

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

626



**FROM:** Department of Public Social Services

**SUBMITTAL DATE:**  
2/27/07

**SUBJECT:** Approval of Submission of the County System Improvement Plan Annual Update to the California Department of Social Services

**RECOMMENDED MOTION:** That the Board of Supervisors approve the submission of the County System Improvement Plan (SIP) Annual Update to the California Department of Social Services (CDSS).

**BACKGROUND:** Under the Board of Supervisors' leadership, Riverside County has emerged as a model statewide for our decade-long self-examination of the child protection system. The Board has commissioned three major external reviews of the county system and DPSS has commissioned numerous smaller-scale reviews. In September 2004 Agenda # 3.45 DPSS requested Board approval for the submission of the SIP to CDSS covering the period of September 30, 2004 through December 31, 2006.

The California Legislature passed AB 636 (Chapter 678, Statutes of 2001), enacting the Child Welfare Outcomes and Accountability Act. The Act's goals require counties to focus more on the child welfare outcomes, rather than on the process of providing services, and require demonstration of efforts to improve those outcomes.

Departmental Concurrence

*Cynthia Hinckley*  
Cynthia Hinckley, Director

**FINANCIAL DATA**

Current F.Y. Total Cost:	\$ N/A	In Current Year Budget:	N/A
Current F.Y. Net County Cost:	\$ N/A	Budget Adjustment:	N/A
Annual Net County Cost:	\$ N/A	For Fiscal Year:	FY 05/06

<b>SOURCE OF FUNDS:</b> N/A	<b>Positions To Be Deleted Per A-30</b>	<input type="checkbox"/>
	<b>Requires 4/5 Vote</b>	<input type="checkbox"/>

**C.E.O. RECOMMENDATION:** APPROVE

**County Executive Office Signature** *Debra Counger*

- Dep't Recomm.:  Consent  Policy
- Per Exec. Ofc.:  Consent  Policy

**Prev. Agn. Ref.:** 9/14/04 (#3.45) | **District:** All | **Agenda Number:** 3.34

*EM*  
Probation

RECEIVED RIVERSIDE COUNTY  
MAY 10 2007 11:55 AM  
SS: IMA T - SAN TOOS

**FROM:** Department of Public Social Services  
**SUBJECT:** Approval of Submission of the County  
System Improvement Plan Annual Update  
to the California Department of Social Services

**DATE:** 5/25/06

**PAGE:** 2

**BACKGROUND (Cont.):**

It has been three years since the County's SIP went into effect. Shared responsibility for outcomes in the prevention of abuse and neglect has remained central to our goal of generating improvements in each of the stated outcomes. Children's Services has continued efforts to foster open communication with community partners and local agencies and to unite services provided by Children's Services with those already in the community to effectively and efficiently serve families.

In December 2006, a community forum was held that included individuals from the Departments of Probation, Mental Health, Community Health Agency, Juvenile Court, as well as community based organizations, parents, of foster parents, youth, and other involved stakeholders. The forums using the theme, "Together Progress Is Possible" provides participants with a glimpse of new and ongoing program initiatives.

This open communication has created an open culture of self-examination and Children's Services has reported our progress publicly to the Board each quarter. The three child welfare outcomes identified for improvement in the SIP were:

1. A reduction in abuse in out-of-home care,
2. A reduction in abuse when children are not removed from their homes, and
3. A reduction in re-entry into foster care.

The most recent progress in these areas is reflected in the attached report. As a part of the continual review process, AB 636 requires counties to provide an annual update of program priorities, timelines or action steps that will achieve the stated improvement goals.

The Director of DPSS therefore requests the Board to approve the submission of the attached report to CDSS.

**FINANCIAL IMPACT:** N/A

CH:SL:pr

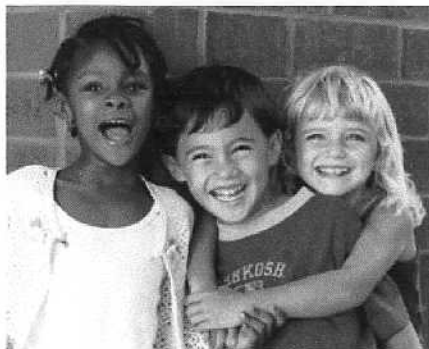
CALIFORNIA CHILD AND FAMILY SERVICES REVIEW  
Riverside County DPSS – Children’s Services

**System Improvement Plan**  
**Annual Update**



**Cynthia Hinckley, Director:**  
**Department of Public Social Services**

**Marie Whittington, Chief Probation Officer:**  
**Riverside County Probation Department**



*"Critical to our success are people at the state, county, community, and neighborhood levels joining together in a comprehensive effort to ensure every child in California will live in a safe, stable, permanent home, nurtured by healthy families and strong communities."*

--Child Welfare Services Redesign, Stakeholders Group  
Final Report (September, 2003)

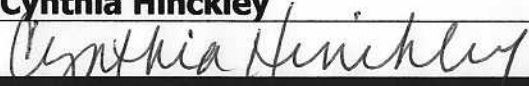
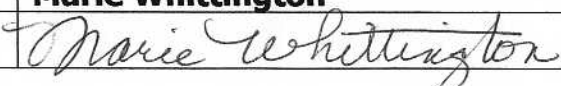
## California's Child and Family Services Review System Improvement Plan: Annual Update

<b>County:</b>	Riverside County
<b>Responsible County Child Welfare Agency:</b>	Riverside County Department of Public Social Services
<b>Period of Plan:</b>	March 30, 2007 – March 30, 2008
<b>Period of Outcomes Data:</b>	Quarter ending January 2007
<b>Date Submitted:</b>	March 30, 2007

### *County Contact Person for County System Improvement Plan*

<b>Name:</b>	Jewel Pabustan
<b>Title:</b>	Assistant Regional Manager
<b>Address:</b>	10281 Kidd St. Riverside CA 92503
<b>Phone/Email</b>	(951) 358-5625      jepabust@riversidedpss.org

### **Submitted by each agency for the children under its care**

<b>Submitted by:</b>	<b>County Child Welfare Agency Director (Lead Agency)</b>
<b>Name:</b>	<b>Cynthia Hinckley</b>
<b>Signature:</b>	
<b>Submitted by:</b>	<b>County Chief Probation Officer</b>
<b>Name:</b>	<b>Marie Whittington</b>
<b>Signature:</b>	

## TABLE OF CONTENTS

### Updated System Improvement Plan (SIP) Narrative

Topic	See Page
Executive Summary	
Background & Introduction	4
Data Summary	5
Local Partners – SIP Forum Attendance	7

### SIP Components

Topic	See Page
Outcome Indicator 1C: Rate of Abuse/and or Neglect in Foster Care	9
Outcome Indicator 2A: Rate of Recurrence of Abuse/and or Neglect in Homes Where Children Were Not Removed	22
Outcome Indicator 3F: Rate of Foster Care Re-entry	33

# System Improvement Plan: Annual Update to California Department of Social Services

## Executive Summary

---

**Background** In 2001, the California Legislature passed Assembly Bill (AB) 636, the California System Improvement and Accountability Act. In tandem with efforts being required by the federal government, California's efforts are focused on improving outcomes for children who are served by the state's child welfare system. Counties began implementation of the Act by completing a comprehensive County Self-Assessment (CSA), wherein the county's strengths and challenges are identified. Riverside County DPSS completed its original CSA on June 28, 2004. The CSA was subsequently updated on December 30, 2005.

Following completion of the original CSA, Riverside County developed its System Improvement Plan (SIP), along with collaboration from community partners and other involved stakeholders. The findings derived from the CSA and the Peer Quality Case Review (held between May 24, 2004 and May 28, 2004) were considered by the SIP Team when identifying and selecting targeted outcomes and their associated strategies and milestones for improving Riverside County's child welfare services. The three child welfare outcomes identified for improvement in the SIP were: (1) a reduction in abuse in out-of-home care, (2) a reduction in abuse when children are not removed from their homes, and (3) a reduction in re-entry into foster care. The SIP was approved by the Board of Supervisors on September 14, 2004, prior to submission to California Department of Social Services (CDSS).

As part of its continual review process, AB 636 requires counties to provide an annual update of program priorities, timelines or action steps that will achieve the stated improvement goals.

---

**Introduction** It has been three years since Riverside County's System Improvement Plan went into effect. Shared responsibility for outcomes in the prevention of abuse and neglect has remained central to our goal of generating improvements in each of the stated outcomes. Children's Services has continued our efforts to foster open communication with community partners and local agencies and to unite services provided by Children's Services with those already in the community, to effectively and efficiently serve families. The collaborative efforts of this partnership is best illustrated through the activities associated with Riverside County's System Improvement Plan Community Partners Forums and partner feedback received from these events.

---

*Continued on next page*

## Executive Summary (SIP), Continued

---

### **Introduction** (continued)

This year System Improvement Plan Community Forums were held on May 10, 2006 and December 07, 2006. Participants included individuals from the Departments of Probation, Mental Health, Community Health Agency, Juvenile Court, as well as community based organizations, parents, foster parents, youth, and other involved stakeholders. (A complete listing of participants is found at the end of this document.)

Each forum provided participants with a glimpse of new and ongoing program initiatives. In addition, targeted System Improvement Plan outcomes were reviewed and trend lines observed within the past year were shared. Most notably, at the forum held December 07, 2006, participants were presented with information from a panel of community partners regarding programs such as WrapAround, Multidimensional Treatment Foster Care, and the Independent Living Program. Participants also heard from a parent who positively discussed his experience with Children's Services. Feedback from the forum suggests that participants found it to be engaging, true to the goal of building community partnerships and in line with the theme which was "Together Progress Is Possible".

One goal of the December Forum was to solicit feedback regarding changes observed since the implementation of our System Improvement Plan (SIP). Participants were each provided with a survey in which to record their feedback. Respondents of the survey identified improved partnerships, enhanced service quality, and increased resources/programs as the most noticeable successes since implementation of Riverside County's System Improvement Plan efforts in October 2004. Consistently, respondents prioritized the same factors—further development of resources and collaboratives as critical focus areas for future efforts.

The attached System Improvement Plan components have been updated to reflect input and feedback received from the forums, from community partners, as well as Children's Services staff.

---

### **Summary of Data**

The following reflects Children's Services progress toward achieving improved results in the three SIP outcomes. The data included is derived from the January 2007, Outcomes and Accountability Data Report, provided by UC Berkeley's Center for Social Services Research.

---

*Continued on next page*

## Executive Summary (SIP), Continued

<b>OUTCOME 1C</b>	<b>Riverside County</b>	<b>State</b>	<b>National Standard</b>
<b>Percent Of Child Abuse in Foster Care.</b> (data set: 07/01/2005 to 06/31/2006)	<b>0.36</b>	0.21	.57
<p>The methodology used for this outcome has been revised by the state. Using the new data our current performance is 0.36%. This rate has remained consistent for the time period covering October 2004 through June 2006. In accordance with state and federal guidelines, all caregivers must receive full criminal background clearance. Efforts to improve performance in this area include mandatory training to caregivers, parent partner support and improved work practices in the Out of Home Investigations unit (OHI). These practices include in-depth case review wherein, every substantiated allegation is individually reviewed by the Supervisor, Regional Manager, and Deputy Director to ensure consistency and accuracy. Riverside County's current performance is significantly better than the federal standard, but not as strong as the state's performance.</p>			
<b>OUTCOME 2A</b>	<b>Riverside County</b>	<b>State</b>	<b>National Standard</b>
<b>Percent Of Recurrence of Abuse/Neglect When Children Were Not Removed.</b> (data set: 07/01/2004 to 06/30/2005)	<b>9.5</b>	8.3	N/A
<p>Our current performance of 9.5% shows a 0.5% improvement when compared to the same quarter data for last year (10.0%). Our current rate exceeds the state performance by 1.2%. There is no national standard for this measure. We anticipate continued improvement with the expanded implementation of the following strategies: 1. Family to Family, Team Decision Making (TDM) process; 2. Family Preservation Drug Court (FPC) Program; and 3. Differential Response Program (DR).</p>			
<b>OUTCOME 3F</b>	<b>Riverside County</b>	<b>State</b>	<b>National Standard</b>
<b>Percent Of Admissions Who Were Re-entries</b> (data set: 07/01/2005 to 06/30/2006)	<b>10.4</b>	10.7	8.6
<p>Our performance continues to show improvement. The percent of children re-entering foster care has decreased by 6.3% since this outcome was first reported in 2004. Two critical practice changes that have contributed to this improvement include: 1.) a policy change requiring a minimum of three months of Family Maintenance services following reunification and 2.) improvement in the completion of the Structured Decisions Making (SDM) Family Strengths and Needs Assessment (FSNA) which substantially assists in the development of relevant case plans. As a result of our ongoing efforts to engage community members and service providers, our partners have become more actively involved and influential in the development of new resources and programs which support and strengthen families. More specifically, programs such as WrapAround, Family Preservation Drug Court, Team Decision Making, and Differential Response are anticipated to impact this outcome on a long-term basis.</p>			

## Executive Summary (SIP), continued

### Local Partners

Individuals from the following groups met on May 10, 2006 and December 07, 2006 to: review our three System Improvement Plan Outcome goals and share successes observed within the past year. Participants also assisted in identifying additional strategies for improvement.

<b>County of Riverside</b>			
<b>Department of Public Social Services, Children's Services</b>			
<i>Administration</i>		<i>Operations</i>	
Sandra Becerra	Aggie Jenkins	Marsha Amiri	Bridgette Hernandez
Todd Bellanca	MaryEllen Johnston	Mike Byers	Guillermo Henry
Sharrell Blakeley	Gary Knapp	Laurel Brown	Rosemary Jiron
Phil Breitenbucher	Susan Loew	Gwenne Castor	Tom Klinedinst
Stephen Butler	Olga Nassif	Tish Crawford	Susan Mahoney
Katherine Chavez	Jewell Pabustan	Belinda Christiansn	Cynthia Marez
Sylvia Deporto	Jennie Pettet	Barry Dewing	Rande Paige
Mark Desaro	Jennifer Linn Ramirez	Ivy Duong	Pat O'Boyle
Faye Ector	Lasheen Renter	Allison Donohoe-Beggs	Robert Sanchez
Brenda Flores	Lisa Sayles	Laurie Fineman	Rob Taylor
Cynthia Hinckley	Sandra Thomas-Perez	Mona Hansen	Tiffany Tsai
Rod Jaffe	Steve Sopher	Jennifer Hastings	Dean Wilson

<b>Riverside County Public Agencies</b>	
<b>Child Care Consortium</b>	<b>Housing Authority</b>
Jan Peterson	John Viafora
Jeanette Agundez	Yvette Calbay
<b>Community Health Agency (CHA)</b>	<b>Office on Aging</b>
Velma Pacrem,	Stephanie Ortiz
Hermia Parks	Ed Walsh
<b>Community Care Licensing</b>	<b>Probation</b>
Stephanie Hudak	Lois Gardella
<b>Court Appointed Special Advocates</b>	Francis Krogh
Barbara Hoffman	<b>Sheriff's Department</b>
Denise Chavez	Keenan Lambert
<b>County Board of Supervisors</b>	Mike Andrews
Anne Stephens	Tim Bacon
Robin Reid	<b>Superior Court</b>
Maurgurita Felix	Hiram Rivera-Toro
<b>Department of Mental Health</b>	Trisha Carrasco
Erllys Daily	<b>Victim Witness Services</b>
Steve Steinberg	Judy Campbell
<b>Economic Development Agency</b>	Debbie Anderson
Leonard Pimental	<b>Volunteer Center</b>
Pat Ramos	Pamela Hogan

## Executive Summary (SIP), continued

Community Partner	Agency
Anita Aldrich	Public Child Welfare Training Academy
Dustin Bellah	California Youth Connection
Jeanette Agundez	Riverside County Child Care Consortium
Arrissia Burks	Indian child & Family Services
Micelle Burroughs	First 5 Riverside County
Cecilia Brown	Martha's Village & Kitchen
John Brown	Family Services of the Desert
Lora Burton	For The Children – FPA
Elizabeth Calanche	AguaCaliente Band of Cahuilla Indians
Yolanda Carrillo	Corona Norco Family YMCA - PCARC
Martha Carillo	Valley Partnership
Clyde Pop's Carter	Desert Hot Springs Advisory Board
Judee Cox	Regional Access Project Foundation
Eliza Daniely-Woolfolk	Alternatives to Domestic Violence
Veronica Dover	Family Services Association Western Riverside Co
Tobias Dejadins	The Prevention Network
June Earley	SAFE
John Eyler	SELPA
Susan Francis	JFK Memorial Foundation
Harry Freedman	Youth Services Center
Moises Galvan	California Family Life Center
Donnie Griffin	Morongo Band of Indians
Patricia Harrold	Inland Regional Center
Othella Henderson	Olive Branch Counseling
Gayle Hepner	Valley Wide Recreation & Parks
Art Hernandez	Parent Partner
Stephanie Hudak	Community Care Licensing
Billy James	Catholic Charities
Ruth Kantorowicz	Child Abuse Prevention Center
Faith E. Karetji	Olive Crest
Joanna Knox	Green House Family Services
Viola Lindsey, MSW	Loma Linda University
Gill Marrujo	Desert Sands Unified School District
Gary McMane	Catholic Charities
Kathy McAdara	Operation Safe house
Gary Melton	Inland Empire Health Plan
Luis Mendez	Ninos Latinos Unidos
Lisa Molina	MFI Recovery
Olga Montes	Planned Parenthood – Education
Sandy Murray	Wylie Center
Maria Perez	Child Abuse Prevention Center
Michelle Phannix	Inland Empire Foster Parent Assoc.
Ruth Peters	Loma Linda VA Medical Center
Kathy Ann Smith	Dessert Hot Springs Advisory Board
Silvia Signoret	Children & Foster Parents Association
John Zickefoose	Corona Public Library

**B. SIP Plan Components**

<p><b>Outcome/Systemic Factor:</b> 1C Rate of Abuse and/or Neglect in Foster Care</p> <p><b>County's Performance:</b> 2006 update: The measure for this indicator employs a new methodology. The rates for this reporting period can not be compared to last year's report. Utilizing the new methodology, the current performance is .36%. This is .15% above the state average, yet remains below the national standard of .57%.</p> <p><b>Improvement Goal 1.0</b> Improve our ability to assess safety and risk factors associated with resource families and reduce the rate of abuse and/or neglect in foster care.</p> <p><b>Strategy 1.1</b> Work with Children's Research Center (CRC) to develop an assessment tool similar to Structured Decision Making (SDM) to assess resource families.</p>		<p><b>Strategy Rationale</b> An accurate and consistent process for the assessment of safety and risk will result in positive outcomes for children and families.</p>	<p>Workgroups were established to: 1) Define reports and report content 2) Create report queries 3) Test report validity 4) Interpret business needs based on report findings. 5) Provide recommendations for areas of improvement.</p> <p>Recommendations for improvement resulted in changes in documentation and data entry practice.</p> <p>Out-of-home abuse documentation practices were enhanced; a review of work practice found Riverside County consistent with the Welfare and Institutions Code (WIC). In 2005, Riverside County was recognized as a leading contributor to statewide policy for investigating allegations of abuse in out-of-home care.</p>
<p><b>Milestone</b></p>	<p><b>1.1.1</b> Conduct a practice review of the Out-of-Home Investigation Unit to determine whether any work practices were responsible for driving up Riverside County's rate; use the results to define and implement standards for disposition and allegation conclusions for out-of-home referrals.</p>	<p>02-01-05 <b>Completed</b></p>	<p><b>Activities and Results to Date</b></p>
	<p><b>1.1.2</b> Revise policies and procedures related to out-of-home assessments and implement practice changes if necessary.</p>	<p>06-01-05 <b>Completed</b></p>	

Milestone	Timeframe	Activities and Results to Date	2006 Update:
<p><b>1.1.3</b> Finalize training curriculum to implement specialized Structured Decision Making (SDM) tool used for the selection of placement resources for children in need of out-of-home care. (i.e., matching child needs, caregiver willingness to provide care, and caregiver requirements for care provision)</p>	<p>12-30-07 <b>In Progress</b></p>	<p>12-30-07 <b>In Progress</b></p>	<p>The development of the tool is a state-wide effort supported by several counties; it remains in development at this time.</p> <p>The Children's Research Center (CRC) began development of the assessment tool by conducting an initial case reading of foster care cases. Riverside County remains active in a pilot program with CRC to test the effectiveness of the tool.</p>
<p><b>1.1.4</b> Out-of-Home Investigation staff are trained in new SDM tool and associated work practices.</p>	<p>12-30-07 <b>In Progress</b></p>		<p>Pending development of new out-of-home safety and risk assessment tool.</p>

**Strategy 1.2**

Initiate Family-to-Family strategy of Team Decision Making (TDM) to better evaluate the child's needs and to identify the potential caregiver's capacity and ability to meet these

**Strategy Rationale**

A TDM meeting will be conducted for the purpose of identifying the safest, most stable home for the child. The TDM will also identify any special needs or support to help ensure that the factors which contribute to out-of-home abuse will be mitigated. In addition to foster parents and social workers, involvement of birth families and community members in all placement decisions increases our ability to match children's needs with the caregiver's ability/capacity to provide appropriate levels of care. The TDM process also ensures a network of support for both the children and adults who care for them, thereby facilitating a safer home environment.

**1.2.1**

Educate bench officers and attorneys about Family-to-Family values and strategies with special focus on TDM goals and protocol.

10-01-05

**Completed & Ongoing**

**Milestone**

**Timeframe**

**Activities and Results to Date**

In November 2005, Family-to-Family training was presented to court staff at the Indio Juvenile Court.

2006 Update:

A TDM Preparedness Training Curriculum for staff, partners, and service providers has been standardized. The training includes a general orientation to F2F strategies, TDM processes, roles and responsibilities. The training is delivered approximately 30 days prior to each region's implementation of TDM meetings. Three such meetings were completed to include staff and community partners.

Milestone	Timeframe	09-30-07 In Progress	Activities and Results to Date	2006 Update: The implementation and expansion of TDM meetings has continued to occur. TDMs are currently active in the following targeted zip codes: 92201, 92507, 92440 and 92543. A total of 329 meetings were held between October 2005 and September 2006. These meetings resulted in a total of 744 placement decisions regarding the welfare of 577 children.
<p><b>1.2.2</b> Utilize the Team Decision Making (TDM) process to evaluate the needs of children and make appropriate resource family placements in the following targeted zip codes: 92201, 92240, 92507, 92543, 92553, and 92882.</p>		<p>09-30-07 In Progress</p>		<p>2006 Update: TDM meetings are occurring in all but the 92553 and 92882 targeted zip codes. The remaining zip codes have been slated for implementation by July 2007. Countywide utilization of TDM is expected to occur by September 2007.</p> <p>TDMs are occurring at initial removals, as well as placement changes to ensure the best placement decisions are made.</p>
<p><b>1.2.3</b> Utilize the Team Decision Making (TDM) process to evaluate the needs of children and make appropriate resource family placements countywide.</p>		<p>09-30-07 In Progress</p>		<p>2006 Update: TDM meetings are occurring in all but the 92553 and 92882 targeted zip codes. The remaining zip codes have been slated for implementation by July 2007. Countywide utilization of TDM is expected to occur by September 2007.</p> <p>TDMs are occurring at initial removals, as well as placement changes to ensure the best placement decisions are made.</p>

<p><b>Improvement Goal 2.0</b> Improve the recruitment and retention of high quality resource families within the child's community.</p>	<p><b>Strategy 2.1</b> Expand recruitment of quality resource families who are neighborhood-based, culturally sensitive, and located in the communities in which children live.</p>	<p><b>Strategy Rationale</b> Recruitment and retention of high quality resource families will increase when we implement partnering and mentoring strategies which involve successful, experienced foster and adoptive families. The probability of out-of-home abuse will be reduced when resource families are supported by other resource families and local community-based agencies and receive support through ongoing training, respite care, and help with the emotional and behavioral needs of the child. Resource families will be stronger when receiving mentoring services from other more experienced resource families. Retention is expected to increase when we are able to identify relevant factors which contribute to resource family success. Retention is further enhanced when resource families are supported by the communities in which they live.</p>
<p><b>Milestone</b></p>	<p><b>2.1.1.1.</b> Workgroup established to review, modify, and build upon the existing recruitment, outreach and retention plan.</p>	<p>11-01-04 <b>Completed &amp; Ongoing</b></p>
<p><b>Timeframe</b></p>	<p><b>Activities and Results to Date</b></p>	<p>Two new contracts were executed, one for Targeted Recruitment of Resource families; the other for "24/7" peer support and mentoring of existing resource families. 2006 Update: The Family to Family Recruitment Development and Support Subcommittee meets on a monthly basis. Activities include:</p> <ul style="list-style-type: none"> <li>• The development of a recruitment brochure which provides abuse, detention and placement data specific to targeted communities;</li> <li>• The development of a centralized resource family tracking system; and</li> <li>• The ongoing development of strategies to recruit and support resource families.</li> </ul>

<p><b>Milestone</b></p>	<p><b>2.1.2</b> Identified community partners each provide 2 resource family nominations per quarter to build pool of high quality resource families.</p>	<p><b>Timeframe</b></p>	<p><b>09-30-07</b> <b>In Progress</b></p>	<p><b>Activities and Results to Date</b></p>	<p>2006 Update: This year's recruitment efforts have resulted in an increase in relative placement homes. Additionally, a comparison of licensed foster homes available between September 2005 and September 2006 shows a countywide increase of 15%.</p> <p>System Improvement Plan (SIP) Community Forums are held on a bi-annual basis and include strategies to increase community partners' participation in recruitment efforts.</p> <p>The subcommittee for Building Community Partnerships is led by Children's Services Regional Managers, and continues to meet on a bi-monthly basis with participation from local community partners. The committee meets to develop strategies to maintain commitment and regular support from partners who have been identified to assist in increasing the available resource families in targeted communities.</p> <p>Community Partners and Children's Services have been actively involved in the formation of a standardized resource family nomination process and a centralized database for tracking the availability status of all potential resource families. These remain in development and are expected to be completed by September 2007.</p>
-------------------------	---	-------------------------	---	--	--

	<p><b>2.1.3</b> Data reviewed and evaluated to assess outreach and recruitment effectiveness. Confirm increase in available resource families in targeted zip codes.</p>		<p>03-01-05 <b>Completed &amp; Ongoing</b></p>	<p>2006 Update: The number of relative placement homes in use has increased by 10% when comparing rates for December 2005 with December 2006. Similarly, an increase of licensed foster homes available between September 2005 and September 2006 shows an increase of 15% in all Family to Family targeted zip codes.</p>
<p><b>Strategy 2.2</b> Implement a standardized resource family training process for recruitment, selection, and retention across the county.</p>			<p><b>Strategy Rationale</b> The quality and retention of resource families will increase when they are properly and consistently trained. An appropriate training process will strengthen the relationship with the resource family and provide them with a sense of being prepared and supported.</p>	
<p><b>Milestone</b></p>	<p><b>2.2.1</b> Utilize <i>Parent Partners</i> and <i>Foster Parent Recruitment Program</i> (two new training programs) to increase the number of quality resource families in the desert region of Riverside County.</p>	<p><b>Timeframe</b></p>	<p>11-01-04 <b>Completed &amp; Ongoing</b></p>	<p><b>Activities and Results to Date</b> Two new recruitment and support contracts were executed contributing to the identification of 91 families who conveyed interest in becoming resource families. A total of 31 resource family homes are now available in the 92201 zip code.  2006 Update: A comparison of licensed foster homes available between September 2005 and September 2006 shows a Countywide increase of 15%.</p>

Milestone	Timeframe	Activities and Results to Date	
<p><b>2.2.2</b> Resource family training is implemented using the PRIDE and Adopt PRIDE curriculum (Parent Resources for Information, Development, and Education).</p>	<p>01-01-05 <b>Completed</b></p>	<p>Training for all foster parents and adoptive parents has been consolidated. Professional social workers who complete the home study for family strengths conduct the 11 week training course.</p>	
<p><b>2.2.3</b> Community partners who provide resource family nominations each quarter have been identified. These same providers will provide assistance in supporting resource families in the following targeted zip codes: 92201, 92240, 92507, 92543, 92553, and 92882.</p>	<p>06-01-05 <b>Completed &amp; Ongoing</b></p>	<p>2006 Update: Specific community partners have been identified and invited to participate in county-wide Family-to-Family regional meetings and training opportunities. A resource family nomination process is in development.</p>	
<p><b>2.2.4</b> Community partners will provide resource family nominations each quarter. These same providers will provide assistance in supporting resource families countywide</p>	<p>09-30-07 <b>In Progress</b></p>	<p>2006 Update: Specific community partners have been identified and invited to participate in county-wide Family-to-Family regional meetings and training opportunities. Additionally, a committee has been formed to develop strategies geared at increasing partner participation, commitment and support.</p>	

<p><b>Milestone</b></p>	<p><b>2.2.5</b> Community partners and experienced resource families mentor (consult and educate) newer resource families each quarter regarding what "neighborhood foster care" means.</p>	<p><b>Timeframe</b></p>	<p>09-30-07 <b>In Progress</b></p>	<p><b>Activities and Results to Date</b></p>	<p>2006 Update: In February 2006, "Parents as Partners" trainings were provided to staff, community partners and birth/resource parents. A total of 118 individuals were in attendance.</p> <p>Four recruitment and support contracts have been developed and vendors are actively providing ongoing support to new and existing resource families, countywide.</p> <p>Children's services has partnered with a long-time foster parent to provide consultant and educational services at community engagements, staff meetings, resource family trainings and resource family appreciation events.</p>
-------------------------	---	-------------------------	--	--	---

<p><b>Strategy 2.3</b> Train resource, adoptive families, and service providers with the same standardized curriculum across the county.</p>	<p><b>Strategy Rationale</b> A shared vision, shared values and expectations will increase the quality and support of our resource families. Improved communication and exchange of knowledge between the public and private segments of the child welfare network will maximize the support and retention of high quality resource families.</p>	
<p><b>Milestone</b></p>	<p><b>Timeframe</b></p>	<p><b>Activities and Results to Date</b></p>
<p><b>2.3.1</b> A standardized curriculum has been developed; responsibility for at least one (1) training session per year for resource families will be conducted by DPSS and community service providers.</p>	<p>06-01-05 <b>Completed</b></p>	<p>Curriculum has been developed. Professional social workers who complete the home study for family strengths also conduct the 11 week training course. In 2005, Twenty two (22) trainings were provided. Community recruiters and resource parents served as co-trainers for trainings conducted in the Desert area.</p>
<p><b>2.3.2</b> Publicize and disseminate PRIDE training curriculum related to the care and supervision of children placed in out-of-home; commit 5% of Children's Services staff members to attend training each year.</p>	<p>12-30-06 <b>Completed</b></p>	<p>2006 Update: The initial PRIDE training for Children's Services staff was conducted in July of 2005. In 2006, a total of twelve PRIDE trainings were held. Participants included prospective resource families, parent partner mentors, and social work staff.</p> <p>Additionally, In March 2006, approximately 5% of Children's Services staff members attended training delivered by transition-aged youth. The training was designed to introduce staff to the lives and perspectives of foster youth and provide unique strategies for caring for foster youth.</p>

	<p><b>2.3.3</b> All resource and potential adoptive families will receive the new standardized PRIDE training curriculum.</p>		<p>01-01-06 <b>Completed &amp; Ongoing</b></p>	<p>2006 Update: All resource and potential adoptive care givers are provided with the same training. Training has also been extended to Foster Family Agencies.  A total of twelve trainings were held for approximately 158 families. Participants have not only included prospective resource families but also, parent partner mentors, and social work interns.</p>
<p><b>Improvement Goal 3.0</b> Better integrate the use of the Child Welfare Services/Case Management system (CWS/CMS) in casework practice and ensure accurate and consistent entry of case management data. Improve the availability and quality of data entered into CWS/CMS.</p>	<p><b>Strategy 3.1</b> Review &amp; update Children's Services work practices associated with data entry. Data will be consistently entered for all risk and safety assessments.</p>	<p><b>Strategy Rationale</b> Correct data consistently entered in CWS/CMS will result in accurate counts of child maltreatment in out-of-home care.</p>		
<p><b>Milestone</b></p>	<p><b>3.1.1</b> Ensure that data is accurately entered as child abuse referrals in CWS/CMS.</p>	<p>01-01-05 <b>Completed &amp; Ongoing</b></p>	<p>Quality Assurance reviews are conducted on a quarterly basis. Results are provided to Regional Managers to ensure consistent practice.</p>	
<p><b>3.1.2</b> Staff, through specific training by DPSS Staff Development Department, have the necessary skills to research the complete history of the abuse referral by foster parent in CWS/CMS.</p>	<p>01-01-05 <b>Completed &amp; Ongoing</b></p>	<p>Activities and Results to Date</p> <p>All staff of the Central Intake Center have been appropriately trained. Quality Assurance reviews for accuracy and completeness are conducted on every out-of-home abuse referral.</p>		

<p><b>Strategy 3.2</b> Management reports will be developed to evaluate and assess the incidence of maltreatment in out-of-home placements.</p>	<p><b>Strategy Rationale</b> Development of specific management reports will provide essential feedback and guidance in achieving a reduction of maltreatment in out-of-home placements. This information will validate the impact of strategies associated with this SIP component.</p>	
<p><b>3.2.1.</b> A workgroup has been established to: (1) define reports and report content; and (2) interpret business need based on report findings.</p>	<p>06-01-05 <b>Completed &amp; Ongoing</b></p>	<p>2006 Update: As of March 2005, The reports have been provided to management. The reports include but are not limited to;</p> <ul style="list-style-type: none"> <li>• The Number of referrals received,</li> <li>• Children placed in homes which have recently been placed on hold,</li> <li>• Service component time lines, and</li> <li>• Quarterly Outcomes and Accountability data.</li> </ul>
<p><b>3.2.2</b> Report queries will be created and tested for validity.</p>	<p>06-01-05 <b>Completed</b></p>	<p>The validation of the reports is afforded through CWS/CMS research. Individual regions also review reports for accuracy and/or discrepancies.</p>
<p><b>Milestone</b></p>	<p><b>Activities and Results to Date</b></p>	

<p><b>Milestone</b></p>	<p><b>3.2.3</b> Analysis and review of reports; recommendations to Children's Services and community partners regarding areas for improvement.</p>	<p><b>Timeframe</b></p>	<p>06-01-05 <b>Completed &amp; Ongoing</b></p>	<p><b>Activities and Results to Date</b></p>	<p>Community partners are provided with reports to include but not limited to; Children's Services Fact Sheet, Reunification Timeframes, and Child Removal &amp; Subsequent Placement, using GIS Mapping.</p> <p>2006 Update: Children's Service's staff, along with community partners continue to utilize the reports in the development of strategies to address concerns identified in the reports (i.e. targeted recruitment for resources families.).</p>
<p><b><u>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</u></b> It is respectfully recommended that the State of California make funding available to assist in the development of a placement module assessment tool.</p>					
<p><b><u>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</u></b></p>					
<p><b><u>Identify roles of the other partners in achieving the improvement goals.</u></b> The county's designated child abuse council, Prevent Child Abuse Riverside County, is willing to provide information and handouts regarding resource family recruitments at various meetings.</p>					
<p><b><u>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</u></b></p>					

<p><b>Outcome/Systemic Factor:</b>  2A Rate of Recurrence of Abuse/Neglect in Homes Where Children Were Not Removed (12 Months)</p> <p><b>County's Performance:</b> Our current performance is 9.5% which represents a .5% improvement when compared to the same quarter data for last year (10%). Our current rate exceeds the overall state performance by 1.2%. There is no national standard for this outcome.</p>			
<p><b>Improvement Goal 1.0</b>  To increase the competence of: (1) Children's Services social workers and supervisors in the assessment and development of safety plans and (2) increase community partners' competence in their delivery of services to children and families where children were not removed.</p>			
<p><b>Strategy 1.1</b>  Provide consistent training for supervisors, social workers and community partners on risk and safety assessments.</p>		<p><b>Strategy Rationale</b>  Improved communication and exchange of knowledge between the public and private segments of the child welfare network will result in a shared vision, shared values and consistent protocols when assessing child maltreatment; this will increase the quality and consistency of risk and safety assessments. The objective is to ensure: (1) all children are protected; (2) children are removed from their family only when necessary; (3) children and families are referred for appropriate services when removal of children from the home is not required.</p>	
<p><b>1.1.1</b>  Children's Services staff and community partners are trained in the Family-to-Family Team Decision Making (TDM) model which emphasizes comprehensive assessment of safety and risk through family involvement, through a minimum of 4 meetings per year, in the following targeted zip codes; 92201, 92240, 92507, 92543, 92553, and 92882.</p>		<p>06-01-05  <b>Ongoing</b></p>	
<p><b>Milestone</b></p>		<p><b>Activities and Results to Date</b></p>	
		<p>2006 Update:  Extensive Family-to-Family and TDM training has occurred. 6 training events (400+ attendees) and more than 10 community partner outreach and education events took place in 2006.  Quarterly community partner planning meetings are occurring in the following targeted zip codes; 92201, 92240, 92507, 92543.  Meetings are expected to occur in the remaining targeted zip codes by September 2007.</p>	

<p><b>Milestone</b></p>	<p><b>1.1.1.2</b>  Children's Services staff and community partners countywide are trained on the value of TDM and SDM. SDM facilitates a comprehensive assessment of risk &amp; safety factors using standardized tools.</p>	<p><b>Timeframe</b></p>	<p><b>09-30-07</b>  <b>In Progress</b></p>	<p><b>Activities and Results to Date</b></p>	<p>2006 Update:  In March 2006, mandatory training was provided to all social work staff in the areas of risk and safety assessment to include SDM, high risk investigations and response to critical incidents.</p> <p>In August of 2006, JFK Memorial Foundation, the Differential Response vendor for the Desert Region was provided with training to include the use of SDM.</p> <p>In addition to the existing contract, two new contracts were awarded to expand Differential Response services countywide in December 2006. By 2007 vendors will receive training to include SDM and TDM concepts.</p> <p>Six community partner training events (400+ attendees) took place in 2006. Trainings are expected to continue as the two remaining targeted communities begin implementation of TDMs.</p>
-------------------------	---	-------------------------	--	--	--

Milestone	Timeframe	Activities and Results to Date	
<p><b>1.1.3</b> Children's Services staff will receive an orientation to available services provided by contracted and non-contracted services providers; staff to be trained twice per year.</p>	<p><b>06-01-06</b> <b>Completed</b></p>	<p><b>2006 Update:</b> In June 2006, staff were provided with updated service referral listings, identifying available contracted and non-contracted service providers countywide.  In October 2006, Children's Service's hosted a Provider Faire, allowing staff the opportunity to meet with service providers countywide, as well as gather information regarding all available resources.</p>	<p><b>2006 Update:</b> In June 2006, staff were provided with updated service referral listings, identifying available contracted and non-contracted service providers countywide.  In October 2006, Children's Service's hosted a Provider Faire, allowing staff the opportunity to meet with service providers countywide, as well as gather information regarding all available resources.</p>
<p><b>1.1.4</b> A Differential Response (DR) Program will be implemented for those families who have no safety but moderate to high risk factors. DR will be collaboratively implemented by Children's Services and by community partners.</p>	<p><b>07/01/06</b> <b>In Progress</b></p>	<p><b>2006 Update:</b> Between July and December 2006, the Desert region (92201) implemented the Differential Response (DR) pilot program. Due to the large success of this pilot and our ability to secure additional funds from the state, the existing contract was continued and two new contracts were awarded to expand DR services countywide. This expansion began in January 2007.  Future impact of DR's countywide implementation on this outcome will be closely monitored.</p>	<p><b>2006 Update:</b> Between July and December 2006, the Desert region (92201) implemented the Differential Response (DR) pilot program. Due to the large success of this pilot and our ability to secure additional funds from the state, the existing contract was continued and two new contracts were awarded to expand DR services countywide. This expansion began in January 2007.  Future impact of DR's countywide implementation on this outcome will be closely monitored.</p>

<p><b>Strategy 1.2</b> Explore family strength-based assessment models.</p>	<p><b>Strategy Rationale</b> Strength-based approaches capitalize upon existing family resources to prevent the recurrence of child maltreatment and increase the family's engagement and participation in their service plan.</p>	
<p><b>1.2.1</b> Review California Child and Family Services Review data for other counties in relation to their Emergency Response staffing structures.</p>	<p>01-01-05 <b>Completed</b></p>	<p>CFSR data was reviewed to identify counties that have low rates of re-entry into foster care and identify staffing structures which may contribute to lower maltreatment outcomes.</p>
<p><b>1.2.2</b> Explore the ER staffing structures of counties with low rates of recurrence of maltreatment.</p>	<p>01-01-05 <b>Completed</b></p>	<p>A Workgroup was established. Staffing structures for surrounding counties; Orange San Bernardino, San Diego &amp; Los Angeles were reviewed. Counties similar in size to Riverside were also identified and reviewed.</p>
<p><b>Milestone</b></p>	<p><b>Activities and Results to Date</b></p>	

<p><b>Milestone</b></p>	<p><b>1.2.3</b> Propose staffing alternatives for Riverside County.</p>	<p><b>Timeframe</b></p>	<p>03-01-05 <b>Completed</b></p>	<p>2006 Update: Social workers in Riverside County were previously assigned to specialized service units wherein, the social worker was continually replaced as the family move through the child welfare system. Recommendations were made and recently implemented to eliminate the structure of two separate units composed of Family Maintenance (FM) and Family Reunification (FR) Workers integrating the two into one unit. This new structure allows FR workers to continue to carry cases which have transitioned to FM status rather than transferring the case to another specialized Family Maintenance Unit. Additional recommendations have been made to integrate Emergency Response Workers and Court Dependency Workers and integrate into one unit by 12-30-2007. These program changes should minimize the number of times a new social worker is assigned to the family. It is anticipated the relationship between the social worker and the family will be strengthened. Additionally, knowledge of the family's strengths and areas of needed improvement will be preserved.</p>
<p><b>Activities and Results to Date</b></p>				

**Improvement Goal 2.0**

Decrease the rate of recurrence of abuse/neglect in homes where children were not removed by increasing community involvement in the support and stabilization of low, moderate, and high risk families.

**Strategy 2.1**

Improve communication between families, Children's Services staff, service providers and resource families.

**Strategy Rationale**

Improved communication and exchange of knowledge between the public and private segments of the child welfare network will result in a shared vision, shared values, shared interventions and consistent protocols when responding to instances of child maltreatment. Improved collaboration between community partners is expected to reduce the recurrence of child maltreatment.

**2.1.1**

Review System Improvement Plan by holding a minimum of two training meetings per year. Participants will include Children's Services staff, public and private agencies, community advocates, parent partners and youth. These meetings will review data, track milestones, and provide opportunities to collaborate.

Milestone

01-01-06

Completed & Ongoing

Timeframe

Activities and results to Date

System Improvement Plan  
Community Forums were held May 16, 2005 and November 1, 2005. Activities included review of SIP outcome data, joint collaboration in the development of improvement strategies, and the exchange of information regarding new and existing resources.

2006 Update:

System Improvement Plan  
Community Forums were held May 10, 2006 and December 07, 2006. Each form included 80 to 100 participants representing county agencies, community based organizations, parents, foster parents, youth and other involved stakeholders. Activities included review of SIP outcome data, joint collaboration in the development of improvement strategies, and the exchange of information regarding new and existing resources.

**Strategy 2.2**  
 Complete geographic information systems (GIS) mapping of community resources during implementation of the Family-to-Family initiative.

**Strategy Rationale**

Knowing the availability and location of support resources will enhance the relevance and quality of family service plans; this will help reduce the recurrence of maltreatment. GIS resource mapping will also be useful in collaborative planning, funding, operation, and evaluation of community services.

<b>Milestone</b>	<p><b>2.2.1</b>          Share pertinent data with partners through a medium that is user friendly and targeted to the following zip codes; 92201, 92240, 92507, 92543, 92553, and 92882.</p>	<b>Timeframe</b>	<p>09-30-07  <b>In Progress</b></p>	<b>Activities and Results to Date</b>	<p>2006 Update:          From January to April 2006, the 92201, 92240, 92507 and 92543 zip codes coordinated 10 community-based meetings that involved traditional and nontraditional partners/participants.          In May 2006 and December 2006 Children's Services coordinated 2 SIP community partnership forums, each involving more than 100 service providers and concerned citizens.          Each targeted zip code currently implementing TDMs has presented data to community partners regarding detentions and subsequent child placements using GIS mapping.</p>
------------------	---	------------------	---	---------------------------------------	---

Milestone	2.2.2 Add, increase, and redirect services to targeted needs for families that specifically includes substance abuse, transportation, sexual abuse services, and services for Spanish-speaking families.	Timeframe	07-01-05 Completed & Ongoing	Activities and Results to Date
<p>A new contract was executed for Drug Court Services with Juvenile Court; services are available in English and Spanish.</p> <p>2006 Update: A proposal was negotiated with the Department of Mental Health to increase the capacity of out-patient drug treatment services.</p> <p>A contract was also executed with MFI Recovery Center Inc. to provide substance abuse services to clients referred by their social worker. Additionally, Children's Services was granted a Child Welfare Services Outcome Improvement Project (CWSOIP) award in the amount of \$623,708. The award was utilized to fund the expansion of DR and increase funding to Family Preservation Drug Court Program.</p> <p>A contract with Barbara Sinatra Foundation for the provision of medical forensic services to child victims of acute sexual abuse was expanded from \$4,000 to \$10,000.</p> <p>A contract was executed to expand the provision of interpretive language services.</p> <p>An RFP was released for a fee-for-service, non-fixed route transportation program in the Desert.</p>				

<b>Milestone</b>	<p><b>2.2.3</b> Implementation of Team Decision Making (TDM) for children at risk of removal in the following targeted zip codes: 92201, 92240, 92507, 92543, 92553, and 92882).</p>	<b>Timeframe</b>	<p>09-30-07 <b>In Progress</b></p>	<b>Activities and Results to Date</b>	<p>2006 Update: To date four regions (92201, 92507, 92240, 92543,) have implemented the TDM Process. A total of 329 TDMs have been held between October 2005 and September 2006, impacting 577 children.</p>
	<p><b>2.2.4</b> Regional planning committees for Family-To-Family implementation will be formed county-wide.</p>		<p>09-30-07 <b>In Progress</b></p>		<p>2006 Update: Regional Planning committee meetings have been formed in each region and continue to occur on a weekly basis.</p>
<p><b>Strategy 2.3</b> Redesign Differential Response pilot to increase community collaboration and ensure comprehensive services.</p>			<p><b>Strategy Rationale</b> Differential Response (DR) provides a voluntary alternative for families who need help in preventing maltreatment but do not require the formal supervision of Children's Services. Improved communication and exchange of knowledge between the public and private segments of the child welfare network will result in a shared vision, shared values, and shared interventions. Improved collaboration will increase ownership and investment in DR; knowing the availability and location of support resources will enhance the relevance and quality of planned interventions. These factors are expected to reduce the recurrence of maltreatment.</p>		

Milestone		Timeframe		Activities and Results to Date	
<p><b>2.3.1</b> Research existing service/collaborative models.</p>			<p>11-01-04 <b>Completed</b></p>		<p>The DR pilot was reviewed in relation to the State of California and other DR models; a redesign was proposed and accepted by a DR study group in the Fall of 2004; This study group was composed of Children's Services staff and community partners. DR was not implemented in 2005 due to a lack of available funding. The DR redesign proposal was incorporated into the DR RFP, released February 2006. Initial implementation will focus on the 92201 zip code.</p>
<p><b>2.3.2</b> Identification of non-traditional resources, including parent partners and community organizations, to strengthen the service delivery system.</p>			<p>03-01-05 <b>Completed</b></p>		<p>2006 Update: To date a total of 391 community partners and providers have attended TDM meetings, since Riverside's October 2005 launch. Management, supervisors and staff have also made significant efforts to prepare key partners who are critical to the implementation of F2F, coordination of services and identification of new resources. These include: Board of Supervisor Aides, Placement Facility administrators, court officers, judges, CASA staff, California Youth Connection members, as well as local grandparent and foster parent associations.</p>

<p><b>Milestone</b></p>	<p><b>2.3.3</b> Implement Differential Response.</p>	<p><b>Timeframe</b></p>	<p>07-01-06 <b>Completed</b></p>	<p><b>Activities and Results to Date</b></p>	<p>2006 Update: Between July and December 2006, the Desert region (92201) implemented the Differential Response (DR) pilot program. Due to the large success of this pilot and our ability to secure additional funds from the state, the existing contract was continued and two new contracts were awarded to expand DR services countywide. This expansion began in January 2007.</p>
<p><b><u>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</u></b> Information obtained through surveys and focus groups suggest Riverside County should make an effort to increase the engagement of parents, caregivers, and age-appropriate youth in the case planning process. Many child welfare clients seeking substance abuse treatment are placed on waiting lists which may limit the amount of time parents have to participate in court-supervised services and/or may adversely affect their ability to reunify with their children. It is respectfully requested that the State of California provide funding to fully implement the Differential Response initiative; DR is an effective model which provides families with the option of seeking voluntary intervention.</p>					
<p><b><u>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</u></b> Training on developing performance-based contracts. Training and technical assistance regarding how to conduct county wide needs assessments. Additional outreach provided by the State of California to community partners is needed to reinforce the concept that child welfare services is everyone's business.</p>					
<p><b><u>Identify roles of the other partners in achieving the improvement goals.</u></b> Riverside County's designated child abuse council, Prevent Child Abuse Riverside County, will assist in making technical assistance available.</p>					
<p><b><u>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</u></b> Client priorities for federally funded substance abuse treatment services must be changed to allow parents involved in child welfare services cases to access substance abuse treatment in a timely manner; current guidelines treat such parents as low priority clients.</p>					

**Outcome/Systemic Factor:**

3F Rate of Foster Care Re-Entry

**County's Performance:** Our current performance is 10.4% which represents a positive change of 0.7% when compared to our initial baseline of 11.1%. Our rate exceeds the state performance rate of 10.7%, as well as the national standard rate of 8.6%.

**Improvement Goal 1.0**

Reduce the rate of foster care re-entry to 8.6% by January 1, 2007.

**Strategy 1.1**

Expand safety assessment and planning to maintain children with their families. Increase youth and family involvement in the development and completion of case plans and other decision-making processes particularly in regard to out-of-home placement decisions.

**Strategy Rationale**

Families are experts about their own strengths and areas of needed improvement. Increasing youth and family participation in the development of case plans increases the relevance and family ownership of case plans.

The Family Strengths and Needs Assessment (FSNA) portion of Structured Decision Making (SDM) involves the family in identifying their strengths and in prioritizing their needs to be addressed in the case plan. Consistent use of the FSNA increases staff expertise, thereby increasing the ability to achieve positive outcomes for families.

An accurate assessment of a family's needs and strengths provides an appropriate foundation for planning and delivering needed services and supports.

Improved communication and exchange of knowledge between the families, public and private segments of the child welfare network will result in shared objectives and shared values in all decision making processes, particularly in regard to out-of-home placement decisions.

These factors are expected to reduce the rate of foster-care re-entry.

Milestone		Timeframe		Activities and Results to Date	
<p><b>1.1.1</b> Children's Services Supervisors will be trained to ensure that a Family Strengths and Needs Assessment (FSNA) has been completed prior to the social worker's development of each case plan. The supervisor will then approve the case plan; this process will be verified by the supervisor's Regional Manager.</p>			<p>01-01-05 <b>Completed</b></p>		<p>A performance-based coaching process using specific tracking logs was developed and implemented to confirm staff are appropriately completing all FSNA's.</p> <p>2006 Update: The percentage of FSNA's completed has increased from 94% (2005) to 98% (2006). The timeliness and accuracy of completion of the tools, has remained steady for the past two years at 79%.</p>
<p><b>1.1.2</b> A quarterly report will be produced to assess appropriate completion of all SDM tools.</p>			<p>01-01-05 <b>Completed &amp; Ongoing</b></p>		<p>2006 Update: Quality Assurance reviews conducted between January and June of 2006, indicate an overall SDM compliance rate of 52%. Overall improvement is to be achieved by 2007.</p> <p>To impact performance rates, Quality Assurance Reports to assess appropriate completion of all SDM tools are now generated on a monthly (as opposed to quarterly)s basis. Additionally, Children's Services released a System of Supervision Department Memorandum which calls for monthly case reviews and audits of social worker-supervisor SDM consultations.</p>

<p><b>Strategy 1.2</b> Implementation of the first phase of Family-to-Family to increase family participation in the decision making process.</p>	<p><b>Strategy Rationale</b> Family-to-Family ensures families, extended family members, caregivers, and service partners actively participate in the Team Decision Making (TDM) process. Families are recognized as experts about their own strengths and areas of needed improvement. TDM focuses on collaborative case planning and other decision-making processes and will be conducted whenever a child is at-risk for removal from their family. It is anticipated that the implementation of TDM will decrease re-entries into foster care.</p>		
<p><b>Milestone</b></p>	<p><b>1.2.1</b> TDM facilitators will be recruited and hired.</p>	<p>09-30-07 <b>In Progress</b></p>	<p>2006 Update: Four (4) TDM facilitators have been hired in the following targeted communities: Desert (92201), Metro Region (92507), Mid-County (92440) and Southwest (92543). Additional TDM facilitators are expected to be hired as Family-to-Family is rolled out to the remaining targeted communities of West Corridor (92882) and Valley (92553).</p>
<p><b>1.2.2.</b> Traditional &amp; non-traditional community partners will be identified to provide support and services in the following targeted zip codes: 92201, 92240, 92507, 92543, 92553, and 92882.</p>	<p>06-01-05 <b>Completed &amp; Ongoing</b></p>	<p><b>Activities and Results to Date</b></p>	<p>2006 Update: Family-to-Family regional planning meetings have identified and included community partners (e.g., foster &amp; birth parents, providers, foster youth) in each of the targeted communities. Some of these same partners committed to ongoing support and participation in TDM meetings.</p>

Milestone	Timeframe	Completed & Ongoing	Activities and Results to Date
<p><b>1.2.3</b> Training in Team Decision Making (TDM) and Family-to-Family values (community involvement and partnership for families) will be provided to resource families, community partners, judicial officers and attorneys in targeted zip codes: 92201, 92240, 92507, 92543, 92553, and 92882.</p>	<p>06-01-05</p>	<p><b>Completed &amp; Ongoing</b></p>	<p>2006 Update: Extensive Family-to-Family and TDM training has occurred. Six training events including more than 400 attendees and more than 10 community partner outreach and education events took place in 2006.</p>
<p><b>1.2.4</b> Traditional &amp; non-traditional community partners will be identified to provide support and services countywide.</p>	<p>09-30-07</p>	<p><b>In Progress</b></p>	<p>2006 Update: Community partnerships which currently provide support include; resource parents, foster family agencies, local tribes, The Boys and Girls Club of Desert Hot Springs, YMCA of Corona, local churches, banks, Riverside Community College, as well as numerous other public and private agencies.</p> <p>Furthermore, approximately 400 partners and providers have participated in TDM meetings since our October 2005 launch.</p>

<p><b>Milestone</b></p>	<p><b>1.2.5</b> Training in Team Decision Making (TDM) and Family-to-Family values (community involvement and partnership for families) will be provided to resource families, community partners, judicial officers and attorneys countywide.</p>	<p><b>Timeframe</b></p>	<p>09-30-07 <b>In Progress</b></p>	<p><b>Activities and Results to Date</b></p> <p>2006 Update: In February 2006, Resource families, adoptive parents, social workers, support staff and foster care eligibility staff participated in a Family to Family "Parents as Partners" training. The training focused on methods and tools for strengthening participation and involvement of resource/birth families and social workers and included over 120 participants.</p> <p>Family to Family, Four Core Strategy Training occurred in April and July of 2006. Participants include approximately 135 staff and 15 community partners.</p> <p>Additionally, TDM Preparedness Training was conducted in June and August of 2006. Approximately 140 staff and 20 community partners attended the events.</p> <p>Countywide training is expected to be completed by 2007.</p>
<p><b>Improvement Goal 2.0</b> Develop reunification transition plans which reflect essential services and support through open participation and feedback from traditional and non-traditional partners.</p>		<p><b>Strategy 2.1</b> Collaborate with Prevent Child Abuse Riverside County (PCARC), the local child abuse prevention council, to expand accessibility and availability treatment services with special focus on local substance abuse treatment services through a collaborative model for service provision and distribution of CAPIT-PSSF funding.</p>		<p><b>Strategy Rationale</b> Limited allocations must be maximized with a focus on neighborhood needs as identified by community and parent partners who have firsthand information of existing resources and service gaps. Having accessible and available treatment services provided in a timely manner enhances the likelihood of successful reunification and a reduction in foster care re-entry.</p>

<p><b>Milestone</b></p>	<p><b>2.1.1.1</b>  Conduct thorough analysis of all programs funded through CAPIT-PSSF and Children's Trust Fund (CTF), and the Prevent Child Abuse Riverside County plan to ensure identified needs are being provided in targeted areas.</p>	<p><b>Timeframe</b></p>	<p>01-01-05  <b>Completed</b></p>	<p><b>Activities and Results to Date</b></p>	<p>In 2005, Riverside County developed a new CAPIT-PSSF 3-Year Plan which required completion of a needs assessment. The needs assessment was extracted from our AB 636 County Self-Assessment completed in 2004 which included written surveys, focus groups, face-to-face interviews, telephone interviews and a review of available data and literature. Additionally, Prevent Child Abuse Riverside County (PCARC) distributed and analyzed responses to a survey involving the rating of services currently available and those services needed but unfunded by each region. Focus groups and surveys conducted with various stakeholders in Riverside County identified and ranked service gaps and needs.</p> <p>2006 Update:  In preparation for the next RFP review cycle, Children's services in conjunction with PCARC solicited feedback from community partners regarding their perspective of the service needs and priorities for Riverside County (12/07/06). The results will be utilized as a planning tool to launch a more in-depth needs assessment to be conducted in 2007.</p>
-------------------------	--	-------------------------	---------------------------------------	--	---

Milestone	2.1.1.2 Traditional and non-traditional partners have been identified and invited to participate in RFP process redesign.	Timeframe	01-01-05 <b>Completed &amp; Ongoing</b>	Activities and Results to Date	In 2005 - 2006 Children's Services engaged in active dialog with Prevent Child Abuse Riverside County(PCARC) to review and upgrade the existing CAPIT-PSSF RFP process. Areas of focus were the content of the RFP, the composition and functioning of the RFP review committee, as well as the design and release of a new needs assessment. This resulted in the release of a new RFP in February 2006. In preparation for the next RFP review cycle, on December 07, 2006 Children's Services in conjunction with PCARC solicited feedback from community partners their perspective of the service needs and priorities for Riverside County (12/07/06). The results will be utilized as a planning tool to launch a more in-depth needs assessment to be conducted in 2007.
2.1.3 Explore means by which CAPIT-PSSF and Children's Trust Fund (CTF) may serve Family Maintenance and Family Reunification return clients.			03-01-05 <b>Completed &amp; Ongoing</b>		All families at risk of child maltreatment are eligible for CAPIT-PSSF funded services. This would include Family Maintenance and Family Reunification services. 2006 Update: Dialog continues with the county designated child abuse council, Prevent Child Abuse Riverside County about maximizing the use of available funds to purchase needed services.

Milestone		Timeframe	Completed	Activities and Results to Date	
<p><b>2.1.4</b> Release of new RFP that includes feedback from community partners.</p>			<p><b>Completed</b></p>		<p>2006 Update: A new RFP process and design was implemented in February 2006 which included feedback from community.</p>
<p><b>2.1.5</b> Meet with community partners at least three times during the year to review program direction and revise if necessary.</p>			<p>06-01-05 <b>Completed &amp; Ongoing</b></p>		<p>2006 Update: Children's Services facilitated the following community meetings to solicit recommendations for improvement:            1) Quarterly CAPIT-PSSF partner meetings.            2) Bi-annual SIP Community Forums            3) Quarterly Family-to-Family meetings with community leaders            4) Quarterly Regional Manager meetings with community leaders            5) Joint Collaboration meetings with Prevent Child Abuse Riverside County (PCARC).</p>

**Strategy 2.2**

Encourage continuity of service providers for the family before and after the child has been returned to the home.

**Strategy Rationale**

Removing a child and returning a child during the early stages of reunification are a time when families need consistent support and guidance from individuals who are familiar with the family's strengths and needs. Increasing the availability of these individuals should assist in decreasing the rate of foster-care re-entry.

Milestone	Timeframe	Activities and Results to Date	
<p><b>2.2.1</b> Review California Child and Family Services outcome data for other counties.</p>	<p>01-01-05 <b>Completed</b></p>		<p>CFSR data was reviewed to identify counties that have low rates of re-entry into foster care and identify staffing structures which may contribute to lower maltreatment outcomes.</p>
<p><b>2.2.2</b> Explore staffing structure of Family Reunification and Family Maintenance in counties that have low rates of re-entry into foster care.</p>	<p>01-01-05 <b>Completed</b></p>		<p>A Workgroup was established. Staffing structures for surrounding counties; Orange San Bernardino, San Diego &amp; Los Angeles were reviewed. Counties similar in size to Riverside were also identified and reviewed.</p> <p>The Workgroup compared bifurcated staffing structures with staffing structures of social workers assigned to specialized units.</p>

Milestone	2.2.3 Recommend Family Reunification and Family Maintenance staffing structure alternatives for Riverside County.	Timeframe	01-01-05 Completed	Activities and Results to Date	<p>Social workers in Riverside County are currently assigned specialized service units wherein, the social worker is replaced as the family moves through the child welfare system. Recommendations were made to require a Family Reunification worker to continue to carry cases which have transitioned to Family Maintenance status rather than transferring the case to a specialized Family Maintenance Unit, by December 2006.</p> <p>2006 Update: Recommendations for improvement also resulted in practice changes requiring each reunified family to receive at least three months of Family Maintenance Services prior to closure.</p>
-----------	--	-----------	-----------------------	--------------------------------	--

	<p><b>2.2.4</b> Option of single social worker assigned throughout reunification and family maintenance process is reviewed.</p>	<p>12-30-06 <b>Completed</b></p>	<p>2006 Update: Social workers in Riverside County were previously assigned to specialized service units wherein, the social worker was continually replaced as the family moved through the child welfare system.</p> <p>The staffing structure for Family Maintenance and Family Reunification Workers was recently changed to integrate the two into one unit. This new structure allows Family Reunification workers to continue to carry cases which have transitioned to Family Maintenance status rather than transferring the case to a specialized Family Maintenance Unit.</p> <p>These program changes will minimize the number of times a new social worker is assigned to the family. It is anticipated the relationship between the social worker and the family will be strengthened, while knowledge of the family's strengths and areas of need improvement will be preserved.</p>
--	--	--------------------------------------	---

<p><b>Milestone</b></p>	<p><b>2.2.5</b> A TDM will be initiated at the time of removal of the child and at the time of reunification to identify on-going and future service needs to ensure future stability.</p>	<p><b>Timeframe</b></p>	<p>09-30-07 <b>In Progress</b></p>	<p><b>Activities and Results to Date</b></p>	<p>2006 Update: TDMs are occurring in the 92201, 92240, 92543 and 92507 targeted communities. By September 2007, Initial Removal and Risk of Removal TDMs will be implemented in the 92882 and 92553 zip codes. By September 2007, the use of TDMs will be expanded countywide to include Placement Change and Exit TDMs.</p>
<p><b><u>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</u></b> Expanding the availability of effective substance-abuse treatment programs was identified as a systemic factor impacting this outcome. Client priorities for federally funded substance abuse treatment services must be changed to allow parents involved in child welfare services cases to access substance abuse treatment in a timely manner; current guidelines treat such parents as low priority clients. Equalizing and expanding service array, primarily in rural areas, is needed.</p> <p>Improvements centered around Family to Family and SDM have been identified to increase parental involvement in the development of the case plan which was also identified as a systemic factor impacting the achievement of this outcome indicator.</p>					
<p><b><u>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</u></b> Maintain technical assistance for Family-to-Family implementation. Community partners need to be educated in Family-to-Family and TDM. Additional outreach provided by the State of California to community partners is needed to reinforce the concept that child welfare services is everyone's business.</p>					
<p><b><u>Identify roles of the other partners in achieving the improvement goals.</u></b> The roles partners have identified for themselves are active participants in the outcomes and accountability process including participation in TDM, acting as advisors, and participants in training sessions. The local child abuse prevention council, Prevent Child Abuse Riverside County (PCARC) assisted in building collaboration in the RFP redesign process and is currently in the planning stages of a new needs assessment due to be completed in June 2007.</p>					
<p><b><u>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</u></b> Flexible funding streams are needed for voluntary and adjudicated families. Changes are needed in federal substance abuse treatment priorities.</p>					