

December 30, 2021

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**EXECUTIVE SUMMARY**

**ALL COUNTY LETTER NO. 22-02**

This letter addresses the \$50 million of state general funds appropriated in the State Budget Act of 2021 to enhance child welfare Emergency Response services. This letter provides information on county allocations, allowable funding uses, the county opt-in and opt-out process, and reporting requirements.



KIM JOHNSON  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



GAVIN NEWSOM  
GOVERNOR

December 30, 2021

ALL COUNTY LETTER NO. 22-02

TO: ALL COUNTY WELFARE DIRECTORS  
ALL EMERGENCY RESPONSE SERVICES STAFF  
ALL EMERGENCY RESPONSE SUPERVISORS  
ALL COUNTY WELFARE FISCAL OFFICERS  
ALL COUNTY CHILD WELFARE SERVICES PROGRAM  
MANAGERS

SUBJECT: **CHILD WELFARE SERVICES EMERGENCY RESPONSE  
ENHANCEMENT FUNDS**

REFERENCE: [WELFARE AND INSTITUTIONS CODE \(WIC\) SECTION 16501\(f\);](#)  
[ALL COUNTY LETTER NO. 17-107; THE BUDGET ACT OF 2021;](#)  
[SENATE BILL \(SB\) 170 \(CHAPTER 240, STATUTES OF 2021\);](#)  
[CHILD WELFARE SERVICES MANUAL OF POLICIES AND](#)  
[PROCEDURES \(MPP\) DIVISION 31-015](#)

The purpose of this All County Letter (ACL) is to provide instructions to counties regarding the \$50 million of state general funds appropriated in the state Budget Act of 2021 to increase the number of child welfare social workers in Emergency Response (ER) services and enhance existing ER child welfare services (CWS). This ACL provides information on county allocations, allowable uses of funding, the county opt-in and opt-out process, and reporting requirements.

## **BACKGROUND**

The [Budget Act of 2021](#) appropriated \$50 million of state general funds for the purpose of enhancing a county CWS agency's existing ER services, resulting in a net increase of staff for hotline and investigation functions. These funds are available for encumbrance or expenditure until June 30, 2025.

County ER programs experience a high workload volume that is often very complex. With the heightened stress and constraints families experienced during the COVID-19 pandemic, the county CWS workforce faced with many new challenges. Schools were shut down and businesses were closed, leaving many families and children vulnerable.

Children were seen less often by mandated reporters and county CWS hotlines saw a decline in call volume.

As schools and other services began reopening, it was expected that counties would experience a slight increase in the number of calls coming into their hotlines. The heightened stress and trauma experienced by some families may also lead to more complex concerns, which, in turn may increase social worker workloads. Additional workload support is warranted given these increased needs. Additional funding is available to support ER programs at the local level by increasing the number of ER county staff, as well as supporting counties with reducing staff turnover and strengthening ER investigations.

### **CHILD WELFARE SERVICES ER ENHANCEMENT FUNDS PROGRAM**

In accordance with [Provision 39 of Section 116 of SB 170](#), the intent for the funding is to increase the number of child welfare social workers in emergency response and enhance a county CWS agency's existing ER program. Emergency response services, as defined in [Welfare and Institutions Code section 16501\(f\)](#), consist of the response system providing in-person response, 24 hours a day, seven days a week, to reports of child abuse, neglect, or exploitation, for the purpose of investigation and to determine the necessity for providing initial intake services and crisis intervention to maintain the child safely in their own home or to protect the safety of the child. In addition to using funds to increase the number of ER social workers, counties may also use this funding to increase supervisory and support staff, which make vital contributions to the ER workforce.

The funding will enhance the ER workforce by increasing the number of ER staff and strengthening supervisory activities, which will support better quality investigations and improve outcomes for the children and families served. Allowable uses that will result in a net increase in the ER workforce, improve retention, and/or improve the effectiveness and efficiency of a county's ER services include, but are not limited to, the following:

- Hire additional ER social workers;
- Hire additional ER supervisors or other ER support staff;
- Fund staffing and supportive services to conduct prevention Child and Family Teams (CFTs) during an ER investigation;
- Increase pay for ER staff;
- Implement pay or other incentives to promote retention of current ER staff;
- Hire/retain Indian Child Welfare Act (ICWA) expertise within the ER program to support ER work;
- Hire/retain additional subject-matter expertise within the ER program to support ER work;

- Fund overtime costs to support additional work to improve the quality of ER functions and to provide appropriate support to families.

Some of the ways that these activities may result in better quality investigations and positive outcomes for children and families are:

- Reduced workload for individual hotline staff, which will allow more time to be spent on each hotline assessment to ensure investigation resources are used efficiently and effectively;
- More equitable caseloads for ER workers and the establishment of caseload caps whenever possible to reduce burnout and turnover in ER workforce;
- Improved timely face-to-face contacts to ensure safety of children;
- Additional time with families to perform thorough assessments of child safety and family strengths and needs;
- Better fidelity practice to Structured Decision Making (SDM®) assessments and supervisor oversight of SDM® via case reading to support consistency in assessments;
- Additional time spent on prevention CFTs or other group decision making when appropriate;
- Adequate time for developing and monitoring of safety plans to support maintaining children in their homes;
- Additional time for ER staff to spend on training (both formal training and informal training activities with supervisors) related to bias and equity issues;
- Improved collaboration and consultation with tribal governments and tribal social workers at first contact regarding a child;
- Improved ICWA compliance, especially related to inquiry, notice, and active efforts practice and documentation in the Child Welfare Services/Case Management System (CWS/CMS);
- Thorough and individualized support activities including referrals to services, establishing connections to resources that may help stabilize families and reduce the need to open a case for services and/or entry into foster care; and,
- Time for supervisors to support and oversee ER worker activities, ensuring better quality investigations.

## **PROCESS FOR PARTICIPATION**

The California Department of Social Services (CDSS) will distribute the \$50 million allocation through a county notice process. All counties must inform the department of their decision to opt-in or opt-out by submitting the ER Enhancement Funding County Notice Letter by March 4, 2022 (Attachment I). Counties who choose to receive funds must also develop and submit a plan (Attachment II) to the CDSS that identifies:

- Their specific needs relevant to increasing ER staff and enhancing ER services quality;
- A description of each strategy they will implement that meets the needs of their specific ER programs;
- The method for measuring change;
- The specific outcomes the county expects to see for each strategy; and
- An explanation of how the funding will be spent and what strategies those dollars will impact.

The initial county plan (Attachment II) must be received with the completed notice letter (Attachment I) by March 4, 2022. These plans should include strategies counties intend to utilize for the funding. If a county elects not to receive funds, only Attachment I is required.

The CDSS will review and approve county plans before funding will be allocated. The CDSS will complete the review as quickly as possible to ensure timely allocation of the funds. Participating counties will submit their updated plans annually to CDSS, with the first annual update due on June 30, 2023. The annual update of the county's plan will provide data on the outcome measures and should include what portion, in dollars, of the funding was committed to each strategy. Participating counties will track and document their progress toward these outcomes via the plan update template in Attachment III. The following are some of the strategies and outcomes counties may choose to include in their report; however, counties are not limited to these strategies.

#### Workforce Strategies:

- Hiring additional ER social workers to complete hotline and/or investigation activities.
- Offering a pay differential for ER staff or those staff with higher education and/or experience.
- Adding support staff to divert administrative activities away from ER program staff in order to focus on core ER activities.
- Adding supervisors to improve support and oversight of ER program staff.

#### Best Practice Strategies:

- Hire staff to implement Prevention CFTs during an ER investigation and provide tangible supports to families to enable them to participate in CFTs.
- SDM® case reading to ensure fidelity to assessments and review referral dispositions.

#### Technology Strategies:

- Develop a call center environment within an ER program for hotline calls to be answered and assessed more efficiently. Any changes to a county's Hotline must comply with the CWS Manual of Policies and Procedures, [Division 31-015](#).
- Support the availability of mobile technology such as tablets with access to tools (e.g. Safe Measures, SDM®, CWS/CMS), to help social workers use them more efficiently and consistently in the field.
  - If a county elects to use this as one of their strategies, they must follow all applicable procedures for purchasing mobile technology that fits the definition of Electronic Data Processing equipment, which includes receiving prior approval from the state and the inclusion of these purchases in the county's Advanced Planning Document (APD) submitted to the Office of Systems Integration (OSI). The CDSS recommends consulting the [APD resources on OSI's website](#) for more information regarding developing an APD and the submission process.

Counties must also establish the method for tracking the strategies they implement and the outcomes they expect to see as a result. The following are examples of ways in which a county can monitor the change in workforce or practice strategies:

### Workforce Strategies

#### Strategy 1

Hire additional ER social workers to complete hotline and/or investigation activities.

#### Outcome 1

Increase the number of ER social workers.

#### Outcome Measure 1

Description of staffing in the county's ER program:

- How did the funding impact the number of ER line staff?
- How did the funding impact full-time equivalent reporting?
- How did the funding impact a reduction in vacancy rates?
- How did the funding impact caseloads?

#### Strategy 2

Offer a pay differential for ER staff or those staff with higher education and/or experience.

#### Outcome 2

Decrease staff turnover and increase retention.

#### Outcome Measure 2

- How did the average salary for ER staff change?
- What pay differentials are being offered and to whom?
- How many staff received an increase in salary?
- How did the funding impact the rate of staff turnover?

#### Strategy 3

Add support staff to divert administrative activities away from ER program staff in order to focus on core ER activities.

#### Outcome 3

Increase time spent on core ER activities and/or decrease in time spent on administrative activities.

#### Outcome Measure 3

- How did the funding impact the number of administrative support staff?
- Was timeliness to first face-to-face contact with families impacted?
- Was there an increase in the number of face-to-face contacts with each family throughout the course of an investigation?
- How did the funding impact the number of support staff?

#### Strategy 4

Add supervisors to improve support and oversight of ER program staff.

#### Outcome 4

Increase number of supervisors and supervisory activities.

#### Outcomes Measure 4

- How did the funding impact the number of supervisors?
- How did the funding reduce the caseload for supervisors?
- Description of supervision activities:
  - SDM case reads to ensure accurate use of the tools.
  - Reviewing allegation determination decisions.
  - Assessing decisions to promote referrals to cases.
  - Assessing for safety and review of safety plans.

### Best Practice Strategies

#### Strategy 1

Hire staff to implement Prevention CFTs during an ER investigation and provide tangible supports to families to allow them to participate in CFTs.

Outcome 1

Increased number of Prevention CFTs.

Outcome Measure 1

Description of how the funding impacted Prevention CFTs utilization.

- Has the number of Prevention CFTs increased?

Strategy 2

Hire or retain county staff to conduct SDM® case reading to ensure fidelity to assessments and review referral dispositions.

Outcome 2

Improved fidelity to the assessments.

Outcome Measure 2

Description of the improvements made relative to assessment fidelity and referral dispositions.

- Was there an increase in the frequency with which tools are being used to inform decision making?
- Was there an increase in timely tool completion rates?

Strategy 3

Hire additional staff or pay overtime in order to increase time that all ER staff spend reviewing and training individually with supervisors.

Outcome 3

Increased amount of time devoted to staff/supervisor training and review.

Outcome Measure 3

Description of how the funding impacted the time allotted to training and review between supervisors and staff.

- Was there an increase in the number of one-on-one contacts between ER staff and supervisors?
- Have the quality of one-on-one meetings improved? If so, how?

Technology Strategies

Strategy 1

Develop a call center environment for hotline calls to be answered more efficiently.

Outcome 1

Improve the efficiency of screening hotline calls.

Outcome Measure 1

- How did the funding improve the efficiency of screening hotline calls?

Strategy 2

Purchase tablets with access to tools (e.g. Safe Measures, SDM®, CWS/CMS) to help social workers use them more efficiently and consistently in the field.

Outcome 2

Improve the consistency of use and fidelity to the tools.

Outcome Measure 2

- How did the funding impact the use of SDM®, CWS/CMS, and Safe Measures in the field?
- How did the funding impact completion rates, consistency, and fidelity to the tools?

Additional examples of outcomes that counties may want to monitor relative to their goals and identified strategies include, but are not limited to:

- Safety Planning activities:
  - Was there an increase in the number of completed safety plans?
  - Providing a description of safety plan monitoring activities.
  - Was there an increase in referrals provided to families?
- How has this funding impacted the rate of removals?
- How has this funding impacted the existing Federal Outcome Measure on the reduction of recurrence of child abuse and/or neglect in a 6-month timeframe?
- Providing a description of any other notable improvement the county identified in the implementation of this funding.
- Providing a description of any identified challenges the county experienced with implementation of the funding.

These are examples of how counties can illustrate how the funding will enhance their ER program. Counties may choose other strategies not identified in this ACL, but they must demonstrate how they will use the funding to enhance their ER program through their identified strategies and outcomes. In addition, the annual Plan Update (Attachment III) should also address any barriers or challenges counties experienced in meeting the goals outlined in their initial plans. Counties should indicate in this section

if there are any strategies that were not as impactful as the county had planned and if they are changing them for the following FY. There is no penalty from the CDSS for a county not meeting or exceeding their intended outcomes. However, these funds must be used to enhance the ER workforce, as specified by the legislature. Therefore, counties shall ensure that the funds are used for this purpose.

### **SAFETY PLANNING REPORTING**

Safety planning is a key practice tool used by social workers to enable children to safely remain in their homes and prevent them from entering foster care. Use of a safety plan is considered the least restrictive method to keep children in their home when a safety threat has been identified. As instructed in [ACL No. 17-107](#), case workers shall ensure the timely documentation of safety plans, including the frequency of in-person visits required to monitor the plan appropriately. The method of tracking this information in CWS/CMS is within the narrative case notes; however, this may be difficult to track for the purposes of assessing outcomes for the ER Enhancement Funds program. As part of the reporting requirement for those counties who choose to receive ER Enhancement funds, a Special Project Code (SPC), **Safety Plan Completed**, for Safety Planning has been created to better track this outcome.

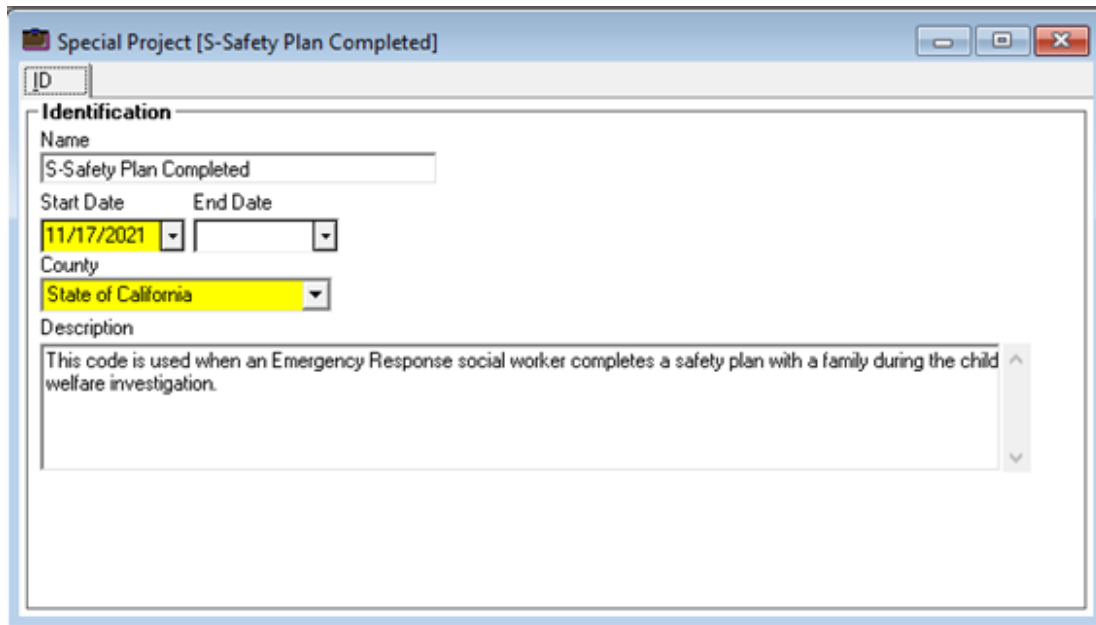
The new SPC is an important addition to CWS/CMS to facilitate documentation of safety planning activities, which engage and connect families with a support network that may consist of family members and community providers. Though counties are not required to use this SPC, tracking safety plan completion is an important component of monitoring child safety. Because this is what the ER workforce is tasked with ensuring, the CDSS urges all counties to utilize the SPC. Additionally, for those counties who elect to include safety planning as a part of one or more of their strategies, utilizing the SPC will be especially useful and important for tracking the progress made in that area. When an effective safety plan is developed with the family and a support network is identified as part of the process, children remain safe, families are better supported, cultural considerations are applied, and the rate of removals from the home is expected to decrease. Additionally, a Safe Measures report can be created for the Safety Planning SPC so counties can also track this outcome and use the data to improve processes. Counties may begin using this SPC in CWS/CMS immediately.

The SPC was added in the Special Projects Notebook in Resource Management and is available for selection in the following Client Services Notebooks:

- Referral Notebook
- Client Notebook
- Case Notebook

- Placement/Placement Home Notebook (also available in the same notebook in Resource Management)

Each of these notebooks have a Special Projects page tab. Once the tab is selected the user clicks on the '+' sign and in the Special Project Name dropdown select the specific SPC.



## **INSTRUCTIONS TO OPT-OUT OF FUNDS**

All counties must submit a completed Attachment I (ER Enhancement Funding County Notice Letter) indicating if they elect to opt-in or opt-out of receiving the allocation and Attachment I must be received by March 4, 2022, at [childprotection@dss.ca.gov](mailto:childprotection@dss.ca.gov). If a county needs additional time to submit this form, they may request an extension of no more than 15 days from this date.

In consultation with the County Welfare Directors Association, the \$50 million of state general funds for the enhancement of child welfare ER services is distributed as follows:

- Fifty percent of the funds are distributed based on counties' total number of referrals and investigations from July 2020 to July 2021, as reported in Safe Measures Reports.

- The remaining 50 percent is distributed based on counties' ER caseload safety and risk data, as reported in CWS/CMS. Specifically, counties with larger, more unsafe, and higher risk ER caseloads are provided a larger allocation of funds.
- The allocation is then adjusted to ensure that each county receives a minimum of \$129,000 based on the estimated cost of funding a full-time equivalent child welfare social worker.

Attachment IV displays estimated allocations for all counties, if all counties opt-in. A final allocation distribution and claiming instructions will be provided in forthcoming County Fiscal Letters. The CDSS will redistribute the planning allocation amount of any counties who choose to opt-out to the remaining participating counties.

Questions regarding this letter should be directed to the Child Welfare Policy and Program Development Bureau, at [childprotection@dss.ca.gov](mailto:childprotection@dss.ca.gov) or call (916) 651-6160.

Sincerely,

***Original Document Signed By:***

ANGIE SCHWARTZ  
Deputy Director  
Children and Family Services Division

Attachments

**ER ENHANCEMENT FUNDING COUNTY NOTICE LETTER**

January 1, 2022

California Department of Social Services  
Attention: Child Welfare Policy and Program Development Bureau  
744 P Street, MS 8-11-542  
Sacramento, CA 95814

Director Kim Johnson:

The purpose of this letter is to inform the California Department of Social Services that \_\_\_\_\_ County elects to:

\_\_\_ Opt-in to receiving state funds allocated under Section 116, Provision 39 of the State Budget Act of 2021 (SB 170) to enhance the county's Emergency Response services, resulting in an increase in the number of Emergency Response child welfare services staff. Attached is \_\_\_\_\_ County's plan for the use of this funding. As a condition of receiving these funds, \_\_\_\_\_ County agrees to submit annual updates to its plan, beginning June 30, 2023, and to track and report county strategies and outcomes in accordance with ACL 22-02.

\_\_\_ Opt-out from receiving state funds allocated under Section 116, Provision 39 of the State Budget Act of 2021 (SB 170) to enhance the county's Emergency Response services.

By choosing not to receive an allocation, \_\_\_\_\_ County understands they will not receive an allocation of ER enhancement funds under this provision and will not be required to report to CDSS the information outlined in this ACL.

This notice is only for ER enhancement funds appropriated in the FY 2021-22 state budget. This County Notice Letter must be received by the Child Welfare Policy and Program Development Bureau ([childprotection@dss.ca.gov](mailto:childprotection@dss.ca.gov)) on or before March 4, 2022.

\_\_\_\_\_  
Signature of Authorized County Representative

\_\_\_\_\_  
Date

## **EMERGENCY RESPONSE (ER) ENHANCEMENT FUNDING PROGRAM PLAN**

The CDSS will review and approve county plans before finalizing allocations for FY 2021-22. County plans must be received by **March 4, 2022**.

Participating counties will submit their plan updates annually to CDSS via the template in Attachment III below to [childprotection@dss.ca.gov](mailto:childprotection@dss.ca.gov).

**County:**

**County Contact:**

### **Specific Needs**

[Describe the specific needs of the county relevant to increasing ER staff and enhancing ER services quality.]

### **Funding**

[Describe how the funding will be spent and what portion, in dollars, of the funding will be committed to each strategy.]

## **STRATEGIES AND OUTCOMES**

### **Strategy 1**

[Identify a specific strategy for using the ER Enhancement funds that will impact your ER program.]

### **Outcome 1**

[What will be the measured outcome of this specific strategy?]

### **Outcome Measure 1**

[List specific outcomes that will be measured for this strategy.]

### **Strategy 2**

[Identify a specific strategy for using the ER Enhancement funds that will impact your ER program.]

### **Outcome 2**

[What will be the measured outcome of this specific strategy?]

### **Outcome Measure 2**

[List specific outcomes that will be measured for this strategy.]

[Counties may include as many strategies as they see fit. Continue following this format

for the remaining Strategies, Outcomes, and Outcome Measures.]

## **EMERGENCY RESPONSE (ER) ENHANCEMENT FUNDING PROGRAM PLAN UPDATE**

Participating counties will submit their plan updates to CDSS via this template to [childprotection@dss.ca.gov](mailto:childprotection@dss.ca.gov), with the initial update being due June 30, 2023.

**County:**

**County Contact:**

### **Specific Needs**

[Describe the specific needs of the county relevant to increasing ER staff and enhancing ER services quality.]

### **Funding**

[Describe how the funding was spent and what portion, in dollars, of the funding was committed to each strategy.]

## **STRATEGIES AND OUTCOMES**

### **Strategy 1**

[Identify a specific strategy that was implemented as a result receiving the ER Enhancement funds.]

### **Outcome 1**

[What was the outcome measured for this specific strategy?]

### **Outcome Measure 1**

[List specific outcomes measured for this strategy.]

### **Strategy 2**

[Identify a specific strategy that was implemented as a result receiving the ER Enhancement funds.]

### **Outcome 2**

[What was the outcome measured for this specific strategy?]

### **Outcome Measure 2**

[List specific outcomes measured for this strategy.]

[Continue following this format for the remaining Strategies, Outcomes, and Outcome Measures.]

**PROMISING PRACTICES/ OTHER SUCCESSES**

[Enter a description of any other successes experienced as a result of receiving the ER Enhancement funds.]

**OBSTACLES AND BARRIERS TO IMPLEMENTATION OF THE ER FUNDING**

[Provide a description of any identified challenges the county experienced with implementation of the funding as well as any changes or updates the county would like to make for the next FY.]

**ER ENHANCEMENT FUNDING GENERAL FUND ALLOCATION**

<b>COUNTIES</b>	<b>ALLOCATION</b>
Alameda	\$892,710
Alpine	\$129,000
Amador	\$129,000
Butte	\$270,494
Calaveras	\$129,000
Colusa	\$129,000
Contra Costa	\$762,857
Del Norte	\$129,000
El Dorado	\$226,606
Fresno	\$2,062,448
Glenn	\$129,000
Humboldt	\$255,111
Imperial	\$237,898
Inyo	\$129,000
Kern	\$1,189,900
Kings	\$289,830
Lake	\$129,000
Lassen	\$129,000
Los Angeles	\$11,777,495
Madera	\$365,279
Marin	\$129,000
Mariposa	\$129,000
Mendocino	\$281,913
Merced	\$442,334
Modoc	\$129,000
Mono	\$129,000
Monterey	\$427,433
Napa	\$157,513
Nevada	\$129,000
Orange	\$2,721,976
Placer	\$326,793
Plumas	\$129,000
Riverside	\$4,505,051
Sacramento	\$2,428,718
San Benito	\$129,000
San Bernardino	\$3,757,451
San Diego	\$4,855,491
San Francisco	\$347,019
San Joaquin	\$942,873
San Luis Obispo	\$346,035

COUNTIES	ALLOCATION
San Mateo	\$381,207
Santa Barbara	\$819,462
Santa Clara	\$1,504,793
Santa Cruz	\$233,014
Shasta	\$459,593
Sierra	\$129,000
Siskiyou	\$129,000
Solano	\$466,464
Sonoma	\$448,462
Stanislaus	\$815,755
Sutter	\$129,000
Tehama	\$129,320
Trinity	\$129,000
Tulare	\$982,901
Tuolumne	\$129,000
Ventura	\$810,912
Yolo	\$224,054
Yuba	\$143,835
<b>Total</b>	<b>\$50,000,000</b>