



COUNTY OF SAN MATEO
Inter-Departmental Correspondence

Human Services Agency

DATE: March 20, 2007
BOARD MEETING DATE: March 27, 2007
SPECIAL NOTICE/HEARING: None
VOTE REQUIRED: Majority

TO: Honorable Board of Supervisors

FROM: Beverly Beasley Johnson, J.D., Director, Human Services Agency
Mark Lane, Director, Children and Family Services

SUBJECT: System Improvement Plan (SIP) Report and Update

RECOMMENDATION:

- 1) Accept the report on San Mateo County's SIP Implementation and Achievements for FYs 2004-2006; and
- 2) Adopt a Resolution to approve the FYs 2006-2009 System Improvement Plan.

VISION ALIGNMENT:

Commitment: Ensure basic health and safety for all.

Goal 6: All children grow up healthy in safe and supportive homes and neighborhoods.

The System Improvement Plan contributes to this commitment and goal by providing prevention and early intervention services to families in order to reduce abuse and neglect and reduce the number of families that become part of the child welfare system.

BACKGROUND:

San Mateo County is one of eleven California counties selected to pilot the SIP, a plan for redesigning the child welfare system with a focus on three priority areas – Safety; Permanence and Stability; and Permanence and Family Connections.

The primary component in the area of safety is Differential Response, an evidence-

based practice, which provides for an alternative response to child welfare hotline referrals when there is low to medium risk of abuse and/or neglect. These referrals are transferred to community partners, who provide prevention and early intervention case management services that are geared toward strengthening families and avoiding their future entry into the system.

Permanence and Stability provides for Team Decision Making, a team based case planning model which includes the significant adults in a child's life in the decision making processes surrounding placement.

Permanence and Family Connections emphasizes permanent, lifelong connections for every youth emancipating from the child welfare system and also provides for other additional supports for adolescent foster youth.

DISCUSSION:

The Human Services Agency is proud of the leadership role Children and Family Services has taken in California and of the achievements which have resulted from SIP implementation. Using extensive input from the community, strategies and milestones were developed in each area aimed at improving Children & Family Services performance in meeting AB 636 outcomes standards.

Significant improvement has resulted in each SIP area and the standards have been met or improvement has been shown in multiple AB 636 outcomes areas. The success of SIP has been a joint effort between the Human Services Agency and our community partners, and could not have been accomplished without the support of the San Mateo County Board of Supervisors.

The California Child and Family Services Review triennial review schedule calls for Human Services Agency to seek approval of the updated SIP which covers three fiscal years, from FYs 2006-2009. This plan expands on existing milestones and strategies and introduces additional milestones which reflect best practice in the field. Implementation of the Plan will make it possible for Children & Family Services to continue to improve performance and provide quality service to the children of San Mateo County.

FISCAL IMPACT:

There is no fiscal impact due to the approval of the FYs 2004-2006 SIP Implementation and Achievements Report; and there is no fiscal impact due to the approval of the FYs 2006-2009 SIP update.

RESOLUTION NO. _____

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

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**RESOLUTION AUTHORIZING THE APPROVAL OF SAN MATEO COUNTY'S
SYSTEM IMPROVEMENT PLAN (SIP) UPDATE FOR FYs 2006-09**

RESOLVED, by the Board of Supervisors of the County of San Mateo, State of California, that

WHEREAS, as of January 2004, State legislation (AB636) created the State-mandated child welfare outcome and accountability system called the California Children and Family Services Review (C-CFSR), which is the process used by the federal government to monitor and improve State Child Welfare Systems; and

WHEREAS, the C-CFSR requires Self-Assessments, System Improvement Plans and Peer Quality Case Reviews based on a triennial review process; and

WHEREAS, the Board has been presented with the AB636 Child Welfare System SIP for San Mateo County, for FYs 2006-09 and the Board has examined and accepted as to both form and content.

NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED that the Board of Supervisors accepts the AB636 Child Welfare SIP for San Mateo County for FYs 2006-09.

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prevention... protection... permanence

San Mateo County

SYSTEM IMPROVEMENT PLAN (S I P)

SIP Area One

Children are,
first and foremost,
protected from
abuse and neglect.



Accomplishments

Since **Differential Response** was implemented Countywide in July 2006, 2,000 families have been offered prevention/ early intervention services.



San Mateo County is the first California county of its size to implement Differential Response Countywide.



SIP Area Two

Children have
permanence
and stability
in their living
situations.



Accomplishments

Children in San Mateo County experienced a 17% reduction in removal from their homes between 2003 and 2005.



San Mateo County re-entry rates range from 17.6% to 11.6%. The current rate is 14.1%.



Children are placed in more appropriate and generally lower levels of care.

Year	%Youth in Group Homes	%Youth in Guardian, Relative or Small Family Home
2003	12.0%	32.0%
2004	11.4%	34.0%
2005	8.7%	35.4%

SIP Area Three



The family relationships and connections of children will be preserved as appropriate.

Accomplishments

Over 50 family members or other significant adults in a child's life have been located through computer searches.



Youth emancipating from foster care have received supports and services.

- ★ Over 60 youth have received assistance from Housing Advocates
- ★ 45 youth are currently receiving housing stipends
- ★ ILP services are being offered to 14- and 15-year-olds



*Due to the efforts
of Agency staff and our
community partners,
and to the support of the
Board of Supervisors,
the System Improvement Plan
is changing the lives of
children and families
In San Mateo County.*

San Mateo County Children & Family Services
System Improvement Plan (SIP)
FY06/07 – FY08/09

<p>SIP Priority Area One: Safety/Service Array Outcome/Systemic Factor: Children are, first and foremost, protected from abuse and neglect. (Refer to Outcome Measures 1A through 2C)</p>					
<p>County's Current Performance: In San Mateo County prior to Differential Response implementation, 95% of families referred to Children & Family Services were not formally engaged in change-oriented services. This statistic indicated a need to increase access to preventive and supportive services, particularly community-based resources for at-risk and vulnerable populations. In order to meet this need, San Mateo County implemented Differential Response in three phases, with full Countywide implementation achieved in July 2006. Since that time, an average of more than 250 referrals per month have been transferred from Children & Family Services to the community based organizations with which the Agency partners. Families referred receive multiple services to help meet their needs and lower their risk of future involvement with the Agency.</p>					
<p>Improvement Goal 1.0 Design and pilot three paths of differential response to reports of child abuse and neglect.</p>					
<p>Strategy 1.1 Provide ongoing Differential Response services Countywide through collaboration and contracts with community based organizations. Use data analysis to continuously evaluate and improve upon outcomes.</p>			<p>Strategy Rationale Implementing three paths of differential service response for families who become known through the Children & Family Services hotline has allowed at-risk families to access preventive and support services. These services are designed to prevent escalation of potential child safety risk to a level warranting Children & Family Services intervention. Data collected and analyzed can be used to measure client and performance outcomes related to Differential Response.</p>		
Milestone	<p>1.1.1 Begin using data generated by CARE system to analyze outcomes including number of new referrals, number of referrals active and closed, number of pre- and post-FASTs completed, and engagement rates. Use information obtained to develop management actions as needed.</p>	Anticipated Completion Date	06/30/09	Assigned To	<p>Differential Response Manager, County Breakthrough Series Collaborative, Children & Family Services Management Team</p>
	<p>1.1.2 Continue to identify data needs and incorporate into reporting format.</p>		06/03/09		<p>County Breakthrough Series Collaborative, Business Systems Group</p>

Milestone	1.1.3 Continue to incorporate enhancements in CARE system based on identified priorities and Business Systems Group timeline. Update timeline for enhancements based on technical staff availability.	Anticipated Completion Date	12/31/07	Assigned To	Business Systems Group, County Breakthrough Series Collaborative, Differential Response Manager
	1.1.4 Analyze results of Differential Response Liaison time study in order to evaluate number of positions needed. As Differential Response Liaisons become more efficient in facilitating Multidisciplinary Team meetings and performing CARE related tasks, place increased emphasis on coordination of outreach efforts within the community.		12/31/07		Differential Response Manager, Children & Family Services Management Team
Strategy 1.2 Establish forum to develop and review differential response practice guidelines and protocols that promote holistic, family-centered team-based case planning and service delivery.			Strategy Rationale Successful program implementation depends on a shared understanding and clear and consistent application of policies and protocols. One way to accomplish this is to provide a forum for HSA staff and community partners to participate in development, review and refinement of policy and protocol, realizing that as implementation progresses, the purpose and role of affiliated teams and committees will evolve in order to continue to meet program needs.		
Milestone	1.2.1 a) Use Breakthrough Series Collaborative meetings as a forum for frequent and ongoing communication with community partners who provide Differential Response case management services. Research best practices for discussion and consideration. b) Redefine the focus and role of the existing group to that of a community advisory council on Differential Response policy and protocol. Begin by sharing joint leadership between Agency and community partners, with the goal of evolving into a community led, community-driven collaborative.	Anticipated Completion Date	a) 06/30/09 b) 12/31/07	Assigned To	County Breakthrough Series Collaborative, Differential Response Manager

Strategy 1.3 Continue to re-evaluate Differential Response community and Agency staff training needs.		Strategy Rationale In order to successfully maintain the integrity of the Differential Response program, Agency and community partner staff at all levels must be appropriately informed of Differential Response policies, procedures and best practices.			
Milestone	1.3.1 Work in collaboration with Agency’s Human Resource Department to develop, schedule and conduct Differential Response trainings on a quarterly or as-needed basis for all new Agency and community staff involved in providing Differential Response services. Incorporate related training modules developed by community partners into Differential Response training curriculum.	Anticipated Completion Date	06/30/09	Assigned To	Human Resources Development, County Breakthrough Series Collaborative, Youth & Family Enrichment Services, Edgewood Center for Families, City of Daly City
	1.3.2 Ensure that systems improvement information is shared and appropriate training is provided to all Children and Family Services staff and Agency staff in other departments. Use multiple venues to continually update Agency and partner staff as changes occur in strategies and/or procedures and as data and data analysis becomes available.		06/30/09		Differential Response Manager, Children & Family Services Management Team, Public Information Officer, Children & Family Services Policy Team, Social Work Supervisors
	1.3.3 Develop process and identify responsibility for incorporating changes in policies and practices into the Child Welfare Services on-line handbook and confirm that community partners have a similar process for informing their DR staff of changes and for incorporating changes into their written materials.		3/31/07		Business Systems Group, Human Services Program Manager I, Differential Response Manager
Strategy 1.4 a) Develop three-year project plan that addresses resources needed to move from pilot to full implementation; ensure that plan is revised and updated as needed; and continue to obtain Board of Supervisors approval based on California Child and Family Services Triennial Review Schedule.		Strategy Rationale A multi-year project plan is needed to develop and track projections of referral response path activity, and corresponding shifts in current CPS caseload and service needs. The plan should also identify funds needed to support system start-up including building the service array, and methods of re-directing or shifting funds to community resources and community-based services over time.			

Milestone	1.4.1 (a.) Building upon interim data collection system, create multi-functional web-based data collection system to be used in analyzing staffing patterns, program effectiveness, outcomes and community involvement, as well as for use in performing functions related to team based case planning processes and data. (b.) Determine distribution channel for collected data and data analysis with appropriate sharing of information to the community.	Anticipated Completion Date	a) 06/30/09 b) 06/30/09	Assigned To	Children & Family Services Director, Agency Business Systems Group, County Breakthrough Series Collaborative
Strategy 1.5 Understand Differential Response in the context of an overarching system of prevention and early intervention services which are offered by the Agency and throughout the community to assist families that are struggling and at-risk.			Strategy Rationale Understanding the relationship and interconnectivity of Differential Response to other services offered by the Agency and within the community increases awareness of common goals and fosters mutual support and integration among programs.		
Milestone	1.5.1 Support efforts to sustain the Family Resource Center network and continue to support a community school approach, both of which are primary components of the Agency's overall array of prevention and early intervention services.	Anticipated Completion Date	06/30/09	Assigned To	Human Services Agency Executive Team
	1.5.2 Integrate plans/processes throughout the Agency and the County in order to reduce duplication of services.		06/30/09		Human Services Agency Executive Team
	1.5.3 Incorporate a philosophy of prevention and early intervention in the development of ongoing Children & Family Services Performance Quality Improvement plans.		06/30/09		Children & Family Services Management Team, Research and Planning

Milestone	1.54 Use results of Peer Quality Case Review to identify additional recommendations for implementation.	Anticipated Completion Date	06/30/07	Assigned To	Children & Family Services Management Team
	1.55 Working jointly with other Comprehensive Assessment Tool counties, continue to refine the tool; implement fully in San Mateo County.		12/31/07		Children & Family Services Training Coordinator, Children & Family Services Management Team
Strategy 1.6 Continue to employ management actions designed to improve the Agency's performance in the areas of referral response time and timely monthly social worker visits.			Strategy Rationale Timely monthly social worker visits are critical in ensuring that children are cared for appropriately and safely. Although San Mateo County data reflects a slow but steady increase in the percentage of timely monthly visits, the State standard is not being met.		
Milestone	1.6.1 a) Continue use of the internal AB636 2C tracking system which includes supervisory review and reporting on each non-compliant monthly social worker visit. b) Distribute and discuss report results at CWS Policy Team meetings on a quarterly basis. Hold managers accountable for ensuring supervisory compliance with the review process. c) Continue to distribute annual CWS/CMS Compliance Deadline calendar to all staff. d) Revise training sheet to include additional data entry instructions and distribute to all staff.	Anticipated Completion Date	a) 12/31/07 b) 12/31/07 c) 03/31/07 d) 06/30/07	Assigned To	Children & Family Services Management Team, IT Analyst, Human Services Analyst II
	1.6.2 Continue to respond in a timely manner to immediate referrals. Develop and implement management actions which will help increase the compliance rate for 10-day response referrals so that the standard is consistently met.		06/30/09		Children & Family Services Management Team and staff
Improvement Goal 2.0 Assure appropriate linkages to mental health assessment and mental health treatment services for children and families.					

Strategy 2.1 Assess capacity and availability of mental health services for children and their families. Analyze linkages between mental health services, Children & Family services and AOD services.		Strategy Rationale Assessing availability of mental health services will provide a comprehensive understanding of available services and help in identifying gaps. Results will provide a better understanding of our existing service array to help improve access to services by families at risk.			
Milestone	2.1.1 Coordinate with Health Services in the creation of a report recommending improvements and submit to appropriate teams and committees for approval. Develop plan to implement approved recommendations.	Anticipated Completion Date	12/31/07	Assigned To	Children & Family Services Management Team, Health Services
	2.1.2 Develop and disseminate information sheet on referral processes, eligibility criteria and current capacity and availability of mental health, dual diagnosis and substance abuse assessment and treatment services.		06/30/08		Children & Family Services Management Team, Health Services
	2.1.3 Distribute foundation funding to Differential Response community partners for use in hiring mental health clinicians to provide counseling services to Differential Response families.		10/31/08		Agency Financial Services staff
	2.1.4 Continue to work with the Public-Private Community Partnership for Child Welfare to leverage additional and ongoing funding to support Differential Response mental health service provision. Continue to develop strategies to expand early intervention mental health services (e.g. considering mentoring to supplement counseling services).		06/30/09		Children & Family Services Management Team, Planning and Evaluation staff, Prevention/Early Intervention Director, Integrated Services Manager, Prevention Manager
Strategy 2.2 Use the Agency-wide accreditation process as a means for improving Priority Area One-related services by complying with relevant accreditation requirements		Strategy Rationale Agency-wide accreditation efforts will provide an opportunity for examination of policies, procedures and service provision in order to develop and implement improvements based on accreditation requirements which reflect best practices in the social services field.			

Milestone	2.2.1 Participate as needed on accreditation self-study teams in order to identify related areas; assist in the development of policy and/or procedural improvements necessary to meet accreditation requirements; and assist in the implementation of improvements.	Anticipated Completion Date	05/31/08	Assigned To	Children & Family Services Management Team; Priority Area One Project Manager; identified staff
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<p>Describe systemic changes needed to further support the improvement goals.</p> <ul style="list-style-type: none"> • Improve communications among all stakeholders in the child welfare system. A communications plan should be developed and implemented to increase access to information about the child welfare system; this could include establishing a list-serve for on-line communication among families, workers and others (e.g., policy updates, FAQ bulletin). • Improve collaboration and service integration among County departments and community-based agencies serving same families. • Build information technology capacity in County and community partner organizations to collect data and track outcomes. • Develop cultural competence of all participants in children’s service system. • Develop strategies promoting use of blended, flexible funding to maximize resources for families with multiple needs. • Strengthen working relationships/partnerships among families, community organizations and public agency staff (e.g., Human Services, Probation, Health, and Courts). • Improve methods of service contracting with public and private agencies: identify different contracting models, examine approaches used, tested, proposed in different San Mateo County departments or other counties; hold discussion with contracting partner agencies to obtain feedback on current contracting process (what does/doesn’t work) and proposed models. • Create formal mechanism for collaborative planning about service delivery among executive management staff of HSA, Health Services, Probation Departments and community partner agencies. • Improve community cooperation and collaboration to achieve shared goals for children and families. • Increase availability and affordability of child care. • Increase availability of pre-school sites capable of serving children with behavioral difficulties. • Increase availability and funding to support alcohol and other drug prevention and treatment services, especially gender appropriate service. 					
<p>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</p> <ul style="list-style-type: none"> • Training on cultural competence – the impact cultural norms have on family engagement and participation in services. • Training for service providers and family caregivers on understanding and managing behavioral challenges of abused, neglected children. • Training for service providers and families on age-appropriate child behavior and child development. • Training for all partners (e.g., birth parents, foster parents, kin caregivers, CWS staff, Court, Probation, Counsel, and the Sheriff’s department) in child welfare practice, protocol, roles and responsibilities. • Training on working collaboratively, shared case management. • Training for service providers, partners, and families on CPS reporting, CPS function and child welfare services, differential response 					

protocols, particularly on how the system operates (legal requirements/timeframes) and case planning processes.

- Training on identifying risk, assessment, and family engagement.
- Training on confidentiality, HIPPA regulations, and appropriate use of releases.

Identify roles of the other partners in achieving the improvement goals.

All current stakeholders should engage their staff in this effort. All stakeholders and their staff should reach out to potential partners to communicate and gather support for implementing these system improvement goals, including:

Greater involvement from healthcare providers/practitioners, Mental Health, AOD, and schools in case planning processes.

- Churches or faith-based groups, such as Help One Child and Jeremiah's Promise, can support resource development for children, adolescents and parents.
- 4Cs (especially given their work in training license exempt child care providers) and pre-school programs can help support and should participate in team-based case planning.
- Members of the media (e.g., special series of articles, ads).
- Law enforcement (neighborhood district offices, community programs and policing programs).
- Schools, with the focus on individual schools rather than the County Office of Education, and their after school programs.
- Churches; the faith community.
- Existing advisory boards and commissions.
- Parks and Recreation offices.
- Ethnic and cultural associations.
- Peninsula Community Foundation – its neighborhood grants program staff and grantees.
- Rotary, Kiwanis, Junior League, Elks and other clubs, associations.
- Homeowners' associations.
- Community/Neighborhood Businesses.
- Sports teams.

Senior centers; many seniors provide child care for their relatives.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

- Confidentiality and appropriate use of parental release forms.
- HIPAA implications.

<p>SIP Priority Area Two: Permanence and Stability Outcome/Systemic Factor: Children have permanence and stability in their living situations without increasing entry into foster care. (Refer to AB636 Outcome Measures 3B, 3F)</p>					
<p>County's Current Performance: The most recent data available (extracted April-May 2006) indicates that the percentage of children who re-enter care in San Mateo County is currently at 12.6%. This is a significant change from the rate at the time the initial System Improvement Plan was developed when the San Mateo County rate was 17.6%. Although San Mateo County's rate is still greater than the Federal standard of \leq 8.6%, multiple efforts used to identify factors related to re-entry and development of best practices to help reduce the re-entry rate appear to be successful. San Mateo continues to have a higher percentage of children who are reunified with their families within one year than California as a whole and continues to make efforts to improve stability for children who return to their families, by increasing family and community participation in case planning and assuring that resources continue to be available to support families after children return home.</p>					
<p>Improvement Goal 1.0 Improve team-based case planning processes.</p>					
<p>Strategy 1. 1 Review, revise and implement policies and protocols for each type of team-based case planning to make improvements in operations and to ensure that best practices are being used in placement decisions, in order to prevent re-entry into the child welfare system.</p>			<p>Strategy Rationale Policies and protocols are currently under review and should be revised as needed to reflect changes that support participation in case planning. Policies and protocols should also be reviewed to assure they are being fully implemented.</p>		
Milestone	<p>1.1.1 Evaluate effectiveness of Team Decision Making forms and materials and use feedback to revise and improve materials as appropriate.</p>	Anticipated Completion Date	6/30/07	Assigned To	Stability and Permanence Project Managers, Team Decision Making Workgroup, Public Information Officer
	<p>1.1.2 Update and revise Team Decision Making brochure as needed. Continue to distribute brochures throughout the community.</p>		06/30/09		Team Decision Making Workgroup
	<p>1.1.3 Using the training offered to Team Decision Making facilitators, expand training audience to include Family Self Sufficiency Team facilitators.</p>		08/31/07		Team Decision Making Workgroup, Children & Family Services Training Coordinator
<p>Strategy 1. 2 Review strengths and challenges of current team-based case planning groups and identify ways to increase participation and improve outcomes.</p>			<p>Strategy Rationale: San Mateo County has implemented eight forums for team-based case planning (Team Decision Making, Permanence Committee, Placement Review Board, Family Self Sufficiency Teams, etc.). Reviewing processes, resource needs, and results of team-based case planning will help identify practices that work most effectively to support stability for children and families.</p>		

Milestone	<p>1.2.1 Following review of Sphere Team Based Case Planning report by Team Based Case Planning Workgroup members, discuss and collect feedback on report recommendations. Make additional recommendations as needed and acquire approval through appropriate channels.</p>	Anticipated Completion Date	06/30/08	Assigned To	Stability and Permanence Project Managers, Children & Family Services Policy Team, Children & Family Services Management Team
	<p>1.2.2 a) Plan and implement recommendation pilots including: - Conducting Team Decision Making meetings three months following the reunification of children with their families to assess status of reunification and to make early identification of potential issues and/or concerns which, when addressed, will help to prevent re-entry into the child welfare system - Combining Team Decision Making meetings with Family Self Sufficiency Team meetings</p> <p>b) Evaluate outcomes of pilots.</p>		<p>a) 12/31/07</p> <p>b) 6/30/08</p>		Team Based Case Planning Workgroup, Stability and Permanence Project Manager
	<p>1.2.2 Develop action steps to support recommendations that include:</p> <ul style="list-style-type: none"> - Implementation of any approved revisions in team-based case planning structure - Revision of any policies/protocols for each meeting that reflect approved recommendations - Implementation of any revisions in policies/protocols that reflect approved recommendations 		12/31/08		Stability and Permanence Project Managers, Children & Family Services Policy Team, Children & Family Services Management Team, Alcohol and Other Drugs staff, other Agency staff
	<p>1.2.3 Expand membership of Team Based Case Planning Workgroup to include community partners and foster youth.</p>		06/30/07		Stability and Permanence Project Managers, Team Based Case Planning workgroup

	<p>1.2.3 Expand Team Decision Making to include the following additional representation: - asset coaches - Citizens' Review Panel member Provide appropriate training to additional representatives.</p>		<p>12/31/07 10/31/07</p>		<p>Stability and Permanence Project Managers, TDM Workgroup</p>
	<p>1.2.4 Engage Citizens' Review Panel to act as Team Decision Making quality assurance advisory group</p>		<p>12/31/07</p>		<p>Stability and Permanence Project Managers</p>
	<p>1.2.5 Enhance data collection methods used for Team Decision Making. Collect and analyze data on client and performance outcomes. Use information to develop any needed management actions with a focus on actions leading to prevention of re-entry into the child welfare system.</p>		<p>06/30/09</p>		<p>Stability and Permanence Project Managers, Children & Family Services Management Team</p>
<p>Strategy 1. 3 Assess needs of staff, community partners, parents, and youth for supports that increase stability for families after children return home from foster care.</p>			<p>Strategy Rationale Many factors affect successful reunification of children with their families. It is important that we learn whether there are specific ways to improve our practice and tailor services to better meet the needs of families in San Mateo County during the case planning and post-reunification process.</p>		
<p>Milestone</p>	<p>1.3.1 Explore the possible development of a liaison position to centralize and coordinate team-based case planning processes Agency-wide.</p>	<p>Anticipated Completion</p>	<p>12/31/07</p>	<p>Assigned To</p>	<p>Children & Family Services Management Team, Executive Team</p>

	<p>1.3.2 a) Plan bi-monthly meetings with community partners as a forum for continuing to build upon relationships and for soliciting feedback on operations, policies and protocols, and challenges. b) Prepare a clear, concise, community-focused description of team-based case planning and the role community partners can play in these meetings. Create a venue for community partner feedback regarding whether they feel that their voice is being heard during the team decision making process.</p>		<p>a) 12/31/08 b) 6/30/08</p>		<p>Stability and Permanence Project Managers, Team Decision Making Workgroup</p>
<p>Milestone</p>	<p>1.3.3 Explore ways to leverage funding for aftercare services, e.g. possible collaboration with Public-Private Community Partnership</p>	<p>Anticipated Completion Date</p>	<p>12/31/07</p>	<p>Assigned To</p>	<p>Stability and Permanence Project Managers, Children & Family Services Management Team</p>
	<p>1.3.4 Work with State group to change language and forms to make case plans more user-friendly for children and families.</p>		<p>12/31/08</p>		<p>Children & Family Services Management Team</p>
	<p>1.3.5 Provide social work staff with placement training to enable them to make thoughtful and informed recommendations to Team Decision Making groups which are based on current best practice.</p>		<p>12/31/08</p>		<p>Children & Family Services Management Team, Stability and Permanence Project Managers</p>
<p>Strategy 1.4 Use the Agency-wide accreditation process as a means for improving Priority Area Two – related services by complying with relevant accreditation requirements.</p>		<p>Strategy Rationale Agency-wide accreditation efforts will provide an opportunity for examination of p[olicies, procedures and service provision in order to develop and implement improvements based on accreditation requirements which reflect best practices in the social services field.</p>			
<p>Milestone</p>	<p>1.4.1 Participate as needed on accreditation self-study teams in order to identify Area Two-related standards; assist in the development of policy and/or procedural improvements necessary to meet accreditation requirements; and assist in the implementation of improvements.</p>	<p>Date</p>	<p>05/31/08</p>	<p>Assigned To</p>	<p>Children & Family Services Management Team; Priority Area Two Project Manager; identified staff</p>
<p>Describe systemic changes needed to further support the improvement goal.</p>					

<ul style="list-style-type: none"> • Improve communications among all stakeholders in the child welfare system. A communications plan should be developed and implemented to increase access to information about the child welfare system; this could include establishing a list-serve for on-line communication among families, workers and others (e.g., policy updates, FAQ bulletin). • Improve collaboration and service integration among County departments and community-based agencies serving same families. • Build information technology capacity in County and community partner organizations to collect data and track outcomes. • Develop cultural competence of all participants in children’s service system. • Develop strategies promoting use of blended, flexible funding to maximize resources for families with multiple needs. • Strengthen working relationships/partnerships among families, community organizations and public agency staff (e.g., Human Services, Probation, Health, and Courts). • Integrate evidence-based practice recommendations in all policies, protocols to support best practices in service delivery. • Expand service network through greater involvement of non-traditional community resources that support children and families.
<p>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</p> <ul style="list-style-type: none"> • Training on cultural competence – the impact cultural norms have on family engagement and participation in services. • Training for service providers and family caregivers on understanding and managing behavioral challenges of abused, neglected children. • Training for service providers and families on age-appropriate child behavior and child development. • Training for all partners (e.g., birth parents, foster parents, kin caregivers, CWS staff, Court, Probation, Counsel, and the Sheriff’s department) in child welfare practice, protocol, roles and responsibilities. • Training on working collaboratively, shared case management. • Training for service providers, partners, and families on CPS reporting, CPS function and child welfare services, and differential response protocols, particularly on how the system operates (legal requirements/timeframes) and case planning processes. • Training in team-based case planning and team-based decision-making participation and protocols. • Training for community service partners in strength-based assessment and case planning skills. • Training for social work supervisors that will encourage consistency in conducting assessments and applying decision-making criteria, especially in cases where children are returning home.
<p>Identify roles of the other partners in achieving the improvement goals.</p> <ul style="list-style-type: none"> • Greater involvement from healthcare providers/practitioners, Mental Health, AOD, and schools in case planning processes. • Churches or faith-based groups, such as Help One Child and Jeremiah’s Promise, can support resource development for children, adolescents and parents. • 4Cs (especially given their work in training license exempt child care providers) and pre-school programs can help support and should participate in team-based case planning. • Improve current contracting approach to support participation in team-based case planning. • All participants’ roles need to be clearly defined. • All participants should reinforce sense of shared undertaking by communicating to others that they are part of the system.
<p>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</p> <ul style="list-style-type: none"> • Confidentiality and appropriate use of parental release forms. • HIPAA implications.

SIP Priority Area Three: Permanence and Family Connections					
Outcome/Systemic Factor: The family relationships and connections of children will be preserved as appropriate. (Refer to Outcome Measure 4B)					
County's Current Performance: In 2003, more San Mateo County children were placed in group homes (10%) than the State average (7%), and fewer were placed with relatives (26% vs. 39%). The most recent reporting period (July05-June06) reflects a decrease in group home placements to 6%, which is the same as the Statewide rate. The percent of children placed with relatives has decreased slightly to 25%, which is lower than the Statewide rate of 39%. San Mateo County's share of foster care youth (11-17 years) is higher at 54% than the statewide percentage of 47%. Experience shows it is more difficult to recruit kin and foster resource families to care for adolescents and children with behavioral problems. Based on strategies recommended by resource parents and community members, efforts initiated in the first year of System Improvement Plan implementation will continue and will be expanded upon during the three fiscal years included in this plan.					
Improvement Goal 1.0 Improve supports for social workers, foster and kin parents, and birth parents to help keep youth in family care placements.					
Strategy 1. 1 Increase access to information about the child welfare system, including how it works, requirements, and available resources			Strategy Rationale The self assessment indicated a need for basic information about child and family serving systems. Specific requests for support included ways to contact other people when questions about how to support youth arise. Encouraging informal and formal communications can help families locate resources that will promote stability and access to appropriate support.		
Milestone	1.1.1 Review foster parent training curriculum. Identify needed changes/updates. Develop revised curriculum.	Anticipated Completion Date	12/31/07	Assigned To	To be determined by C&FS Director
	1.1.2 Publicize and conduct two training sessions on how to discuss with youth the best practice strategies for locating and developing lifelong connections. Involve and engage multi-ethnic presenters and participants in the information sharing process.		12/31/07		Adolescent Services Manager, Permanence Subcommittee
Strategy 1. 2 Continue to expand resources needed by			Strategy Rationale Emancipating and emancipated adolescents		

<p>adolescents (pre- and post-emancipation) to support their placement in least restrictive care settings and preserve family connections.</p>		<p>have specific needs, as do the parents and relatives who care for them. Several initiatives have identified support needs that can promote permanent family placements and transition to successful independent adulthood. Further work must be done to coordinate these efforts; specifically, to develop supports identified as priorities.</p>			
Milestone	<p>1.2.1 Continue to explore transitional housing options for emancipating youth, including procurement of a building to house emancipated adolescents.</p>	Anticipated Completion Date	<p>06/30/09</p>	Assigned To	<p>Adolescent Services Manager, Children & Family Services Director, Office of Housing</p>
	<p>1.2.2 Continue to implement and expand housing stipend program in order to enhance the ability of emancipating youth to achieve self-sufficiency. Integrate with existing programs and services.</p>		<p>06/30/07</p>		<p>Housing Advocate, Adolescent Services Manager</p>
	<p>1.2.3 Create and implement an Individual Development Accounts Program to aid emancipating youth in developing lifelong skills in financial management.</p>		<p>06/30/07</p>		<p>Adolescent Services Manager, Human Services Analyst II</p>
	<p>1.2.4 Continue to contract for internet research to locate permanent connections for adolescents.</p>		<p>06/30/09</p>		<p>Adolescent Services Manager</p>
	<p>1.2.5 Continue to offer Independent Living Program services to 14 and 15 year old youth. Increase the number of youth receiving services.</p>		<p>06/30/09</p>		<p>Adolescent Services Manager, Independent Living Program staff, College of San Mateo</p>
	<p>1.2.6 Increase Asset Coaching staff to assist youth in understanding and acquiring internal and external developmental assets.</p>		<p>06/30/08</p>		<p>Children & Family Services Director, Adolescent Services Manager</p>

	1.2.7 Annually identify youth for permanence efforts.		6/30/07 6/30/08 6/30/09		Adolescent Services Manager
Strategy 1.3 Enhance resources needed by birth, kin, foster, and adoptive parents to support stable family connections.			Strategy Rationale Greater involvement between foster parents, kin caregivers and birth parents is needed to promote family connections. Encouraging shared responsibility for developing and accessing supports needed to achieve successful outcomes is one way to achieve this goal.		
Milestone	1.3.1 Continue to use Foster Parents of Adolescents Subcommittee as a training forum for foster parents.	Date	06/30/09	Assigned To	Adolescent Services Manager
Improvement Goal 2.0 Maintain existing and recruit new foster, kin, and adoptive homes.					
Strategy 2.1 Improve program to maintain and support resource families.			Strategy Rationale HSA and foster parents have begun to address the issues of greatest concern to foster parents and improve supports. However, more can be done to build a retention program that better addresses resource families' concerns.		
Milestone	2.1.1 Continue to collaborate with the California Youth Permanency Project in developing programs to achieve permanency for more youth.	Date	06/30/09	Assigned To	Adolescent Services Manager
	2.1.2 Standardize practices which explore permanent placement for all youth.		6/30/09		Children & Family Services Management Team

	2.1.3 Examine Intake infrastructure and practice as it relates to permanent placement for all children in the foster care system. Make recommendations for improvements.		12/31/07		Permanency Committee
	2.1.4 Explore Efforts to Outcomes system as a possible way of tracking housing, Fostering the Future and aftercare outcomes. Explore feasibility of making available system to staff.		12/31/07		Children & Family Services Director, Adolescent Services Manager, Business Systems Group
Strategy 2.2 Recruit resource families who can meet adolescents' unique needs.			Strategy Rationale Recruiting Resource Families within our county who can meet these needs will help preserve family connections and increase placement in the appropriate least restrictive care setting.		
Milestone	2.2.1 Continue to develop and distribute marketing materials that focus on adolescents and resources available to caregivers.	Date	06/30/09	Assigned To	Public Information Officer, HSA Training Coordinator
	2.2.2 Include Adolescent Panels at every foster parent orientation.		06/30/09		Children & Family Services staff
	2.2.3 Continue to Strengthen and expand the Foster Parents of Adolescents Subcommittee and include members in strategic planning.		06/30/09		Adolescent Services Manager
Strategy 2.3 Build stronger partnerships among foster families and social workers through holding facilitated conversations to achieve a shared understanding of the expectations that define the working relationships and culture of the child welfare system, and monitor whether these have been met.			Strategy Rationale In order to improve retention and recruitment of resource families, the organizational culture of the child welfare system must shift to promote true partnership. Preliminary work has already been done by CW social workers and foster parents to determine what will need		

			to be changed, when, how and by whom. This strategy will build upon this work and serve as a model for culture change throughout the entire system.
	2.3.1 Conduct two additional partnership conferences in FY06/07 in order to continue strengthening relationships between foster parents and C&FS staff. Evaluate need for additional conferences in subsequent years.		12/31/07 Children & Family Services Managers and Staff
Strategy 2.4 Use the Agency-wide accreditation process as a means for improving Priority Area One-related services by complying with relevant accreditation requirements		Strategy Rationale Agency-wide accreditation efforts will provide an opportunity for examination of policies, procedures and service provision in order to develop and implement improvements based on accreditation requirements which reflect best practices in the social services field.	
	2.4.1 Participate as needed on accreditation self-study teams in order to identify related areas; assist in the development of policy and/or procedural improvements necessary to meet accreditation requirements; and assist in the implementation of improvements.		05/30/08 Children & Family Services Management Team; Priority Area Three Project Manager; identified staff
<p>Describe systemic changes needed to further support the improvement goal.</p> <ul style="list-style-type: none"> • Improve communications among all stakeholders in the child welfare system. A communications plan should be developed and implemented to increase access to information about the child welfare system; this could include establishing a list-serve for on-line communication among families, workers and others (e.g., policy updates, FAQ bulletin). • Improve collaboration and service integration among County departments and community-based agencies serving same families. • Build information technology capacity in County and community partner organizations to collect data and track outcomes. • Develop cultural competence of all participants in children's service system. • Develop strategies promoting use of blended, flexible funding to maximize resources for families with multiple needs. • Strengthen working relationships/partnerships among families, community organizations and public agency staff (e.g., Human Services, Probation, Health, and Courts). 			

- Align reimbursement levels for AAP, foster care, guardianship, kinship care support.
- Improve access to adoption supports: assure post-adoption eligibility for benefits and financial support for adopted foster youth (medical assistance, school financial aid).

Describe educational/training needs (including technical assistance) to achieve the improvement goals.

- Training on cultural competence – the impact cultural norms have on family engagement and participation in services.
- Training for service providers and family caregivers on understanding and managing behavioral challenges of abused, neglected children.
- Training for service providers and families on age-appropriate child behavior and child development.
- Training for all partners (e.g., birth parents, foster parents, kin caregivers, CWS staff, Court, Probation, Counsel, and the Sheriff's department) in child welfare practice, protocol, roles and responsibilities.
- Training on working collaboratively, shared case management.
- Training for service providers, partners, and families on CPS reporting, CPS function and child welfare services, differential response protocols, particularly on how the system operates (legal requirements/timeframes) and case planning processes.
- Develop and provide training for families on how to support children/youth with special needs.
- Deliver training necessary to assure CWS staff, partners and families are clear about roles, responsibilities, and dispute resolution alternatives in each phase of child welfare case activity (referral/intake, placement, court hearings, case planning, reunification, adoption, emancipation).
- Increase access to training for birth parents, foster parents, kin caregivers, Court, Probation, counsel, and the Sheriff's department in child welfare practice, protocol, roles and obligations. Provide joint training sessions for above groups to improve understanding and collaborative practice.
- Develop technical assistance or training for parents and service provider staff on how to access educational supports for youth (e.g., IEPs, SSTs). Incorporate staff and resource parents. (The County Office of Education provides some of this training already).
- Develop and provide training for families on how to support adolescents (topics on dealing with difficult behavior, alcohol and drug use, sexual identity and orientation).
- Increase availability of training for service providers on child related issues - Child Development, Children with Mental Health Issues and Developmental Delays (including DSM IV), Infant/Child Abuse, Physical and Sexual Abuse (including terminology), Working with Adolescents and Teens, Transgender Identity).
- Increase availability of training for service providers on parent related issues – working with foster parents as allies, Difficult Situations with Parents; parenting skills.
- Y.O.U.T.H. Training (developed by former foster youth for social workers, service providers).
- Resource parent training – tailor training to the specific needs of foster and foster-adopt parents (target the audience).

Identify roles of the other partners in achieving the improvement goals.

- Greater involvement from healthcare providers/practitioners, Mental Health, AOD, and schools in case planning processes.
- Churches or faith-based groups, such as Help One Child and Jeremiah's Promise, can support resource development for children, adolescents and parents.
- 4Cs (especially given their work in training license exempt child care providers) and pre-school programs can help support and should participate in team-based case planning.
- Include foster youth in MAPP training.
- Subgroups of foster parents who share similar interests (e.g., fostering adolescents, medically fragile children) should work more directly with FPA board, with the association as a whole, and with groups responsible for work in this plan.
- Youth should be more involved in all phases of implementing this plan.
- ACAT (Adolescent Collaborative Action Team) can support resource development for adolescents.
- Community-based organizations, especially those serving teens, should be involved in ongoing planning and implementation.
- Community colleges could conduct wider range of courses for foster parents, emancipating foster youth.
- CDSS must work with counties to help assure that resources and technical assistance are available, and that statutory changes are made to support this work.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

- Confidentiality and appropriate use of parental release forms.
- HIPAA implications.
- Foster home licensing requirements should be more flexible.
- Extend eligibility for Medi-Cal for adopted children.
- Extend eligibility for Education Financial Aid for adopted children.