

August 26, 2019

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

EXECUTIVE SUMMARY

ALL COUNTY LETTER NO. 19-87

The purpose of this ACL is to reiterate and clarify the expectations of social workers and probation officers for completing monthly visits with children in out of home placement. This ACL builds upon previous ACL's and ACIN's regarding caseworker visits and integrates the use and value of the state's Integrated Core Practice Model to support the continued quality improvement needed in this area of services.



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DEPARTMENT OF SOCIAL SERVICES
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GAVIN NEWSOM
GOVERNOR

August 26, 2019

ALL COUNTY LETTER NO. 19-87

TO: ALL COUNTY WELFARE DIRECTORS
ALL CHIEF PROBATION OFFICERS
ALL CHILD WELFARE SERVICES PROGRAM MANAGERS
ALL FOSTER FAMILY AGENCY DIRECTORS
ALL TITLE IV-E AGREEMENT TRIBES
ALL CDSS ADOPTION REGIONAL OFFICES

SUBJECT: QUALITY CASEWORKER VISITS AND THE APPLICATION OF
INTEGRATED CORE PRACTICE MODEL

REFERENCE: Child and Family Services Improvement Act of 2006 ([PUBLIC LAW \(PL\) 109-288](#)), Preventing Sex Trafficking and Strengthening Families Act ([PL 113-183](#)); [Adoption and Safe Families ACT \(ASFA\)](#) (PL 105-89); ASSEMBLY BILL (AB) 636 (CHAPTER 678, STATUTES OF 2001); [SENATE BILL \(SB\) 703 \(CHAPTER 583, STATUTES OF 2007](#), [SB 794 \(Chapter 425, Statutes of 2015\)](#); [SB 342](#) (Chapter 492 OF 2013); WELFARE AND INSTITUTIONS CODE (WIC) SECTIONS [366](#), [366.21](#), [366.22](#), [366.26](#), [366.3](#), [366.31](#), [706.5](#), [706.6](#), [727.2](#), [727.3](#), [16501](#), [16501.1](#), [16501.35](#), [16501.45](#), [16516.6](#), [16519.51](#), and [16501.45](#); MANUAL OF POLICY AND PROCEDURES [31-320](#), [31-320.5](#), [31-320.58](#), [31-320.711](#) ALL COUNTY LETTER (ACL) [09-11](#), [10-19](#), [11-18](#), [14-50](#), [16-15](#), [16-28](#), [18-09](#) and [18-100](#); ALL COUNTY INFORMATION NOTICE (ACIN) [I-34-07](#), [I-23-04](#), [I-13-17](#), [I-21-18](#)

Purpose

The purpose of this letter is to support counties in the implementation of quality caseworker visits with children, youth and nonminor dependents (NMDs). This letter seeks to reinforce the principles and elements of the California Integrated Core Practice

Model (ICPM) in support of effective caseworker visitation practices, delivery of trauma informed services, and to bridge regulations and mandates in law and quality practice for caseworkers. This ACL supersedes previous practice guidance given in ACLs [10-19](#), [11-18](#) and [13-13](#).

Utilizing the Integrated Core Practice Model (ICPM) to Improve the Quality of Caseworker Visits

On May 18, 2018, the California Department of Social Services (CDSS) in conjunction with the Department of Health Care Services released “The California Integrated Core Practice Model (ICPM) for Children, Youth, and Families Guide” via [ACIN I-21-18](#). This guide provides practical guidance and direction to support county child welfare, juvenile probation, and behavioral health agencies to improve delivery of timely, effective, and integrated services to children, youth, and families. The ICPM is a compilation of the Pathways to Mental Health Services: Core Practice Model and the California’s Child Welfare Core Practice Model. ICPM is a framework that the state has agreed to implement in conjunction with all 58 counties. The model has six key practice components which form the basis of collaborative work with children, youth, and families involved with child welfare and probation. These key practice components are engagement, assessment, teaming, service planning and delivery, monitoring and adapting, and transitioning. The thoughtful and planned use of these practice elements, and the guiding principles which form their theoretical base, will help to improve the quality of caseworker visits and enhance caseworker capacity for engagement and healing when they are used as foundational behaviors for all professionals working with children, youth, NMDs and their families.

While this letter contains ICPM derived guidance, the ICPM Guide itself is far more comprehensive in its practice content, and county staff are encouraged to consult it as part of their implementation of this letter’s guidance.

Caseworker Visits, ICPM Components and Practice Behaviors

The Manual of Policies and Procedures (MPP) [Division 31 Section 320](#) outlines for social workers and probation officers the frequency and location for caseworker visits with a child/youth in Family Maintenance or Out of Home Placement, including NMDs in extended foster care. While federal and state law establish the minimum visitation with a child/youth/NMD is once a month, the caseworker should arrange visitation with the child/youth/NMD as often as is determined in the child/youth/NMD case plan. Caseworker visits are, first and foremost, opportunities to engage, listen, communicate understanding of need, assess for and monitor services, that are individualized, culturally relevant, family-based and community-based.

1. **Engagement-** Caseworker visits provide multiple opportunities to engage families. Engagement is an ongoing relational process that should be intentional through the life of the case and includes a range of activities, behaviors, and style of interaction that create an effective working alliance for change.

ICPM Practice Behaviors which may be most helpful in developing engagement will include:

- Provide opportunities for the child/youth/NMD to share, in a private space, regarding their thoughts on their cultural identification, interest and needs
- Provide opportunities for families to actively share perspectives, needs and goals which will be taken into consideration in future planning
- Demonstrate active listening with the child, youth, NMD, family and/or caregivers
- Express empathy and understanding of the youth and family's trauma and loss, and the belief that all families have the capacity to safely care for their children in spite of that trauma
- Ask questions early and often about relationships and significant others
- Further work with the child/youth/NMD and family and their team, to discover and honor family cultural norms and needs

Tools that can be used to support engagement include:

- Safety Organized Practice (SOP) tools and strategies such as the Three Questions, Three Houses, Safety House, solution-focused questioning, safety mapping, appreciative inquiry and network of support tools such as Circles of Support, ecomaps and genograms ([CalSWEC](#))([SOP/CPM](#))
- The Child and Adolescent Needs and Strengths (CANS) to assist with beginning or aligning communication about the child's strengths and needs
- Motivational Interviewing – an evidenced based approach to engaging and aligning client interests
- [Foster Youth Rights](#) and [Foster Youth Mental Health Bill of Rights](#)

2. **Assessment-** Caseworker visits allow for both formal initial and informal continuous processes of assessment. Closely tied to engagement, effective assessment allows the caseworker to understand the past experiences of child/youth and family, including their current priority needs and the strengths that have helped them to survive or thrive in the past. Part of an effective assessment practice is seeing the child/youth/NMD in their foster home/placement with the priority of assessing for their safety. The majority of all monthly caseworker visits must occur in the child/youth/NMD placement and no more than two consecutive visits can occur outside the home. ([ACL 14-50](#))

ICPM Practice Behaviors which may be most useful in support of assessment activity include:

- Early and frequent explanation of the assessment process to the child/youth/NMD and family, so they know what to expect
- Check in early and often to be sure they understand the purpose of inquiry
- Explain, in understandable terms, how assessment for safety and well-being is done
- Check in with youth and caregiver to verify their understanding of the Child and Family Team (CFT) meeting outcomes and the resultant Case Plan.
- Check in with youth and family about needs that may not have been identified in the team meetings
- Provide opportunities to identify and discuss child/youth/NMD and family's strengths that can be used in case planning and future planning
- Discuss the CANS assessment and how it will be reviewed during the CFT meeting and that the team will come to a consensus about the needs and strengths
- Review the Ages and Stages Questionnaire (ASQ) to determine if the child/youth is meeting their developmental milestones
 - For child ages birth to 36 months, ask the caregiver about an Individualized Family Service Plan (IFSP) with the regional center, or any developmental needs, including the child's social-emotional needs
- For child/youth/NMD ages 36 months and older, ask the child and/or caregiver about any Individualized Education Plan (IEP) or educational needs, developmental needs, including any Regional Center Individualized Program Plan (IPP), and the child's specific interests or needs (i.e. extracurricular activities, sporting events, or toys or video games they enjoy or use)
- Follow up on identified behavior health needs, regional center needs educational needs, and physical needs
- Clarify the educational rights holder and assess educational needs, potential for special educational services such as an Individual Educational Plan
- For children/youth eligible for regional center services, clarify the developmental services decision maker and assess developmental needs
- Provide consistent and ongoing concurrent planning activities which constitute intentional efforts on at least two permanency options for every child/youth/NMD ([WIC 16501.1\(10\)](#))
 - Another Planned Permanent Living Arrangement (APPLA) is a continuation of concurrent planning and is an option for youth who are **16 and older and NMDs**. APPLA is any permanent plan for a youth in an out-of-home foster care placement, in which a youth

may remain until adulthood, when the options to return home, place with a relative, place for adoption, tribal customary adoption, or legal guardianship have been ruled out ([ACL 16-28](#)).

Tools used when working with children/youth should use the family's cultural lens, and empower and amplify the voices of children, youth and their caregivers. Tools which support assessment include:

- Safety Organized Practice (SOP) tools and strategies
 - The CANS - which forms the backbone of the youth and family's strengths and needs identification and the ongoing service plan
 - It is the primary vehicle for identifying the Child and Family Team's agreements about plans and interventions
 - Other formal assessments such as [Structured Decision Making](#) (SDM), risk and safety assessments, specialized mental or behavioral health assessments, Substance Use Disorder tools, and the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire-Social- Emotional (ASQ-SE)
3. **Teaming** – Caseworker visits are opportunities to build connections to the Child and Family Team and to demonstrate for the youth and family that they are not alone in addressing their needs and challenges. Visits are occasions for further exploration of the family's story and a chance for the caseworker to empathize, express professional vulnerability and humility and further communicate an understanding of the child/youth/NMD and family member's strengths, self-identified needs, culture, and vision for the future.

ICPM Practice Behaviors that support teaming during a Caseworker visit might include:

- Engage the youth and caregiver in planning and decision-making.
- Demonstrate authentic openness as to the voice and choice of the child/youth/NMD and family
- Explore with child/youth/NMD and family how they can and are strengthening child safety and permanence
- Create opportunities to encourage the child/youth/NMD and family to share their story and their goals
- Actively facilitate the sharing of information among family members and all service providers
- Identify and utilize the family's cultural strengths and resources to enhance the CFT created and behaviorally based case plan
- Continue to explore how persons with natural and informal relationships can support the family

Tools that can be used when working with children/youth/NMD that support teaming include:

- Case Plan/Services Plan/TILP
- CFT Meeting Minutes/Safety Plans
- CANS and other assessment tools

4. **Initial Service Planning and Delivery** – Caseworker visits are a component of service planning and provide an opportunity to genuinely communicate that children, youth, and family members are consistently heard, the needs chosen for initial focus in the plan are ones the family members want to work on (in addition to any that are necessary for successful reunification, legally mandated through the case plan and/or identified as urgent in the CANS process), and that the interventions or other activities selected by the CFT have a reasonable chance of helping them meet these needs.

ICPM Practice Behaviors that support service planning and delivery during a casework visit include:

- Inquire regularly as to the family members basic needs (i.e. food, shelter, and medication) so they can focus on addressing the problems underlying their involvement with the child welfare or probation agency
- Share information about agency programs, providers, resources, and supports
- Work with the family to identify culturally relevant community-based supports and services
 - Interpretive services and accessibility services when helpful or court mandated
- Check in with families to ensure they understand and agree with the case plan goals
- Emphasize reliance on informal supports and resources while planning intervention strategies
- Encourage participation in activities and resources that can be used by anyone in the community
- Have on-going dialogue with the child/youth/NMD regarding plans for permanency, including:
 - continual family-finding efforts
 - assessment of appropriate family members
 - identifying and supporting family connections for every child/youth/NMD
- Have on-going dialogue with the caregiver regarding areas of success and needs of the youth that the caregiver sees in the home and in social settings

- Inquire as to the family members support for and engagement in education process, including review of current grades, if the Individual Learning Plan (IEP) is being implemented and if it is effective
- Identify if there are pending disciplinary issues or other concern related to academic progress
- Confirm who holds education rights for the child/youth and discuss if the education rights holder is accessible and involved; If they are not known or they are uninvolved, discuss with the child/youth who might be appropriate to appoint as the education right holder
- When applicable, confirm who holds right to make developmental services decisions for the child/youth/NMD and discuss if the individual is accessible and involved; If they are not known or they are uninvolved, discuss with the child/youth/NMD who might be appropriate to appoint as the developmental services decision maker

5. **Monitoring and Adapting** – One of the primary purposes of a caseworker visit is to monitor and explore needed adaptation of the child/youth/NMD and family's individualized plan. The ICPM suggests that throughout the case CFT team members work together to ensure that the integrated plan provides access to needed services and monitors the child/youth/NMD and family's progress towards safety, permanency and well-being.

ICPM monitoring and adapting Practice Behaviors that are useful during visits include:

- Listen to the child/youth/NMD and family in order to continually assess progress toward goals, and decisions made by the family and their team.
- Listen intentionally and inquire about what the family's needs and/or what needs to adjust in their plan or with their services
- If progress has not been made, assure the youth and family failure may be part of the process and that adjustments can be made to the plan that may help them be successful
- Offer to convene a CFT meeting if necessary to mobilize the team's resources in amending the service plan, address new needs or eliminate barriers.
- Follow up on identified behavior health needs and/or educational needs. Monitor services for effectiveness.

Tools that can be useful in monitoring and adapting include:

- Case Plan
- Current safety plan
- CFT Meeting Minutes
- SDM Tools
- CANS and other assessment tools

- Educational plans including the IEP
- SOP mapping process and the Three Questions

6. **Transition-** The caseworker visit is an opportunity to assure that progress is being made toward any planned or necessary transitions and that care is being coordinated by all team members. The visit may include meeting not only with the youth and caregiver, but also informal advocates and natural supports, to assure that they are actively and prospectively involved.

A particular focus of the visit should be around the youth's educational, medical and behavior health needs and assessing the effectiveness of current services, supports, and interventions, in working toward family reunification, another permanent plan or case closure.

Emphasize with child/youth/NMD, family and their natural supports that services are not closed until the transition plan has been implemented and all necessary connections for the future have been made.

ICPM Practice Behaviors in support of transition and care coordination might include:

- Inquire about the consistency and effectiveness of any specialized mental health, developmental, or educational services
- Offer resources and supports to assure access to those interventions if needed
- If in FR, discuss what it will look like if the child/youth will return home, and how the child/youth and family can sustain the gains they made with their natural support system
- Coordinate with the family's formal and informal advocates to help the family find solutions and provide on-going community-based and culturally-relevant supports after the child welfare agency is no longer involved
- Identify if other types or forms of transition are needed or being considered, such as stepping down to a lower level of care, going on extended visitation with family members, changing schools or changing services and coordination of mental health services

Tools to use when preparing for transition when working with children/youth:

- SOP tools and strategies
- Needs and Services or Case Plan
- CANS - ensure that the high needs areas are being addressed, so that a transition plan can be most effective

- Refer to ACL [18-100](#) for Specialized Permanency Services and specific requirements when permanency includes adoption, legal guardianship, or APPLA

Visitation Requirements According to Current Regulations

The Manual of Policies and Procedures (MPP) [Division 31 Section 320](#) outlines mandates for social workers and probation officers pertaining to visiting children/youth in Family Maintenance or Out of Home Placement, including NMDs in extended foster care. Current law requires all children in foster care and under the jurisdiction of the court to be visited monthly, and a majority of those visits must occur in the child's residence. The regulations apply to **all youth** under a county's jurisdiction. These are the minimum requirements to meet federal and state mandates. The ICPM provides guidance about how these minimum standards can be met in the most effective, individualized, family-centered manner possible.

[Division 31-320](#) mandates the following regarding **caseworker contacts with the child/youth/NMDs:**

- The caseworker shall arrange for visitation, as determined in the child's case plan for each child
- The caseworker shall visit the child at least three times in the first 30 calendar days, including the initial in-person response
- The caseworker shall visit the child at least once each calendar month
- The majority of the visits with the child in each calendar month shall take place in the child's foster home/placement
- No more than two consecutive visits can occur outside the child's placement and reason for not visiting in placement must be documented in the case note and court report ([WIC 16516.5\(b\)](#) and [16516.6\(b\)](#))
- If the child is placed in a group home, whether in-state or out-of-state, or a community treatment facility, the caseworker shall visit the child at least once each calendar month, with at least a two-week time frame between visits and document the visit in the child's case plan

[Division 31-320.5](#) outlines the **purpose of caseworker visits with the child/youth.**

The purpose of the caseworker visit is to assess the safety and well-being of the child and achieve the following objectives:

- Verify the location of the child;
- Monitor the child's physical, emotional, social, and educational development;
- To the extent it is possible, engage and involve the child and caregiver in the development of the case plan;

- Gather information about the child to identify needed services to be included in the case plan and monitor the effectiveness of those services provided to meet the child's needs;
- Ensure the child is able to maintain relationship with siblings, relatives and adults who are important to the child;
- Assist the child in preserving and maintaining religious and ethnic identity;
- Establish and maintain a helping relationship between social worker/probation officer and child to provide continuity and a stability point for the child;
- Solicit the child's input on his/her future and to inform the child as to current and future placement plans and progress and discuss these plans and progress with the child; and
- Evaluate and assess the child's educational needs and progress and the potential need for special educational services such as an Individual Educational Plan.

Caseworker Visit Requirements regarding Youth Missing from Care

Caseworkers are still accountable for visiting or attempting to visit children/youth if they are missing from their placement. In accordance with CDSS Manual of Policy and Procedures, Division 31-320, [ACL 16-15](#), and [ACIN I-13-17](#) the assigned caseworker must attempt to locate a child/youth whose whereabouts are unknown and document location efforts in CMS/CWS. Location efforts should also be documented in each status review report filed during a child/youth's absence. Efforts to locate a missing child/youth should include, but are not limited to:

- Contact significant persons in a child's life
- Physically check all places, the child is likely to be
- Follow up on leads received regarding the child's whereabouts
- Conduct visits to relevant addresses or requesting a welfare check by a law enforcement agency, when possible available
- Consult with or refer to internal Runaway/Missing Children Liaisons
- Search social media websites (if authorized) and search public locator databases
- If a youth is located but unwilling to immediately return to care, consider holding a CFT to discuss ways to support the youth during their absence and create a plan for return when the youth is ready

When a dependent child is found, it is the responsibility of the caseworker to arrange for the return of the child to care. When a child returns to placement, the assigned caseworker should utilize engagement and assessment strategies to identify what prompted the child's absence, assess for and address any additional trauma that occurred while missing from care, and identify opportunities to enhance the child's well-

being and resilience. A helpful tool to use when a child/youth is located and returned to care is the [Missing/Runaway Youth Debriefing Form](#). While the caseworker visit should happen as soon as possible, and no more than three business days after the child returns to care, the caseworker should be mindful of allowing the child time and space to decompress and stabilize following their time away. A debriefing interview should ideally be conducted by an adult of the youth's choosing, whenever possible. However, when the interview is not conducted by the SW/PO, all information obtained should be shared with the SW/PO, to ensure that information collected is consistent with the formal debriefing information.

Summary

The mandates for caseworker visits by social workers and probation officers have been outlined here using the ICPM model to demonstrate how these requirements should be accomplished in a dynamic, trauma informed, and purposeful way. Implementing the six key elements of ICPM, living ICPM principles in the work, and other best practices enriches and supports the relationship between caseworkers and family members and/or caregivers to support the healing of family trauma and propel the family towards better, measurable outcomes.

The following attachments are included to further support social workers and probation officers. ATTACHMENT B is an **example** of how caseworker visits can be documented. The template is meant to be used as a guide, it should be changed to meet each counties' needs and to reflect the use of CANS and/or SOP practices. ATTACHMENT C provides in-depth background on quality caseworker visits with child/youth and current requirements. These requirements can be done in such a way that highlight the caseworker's relationship with child/youth, their families and connections.

If you have any questions or need additional guidance regarding the information in this letter, contact the Permanency Policy Bureau at (916) 657-1858 or at ConcurrentPlanningPolicyUnit@dss.ca.gov. If you have questions regarding information on CANS and CFT's please contact CWScoordination@dss.ca.gov.

Sincerely,

GREGORY E. ROSE
Deputy Director
Children and Family Services Division

All County Letter No. 19-87
Page Twelve

c: County Welfare Directors Association
Chief Probation Officers of California
Judicial Council of California

ATTACHMENTS:

Attachment A – Case Note Documentation According to Division 31

Attachment B – Sample Caseworker Visit with Foster Youth Contact Template (this is only an example. Counties can change in accordance with their needs).

Attachment C – Timeline of Legislative Mandates for Quality Caseworker Visits

ATTACHMENT A:

Case Note Documentation Consistent with DIVISION 31

Topics to discuss and document during a caseworker visit in accordance with [Division 31-320](#). ***The following topics should be clearly documented in case contact notes and regularly addressed through the life of a case.***

Areas of focus for interactions with Foster Children and Non-Minor Dependents:

- Case planning discussion – regular updates provided to the youth regarding placement, next steps, and timelines.
 - Ongoing dialogue in regularly scheduled Child Family Team Meetings
- Continued assessment of safety in the child/youth's placement, on visits with the parents, and with others in the home.
- Assessment of suitability and sustainability in the foster home/with the foster parent/with others in the home.
- What assessment was used and what were the results of the assessments.
- Was there follow up from last visit (what things did caseworker say they were going to follow up on, etc.)
- How the child/youth's services are addressing their needs from the child/youth's and care takers perspective?
 - Collateral contacts should be documented in CMS/CWS and narratives of interactions should be thorough.
- Inquire about who is important to the child/youth (prior to entry into care) and whether the child/youth is connected to those individuals.
- Other siblings in care -if not in the same home, contact and visitation should be documented.
- On-going family finding efforts.
- Assessing relatives that child could be placed with or at the very least visit or call on a regular basis.
- Check in regarding effectiveness of family visits – what would make them better, does child/youth need or want something different for visits, etc.
- Well-being: education, physical health, dental, mental health (check in with child/youth and care takers)

ATTACHMENT B:

SAMPLE Caseworker Visit with Foster Youth Contact Template

Visit Date:

Child/Youth/NMD Visited:

Did you meet in private with the Child/Youth/NMD? ☐ Yes ☐ No
If no, why and who else was present? _____

Where did the visit take place: ☐ Home ☐ Caregiver Home ☐ STRTP ☐ Other _____

ICWA Status:

Permanency Goal:

Concurrent Plan:

Top priorities from previous visit:

A:

B:

C:

Topics to talk about with Child/Youth/NMD

For each topic area, address worries/needs, working well/strengths and next steps

Placement Environment

Changes in family relationships-New staff members-New roommates/housemates- Access to culturally relevant activities-Traditions and rituals-Changes in routine-Chores-Responsibilities – Allowance–ILP Skills–Extracurricular activities

Safety and Supervision in Placement

Environmental safety concerns - Safety assessment outcomes - Recent disciplinary actions - Adequate supervision – recent outings

Child/Youth Behaviors

Change in behavior-Decrease in trauma drive/challenging behavior-Risk behaviors-Increase in positive behavior-Decision making skills-Service provider notes to follow up on-Incident reports

School/Education

School attendance-Academic Performance-Social interactions at school-Teacher concerns to follow up on-Educational support needs-IEP follow up

Behavioral/Emotional, Physical and Mental Status

Medical/physical needs-Medication compliance-Next scheduled medical and dental appointment-Current mood-Sleep habits-Therapeutic services involved or needed-substance use concerns-talents/interests

Family Visits/Connections and Current Family Finding Efforts

How was last visit with parents, siblings or other family members-Where did the visit occur-When is the next visit scheduled-Does child/youth/NMD like the location and frequency of visits- Who else would the child/youth/NMD like to visit-Current Family Finding Efforts-New Family Connections

Case Plan Updates

Next Hearing-Next CFT- Is permanency plan still appropriate-Child/Youth/NMD still onboard with services and goals-TILP goals reviewed/updated

Caregiver/Staff Thoughts, Worries/Needs, Working Well/Strengths/Resources

Caregiver/Staff reflections on the child/youth/NMD

Action Steps – Areas to follow up on

A:

B:

C:

ATTACHMENT C:

TIMELINE OF LEGISLATIVE MANDATES FOR QUALITY CASEWORKER VISITS:

Welfare and Institutions Code Section 10601.2 is the result of passing the Child Welfare System Improvement and Accountability Act of 2001 (Chapter 678, Statutes of 2001 (AB 636)) Section 3. The Act was passed to improve protection and care for children removed from their homes due to parental abuse and/or neglect. The legislation declared that the child welfare system, including the state, the counties, and the courts, suffered from the lack of a cohesive structure, state leadership, communication between agencies serving foster children and youth, and clear goals. Prior to the passing of the Act, there was no statewide accountability system for child and family outcomes.

Welfare and Institutions [CODE 10601.2](#) requires the following

- The State Department of Social Services shall establish, by April 1, 2003, the *California Child and Family Service Review System* to review all county child welfare systems. These reviews shall cover child protective services, foster care, adoption, family preservation, family support, and independent living.
- The state department shall *collaborate* with multiple state departments, including the Department of Health Care Services, Department of Mental Health, the Department of Education, Department of Justice, any other state departments or agencies the California Health and Human Services Agency deems necessary, the County Welfare Directors Association, the California State Association of Counties, the Chief Probation Officers of California, the California Youth Connection, and representatives of California Tribes, interested child advocacy organizations, researchers, and foster parent organizations.
- The State Department of Social Services **shall identify and promote the replication of best practices in child welfare service delivery** to achieve the measurable outcomes established by the C-CFSR. These outcomes include monthly caseworker visits.

The [Child and Family Services Improvement Act of 2006](#), Public Law 109-288 120 Stat.1233 Section 7 put into action federal requirements for social workers and probation officers (hereinafter known as the “caseworker”) to conduct at minimum, monthly contact with children and youth under their jurisdiction. The passing of this Act and subsequent passing of [SB 703](#) (Chapter 583, Statutes of 2007) Section 30 supports the premise that frequent caseworker visits with foster children and positive outcomes for these children, such as timely achievement of permanency and other indicators of child welfare. This Act also established enforcement standards and penalties associated with non-compliance of caseworker visitation requirements.

The [Welfare and Institutions Code \(WIC\) section 16501.1](#), in part, outlines the purpose of the case plan, the use of child and family team meetings, case management requirements for caseworkers, highlights achieving permanency for youth. Subdivision (l) clearly states the requirements for caseworker visitation:

Each county shall ensure that the total number of visits made by caseworkers on a **monthly basis** to children in foster care during a federal fiscal year is **not less than 95 percent** of the total number of those visits that would occur if each child were visited once every month while in care and that the **majority of the visits occur in the residence of the child**.

[WIC Section 16516.6](#), as amended by [SB 342](#) (Chapter 492, Statutes of 2013) Section 2, address where monthly visits with children placed in out of home care can occur as follows:

The location of monthly visits for each foster child who is placed in a licensed, certified, or approved foster home by a county welfare department or a county probation department shall comply with federal requirements as described in Section 624(f)(2)(A) of Title 42 of the United States Code. **No more than two consecutive monthly visits may be held outside the residence of the foster child.**

If the visit does not occur in the place of residence, the social worker or probation officer shall document in the case file and in the court report the location of the visit and the reason for the visit occurring outside the place of residence.

[WIC Section 16516.5 \(a\) as amended but Stats 1982, Ch.978, Sec.33](#) addresses visits regarding children who are placed in group homes as follows.

Notwithstanding any other law or regulation, all foster children who are placed in group homes by county welfare departments or county probation departments shall be visited at least monthly by a county social worker or probation officer. Each monthly visit shall include a private discussion between the foster child and the county social worker or probation officer. The private discussion shall not be held in the presence or immediate vicinity of the group home staff. The social worker or probation officer shall advise the foster child that he or she has the right to request that the private discussion occur outside the group home. If a foster child requests to have the private discussion outside the group home, that private discussion shall not replace the visit in the group home. However, the social worker or probation officer shall not be required to schedule an additional visit to accommodate the request.