



CDSS

JOHN A. WAGNER  
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)



ARNOLD SCHWARZENEGGER  
GOVERNOR

July 10, 2008

ALL COUNTY LETTER NO. 08-33

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS  
ALL COUNTY INDEPENDENT LIVING PROGRAM COORDINATORS  
ALL COUNTY PROBATION OFFICERS

SUBJECT: EXIT OUTCOMES FOR YOUTH AGING OUT OF FOSTER CARE  
QUARTERLY STATISTICAL REPORT [SOC 405E (7/08)]

The purpose of this letter is to transmit the Exit Outcomes for Youth Aging Out of Foster Care Quarterly Statistical Report (SOC 405E) and its instructions. Effective July 1, 2008, counties are to use the attached SOC 405E which is designed to collect statistical information on youth who are aging out of foster care.

The California Legislature passed Assembly Bill 636, the Child Welfare System Improvement and Accountability Act (Chapter 678, Statutes of 2001), to improve outcomes for children in California's child welfare system. A workgroup comprised of members representing the County Welfare Directors Association (CWDA) and the California Department of Social Services (CDSS) developed the exit outcomes report. The form provides federal, state and county entities with information needed for policy and program development and planning, and other purposes.

An electronic version of this report form can be completed and e-mailed by following instructions at <http://www.cdss.ca.gov/dssdb/>. CDSS encourages all counties to utilize this automated form. It is a downloadable Excel file which contains several automated features and pre-calculated cells to assist counties in completing the form, running edit checks, and transmitting the cleared data back to CDSS.

ALL COUNTY WELFARE DIRECTORS  
Page Two

Copies of this report form and its instructions can also be viewed and printed from <http://www.cdss.ca.gov/research/>. If e-mail submission is not possible, fax or mail reports to:

California Department of Social Services  
Data Systems and Survey Design Bureau, M.S. 19-081  
P.O. Box 944243  
Sacramento, CA 94244-2430  
**FAX: (916) 657-2074**

This report is due on or before the 20<sup>th</sup> calendar day of the month following the report quarter. Therefore, the first report for the July through September 2008 report quarter is due on or before **October 20, 2008**.

If you have any questions regarding completion of this form, please contact the Data Systems and Survey Design Bureau at (916) 515-3527. Program related questions should be directed to the Independent Living Program Policy Unit at (916) 657-7465.

Sincerely,

***Original Document Signed By  
Eric Fujii on 7/10/08***

ERIC FUJII  
Deputy Director  
Administration Division

Attachment

# Exit Outcomes for Youth Aging Out of Foster Care Quarterly Statistical Report

DOWNLOAD REPORT FORM (IN EXCEL) AND INSTRUCTIONS AT:  
<http://www.cdss.ca.gov/dssdb/>  
E-MAIL COMPLETED REPORT FORM (AS AN EXCEL ATTACHMENT) TO:  
[admsoc405E@dss.ca.gov](mailto:admsoc405E@dss.ca.gov)  
IF UNABLE TO E-MAIL REPORT FORM, FAX OR MAIL TO:  
**FAX: (916) 657-2074**  
California Department of Social Services  
Data Systems and Survey Design Bureau, M.S. 19-081  
P.O. Box 944243  
Sacramento, CA 94244-2430

COUNTY NAME	VERSION <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISED	REPORT QUARTER	REPORT YEAR		
<b>Part A. Youth Aging Out of Foster Care</b>			<b>Court Supervised Foster Youth</b>		<b>Non-Dependent Non-Related Legal Guardian Youth (C)</b>
			<b>Child Welfare (A)</b>	<b>Probation (B)</b>	
1. County supervised youth who are aging out or legally emancipating from Foster Care during the report quarter (Item 1a plus 1b).....			1	2	3
a. Of the youth in Item 1, youth who are custodial female parents [Item 1a1) plus 1a2) plus 1a3)].....			4	5	6
1) Youth female parents who have custody of one child.....			7	8	9
2) Youth female parents who have custody of two children.....			10	11	12
3) Youth female parents who have custody of three or more children.....			13	14	15
b. Of the youth in Item 1, youth who are custodial male parents [Item 1b1) plus 1b2) plus 1b3)].....			16	17	18
1) Youth male parents who have custody of one child.....			19	20	21
2) Youth male parents who have custody of two children.....			22	23	24
3) Youth male parents who have custody of three or more children.....			25	26	27
2. Youth whose whereabouts are unknown and could not be contacted during the report quarter.....			28	29	30
3. Youth whose whereabouts are known during the report quarter and information to be included in Items 4 through 50 below (Item 1 minus Item 2).....			31	32	33
<b>Part B. Education Attainment/Enrollment</b>					
For Items 4 - 10 select all that apply for each youth.					
4. Youth who completed high school or equivalency (Item 4a plus 4b plus 4c plus 4d).....			34	35	36
a. Youth who received a high school diploma.....			37	38	39
b. Youth who received a General Equivalency Degree (GED).....			40	41	42
c. Youth who received a high school proficiency certificate.....			43	44	45
d. Youth who received a high school completion certificate.....			46	47	48
5. Youth enrolled in an educational program in order to continue to pursue their high school education (e.g., high school diploma, GED).....			49	50	51
6. Youth who dropped out of high school.....			52	53	54
7. Youth who plan to enroll in college during the next available quarter/semester.....			55	56	57
8. Youth enrolled in college (Item 8a plus 8b).....			58	59	60
a. Youth in a two-year community college.....			61	62	63
b. Youth in a four-year university.....			64	65	66
9. Youth who plan to enroll in vocational education or on-the-job training during the next available quarter/semester.....			67	68	69
10. Youth enrolled in vocational education or on-the-job training.....			70	71	72
11. Youth for whom no educational information is known.....			73	74	75
<b>Part C. Means of Financial Support and/or Other Financial Resources</b>					
For Items 12 - 29 select all that apply for each youth.					
12. Youth who obtained employment (Item 12a plus 12b).....			76	77	78
a. Youth who obtained full-time employment.....			79	80	81
b. Youth who obtained part-time employment.....			82	83	84
13. Youth who plan to enlist in the military, Job Corps, California Conservation Corps or AmeriCorp.....			85	86	87
14. Youth enlisted in the military, Job Corps, California Conservation Corps or AmeriCorp.....			88	89	90
15. Youth with an Individual Development Account (IDA) (Matched Savings Account).....			91	92	93
16. Youth with a savings account (not an IDA).....			94	95	96
17. Youth with a checking account.....			97	98	99
18. Youth who are receiving or have applied for SSI.....			100	101	102
19. Youth who have applied for CalWORKs.....			103	104	105
20. Youth who have applied for General Assistance/General Relief.....			106	107	108
21. Youth who have applied for Food Stamps.....			109	110	111
22. Youth who are receiving or have applied for Chafee Educational and Training Voucher.....			112	113	114
23. Youth who are receiving or have applied for Educational Scholarships/Financial Aid.....			115	116	117
24. Youth who are receiving or have applied for Child Support for their minor child(ren).....			118	119	120
25. Youth who are receiving or have applied for Subsidized Child Care.....			121	122	123
26. Youth who are receiving or have applied for Temporary Financial Assistance (ILP, Emancipated Youth Stipend, other).....			124	125	126
27. Youth who are receiving Tribal Financial Assistance.....			127	128	129
28. Youth whose families are or will be contributing to their financial support.....			130	131	132
29. Youth who are receiving financial support or assistance from another source other than those listed above.....			133	134	135
30. Youth with no means of financial support.....			136	137	138
31. Youth for whom no information is known about their financial situation.....			139	140	141

COUNTY NAME		REPORT QUARTER	REPORT YEAR		
<b>Part D. Housing Arrangements</b>			<b>Court Supervised Foster Youth</b>		<b>Non-Dependent Non-Related Guardian Youth (C)</b>
Only one item in this section should be selected for each youth.			<b>Child Welfare (A)</b>	<b>Probation (B)</b>	
32. Youth who have made arrangements to rent their own housing or to pay rent to or share rent with another person (Item 32a plus 32b plus 32c plus 32d).....			142	143	144
a. Youth who have made arrangements to pay rent for their own housing.....			145	146	147
b. Youth who have made arrangements to pay rent to or share rent with a birth parent.....			148	149	150
c. Youth who have made arrangements to pay rent to or share rent with a current caregiver.....			151	152	153
d. Youth who have made arrangements to pay rent to or share rent with someone other than above.....			154	155	156
33. Youth who have made arrangements to live free of rent with another individual (Item 33a plus 33b plus 33c).....			157	158	159
a. Youth who have made arrangements to live free of rent with a birth parent.....			160	161	162
b. Youth who have made arrangements to live free of rent with a current caregiver.....			163	164	165
c. Youth who have made arrangements to live free of rent with someone other than above.....			166	167	168
34. Youth who have made arrangements to live in supportive transitional housing (Item 34a plus 34b plus 34c plus 34d).....			169	170	171
a. Youth who have made arrangements to live in certified THP-Plus Program Housing.....			172	173	174
b. Youth who have made arrangements to live in Mental Health Program Housing.....			175	176	177
c. Youth who have made arrangements to live in County Operated Program Housing.....			178	179	180
d. Youth who have made arrangements to live in housing program other than those listed above.....			181	182	183
35. Youth who have made arrangements to receive subsidized housing (Item 35a plus 35b plus 35c).....			184	185	186
a. Youth who have made arrangements to receive Section 8.....			187	188	189
b. Youth who have made arrangements to receive Board and Care.....			190	191	192
c. Youth who have made arrangements to receive subsidized housing other than those listed above.....			193	194	195
36. Youth who have made arrangements to reside in an emergency shelter.....			196	197	198
37. Youth who have made arrangements to live in a college dorm the next available quarter/semester.....			199	200	201
38. Youth who are incarcerated/institutionalized.....			202	203	204
39. Youth who have made housing arrangements other than those listed above (e.g., military, Job Corps, California Conservation Corps or AmeriCorp).....			205	206	207
40. Youth who have no housing arrangements.....			208	209	210
41. Youth for whom no information is known about their housing arrangements.....			211	212	213
<b>Part E. Health Care Insurance</b>					
For Items 42 - 44 select all that apply for each youth.					
42. Youth who have Medi-Cal.....			214	215	216
43. Youth who have applied for EXTENDED Medi-Cal.....			217	218	219
44. Youth who have other medical insurance (other than Medi-Cal).....			220	221	222
45. Youth who do not have medical insurance (Medi-Cal or other).....			223	224	225
46. Youth for whom no information is known about their health care insurance coverage.....			226	227	228
<b>Part F. Independent Living Program Services</b>					
47. Youth who received Independent Living Services prior to aging out or legally emancipating from Foster Care.....			229	230	231
<b>Part G. Permanency Connection</b>					
Only one item in this section may be selected for each youth. The sum of Items 48, 49 and 50 must equal Item 3.					
48. Youth who reported that they have a permanency connection to at least one adult that they can go to for support, advice and guidance.....			232	233	234
49. Youth who reported that they have no permanency connection.....			235	236	237
50. Youth for whom no information is known about their permanency connection.....			238	239	240
COMMENTS					
CONTACT PERSON (PRINT)		TELEPHONE	EXTENSION		FAX
TITLE/CLASSIFICATION		E-MAIL		DATE COMPLETED	

**EXIT OUTCOMES FOR YOUTH AGING OUT OF FOSTER CARE  
QUARTERLY STATISTICAL REPORT  
SOC 405E (7/08)**

**INSTRUCTIONS**

**CONTENT**

The Exit Outcomes quarterly report collects information on county supervised foster youth (child welfare and probation) and non-dependent non-related legal guardian youth, regardless of county of placement, who in the report quarter exited supervised foster care placement due to attaining age 18 or 19, or those foster youth under age 18 who were legally emancipated from foster care pursuant to Family Code Section 7000. The information entered on each youth is based on what is known about the youth's status at the month of exiting care in the following six categories: Education Attainment/Enrollment; Means of Financial Support and/or Other Financial Resources; Housing Arrangements; Health Care Insurance; Independent Living Program Services and Permanency Connection.

Copies of the report form and instructions can be viewed or printed from the California Department of Social Services (CDSS), Research and Data Reports (RADR), website at <http://www.cdss.ca.gov/research/>. The quarterly report's statewide and county-specific data is also available on the website.

**PURPOSE**

In 2001, the California Legislature passed the Child Welfare System Improvement and Accountability Act (AB 636). The legislation was designed to improve outcomes for children in the child welfare system while holding county and state agencies accountable for the outcomes achieved. This statewide accountability system, which went into effect January 1, 2004, is an enhanced version of the federal oversight system mandated by Congress and used to monitor states' performances. A workgroup comprised of members representing the County Welfare Directors' Association (CWDA) and the California Department of Social Services (CDSS) developed the exit outcomes report. The form which replaces the current 8A performance measure provides federal, state and county entities with information needed for policy and program development and planning, and other purposes.

**COMPLETION AND SUBMISSION**

The County Welfare Department (CWD) is responsible for ensuring that this report is fully and accurately completed. If portions of the report are completed by more than one entity within the CWD and/or outside agencies, the contact person responsible for submitting the report to the state shall review the report for completeness and accuracy prior to submittal. Reports are to be received on or before the 20<sup>th</sup> calendar day of the month following the end of the report quarter. This report may be submitted via e-mail or in hard copy:

E-mail submission: Download an Excel version of the report form from <http://www.cdss.ca.gov/dssdb/> to your PC desktop, complete the downloaded report form, and e-mail to the CDSS, Data Systems and Survey Design Bureau (DSSDB) at [admsoc405E@dss.ca.gov](mailto:admsoc405E@dss.ca.gov). This e-mail submission process contains automatic computation of some cells and easy e-mail transmission of completed report forms to DSSDB; the website contains specific instructions and guidance.

Hard copy submission: If e-mail submission is not possible, complete a paper copy of the report form and fax or mail to:

California Department of Social Services  
Data Systems and Survey Design Bureau, M.S. 19-081  
P.O. Box 944243  
Sacramento, CA 94244-2430  
**FAX: (916) 657-2074**

If you have questions regarding this report, contact the Data Systems and Survey Design Bureau at (916) 515-3527.

## GENERAL INSTRUCTIONS

Enter the county name in the box provided near the top of each page of the form. Enter the version (Initial or Revised) in the box provided near the top of the first page. Enter the report quarter and report year in the boxes provided near the top of each page.

Enter the data required for each item. If there is nothing to report for an item, enter “0”. **Do not leave any items blank.**

For each item, the information entered on each youth is based on **what is known about the youth’s status at the month of exiting care**. Each youth should be entered in only one of the designated columns: County Child Welfare Supervised Youth in Column A, Court/County Supervised Probation Youth in Column B, or Non-Dependent Legal Guardian Youth in Column C.

Of the total number of youth specified in Item 3, report the information requested in Items 4 through 50. Numbers in each of Items 4 through 50 must be less than or equal to the total in Item 3. One or more items may be completed in Items 4 through 10 for each youth. Youth whose whereabouts are unknown and could not be contacted (i.e., those reported in Item 2) should not be included in Items 4 through 50.

Enter in the boxes at the end of the form the name, job title or classification, telephone number, fax number, and e-mail address of the person to contact if there are questions about the report. This person may or may not be the person who completed the report. Enter the date the report was completed.

## DEFINITIONS

**Board and Care**: Non-medical community-based facility that provides at least two meals a day and/or routine protective oversight to one or more residents with limitations in two or more daily living activities.

**Child Welfare Foster Youth**: A youth under supervision of juvenile court (a court dependent) for whom the State or County Agency has placement and care responsibility.

**Independent Living Program**: A youth that receives services from the county Independent Living Program (ILP).

**Non-Dependent Non-Related Legal Guardian Youth (NRLG)**: A youth whose guardianship was ordered in Probate Court, or youth whose guardianship was created in Juvenile court and whose dependency was subsequently dismissed and who is under the care of a court appointed legal guardian who is not a relative within the 5<sup>th</sup> degree, is in receipt of AFDC-FC and has an open voluntary Permanent Placement (PP) case in Child Welfare Services / Case Management System (CWS/CMS).

**On-the-Job Training**: Training for a specific job through short term classes, on-site training, an apprenticeship or internship program, whether paid or unpaid.

**Permanency Connection**: A youth who has at least one life-long connection to a caring, committed adult who can provide a safe, stable relationship, guidance and emotional support to the youth.

**Probation Foster Youth**: A youth under the jurisdiction/supervision of the County Juvenile Probation Department and who was in foster care placement prior to probation supervision.

**Subsidized Housing**: Housing in which the youth qualifies for a reduction in rent based on income level or status (i.e. former foster youth) or receives money from a State, County or Federal assistance program to apply toward housing costs.

**Tribal Financial Assistance**: Monetary assistance received from a federally recognized tribe or money received from a county, state or federal program for being a member of a federally recognized tribe.

**DEFINITIONS CONTINUED**

Vocational Education: A program of training in a specific trade or vocation such as but not limited to cosmetology, auto mechanics, nursing or computer science.

**ITEM INSTRUCTIONS****Part A. Youth Aging Out Of Foster Care**

1. County supervised youth who are aging out or legally emancipating from Foster Care during the report quarter (Item 1a plus 1b): Enter the number of child welfare county supervised youth in Column A, county supervised probation youth in Column B, and non-dependent legal guardian youth in Column C who are aging out or legally emancipating from foster care during the report quarter. (Sum of Items 1a and 1b.) *[Cells 1 - 3]*
  - a. Of the youth in Item 1, youth who are custodial female parents [Item 1a1) plus 1a2) plus 1a3)]: Of the total number of youth reported in Item 1, enter the number of youth who are custodial female parents. [Sum of Item 1a1), 1a2) and 1a3)] *[Cells 4 - 6]*
    - 1) Youth female parents who have custody of one child: Of the total number of parents reported in Item 1a, enter the number of female parents who have custody of one child. *[Cells 7 - 9]*
    - 2) Youth female parents who have custody of two children: Of the total number of parents reported in Item 1a, enter the number of female parents who have custody of two children. *[Cells 10 - 12]*
    - 3) Youth female parents who have custody of three or more children: Of the total number of parents reported in Item 1a, enter the number of female parents who have custody of three or more children. *[Cells 13 - 15]*
  - b. Of the youth in Item 1, youth who are custodial male parents [Item 1b1) plus 1b2) plus 1b3)]: Of the total number of youth reported in Item 1, enter the number of youth who are custodial male parents. [Sum of Items 1b1), 1b2) and 1b3)] *[Cells 16 - 18]*
    - 1) Youth male parents who have custody of one child: Of the total number of parents reported in Item 1b, enter the number of male parents who have custody of one child. *[Cells 19 - 21]*
    - 2) Youth male parents who have custody of two children: Of the total number of parents reported in Item 1b, enter the number of male parents who have custody of two children. *[Cells 22 - 24]*
    - 3) Youth male parents who have custody of three or more children: Of the total number of parents reported in Item 1b, enter the number of male parents who have custody of three or more children. *[Cells 25 - 27]*
2. Youth whose whereabouts are unknown and could not be contacted during the report quarter: Of the total number of youth reported in Item 1, enter the number of youth whose whereabouts are unknown and could not be contacted during the report quarter. This does not include a child who is deceased. *[Cells 28 - 30]*
3. Youth whose whereabouts are known during the report quarter and information to be included in Items 4 through 50 below (Item 1 minus Item 2): Of the total number of youth reported in Item 1, enter the number of youth whose whereabouts are known during the report quarter. Information on these youth is to be included in Items 4 through 50 below. (Item 1 minus Item 2.) *[Cells 31 - 33]*

**ITEM INSTRUCTIONS CONTINUED****Part B. Education Attainment/Enrollment**

For Items 4 – 10 select all that apply for each youth.

4. Youth who completed high school or equivalency (Item 4a plus 4b plus 4c plus 4d): Enter the number of youth who completed high school or equivalency. (Sum of Items 4a, 4b, 4c and 4d.) [Cells 34 - 36]
  - a. Youth who received a high school diploma: Of the number of youth reported in Item 4, enter the number of youth who received a high school diploma. [Cells 37 - 39]
  - b. Youth who received a General Equivalency Degree (GED): Of the number of youth reported in Item 4, enter the number of youth who received a General Equivalency Degree (GED). [Cells 40 - 42]
  - c. Youth who received a high school proficiency certificate: Of the number of youth reported in Item 4, enter the number of youth who passed the high school proficiency exam and received a certificate of proficiency. This includes foster youth who have neither completed the minimum requirements for graduation, nor passed the GED exam, but have elected to take the California High School Proficiency Examination (CHSPE), and passed the same. [Cells 43 - 45]
  - d. Youth who received a high school completion certificate: Of the number of youth reported in Item 4, enter the number of youth who received a high school completion certificate. This includes foster youth who completed the minimum requirements for graduation but have not completed all sections of the California High School Exit Exam (CAHSEE) and, therefore, cannot receive a diploma from the high school. [Cells 46 - 48]
5. Youth enrolled in an educational program in order to continue to pursue their high school education (high school diploma, GED): Enter the number of youth who enrolled in an educational program in order to continue to pursue their high school education (e.g., high school diploma, GED). [Cells 49 - 51]
6. Youth who dropped out of high school: Enter the number of youth who dropped out of high school. [Cells 52 - 54]
7. Youth who plan to enroll in college during the next available quarter/semester: Enter the number of youth who plan to enroll in college during the next available quarter/semester. [Cell 55 - 57]
8. Youth enrolled in college (Item 8a plus 8b): Enter the number of youth enrolled in college. If the youth is enrolled in both a four-year and a two-year college, include the youth in the count for four-year colleges only. (Sum of Items 8a and 8b.) [Cells 58 - 60]
  - a. Youth in a two-year community college: Of the total number of youth reported in Item 8, enter the number of youth enrolled in a two-year community college. [Cells 61 - 63]
  - b. Youth in a four-year university: Of the total number of youth reported in Item 8, enter the number of youth enrolled in a four-year university. [Cells 64 - 66]
9. Youth who plan to enroll in vocational education or on-the-job training during the next available quarter/semester: Enter the number of youth who plan to enroll in vocational education or on-the-job training during the next available quarter/semester. [Cells 67- 69]
10. Youth enrolled in vocational education or on-the-job training: Enter the number of youth who are enrolled in vocational education or on-the-job training. [Cells 70 - 72]



**ITEM INSTRUCTIONS CONTINUED**

11. Youth for whom no educational information is known: Enter the number of youth for whom no educational information is known. [Cells 73 - 75]

**Part C. Means of Financial Support and/or Other Financial Resources**

For Items 12 – 29 select all that apply for each youth.

12. Youth who obtained employment (Item 12a plus 12b): Enter the number of youth who obtained either full-time or part-time employment. If the youth had one or more full-time jobs during the report quarter, count once in the full-time category, Item 12a. If the youth has one or more part-time jobs during the report quarter, count once in the part-time category, Item 12b. If the youth has one or more full-time jobs and one or more part-time jobs during the year, whether concurrently or sequentially, count only once in the full-time category. Full-time equals 35 or more hours per week. Part-time equals less than 35 hours per week. Provide the breakout of full-time and part-time employment in Items 12a and 12b. (Sum of Items 12a and 12b.) [Cells 76 - 78]
- a. Youth who obtained full-time employment: Enter the number of youth who obtained full-time employment. [Cells 79 - 81]
- b. Youth who obtained part-time employment: Enter the number of youth who obtained part-time employment. [Cells 82 - 84]
13. Youth who plan to enlist in the military, Job Corps, California Conservation Corps or Americorp: Enter the number of youth who plan to enlist in the military, Job Corps, California Conservation Corps or Americorp. [Cells 85 - 87]
14. Youth enlisted in the military, Job Corps, California Conservation Corps or AmeriCorp: Enter the number of youth who are enlisted in the military, Job Corps, California Conservation Corps or AmeriCorp. [Cells 88 - 90]
15. Youth with an Individual Development Account (IDA) (Matched Savings Account): Enter the number of youth with an Individual Development Account (IDA) (Matched Savings Account). [Cells 91 - 93]
16. Youth with a savings account (not an IDA): Enter the number of youth with a savings account (not an IDA). [Cells 94 - 96]
17. Youth with a checking account: Enter the number of youth with a checking account. [Cells 97 - 99]
18. Youth who are receiving or have applied for SSI: Enter the number of youth who are receiving or have applied for SSI. [Cells 100 - 102]
19. Youth who have applied for CalWORKs: Enter the number of youth who have applied for CalWORKs. [Cells 103 - 105]
20. Youth who have applied for General Assistance/General Relief: Enter the number of youth who have applied for General Assistance/General Relief. [Cells 106 – 108]
21. Youth who have applied for Food Stamps: Enter the number of youth who have applied for Food Stamps. [Cells 109 – 111]
22. Youth who are receiving or have applied for a Chafee Educational and Training Voucher: Enter the number of youth who are receiving or have applied for a Chafee Educational and Training Voucher. [Cells 112 – 114]

**ITEM INSTRUCTIONS CONTINUED**

23. Youth who are receiving or have applied for Educational Scholarships/Financial Aid: Enter the number of youth who are receiving or have applied for Educational Scholarships/Financial Aid. [Cells 115 - 117]
24. Youth who are receiving or have applied for Child Support for their minor child(ren): Enter the number of youth who are receiving or have applied for Child Support for their minor child(ren). [Cells 118 - 120]
25. Youth who are receiving or have applied for Subsidized Child Care: Enter the number of youth who are receiving or have applied for Subsidized Child Care. [Cells 121 - 123]
26. Youth who are receiving or have applied for Temporary Financial Assistance (ILP, Emancipated Youth Stipend, other): Enter the number of youth who are receiving or have applied for Temporary Financial Assistance (e.g., ILP, Emancipated Youth Stipend, other). [Cells 124 - 126]
27. Youth who are receiving Tribal Financial Assistance: Enter the number of youth who are receiving Tribal Financial Assistance (includes proceeds received from Indian Gaming). [Cells 127 - 129]
28. Youth whose families are or will be contributing to their financial support: Enter the number of youth whose family (parents, relatives, spouse) are or will be contributing to their financial support (e.g., Trust Funds, Inheritance). [Cells 130 - 132]
29. Youth who are receiving financial support or assistance from another source other than those listed above: Enter the number of youth who are receiving financial support or assistance from another source other than those listed above. [Cells 133 - 135]
30. Youth with no means of financial support: Enter the number of youth with no means of financial support. [Cells 136 - 138]
31. Youth for whom no information is known about their financial situation: Enter the number of youth for whom no information is known about their financial situation. [Cell 139 - 141]

**Part D. Housing Arrangements**

Only one item in this section should be selected for each youth. The sum of Items 32 - 41 must equal Item 3.

32. Youth who have made arrangements to rent their own housing or to pay rent to or share rent with another person (Item 32a plus 32b plus 32c plus 32d): Enter the number of youth who have made arrangements to rent their own housing or to pay rent to or share rent with another person. (Sum of Items 32a, 32b, 32c and 32d.) [Cells 142 - 144]
- a. Youth who have made arrangements to pay rent for their own housing: Of the number of youth reported in Item 32, enter the number of youth who made arrangements to pay rent for their own housing. [Cell 145 - 147]
- b. Youth who have made arrangements to pay rent to or share rent with a birth parent: Of the number of youth reported in Item 32, enter the number of youth who made arrangements to pay rent to or share rent with a birth parent. [Cells 148 - 150]
- c. Youth who have made arrangements to pay rent to or share rent with a current caregiver: Of the number of youth reported in Item 32, enter the number of youth who made arrangements to pay rent to or share rent with a current caregiver. [Cell 151 - 153]

**ITEM INSTRUCTIONS CONTINUED**

- d. Youth who have made arrangements to pay rent to or share rent with someone other than above: Of the number of youth reported in Item 32, enter the number of youth who made arrangements to pay rent to or share rent with someone other than above. *[Cells 154 - 156]*
33. Youth who have made arrangements to live free of rent with another individual (Item 33a plus 33b plus 33c): Enter the number of youth who have made arrangements to live free of rent with another individual. (Sum of Item 33a, 33b and 33c.) *[Cells 157 - 159]*
- a. Youth who have made arrangements to live free of rent with a birth parent: Of the number of youth reported in Item 33, enter the number of youth who have made arrangements to live free of rent with a birth parent. *[Cells 160 – 162]*
- b. Youth who have made arrangements to live free of rent with a current caregiver: Of the number of youth reported in Item 33, enter the number of youth who have made arrangements to live free of rent with a current caregiver. *[Cells 163 - 165]*
- c. Youth who have made arrangements to live free of rent with someone other than above: Of the number of youth reported in Item 33, enter the number of youth who have made arrangements to live free of rent with someone other than above. *[Cells 166 - 168]*
34. Youth who have made arrangements to live in supportive transitional housing (Items 34a plus 34b plus 34c plus 34d): Enter the number of youth who have made arrangements to live in supportive transitional housing. (Sum of Items 34a, 34b, 34c and 34d.) *[Cells 169 - 171]*
- a. Youth who have made arrangements to live in a certified Transitional Housing Program-Plus (THP-Plus) Housing: Of the youth reported in Item 34, enter the number who have made arrangements to live in certified, THP-Plus Program Housing (youth ages 18-21). *[Cells 172 - 174]*
- b. Youth who have made arrangements to live in Mental Health Program Housing: Of the youth reported in Item 34, enter the number of youth who have made arrangements to live in Mental Health Program Housing. *[Cells 175 - 177]*
- c. Youth who have made arrangements to live in County Operated Program Housing: Of the youth reported in Item 34, enter the number of youth who have made arrangements to live in County Operated Program Housing. *[Cells 178 - 180]*
- d. Youth who have made arrangements to live in a housing program other than those listed above: Of the youth reported in Item 34, youth who have made arrangements to live in a housing program other than those listed above. *[Cells 181 – 183]*
35. Youth who have made arrangements to receive subsidized housing (Items 35a plus 35b plus 35c): Enter the number of youth who have made arrangements to receive subsidized housing. (Sum of Items 35a, 35b and 35c.) *[Cells 184 - 186]*
- a. Youth who have made arrangements to receive Section 8: Of the youth reported in Item 35, enter the number of youth who have made arrangements to receive Section 8. *[Cells 187 - 189]*
- b. Youth who have made arrangements to receive Board and Care: Of the youth reported in Item 35, enter the number of youth who have made arrangements receive Board and Care. *[Cells 190 - 192]*

**ITEM INSTRUCTIONS CONTINUED**

- c. Youth who have made arrangements to receive subsidized housing other than those listed above: Of the youth reported in Item 35, enter the number of youth who have made arrangements to receive subsidized housing other than those listed above. *[Cells 193 - 195]*
36. Youth who have made arrangements to reside in an emergency shelter: Enter the number of youth who have made arrangements to reside in an emergency shelter. *[Cells 196 - 198]*
37. Youth who have made arrangements to live in a college dorm the next available quarter/semester: Enter the number of youth who have made arrangements to live in a college dorm the next available quarter/semester. *[Cells 199 - 201]*
38. Youth who are incarcerated/institutionalized: Enter the number of youth who are incarcerated/institutionalized. *[Cells 202 – 204]*
39. Youth who have made housing arrangements other than those listed above (e.g., military, Job Corps, California Conservation Corps or AmeriCorp): Enter the number of you who have made housing arrangements other than those listed above (e.g., military, Job Corps, California Conservation Corps or Americorp). *[Cells 205 – 207]*
40. Youth who have no housing arrangements: Enter the number of youth who have no housing arrangements. *[Cells 208 - 210]*
41. Youth for whom no information is known about their housing arrangements: Enter the number of youth for whom no information is known about their housing arrangements. *[Cells 211 - 213]*

**Part E. Health Care Insurance**

For Items 42 – 44 select all that apply for each youth.

42. Youth who have Medi-Cal: Enter the number of youth who have Medi-Cal. *[Cells 214 - 216]*
43. Youth who have applied for EXTENDED Medi-Cal: Enter the number of youth who have applied for EXTENDED Medi-Cal. *[Cells 217 - 219]*
44. Youth who have other medical insurance (other than Medi-Cal): Enter the number of youth who have other medical insurance (other than Medi-Cal). *[Cells 220 - 222]*
45. Youth who do not have medical insurance (Medi-Cal or other): Enter the number of youth who do not have medical insurance (Medi-Cal or other). *[Cells 223 - 225]*
46. Youth for whom no information is known about their health care insurance coverage: Enter the number of youth for whom no information is known about their health care insurance coverage. *[Cells 226 - 228]*

**Part F. Independent Living Program Services**

47. Youth who received Independent Living Services prior to aging out or legally emancipating from Foster Care: Enter the number of youth who received Independent Living Services prior to aging out or legally emancipating from Foster Care. Independent Living Program (ILP) services received are any ILP service in which a youth has begun participation. This includes services in which a child has participated in only a portion of the service. This does **not** include a planned service in which the youth has not begun participation. *[Cells 229 - 231]*

**ITEM INSTRUCTIONS CONTINUED****Part G. Permanency Connection**

Only one item in this section should be selected for each youth. The sum of Items 48, 49 and 50 must equal Item 3.

48. Youth who reported that they have a permanency connection to at least one adult that they can go to for support, advice and guidance (e.g., parents, current caregiver, or other adult): Enter the number of youth who have a permanency connection to at least one adult that they can go to for support, advice and guidance (parents, current caregiver, or other adult). *[Cells 232 - 234]*
49. Youth who reported that they have no permanency connection: Enter the number of youth who reported that they have no permanency connection. *[Cells 235 - 237]*
50. Youth for whom no information is known about their permanency connection: Enter the number of youth for whom no information is known about their permanency connection. *[Cells 238 - 240]*

**COMMENTS**

Use the Comments section to:

- Explain any major fluctuations in data.
- Provide any other comments the county determines necessary.

# Exit Outcomes for Youth Aging Out of Foster Care

## Quarterly Statistical Report

## VALIDATION RULES AND EDITS

CELLS 1 - 240: Each data cell in this report must be equal to or greater than 0. No data cells should be left blank.

### PART A. YOUTH AGING OUT OF FOSTER CARE

- CELL 1 **Cell 1** must equal to (Cell 4 plus Cell 16)
- CELL 2 **Cell 2** must equal to (Cell 5 plus Cell 17)
- CELL 3 **Cell 3** must equal to (Cell 6 plus Cell 18)
- CELL 4 **Cell 4** must equal to (Cell 7 plus Cell 10 plus Cell 13)
- CELL 5 **Cell 5** must equal to (Cell 8 plus Cell 11 plus Cell 14)
- CELL 6 **Cell 6** must equal to (Cell 9 plus Cell 12 plus Cell 15)
- CELL 16 **Cell 16** must equal to (Cell 19 plus Cell 22 plus Cell 25)
- CELL 17 **Cell 17** must equal to (Cell 20 plus Cell 23 plus Cell 26)
- CELL 18 **Cell 18** must equal to (Cell 21 plus Cell 24 plus Cell 27)
- CELL 31 **Cell 31** must equal to (Cell 1 minus Cell 28)  
**Cell 31** must be greater than or equal to Cells 34, 37, 40, 43, 46, 49, 52, 55, 58, 61, 64, 67, 70, 73, 76, 79, 82, 85, 88, 91, 94, 97, 100, 103, 106, 109, 112, 115, 118, 121, 124, 127, 130, 133, 136, 139, 142, 145, 148, 151, 154, 157, 160, 163, 166, 169, 172, 175, 178, 181, 184, 187, 190, 193, 196, 199, 202, 205, 208, 211, 214, 217, 220, 223 and 226.  
**Cell 31** must equal (Cell 232 plus Cell 235 plus Cell 238)
- CELL 32 **Cell 32** must equal to (Cell 2 minus Cell 29)  
**Cell 32** must be greater than or equal to Cells 35, 38, 41, 44, 47, 50, 53, 56, 59, 62, 65, 68, 71, 74, 77, 80, 83, 86, 89, 92, 95, 98, 101, 104, 107, 110, 113, 116, 119, 122, 125, 128, 131, 134, 137, 140, 143, 146, 149, 152, 155, 158, 161, 164, 167, 170, 173, 176, 179, 182, 185, 188, 191, 194, 197, 200, 203, 206, 209, 212, 215, 218, 221, 224 and 227.  
**Cell 32** must equal (Cell 233 plus Cell 236 plus Cell 239)
- CELL 33 **Cell 33** must equal to (Cell 3 minus Cell 30)  
**Cell 33** must be greater than or equal to Cells 36, 39, 42, 45, 48, 51, 54, 57, 60, 63, 66, 69, 72, 75, 78, 81, 84, 87, 90, 93, 96, 99, 102, 105, 108, 111, 114, 117, 120, 123, 126, 129, 132, 135, 138, 141, 144, 147, 150, 153, 156, 159, 162, 165, 168, 171, 174, 177, 180, 183, 186, 189, 192, 195, 198, 201, 204, 207, 210, 213, 216, 219, 222, 225 and 228.  
**Cell 33** must equal to (Cell 234 plus Cell 237 plus Cell 240)

### PART B. EDUCATION ATTAINMENT/ENROLLMENT

- CELL 34 **Cell 34** must equal to (Cell 37 plus Cell 40 plus Cell 43 plus 46)
- CELL 35 **Cell 35** must equal to (Cell 38 plus Cell 41 plus Cell 44 plus 47)
- CELL 36 **Cell 36** must equal to (Cell 39 plus Cell 42 plus Cell 45 plus 48)
- CELL 58 **Cell 58** must equal to (Cell 61 plus Cell 64)
- CELL 59 **Cell 59** must equal to (Cell 62 plus Cell 65)
- CELL 60 **Cell 60** must equal to (Cell 63 plus Cell 66)

### PART C. MEANS OF FINANCIAL SUPPORT AND/OR OTHER FINANCIAL RESOURCES

- CELL 76 **Cell 76** must equal to (Cell 79 plus Cell 82)
- CELL 77 **Cell 77** must equal to (Cell 80 plus Cell 83)
- CELL 78 **Cell 78** must equal to (Cell 81 plus Cell 84)

**PART D. HOUSING ARRANGEMENTS**

CELL 142 **Cell 142** must equal to (Cell 145 plus Cell 148 plus Cell 151 plus 154)  
CELL 143 **Cell 143** must equal to (Cell 146 plus Cell 149 plus Cell 152 plus 155)  
CELL 144 **Cell 144** must equal to (Cell 147 plus Cell 150 plus Cell 153 plus 156)  
CELL 157 **Cell 157** must equal to (Cell 160 plus Cell 163 plus Cell 166)  
CELL 158 **Cell 158** must equal to (Cell 161 plus Cell 164 plus Cell 167)  
CELL 159 **Cell 159** must equal to (Cell 162 plus Cell 165 plus Cell 168)  
CELL 169 **Cell 169** must equal to (Cell 172 plus Cell 175 plus Cell 178 plus 181)  
CELL 170 **Cell 170** must equal to (Cell 173 plus Cell 176 plus Cell 179 plus 182)  
CELL 171 **Cell 171** must equal to (Cell 174 plus Cell 177 plus Cell 180 plus 183)  
CELL 184 **Cell 184** must equal to (Cell 187 plus Cell 190 plus Cell 193)  
CELL 185 **Cell 185** must equal to (Cell 188 plus Cell 191 plus Cell 194)  
CELL 186 **Cell 186** must equal to (Cell 189 plus Cell 192 plus Cell 195)

**PART E. HEALTH CARE INSURANCE**

No validations.

**PART F. INDEPENDENT LIVING PROGRAM SERVICES**

No validations.

**PART G. PERMANENCY CONNECTION**

CELL 232 (**Cell 232** plus Cell 235 plus Cell 238) must equal Cell 31.  
CELL 233 (**Cell 233** plus Cell 236 plus Cell 239) must equal Cell 32.  
CELL 234 (**Cell 234** plus Cell 237 plus Cell 240) must equal Cell 33.  
CELL 235 (Cell 232 plus **Cell 235** plus Cell 238) must equal Cell 31.  
CELL 236 (Cell 233 plus **Cell 236** plus Cell 239) must equal Cell 32.  
CELL 237 (Cell 234 plus **Cell 237** plus Cell 240) must equal Cell 33.  
CELL 238 (Cell 232 plus Cell 235 plus **Cell 238**) must equal Cell 31.  
CELL 239 (Cell 233 plus Cell 236 plus **Cell 239**) must equal Cell 32.  
CELL 240 (Cell 234 plus Cell 237 plus **Cell 240**) must equal Cell 33.