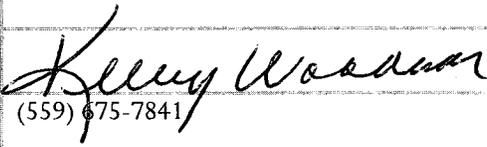


California – Child and Family Services Review Signature Sheet

For submittal of: CSA  SIP  Progress Report

County	MADERA
SIP Period Dates	8/18/2014 – 8/18/2018
Outcome Data Period	July 2015, Q1 2015

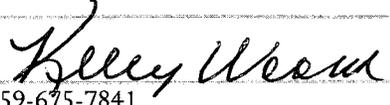
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Attention: Bureau Chief  
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744 P Street, MS 812-91  
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\*Signatures must be in blue ink

**Board of Supervisors (BOS) Signature**

BOS Approval Date

Name

Signature\*

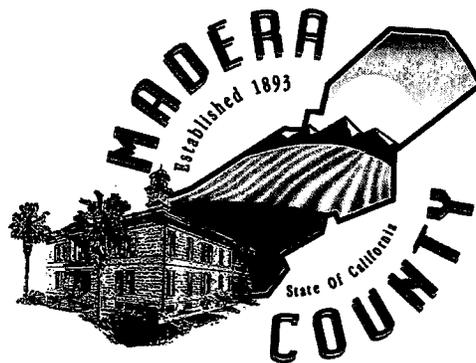
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# California - Child and Family Services Review

## Annual SIP Progress Report

AUGUST 2014 – AUGUST 2015



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## Introduction

Madera County is located in the exact center of California, in the heart of the Central Valley and the Central Sierras. Madera County encompasses the following:

- Chowchilla and Madera.
- Unincorporated communities:
  - Ahwahnee
  - Bass Lake
  - Berenda
  - Coarsegold
  - Fairmead
  - Madera Ranchos
  - North Fork
  - Oakhurst
  - O'Neals
  - Raymond and
  - Rolling Hills.

The Madera County Department of Social Services is one of the largest departments in the county. Approximately half of the population of Madera County receives some sort of public assistance from the Department.

The Madera County Department of Social Services and the Madera County Probation Department are committed to providing for the safety and protection of our community's children and youth. Each Department has identified areas of success as well as areas of opportunity for improvement.

In this report, we will restate our outcome data from the baseline quarterly data report used in the CSA/SIP and give updated data from the most recent quarterly data report from UC Berkeley (<http://www.childsworld.ca.gov/PG1379.htm>; July 2015. Data Extract: Q1 2015) and an analysis of the data. We will also discuss our strategies, identifying where we have made great strides and where we have opportunities for improvement.

Finally, we will discuss our current outcomes that fall below the national standard. We will identify barriers to meeting the national standard and possible solutions for improvement.

## SIP Progress Narrative

### STAKEHOLDERS PARTICIPATION

Although Madera County Department of Social Services and Probation Department has not had any formal “Stakeholders” meetings this year, we have been meeting with our county partners to implement various areas of our SIP. Madera County continues to participate on the following committees/work groups:

- Out of Home Youth Advisory Board
- Family Resource Center
- Healthy Beginnings Program
- Homeless Committee
- Madera County Community Action Partnership
- Interagency Placement Committee
- Interagency Children and Youth
- Linkages
- CaWORKs/WTW
- SCAN Sexual Assault Child Abuse Neglect Team Meeting
- CDRT Child Death Review Team Meeting
- Eligibility
- Madera County Office of Education Foster Youth Services
- Big Brothers/Big Sisters
- CASA
- Katie A.
- Wraparound
- THP Plus/FC
- Ready, Set, Go!
- Resource Meeting with the Court
- Child Abuse Prevention Council
- Foster Family Agency Quarterly Meeting
- Madera Co Foster Youth Collaboration Committee

The Department of Social Services/Child Welfare Supervisors, Managers, and administrative staff meet weekly to review outcome data, identify barriers, and brainstorm possible solutions to the identified barriers. During this meeting (Program Integrity – PI), on a quarterly basis, the SIP is discussed.

The Child Welfare Analyst II also meets with all contractors on a quarterly basis to discuss the SIP and areas where they can assist the Department in meeting its unmet needs. In addition, client participation and program effectiveness are also evaluated.

The service delivery system in Madera County includes: Department of Social Services, Probation Department, Department of Public Health, Department of Behavioral Health, County Office of Education, Workforce Development, School Districts and the Housing Authority. Madera County's active community based organizations include: Community Action Partnership of Madera County, First 5 and Darin Camarena Health Center. These organizations provide extensive health and social welfare services to the community.

## **CURRENT PERFORMANCE TOWARDS SIP IMPROVEMENT GOALS**

Madera County Department of Social Services chose to focus on four outcomes where we were performing below the national standard as identified in our County Self Assessment and System Improvement Plan. Our base line data comes from UC Berkeley – July 2015; Data Extract: Q1, 2015. In addition, we will look at more recent data extracted from Children's Research Center SafeMeasures July 2015 Q1. Because the data covers multiple time increments, the time periods will be identified for each outcome.

### C1.4 Re-entry Following Reunification

The baseline data established in the CSA (October 2012; data extract: Q2, 2012), showed that of those that reunified between July 1, 2010 and June 30, 2011, 20.4% of the children reentered the system.

UC Berkeley July 2015, data extract: Q1 2015 shows that only 7.0% of those that reunified, re entered the system.

With more recently data extract from Children's Research Center SafeMeasures extract date of July 2, 2015 for the period of July 1, 2013 – June 30, 2014, shows that only 4.7% re-entered care.

This consistent positive change may be attributed to the following strategies:

**Strategy 1 - Integrate Safety Organized Practice as the standard for all Child Welfare social work interventions. Incorporate the following practices as part of the model: Coaching, Reflective Practice, Trauma Informed Practice, Motivational Interviewing and Cultural Humility.**

Madera County completed steps A, B, D, E, F, H, and J. And, although completed during this review period, we will continue to provide the following each year during the SIP period:

Step C1: This step added to reflect development and evaluation of a tool

Step G: One day trauma informed practice for all new staff

Step I: Half day cultural humility training for all new staff

**Strategy 2 - Fully Implement Team Decision Making Model**

Madera County has fully implemented the Team Decision Making model for all placement decisions.

Action Steps:

Action Step C was added to reflect our use of ETO although we intended to meet on a quarterly basis to discuss TDM's, we have included discussions of TDM's during our weekly program integrity (PI) meetings. During our weekly meetings, the TDM supervisor reports out on the number of TDM meetings held during the week and any identified concerns. This practice will continue throughout the duration of the SIP.

The Department will continue with Step D: training for new staff, on a yearly basis throughout the duration of the SIP.

Madera County is utilizing Efforts to Outcomes (ETO) web based tool to track all TDM's. This practice began in June 2015. Entering data allows us to evaluate the effectiveness of the program. It is our intent to pull data and review data on a quarterly basis during our PI meetings. This step is added to our strategy chart.

In addition, social workers also utilize the Risk and Safety Assessments in Structured Decision Making to guide their decision on whether or not to send children home. These tools are presented during the TDM.

**Strategy 6 – Differential Response**

After a review of the literature and summary report, the Department has determined that it will not move forward with strategy for the following reasons:

1. The Department has been unable to identify a Community Based Organization to help facilitate DR.

2. The Department is concentrating their efforts to build capacity in staff. From July 2014 – June 2015, Madera DSS has seen an 87% turnover of social worker staff. Training staff has been a priority.
3. The analyst assigned to assist the Department to move towards DR, has been unable to do so due to other priorities.

The Department plans to include this strategy in the next SIP.

A promising practice for this outcome is the utilization of coaching and reflective practice gained from Safety Organized Practice. Social Worker Supervisors (SWS's) are modeling practices they expect to see from their staff. In addition, SWS's have made it a practice to shadow their staff when completing home visits and investigations. By using this practice, SWS's are able to reflect on processes and evaluate performance.

### C2.3 Adoption within 12 months (17 months in care)

The baseline data established in the CSA (October 2012; data extract: Q2, 2012), showed that only 11.1% of children that had been in care 17 months or longer had been discharged from foster care to adoption.

UC Berkeley July 2015, data extract: Q1 2015 shows that 28 % of children that had been in care 17 months or longer had been discharged from foster care to adoption. This is above the national goal of 22.7%.

This positive outcome can be attributed to the fact that in 2012, Madera County Department of Social Services began offering adoption services. Knowing our community, knowing our families, and being able to do concurrent planning from the ER stage, has increased our ability to move children to a permanent plan quickly.

The adoption supervisor attends all initial removal TDM's (Strategy 2) in order to assist in making a concurrent plan for the child(ren). The strategy related to this outcome is Strategy 5.

### **Strategy 5 - Train social workers, foster parents, court, and community partners on permanency and connection.**

All aspects of this strategy have been met. However, with new staff and new foster parents, there will continue to be the need for yearly training on permanency. Therefore, steps B, C, and D will continue to be needed throughout the SIP period. In addition, a Step F has been added to include monitoring and evaluation of the trainings to determine if the training has had an effect on early permanency for children.

Furthermore, Madera County is connected with the Consortium for Children organization and utilizes the California Kids Connection web site to register children and look for forever families.

### C2.5 Adoption within 12 Months (Legally Free)

The baseline data established in the CSA (October 2012; data extract: Q2, 2012), found that only 38.5% of the children who became legally freed for adoption within a 12 month period had their adoption finalized.

UC Berkeley July 2015, data extract: Q1 2015 shows that Madera County is still falling below the national goal of 53.7% with 41.7%. This data was extracted from the time frame of April 1, 2013 – March 31, 2014.

However, in more recent data, extracted from SafeMeasures on July 2, 2015, for the time period of July 1, 2013 – June 30, 2014, Madera County has exceeded the national goal at 57.7%.

Once again, the positive changes in this outcome may be attributed to Madera County's implementing their own adoption service program. (See above outcome analysis)

According to data extracted from Children's Research Center SafeMeasures from February 2014 – February 2015, 33 children had their adoptions finalized.

### **Strategy 4 - Engage Churches and Community Organizations in recruitment of foster homes and development of foster parent mentors**

The Department has been working on engaging churches for recruitment of foster homes. However, in this past review period, even with a presentation to the Ministerial Association, no Churches have come forward for further engagement. The analyst/foster parent liaison will continue to attempt to engage the faith community.

In September 2014, information and recruitment took place at the Madera County Fair. There were numerous inquiries into foster and adoptive homes. Those interested were given information about how to become an adoptive home and were registered for an orientation.

In 2014, the number of foster homes increased by 10% and there are some still pending approval.

Action Steps:

Action step C has not been reached and is going to be eliminated as there has been no interest to date from the faith based community. However, that does not mean that the Department will cease from trying to engage the faith based community.

Action step E – time frame has been modified to a later start and complete date.

The rest of the action steps are currently in progress as time frames are not within this time period.

In June 2015, the second “Leaders for Change” program was hosted by the department. The “Leaders for Change” program is a leadership training program designed for family leaders and local staff that teaches them to take on leadership roles in the systems serving families and children. There were eight participants.

A challenge for implementing a mentor program has been funding. Governor Jerry Brown did provide for funds for recruitment and retention of foster parents in his 2015-2016 budget. As soon as funding is secured, the Department will begin a foster parent mentor program. The foster parent mentor will be an essential member of our foster and adopted parent recruitment program as the Department moves towards implementation of the Family Resource Approval process, which will be discussed further on in the narrative.

### C3.1 Exits to permanency (24 months in care)

The baseline data established UC Berkeley dynamic reporting system for October 2012; Data Extract: Q2 showed that Madera County scored 13.9%, which is below the National goal of 29.1%.

UC Berkeley July 2015, Data Extract: Q1 2015 shows that Madera County continues to fall below the national goal, although higher than the baseline at 21.9%.

The Department has identified several strategies that have helped to improve outcomes for permanency. These are described below:

#### **Strategy 2 - Fully Implement Team Decision Making Model**

See page 5 above.

#### **Strategy 3 - Madera County will implement wrap around services**

Madera County DSS successfully implemented wraparound services. The wrap team consists of Child Welfare, Probation, Behavioral Health and EMQ Families First. As

identified in our last update, Steps A and B are completed. Step C will continue on an as needed basis. As youth exit the program, either through graduation or other circumstances, DSS and Probation will refer youth for services through the Interagency Placement Committee process.

#### Action Steps:

Steps A through E are completed and ongoing services will remain as needed.

Step E added the addition of the Community Team under person responsible. The Community Team currently meets on a monthly basis but will be moving towards a quarterly and as needed meeting. The Community Team receives updates on each child in wraparound and approves requests for funding.

Step G Monitor and evaluate placements has been removed as it is duplicative for Step E.

Step H time frame has been changed as the Department is not yet ready to increase wrap around slots.

A new step is added (Identified as Step J) to include developing a tracking system to monitor re entry and time to reunification.

#### **Strategy 5 - Train social workers, foster parents, court, and community partners on permanency and connection.**

Finding a permanent connection to last a life time is the goal of the permanency planning unit. When a child comes into the system, family finding starts and continues throughout the case.

Our action Steps related to this strategy consists of continued yearly training on permanency for new staff and new foster parents. Pre-foster care training, PRIDE, includes a chapter on permanency and concurrent planning. Permanency training has been integrated in our training curriculum for all new child welfare staff.

Action step F was created to add an evaluation component.

With the enactment of AB 12, youth in Madera County are largely electing to remain in care as non-minor dependents. This fact can be looked on as a success, as youth recognize that they are not ready to become totally independent young adults and continue to need the support the department can offer. However, this also becomes a barrier as it appears that youth are not moving towards permanency. The majority of youth who remain in care were identified as unadoptable or there was no one willing and able to provide guardianship.

In addition, staff from the Department facilitates a monthly Out of Home Advisory Board. This Board provides services to Madera County youth. In 2014 – 2015, the following activities were held: Movie night, sibling event, education/service fair and more.

The biggest challenge for the Department is staff retention. In FY 2014 – 2015, the Department had an 87% turnover in staff. This means the majority of the year was spent on training new staff. A total of 23 new staff was hired and 20 staff left. For a comparably small child welfare division, this has an enormous impact on every day business practices.

#### C4.3 Placement Stability (At Least 24 months in Care)

The baseline data established from UC Berkeley (October 2012; Data Extract: Q2, 2012), shows that Madera County scored 29.3% (17 of 58 children) well below the Federal standard of 41.8% for this outcome.

UC Berkeley July 2015, Data Extract: Q1 2015 shows that Madera County has made huge progress in this outcome by increasing our number to 47.5%, above the National goal of 41.8%.

There are numerous factors that have contributed to our increase in placement stability.

#### **Strategy 3 - Madera County will implement wrap around services**

As stated on the previous page, Madera County DSS successfully implemented wraparound services. Wrap around services have allowed us to intervene when a placement is at risk of blowing out. We are able to provide services to save the placement.

#### **Strategy 4 - Engage Churches and Community Organizations in recruitment of foster homes and development of parent mentors**

This strategy is discussed on page 7. However, please note that by increasing the number of county foster homes, we are able to keep children in familiar surroundings within their community which increases the likelihood of placement stability.

### **Strategy 7 - Coordinate services with Central Valley Children’s Hospital Child Advocacy Clinic**

Madera County has been using the Central Valley Children’s Hospital Child Advocacy Clinic for all drug exposed infants and their siblings; any child who was removed from a drug lab or home where drug paraphernalia was accessible to children; and any child who has been physically abused.

The benefits of having the Child Advocacy Clinic is that children are seen faster than if they were sent to the Emergency Room; Doctors and nurses provide expert testimony in cases where the medical information is difficult for a lay person to understand; and they provide resources and education for parents who have children at risk of being removed.

The action steps will be updated as they have all been completed. I will address Action Step D:

Although the Department utilizes Rushmore to monitor the use of the Child Advocacy Clinic, we have not studied and validated that this variable has increased our efforts in placement stability. The Department will develop a survey for foster parents to see what effect, if any, the use of the Child Advocacy Clinic has on placement stability.

### **Strategy 8 – Improve and increase access to mental health services for families who are impacted by child abuse or neglect and for youth ages 6 – 18.**

Madera DSS has been working with Madera County Behavioral Health to ensure all children who enter care or are at risk of entering care, receive a mental health assessment. These efforts are directly linked through the development of Katie A. (See the Initiative Section below for details.)

Madera DSS is working with Behavioral Health to develop a shared system where referrals and services can be monitored by both agencies. Based on this, Step G (Evaluation and Monitoring) and Step H (Changes to PPG based on outcome of evaluation and monitoring) are added to this strategy.

Madera County began meeting on a quarterly basis with Foster Family Agencies. These meetings are informative in nature, discussing areas of concerns, new regulations, training opportunities, and Continuum of Care Reform (CCR). The Foster Parent Liaison conducts the meeting which usually last for 1 ½ hours.

## Promising Practices/Challenges

As we look at our overall performance for the targeted outcomes, Madera County has exceeded the national goal for three of the five outcomes; and, although not meeting the national goal for the other two, Madera County has seen an increase from the baseline.

Madera County has fully embraced the concepts of Safety Organized Practice and has incorporated it into every aspect of child welfare services. Social Work Supervisors have been using the coaching model with their staff and do field observation. The Social Worker Skills Checklist was developed to ensure Safety Organized Practice tools and practices are utilized.

Madera County continues to utilize the Rushmore system to help define and attain goals, as well as address staff training needs. SWS's are required to review five (5) cases per staff per month.

Child Welfare Supervisors, Analyst II, and Program Managers meet on a weekly basis with administration staff to review compliance mandates and perform targeted reviews. Successes are celebrated and areas of opportunity are discussed. The group is also able to redirect resources in order to target areas needing support in order to meet compliance mandates.

Another promising practice was the development of the "Service Coordinator" role. The "Service Coordinator" provides immediate referrals to services, arranges visitations and conducts an "Ice Breaker" meeting. The "Ice Breaker" is an initial meeting between birth parents and out-of-home caregivers. It is a facilitated, child-focused meeting held shortly after a child is placed (or replaced) in out-of-home care. The meeting provides an opportunity for caregivers and birth families to meet each other and to share information about the needs of the child. Though the meeting is somewhat structured, the goal is to create an amiable environment to facilitate open communication.

As identified in our previous update, staffing issues continue to be a challenge for Madera County. This has been especially true during this past year when we saw an 87% turnover in CWS staff. It takes a minimum of one year to fully train a social worker. Given our recidivism rate, we have been in a constant state of training for the past two years.

The next biggest challenge for Madera County is substance abuse. Methamphetamine use is high in Madera County and there are little services for parents addicted to the drug within the County. The Department partners with Madera County Behavioral Health to provide out-patient services. In-patient services are non-existent within the County. Therefore, we must seek services in neighboring counties, such as Fresno County.

## Other Successes

Madera County has partnered with iFoster to provide lap tops and internet cards to children in out of home care. iFoster provides foster youth with items at a discounted price. Madera County has given out 100 lap tops. One foster parent told us that since receiving the lap top, the student went from a failing grade to a “B” average.

Madera County’s linkages program participated in an intensive evaluation coaching project with Amy D’Andrade from San Jose State University, School of Social Work. Through this project, Madera County developed a logic model, selected evaluation components, collected data, developed and administered an on-line survey and completed an analysis. Our project produced the following outcomes:

- Tracking of three areas: tandem visits, coordinated case planning, and open communication between WTW and CWS.
- Ongoing training is needed to improve implementation
- When families receive linkages activities, it can work very well.

In May 2015, Madera County held our annual Foster Parent Appreciation event. The event was held on Saturday, May 30, 2015 at Rotary Park in Madera. There were over 100 participants. Social Services staff provided games and crafts for the children, while the foster parents received training on Nutrition and new legislation. All children received ribbons and the foster parents received certificates of appreciation.

In addition to this event, the Department arranges a minimum of six post-service trainings. These trainings address legislative changes, trauma, bullying, child welfare concerns, licensing issues and much more.

## **OUTCOME MEASURES NOT MEETING STATE/NATIONAL STANDARDS**

There are three outcomes where Madera County is not meeting the national goal. The first is C1.3 Reunification Within 12 Months (Entry Cohort). According to UC Berkeley July 2015, Data Extract: Q1 2015 from October 2013 – March 31, 2014, Madera County had 25% of its children reunify within 12 months. This is well below the national goal of 48.4%. With more recently data extract from Children’s Research Center SafeMeasures extract date of July 2, 2015 for the period of January 1, 2014 –

June 30, 2014, shows that even still slightly below the national goals, Madera County is at 48.1%; a significant improvement.

To address this composite, Madera County initiated the Family Finding process. This process begins at removal and continues throughout the life of the case. We are able to identify a support system and connect children with families to last a life time.

### 2B Timely Response (10-day Response Compliance)

Although there is not a national goal for this composite, the State standard is 90%. Madera County fails short of this standard, scoring 83.1%. These results are directly linked to our staffing issues as identified on the previous page. Our Department has recently put into place several strategies to help in this area, including approving overtime, redistribution of referrals, and having the Deputy Director and Child Welfare Analyst II assist in closing referrals.

### 2S Monthly Visits

Once again, there is not a national goal for this composite; however the State standard is 90%. Madera County fails short of this standard scoring a 74.5% for in home visits, and a 75.7% for in residence visits. As stated above, our struggle with meeting the standard is staffing issues. New staff is required to attend CORE training which takes them away from their work a minimum of two days per month, plus there is additional County training that they must attend.

## **Probation**

### **Reunification within 12 months (C1.1)**

The base line for reunification of children within 12 months in 2012 was 65.5 percent according to the Report Publication: October 2012, Data Extract Q2 2012 Report. The National Standard or Goal was 75.2 percent. The current base line for reunification of children within 12 months is 20 percent according to Report Publication: July 2015, Data Extract Q2 2015 Report. The Nation Standard or Goal is 75.2 percent.

Reunification within 12 months is not always achieved due to several factors, which include the youth's willingness to return home, their parent's ability to parent the youth, and the youth's willingness and ability to stay out of trouble. It is probation's goal to achieve reunification as promptly as possible. Therefore, youth were provided with services to assist in their reunification, which included communication with their families

via telephone, visits at the placement facility, and off ground visits in the minor's family home. Families were also involved in therapy through the placement facility.

**Median Time to Reunification (C1.2):**

The base line for the median time to reunification of children in 2012 was 6.7 percent according to the Report Publication: October 2012, Data Extract Q2 2012 Report. The National Standard or Goal was 5.4 percent. The base line for the median time to reunification of children in 2015 is 17.5 percent according to the Report Publication: July 2015, Data Extract Q2 2015 Report. The National Standard or Goal is 5.4.

As indicated in the second paragraph under the heading Reunification within 12 months (C1.1) services are provided in assisting in the reunification of youth. Services are extended to the entire family to facilitate reunification as promptly as possible. However, there factors involved that may delay or quicken the process which include the youth's willingness to return home, their parent's ability to parent the youth, and the youth's willingness and ability to stay out of trouble.

**Strategy 1:** Utilize reunification training for the probation placement officer and placement supervisor to enhance staff's ability to identify the youth's needs, readiness to return home, be maintained in a stable home environment, and avoid re-entry into the foster care system.

Action Steps:

**A. Staff will continue to attend training specific to reunification to assist in identifying the needs of the youth and family.**

Throughout the past year Probation Staff which includes Group Home Placement Supervisor, Placement Officer, Senior Court Officer and Probation Technician have attended ongoing training that enhances our ability to make a determination regarding the removal of a youth with placement in a group home or foster care or reunification with appropriate family. Probation staff has attended the following training or committee meetings.

- Group Home Placement Core (To enroll in and complete by the Placement Officer in the near future.)
- Juvenile Assessment Intervention System (JAIS) Assessment Training
- Supervisor Core (To enroll in and complete by the Supervisor
- Youth Violence in the Home

- Juvenile Justice Reform
- Delinquency Law, Practice, Update
- Title IV-E Division 31
- Assessment to Treatment Planning
- Non Minor Dependent Juvenile Justice
- Juvenile Law Update and Title IV-E eligibility, John Burton Foundation multiple AB-12 Webinars
- 2014 Foster Youth Summit
- Ca Institute for Mental Health and Juvenile Justice Reform
- Regional's Improving Permanency
- Sustain Wraparound
- CDRT Child Death Review Team Meeting
- SCAN Sexual Assault Child Abuse Neglect Team Meeting
- Central California Placement Committee
- Madera Co Foster Youth Collaboration Committee
- Madera Co Out of Home Placement Committee

The Placement Supervisor will be attending Placement Core in by June 2016. The department will continue make an effort to attend Probation Advisory Committee meetings.

**A. The Probation Officer will continue to develop a case plan with the family and the youth that includes concurrent planning for the youth's permanency should Reunification efforts fail.**

The case carrying Probation Officer along with the Group Home Placement Officer collaborates to provide a detailed Case Plan for the Youth at disposition. Thereafter the Group Home Placement Officer continuously refers to the Case Plan throughout the duration of supervision in the Group Home. The officer utilizes the Case Plan in the Child Welfare Services/CMS system, which insures Division 31 guidelines are appropriately addressed accordingly to the documented standards. The Case Plan is updated every 6 months with every effort of involving the parent/guardian and guiding towards the reunification with said parent or family. If reunification efforts fail the Probation Officer will reassess the youth's needs. If the youth has completed and met all Court Ordered terms of Probation and appears to be successfully rehabilitated then a 241.1 staffing will be requested to determine appropriate status of youth.

- B. Placement staff will continue to implement reunification focused program activities: meet with parent and youth regularly, following case plan needs, referrals to services, home visits, and home evaluations to reunite youth with their families and decrease continued juvenile offenses, prevent replacement outside the home, and support the family to maintain long term stability.**

The designated Group Home Probation Officer meets with the youth monthly as designated under Division 31 standards. The Officer reviews the Case Plan and insures the youth is receiving the appropriate services in the group home setting. The Probation Officer implements monthly contact with parent/guardian and from onset of placement begins the reunification process with the appropriate family or alternative options. In order to decrease juvenile offenses close monitoring of the youth will be continued on an ongoing follow up with therapist and group home support staff to validate the youth's goal oriented plan. Wraparound Services may be utilized currently to insure stability within the reunified home. After completion of group home placement and without wraparound services available the youth will be maintained on a caseload designated at the level of supervision required, specifically assigned to their school of attendance.

- C. The placement officer will continue to refer minor and family to parenting programs such as Staying Connected with Your Teen, Strengthening Families and Triple P (Positive Parenting Program).**

The Placement Officer continues to refer the youth and family as assessed to appropriate parenting curriculum available within Madera County or counseling services provided in the group home.

**Re-entry following reunification (C1.4):**

The base line for reunification of children in 2012 was 81.3 percent. Of this percentage, 31 percent reentered the system. The re-entry of children into the system continues to be a challenge for Madera County. The base line for re-entry following reunification of children in 2015 is 20 percent according to the Report Publication: July 2015, Data Extract Q2 2015 Report. The National Standard or Goal is 9.9.

The majority of youth who enter the system come from families who face many obstacles, which include drug abuse, lack of transportation, homelessness, and/or a lack of community services/resources. A large number of parents are

methamphetamine users and there are no inpatient services within Madera County. There are also no sober/transitional homes available. Many families have trouble accessing existing services due to a lack of transportation. Those residing in the City of Madera have access to public transportation, but often cannot afford it. Families residing in the unincorporated areas have no access to public transportation. Additionally, some of the families have a large number of children who enter into placement. Therefore, reunification is always successful.

**STRATEGY 2:** Probation staff will engage youth and their families early on to develop case plan activities that will assist in identifying the needs of the youth and their family.

Probation Staff's engagement of the Youth early on is an integral part of the supervision of the youth. We believe Strategy #2 of developing and maintaining appropriate Case Plans will continue to be a needed Strategy. It has been proven in the past that the outcome of this strategy helped us reduce the number of youth in Group Home placement by 75%, from an average of 15 youth to 5 youth. Since then it has been reduced to one.

**Least Restrictive Placements (4B):**

The base line for least restrictive placements in 2012 was 34.6 percent. According to the Report Publication: July 2015, Data Extract Q2 2015 Report, the amount is 0.

Probation Staff continues to engage youth and their families early on to develop case plan activities that will assist in identifying the needs of the youth and their family. Please refer to Strategy 2.

**STRATEGY 3:** Probation Staff will continue to develop, implement, and provide programs or services to prepare the youth and family for success on Probation, to avoid out of home placement, and the appropriate pre-placement assessment of cases for placement in Group Homes/Foster Care.

**Promising Practices/Challenges**

We currently are looking forward to implement a Truancy Diversion Program in the fall. Probation is in a collaborative partnership with Madera County Child Welfare Services, Behavioral Health, EMQ Families First and Madera County of Education in providing Wraparound Services to four Madera County Probation youth. We continue to participate with local education and child welfare services in the Foster Youth Collaboration Meetings and events. In addition to participation in the Out of Home Placement committee meetings and events, we are also developing a Youth Fire setting

Prevention and Intervention Educational program. The department has implemented a Battle for Change component to the Community Day/Court Day School program in which youth are involved in physical activities and field trips. The program provides cognitive and behavioral redirection. The department continues to thrive in Aggression Replacement Training (ART) for youth. We continue to implement the Fatherhood Initiative Grant within the Boot Camp program setting along with the Proud Parenting Program grant. These focus on Credit Recovery, Parenting Education, Mentoring, Cognitive Behavioral and Substance Abuse education. We have developed a partnership with Valley State Prison for Men and will utilize the Redirect program for non-probation youth to experience Prison life during a one day field trip. In addition we are training school aged youth through radKIDS (resist aggression defensively) a life-skills educational model program. Youth and parents are also referred to Strengthening Families Parenting Program or Staying Connected with your Teen programs.

### **Evaluation Process:**

Madera County Probation uses an Evaluation of Imminent Risk and Reasonable Candidacy tool along with a new Case Plan. The first tool is used to evaluate or determine the risk and needs of the youth. Regardless if the Youth is an eligible candidate to receive federal funding a Case Plan will be prepared. The youth may be on Informal Probation under WI 654.2, Deferred Entry of Judgment under WI 790, Probation without Wardship 725 WI, or Formal Probation with Wardship under 602 WI. The immediacy of the Case Plan is imperative. Once the Court imposes set orders the Court Officer instantaneously assigns the case to a Probation Officer. Within a 30 day timeframe or less the Probation Officer meets with the Youth and parent/guardian. The Case Plan is prepared with all parties in mind and is truly a joint effort. The plan lists the Youth and Family Strengths, Alternative Placement Options, Objectives and Services with allotted time frames. It represents a clear direction to the Youth and parent/guardian of definite direction and how the Probation Officer will assist the youth in accomplishing the set Goals. All parties must sign and the Case Plan is not effective until the designated Probation Officer Supervisor reviews and approves said Case Plan. The Case Plan utilizes a family approach to treatment. It is developed jointly with the Youth, Parent, and Probation Officer. The Case Plan is specific with detailed Goals and Objectives for each person, date of completion, and at least one Goal or Objective is for the Parent/Legal Guardian. It lists services and referrals needed to accomplish the Goals and planned placement options for the youth if these services fail. The options of familial placement or other alternatives are thoroughly exhausted before group home or foster care is considered. The decision to remove a child from home is a significant legal and practice issue that is not entered lightly. Therefore a Case Plan with SMART goals (Specific, Measureable, Achievable, Realistic/Relevant and Time Limited) that sets foster care as the goal for the child absent effective preventive services is an

indication that the child is at serious risk of removal from the youth's home. Probation understands that a plan of action, to wit, Case Plan is needed to prevent the removal. The case plan is updated every 6 months or more often if a new Petition is filed.

## State and Federally Mandated Child Welfare/Probation Initiatives

### **Katie A**

Madera County DSS and Madera County Behavioral Health were, until June 2015, meeting on a weekly basis to implement the provisions of Katie A. As of June 2015, our meetings have gone to monthly meetings as we have fully implemented a procedure to ensure all child welfare children and youth receive a mental health assessment and if indicated, treatment. We have collectively developed a referral form, response form, and are in the process of establishing a shared drive so that each department can track and record data. Furthermore, as part of our implementation process, training was provided to CWS staff, Behavioral Health staff, and Probation staff.

### **Commercially Sexually Exploited Children (CSEC)**

Highway 99, which runs through Madera County is the gateway to human/sex trafficking. With the passing of SB 855, child welfare agencies are tasked with providing identification and services to victims of sex trafficking. The Madera County Department of Social Services identified three foster youth who were involved in sex trafficking and two youth who were suspected to have been involved. In March 2015, Madera County opted-in to the CSEC program. Several stakeholders meetings were held that included members from law enforcement, juvenile court, DA's office, Victim's Services, DSS, BHS, Probation, Public Health, Faith Community, and Child Abuse Prevention Council. Together, we developed a County plan for addressing the issues of CSEC.

In addition, the Department of Social Services joined the Child and Family Policy Institute of California (CFPIC) California Preventing and Addressing Child and Trafficking Project (PACT). The purpose of this project is to create and implement a state and optional county level system that will prevent the trafficking of children, and meet the needs of those identified victims.

As a partner in this project, Madera County is also a partner with the WestCoast Children's Clinic. This partnership has two primary objectives:

- To develop a valid and reliable screening tool
- Develop a statewide training and dissemination strategy that facilitates use of the tool.

Furthermore, the Department also sponsored the Madera County Child Abuse Prevention Council in obtaining a license for GraceCirty mobile app which will help strengthen inter-agency coordination and communication among first responders, victims, and their families. GraceCity is a mobile application that offers instant accessibility to resources that serve victims of human trafficking.

Finally, Madera County obtained the license to show the film “In Plain Sight”, a documentary on the lives of five women who took up the charge against sex trafficking. This film has been shown to foster parents and CWS staff. The department is currently working on plans to have the film available to the community.

### **Quality Parenting Initiative (QPI)**

Madera County continues to participate as an active member of the Quality Parenting Initiative. Madera County has developed an action plan and meets quarterly to review progress and develop new goals. The Madera team consists of Child Welfare Staff, Administrative staff, Foster Family Agency staff, County Foster Parents and Foster Care Eligibility staff.

### **Resource Family Approval (RFA)**

In May 2015, the Administrative Analyst II and Child Welfare Deputy Director attended a convening in San Luis Obispo to learn about RFA. What they heard encouraged them to pursue joining Cohort II. In June 2015, Madera County entered into Cohort II of the RFA project with an implementation date of January 2016. We are currently in the early stages of writing our implementation plan. Madera County participates on monthly workgroup calls and executive calls.

### **Approved relative caregiver program (ARC)**

Madera County opted into the ARC program beginning April 1, 2015. The purpose of this program is to make the amount paid to an approved relative caregiver (ARC) for the care and supervision of a child who is under the jurisdiction of the California juvenile court, and who is *ineligible* Federal Foster Care (aka State Only) equal to the basic amount paid on behalf of such a child who is *eligible* for Federal Foster Care (FC).

Foster Care Eligibility staff and Child Welfare staff worked together to develop policies and procedures, train staff, and inform relatives about the program. Madera County currently has three pending ARC applications.

### **Children and Family Service Review (CSFR)/Continuous Quality Improvement (CQI) Program**

In 2014, Madera County became one of the pilot counties for the Children and Family Service Review. The purpose of the CSFR's are to determine what is actually happening to children and families as they are engaged in child welfare services, to ensure compliance with Titles IV-B and IV-E, and to enhance the capacity to help children and families achieve positive outcomes.

Madera County has a dedicated Social Worker Supervisor and Social Worker IV who are responsible for this program. These two individuals are working on their certification. Certification is required in order to enter data into the State Data Base.

Madera County's CQA staff has completed a total of ten (10) case reviews. Each case review has been taking a minimum of forty (40) hours. Each case review consists of reviewing the case, interviewing the people involved in the case during the time period in review (parents, children, foster parents, social workers) and writing a report of findings.

On August 31, 2015, CSFR goes into effect for all counties. Our CQA staff will be required to complete 4 case reviews each month.

### **Probation Initiatives:**

Madera County Juvenile Probation has implemented several new initiatives. As we progress into 2015-16, we plan to evaluate the effectiveness of these new programs, but we fully expect them to be successful.

One major initiative was Truancy Prevention Program for truant youth, ages six to seventeen. We worked closely with school districts as well as with other juvenile justice and community partners. We identified the needs of truant youth at-risk of entering the juvenile justice system and determined the appropriate services needed to achieve our goal of improving truancy rates in Madera County.

A second initiative launched this past fiscal year was the Redirect Program. It is a one day reality based program hosted by Valley State Prison for Men and presented to the at-risk young men of Madera County by correctional staff and inmate volunteers. We process and arrange the youth into groups of fifteen to tour the prison.

Lastly, one of our most successful initiatives was a collaborative effort with Behavioral Health Services (BHS) to develop a Sex Offender Counseling Program for youthful offenders because of the need to locally treat the rising number of youth sex offenders being placed on probation in the county. The treatment they receive is evidence based with a restorative theme to encourage empathy, and develop responsibility.

# ATTACHMENT A

## 5 – Year SIP Chart – Child Welfare

### CHILD WELFARE

**Priority Outcome Measure or Systemic Factor:** C1.4 Re-entry following reunification

**National Standard:** 9.9%

**Baseline Performance:** 20.4%

**Current Performance:** 7 %

**Target Improvement Goal:** Continue to meet or exceed the national goal.

**Priority Outcome Measure or Systemic Factor:** C2.3 Adoption within 12 months

**National Standard:** 22.7%

**Baseline Performance:** 11.1%

**Current Performance:** 28 %

**Target Improvement Goal:** Continue to meet or exceed the national goal.

**Priority Outcome Measure or Systemic Factor:** C2.5 Adoption and Legally Freed within 12 months

**National Standard:** 53.7%

**Baseline Performance:** 38.5%

**Current Performance:** 41.7%

**Target Improvement Goal:** 53.7%

**Priority Outcome Measure or Systemic Factor:** C3.1 Exits to permanency (24 months in care)

**National Standard:** 29.1%

**Baseline Performance:** 13.9%

**Current Performance:** 21.9%

**Target Improvement Goal:** 29.1%

**Priority Outcome Measure or Systemic Factor:** C4.3 Placement stability for youth in care more than 24 months

**National Standard:** 41.8%

**Baseline Performance:** 29.3%

**Current Performance:** 47.5%

**Target Improvement Goal:** Continue to meet or exceed the national goal.

**PROBATION**

**Priority Outcome Measure or Systemic Factor:** C1.1 Reunification within 12 months

**National Standard:** 75.2%

**Baseline Performance:** 33.3%

**Current Performance:** From July 1, 2011 to June 30, 2012, of probation children discharged from foster care to reunification during the year and were discharged within 12 months from the date of the latest removal from the home.

**Target Improvement Goal:** 55%

**Priority Outcome Measure or Systemic Factor:** 4B Least Restrictive placements

**National Standard:** N/A

**Baseline Performance:** 0%

**Current Performance:** From July 1, 2011, to June 30, 2012, out of 9 children in foster care were placed in the least restrictive placement or placed with a relative.

**Target Improvement Goal:** Probation will set a goal of having 50% of children in foster care placed in the care of relatives.

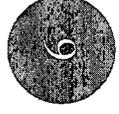
<p><b>Strategy 1:</b> Integrate Safety Organized Practice as the standard for all Child Welfare social work interventions. Incorporate the following practices as part of the model: Coaching, Reflective Practice, Trauma Informed Practice, Motivational Interviewing and Cultural Humility.</p>	<p><input checked="" type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Re-entry following reunification (C1.4), Exits to permanency (C3.1), adoption within 12 months (C2.3) and placement stability (C4.3)</p>
<p><b>Action Steps:</b></p>	<p><b>Timeframe:</b></p>	<p><b>Person Responsible:</b></p>
<p><b>A.</b> All ER staff and supervisors to complete the SOP two-day overview.</p>	<p>September 2013 - January 2014 <u>Completed – Ongoing for new staff</u></p>	<p>Program Manager</p>
<p><b>B.</b> Complete the 12 coaching modules developed by U.C. Davis.</p>	<p>Start no later than January 2014, or as soon as all staff has completed the 2-day overview. <u>Completed – Ongoing for new staff</u></p>	<p>Program Manager identified coaching leader.</p>
<p><b>C.</b> Individual conferences, no less than twice monthly, preferably weekly for coaching follow up on SOP practices (this will include trauma-informed practice, solution focused inquiry and cultural humility components as trainings are completed. All are essential elements for effective SOP practice.)</p>	<p>June 2014 – August 2014 Implemented during timeframe; exploring monitoring of the action steps. <u>Completed</u></p>	<p>Program Manager and Supervisors (additional coach)</p>

<p><b>C.1</b> <u>Develop the Checklist tool and use the tool to evaluate staff performance.</u></p>	<p><u>January 2015 – Completed</u> <u>2016 –</u> <u>2017-</u> <u>2018 -</u></p>	<p><u>SWS's</u></p>
<p><b>D.</b> Supervisors to attend Reflective Practice Training for supervision.</p>	<p>August 2014 – October 2014 <u>Completed</u></p>	<p>Program Manager and Supervisors</p>
<p><b>E.</b> Develop tracking tool for capturing quantitative and qualitative data to evaluate SOP implementation.</p>	<p><u>October 2014</u> Start: <u>January 2016</u> Complete: <u>March 2016</u></p>	<p>Program Manager and Supervisors</p>
<p><b>F.</b> Quarterly meetings to be held to review data captured and provide feedback as to effectiveness of SOP.</p>	<p>October 2014 <u>Completed and ongoing quarterly</u></p>	<p>Child Welfare Administrative Analyst II and Leadership staff</p>
<p><b>G.</b> All ER staff and supervisors to complete one-day trauma informed practice training.</p>	<p>January 2014 – February 2014 <u>Completed – Ongoing for new staff</u></p>	<p>Program Manager</p>

<p><b>H.</b> All ER staff and supervisors to complete one-day solution focused inquiry training.</p>	<p>February 2014 – March 2014 February 2015 – March 2015 <u>Completed and ongoing for new staff</u></p>	<p>Program Manager</p>
<p><b>I.</b> All staff and supervisors to complete one-half-day cultural humility training.</p>	<p>January 2014 – February 2014 <u>Completed – Ongoing for new staff (yearly)</u></p>	<p>Program Manager</p>
<p><b>J.</b> In order to achieve a more effective implementation of SOP, the Department will focus on ER staff and supervisors and concentrate on having all of them fully trained in the relevant strategies. Assuming evaluation shows a positive impact and social work practice is strengthened, the plan for implementation will be repeated in other CWS units.</p>	<p>October 2014 – November 2015 <u>Completed – Ongoing for new staff</u></p>	<p>Program Manager</p>

<p><b>Strategy 2: Full Implement Team Decision Making Model</b></p>	<p><input checked="" type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> All Child Welfare Outcomes</p>
<p><b>Action Steps:</b></p>		
<p><b>A.</b> Conduct TDM for initial placement and prior to all placement changes</p>	<p>On going through 08/01/2018 <u>Completed</u></p>	<p><b>Person Responsible:</b> Child Welfare TDM facilitators, Child Welfare Supervisors, Child Welfare Program Manager</p>

<p><b>B.</b> Develop a monitoring system to ensure that TDM meetings are being held for all children involving placement issues.</p>	<p>On going through 08/01/2018 ETO system being used. Began data entry for May 2015 Completed</p>	<p>Administrative Analyst II, Child Welfare Supervisors, Child Welfare Program Manager</p>
<p><b>C.</b> <u>Extract and Analysis of ETO data</u></p>	<p>Start: 9/2015 Complete: Ongoing</p>	<p>Administrative Analyst II</p>
<p><b>C. D.</b> Quarterly TDM meetings to discuss and address on going practice improvements</p>	<p>08/18/2013—03/30/2014 Start: Q 4, 2015 Complete: Ongoing</p>	<p>Child Welfare TDM facilitators, Child Welfare Supervisors, Child Welfare Program Manager</p>
<p><b>D.E.</b> Training for new staff, community partners, and foster parents on TDM's</p>	<p>On going through 08/01/2018 Completed for foster parents July 2014 and ongoing Completed for new staff and ongoing</p>	<p>Child welfare manager</p>



<p><b>Strategy 3:</b> Madera County will implement wrap around services.</p>	<input checked="" type="checkbox"/> CAPIT	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b>                       Probation: Reunification within 12 months (C1.1) and Lease Restrictive Placement (4B)                      Child Welfare: Re-entry following reunification (C1.4), Exits to permanency (C3.1), adoption within 12 months (C2.3) and placement stability (C4.3)</p>
	<input type="checkbox"/> CBCAP	
<input type="checkbox"/> PSSF		
<input checked="" type="checkbox"/> N/A		
<p><b>Action Steps:</b></p>		<p><b>Timeframe:</b></p>
<p><b>A.</b> Identify key members of the placement committee</p>		<p>August 2013 – October 2013 <u>Completed</u></p>
<p><b>B.</b> Arrange regularly scheduled meetings; placement committee/ wraparound management team</p>		<p>August 2013 – October 2013 <u>Completed</u></p>
<p><b>C.</b> Identify <del>these</del> youth through the IPC process who qualify for wraparound services</p>		<p>September 2014 – January 2015 <u>Completed and ongoing as needed</u></p>
<p><b>D.</b> Placement of 3 probation youth in wraparound services</p>		<p>November 2014 – January 2015 <u>Completed and ongoing as needed</u></p>
		<p><b>Person Responsible:</b></p>
		Madera County Probation, DSS, EMQ Families First, Madera County Behavioral Health
		Madera County Probation, DSS, EMQ Families First, Madera County Behavioral Health
		Placement committee, wraparound management team (includes DSS, Probation, BHS, and EMQ provider)
		Probation Placement Officer, Wraparound Management Team

<p><b>E.</b> Monitor and evaluate placements</p>	<p>October 2014 – ongoing <u>Completed and ongoing</u></p>	<p>Placement committee, wraparound management team and <u>community team</u></p>
<p><b>F.</b> Placement of 2 child welfare youth in wraparound services</p>	<p>October 2014 – December 2014 <u>Completed and ongoing as needed</u></p>	<p>Child Welfare Social Worker, Wraparound Management Team, Placement committee</p>
<p><b>G.</b> Monitor and evaluate placements</p>	<p><del>October 2014</del> – ongoing</p>	<p><del>Placement committee, wraparound management team</del></p>
<p><b>H.</b> Increase slot number to 10</p>	<p><del>January 2016</del> – August 2018 Start: <u>January 2017</u> Complete: <u>January 2018</u></p>	<p>Wraparound Management Team</p>
<p><b>I.</b> Monitor monies accumulated in the Trust Fund and determine appropriate use for the money</p>	<p>October 2014 – Ongoing <u>Completed and ongoing</u></p>	<p>Wraparound Management Team, Stakeholders,</p>



<p><b>J.</b>  <u>Develop a tracking system to track outcomes around re-entry and time to reunification</u></p>	<p><u>Start: January 2016</u>  <u>Complete: January 2018</u></p>	<p><u>Wraparound Program Manager and Administrative Analyst II</u></p>
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<b>Strategy 4:</b> Engage Churches and Community Organizations in recruitment of foster homes and development of foster parent mentors	<input checked="" type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input checked="" type="checkbox"/> PSSF <input type="checkbox"/> N/A	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Probation Reunification within 12 months (C1.1) and Lease Restrictive Placement (4B) Re-entry following reunification (C1.4), Exits to permanency (C3.1), adoption within 12 months (C2.3) and placement stability (C4.3)
	<b>Action Steps</b>	
<b>A.</b> Presentation on foster care and foster adopt at Love Madera community meeting.	10/5/2013 Completed	DSS Foster parent liaison
<b>B.</b> Use Efforts to Outcome for tracking and monitoring of foster homes	January 2016 - Ongoing	DSS Foster parent liaison
<b>C.</b> Establish quarterly meetings with Faith-Based community.	November 2013 -- 03/01/2014 and quarterly thereafter	DSS Foster parent liaison, Child-welfare management team
<b>D.</b> Develop and present outreach materials for foster homes and foster adopt homes to at least 2 community organizations.	October 2013 – March 2014 2014 Completed – Ongoing at least 2 annually 2015 – 2016 – 2017 –	DSS Foster parent liaison

	2018-	
<p><b>E.</b> Identify available tangible support and basic assistance through churches to assist specific needs requested by youth and families.</p>	<p><del>January 2015 – June 2015</del>  <u>Start: January 2016</u>  <u>Complete: June 2016</u></p>	<p>DSS Foster parent liaison, ILP coordinator, Child welfare management team</p>
<p><b>F.</b> Explore evidenced based models of parent mentor programs. Contact at least two counties who currently use foster parent partners/mentors.</p>	<p>December 2014 – December 2015</p>	<p>DSS Foster parent liaison, Child welfare management team</p>
<p><b>G.</b> Develop and present outreach materials for parent and community mentors to at least 3 communities and/or faith based organizations.</p>	<p>December 2015 – December 2016</p>	<p>DSS Foster parent liaison, Child welfare management team</p>
<p><b>H.</b> Identify foster parent mentors</p>	<p>December 2015 – June 2016</p>	<p>DSS Foster parent liaison, Child welfare management team</p>

<p><b>I.</b> Provide training to foster parent mentors to empower them to advocate for families, become change agents for children and gain a voice for children and families.</p>	<p>June 2016 – December 2016</p>	<p>DSS Foster parent liaison, Child welfare management team</p>
<p><b>J.</b> Develop tracking tool for capturing quantitative and qualitative data to evaluate foster Parent Mentor program.</p>	<p>December 2016 – August 2018</p>	<p>DSS Administrative Analyst II</p>

<p><b>Strategy 5:</b> Train social workers, foster parents, court, community partners on permanency and connection</p>	<p><input checked="" type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Exits to permanency (C3.1), adoption within 12 months (C2.3) and placement stability (C4.3)</p>
<p><b>Action Steps:</b></p>		<p><b>Person Responsible:</b></p>
<p><b>A.</b> Research and develop curriculum/materials on permanency and lifelong connections.</p>	<p><b>Timeframe:</b> 01/2014 – 06/30/2014 Completed – curriculum developed</p>	<p>Child Welfare Program Manager and Supervisors, Administrative Analyst II</p>

<p><b>B.</b> Train social workers on permanency</p>	<p>07/2014 – 12/31/2014 Completed – Ongoing for new staff</p>	<p>Child Welfare Program Manager and Supervisors</p>
<p><b>C.</b> Train foster parents on permanency</p>	<p>07/2014 – 12/31/2014 and yearly thereafter <u>2014 - Completed</u> <u>2015 –</u> <u>2016 –</u> <u>2017 –</u> <u>2018 –</u></p>	<p>Foster Parent Liaison</p>
<p><b>D.</b> Train Court (Judge and attorneys) on permanency</p>	<p>January 2015 – December 2015 <u>2014 - Trained attorneys and CASA</u> <u>2015 – explore training for the Judge</u></p>	<p>Court Supervisor</p>
<p><b>E.</b> Train community partners on permanency</p>	<p>January 2015 – December 2015</p>	<p>Child Welfare Program Manager or designee</p>
<p><b>F.</b> <u>Develop a survey for those who attend training to determine if training assisted with increase permanency for children.</u></p>	<p><u>Start: June 2016</u> <u>Complete: December 2016</u></p>	<p><u>Permanency placement SWS, Administrative Analyst II</u></p>

Strategy 6: Develop a Differential Response Protocol Madera County will investigate the advantages of implementing a differential response protocol and develop a plan with local stakeholders to implement differential response if it will serve the needs of CWS and the Madera community.	Applicable Outcome Measure(s) and/or Systemic Factor(s):	
	CAPIT	Child Welfare Re-entry following reunification (C1.4)
	CBCAP	
	PSSF	
N/A		
Action Steps:		Person Responsible:
Timeline:		
A. Conduct a comprehensive literature review on the use of differential response (DR) as part of the CWS response to referrals received.	<input checked="" type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Program Manager, Staff Analyst, FBT
B. Contact at least three other counties that employ a DR protocol. If possible, contact counties with similar size and demographics to Madera County.	<u>January 2015 – March 2015</u> Completed	Program Manager, Staff Analyst, FBT
C. Review practice model employed by other counties using DR to assess if their model would work for Madera County.	<u>March, 2015 – August 2015</u> Completed	Program Manager, Staff Analyst, FBT

<p><b>D.</b> Create summary report regarding findings of research and review</p>	<p><del>September 2015 - November 2015</del> Completed</p>	<p>Program Manager, Staff Analyst, FBT</p>
<p><b>E.</b> Create implementation group to review findings and make decision whether to implement DR</p>	<p><del>November 2015 – December 2015</del> Completed</p>	<p>Program Manager, Staff Analyst, FBT</p>
<p><b>F.</b> Set regular meetings for implementation group to discuss possibility of implementing DR. Meetings should be a minimum of once a month, preferably twice a month. Expectation that group should reach consensus and decision by January 2015.</p>	<p><del>December 2015 – February 2016</del></p>	<p>Program Manager, group members to include community stakeholders and designated ER staff/supervisors</p>
<p><b>G.</b> If decision is to go forward with DR, implementation group will continue meeting to outline the process and establish procedures.</p>	<p><del>February 2016 – April 2016</del></p>	<p>Implementation group</p>

<p><b>H:</b> Program Implementation</p>	<p><del>April 2016 – December 2016</del></p>	<p>Implementation group</p>
<p><b>I:</b> Develop tracking tool for capturing quantitative and qualitative data to evaluate DR:</p>	<p><del>January 2017-December 2018</del></p>	<p>Administrative Analyst II</p>

Strategy 7: Coordinate services with Central Valley Children's Hospital Child Advocacy Clinic	Applicable Outcome Measure(s) and/or Systemic Factor(s): Placement stability (C4.3)	
	<input checked="" type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Timeframes
Action Steps		Person Responsible
<p><b>A.</b> ER will follow the Drug Exposed Children Policy and Procedure to determine the need for services at Central Valley Children's Hospital Child Advocacy Clinic.</p>	<p>August 2013 – August 2018 Completed and ongoing</p>	<p>Emergency Response Staff and Supervisor</p>
<p><b>B.</b> Advocacy Clinic personnel will give individual specialized training to foster parents and social workers as is appropriate with the injury/ circumstance.</p>	<p>August 2013 – Ongoing <u>Completed</u></p>	<p>Child Abuse Advocacy Clinic staff and Child Welfare Supervisors</p>
<p><b>C.</b> The Child Welfare Public Health Nurse will identify and coordinate with Child Advocacy Clinic for abused and neglected children.</p>	<p>August 2013 – August 2018 <u>Completed and ongoing</u></p>	<p>Child Welfare, Public Health Department, and Children's Hospital.</p>
<p><b>D.</b> Utilize Rushmore to ensure that policies and procedures are being followed.</p>	<p>August 2013 – August 2018 <u>Completed and ongoing</u></p>	<p>DSS Program Manager and Child Welfare Supervisors</p>

<p><b>Strategy 8:</b> Improve and increase access to mental health services for families who are impacted by child abuse or neglect and for youth ages 6 – 18.</p>	<p><input checked="" type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input checked="" type="checkbox"/> PSSF <input type="checkbox"/> N/A</p>	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Re-entry following reunification (C1.4), Exits to permanency (C3.1), adoption within 12 months (C2.3) and placement stability (C4.3)</p>
<p><b>Action Steps:</b></p>		<p><b>Person Responsible:</b></p>
<p><b>Timeframe:</b></p>		
<p><b>A.</b> The Departments of Behavioral Health (DBH) and the Department of Social Services, Child Welfare (DSS) will identify children/youth (children) currently meeting subclass criteria and those at risk of subclass criteria (Katie A).</p>	<p>August 2013 – January 2014 Completed</p>	<p>Behavioral Health and Child Welfare Staff</p>
<p><b>B.</b> Select and Formalize a screening process for class and subclass children. (Katie A).</p>	<p>January 2014 – February 2014 Completed</p>	<p>Behavioral Health and Child Welfare Staff</p>
<p><b>C.</b> Train staff on screening tool and process. (Katie A)</p>	<p>March 2014 Completed</p>	<p>Child Welfare Supervisors</p>
<p><b>D.</b> Identify preventative resources within mental health services for children ages 6 – 18.</p>	<p>March 2014 – June 2014 Completed</p>	<p>Behavioral Health and Child Welfare Staff</p>

<p>E. Identify service providers for in-patient treatment facilities for families who are impacted by child abuse or neglect and for youth ages 6 – 18.</p>	<p>January 2015 – June 2015 <u>Completed and ongoing</u></p>	<p>Stakeholders/DSS and Child Welfare Management</p>
<p>F.. Utilize quarterly meetings between Behavioral Health and DSS to review data in regards to Katie A and discuss/address implementation issues. In addition, discuss how to meet the needs of youth ages 6 – 18.</p>	<p>January 2014 - August 2018 2014 – Meeting weekly 2015 – <u>Monthly</u> 2016 – 2017 – 2018 –</p>	<p>Behavioral Health and Child Welfare Staff</p>

<p><b>Strategy 1: Probation</b></p> <p>Utilize Reunification Training for the probation placement officer and placement supervisor to enhance staff's ability to identify the youth's needs and readiness to return home and be maintained in a stable home environment and avoid re-entry into the foster care system.</p>	<p><input checked="" type="checkbox"/> CAPIT</p> <p><input type="checkbox"/> CBCAP</p> <p><input type="checkbox"/> PSSF</p> <p><input checked="" type="checkbox"/> N/A</p>	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b></p> <p>Reunification within 12 months (C1.1)</p>
<p><b>Action Steps</b></p>	<p><b>Timeframe:</b></p>	<p><b>Person Responsible:</b></p>
<p><b>A.</b> Staff will attend training specific to Reunification to assist in identifying the needs of the youth and family.</p>	<p>September 2013 and August 2018 - as becomes available</p>	<p>Probation Officers, Seniors and Supervisors</p>
<p><b>B.</b> The probation officer will develop a case plan with the family and the youth that includes concurrent planning for the youth's permanency should Reunification efforts fail.</p>	<p>October 2013 -- August 2018</p>	<p>Probation Officers</p>
<p><b>C.</b> Implement reunification focused program activities(meeting with parent and minor regularly, following case plan needs, referrals to</p>	<p>August 2013 and August 2018</p>	<p>Probation Officers, Seniors and Supervisors</p>

<p>services needed, home visits, and home evaluations) to reunite youth with their families and decrease continued juvenile offenses, prevent, replacement outside the home, and support the family to maintain long-term stability.</p>		
<p><b>D.</b> The placement officer will refer minor and family to parenting programs such as Staying Connected with Your Teen, Strengthening Families and Triple P (Positive Parenting Program.)</p>	<p>August 2013 – August 2018</p>	<p>Probation Officers</p>

<b>Strategy 2:</b> Probation Staff will engage youth and their families early on to develop case plan activities that will assist in identifying the needs of the youth and their family.	<input checked="" type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b>  Lease Restrictive Placement (4B)
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
<b>A.</b> With the use of motivational interviewing and review of the juvenile assessment completed by the probation officer at time of disposition, the probation officer will develop a case plan with the minor and the family to identify the needs of the minor /family and develop action steps to effect youth's behavioral changes.	August 2013 – August 2018	Probation officers, seniors and Supervisors
<b>B.</b> The probation officer will meet monthly with the parent to ensure understanding of case plan goals and ensure referral to proper services.	August 2013 – August 2018	Probation officers

<p>C. Utilize Motivational Interviewing Practices to enhance communication between staff and youth and their families to promote positive behavioral changes.</p>	<p>August 2013 – August 2018</p>	<p>Probation officers, seniors and Supervisors</p>
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