begin until after implementation of recommended practice changes.

The SOP IT continues to meet twice a month to review recommendations from task teams and submits them to the
Department Executive Team. The Department Executive Team has begun Labor Management Team meetings to discuss changes to work processes related to SOP.

Positive Parent Program (PPP)

The projected population age range for PPP is parents of children zero-17, inclusive. Although there was zero projected to be served this reporting period, the DCFS reported having 41 parents enrolled in PPP since the first parent education class series began, which was on August 1, 2016. The goal for the next reporting period is 100 parents served.

The contract with A Better Way went into effect July 1, 2016 and developing strategies to refer and engage families are still in the development phase. Staff from A Better Way have completed curriculum training and parent classes have begun. Information unit meetings are being scheduled. The steering committee is in communication, which includes an evaluator from SSA and an evaluator from the provider. Evidence based curriculum includes visitation, substance use support and counseling, domestic violence counseling and other topic areas that resulted in the sustained allegations of abuse and neglect.

Commercially & Sexually Exploited Children (CSEC)

Alameda DCFS is currently serving 103 youth; 51 are identified as high risk and 52 have experienced sexual exploitation. The 103 youth are reflective of the State CSEC Opt-In Program and the tracking (coding) in Child Welfare Services/Case Management System (CWS/CMS) of CSEC required by both Federal and State law. These numbers reflect all youth with “open cases” as specified by All County Letter 16-49. In terms of CSEC specific funding, Alameda County was awarded Tier 2 funds via the State for the CSEC Program (CSEC Opt-In Program, SB 855). The number of youth that are identified as CSEC has remained fairly steady for the past year. That being said, given recent changes in the law and Welfare and Institutions Code clarifying the CSEC population as falling under the purview of DCFS, and in anticipation of upcoming additional changes related to the decriminalization of young people impacted by commercial sexual exploitation, DCFS lacks precedent to accurately project the number of CSEC that may enter the child
welfare system and receive services during the next year. Thirty eight youth were projected to be served this reporting period and 38 are projected to be served in the next reporting period.

DCFS has experienced a critical lack of foster families and other appropriate placements for CSEC in foster care. CSEC are placed with foster families and in group homes within Alameda County and throughout the region in the same manner and with the same frequency as any “high end” youth. This may include a placement in a "guaranteed bed", meant to be temporary, while a permanent placement is found and secured. In some circumstances, CSEC are placed in “emergency placements” that are arranged with the youth’s relatives or “fictive kin” (extended family) which may, in fact, become the permanent placement for a youth. There are also some youth, including CSEC, that go into “transitional housing” program which is designed to house and support youth until they transition to stable and secure housing post foster care.

The extremely limited number of available placement options also hampers efforts to initiate services and implement case plans for longer term stabilization and healing. This, in turn, can have the unintended consequence of exacerbating already challenging complex-trauma associated behaviors that CSEC youth are struggling within their day to day lives, thereby making placement of the youth even more difficult to secure. The current plan of action continues to be to keeping CSEC youth informed, and CSEC specific stabilization support and therapeutic services post placement via contracted service providers Westcoast Children’s Clinic and Motivating, Inspiring, Supporting and Serving Sexually Exploited Youth (MISSSEY) (CSEC foster youth advocacy, support and case management).

It should be noted that as CSEC youth often “cycle,” meaning they run away and then return and then run again, sometimes in quick succession, thereby impeding the placement and service engagement process. In the face of that challenge, our CSEC providers focus on keeping in touch with the youth after their placement through every modality (face to face, by phone, by text, etc.) to provide ongoing support, to simply stay connected and to “seed” the relationship. It cannot be stressed enough that the work with CSEC youth requires a good deal of “building up” and therefore is (necessarily) repetitive, often happening over a period
of many months or longer in order to achieve (short and longer term) stabilization and service engagement.

Second, DCFS’ protocol faces several hurdles to full implementation as it relates to reaching agreement with their Labor partners. However, the Labor partners are fully committed to the process and expect to conclude union negotiations sometime in 2017.

To further expand the prevention of CSEC, DCFS has decided to pilot the Word on the Street (WOTS) CSEC prevention curriculum. The WOTS curriculum was developed by the Los Angeles County Probation Department (LACPD) and an extensive team of contributors, with the goal of strengthening protective factors and building resiliency against commercial sexual exploitation in girls ages 13-18. The WOTS prevention curriculum itself covers such topics as: What CSE is; the underlying structure and nature of exploitation; risk factors; recruitment; healthy relationships; empowerment. For more specific information on WOTS and LACPD’s process related to developing this curriculum, click on this link (page 13): Youth Prevention Training.

DCFS is hosting a training for WOTS facilitators on December 12 and 13, 2016, in Oakland. The training will be provided to 32 participants, representing a mixture of service providers and partners working directly with foster, juvenile justice and other populations of at risk youth. Confirmed attendees include: MISSSEY; Beyond Emancipation/ Independent Living Program; Westcoast Children’s Clinic/Youth Advocate Program; Oakland Unified; Hayward Youth Family Services Bureau (serving Hayward Unified School District); Alameda County District Attorney’s Young Women’s Saturday Program; Alameda County Probation; Emerge, alternative education program for girls; A Better Way; Dreamcatcher, youth shelter (under 18) and Casey Family Programs. Covering a broad swath of service entry points for youth, these organizations were specifically invited in response to their interest and capacity to utilize the WOTS curriculum as well as their willingness to commit to putting on at least two trainings for their youth within the 2017 calendar year.

Accomplishments during this reporting period include:
• As per Welfare and Institutions Code 300(b)(2), referrals to the hotline for CSEC are being received by the hotline and then forwarded on to the Emergency Response (ER) Unit for investigation. Response times for referrals are carefully monitored and are assigned as either Immediate Response or ten day response. Referrals that do not meet the threshold for Child Protective Services involvement trigger service referrals based on individual youth and family needs.

• Referrals requiring immediate crisis response are being addressed within two hours, as per protocol. Immediate Multi-Disciplinary Team (MDT) consults are held, as necessary with law enforcement. Collaboration with medical professionals and other child serving agencies is occurring, as necessary, to ensure that the child’s/youth’s safety, medical, placement, mental health and support service needs are addressed in a timely manner.

• The CSEC screening is being implemented at the Alameda County Assessment Center utilizing the Commercially Sexually Exploitation Identification Tool, Westcoast Children’s Clinic and cross referenced with CSEC codes in CWS/CMS. This tool screens and identifies youth who are at risk of being exploited, or who have been previously or are currently being exploited. Managers, supervisors and Child Welfare Workers are being notified regularly of CSEC and youth at risk of becoming CSEC on their caseloads.

• Youth are being tracked monthly using the established CSEC program codes, as per CDSS All County Letter 16-49.

• The MDTs, utilizing the Team Decision Making (TDM) structure/system, are being implemented for youth identified as CSEC.

• The CSEC engagement services and post placement follow-up are being provided onsite at the Alameda County Assessment Center; linkages to on-going services in the community are also being consistently offered and provided through Motivating, Inspiring, Supporting and Serving Sexually Exploited Youth and the Westcoast Children’s Clinic.

The DCFS partnered with the Alameda County District Attorney’s Office to increase the availability of gender specific life skills classes provided through the Young Women’s Saturday Program to involved girls ages 15 to 18, identified to be at high risk of or
impacted by commercial sexual exploitation. The funds that are
being provided to the DA Young Women’s Saturday Program come
from the State CSEC Opt-In Program money awarded to AC
SSA/DCFS in 2015.

Wraparound

The ACPD served 84 youth through Wraparound services, provided
by Lincoln Center, during this reporting period. The project number
of youth and families for the next reporting period is 67; at any
given time 67 slots are available through Project Permanence,
which is the name of their Wraparound program. During this
reporting period, ten additional slots were added to Wraparound,
bringing the slots from 57 to 67, and three units in the department
now have direct referral access to the program.

The ACPD utilizes the Wraparound model as an alternative to
out-of-home placement and as a model for aftercare, when
appropriate. Leadership from Probation, BHCS and Lincoln Center
have identified indicators and a Quality Assurance (QA)
methodology to monitor program fidelity and outcomes: (1) seventy
percent of youth shall have no new sustained arrests during the
time of treatment to be reviewed at discharge and six months post-
discharge; (2) seventy percent of youth will be living at home or a
home-like setting in the community and not in congregate care at
discharge. These outcomes have been added to the Lincoln
Center’s contract. To date, out of 105 youth who completed
Wraparound services between July 2012 and 2015; 85 percent
have had no new sustained offenses, sustained warrants, or
sustained violations of probation within six months of their release
date from the program. Placement of youth six months post
program is also recorded to ensure that youth who are at risk of
imminent removal from their home are still at home following
Wraparound. Of the 105 youth who completed the program,
72 percent were still at home or a home-like setting six months after
completing the program.

This state fiscal year, Lincoln Center provider began using and
reporting behavioral changes on the Child and Adolescent Needs
and Strengths (CANS) assessment data, which is collected for
each youth at intake and discharge for the program. These
behavioral changes were tracked by comparing intake and
discharge scores using behavioral and emotional, justice, school and life domains of the CANS. Overall, 81 percent (38/47) of youth participating in Wraparound services experienced improved behavior and emotional items on the CANS. Eighty percent (8/10) of the CANS items reviewed for analysis decreased in moderate and intense needs from intake to discharge for youth participating in Wraparound services. The ACPD began to develop a more robust reporting system for the CANS assessment, which is administered for their clients. For now, the CANS reflect data from the timeframe of April 1, 2016 through June 30, 2016. The ACPD will continue to develop additional reporting tools that will enable them to provide more data on an ad hoc basis and seek to have this in place by the next semi-annual reporting period.

In addition, ACPD has created an intervention grid, which differentiates between their three Project interventions. The grid gives specific details on types of services provided, referral criteria, and length of treatment. The intervention grid can be used by POs and there is also a Behavioral Health clinician available to give advice on the three interventions.

All families receive trauma informed services. However, the assessment and mental health treatment plan is written for the youth. The CANS assessment, which includes a trauma section, is completed by clinicians for all youth served by Wraparound services.

Ten clinicians are currently employed and all are trained to assess for history of trauma or any chronic traumatic experiences. They are also trained to respond to youth and families in a manner that takes into account the potential, if not evident, trauma histories to prevent re-traumatization, while also creating and increasing the sense of safety and therapeutic alliance.

Ninety-three youth were enrolled in Wraparound services between April 1 and September 30th. Ninety of the youth received a CANS assessment (two were discharged prior to 30 days, so did not receive the assessment). Within this time period, there were 46 youth discharged; each receiving a CANS assessment upon release.
The ACPD reports on the following CANS assessment data from youth discharged between April 1 and June 30, 2016:

- Thirty-three youth were discharged
- Only 18 of those youth had complete data and were in the program for more than three months
- Fourteen out of the 18 youth (78 percent) saw improved scores in behavioral and emotional functioning

In addition to program fidelity and outcomes, fidelity is also monitored among agency staff as they are required to complete a Family Team Meeting (FTM) within 30 days of the case opening and on a monthly basis thereafter. This is measured and reported to ACPD and staff on a quarterly basis. Additionally, staff are required to complete a safety plan at 30 days and revisit the plan each month as part of the FTM. Safety plan completion is reported to ACPD and staff on a quarterly basis.

A Youth and Family Satisfaction Survey is completed upon discharge and measures the family’s perception of increased community supports, that staff were respectful to their spiritual and cultural needs and their gauge on staff engagement. The program maintains procedures written for each phase of treatment that staff are expected to adhere to. Examples of the procedure include timelines for opening a case quickly, completing an initial assessment and treatment plan, amount of engagement activity required at each phase of treatment and clear instructions for determining case termination. Supervised teaming meetings are to occur at each phase. Staff documentation is also utilized to ensure client visits are occurring. The mental health notes are approved by the staff supervisor.

Collaborative Court (CC)

Forty-one youth and their families were served during this period. Fifty youth and their families were projected to be served, but this program experienced a decline in the number of referrals. The CC members, including intensive case management staff, are making efforts to reach out to referring parties for referrals. In addition, they are investigating which referral sources are decreasing and why. Fifty youth and their families are projected to be served during the next reporting period.
Between April 1, 2016 and September 30, 2016, seven youth graduated from CC. This means that these youth met all the terms of their probation, met treatment goals and were successfully dismissed from juvenile probation.

This state fiscal year, similar to the Wraparound intervention, CC began using and reporting on the CANS assessment data, which is collected for each youth at intake and discharge. The same indicators and methodology for QA to monitor program fidelity and outcomes are utilized in CC. This data will be tracked for CC in the coming months and an update will be provided in the next semi-annual report.

**Multi-Disciplinary Family Therapy (MDFT)**

This program took the place of the Parenting with Love and Limits intervention. Due to the provider expressing cultural, therapeutic and practical concerns about the model, it was decided to terminate their contract for Parenting with Love and Limits services. After collaborating with the provider, Lincoln Center, and partners at Alameda County BHCS, the ACPD planned and implemented the new MDFT program, which began accepting referrals in August 2016. The MDFT has served five youth. The program is projected to serve 22 youth at any given time and 50 total youth per state fiscal year.

The MDFT is an integrated, comprehensive, family-centered treatment for teen and young adults with problems and disorders. The MDFT simultaneously addresses substance use, delinquency, antisocial and aggressive behaviors, mental health disorders, school and family problems, and prevents out-of-home placement through a variety of therapeutic and behavioral supports for adolescents, parents, families and communities.

As of September 30, 2016, there were three full-time clinicians (one bilingual), one family advocate (bilingual), and one program manager hired for MDFT. The second language services are offered in Spanish. It is anticipated that all new staff will have their introductory training completed by October 15, 2016. Within three to four months, each clinician will have up to seven cases. The program manager will also carry one case.
The implementation has gone smoothly and three units within the ACPD will have direct referral access to the program, as MDFT staff will present the new program to all Deputy POs with direct referral access in October 2016.

The three clinicians and one program manager are currently employed and all are trained in trauma focused practices. Staff are trained to assess for history of trauma or any chronic traumatic experiences. They are also trained to respond to youth and families in a manner that takes into account the potential, if not evident, trauma histories to prevent re-traumatization, while also creating and increasing the sense of safety and therapeutic alliance.

Clinicians complete a CANS Assessment for all youth served by MDFT. Five youth to date have received an assessment at intake and none have been discharged yet. The CANS assessment includes a trauma module; all youth receive trauma informed services and the assessment and mental health treatment plan is written for the youth, but ACPD has been unable to access this data for the time period of this report. A more robust reporting system is being developed for the CANS assessment that is administered to clients. More information is to be included in the next semi-annual reporting period.

Systemic Issues

DCFS is currently negotiating with labor unions around the integration of SOP into current practice. This includes the use of SOP tools, and supports and changes to current court reports and documents. Temporary agreements have been reached in the areas of Intake, ER, Dependency Investigations, Informal Family Maintenance, and Family Maintenance (FM).

The DCFS and ACPD are anticipating hiring additional Continuous Quality Improvement (CQI) case reviewers as each agency only has one case reviewer at this time.

Evaluation

In this reporting period, DCFS representatives have only been able to participate in half of the ESC calls due to a conflict with their internal SOP Implementation Team Meeting. However, staff have
been reviewing notes and audio provided by the Evaluation Team, are in regular contact with the state evaluator, participate in the annual evaluation site visit and the quarterly program individual county calls. As of September 2016, a DCFS representative has been consistently participating in the ESC calls and will continue to participate.

The DCFS collaborated with the Evaluation Team to send out the staff and stakeholder survey on time, which resulted in a 52 percent response rate from stakeholders. The survey was distributed to 89 stakeholders. The DCFS worked closely with the Evaluation Team on DCFS’ alternate methodology for distributing the parent/guardian feedback survey that will occur early in the next reporting period.

The DCFS is in continued discussions with the Evaluation Team about a possible cost sub-study.

Local evaluation efforts included youth and parent feedback surveys early in the reporting period to obtain baseline data about youth and family engagement. The DCFS also continued to survey Child Welfare Workers prior to the start of the two-day SOP overview to obtain baseline data about worker knowledge, skills and attitudes. The DCFS included performance metrics in the new contract for evidence-based parenting education classes and are also planning a local evaluation, however, that plan is still under development. Responses to both the youth and parent surveys showed youth and parents experience positive communication with workers. However, also highlighted is the need for increased youth and parent voice. As the youth and parent surveys were mailed, the response rate was about 11 percent for each. There were 897 surveys sent to youth and 115 responses were received; 626 surveys were sent to parents and 70 responses were received. Youth and parents were offered an opportunity to win a raffle gift card for returning the survey.

The ACPD, the Evaluation Team and intervention providers had a conference call in September 2016 to discuss the parent/guardian survey, which will be distributed in November 2016 by the providers. During this reporting period, the Alameda County Board of Supervisors (BOS) reviewed the DSA between ACPD, NCCD and Westat. Alameda County will report on the finalization of this
agreement in the next reporting period. The ACPD has a conference call scheduled with their intervention providers and the Evaluation Team to discuss the monthly dissemination of CANS assessment data. In order for NCCD to access CANS data from the provider, individual waivers will need to be distributed to existing clients and any new clients who receive the intervention services. Once consent is received from families, clients’ CANS data will be released to ACPD, who will then de-identify the data except for the unique case identifier, which will be used by NCCD to match to other probation data.

The ACPD partners with BHCS to monitor the providers and the DSA, which does not specifically cover data from BHCS (the CANS). The ACPD, their intervention providers and the Evaluation Team will discuss how to share the data without violating confidentially or Health Insurance Portability and Accountability Act laws during an upcoming conference call.

2. Butte County

*Interagency Collaboration*

The Butte County Department of Employment and Social Services’ (DESS) Children’s Services Division (CSD), and the Butte County Probation Department (BCPD) have a long standing, collaborative partnership that has extended into the Project. Each agency is responsible for providing leadership to the Project, collecting data, and local evaluation needs; the two departments also meet as needed for Project implementation and oversight.

Butte County reported two key staffing changes. Anna Loughman is the Assistant Director of Administration/Fiscal of CSD’s Fiscal Program Management Team and Wayne Barley is Chief Deputy PO of BCPD’s Program Management Team.

*SOP*

There were 312 children and families served during this reporting period. This number is more than the projected 100 children and families, and was due to the addition of one Child and Family Team (CFT) meeting facilitator and seeing an increase in referrals. The
projected number of children and family to be served during the
next reporting period is 137. Butte County anticipates the number
of families to be served in the next reporting period to be roughly
the same as the number of families that were served during the
current report period.

CSD’s ability to provide CFT meetings was increased by the
addition of one additional CFT facilitator, effective July 1, 2016.
There has also been an increase in referrals for CFT meetings,
particularly for families receiving voluntary services, and families
that have open referrals which may or may not be promoted to a
case. The new facilitator focuses on facilitating meetings at the
early stages of contact with families who have open referrals which
may or may not result in a case being opened.

The monthly SOP Team Meeting has been reformatted to include
learning and sharing specific SOP tools and putting them into
practice using examples from actual cases. The SOP Team
Meeting is open to any social worker, supervisor and service
provider interested in attending. Meeting notes and training
materials are uploaded to the CSD’s intranet for use by all staff.

As CSD’s policies and procedures are updated, SOP language and
practice are incorporated where applicable. The use of their
internal SOP case review tool has been modified to better reflect
their case review process. The users have been trained on the
new tool, which has been reinstated for case reviews starting
October 1, 2016.

The SOP coaching services for staff and supervisors has been
occurring regularly on an as requested basis. A new contract for
SOP Coaching and Consultations Services began on July 1, 2016.
The new contract increased the number of hours for coaching and
consultation from the contracted service provider from 30 hours per
month to 60 hours per month. This expansion, along with the
addition of the one full-time CFT meeting facilitator, both effective
July 1, 2016, has resulted in increased expenditures for this
intervention.

The CSD is monitoring fidelity among agency staff for:
(1) engagement; (2) assessment of needs and strengths;
(3) teaming; (4) identification of needs and strengths;
(5) identification of support networks; (6) case plan goals; and (7) transition planning. Staff is monitored on an ongoing basis with the exception of CWS Case Reviews, which occur on a quarterly basis. Methods employed to assess fidelity include: (1) case reviews; (2) analysis of CWS/CMS, Safe Measures and California Child Welfare Indicators Project data; and (3) surveys and interviews.

Methods employed to assess fidelity among service providers include monthly reports from agencies facilitating CFT meetings and quarterly reports from the contractor providing SOP Coaching. Child Welfare Services Case Reviews have built in fidelity measurements for engagement, assessment of needs, and strengths, teaming and case plan goals. As part of the CQI process, SOP strategies are identified in the County’s System Improvement Plan (SIP). The CSD is also responsible for BCPD Child Welfare Services Case Reviews.

**Kinship Support Services Program (KSSP)**

During this reporting period, 23 youth and their caregivers were served with KSSP services. Thirty five children and their families were expected to be served. At the close of this reporting period, the services provided by the KSSP Program have been operational for one year. The projected number of children served was not achieved due to the implementation and operationalization challenges of implementing a new program. It is anticipated that 38 children and their caregivers will receive KSSP services during the next reporting period.

Due to continued staffing shortages, the CSD has not been able to dedicate one full-time equivalent social worker to the KSSP Program at this time.

The service provider, Lilliput, hosted a “Backpack Event,” in which 16 families attended and 87 backpacks were provided to kinship families. Lilliput has also reached out and presented to the majority of CSD units to increase referrals to the KSSP Program. Referrals to the KSSP Program increased from 25 during the last reporting period to 27 this reporting period. The number of families who received Information and referral for services through the KSSP Program increased from 19 during the last reporting period to 98
during this reporting period. KSSP support groups continue to grow in attendance. The additional KSSP social worker has increased the number of caregivers attending the support groups by calling all families enrolled in the KSSP Program to gauge interest in the support group and remind caregivers of the service and the benefits of participating in a support group. The KSSP social worker has worked diligently to expand and meet the needs of the families who have engaged with the KSSP Program.

**Voluntary Wraparound Services**

The CSD served eight children and their families with Wraparound services. There is a maximum of five children at a time budgeted to receive Voluntary Wraparound Services and the maximum length of service is six months. The projected number of families served during this reporting period was 20; at the time of the estimate, there was a possibility that additional funding might be allocated to increase the number of children receiving these services. The projected number to be served during the next reporting period is ten children and their families.

As reported in the last semi-annual progress report, this optional intervention was amended slightly. The focus of incorporating preventative Wraparound principles is still the goal of this optional intervention. The original county plan submitted stated that this intervention would be accomplished by the expansion of the Supporting Our Families in Transition (SOFT) program to include key Wraparound principles and prevention focus to the existing program. However, in year two of the Project, the CSD decided to implement preventative Wraparound services for families prior to child welfare intervention through the existing Wraparound services contract instead of through the SOFT Program, as a more streamlined and effective approach. Three children and their families successfully completed Voluntary Wraparound Services during the reporting period. Tools utilized to track this intervention have not changed.

The expenditures for this intervention remain relatively consistent, as the payment rate per participant is fixed and the number of participants receiving services at the same time is limited to five.
**Wraparound**

In this reporting period, the BCPD served 13 families with Wraparound services and projects it will serve six families during the next reporting period. It was projected that 12 families were to be served this reporting period.

Seven families transitioned successfully out of these Wraparound services in June, 2016. In addition, the BCPD increased staff by one full-time employee, assigned to the Project, and all staff have attended on-going Project training activities.

All components of Wraparound are monitored for fidelity among agency staff on a weekly basis. Fidelity has been incorporated into the CQI process.

**Systemic Issues**

Butte County reported data collection limitations on the usage of SOP tools.

**Evaluation**

The DESS participates in monthly ESC calls and had its first site visit from the Evaluation Team in July 2016. Site visit activities included focus groups with the implementation team, data team and service providers, as well as interviews with leadership and management.

The DSA between NCCD and Butte County was fully executed on September 13, 2016 and was approved by the Butte County BOS. The DESS also completed its first staff and stakeholder web survey in September 2016. The feedback from the survey will provide information about how families are engaged and how services are provided.

Data collection on the usage of SOP tools by social workers continues to be a challenge (i.e. how to track the use of tools used to capture the child’s voice, and whether or not case plans are behaviorally based), as much of this information is not tracked electronically.

Information on the usage of SOP tools by social workers is primarily available via the hard copy case file or in the electronic case file.
Documentation of SOP practice is seldom available through ad hoc or vendor reports. The Evaluation Team will continue discussions with Butte County to mitigate this issue.

3. Lake County

Interagency Collaboration

Lake County Department of Social Services (LCDSS), Lake County Probation Department (LCPD) and CWS meet monthly to discuss new programs, and are jointly using an internal evaluator to monitor the programs; these are new collaborations. The new programs refer to the Probation and CWS Family Wraparound programs implemented for the IV-E Waiver. Although provided by one contractor, the criteria and outcome measures for Family Wraparound are different for CWS and for Probation. Ongoing collaborations include CWS staff and POs meeting on the County’s Interagency Placement Review Team and Family Wraparound Oversight Committee.

Funding for LCPD youth in out-of-home care is administered through the LCDSS; this includes managing contracts for services such as LCPD’s Differential Response (DR) and Family Wraparound programs.

LCDSS reported three staffing changes. The Deputy Director is now the Director of Social Services and continues to work with the Project team. One of the two CWS Program Managers now serves as Interim Deputy Director, overseeing CWS and is part of the Project team. Other additions include two social worker supervisors and one supervising analyst. These changes have not interrupted the collaborative process.

SOP

The LCDSS projected it would provide SOP services to 151 children with open cases and 323 children with investigated referrals. The total number of children served during this reporting period was 474, close to their projected number of 480. The projected number of children to be served in the next reporting period is 470.
Staff turnover and influx of new staff in need of training continued to be a barrier in this reporting period. A key decision made during this period for LCDSS was to schedule in-house Facilitator Training along with training on the use of the Three Houses and Safety House tools for all staff. Another key decision for LCDSS was to train all staff to incorporate SOP language into all court reports and case plans. The LCDSS has a training and coaching contract with the Northern California Training Academy (NCTA) and expects the aforementioned training will occur during the next reporting period.

Accomplishments made by LCDSS during the period include: (1) SOP Foundation training for all staff; (2) Group Supervision training for all supervisors; (3) individual training plans created for all social workers and social worker supervisors; (4) using the SOP file review tool in conjunction with the Federal Case Review tool to monitor fidelity; and (5) creating and testing a database to track fiscal data related to SOP interventions. Goals for the upcoming reporting period include: (1) supervisor’s use of the SOP Fidelity Checklist with staff; and (2) using the SOP Case Review Tool and SDM review tool for each social worker’s annual QA Check.

The CWS has seen an increase in SOP based interactions between families and community partners and an increase in the frequency in which FTMs are being held. The CWS infers the increase in interaction is due to the SOP Foundation training it provided to its partners. The CWS also implemented specific Family Engagement Efforts codes in CWS/CMS, which are being used to inform Project fidelity measures in Safe Measures.

The LCDSS monitors fidelity to SOP components during staffing and one-on-one supervision sessions, including: (1) engagement; (2) assessment of needs and strengths; (3) teaming; (4) case plan goals; (5) identification of support networks; and (6) transition planning.

Relevant findings about LCDSS SOP fidelity during the reporting period are that the three columns tool is consistently used by social workers; they have a clear understanding of this tool. Also, more training is needed to help ensure confident use of the Safety House and Three Houses tools.
Fidelity has been incorporated into the QA process. The SOP file review tool is being used in conjunction with the Federal Case Review tool to monitor fidelity.

**Family Wraparound**

Family Wraparound is an optional intervention for the LCDSS CWS and required for the LCPD. The projected number of children served for this reporting period was 30. The CWS served 44 children with Family Wraparound and projects it will serve 40 children in the next reporting period.

As a result of the Family Wraparound intervention, SOP and FTMs have increased in frequency. LCDSS has created a Family Wraparound social worker position. It was discovered that, on occasion, it was not clear to social workers which program to refer families to – Family Wraparound, Traditional Wraparound, or DR. The LCDSS made a key decision to create a referral mapping tool to help direct referrals to the appropriate program. Please refer to Appendix B.

Another key decision was to provide SOP training to the Family Wraparound provider in order to help develop services and shared language between agencies. A meeting was held with several community partners to help ensure mutual understanding of the criteria used to indicate Family Wraparound as an appropriate intervention. Family Wraparound intake is now taking place with LCDSS staff present to ensure coordination of efforts.

Accomplishments reported by LCDSS include a timelier reporting of families entering the program as the team adjusts to data reporting requirements. Also, several families have successfully completed the program and have not had additional involvement with LCDSS.

The LCDSS planned to begin developing policies and procedures specific to Family Wraparound during this reporting period, but the development process will actually begin during the next reporting period.

A barrier impacting the tracking of data was the inability to share family specific information in real time via a living document that could be updated by several users in different locations.
Since working with the contractor and local evaluator, LCDSS has revised the case specific reporting tool utilized by the Family Wraparound provider at closing. The services provided and family progress indicators have been changed to an easier to understand format.

The LCPD served 16 children ages 12 to 17, inclusive, with Family Wraparound Services. The projected number of children served was less because the number of crime reports submitted from law enforcement agencies decreased.

The Parenting Class program name was revised because parents seemed to be put off by the name and calling it a class. The LCPD changed the name to Surviving Parenting and modified the content to meet parents’ needs. Other accomplishments and progress made during this reporting period include:

- Ten minors participated in LCPD’s Summer Program; they attended Independent Living Program (ILP) and recreational activities twice a week.
- Ten to 12 minors are participating in quarterly ILP classes
- Six parents completed the Surviving Parenting program

The Summer Program and ILP classes were new this period. The LCPD also provided Girls’ Circle and Moral Recognition Therapy training to POs; these services will begin in the next reporting period.

The LCPD attributes the increase in staff training and the addition of new programs to their Family Wraparound implementation. There is now two staff working with LCPD’s ILP population instead of one.

All referrals to LCPD’s Family Wraparound provider are screened and approved by a Probation supervisor. Fidelity is assessed every six months by a contractor using the Wraparound Fidelity Index (WFI).

The LCPD tracks family progress throughout the program by compiling results of the provider’s scoring system and by tracking any referrals (all response types) received once a family has completed the program. The LCPD and the Family Wraparound
provider meet every two weeks to discuss individual cases, and once per month to discuss administration of the intervention.

The LCPD discovered the contracted provider has been focusing more on complicating factors impacting families than on harm and danger issues. This has been resolved through meetings and training sessions with the Family Wraparound provider. At this time, fidelity for LCPD has not been incorporated into the QA process.

**Systems Issues**

Systems issues for Lake County CWS include CWS/CMS, as it does not facilitate tracking data. Lake County also reports that Foster & Adoptive Parent Licensing, through CDSS’s Community Care Licensing Division, housing and mental health services for adults are constant issues and has underdeveloped fidelity monitoring. The LCPD also faces foster parent recruitment challenges as Probation youth are stigmatized, an issue exacerbated by the county’s small community.

**Statewide Evaluation**

During this reporting period, the collaboration with the Evaluation Team resulted in the CWS’s creation of a Project scorecard in Safe Measures, which made the data reporting needs easier to understand. Representatives from the Evaluation Team visited Lake County during the summer. The LCDSS, CWS and LCPD met with the Evaluation Team.

**Local Evaluation**

Significant findings from Lake County’s local evaluation endeavors for this reporting period include the implementation of an evaluation of Family Wraparound for CWS based on defined criteria for referral. The goal is to mitigate safety concerns, prevent removals and transition children back in to the home.

The evaluation tracking includes: tracking the number of active referrals by month, cumulative number of referrals over time, and numbers and percentages of families who are successfully completing (graduating) from Family Wraparound over time. Lake County is tracking the percentage changes on Family Advocacy
and Support Tool (FAST) scores for graduating families and association with time in the program and the number of FTM’s. Lake County also plans to track additional costs and categories of services utilized, and substantiated re-referrals associated with families engaged in Family Wraparound.

The criteria defined for referrals to Family Wraparound include: (1) from the ER Unit as voluntary open case; and (2) from Family Reunification (FR) Unit to FM as (voluntary or court) open case. Preliminary findings indicate Lake County has seen 66 percent of families graduating from Family Wraparound who were CWS referrals with an average reduction in FAST needs (pre/post) scoring at 45 percent over average of 95 days in Family Wraparound.

Lake County’s goals include strengthening demographic (number/ages of children in family and whether single parent) data collection to be able to look for trends. This also presents a challenge as there are multiple sources of data being collected through cumbersome manual processes. Also, there are challenges with the timing of data collection and completeness of data. There is difficulty in scheduling and meeting jointly with partners.

The LCPD is implementing an evaluation of Family Wraparound based on defined criteria for referral. The goal is to decrease juvenile justice system involvement. The LCPD is tracking the number of active referrals by month, cumulative number of referrals over time, and number and percentages which are successfully completing (graduating) from Family Wraparound over time. They are tracking Positive Achievement Change Tool (PACT) domains for youth referred to Family Wraparound (non-completing and completing youth). The LCPD is also tracking the percentage of changes on PACT and FAST scores for graduating families and association with time in the program and the number of FTMs. The LCPD has plans to track additional costs and categories of services utilized and any re-arrests or violation of probation associated with youth and families engaged in Family Wraparound.

Criteria defined for referrals to Family Wraparound include youth aged 12-17 that commit crimes and are evaluated by the Reasonable Candidate form to not be at-risk for out of home
placement. When assessed by the PACT, one of their top three criminogenic needs is Current Living Arrangements. The youth and families have agreed to engage in the program.

The LCPD youth PACT domains are identified as needs at intake for Family Wraparound: 90 percent Living arrangements, 67 percent Alcohol and Other Drugs, 55 percent relationships, 33 percent school status and 23 percent aggression. Seventy percent of graduating youth met the target of at least 20 percent reduction in PACT risk level scores averaged across three domains. Currently, 32 percent of the probation youth referred are completing Family Wraparound.

A couple of challenges to data collection are multiple sources of data are being collected through a cumbersome manual processes and the timing of data collection and completeness of data. The LCPD is having difficulty in their ability to schedule and meet jointly with their partners. Lake County will be evaluating the Family Wraparound intervention and is currently contracting with Ferron and Associates. They are also working on developing a reporting system for tracking expenditures for enhanced services.

4. Los Angeles County

*Interagency Collaboration*

The DCFS and Probation are committed to implementing a unified, family friendly and child-centered RFA process to replace the existing multiple processes for licensing foster family homes and approving relatives and non-relative extended family members as foster care providers, and approving families for legal guardianship or adoption. The DCFS and LACPD continue to participate in the Child Family Services Review (CFSR). A team composed of DCFS and LACPD staff collected information on cases via interviews and document reviews to conduct the assessment process.

The DCFS, the LACPD Wraparound management teams, and the Department of Mental Health continue to meet bi-weekly to discuss the operational needs and changes to the program. There are several other subcommittee meetings between the departments to address intricate parts of the transition such as fiscal, management system, contract, compliance and outcome measures.
The LACPD’s Functional Family Therapy (FFT) supervisor participates monthly in the Eliminating Racial Disparity and Disproportionality (ERDD) meetings, held at Los Angeles County Dependency Court. The ERDD is a working group of professionals from DCFS, LACPD, County Counsel, judges and community partners. The goals of ERDD are to 1) implement cultural brokers; 2) enhance the recruitment of cultural brokers; 3) increase the percentage of African American children exiting the system; and 4) decrease the percentage of African American children in care.

Since the submission of the last progress report, one of LACPD’s Program Analysts was promoted to an Administrative Services Manager I. The Title IV-E management team is in the process of hiring a Program Analyst.

Core Practice Model (CPM)

The DCFS projected serving 24,000; the actual number of children who received CPM services is 17,500. The projected number of children was not achieved for this reporting period because of the time it takes for a social worker to become certified as a CFT Facilitator was longer than originally planned. The projected number of children to be served in the next reporting period is 24,000.

There have been changes related to program performance during this reporting period. The DCFS increased their Children’s Social Worker (CSW) staff by over 1,800 since 2013. They also increased corresponding supervisory and support staffing levels, accelerated CPM practitioner, coach and coach developer certifications department-wide, and, with Union support based upon attainment of necessary caseload reductions, executed departmental policy mandating CFTs.

Early implementation challenges centered on defining the “soft launch” of the Katie A. Immersion Strategy. The DCFS selected 32 cases for the first two immersion offices. In hindsight, the enormous depth of learning through the process of fully-implementing CPM-compliant practice changes for those 32 cases produced the following major areas that required immediate attention and resolution:
• Aligning Coordinated Services Action Team protocols with CPM principles and values;

• Wraparound program clarifications, specifically related to referral protocol and CSW participation in mental health-provider lead CFTs; and

• DCFS’ work with labor management regarding approval of the DCFS Child and Family Team Procedural Guide to mandate daily practice change rather than continue relying on inspiration to implement it.

There has been progress and accomplishments during this reporting period. Through the generosity of CFP, DCFS and DMH, the DCFS launched Phase One of a CPM Communication Campaign and is undergoing Phase Two planning. In addition, DCFS continues accelerated CPM training and coaching throughout the Department and, following execution of DCFS’ CFT policy, DCFS is mandating practice change based on projected caseload reductions anticipated through continued hiring. In doing so, DCFS has made good faith efforts in establishing countywide CPM implementation timelines and continues modest growth in the recruitment and retention of its out-of-home placement resource capacity.

Time away from caseloads for training remains an issue. The DCFS offices continue to use implementation teams to anchor CPM. Implementation teams allow for local teams to meet often, in small groups, to attend to the needs of the individual offices.

Since the last progress report, the CFT database went live. From April 1, 2016 to September 30, 2016, DCFS completed 1,719 CFTs; 1,305 were initial CFTs and 414 were follow-up CFT’s. Also, DCFS has increased the number of certified facilitators by 52.4 percent (from 506 to 771), coaches by 103.4 percent (from 86 to 179) and coach developers by 29.5 percent (from 44 to 57). The DCFS increased the number of CSW’s, Supervising Children’s Social Worker and support staff, accelerated CPM practitioners, coach and coach developer certifications department-wide, and, with the Union’s support based upon attainment of necessary caseload reduction levels, executed departmental policy mandating CFT’s.
Prevention and Aftercare (P&A)

The projected number of children served with this intervention was 11,064. The actual number of children served was 6,879. The number of people to be served in the next reporting period is 11,064.

During this reporting period, the P&A referral form was changed because of incorrect locator information on the form. The evaluation plan for P&A is still pending. The P&A agencies agreed to take steps to move forward with their own evaluation efforts as a group and DCFS decided to focus its second agency review on the evaluation efforts currently being implemented by the various agencies. It is anticipated the findings of the second agency review will inform future evaluation efforts. In addition, NCCD agreed to work with P&A agencies and DCFS to draft a Logic Model for the Program.

The P&A referral form was updated to include language that aligned the Protective Factors and CPM, the emails of referring CSWs and the ability to include an alternative phone number for families. In May 2016, a P&A Partnership Conference took place to highlight the innovative work being done by the various agencies in collaboration with the DCFS offices. During this past reporting period, California Partner’s for Permanency (CAPP) funding was provided to two of the P&A agencies aligned with the DCFS CAPP offices in order to fund Cultural Brokers and Effective Black Parenting.

Initially, the intent was to use a Quality Service Review (QSR) strategy for the second agency review, but because of the growing interest in the evaluation of the P&A Program, it was decided to change the second agency review to looking at the evaluation efforts of each agency grounded in the Protective Factor Surveys.

The data system has been modified to track information related to the referrals being generated by the DCFS offices and ultimately what happens with the referrals including services accepted, services declined and those unable to locate families. The monthly service reports from the agencies have also changed to capture the information being requested by the State Office of Child Abuse Prevention for the yearly report. The tool used for the second
agency review was adapted to be focused entirely on the evaluation efforts being implemented by each agency.

Los Angeles County’s P&A continues to be a newer program and, as a result, it has seen an increase in referrals as more CSW’s become aware of the program. In 2015, the agencies were reporting that DCFS referred families made up about 20 percent of their P&A families, which has increased to about 30 percent in 2016. During this reporting period, there was an increase in the delivery of the Effective Black Parenting Program and the Cultural Brokers Program as a result of additional funding from the CAPP initiative.

**Partnership for Families**

The Partnership for Families intervention has yet to be implemented as part of the Project; it is projected to start January 1, 2017.

**Wraparound**

The actual number served for this reporting period is 455 youth, ages 11 through 17. This includes 251 active cases, 50 youth who graduated from the program and 154 who dis-enrolled. In addition, management of Los Angeles County Wraparound contract is in the process of transitioning from DCFS to DMH, which resulted in increased workload for LACPD. The LACPD, DCFS and DMH continue to work collaboratively to ensure that youth and families are receiving quality Wraparound services. The LACPD projects that it will serve 465 youth the next reporting period.

The LACPD, DCFS and DMH collectively decided the Interagency Screening Committee (ISC) will no longer be used to screen Wraparound referrals. The ISC met on a weekly basis to review, approve, and assign cases based on rotation as well as to monitor Plans of Care (POC), Family-Safety and Crisis Plans and implementation of the Wraparound services. The ISC also tracked vacancies and enrollments and maintained case assignments and referral process. Since the transition, these roles and responsibilities have fallen on the individual departments. Currently, the LACPD Wraparound supervisor screens each referral for suitability. If the youth is not eligible for Wraparound, a referral is made to other services, such as outpatient services for mental
health, Family Preservation, FFT, Multi-Systemic Therapy (MST), Field Capable Clinical Services or Full Service Partnership. Furthermore, weekly assignment of Wraparound cases has been discontinued and Probation has implemented a daily case assignment upon referral submission. Revamping the Wraparound case referral, case screening and assignment processes resulted in a positive outcome. This is now implemented throughout the county and it has led to faster enrollment and delivery of services.

The LACPD hired a new Wraparound supervisor and an additional Wraparound liaison in late October 2016, as they do not have enough Deputy POs to cover each service planning area. The LACPD also requested approval to hire a Program Analyst, assigned to Wraparound to assist in data management, fiscal and outcome studies because Probation’s role has been increasing since the transition. Since the transition, Probation began receiving referrals through the Wraparound email inbox. Every liaison and Wraparound staff has access to the Wraparound inbox, allowing Wraparound staff to expedite the referral and enrollment process.

The Wraparound program management transition from DCFS to DMH is still incomplete. The effective date was extended to November 2016 and it is understood the transition will happen in phases and may be extended into the next state fiscal year. This is due to the assessment of DMH’s system-readiness and staff capacity. The Los Angeles County’s Chief Executive Office has tentatively approved DMH to hire 43 new staff to implement DMH Wraparound. Moreover, the current Wraparound contract and Statement of Work is being evaluated for feasibility of DMH’s mission and goals. This may lead to possible amendments to the current contract.

Los Angeles County has mandated that all Wraparound youth need Medi-Cal coverage to receive services. This decision has led to an increase in the provision of targeted mental health services. Every Wraparound youth now has a therapist assigned along with the facilitator, parent partner and Child Family Specialist.

*FFT*

The projected number of children to be served with this intervention for this reporting period was 200. The actual number of youth,
ages 12 to 17, served is 237. The projected number was not achieved for this reporting period. The projected number of youth to be served during the next reporting period is 280.

A pilot recruitment project was recently initiated to help increase the number of referrals to LACPD’s FFT. Staff obtain a list of all youth in placement with release dates within the next two months and contact their PO’s to introduce the program and to invite them to the MDT meetings to facilitate a collaborative transition process towards reintegrating into the community. Currently, FFT therapists are spending a considerable amount of time assessing incoming referrals for appropriateness in meeting the eligibility criteria or rerouting referrals. To free up FFT therapists to focus only on conducting the intervention with the family, an intake specialist is being considered to work on analyzing and researching the referral for appropriateness before it is accepted, as well as assist in the aforementioned pilot recruitment project.

Two culturally competent staff were hired to address the issues of disproportionality and subsequent arrest/placements rates of African-American youth in the southern parts of Los Angeles County. The FFT aims to improve family functioning, reduce youth delinquent behavior and substance use, and ultimately reduce criminal recidivism. The fidelity indicators tracked include graduation, timeliness and session completion rates. During this reporting period, 174 youth (73 percent) graduated from FFT, which is slightly below the FFT model goal of 80 percent. Ninety-seven percent had their initial contact with FFT staff within two days from the date of assignment or referral, and 90 percent had their initial FFT session within seven days from assignment or referral. Both indicators are FFT model requirements for timeliness and treatment pacing. For FFT clients who graduated, the average number of sessions completed was 12, whereas model requires a minimum of eight sessions. Finally, 89 percent of FFT therapists met the required session completion rate (i.e., seeing clients weekly) of the goal of at least 80 percent. These fidelity indicators suggest the therapists are closely adhering to the model requirements, increasing the chances for successful outcomes in the youth they are serving. Although not a fidelity measure, front loading rates, which are seeing higher risk clients three times within the first ten days, are also being tracked. Approximately 37 percent of all
youth served within this reporting period have cases which have been frontloaded. Preliminary outcomes such as out-of-home placements were also tracked, and as of this reporting period, 11 percent were dis-enrolled due to out-of-home placements.

Changes to the data collection tools include formula revisions to the data gathering excel spreadsheets, as well as the addition of new data elements; all of which help better answer the evaluation questions. Also, there are no significant findings or trends for LACPD related to FFT.

Functional Family Probation (FFP)

The LACPD served 191 youth, ages 13 to 17, with FFP services. The projected number to be served for this reporting period, 325, was less due to referrals not meeting eligibility criteria. The projected number of youth to be served during the next reporting period is 250.

A pilot recruitment project was recently initiated to help increase the referral rates to LACPD’s FFP. Staff obtain a list of all youth in placement with release dates during the next two months, contacts their PO’s to introduce the program and to invite them to the MDT meetings to facilitate a collaborative transition process towards reintegrating into the community. There is a need for Spanish-speaking Deputy POs in South Los Angeles. However, due to the lower than expected number of accepted referrals, the hiring of additional Spanish-speaking DPOs will be postponed. In the meantime, families with this language need are assigned to existing Spanish-speaking DPOs and caseloads are redistributed among the remaining DPOs.

Training for the Clinical Services System was completed in September for FFP staff to be able to enter client-level data. This system allows supervisors to monitor the staff’s adherence to the FFP model and to identify areas for improvement. Only new cases are being entered into the system.

The LACPD aims to increase family functioning and reduce recidivism and out-of-home placements through FFP. The FFP fidelity indicators tracked include treatment pacing and timeliness. The target goal of the FFP model is to schedule the initial session with the youth and family within 72 hours from the date of
assignment of referral; FFP staff achieved for 68 percent of the youth/families, just under the FFP model target goal of 80 percent. FFP DPOs are continuing to identify the causes, whether they are beyond their control, such as the family’s repeated cancellations and rescheduling, or whether they are due to staff, all of which are addressed and problem-solved during staffing conferences. The FFP participants who successfully graduated from the program spent an average of 183 days, which is slightly above the FFP model goal of 180 days. Reasons for the longer time periods are usually beyond the control of FFP staff and include delayed court dates or cancellation of sessions by families. These fidelity indicators suggest there is some room for improvement in the adherence to model requirements by FFP staff to increase the chances for successful outcomes for the youth they are serving. The LACPD is continuing to work on revising the data collection methodologies to better capture other FFP model fidelity indicators. Preliminary outcomes such as out-of-home placements were also tracked, and as of this reporting period, 28 percent of participants were sent to out-of-home placements while under the supervision of FFP staff.

Changes to the data collection tools include formula revisions to the data gathering excel spreadsheets as well as the addition of some new data elements; all of which help better answer the evaluation questions that may come up.

_Fidelity Indicators_

Fidelity is monitored for engagement, teaming, identification of support networks, case plan goals, assessment of needs and strengths, and transition planning. The role of CSW agency staff/community partners in fidelity assessments is to observe agency staff during CFT meetings and rate to what extent they observe staff implementing CPM. The initial monitoring of fidelity is done six months after a social worker has been trained on the model. Subsequent monitoring is completed on an annual basis.

A formal assessment of fidelity has not been developed at this time. However, DCFS has been using the CAPP fidelity assessment protocol as a model for measuring core practice strategies and behaviors. The DCFS’s CPM was developed in the likeness of the
CAPP Practice Model, in which the essential practice strategies and behaviors are being implemented and measured.

There are three tools used to measure fidelity:

• Observation Tool: Completed by each fidelity assessment team member and designed to provide context to the case and assess how staff use strategies to work with families as well as the extent to which certain issues are addressed during the meeting (e.g., safety, permanency, trauma, cultural values, circles of support) as it relates to effective communication and understanding the child and family’s needs.

• Observer End of Meeting Tool: Completed by a fidelity assessment team member at the end of the observation and is designed to identify the circles of support and their role in the plan developed for the child.

• System Support Survey: This survey helps staff understand the system supports in place to help staff in overcoming barriers experienced in their work with children and families and supporting continuous learning and development.

There were 32 Observation Tools completed this reporting period. Preliminary results indicated that observers scored social worker staff well in the areas of: 1) clear communication about safety and permanency issues; 2) discussing what needs to happen to support the family; and 3) discussing things that have had a major impact on the family. However, note that a large percentage for the areas of major impacts on the family (59.4 percent) and understanding the family’s trauma (56.3 percent) were not naturally observed during the observations. The area needing the most improvement was on incorporating the child and family’s cultural values, beliefs, and traditions in team planning and discussions.

There were 16 End of Observation Tools were completed this reporting period. Preliminary results indicated that the observers found the parents and/or children to have a clear understanding of what was needed for the family plan to work. Circles of support were observed as having a really clear understanding and child welfare staff were, for the most part, observed as having a clear understanding.
In terms of the extent to which the plan made sense, the observers rated the parents and/or children to having thought of the best plan possible to support the family. Circles of support and child welfare staff were observed for the most part as having a well-thought out plan. The DCFS reported that fidelity has not been incorporated into QA or CQI processes.

The LACPD reports engagement is monitored continuously since the inception of the enrollment agreement. It is reviewed seven days after the case has been assigned and monitored on a weekly basis for the first few months of service at the CFT meeting, depending on family need and crisis. It is monitored on a monthly basis thereafter. Assessment of needs and strengths are monitored through the development of the POC. During CFT meetings, identification of support and family engagement is facilitated by teaming. Each member talks to the assigned family members and Parent Partners engage the family to assess needs.

Case plan goals are identified during engagement with the network of support: teacher, coach, PO, therapist, doctor, and other family members. The case plan goals and transition plan are monitored through the POC. The CFT monitors and reviews the POC 30 days, six months and 12 months after the enrollment to ensure the Wraparound services are provided based on Wraparound fidelity and the family’s voice and choice.

Fidelity was assessed by using the Wraparound Fidelity Index Short Version (WFI-EZ), contracted with the Washington State University. However, DCFS, DMH, and LACPD collectively decided to discontinue WFI-EZ. The DMH and Probation are looking into other ways to monitor fidelity to the Wraparound model.

Assessment of fidelity among the providers is completed by the LACPD liaisons’ review of the POC. During this process, the liaisons ensure the family’s voice and choice is heard and their needs and strengths are identified. Liaisons also monitor and review the individualized POC for each family with cultural sensitivity in mind, making sure that POC is translated into their language. Also DCFS monitors and shares data on all providers for number of youth enrolled, disenrollment, successes, and length of services.
In addition, LACPD reviews recidivism, enrollment, disenrollment, and graduation data for Wraparound youth.

**Systems Issues**

System issues with DCFS are related to their development of a web-based CFT meeting tracking system. The DCFS is in the process of procuring a data management solution to fully support data needs for effective implementation of RFA.

The DCFS has continued its ongoing recruitment and support efforts with community and faith based partners to increase the number of state licensed foster homes.

Los Angeles’ DCFS is in the final stages of a contracting process with community-based organizations to provide increased support services to relative caregivers county-wide. One set of contracts is for Relative Home Assessment Services and the focus is helping relatives during the RFA approval process. The other set of contracts is for Relative Support Services and the focus is helping relative caregivers with ongoing needs post RFA approval. The DCFS and LACPD continue to improve their agency collaboration. The DCFS is beginning to engage community partners with the implementation of CPM and CFTs.

The LACPD is working on a recruitment plan to obtain and retain foster and adoptive parents. The DCFS is the lead agency for the Wraparound program and is responsible for the program’s QA. The DCFS also provides appropriate and required Wraparound training for staff, caregivers and service providers. The LACPD is collaboratively working with the other departments including DCFS and DMH.

**Statewide Evaluation**

The DCFS and the LACPD participated in the Evaluation Team’s site visit on June 27 through July 1, 2016. Evaluation activities included individual interviews and focus groups including external stakeholders, Cultural Brokers and Parents in Partnership. The DCFS continues to participate in the ESC monthly meetings and helped to develop the Staff Survey and the Parent/Guardian Survey. The DCFS worked with LACPD to facilitate the court approval of the state evaluator’s research petition and data-sharing
agreement to begin the process of transferring client-level data at regular intervals to the State evaluator. Los Angeles’ DCFS Prevention & Aftercare Section worked with the Evaluation Team to develop a Prevention & Aftercare Logic Model.

The DCFS continues to implement the CPM countywide. All regional offices and specialized programs are implementing at different stages. The LACPD arranged and recruited participants for the interviews and focus groups conducted with Project management and the implementers for the Wraparound, FFT and FFP programs during this site visit. The LACPD continues to participate in the ESC monthly meetings. Probation also held internal meetings with Wraparound, FFT and FFP staff to keep them informed of the ongoing state evaluation activities and to develop a process to distribute and collect the upcoming parent/guardian surveys. The LACPD also identified and developed a comprehensive list of participants for the state evaluation’s web-based survey ranging from staff to county partners to other community-based stakeholders and has worked diligently to get the survey disseminated.

The transition of the lead agency responsibility for the Wraparound program is still in progress from Los Angeles’ DCFS to DMH. Therefore, it continues to be a challenge to obtain data for Probation youth. The LACPD is also continuing to work with DMH as they take over the lead role in Wraparound. Both departments are working on finalizing the process to expand the target population to include pre-adjudicated Probation youth. Because this is not yet in place, there is no data to report on this new pre-adjudicated target population.

Local Evaluation

The DCFS does not report any local evaluation activities.

The LACPD reported they had a student intern do a qualitative survey by using the Youth Services Survey for Families with a sample size of 12 randomly select closed Wraparound cases. The general finding of this evaluation was Wraparound has had positive results for both the youth and parents. Moreover, the majority of the youth that participated in Wraparound have benefited from the program.
The LACPD’s research question was “Are the youth and family satisfied after completion of the Wraparound program?” The evaluation activities are completed.

The preliminary finding showed the following result out of the 12 families:

- Eleven families felt their children were better able to cope when things go wrong.
- Eleven families indicated their children were better at handling life.
- Twelve families stated their children were doing better in school and/or work.
- Eleven families stated staff were sensitive to their cultural/ethnic backgrounds.
- Twelve families indicated staff treated them with respect.
- Twelve families stated they participated in their children’s treatment.
- Nine families helped to choose their children’s services.
- Eleven families stated the services were available at times that were convenient for the family.
- Eleven families were overall satisfied with the services received.

This intern was only with Probation for approximately ten hours per week for eight weeks. The intern also experienced some issues with the families being responsive. Due to these challenges, the sample size was too small to draw any significant conclusions.

Neither department reported any amendments to the County Plan.

5. Sacramento County

*Interagency Collaboration*

The Sacramento County DHHS and Sacramento County Probation Department (SCPD) have a significant relationship in planning and coordinating services for crossover youth. These departments took steps to implement Georgetown University Center for Juvenile Justice Reform’s Crossover Youth Practice Model, which focuses on better communication and collaboration between agencies and system partners. The departments have seen an increase in effective communication and in the coordination of services due to
the programmatic and fiscal activities that include a service sharing agreement allowing the increase of services to crossover youth. The DHHS and SCPD have also strengthened their collaboration and coordination of care with crossover youth who have been identified as having been exploited.

Sacramento County established a Waiver Evaluation Committee to review data relevant to key outcomes under the Project. Committee membership includes the DHHS Director and leadership from Child Protective Services (CPS), SCPD and the Department of Human Assistance. There have been no changes to the county’s Project management team composition since the last progress report and the on-going partnership between DHHS and SCPD supports the leveraging of expertise and resources needed collaboration.

Collaboration and coordination with service providers continue to flourish. A Permanency Steering Committee has been established to review data, address barriers and celebrate successes. Sacramento County representatives also attend Executive Director Meetings with representatives from the Child Abuse Prevention Council (CAPC), Family Resource Center (FRC) providers and First 5 Sacramento. In addition, the SCPD engaged California county and service providers as it presented during the Partnerships for Well-Being Institute held in June, 2016. The presentation focused on expanded partnerships, well-being enhancements and Wraparound implementation successes resulting from their participation in the Project.

**SOP**

Based on Sacramento County’s implementation progress as of March 2016, it was anticipated 12,351 children would be served during this reporting period; the number of children served was 4,785. This projection was based on the conjecture that all current social workers would receive SOP Foundational Training by June 2016. Taking into consideration staff attrition rates, it was estimated that 89 percent of all children in the identified population would be served by this intervention on a monthly basis; however, several factors presented barriers to achieve this projection: (1) additional training dates were needed to secure instruction for all identified social workers and only 60 percent of staff had
received training; (2) transfer of knowledge between training and actual practice occurs at varying rates for staff; (3) information gathered regarding effective coaching highlights the need for supervisory staff to participate in coaching sessions and to be trained as coaches; (4) an increase in new supervisors who will need to be trained in coaching staff on SOP practice which affects the overall integration of SOP practice at the line level; (5) documentation expectations have not been fully implemented; and, (6) there is a lack of measurement capability at this point in the implementation process, making it difficult to accurately determine the projected and actual numbers of children being served. Now that the need for further supervisory training has been identified, CPS plans to complete additional training during the state fiscal year as increased capacity in this area will better assist social workers to incorporate SOP in their daily practice. As Sacramento County continues to work with the Evaluation Team, additional information will be gathered from surveys with staff, stakeholders, and parent/guardians which will continue to guide the implementation process and provide better clarity to accurately make future projections.

Based on the current implementation progress and the needs identified above, it is anticipated that 6,646 children will be served in the next reporting period. This projection takes into consideration the percentage of social workers trained, the incremental increase of coaching services, the skill level of supervisors, and the introduction of documentation expectations.

The SOP Steering Committee is in full force and made continuous efforts to direct implementation. Key decisions and activities during the current reporting period include: (1) the identification of supervisors who have not completed the required SOP Training/Coaching for Supervisors and establishing training dates for them; (2) continuing the coaching contract with the NCTA; (3) starting to develop internal coaching logs aimed at measuring the effectiveness of coaching; and (4) preparation and coordination to participate in evaluation site visit, staff/stakeholder surveys, and parent/guardian surveys.

Sacramento County has made significant progress in the implementation of SOP practice during this reporting period as training and coaching needs were identified including: (1) SOP for
Supervisors; (2) behaviorally based case plans; and (3) harm and danger statements in depth training. The DHHS anticipates staff will complete SOP training by October 2016.

Coaching also continues to be utilized and the combination of training and coaching has increased the capacity of supervisors and staff to: (1) strengthen family engagement; (2) increase critical thinking skills; and (3) develop appropriate safety networks. Further, an analysis of documentation was conducted to effectively determine how and where SOP components should be recorded in referrals and cases, including feedback sessions, a review by county counsel and labor discussions. Staff in each regional office developed SOP Corners (informational boards) and toolkits. The CPS held a SOP Corner contest, increasing staff participation and motivation.

The DHHS monitors SOP fidelity through measurements in engagement, strengths and needs assessments, teaming, and the identification of Support Networks. Engagement is monitored by supervisor staffing and coaching efforts while the assessment of needs and strengths is measured through the completion and accuracy of Structured Decision Making (SDM) tools. Teaming is measured through Special Projects Codes and the Efforts to Outcomes (ETO) database. While the identification of Support Networks, previously measured through case review tools, is now monitored on a case by case basis by supervisors. Sacramento County is using the following approaches in assessing SOP fidelity:

- Direct observation - supervisors meet with social work staff on a consistent basis to expose staff to specific SOP tools, discuss the use of intervention components, and ensure they are being delivered as intended
- Indirect observation - case reviews are conducted on an ongoing basis by supervisors and managers
- Team observation - with the support and assistance of coaches, supervisors and social workers discuss the use of specific SOP tools in their work with families and their projected outcomes

These approaches are aimed at assessing how staff is using SOP in their work with families and whether or not the intervention(s) improve family engagement. Since the last reporting period,
Sacramento County has identified the need to ensure coaching is monitored and is in the process of developing a monitoring method. According to information received anecdotally from staff in addition to coaching feedback, there has been an increased participant responsiveness to use of SOP.

Sacramento County continues to take the following steps in an effort to incorporate fidelity into the QA/CQI process: (1) identifying and understanding the core components of SOP; (2) working to develop fidelity monitoring tools including staff/stakeholder web-based surveys and parent/guardian surveys; (3) providing on-going training and technical assistance through supervision and coaching; and (4) identifying themes and trends throughout the implementation process and adapting the process, as necessary, to increase positive outcomes.

*Family Finding and Kinship Support (FFKS)*

Sacramento County projected serving 75 children with FFKS. The current reporting period data reports from Sierra Forever Families (Sierra) and Lilliput Children’s Services (Lilliput) show Sacramento County served the number of children it projected as Sierra served 115 children under the Destination Family Program; Lilliput provided Case Management services to 217 (non-dependent and dependent) children and Family Finding services to 71 dependent children. It should be noted the data for both agencies includes rollover from the prior reporting period. Additionally, there is a small number of youth who received services from Lilliput in both the case management and family finding programs. Sacramento County projects Sierra will serve a minimum of 75 children at any given time during the next reporting period; Lilliput is projected to serve 37 to 45 new children through the Family Finding program and 61 to 75 new children with Case Management services.

The contracts with both agencies were amended during the current reporting period. The work of both of the contractors, Sierra and Lilliput, in conducting searches and outreach to identify family, helping children transition to kin homes, preparing children for permanency and locating and matching youth who have one or more barriers to permanency, such as, disabilities, large sibling groups, mental health/behavioral challenges and/or resistance to
permanency to the right family requires time and immediate outcomes are not always reflected.

Sierra was contracted to serve 100 children under the Destination Family Program, which serves permanent placement youth who have one or more barriers to permanency. Since the inception of the contract, the acuity of the needs and services required for this population have required that staff spend more time with each child than originally expected. In response to this finding, Sacramento County amended the contract, specifying that a minimum of 75 children will be served at any given time.

Lilliput was contracted to provide intensive family finding services to 120 to 145 new children per year. The initial scope of service for Lilliput was based on a population of youth being referred who had no preliminary family finding efforts and limited history of child welfare involvement. Efforts at Family Finding are currently made for a 30-day period by the county, prior to youth being referred, and therefore the youth who are currently referred often have none or very limited placement options resulting in Family Finding services that are more complex and time intensive. As a result, the Family Finding contract was amended and now reflects 75 to 90 new children will be served.

There have been, and continue to be, significant accomplishments with FFKS intervention; these accomplishments are detailed below for the two programs implemented as part of the Permanency Initiative. The Permanency Steering Committee, which is utilized to oversee the interventions, has expeditiously addressed barriers and challenges centered on logistics of having two collocated agency partners and insuring referrals are initiated appropriately per region, as they have been identified to ensure both the contractors have the necessary access and tools (logistics including various computer program accounts, printing and level of access to files) to perform to the agreed upon expectations. It was previously reported that additional partnering opportunities were being explored with the contractors, such as including them in the Permanency Case Reviews. Although this way of partnering is not yet a standard practice, it has continued to be tested throughout the current reporting period.
Destination Family program continues to work with a child until permanency has been achieved, which takes on average, 18 to 24 months. It is for this reason that every finalization is significant. During the current reporting period, legal permanency was obtained for nine children/youth served through the Destination Family program, which included eight finalized adoptions and one established legal guardianship.

Research shows that children who are placed in kin homes have a higher probability of achieving legal permanence and therefore every child that Lilliput helps to place with kin, is less likely to remain in the system and more likely to experience positive outcomes as an adult. Although placement with a relative is not always a viable option, maintaining connections with kin is very important to a child’s identity and growth. During the current reporting period, Lilliput completed Family Finding services for 37 children. At the time of closure to Lilliput services for these children, nine were placed with kin, an average of 40 relatives were identified per child, an average of 13.6 relatives engaged per child and, on average, 2.5 new connections were facilitated per child.

The primary tracking mechanism for this intervention is the oversight performed by the Permanency Steering Committee, which includes Division Managers as well as Executive Directors from the two contracted agencies. Both agencies prepare and submit quarterly data reports based on a list of data tracking elements developed in collaboration, which are reviewed in the Steering Committee meetings. Previously, it was reported the Steering Committee meets monthly, however during this reporting period the meeting schedule was changed to quarterly, to correspond with the review of the quarterly data reports.

Prevention Initiative

The Sacramento County projected serving 450 children within this reporting period and served 2,571 families. They project to serve 1,845 families in the next reporting period. The need to serve youth ages six to 17, was far higher than anticipated, dictating a need to amend the budget and scope within the current contract. Sacramento County, CAPC and the Birth & Beyond (B&B) Collaborative continue to expand services to families with children
six years of age and older. Staff has been trained in the expansion services for school age children such as Effective Parenting, Crisis Intervention Services, DR Services, Home Visitation, and Health Promotion. Included in the Crisis Intervention Services are subcontracts for domestic violence groups and individual counseling.

The Sacramento County CPS has an Information and Referral Resource Specialist (RRS) at its Hotline nine hours per week to reach families that may be evaluated out but may need additional services. The RRS also collaborates with ER social workers, sharing information and services. The goals behind this service expansion are to increase safe environments for children and decrease entries and re-entries into CPS.

Data tools used for the evaluation of the program have all been revised to capture the newly served population. The new Domestic Violence services funded by the Prevention Initiative are utilized at all nine B&B FRCs and providers have been changed in order to meet cultural and linguistic needs.

The B&B Home Visitation Program has exceeded the initial projected goals for referrals with families who have children ages six to 17 years of age. These referrals have come from various sources, such as CPS, hospitals, clinics, mental health/medical offices, schools, churches and walk-ins. The total referrals as of the first quarter of the state Fiscal Year (FY) 2016-17 are 659 with a goal of 900, which means as of this first quarter the program is at 73 percent of the fiscal year goal.

The B&B Home Visitation Program evaluation data, provided by LPC Consulting, show there was a reduction in the likelihood of a family having a subsequent substantiated referral, when comparing families with children ages zero to five years who participate in the B&B Home Visitation Program to like families who did not participate in the program. The CPS is funding a similar study for families with children ages six to 17 years to find whether there is a similar reduction in the likelihood of substantiated referrals.

Wraparound

The Sacramento County Probation Department (SCPD) projected serving 50 youth and families with Wraparound services. During
the current reporting period, SCPD served 52 youth and families, projecting it will serve 62.5 in the next reporting period.

Continued activities for this intervention included: (1) CFTs; (2) case Staffing meetings between provider staff and POs; (3) enrollment of youth up to contracted service limitations; and (4) monthly management meetings between providers and probation for operational and oversight purposes. The CFTs focused on linkages to additional/continuing services if needed and family stability among graduates. Long range and intermediate outcomes are being tracked and compiled for reporting to the Evaluation Team.

During this reporting period, SCPD finalized and implemented flex fund policy with provider agencies and held its second graduation ceremony for participants and their families. The SCPD also held collaborative Programmatic conversations with representatives from CDSS and collaborated with the Evaluation Team during evaluation-focused visit.

The Sacramento County is monitoring fidelity to Wraparound components through bi-weekly and monthly oversight meetings. The SCPD’s providers utilize a high fidelity Wraparound model, which requires the use of the WFI instrument to gauge fidelity. The SCPD reports the intervention was completed with fidelity for participating youth and their families. The SCPD participates in bi-weekly case staffing meetings where aspects of the Wraparound model are discussed and processed; staff also periodically observes CFT meetings to provide accountability and model fidelity. Staff and management from all involved agencies also participate in monthly manager meetings where issues regarding model fidelity and implementation are discussed and addressed as needed.

**FFT and Multi-Systemic Therapy (MST)**

The SCPD projected it would serve 15 youth with Preventative FFT and 45 youth with FFT services, also projected serving 12 youth with Preventative MST and 35 with MST services. The SCPD served 31 youth with Preventative FFT and 74 youth with FFT and projects it will serve 15 youth with Preventative FFT and 45 youth with FFT in the next reporting period. The department also served 25 youth with Preventative MST and 53 youth with MST, expecting
to serve 12 and 35 youth with Preventative MST and MST services respectively during the next reporting period.

The SCPD streamlined its activities for Wraparound, FFT and MST as all interventions include on-going activities including: (1) case staffing meetings between provider staff and POs; (2) enrollment of youth up to contracted service limitations; and (3) monthly management meetings between providers and POs for operational and oversight purposes. Officers and therapists focused on linkages to additional/continuing services and family stability among graduates. Long range and intermediate outcomes are being tracked and compiled for reporting to NCCD.

During this reporting period, SCPD held its second graduation ceremony for FFT and MST participants and their families.

Evaluation

Sacramento County continues to collaborate with the Evaluation Team. During this reporting period, progress was made on the following projects: (1) project evaluation site visit; (2) web-based surveys, which included messaging to staff and stakeholders and labor discussions; and (3) parent/guardian survey preparation. These surveys will be distributed during the next reporting period, in October 2016. Sacramento County also participates in the ESC monthly meetings and participates in monthly/quarterly calls with the Evaluation Team and CDSS.

The Sacramento County achieved a major milestone as it drafted and approved a data sharing agreement between the DHHS, NCCD, SCPD and Westat. This data share agreement will allow the Evaluation Teams to gather the county-level data needed for the state-wide evaluation. During this reporting period, Sacramento County prepared to begin the data collection process in partnership with the Evaluation Team. During the next reporting period, Sacramento County will conduct various evaluation activities including: (1) leadership interview and focus groups with implementation teams, staff, and providers; (2) web-based surveys with integral staff and stakeholders; and (3) parent/guardian surveys.

Systems Issues
Sacramento County continues to report the CWS/CMS system is not set up to capture specific SOP components. Although counties are able to upload or add information regarding SOP implementation and use of the practice, there is not an easy or efficient way to aggregate such data. The Evaluation Team will continue discussions around capacity building for county data systems.

Caregiver recruitment and retention remains a challenge for Sacramento County foster homes and Foster Family Agency (FFA) homes. Although this is not directly related to the Project, Sacramento County continues to participate in the Foster Parent Recruitment, Retention, and Support program in an effort to address barriers with this system issue.

Staff turnover and internal job promotions presented additional challenges to training new social work staff and newly promoted supervisors. Sacramento County also reports concerns as their current staffing environment and the pending implementation of the Common Core 3.0, the state-wide child welfare curricula for newly hired child welfare supervisors and workers.

6. County of San Diego

Interagency Collaboration

San Diego CWS and Probation has not had changes to their Project management team since the last reporting period. They continue to report having a collaborative relationship, which has strengthened as a result of participating in the Project.

SOP:

For the current reporting period, the County of San Diego CWS reported 49 percent of families (7,732 families) showed evidence of SOP interventions/tools documented. San Diego CWS projected serving 6,168 families and served 7,742 families in year two of the Project. San Diego CWS exceeded its goal and anticipates achieving the goal of 60 percent (9,252 families) during the next reporting period.

San Diego CWS is using SOP to improve key practice components such as addressing mental health issues, improving the quality of
visitation and establishing permanent connections for children and youth. To date, CWS is on target with its goals. For this reporting period, CWS provided targeted coaching to assist managers with infusing SOP tools into their management style and other best practice areas in CWS. A total of 13 days for a total of 78 hours of manager coaching was provided by the Public Child Welfare Training Academy (PCWTA). On average there were four participants on each day, making 52 opportunities available to CWS managers. In addition, CWS provided staff with advanced SOP training; 450 staff were trained in the Permanency SOP module and 193 staff were trained in the Reunification/Visitation SOP module. CWS plans to continue providing the aforementioned SOP training modules.

Fiscal trends in CWS include an increase in Developmental Screening and Enhancement Program and steady PCWTA and SOP/Pathways spending due to the timing of contractor invoices. During this reporting period service providers screened 378 children and youth age six to 17 and completed 673 developmental screenings and 696 behavioral screenings for children age zero to five.

San Diego uses the Strengths and Difficulties Questionnaire behavioral screening and also participates in a pilot program to assist CDSS in selecting a child assessment tool for CCR. San Diego CWS is piloting the Treatment Outcome Package tool and used it with 150 youth. The selection of CCR’s single child assessment tool is anticipated mid-year 2017. Partner community based organizations assess children with tools including the CANS, Children’s Functional Assessment Rating Scale and the Ages and Stages Questionnaire-Social Emotional. San Diego CWS also utilizes the Family Strengths and Needs Assessment to assess trauma in parents.

In addition to providing comprehensive developmental screenings for children, youth, and families, the County of San Diego has developed fidelity tools and measures that are linked to its CQI process. The County of San Diego CWS developed case and referral review tools to capture documentation related to the critical elements of SOP (tools and interventions) while also reviewing coaching sessions to assess fidelity. Trends in fidelity to SOP are discussed in CQI meetings.
The CQI team, which is comprised of staff representing each region, conducted 240 referral and case reviews during this reporting period, making recommendations as needed and reviewing for documentation specific to:

- Safety Mappings or other teaming
- Identification of safety or support networks
- Engagement
- Transition planning
- Case plan goals (behaviorally specific case plans)
- Assessment of needs and strengths

The CQI team shared SOP fidelity trends during CQI meetings. During this reporting period, CWS learned that CQI reviewers and SOP coaches have a direct view of the practice within the agency and that the CQI and SOP staff should be communicating those observations and trends to one another. The County of San Diego plans to discuss trends in SOP fidelity with CQI case reviewers and SOP coaches collectively as CQI and SOP staff will begin group coaching in October 2016.

Having multiple reviewers helped CWS recognize there is a need to have fidelity among reviewers to ensure consistency in the reviews. CWS trained reviewers to use the tools to ensure inter-rater reliability and created definitions for the questions contained in the referral and case review tool. Fidelity inter-rater reliability has been tested in the CQI process by having all reviewers review the same referral and case using the created definitions. CWS will continue improving its case and referral review process and will revise and strengthen the referral and case review tool definitions.

**Visitation:**

The County of San Diego served 142 children with Family Visit Coaching (FVC) services and projects it will serve 75 children in the next reporting period. CWS completed its CFSR meetings including County Self-Assessment (CSA), Peer Review and SIP stakeholder meetings and plans to include the FVC intervention in its SIP. In the last six months, the County of San Diego completed a significant amount of work to align these two plans and to improve their ability to impact this intervention.
San Diego CWS is now positioned to complete important work on this intervention and plans various activities to be completed in year three of the Project. Spending continued to increase due to prior contract augmentations which added additional coaching services. San Diego CWS goals include utilizing the Visitation Plan to help social workers and parents develop a common understanding of visitation expectations and targeting supervision and coaching efforts around progressive visitation. San Diego CWS also plans to ensure parents and children are prepared for and debriefed after visitation but have not added these pieces to other visitation practice activities. CWS is utilizing the ETO database to track the FVC intervention.

*Permanent Connections*

CWS served 20 children with Permanent Connections services. CWS projected serving 250 youth during this reporting period. However after reviewing the program, CWS learned the projected number was considerably high. On October 12, 2016, the County of San Diego amended its Project Implementation Plan reflecting Permanent Connections’ contract implementation date of May 1, 2016, and clarifying the services began in August 2016. CWS projects it will serve 120 children during state FY 2016-17.

Both CWS and the contractor are engaging in this type of work for the first time and there have been some unexpected challenges, such as releasing protected information and allowing the contractor to communicate directly with service providers without working through the social worker. These barriers are being addressed as CWS developed regional permanency experts in each region/program to support finding permanency for youth. This group meets on a monthly basis to report on what is working well and areas of improvement, and develops a plan to address barriers to facilitate success.

CWS plans to monitor family engagement through family centered meeting invitations and arranged visits with the child/youth. CWS will also monitor the use of mapping and Family Group Conferences for establishing permanency. Both of these activities are crucial elements in the Permanent Connections program and the County of San Diego expects to have a positive report regarding these activities.
San Diego County Probation Department (SDCPD) did not meet this reporting period’s service projection of seven to ten youth, as zero were served in this reporting period. The Permanent Connections concepts and practices are a cultural and systemic shift for the SDCPD as the department is engaging in this strategy for the first time, resulting in some unexpected challenges. Additionally the SDCPD planned training for their staff, which is scheduled to take place the first few months of the next Project reporting period.

While SDCPD staff are excited about these concepts and changes, developing procedures and targeted training to garner support from staff took longer than anticipated.

In addition, the Placement Waiver Administrative Team has very limited staffing resources as the team was pulled to focus on various areas including CCR implementation planning, the CSA and the SIP planning process. Allocating resources to these efforts created a barrier to moving forward as intended. However, SDCPD focused on aligning plans and strategies. As such, the Permanent Connections strategy has been incorporated into the CCR Foster Parent Recruitment, Retention and Support plan and the SIP.

The SDCPD, CWS, and the service provider engage in on-going collaboration efforts including planning and implementation meetings. As a result, SDCPD drafted policies and procedures for its staff and will provide training in November 2016, anticipating success in meeting the upcoming reporting period’s service projection of seven to ten youth.

Wraparound:

The SDCPD exceeded the service projection of 25 youth during this reporting period as it provided Wraparound services to 61 youth and their families. Of the 61 youth served, 55 were new referrals. SDCPD projects it will serve 37 to 38 youth and their families in the next reporting period. The increase in referrals is potentially influenced by ongoing training with staff, streamlining of the new Wraparound referral by eliminating one form and better understanding of the eligibility criteria. For the Federal FY 2015-16 SDCPD served 79 unduplicated youth and families.
The SDCPD continues its collaboration with the County of San Diego Behavioral Health Services (BHS) and service providers in establishing a quality assurance system as they continue to meet and work towards an agreement on fidelity measures and processes. During the last reporting period, the SDCPD shared its plans to expand the Probation Case Management System and Community Resource Directory data system. These data collection systems revisions and methods for tracking referrals have been successful.

Local Evaluation:

The County of San Diego will utilize Project reinvestment funds to partner with the NCCD and evaluate the FVC and Permanent Connections interventions. Leadership will review and approve the evaluation design and evaluation activities are expected to begin in early 2017.

Systems Issues

The County of San Diego CWS continues to report on the data availability limits within the CWS/CMS system.

7. San Francisco County

Interagency Collaboration

San Francisco County has strong county partnerships among their HSA, Juvenile Probation Department (SFJPD) and Community Behavioral Health Services (CBHS). The agencies meet regularly to coordinate planning efforts (including Project and CCR planning); the county partners review and troubleshoot any fiscal or programmatic issues and develop related policy, protocol and other relevant materials. The formal structure of the collaboration has changed since the Project implementation because a county partner leadership team was established to oversee the project.

SOP

There were 1,700 youth served, ages zero to 17, inclusive, during this reporting period. The projected number for the next reporting period remains at 1,700. The SOP workgroup formally convened and a charter was developed. Members elected to begin using NCTA’s fidelity tool, which assesses each SOP component, with
both program directors and supervisors. Additional fidelity tools are in development to better understand the behaviors of the Supervisors, Managers and Directors.

There has been ongoing training on SOP/CPM behaviors and interventions (200 staff have completed training). A large majority of the staff has received both training and ongoing coaching. At this time, an exact number of the staff cannot yet be provided because the coaching was not tracked precisely.

A SOP/CPM implementation workgroup established in 2015, with representatives from across the agency and from community partners, including representatives of social service agencies, Court Appointed Special Advocates and former foster youth advocacy groups, completed an agency wide evaluation of SOP fluency to obtain baseline data on how closely HSA is adhering to SOP principles. The study data is still being analyzed but the first data from NCTA shows that as a whole, the agency is practicing SOP in limited context.

The agency’s strongest SOP work was in engaging with families, but the agency had roughly the same level of fidelity to all of the SOP principles that the study explored. In response to this information, the agency will be conducting focus groups to better understand the challenges to full practice implementation and to develop strategies to address them. The agency is now working with the NCTA and the University of Nebraska to pilot a tool to assess how closely supervisors are adhering to SOP in their supervision work. Early evaluation planning included the selection of NCTA’s fidelity tool and the creation of a tool to assess supervisors. Ultimately, the supervisor tool will be expanded to include managers and directors and is expected to be in the field by the end of this calendar year. The workgroup has also developed subgroups to directly address safety planning and to define what actions are required during the life of a case in order to effectively plan for safety.

CPM behaviors are integrated into existing policy and desk guides and into competencies that guide all workforce development activities, including selection, coaching, training and performance management. Solution-focused language has been integrated into the CFT process. SOP-specific language has been integrated into
policy, as well as specific casework tools such as the investigative narrative, visitation documentation forms and the hotline screener narrative.

The SFHSA contracts with the BAA for SOP training, coaching and consultation. Additional staff have been trained in this reporting period and coaching is ongoing. The training and coaching is supplemented by internal coaches and training staff. Internal HSA coaches have been hired and have been trained by BAA coaches to help integrate SOP tools and CPM behaviors into daily practice. Their emphasis is on working directly with the supervisors and teaching them to be grounded in the behaviors to spread them to their staff.

Training and coaching has continued as planned. The BAA also conducted training on the integration of SOP into visitation practices. There were six full-day and one half-day trainings between June 2015 and May 2016. The visitation workgroup, whose membership consists of county staff and community based agencies involved in visitation supervision, informed the development of this training and many members, in addition to other staff and partners, attended the training. The visitation workgroup also updated visitation planning and related documentation to integrate SOP language.

After the fidelity study data has been fully analyzed and aggregated, the agency will share the results with staff from all levels of the agency. The purpose of sharing this data will be to get staff’s thoughts on what barriers have limited their capacity to fully implement SOP principles in their work. Action plans will be developed and monitored for each program based on the data.

Early fidelity work was completed to decide on the fidelity tool and a timeline for using it. The BAA tracks SOP module completion, graduation, and coaching and provide the data to SFHSA. Data from the fidelity tool are being tracked in Qualtrix and analyzed by their partners at the University of Nebraska. The SFHSA plans to share this data with the Evaluation Team and is working with them to develop an appropriate methodology to link it to outcomes.

Family Wraparound (Child Welfare)
There were 55 youth served during this reporting period, exceeding the target of 43 youth served annually. SFHSA is expected to serve 10 children and their families during the next reporting period, since enrollment has declined recently.

In the past year, SFHSA, SFJPD, Behavioral Health Services and Seneca updated various tracking and eligibility processes and related policies and protocols as part of the wraparound expansion. These partners have also begun quarterly meetings with three agencies providing wraparound services through subcontracts with Seneca: Center on Juvenile and Criminal Justice, St. Vincent’s and Edgewood to ensure consistent coordination and programming. The SFHSA worked with CBHS and Spark to introduce the Spark program to child welfare staff and began accepting referrals. Referrals for families now eligible for Wraparound through the Project have declined recently, and SFHSA, SFJPD and Seneca are reviewing this. Seneca is reaching to child welfare units to provide updated information to line staff which will help address this issue. As described previously, SFHSA continues to maintain a separate tracking process for those cases that are receiving Wraparound through the Project but are not in CWS/CMS.

Since the eligible Wraparound population was expanded through the Project, program enrollment has grown substantially, which has also allowed for maximization of EPSDT funding. Wraparound began serving clients through the Project in April 2015, and since then a total of 69 families involved in child welfare have been served. Fifty-five of these families were served during the current reporting period. This exceeds the annual SFHSA target of 35 children in FY 2015-16. The CBHS also finalized its contract with Instituto de la Raza to provide a Wraparound program for children zero to five, using the Child Parent Psychotherapy clinical intervention. This program began accepting referrals for child welfare clients in early 2016 and served four families in the reporting period.

The following were also accomplished in this reporting period:

- Meetings continued with subcontractors, SFHSA, SFJPD, CBHS, Seneca, and Seneca’s three subcontracted Wraparound providers to clarify expectations and ensure consistent communication and practice.
• The SFHSA, SFJPD and CBHS worked with Seneca to finalize an evaluation plan for the Wraparound program, which should be completed late 2016 for the FY 2015-16.

• The SFHSA and SFJPD worked with CBHS on a new Request for Proposal (RFP) that they are issuing for EPSDT this fall; all provider agencies providing Wraparound services need to be able to draw down EPSDT.

In partnership with Instituto de la Raza and CBHS, SHFSA finalized the referral process for Spark and information materials; the program began accepting child welfare referrals for children zero to five, as stated above.

The Wraparound population served in FY 2015-16 increased due to the expanded population now eligible. This resulted in Seneca being able to maximize not only the Project contract dollars, but EPSDT dollars as well. Accordingly, there are significant Wraparound reinvestment savings that will be used to support other programming. More time is needed to determine if this is a developing trend.

Wraparound (Juvenile Probation)

This reporting period, 12 youth and their families were served. It was projected that 16 youth and their families would be served. The SFJPD continues to experience a decrease in the number of youth involved with probation. Additionally, the expansion of Wraparound was to serve pre-adjudicated youth which at the time included a large population of youth that were deemed incompetent. This population specifically has decreased exponentially from the 42 youth under this status prior to the Project to three youth at the time of this report. The 12 youth and their families referred and served with Wraparound this reporting period did not include any deemed incompetent. Another 12 youth and their families are projected to be served during the next reporting period. This projected number is due to the decrease in the number of youth deemed incompetent as well as the continued decline of youth entering the delinquency system overall.

The SFJPD is working to improve staff engagement in the CFT meetings. Training is scheduled to improve the practice in October and November, which will be facilitated by the Seneca team. There
is also training scheduled for their Judicial partners to ensure familiarity with the process for determining eligibility and service expectations. For Wraparound, the provider’s services are monitored. Seneca utilizes the WFI-EZ tool to ensure fidelity to the model although during this reporting period there have been no relevant findings.

An identified barrier for SFJPD is the disruption to the continuity of care that exists when a youth who is receiving Wraparound is brought into detention. Although there are times Wraparound will continue when a youth is brought into detention, there is no financial support for this intervention during this time. Therefore, when a youth is in detention for approximately 30 days, Wraparound is terminated. The SFJPD notes that benefit can be drawn by beginning the intervention for youth in detention when Wraparound is the identified intervention as it would allow for the development of a relationship and engagement in the hopes of improved outcomes upon release.

The SFJPD continues to lack the workforce capacity to manage data evaluation, including the need to establish a separate tracking process for Wraparound cases since very few, if any, of their Wraparound cases meet the mandate for entry into CWS/CMS. This barrier is being mitigated by partnering with Seneca and SFHSA and utilizing the special project code and an additional tracking spreadsheet for tracking the cases. The SFJPD also plans to hire a IV-E Coordinator/Analyst to assist in the management and coordination for all Title IV-E activities including the evaluation and tracking efforts, given this population are potentially tracked in two different case management systems.

Accomplishments during this reporting period are as follows:

- The SFJPD along with their SFHSA and CBHS partners developed and continues to host meetings with their Wraparound provider, Seneca, and subcontractors in order to maintain clarity as to expectations and ensure consistent communication and practice.
- During this period, SFJPD and their county partners audited case files for all Wraparound providers.
• The SFJPD finalized the annual evaluation plan for the Wraparound program, which is currently underway and should be completed before the end of the year.
• Seneca developed a training curriculum for probation staff including roles of Wraparound team members, which is scheduled for October and November 2016.

Seneca has identified a team that is assigned primarily to work with youth on probation. This has allowed for better communication and team building amongst the Seneca team and probation staff.

Although SFJPD has not utilized all of the predicted families to be served under the Project, there is an overall increase in the population of probation youth that are utilizing Wraparound services. As a result, Seneca has been able to maximize the Project dollars, which has established significant reinvestment of approximately $980,000 in savings which will be used to support other related services. San Francisco County does not anticipate this savings level to be maintained. Referrals from SFHSA and JPD were particularly robust in the previous fiscal year, and Seneca was able to maximize Early and Periodic Screening, Diagnostic and Treatment expenditures, both of which contributed to this savings level.

Every youth receiving Wraparound services through the Project either has or will be assessed for trauma within 60 days of receiving the case. The CANS assessment tool is used to determine the eligibility and need for Wraparound. This tool has a trauma screening component that is used to assist in the diagnosing of post-traumatic stress disorder and other complex trauma diagnosis. When the need is identified, Wraparound providers, including subcontractors, will incorporate interventions such as Trauma Focused Cognitive Behavioral Therapy, Narrative Therapy and Structural Family Therapy.

All caregivers are screened and assessed through the CANS for their own mental health needs and strengths. When the need is identified, a referral is made for treatment. In addition, both clinicians on the Seneca Wraparound team working with the Probation population are trained in evidence based interventions.

Parent Partners
This intervention is aimed at the parents of youth involved with probation. There were 22 families referred and served during this reporting period; however because the services are voluntary, only 13 received services. It was projected that 25 families would have been served during this reporting period and it is projected that 25 families will be served during the next reporting period.

Peer parents target families with youth at risk of placement during the adjudication phase and/or returning from placement. As indicated, one of the barriers has been the voluntary nature of the peer parent support strategy. Although referrals to the program are being made, many of the families decline the service as they hesitate to engage with strangers around their personal family matters. As a result, SFJPD has begun to incorporate the parent partners in front end activities so they will become familiar with the families and build relationships earlier in the process.

The parent partners are now attending and actively participating in their monthly Juvenile Advisory Council, which is a Probation Orientation. All families are mandated to attend the Juvenile Advisory Council upon adjudication of the case and when placed on probation. Additionally, one of the parent partners is also a part of the re-entry team; her participation in this collaborative is anticipated to assist in preventing re-entries.

Although parent partner involvement has not delivered an increase in intervention referrals, they have assisted in the revitalization of the Probation Orientation program. The SFJPD is looking to incorporate parent partners into other Probation programs such as the Probation Enrichment Program.

Systemic Issues

The CWS/CMS utilized by Child Welfare continues to pose a challenge for SFJPD as there are limited statutory needs for utilization of the Child Welfare CMS. Probation continues to maintain their own CMS known as the Juvenile Justice Information System. Additionally, Probation continues to move towards the deployment of a new case management system. It would be helpful if the case management system utilized by Probation could integrate with SFHSA’s system to avoid duplication of data entry,
have access by all probation staff and curtail the need to maintain two separate systems for data tracking.

Given the current economic climate in San Francisco and high cost of housing, providers are struggling to hire and retain staff in a variety of positions, including clinical positions.

Establishing mental health services for Wraparound youth are impacted by consent issues, which can delay service delivery, and by access to mental health services in out-of-county placements.

Although probation departments have been granted an additional year for the implementation of the recruitment and retention of foster families reform, the SFJPD will be moving forward in hiring a social worker to assist with these efforts. Foster family recruitment and retention is a new intervention and strategy for SFJPD which will require training for staff along with the development of policy and protocols.

Through the Project, SFJPD increased its service array to offer Wraparound and parent partners to an expanded population including non-adjudicated youth and families.

The SFJPD has limited staff capacity to conduct extensive quality improvement efforts and seeks to improve on this. The SFJPD works collaboratively with SFHSA and CBHS to ensure appropriate implementation and review.

**Evaluation**

The SFHSA participates in regular planning calls with the Evaluation Team for both SOP and Wraparound. They are involving the Evaluation Team with the fidelity monitoring as described above. They have received several data extracts from BAA on SOP training, and plan to share that as well as the fidelity data with NCCD. Fidelity assessments have been conducted using a tool adapted from the NCTA. Data sharing agreements have been signed with the Evaluation Team and SFHSA has streamlined Seneca’s evaluation activities to avoid duplication with the Evaluation Team’s efforts. For their internal evaluation, SFHSA provided Seneca with child welfare activity/outcomes probabilistically matched to all children ever referred and/or
enrolled in Wraparound. San Francisco is expected to send the Evaluation Team the same or similar analytic file upon request.

Historically, the Wraparound referral form lacked a system identification that could be used to link to Seneca’s data later on. This made matching cumbersome and somewhat error prone. To help, the CWS/CMS case identification was added to the referral form. With the expanded population served through Wraparound, not all cases are now in CWS/CMS (e.g., guardianship cases or cases they may receive services under the Project to avoid re-entering care), so those need to be tracked separately.

The Evaluation Team had an introductory meeting with A Better Way parent partners and is establishing their research measures. A Better Way hired staff and with probation involvement, developed flyers and brochures for the Peer Parent Program. All of the updates were covered by existing staff time.

The SFHSA completed a template explaining a proposed sub study of their Progressive Visitation Program. SFHSA looks forward to their sub study proposal approval. The CQI unit is conducting interviews with Protective Services Workers assigned with family reunification cases to understand how they currently determine the level of visitation (clinical, enhanced/supervised, or unsupervised) and frequency of visitation that families receive. They selected a group of University of California, Berkeley Master of Social Work students to conduct a research project within their visitation local evaluation, examining the characteristics of children and parents who receive supervised visitation at FRCs. For that study, raw data files of visitation participation was requested from First 5, the holder of the family resource centers data.

The purpose of the sub study is to test a two-part effort to improve the effectiveness of visitation on permanency outcomes. The first part involves developing a tool to align children with the right level of visitation and to adjust that level as needed. The second part involves using the tool to inform the child and FTM. Together these two active ingredients – the tool and teaming – are hypothesized to lead to a higher impact of the visitation intervention on permanency outcomes than are currently observed.
A targeting study will occur first, which seeks to describe the demographics and case characteristics of children and their visitation utilization (level and dosage). The next step is setting baseline expectations about the visitation impact that San Francisco will be seeking to improve.

Referrals and enrollments are being tracked for the expanded Family Wraparound program, which includes in-home voluntary cases, children not at risk of congregate care, and others previously not covered under Welfare and Institutions Code 18251.

Data is being collected for the local Probation evaluation but further re-evaluation analysis has not yet begun.

8. Santa Clara County

Interagency Collaboration

The Santa Clara County Department of Family and Children’s Services (DFCS) and the Probation Department (SCCPD) continue to be active partners in their local Project executive steering committee and continues co-facilitating and intricately participating in its subcommittees including: the Program Implementation Team, Data and Evaluation, Fiscal and Communications Teams. The executive steering committee is co-chaired by the SSA Director and Chief Probation Officer with other key executive leaders at the table, engaged in active decision-making processes. The Casey Foundation Consultant has continued to be involved as a partner with Santa Clara County’s Project and participating departments. In addition, Chapin Hall has provided technical assistance to the Data and Evaluation subcommittee and a charter was created for this subgroup.

Although there have been staff changes including the departures of DFCS Director, Lori Medina and Project Manager Jim Anderson (replaced by Jennifer Puthoff), the addition of Dr. Holly Child as the Probation Department’s Director of Research and Outcome Measures, the above collaboration process has not been interrupted.

On August 1, 2016, SCCPD hired their new Senior Accountant who will be managing overlooking the Project regarding fiscal data. The
new Senior Accountant brings over ten years of experience, which will be extremely valuable for the efficacy of fiscal reporting.

The SCCPD is also happy to announce the hiring of their new Director of Research and Outcomes who will be working closely with current staff to support the evaluation of the project. Additionally, a Senior Management Analyst position was approved by the BOS who will provide additional assistance with reporting, data collection and analysis along with other tasks related to the Well Being Project.

*SOP*

The Santa Clara County DCFS integrated SOP tools to serve an average of 1,987 children and youth ages zero to 17, inclusive, with open cases. The projected number of children and youth to be served during this reporting period was 1,988. The projected goal for the next reporting period is a 2.5 percent reduction for an average of 2,006 youth with open cases.

The DCFS has made key decisions during this reporting period. The Executive Steering Committee provides oversight for the Project, to ensure integration with existing programs, promote collaboration and monitor accountability to meet the state’s expectations. The key stakeholders that make up these committees help inform design, implementation, and quality assurance. The DFCS’s structure and roles of each committee is available upon request. Each subcommittee meets monthly and makes recommendations to the Steering Committee where final decisions are made around significant issues. The key decisions to date include: (1) a charter has been developed for the Evaluation Subcommittee; (2) drafts of messaging materials complete and to be vetted with community members; and (3) program committee to consider focusing on designing community prevention efforts.

The DFCS has made much progress during this reporting period. They continue to make considerable progress on the implementation of the CFPM. To address the complex needs of families, as well as the issue of disproportionality, the DFCS and its partners understand that a wide array of diverse strategies will need to be explored. To that end, the DFCS invested the past six years in implementing the CFPM. The CFPM includes the use
of SOP tools, family conferencing, TDM, in addition to a variety of services offered by community based organizations partners. A natural addition to this breadth of services includes a preventive approach that supports families in their natural community settings.

The DFCS acknowledges that any approach aimed at reducing disproportionality in one system requires collaboration among partners across multiple systems. The mission to reduce disproportionality must be owned and addressed by the community as a whole and be multifaceted to address the needs of individuals and families. The premise of the Community Driven Prevention includes:

- Build on existing community capacity and strengths.
- Close the gaps in local family support and service delivery systems.
- Improve and strengthen the relationships and collaboration between the DFCS, the community, and service organizations.
- Engage families in the planning and designing phases in order to ensure that their needs are met.
- Acknowledge each targeted community has unique needs.

The Program Team will take the lead in researching best practices of prevention models in similar communities and presenting the results to the executive steering committee. Community forums will be set to engage the community’s collective thoughts while smaller forums will be held to engage the ideas from those most impacted by disproportionality. The DFCS will support the community in bringing those intentional strategies to fruition by linking them with existing resources as well as finding new supports and funding sources. Some examples include:

Flexible Funding: This funding type is made available in the community to meet the unique needs of families who are not in the child welfare system. A committee of internal staff and community will meet to define the parameters of what funding will be used for, eligibility criteria and distribution strategies. The key factor for this strategy is ease of access, so funds will be distributed via a CBO.

Educating Referring CPS Reporters: The DFCS plans to partner with key school districts and public safety departments in their target communities to educate CPS reporters on situations that warrant a child abuse or neglect report. While it is understood that
both of these entities have trainings in place, the desire is to enhance it with information about the intersection between poverty and its effects on perceived general neglect. The DFCS further intends to educate partners of the resources available to families. The DFCS currently has a contractor who provides this training on a requested basis, so this component will leverage this resource by connecting the contractor with the targeted district and public safety staff.

Flex Funds for Emergency Response (ER): These funds will be made available to Santa Clara CWS families with an ER referral through a CBO service provider. On an annual basis, about 27 percent of opened cases are voluntary. Currently, ER social workers have no choice but to open a voluntary case when a family has an immediate short term need, which may increase the risk for foster care placement. With the use of flex funds, the DFCS will be able to meet the immediate short-term needs of the families without opening a case, which in turn, will prevent families from penetrating further into the child welfare system. The DFCS anticipates securing a contract with a CBO in January 2017.

Cultural Brokers: These are community based cultural specialists who facilitate communication and understanding between the DFCS social workers and families. The purpose is to improve engagement at the early intervention stages to keep children and families strong. Through an extensive RFP process, three CBO service providers were selected to take on this role. The diversity within each of the three CBO service providers allows DFCS to reach the diverse needs of the Latino, African-American and Vietnamese communities. Services are expected to be launched by the beginning of December 2016.

Parent Advocacy Pilot Program: This proposed pilot program aims to utilize natural resources as support for families in the southern county area—specifically, Gilroy, Morgan Hill and San Martin. The goal of this strategy is to ensure parents who are currently involved, or were involved, with the child welfare system are supported and connected to the appropriate resources to avoid re-entry or future involvement. The South County Parent Advocacy Pilot Program will be staffed with southern county residents who are/were involved with the child welfare system and successfully navigated
their way through it. The plan is to share the proposal with the Children, Seniors and Families Commission in January, 2017.

DR Slot Expansion: Expanding the number of slots available through the DR service providers will decrease the service wait time for families served by the DFCS. Increased funding to the DR program will allow DFCS to expand slot capacity to over 90 additional families. The DFCS is currently in contract negotiations and anticipates securing a contract by mid October 2016.

The tools which have been utilized to track this intervention include:

- **Decision Support Data System:** The DCFS has spent considerable time developing this data system to ensure quality of service and to better track and monitor their outcomes. They have taken a deep dive into defining what steps need to be taken to evaluate staff competency in their four key competency drivers, which are believed to be critical in delivering the CFPM as intended: (1) staff recruitment and selection, (2) training, (3) coaching and (4) performance assessment/fidelity.

- **Systematizing Mid-Course Improvements:** Additionally, DCFS plans to proactively use data to support decision making, allocate resources throughout DFCS, and enhance the ability to make mid-course improvements. The DFCS strongly believes an effective improvement approach is one that uses data from each stage in the service delivery continuum across all programs and initiatives.

The design of the CQI process will be initiated through mapping of core services and identifying key decision points within the DFCS. This mapping process, supported by Chapin Hall and CFP, will:

- Promote shared understanding of the ongoing initiatives within the agencies.
- Map the initiatives onto the child welfare continuum to determine their alignment with Santa Clara’s strategic direction.
- Allow for the identification of service gaps.

Key process and outcome indicators at each decision point will be identified to guide the development of a meaningful measurement approach, consistent with the DFCS strategic direction. Although DFCS is data rich, it is working on a consistent process to utilize
data to inform change. The effort initiated will ensure DFCS utilizes data in a proactive manner that allows for well-informed decisions and mid-course improvements.

The DFCS has identified fiscal findings that can be attributed to this intervention. In comparing placement cost in Federal FY 2016 over Federal FY 2015 they have observed the following changes:

- A 14.40 percent decrease in overall placement cost.
- A 20.07 percent decrease in Foster Intensive Placement cost.
- A 24.14 percent decrease in Group Home cost.
- A 30.23 percent decrease in Relatives placement cost.
- A 15.84 percent decrease in Wraparound Services cost.
- A 2.28 percent increase in Foster Intensive Treatment cost.
- A 10.90 percent increase in Foster Homes Placement cost.

These fiscal findings are consistent with the programmatic data changes, already highlighted above as well as:

- There has been a consistent decrease in the number of youth in foster care placement.
- The DFCS showed a small decrease in group home placement. There is more information in the dashboard.
- There has been a steady decrease in the number of youth placed in Relative/ Non-Related Extended Family Members homes, largely due to the impact of implementing the RFA.

Wraparound

The SCCPD’s target population ranges from youth ages 12-17, inclusive, receiving Wraparound services. For this reporting period, most youth receiving services were 16 years old (36 percent, n=26) and 17 years old (27 percent, n=19) at the time of Resource Intensive Services Committee (RISC) approval date. The remainder of youth served during this reporting period were 13 years old (4 percent, n=3), 14 years old (18 percent, n=13) and 15 years old (15 percent, n=11).

The SCCPD continues utilizing the Wraparound services delivery model for three target populations: (1) pre-adjudicated youth who are high need and moderate or high risk of escalating within the juvenile justice system; and (2) adjudicated youth who are moderate or high risk to re-offend and are at imminent risk of
removal to out of home care. There were 86 referrals for 72 unique youth who were served during this reporting period. Out of 86 referred youth, 28 (33 percent) were Pre-Adjudicated youth, 36 (42 percent) were Adjudicated youth, and 22 (25 percent) were Ranch Re-Entry youth. Also, the 40 youth projected to receive services for the reporting period, was achieved.

The projected number of youth to be served in the next reporting period is 40 to 75 youth for a total of 80 to 150 youth served for year three.

The SCCPD continues to face challenges with youth having services closed due to a subsequent arrest for violation of probation or a new law violation that resulted in a detention stay in Juvenile Hall. This interruption in service is impactful to youth as this is a time youth and families need additional supports to address triggers and re-entry planning. Probation has submitted a proposal to the County Wraparound Governance Committee to request funding for non-Medi-Cal, billable activities for Wraparound services when youth enter Juvenile Hall. The funding is Wraparound re-alignment funding through the social service agency. During this reporting period, SCCPD had 40 closures, from which 43 percent were due to new law violations and 13 percent were due to violation of probation. The SCCPD continues seeking best practices to ensure positive outcomes for youth who are receiving Wraparound services.

In July 2016, SCCPD, DFCS and Behavioral Health worked collaboratively to create and implement Critical Incident Policy and Procedures. A “critical incident” refers to an unanticipated and unusual event or occurrence which impacts or poses a risk to the health or safety of the child, youth, young adult, family and/or Wraparound staff. When a critical incident is received from the Wraparound providers, the RISC committee reviews the report and determines whether a (MDT) meeting is necessary. The purpose of the MDT meeting is for Wraparound staff and the RISC team to discuss and analyze how the critical incident occurred and how to prevent such incidents from occurring again. Since the implementation of the policy/procedures several critical incidents have occurred resulting in requiring MDT meetings. This new process has provided the opportunity for staff from all agencies to collaborate and have robust conversation regarding challenges and
developing solutions to move forward. Another progress that SCCPD has made is the continuance of providing Wraparound training/presentations to system partners (i.e. court, District Attorney’s Office, Public Defender’s Office) in an effort to provide them with a strong understanding of the Wraparound process. The SCCPD staff continues working with other agencies, providers, youth and families to meet outcome goals. During this reporting period, 23 percent of youth partially completed goals, while 25 percent of closures resulted in “other” goals outcome (i.e. close/holds where engagement was maintained and goal outcome is not recorded and some youth were remanded to Juvenile Hall or James Ranch Program prior to setting up their goals).

The SCCPD continues working with their in-house Information Technology department to develop an internal database that would facilitate data tracking for youth who are receiving Wraparound services. This database was scheduled to be completed by August 2016. Unfortunately, due to staffing challenges and other competing priorities, this database has not been completed. It is anticipated that the database will be completed by Spring 2017. The SCCPD continues to use the Juvenile Assessment and Intervention System (JAIS) to track risk level and Excel to track all youth with reasons of Wraparound closures and outcomes to track this intervention. There were no fiscal trends attributed to this intervention. The SCCPD will continue to monitor the intervention activities to enable them to capture changes and trends in the future.

Katie A. intensive services are based on the Wraparound service delivery model and are similar in regard to the services that are provided, however, not in intensity. Like Wraparound, Katie A. establishes CFTs and meets monthly, providing intensive care coordination (referrals and connection to community resources) and intensive home-based services (behavioral support to youth and/or family partner to support the parent). If needed, individual and/or family therapy can also be provided.

Another difference between Katie A. and Wraparound is the number of hours of service provided per month. Katie A. has an average dosage of ten hours per month per youth/family whereas Wraparound in theory has a team readily available for the family if a crisis occurs outside of regular office/operational hours of 8:00 am
to 5:00 pm. Additionally, Katie A. does not have flexible funding available for youth and families the same way Wraparound services are provided.

Effective April 2016, Katie A. services became available for Juvenile Probation youth who have full scope Medi-Cal insurance. Current Wraparound youth have been given the opportunity to step down in services with Katie A. services. Some youth have successfully been dismissed from Probation with services while others continue to be supervised.

Santa Clara County’s Rebekah Children’s Services (RCS) reported 14 youth were screened during the reporting period. Of the 14 youth, eight were screened more than once. Star View Adolescent Center screened and accessed 20 youth for trauma. Uplift Family Services served 28 youth. All of the youth had experience some type of trauma in their history. Seneca Family of Agencies reported 41 youth were screened and assessed for trauma.

Some trauma screens and assessments include the following: RCS uses the Child and Adolescent Needs and Strengths (CANS). Star View screened and accessed trauma using the LEC 5, CANS and the University California, Los Angeles Post Traumatic Stress Disorder Scale.

All of the young people served by Santa Clara County’s Uplift Family Services’ wraparound programs (for a minimum of 60 days) receive a complete comprehensive mental health assessment. This is in addition to a diagnosis and mental status exam that describes psychosocial history including individual and family history of mental illness, prenatal/developmental histories, co-occurring issues/needs, and cultural considerations to fully explore the impact of trauma. Additionally, staff engage in ongoing assessment through prompts within an electronic health record to report new traumatic events with each service. Staff additionally utilizes the CANS at start of services, every six months thereafter and at the time of discharge from services. Seneca used the CANS Assessment, and individual and family interviews to assess for trauma.

The SCCPD reported their youth received a portion of evidence-based interventions (EBI). The RCS reported 14 youth received
EBIs. The primary EBIs used include Seeking Safety, TF-CBT, Seven Challenges, and Motivational Interviewing. Starview reported 20 youth received TF-CBT, MI, Seeking safety, CBT, TIP and family systems interventions. Across all direct service positions Managing and Adapting Practices (MAP) is the primary evidenced based practice (EBP) used in Wraparound at Uplift Family Services. As a second generation EBP, MAP provides a comprehensive framework to address anxiety (including traumatic stress), depression, and disruptive behaviors. The MAP is designed to coordinate and supplement the use of EBPs for children’s mental health. Clinicians/facilitators use the PracticeWise Evidence Based Services Database to identify empirically derived treatment interventions (elements) based on the unique characteristics of each young person. Through the Wraparound planning process these core clinical care elements are implemented within the child and family team meeting. All 28 young persons served received a combination of the following trauma-informed EBI’s from Uplift Family Services. Seneca reported 43 youth received EBIs.

- Activity selection - To introduce mood-elevating activities into the child’s day.
- Assertiveness Training - To teach youth how to express needs or intentions.
- Psycho-Education: Anxiety - To introduce a course of treatment for anxiety or phobias.
- Psycho-Education: Depression - To introduce a course of treatment for depression.
- Cognitive Restructuring Anxiety: - To address thoughts that maintain or intensify anxiety and avoidance.
- Cognitive Restructuring: Anxiety - To teach younger children how their thoughts can influence their anxiety, especially when such thoughts interfere with treatment.
- Cognitive Restructuring: Depression: To counter negative ideas that interfere with mood or motivation.
- Exposure - To decrease anxiety associated with an object or situation.
- Problem Solving - To provide children with a systematic way to negotiate problems and to consider alternative solutions to situations.
• Relationship/Rapport Building - To foster a positive and trusting therapist-client relationship.
• Relaxation - To introduce relaxation training and its use in controlling tension.
• Self-Monitoring - To illuminate areas of concern and provide important information about treatment progress.

The SCCPD youth made progress or met treatment goals. The RCS reported 75 percent made progress or met treatment goals at reassessment. Six out of eight youth made progress in at least one Life Domain. Star View reported 20 youth made progress toward their goals at reassessment. Only 86 percent of those discharged met or partially met their treatment goals. Uplift Family Services reported youth improved or maintained (to non-actionable level 0.1) based on paired CANS data (N=7) in the following areas. Improved is when an actionable item (2,3) becomes a non-actionable item (0,1). Whereas maintained is a non-actionable item (0,1) remains non-actionable (0,1).

Uplift’s logic is that a non-actionable item at measure one that does not get worse (becomes actionable) at measure two is a positive outcome. We want to see items remaining non-actionable throughout the course of services. Note that due to the limited timeframe, the N is very small; however, data suggests that improvement was occurring in a variety of areas for all youth:

<table>
<thead>
<tr>
<th>Youth Behavioral/Emotional Needs (CBEN) domain</th>
<th>Conduct</th>
<th>Anger Control</th>
<th>Substance Abuse</th>
<th>Impulsivity/Hyperactivity</th>
<th>Anxiety</th>
<th>Oppositional</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7 (100%)</td>
<td>6 (87%)</td>
<td>5 (71%)</td>
<td>5 (71%)</td>
<td>5 (71%)</td>
<td>4 (67%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Youth Risk Behavior (CRB) domain</th>
<th>Danger to Others</th>
<th>Social Behaviors</th>
<th>Runaway</th>
<th>Delinquency</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7 (100%)</td>
<td>7 (100%)</td>
<td>7 (100%)</td>
<td>5 (71%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Life Domain Functioning (LDF)</th>
<th>Living Situation</th>
<th>Recreation</th>
<th>School Behavior</th>
<th>Legal</th>
<th>Sleep</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>6 (87%)</td>
<td>6 (87%)</td>
<td>5 (71%)</td>
<td>4 (67%)</td>
<td>4 (67%)</td>
</tr>
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Seneca reported 22 youth who were part of this subgroup discharged from services during the reporting period. Of these,
64 percent partially met their treatment goals and 36 percent of clients did not meet their treatment goals. Twenty-three percent of clients moved to a lower or stayed at the same level of service.

The SCCPD has reported families including parents/caregivers are screened, assessed and/or have been treated for trauma. The RCS reported the parents/caregivers for all 14 of their youth were screened/assessed for trauma. The caregiver’s trauma is informally treated within the context of caring for the primary youth. The team members including the Family Partner and Facilitator also assist the parent/caregiver access to adult mental health services when more in-depth trauma treatment is indicated. Linkage in assisting the parent/caregiver in accessing trauma treatment was given to four parents during the review period. Star View did not screen, assess and/or treat for trauma. However, if a need for treatment is noted, the caregivers will be referred to adult services. Caregivers are educated about trauma through the youth’s services. Uplift Family Services reported parents and caregivers are not specifically assessed for trauma; however, their histories are incorporated in the youth’s mental health assessment as indicated. Parents/caregivers are an integral part of EBI’s provided in MAP as treatment interventions are distinctly formulated to target the young person or parent/caregiver. Seneca does not have a formal screening or assessment in place for caregivers. As part of the treatment model, all parents receive some of the above listed EBI’s as Seneca services include the entire family unit.

The RCS reported all four clinicians are trained in EBIs, Star View has all four of clinicians trained in trauma focused EBIs; Uplift Family Services reported all 11 Clinicians/Facilitators are trained in MAP. Additionally, eight are trained in Motivational Interviewing and six Clinicians/Facilitators are also trained in Trauma Focused Cognitive Behavioral Therapy. Thirteen wraparound staff are certified trainers of the National Compadres Network’s El Joven Nobles curriculum. Seneca reported all 13 clinicians are trained in utilizing EBIs. During this time frame, there were 13 clinicians serving youth enrolled in one of these programs.

Santa Clara’s DFCS fidelity assessment takes place at six and 12 months after case-carrying social workers complete the CFPM training, and then annually. One child/family per practicing social
worker will be selected and an observation of a FTM for the child/family will occur.

Santa Clara’s fidelity assessment process was developed in partnership with families and the community. Community partners provide a unique perspective as observers of the interactions of staff with a family and their circle of support during a team meeting or family gathering. A California Partners for Permanency (CAPP) Implementation Team member, Social Work Coordinator II, Manager or Supervisor and a Community Partner make up the observation team. In addition, a non-case specific survey will be periodically given to each implementing social worker as a part of the process. Clear protocols are written for the various steps of the process including (1) case selection; (2) team Identification and Roles; (3) the actual Team Meeting observation; (4) execution of the system support survey; and (5) scoring and data for improvement. The full CAPP Fidelity Assessment Protocol can be made available upon request.

At this point, the DFCS fidelity assessment is designed to review a FTM which involves this department’s staff as providers. They currently do not have a system in place to implement a fidelity assessment among their providers. Due to limited staffing in the Continuing Bureau, fidelity assessments were temporarily placed on hold but will be reimplemented in October 2016. Consequently, no new data is available at this time. Assessments are now being restarted and they will have data available for the next reporting cycle. Santa Clara DFCS is in the process of designing their CQI process; they are exploring all data sources that will help inform their practice, and fidelity assessments will be included.

The SCCPD continues to monitor the following components: Engagement, Teaming, Case Plan Goals, and Transition Planning. The fidelity assessment methods consist of training and feedback loops. The POs attended Critical Elements of Wraparound, Wraparound Train the Trainer, Wraparound Resurgence and Renewal trainings. In addition, methods for ensuring fidelity include supervisor’s engagement observations. Supervisors provide feedback during individual fidelity meetings. There are also periodic “fish bowl” discussions to allow open dialogue and problem solving for common issues and difficulties that arise in the Wraparound process. The results of fidelity monitoring efforts are
shared with staff in case conferencing and monthly unit meetings. Input and sharing of information are important in order to assess further need for change in program development. The SCCPD monitors and assesses fidelity among providers through the Resources Intensive Services Committee (RISC). The RISC representatives attend monthly oversight meetings with all providers to review and approve case plans. There are on-going informal meetings with providers to allow open discussion and feedback in regards to interventions and their alignment with the probation’s mission statement. Those discussions are shared with staff to improve the overall process and fidelity.

The SCCPD’s Family Preservation Unit Supervisor has observed the utilization of the tools learned in trainings. The POs report benefits of the “fish bowl” discussions to formulate alternative interventions resulting in thinking out of the box and collaboration. Check-ins with providers routinely led to empowering SCCPD to collaborate in the Wraparound process. Check-ins with parents and guardians, report the Wraparound model interventions have yielded noticeable changes in youth and in their own belief system, in addition to being receptive for services. Through understanding the process, and engaging in the Wraparound model, PO’s rely on the team approach to troubleshoot obstacles prior to imposing sanctions.

System Issues

There are several issues related to DFCS’s system as far as Management Information Systems (MIS) is concerned. With the aging legacy statewide system in use, while the business need and local, state, and federal changes continuously alter the service delivery practice, Santa Clara DFSC is continually faced with challenges of identifying the need or issue and providing IT solutions through in-house development or vendor management. This is expected to be the circumstance until the new child welfare services information system is developed and fully implemented and operationalized.

The SOP/CFPM participation in the Project contributes to DFCS outcomes. Other contributors to the department’s outcomes are the continued implementation of SDM (including a case review process by the supervisors), utilization of reflective practice and
supervision, the utilization of coaching supports and moving to become a trauma informed system. The challenge in ensuring DFCS’ practice improvements match Santa Clara’s goals lies in the case review portion of this process. The DFCS was finally authorized for four dedicated C-CFSR Case Review staff, and those positions were filled as of September 12, 2016. These C-CFSR Case review staff are currently going through the initial mandatory training and coaching process pending permanent certification. However, they are temporarily certified and have started the process of reviewing some of the selected cases. The four previous staff, who were permanently certified, will act as the first level QA staff. Case reviewing is a process which DFCS hopes to institutionalize as one component of a greater CQI system. The DFCS is looking to initiate a formal CQI process as part of its short and long-term processes. In addition, the DFCS is currently developing a formal, internal critical incident case review process in order to standardize and ensure consistency in how their high profile cases or situations are handled (such as death or serious injury to a child, civil litigation and media coverage).

Like other counties, Santa Clara DFCS is adapting to the new requirements of CCR and continuing to adapt to the new RFA procedures. While the new RFA process is intended to reduce paperwork, expedite eligibility of caring lifelong relationships with caregivers and accelerate the process to permanency, the transition continues to be challenging and confusing for those relative caregivers or non-related extended families. These families are at different points in the system and are required to have additional training as a requirement for adoption. The DFCS is preparing for CCR implementation while closely collaborating with Behavioral Health and Probation. A draft charter has been developed to help govern the process and engage their stakeholders via the following committees: (1) Child & Family Inclusion, (2) Resource Homes, (3) Short-Term Residential Therapeutic Programs and (4) Pathways to Mental Health Services. The committees will review the mandates and make implementation recommendations to the key partners. Santa Clara DFCS’ recruitment efforts have been diverse including: (1) partnering with foster parents for targeted recruitment efforts; (2) on-going television/radio shows on Vietnamese television; (3) community outreach through social media via Facebook;
(4) collaboration with faith communities; (5) large scale ads in the community, movie theaters, Valley Transportation Authority buses; (6) collaboration with public libraries, community center, Kaiser/Valley Medical Centers for booths at fairs and informational meetings and (7) complete re-vamp of recruitment marketing tools, flyers, posters and brochures to reflect the new RFA logo, colors and consistency in the message given to the community about DFCS and its resource home needs.

As of July 1, 2016, DFCS moved to SDM at all levels. All staff were required to complete two-day overview training and a half-day web based SDM Training. Ongoing unit-based training was provided. The DFCS plans to provide supervisor advanced training November 2016 through February 2017. The new CSEC laws required all staff to receive training on the new laws and the requirements for DFCS. Santa Clara’s DFCS and Juvenile Probation are partnering around their dually involved families and youth. Training is provided regularly for all probation and child welfare staff collectively. Core 3.0-Transitioning the onboarding process of their newly hired social work staff to incorporate required training currently Core 2.5 and planning for Core 3.0 as well as integrating County specific training needs, supports and coaching. As a Project County, DFCS is strengthening their use of SOP tools to support their. The DFCS continues to embed coaching to support staff at all levels as well as support and strengthen the use of the CFPM.

The above mentioned trainings continue to be strengths for DFCS; therefore, there are no issues.

Santa Clara County is data rich and set up to evaluate the effectiveness of their interventions. However, Santa Clara County does not have a formulized CQI system in place to proactively use their data to effect changes in services to lead to better outcomes. As a result, CFP is partnering with DFCS by providing them with technical assistance support from Chapin Hall. Collectively, they will reassess their data dashboards and mainstream their different data sets. Most importantly, Chapin Hall will support them in designing a Quality Assurance system that involves all internal bureaus that support the work of the Project.
The SCCPD’s MIS is currently in development. They have contractors which are providing services.

Statewide Evaluation

In the current reporting period, DFCS and SCCPD actively participated in statewide evaluation activities. In addition, they consistently send a diverse team to attend all SOP Collaborative meetings. A number of their staff are members of the ESC and participated on monthly calls and requested subcommittee activities. In addition to monthly ESC calls, DFCS and SCCPD communicated with the evaluators via phone on a quarterly basis. During these calls, they collaborated with the evaluators to discuss, design and vet the staff and parent survey process.

In August 2016, DFCS and SCCPD hosted a site visit with the Evaluation Team. The visits started with an informational Evaluation Kick Off meeting, followed by numerous individual interviews with key staff, management, the executive team and service providers. They also had a few focus groups with staff and the CAPP team.

The DFCS has been able to leverage the support from CFP and bring in a team from Chapin Hall to help DFCS design a sustainable CQI system to more intentionally use their data to inform practice. In conjunction with DFCS, SCCPD started receiving technical support from Chapin Hall to facilitate the development, implementation, and evaluation of the Project. Chapin Hall will also facilitate a similar process with SCCPD to help them design a dashboard reflecting their work on the Project. Chapin Hall also facilitated a charter design process with the Data and Evaluation subcommittee and now they have clearly defined the role of this subgroup in regards to the Project. The SCCPD will be reviewing current logic models regarding their Wraparound program and developing a cross-cutting logic model with the Evaluation Team for the Project. The department is also working on identifying key well-being indicators to answer the research questions based on the Evaluation Plan for this Project.

The SCCPD continues to work on the development and implementation of an internal database that would facilitate data tracking and evaluation and provide real time data. With the
addition of the new Director of Research and Outcomes added to the team and the technical support from Chapin Hall, Probation will now focus on streamlining their data collection and evaluation for the remainder of this Project and continue providing outcome measures at the local level.

There were no local evaluation activities during this reporting period.

9. Sonoma County

*Interagency Collaboration*

In Sonoma County the Project is a joint effort between the Human Services and Probation Departments. The Sonoma County Human Services Department (SCHSD) and the Probation Department meet quarterly to discuss the status of the Project both programmatically and fiscally. Leaders from program and finance of both departments attend these quarterly meetings on a regular basis. While Sonoma County has long enjoyed a productive and positive partnership between SCHSD and the Probation Department, the Project has created more frequent opportunities for collaboration through local quarterly meetings, shared financial planning and statewide meetings/conferences.

Interagency collaboration plays an important role in the county’s case review system which is now fully implemented. Case reviews are conducted in accordance with California’s Child and Family Services Review policies and procedures and data are entered into the federal Online Monitoring System. The SCHSD’s Family, Youth and Children’s Division (FYCD) provides the case review staff for both child welfare and Probation Department cases. The FYCD utilizes case review data to identify positive and negative trends and provides recommendations to agency leadership on practice/program improvements.

Collaboration efforts have impacted the service array for families in Sonoma County as the FYCD launched two new programs during this reporting period. These two new programs are a parent orientation for parents whose children have recently been removed from their care and a parent mentor program for parents in FR.
**SOP**

The FYCD projected serving 1,500 children during the current reporting period, exceeded its expectations as it served 2,082 children and estimates it will serve 1800 children in the next reporting period. FYCD’s estimate was based on a more conservative expectation for SOP implementation than what actually has happened. Supervisors and managers have been reinforcing SOP as an expectation in daily practice. Additionally, FYC had an increase in the number of ER investigations in 2016 than in 2015. More children and their families have had interaction with child welfare services and therefore have had exposure to the practice of SOP.

Sonoma County monitors fidelity to SOP components, specifically monitoring: (1) harm and danger statements; (2) CFT meetings; (3) safety goals; and (4) SDM. The frequency of monitoring activities varies according to component and monitoring methods include document reviews, discussions with Social Service Workers and management reports. Harm and danger statements and safety goals are monitored in every ER referral document as it is being reviewed for action or closure. The FTMs are monitored before all FM and FR case plans and once per year for Permanency Planning cases. The FYCD is considering including its SOP fidelity monitoring activities in the CFSR case review process.

During the previous reporting period, Sonoma County’s FYCD focused on providing SOP training for social work staff and on integrating its components into practice. The FYCD now expects components of SOP will be used at every step of the process for a referral or case. Current reporting period accomplishments reported by members of the implementation team include:

- The Intake Unit included provisional Harm and Danger statements in 80 percent of screener narratives.
- The ER included a harm and danger statement, safety goals and the child’s voice when applicable in 100 percent of investigative narratives.
- Eighty percent of FR and FM cases include harm and danger statements and safety goals in their court reports.
- Sixty-five percent of cases in Permanency Planning reflect the child’s voice, case mapping and coaching.
Next steps in SOP implementation include tracking SOP dosage in CWS/CMS or another identified data system. The FYCD’s goals also include developing a plan to track SOP utilization in long-term foster care cases.

It is also important to note the FYCD launched its Parent Mentor and Parent Orientation Programs in January 2016. The Parent Orientation Program assists parents in the court FM and FR programs toward early engagement in their case plans as well as providing them knowledge of the child welfare, foster care, and dependency court processes and the roles of persons involved therein. The Parent Orientation Program provides parents the tools to develop relationships with social workers, attorneys, foster caregivers, and other parties they might encounter in the course of their juvenile dependency cases.

The Parent Mentor Program offers parents in the FR program a mentor/role model as a support to help them traverse the child welfare and juvenile dependency court systems. As a parent who has already navigated the child welfare system, a parent mentor will know first-hand the challenges that arise and provide assigned parents the opportunity to connect with another parent who has successfully worked through the situation s/he was in and regained custody of her/his child(ren). The goal of the Parent Mentor program is that mentors will aid parents in reunifying with their children in a timely fashion by supporting parents during the case planning process and meeting all that is required of them.

*Wraparound*

The Sonoma County Probation Department projected serving 45 youth during the current reporting period and provided Wraparound services to 52 youth. Sonoma County projects it will service 55 youth in the next reporting period. The Probation Department’s previous Intensive Case Management contract with Seneca expired during the reporting period. The Sonoma County BOS approved the Probation Department’s new plan and Intensive Case Management services were successfully expanded to 20 youth. Sonoma County is providing Wraparound services to youth transitioning from Probation Camp. In order to ensure the youth are in a Title IV-E placement at the time case management
activities occur, the Probation Departments ensures the Probation Camp commitment order is vacated and the minor is retained a ward of the court in the home of the parent. These transitional services include case planning as a Deputy PO sets initial goals with residential camp in order to focus the youth on their transition and aftercare.

The Probation Department monitors fidelity to Wraparound’s engagement and case plan goal components. Activities include monthly case reviews to monitor needs and strengths assessments to monitor engagement and quarterly file reviews to monitor case plan goals. The Probation Department uses the WFI monitoring tool, reports that staff are meeting standards, and expects to simplify this process by creating an automated case management report. Sonoma County also completed a case review on July 26, 2016; the Wraparound/Title IV-E Supervisor reviewed all reasonable candidate cases.

During the last reporting period, the Probation Department reported issues with its Juvenile Records System case management Title IV-E tracking. These issues included technical glitches causing the program to prematurely shut down, not save data, or allow staff enter Title IV-E eligible coding on minor’s who at the time were not eligible. The department successfully collaborated with internal partners in the Information Systems Department and has since resolved these issues. The updated tracking method is functioning, and all Project and Wraparound staff have been trained and are using the system. The Probation Department began tracking youth and time studies with specific characteristics including: (1) reasonable candidate; (2) Wraparound reasonable candidate; (3) Wraparound non-reasonable candidate; (4) Intensive Case Management non-reasonable candidate; and (5) Intensive Case Management reasonable candidate.

Statewide Evaluation

The Evaluation Team visited Sonoma County’s FYCD and Probation Department August 11 – 17, 2016. The Evaluation Team conducted one-on-one interviews to gain baseline data for Sonoma County’s process evaluation; interviews included three FYCD managers, a focus group with the SOP implementation team, fiscal
team, service providers, and Probation Department executive managers, managers and a Supervisor.

The Evaluation Team also provided a web-based staff survey on September 19, 2016; this survey will close during the next reporting period, on October 3, 2016. The survey was made available social workers, supervisors and managers at FYCD to give their input on the Project. The Probation Department also implemented stakeholder survey and prepared to roll out a parent/guardian survey. Leadership e-mailed staff to encourage participation and explain the purpose and importance of the survey. Results from the Evaluation Team are forthcoming.

During the next reporting period, the FYCD will distribute surveys to families which will include self-addressed stamped envelopes to NCCD. Social workers will hand deliver surveys to all families with FR and FM cases and will mail surveys to all families with ER referrals. The family survey aims to gauge family engagement and satisfaction efforts.

The FYCD continues to work with the Evaluation Team to identify data needed to report on SOP implementation and criteria that defines SOP usage. Data reports have not yet begun to be transmitted to the evaluator. Sonoma County has requested additional information about the data reporting expectations and specifically the data fields the Evaluation Team is hoping to receive through regular reports. Discussions with the Evaluation Team to finalize SOP fidelity measures and expectations will continue into the next reporting period.

Sonoma County began implementing its web-based database, Apricot, effective January 1, 2016 for recording information on Together to Enhance, Act and Motivate/TDM meetings. Apricot makes it possible to easily report on number of meetings, meeting status, client names, meeting participants and clients’ referrals to service providers.

**Systems Issues**

The FYCD experienced a delay in the hiring of the Recruitment & Support Supervisor II. This position is a key leadership role in the recruitment and support of caregivers. The goal was to have the position filled by April 2016, but it did not occur until July 2016. The
delay in hiring of the position was due to internal county procedures requiring BOS approval for new positions added mid-fiscal year.

This issue was mitigated as the Recruitment & Support Program Development Manager stepped into the role of the Supervisor II, preventing delay in implementing the recruitment and support plan. This included supervision of the Recruitment Social Worker, developing recruitment marketing materials, while also engaging with FFAs to develop collaborative recruitment activities, implement caregiver support (mentoring) program and expand the placement program to include relatives and NREFMs.

III. Project Evaluation Status

A. State-Wide Activities

Please see Appendix C.

IV. Recommendations and Planned Activities

A. Planning and Development

1. Alameda County

The Alameda County Probation Department and the Lincoln Center provider replaced Parenting with Love and Limits with Multi-Disciplinary Family Therapy (MDFT). In collaboration with Behavioral Health Care Services, the MDFT will deliver integrated, comprehensive, family-centered treatment for teen and young adult problems and disorders. The MDFT simultaneously addresses substance use, delinquency, antisocial and aggressive behaviors, mental health disorders, school and family problems, and prevents out-of-home placement through a variety of therapeutic and behavioral supports for adolescents, parents, families, and communities. The program will serve approximately 22 youth at any given time and 50 per year. Since its inception in August 2016, it has served five youth. See more information in the MDFT section on page 15 of this report.

2. Sonoma County

Sonoma County modified its implementation plan and removed its optional interventions from its County Plan.

B. Planned Activities (October 1, 2016 – March 31, 2017)
Project communication and technical assistance activities will continue throughout the next reporting period. The California Department of Social Services (CDSS) will continue to partner with counties and stakeholders such as Chief Probation Officers of California, Casey Family Programs, the Resource Training Academy and the Resource Center for Family-Focused Practice, assessing implementation needs and opportunities for cross-agency communication and collaboration. The annual Project meeting will be held November 9 – 10, 2016. Planned discussions include updates regarding federal, state and county initiatives and their intercations with Project implementation. Facilitated panels regarding county fiscal strategies, Safety Organized Practice (SOP) and Wraparound implementation successes, challenges and next steps, along with fidelity assessment strategies will also be included. The CDSS will also continue to hold collaborative opportunities through SOP and Wraparound Collaboratives scheduled in December 2016, January 2017 and March 2017.

The CDSS’ Resources Development and Training Support Bureau (RDTSB) and FPB will continue providing technical assistance, including program visits and fiscal monitoring reviews. The RDTSB and FPB will survey county partners and will gather feedback regarding technical assistance needs and site visit coordination, planning visits and reviews for year 2017 accordingly. Additionally, the FPB will continue to disseminate and collect county intervention expenditure data through the Quarterly Fiscal Supplemental Form and will continue to research and respond to fiscal questions submitted by Project county staff. The RDTSB and FPB will also continue holding Quarterly Individual County Calls with representatives from each county Child Welfare and Probation, the Quarterly Project Update Calls with all participating county agencies and stakeholders, a bi-monthly Probation Call with all participating county Probation agencies and Quarterly Fiscal Calls with both Child Welfare and Probation.

The CDSS supports the Evaluation Team in their efforts. The Evaluation Team set up a secure data transfer process, called File Transfer Protocol, to obtain fidelity and fiscal data from agencies (and case management data from probation agencies) on a quarterly basis. Through discussions with counties, the Evaluation Team is providing technical assistance to agencies to further define their target populations. The Evaluation Team also plans to finalize county Project dashboard elements, incorporating
feedback from sites. Project-specific dashboards will provide feedback to agencies on outcome and fidelity measures within their county.

The Evaluation Team will continue working towards defining a regular process for obtaining state and county fiscal data. In addition it will notify county agencies regarding which sub study proposals were selected for evaluation and submit a memo notifying the Administration for Children and Families of the final candidates and how their studies will contribute to the field’s body of knowledge.
# Appendix A

Alameda County Safety Organized Practice Revised Training Schedule

## October through December 2016

<table>
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<td>5/31/2017</td>
<td>Module 5</td>
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*Cancelled
**Trainers available, venues have not been secured and confirmed
### Appendix B

#### Lake County Referral Mapping Tool

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<tr>
<th></th>
<th>DR</th>
<th>Family Wraparound</th>
<th>Traditional Wraparound</th>
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<tr>
<td><strong>Referred from ER unit after the referral is closed.</strong></td>
<td>Referred from ER unit and referral is turned into a voluntary case and kept open. Referred from FR to FM unit and case (court or voluntary) is kept open.</td>
<td></td>
<td>Referred from FR to FM unit with court intervention and case is kept open.</td>
</tr>
<tr>
<td><strong>Goal:</strong> To prevent future referrals</td>
<td><strong>Goal:</strong> To mitigate safety concerns, prevent removal or transition children back into the home</td>
<td></td>
<td><strong>Goal:</strong> To prevent the move to a higher level of care or to step down to a lower level of care.</td>
</tr>
<tr>
<td><strong>Focus is on family unit</strong></td>
<td><strong>Focus is on family unit</strong></td>
<td></td>
<td><strong>Focus is on specific/identified child</strong></td>
</tr>
<tr>
<td>Referred to Lake Family Resource Center for children age 0-3 or families with domestic violence. Referred to Healthy Start for children age 3-17 or Spanish speaking families.</td>
<td>Referred to RCS Family Wraparound team</td>
<td></td>
<td>Referred to Interagency Placement Review Team for RCS Wraparound</td>
</tr>
<tr>
<td><strong>Identified issues/Needs from program</strong></td>
<td><strong>Identified issues/Needs from program</strong></td>
<td></td>
<td><strong>Identified issues/Needs from program</strong></td>
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<tr>
<td>- Linking and navigating community resources</td>
<td>- Same issues/needs as DR AND one of the following:</td>
<td></td>
<td>- A child is in or at risk of entering a level 10 group home or child is returning home from a group home.</td>
</tr>
<tr>
<td>- Child health care</td>
<td>- Co-occurring issues with mental health, substance abuse and/or domestic violence.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Life skills</td>
<td>o Critical housing issues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Home safety and organization</td>
<td>o Critical unmet basic needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Lice</td>
<td>o Building natural supports to address complex/high risk family needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Parenting</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>- Unmet basic needs</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>- Domestic violence</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>- Developmental needs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- In home Nurturing Parenting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Support for custody issues</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>- Educational and developmental support and advocacy</td>
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</tbody>
</table>
Appendix C

I. State-wide Evaluation Activities

*Please double click on image to view.*

Title IV-E Waiver Demonstration California Well-Being Project Evaluation Status Report

November 2016

California Department of Social Services
Appendix D

I. Inquiries from October 1, 2015 – March 31, 2016 Reporting Period

**Alameda County**

*Would you be able to provide more information on how the CANS was used to track any behavioral changes in youth using wraparound services?*

Behavioral changes were tracked by comparing intake and discharge scores using the four domains of the Child and Adolescent Needs and Strengths (CANS) such as behavioral emotional, justice, school and life. Overall, 81 percent (38/47) of youth participating in Wraparound services experienced improved behavior emotional items on the CANS.

Eighty percent (8/10) of the CANS items reviewed for analysis decreased in moderate and intense needs from intake to discharge for youth participating in Wraparound services.

*What is the update regarding the systemic issues with regards to data in Alameda IT data system related to SOP?*

The Evaluation Task Team, a workgroup of the Safety Organized Practice (SOP) Implementation Team, is looking at data needs, coordinating with the Statewide Project Evaluation Team, and determining how internal evaluation of SOP may coordinate with other Departmental initiatives and processes, such as the Continuous Quality Improvement (CQI) case reviews. In the coming months, the Evaluation Task Team will be taking a deeper look at SOP case review and fidelity monitoring tools currently used or being developed by other counties, and will consider if and how Alameda County will use similar tools, and the data that can be captured.

*Have any challenges related to data for Alameda county probation team been resolved?*

The Alameda County Probation Department’s (ACPD) data share agreement with the National Council on Crime and Delinquency (NCCD) was recently approved by their Board of Supervisors (BOS). They will be working with NCCD to determine specific data to track for the evaluation that will come directly from Probation extract reports. They will be tracking CANS data and have a conference call
scheduled in early November with NCCD and their providers to determine the most effective way to route the data to NCCD. The data share agreement that was just approved does not specifically cover data from Behavioral Health Care Services (the CANS). They will be discussing how to share the data without violating confidentially or Health Insurance Portability and Accountability Act laws.

*How has Alameda looked to address the Foster and Adoptive Parent licensing and recruitment issues?*

The ACPD has undergone numerous staffing changes and departmental transitions over the last year. The most recent key transition was the Chief PO in August, 2016. The new Chief will be collaborating with the BOS and its partners at the Social Services Agency and the Department of Children and Family Services (DCFS) to help ensure that a systematic approach is used in developing a comprehensive method of approving care providers for the care and supervision of youth involved with Probation.

Chief Still and other executive Probation staff have already begun to assess current agency, department and community resources to meet the requirements of the RFA process and identify resource gaps that must be filled prior to or soon after the implementation of RFA. The ACPD will have a comprehensive Implementation Plan for CDSS prior to January 1, 2017.

*Please clarify what is viewed as the project period and when families will begin receiving SOP?*

The project period was October 1, 2015 – March 31, 2016. During this time, the country reported that it plans to utilize the first two years to prepare for SOP implementation and sustainability. Social Workers attended a two-day overview and begun training modules. The supervisors incorporated the 3-question framework and 3 column map into supervisions and unit meetings.

*Has the county been able to keep up with the increase in CSEC served? Have there been any barriers to service provision? Given that the actual served this period was three times what was projected, does the county anticipate a continued increase in the number of children served in the next reporting period? And if so, should the projected number of children served in the next reporting period be increased from 38 children?*
This number served is reflective of the State CSEC Opt-In program, required by both Federal and State law; these numbers reflect all youth with open cases. Youth identified as CSEC has remained fairly steady for the past year. There have been no barriers to service provision. The county is unable to accurately project the number of CSEC due to upcoming changes related to the decriminalization of the youth impacted by commercial sexual exploitation.

**Butte County**

*Why is Butte not using the SOP case review tool? Are all counties using this tool? Was this tool provided in the appendix?*

The use of the internal SOP case review tool was put on hold due to the inconsistent use and understanding of the definitions among the users. The tool has been modified to better reflect the case review process. The users have been trained on the new tool, which will be put back into use for case reviews starting October 1, 2016.

Most waivers are using the SOP case review tool, and if they are not currently using, they are looking to implement and test soon. This tool was not provided in the index (neither the template to the counties nor any returned).

*Is Butte one of the few counties that is using Wraparound with its child welfare population?*

All Project counties, including Butte, utilize Wraparound with their child welfare populations. Some counties chose to include Wraparound as an optional intervention for the Project; other counties share similar efforts but are not included in the Project.

*Is there an update regarding the work of the well-being and trauma exposure workgroup?*

Westat:

The well-being and trauma measurement workgroup was formed for the purpose of recommending well-being and trauma evaluation measures. The workgroup ended after measurement selection. For evaluation purposes we will use data from the Structured Decision Making tool, specifically the Family Strengths and Needs Assessment data, and the CANS. Though data from both measures are limited to children and families receiving services, they are both validated.
measures and are already in use by counties, improving the opportunity for collection of high-quality data.

What might be the fidelity tool to measure Wraparound provider’s performance?

Butte County is putting forth efforts to improve the measurement of providers. Their Wraparound provider is providing weekly clinical notes and reports regarding individual and family sessions. The tracking of Child and Family Team (CFT) meetings provides them with performance assessments.

Los Angeles County

In regards to the immersion strategy of core practice model, how many child welfare, child and family team assessments or Multidisciplinary Assessments (MA) are completed with each youth that is currently in congregate care?

The Los Angeles County Department of Children and Family Services (DCFS) does not track CFT by placement type; however, Casey Family Programs (CFP) staff is working with DCFS staff as consultants to support a "long-stayers" focus on youth who have been in care two or more years. These CFTs will look much different than front-end or initial CFTs. The CFP will help DCFS select these cases, lead intensive case review which focuses on culture and trauma history and help build a team for these youth. The professional team may include mental health providers, P3 workers (retired social workers that do family finding), Adoptions workers and group home staff. The youth's “buy-in” is critical in the development of the case plan through the CFT.

The county does not delineate by placement type of MA. Since October 2009, 98 percent of all children detained receive a MA assessment with some exceptions such as those placed in Home on Probation and those that are returned home by court shortly after the initial detention or those on Absent Without Leave. Currently 5,600 to 6,000 newly detained children receive a MA assessment per year.

Are there materials for the core practice model that are available in Spanish? Since that concern was raised by CW staff.
Currently, the CFT Meeting Notes form is available in Spanish. There are no other materials available in Spanish, but DCFS is working with CDSS to create these documents in Spanish.

Please clarify if the mini QSRs that are completed in LA are for the CFSR process or is this for the waiver evaluation? Please provide updates regarding the results and findings of the QSR process in each county?

Because of the Katie A. settlement, the QSR is specific to Los Angeles County as directed by the Katie A. Panel. It is not a requirement for the other Project counties.

Will the evaluation team have access to the CFT tracking system? Is there information about the CFT debriefing sessions in the tracking system?

This is currently being reviewed for consideration by the Evaluation Team.

Do we have copies of the fidelity assessments that are used for Wraparound? Is there a standard fidelity assessment for SOP?

Yes, a copy of the Wraparound Fidelity Index is attached. Please double click on the image to view:

![Wraparound Fidelity Index](image)

The Los Angeles' DCFS practice is CPM, and the QSR is utilized to measure fidelity.
If you can in future reports, provide more information about the culturally based child abuse prevention services including the Effective Black Parenting or work directly with Native American communities?

This request was emphasized to the county.

How is SPA 3 completing Triage of the referrals to Wraparound?

The effective date for Los Angeles County Wraparound transition has been pushed back to November 1, 2016. During this time, DCFS, DMH, and Probation are making small strides by realigning the referral process by implementing the pilot program. In general, the pilot program has two phases. The Probation Wraparound referral process is as follows:

The Deputy PO of Record sends the Wraparound referral directly to the Probation Wraparound Supervising Deputy PO (SDPO). The SDPO checks for any missing information on the referral and triages each case to determine if the case meets the qualification and eligibility for Wraparound. If it is determined the case is suitable for Wraparound, the SDPO sends the referral electronically to the DMH Liaison. Then, the DMH Liaison assigns the case to a provider that provides the services in the specific SPA on an alphabetical rotation. If SDPO determines the case is not suitable for Wraparound services, the SDPO provides the referring Deputy PO alternative services that will be appropriate for that youth. Alternative services may include but not limited to, outpatient mental health services, Family Preservation, Full Service Partnership, FFT/FFP, Prospective Authorization Utilization Review Unit, Intensive Field Capable Clinical Services and/or Field Capable Clinical Services.

When will we have an update regarding the youth outcome questionnaire being used in LA?

The county can share results of the Youth Outcome Questionnaires; however, there is a time lag of about six months as the data is collected and analysis is run by the FFT Consultant. The reports include aggregated data since program inception in 2008. They will need to make special requests for data covering only the reporting period and will make the data available upon receipt.
Will the evaluation team have access to the juvenile field case plan that will include educational information and info on drug test results? Is this in the probation IT system?

This is currently being reviewed for consideration by the Evaluation Team.

Will we have access to the global rating measure tool?

At this time, the tool is currently not being implemented consistently as supervisory staff are still in the learning process. The plan is to start implementing the tool quarterly and hope to have some data by the next year.

What were the results of the QSRs? Is this the same QSR for the CFSR process or is this different for the waiver evaluation?

The Quality Services Review (QSR) is a separate review from the CFSR review process and use a different tool. The DCFS is in the third round of its QSR. The QSR reviews occur about every six to eight weeks in one DCFS regional offices only and 10 to 12 cases are randomly selected and reviewed from over 35,000 cases. Below are the cumulative results from the third round of six DCFS Regional Offices:

- Overall Child and Family Status – 75 percent acceptable
- Engagement – 73 percent acceptable
- Voice and Choice – 57 percent acceptable
- Teamwork – 11 percent acceptable
- Overall Assessment – 66 percent acceptable
- Planning – 38 percent acceptable
- Tracking and Adjusting – 54 percent acceptable
- Overall Practice – 50 percent acceptable

Sacramento County

Does "project duration" mean the entire demonstration period? If so, what was the projected number of children to be served during the reporting period?

The Sacramento County Department of Health and Human Services (DHHS) projected serving 14,709 children age zero to 17, during the time period of October 1, 2015 through March 31, 2016.
Is there a sense of the number of services that are not accounted for during this change in staffing?

The Sacramento County Child Protective Services provided services to families during this stabilization period, however, limited staff resources caused gaps in SOP training and coaching. These gaps may have attributed to a decreased use of SOP practices by experienced staff that previously received SOP training.

County of San Diego

Please provide the actual number of children served during the reporting period?

The County of San Diego Child Welfare Services (CWS) served 6,014 children during.

The target is expressed in terms of the number of families, but the information is presented as number of parents. Is there a difference in the way these units are counted?

The Family Visit Coaching contractors were not set up to collect number of children served. The County of San Diego has changed the data collection the April 1, 2016 through September 30, 2016 Progress Report reflects these changes and is expressed in terms of the number of children.

San Francisco County

What were the reasons why only half of the projected numbers were served with SOP? Is it because there were only 1,700 children with maltreatment reports?

The estimate provided was based on an annual estimate, rather than the six month reporting period. The estimate should have been 1700.

Sonoma County

Has the Evaluation Team been in communication with Sonoma County since the submission of this report regarding this issue?

The Evaluation Team has followed up with Sonoma County individually, as well as held group meetings with child welfare and probation agencies to work through data collection issues and define
measures. The evaluation team is also beginning discussions to provide participating counties with regularly occurring trainings on fidelity, CQI, and other topics starting in early 2017.

**Evaluation Team**

*The dates for Institutional Review Board approval of Phase I and II listed on page 87 do not align with the timeline described in Appendix A. Please clarify when Institutional Review Board approval and Phase I and II data collection is anticipated.*

The Evaluation Team encountered some unanticipated delays in year one of the evaluation contract, such as changes to the evaluation protocols as requested by the California Committee for the Protection of Human Services, Institutional Review Board (IRB). The IRB awarded final approval for all elements of the Evaluation Plan in June 2016.

**Which Counties are considering participating in each sub study?**

The county agencies that submitted formal sub study proposals include the Sacramento County DHHS, the County of San Diego CWS and the San Francisco County Human Services Agency. The CDSS and the Evaluation Team are finalizing a cost sub study that includes the Alameda County SSA, also considering both Los Angeles County DCFS and Probation Department.
# Appendix E

## I. Acronyms

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<th>Definition</th>
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<tr>
<td>ACF</td>
<td>Administration for Children and Families</td>
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<td>Alameda County Probation Department</td>
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<td>Bay Area Academy</td>
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<td>BCPD</td>
<td>Butte County Probation Department</td>
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<td>Birth and Beyond</td>
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