



Table of Contents

Contents

1. California-Child and Family Services Review Signature.....	3
2. Introduction.....	5
3. System Improvement Plan (SIP) Narrative	6
4. Child Welfare/Probation Placement Initiatives.....	28
5. Five-Year SIP Chart	36
6. Service Provision for CAPIT/CBCAP/PSSF Programs	49
7. Appendices	50
Appendix A: C-CFSR Core Stakeholders	50
Appendix B: CAPIT/CBCAP/PSSF Expenditure Workbook.....	51
Appendix C: CAPIT/CBCAP/PSSF Program and Evaluation Description	52

California- Child and Family Services Review Signature

County	Orange
CSA Period Dates	January 6, 2019-January 5, 2024
SIP Period Plan Dates	June 6, 2019- June6, 2024
Outcome Data Period	Quarter 2, 2018
County Child Welfare Agency Director	
Name	Anne Bloxom
Signature*	
Phone Number	(714) 541-7793
Mailing Address	Social Services Agency 500 N. State College Blvd. Orange, CA 92868
County Chief Probation Officer	
Name	Steven J. Sentman
Signature*	
Phone Number	(714) 645-7001
Mailing Address	Orange County Probation P.O. Box 10260 Santa Ana, CA 92711-0260
Board of Supervisors (BOS) Signature	
BOS Approval Date	
Name	
Signature*	

*Signatures must be in blue ink

Mail the original Signature Sheet to:

Outcomes and Accountability Section
Children and Family Services Division
California Department of Social Services
744 P Street, MS 8-12-91
Sacramento, CA 95814

Contact Information

Child Welfare Agency	Name	Rita Rangel
	E-mail address	Rita.Rangel@ssa.ocgov.com
	Phone Number	(714) 704-7908
	Mailing address	Orange County Children & Family Services 800 North Eckhoff Street, Building 121 Orange, CA 92868
Probation Agency	Name	Shannon Mathieson
	E-mail address	Shannon.Mathieson@prob.ocgov.com
	Phone Number	(714) 935-6689
	Mailing address	Orange County Probation P.O. Box 10260 Santa Ana, CA 92711-0260
CAPIT Liaison	Name	Randy Balduck
	E-mail address	Randall.Balduck@ssa.ocgov.com
	Phone Number	(714) 566-2828
	Mailing address	Orange County Children and Family Services 800 North Eckhoff Street, Orange, CA 92868
CBCAP Liaison	Name	Randy Balduck
	E-mail address	Randall Balduck@ssa.ocgov.com
	Phone Number	(714) 566-2828
	Mailing address	Orange County Children and Family Services 800 North Eckhoff Street, Orange, CA 92868
PSSF Liaison	Name	Randy Balduck
	E-mail address	Randall Balduck@ssa.ocgov.com
	Phone Number	(714) 566-2828
	Mailing address	Orange County Children and Family Services 800 North Eckhoff Street, Orange, CA 92868

2. Introduction

In 2001, California Assembly Bill 636 (AB 636) established the Child Welfare Outcomes and Accountability System. AB 636 was designed to meet two wide-ranging objectives: (1) to improve Child Welfare Services (CWS) for children and their families in California, and (2) to provide a system of accountability for outcome performance at both the state and county levels. The California-Children and Family Services Review (C-CFSR) is the mechanism used by the State and counties to achieve the objectives outlined in AB 636. According to the California Department of Social Services (CDSS), Children's Services Outcomes and Accountability Section (CSOAS) and the Office of Child Abuse Prevention (OCAP), the C-CFSR process operates on a philosophy of continuous quality improvement (Exhibit 1), interagency partnership, community involvement, priority service provision, and public reporting of program outcomes. In addition to its focus on priority needs and improved outcomes, the C-CFSR maximizes compliance with federal regulations for receipt of Title IV-E and Title IV-B funds, which include the Promoting Safe and Stable Families (PSSF) program. Expenditure requirements for the Child Abuse Prevention, Intervention and Treatment (CAPIT), Community- Based Child Abuse Prevention (CBCAP) and PSSF funds continue to be integrated into the County Self-Assessment (CSA) and System Improvement Plan (SIP) components of the C-CFSR process.

Exhibit 1. C-CFSR Process



As is depicted in Exhibit 2 (next page), Orange County launched into the County Self-Assessment (CSA) process in March 2018. The County used multiple methods, data sources, and community engagement strategies to examine and analyze its strengths and needs across the continuum of care, including reviews of procedural and systemic practices, current levels of performance, and available resources. The Orange County SIP is built upon the data and lessons learned from both the Peer Review conducted in September of 2018 and the CSA. Development of the SIP was guided by an implementation team, comprised of staff from Child and Family Services (CFS) and Probation with facilitation support from Harder+Company Community Research. The SIP Planning Team (SIP Team) met routinely throughout the C-CFSR process to design a method that was inclusive of the larger community, informed by County data and trends, and guided by best and promising practices in the field. The information gleaned from the CSA and Peer Review was synthesized and shared with stakeholders during various engagement sessions to inform the development of the SIP goals, objectives and strategies. This information now serves as

the roadmap of measurable goals and strategies to be implemented by the County in the next five years (2019- 2024) to improve safety, permanency, and well-being of children.

Exhibit 2. Orange County CSA/SIP Engagement Process and Timeline



Orange County has maintained the same CAPIT/CBCAP/PSSF service plan for the last several years. As funding changes, CFS leverages other county funds to ensure that service provisions continue to remain the same.

3. System Improvement Plan (SIP) Narrative

C-CFSR Team and Core Representatives

The composition of the Orange County SIP Planning Team was based on the C-CFSR Instruction Manual list of required core and consulted member representatives. Required stakeholders engaged throughout the SIP process included Child and Family Services (CFS), Juvenile Probation, Behavioral Health Services, Education, Juvenile Court, Indian Child Welfare Act (ICWA) representatives, service recipients including foster youth, parents and resource families, and county agency partners. Please see Appendix A for list of representatives.

Orange County engaged other important, although not required, partners including representatives from law enforcement, Housing, and The Regional Center. Various collaboratives and committees such as the Child Welfare System Improvement Partnership (CW SIP), Eliminating Racial Disparity and Disproportionality (ERDD), Self-Evaluation Team (SET) and Foster Youth Outcomes (FYO) were also engaged to ensure that a wide range of participation and input were gathered for the development of the SIP. Additionally, in preparing the CSA report, interviews, focus groups, and surveys were used to: obtain information from hundreds of consumers, foster parents, relative caregivers, youth, and service providers about areas that worked well for CFS and areas needing improvement; and to develop recommendations to improve the process. The rigorous engagement of stakeholders in the development of the strategies resulted in strong support and commitment coming from all levels within and outside of the CFS and Probation departments. This dynamic and continuous feedback process assures that CFS and Probation will maintain effective, relevant strategies and action steps to contribute to improved outcomes. Exhibit 3 details the core SIP Planning Team which was used to develop the process for stakeholder participation in the development and prioritization of SIP strategies.

A key priority for the SIP Planning Team was to ensure a thoughtful and community-focused approach was used to engage stakeholders in the SIP process. This approach guided the development of interactive and learning- focused stakeholder sessions rooted in the findings of the CSA, to ensure rich and robust conversations around CSA findings and potential SIP strategies.

Exhibit 3. SIP Planning Team

Organization	Name
Social Services Agency, Children and Family Services	Rita Rangel
	Ken Santini
	Anne Bloxom
	Cynthia Barrientos-Galvez
	Dang Vu
	Tanya Olivares
	Rachel Levin
	Ericka Danczak
Social Services Agency, Administration	Lillian Chang
	Cathy Chang
	Randy Balduck
Orange County Probation	Anna Ruiz
	Tim Todd
	Lisa Sato
	Tawnya Medina
	Doug Sanger
	Shannon Mathieson
	Gil Garcia
	Lori Oliver
Harder+Company Community Research (planning, data synthesis, and report support)	Cristina Magaña
	Taylor Shrum

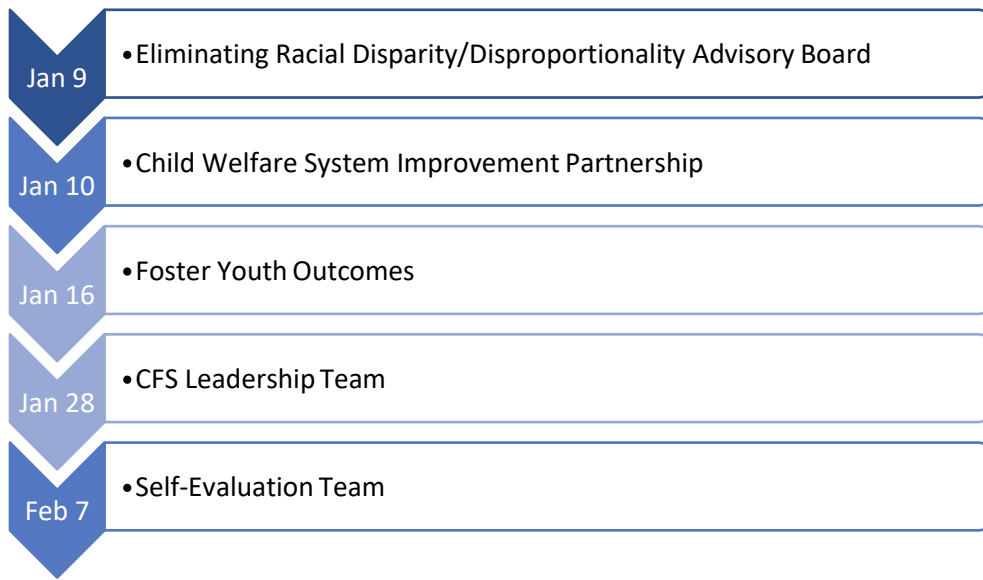
As mentioned previously, the development of SIP strategies was data-driven and informed by stakeholder input. CFS and Probation staff conducted an extensive, comparative assessment of its federal outcome results. This assessment compared Orange County's performance to national goals and state outcomes. CFS determined that an area of focus would be 3-P4 Re-Entry into Foster Care in 12 Months while Probation focused on 3-P2 Permanency in 12 Months for Youth in Foster Care 12-23 Months.

Five stakeholder sessions (see Exhibit 4, next page) to gather input on potential SIP strategies were held between January and February 2019.

Key Themes: CSA and Peer Review

- County has large number of services which need to be tailored to children, youth, and families with complex needs
- Provide training and support to staff and partners to ensure consistency and quality of services
- Strengthen the implementation and reach of trauma-informed practices
- There is a need for more coordination and communication of services to be offered to:
 - Increase access and quality of services
 - Improve partnerships and service array

Exhibit 4. Stakeholder Input Sessions



Prioritization of Outcome Data Measures/Systemic Factors and Strategy Rationale

To best determine the performance on the outcome measures of focus (e.g., 3-P4 and 3-P2), CFS and Probation staff reviewed their respective data on the CFSR measures, stakeholder feedback collected during the CSA process, and brought the information to the executive level and other managers and supervisors for input and decision making. In this next SIP cycle, CFS will prioritize outcome measure 3-P4 and two systemic factors (Agency Collaboration and Service Array) while Probation will prioritize outcome measure 3-P2 and Foster and Adoptive Parent Licensing, Recruitment and Retention for the systemic factor.

Children and Family Services

3-P4 Re-Entry rate was an outcome area in which CFS did extremely well in the past; however, with the change in focus to permanency in the previous SIP cycle, the re-entry rate started to increase. CFS observed an influx of failed family maintenance cases and wanted to examine the causes for this and explore whether there were patterns or trends that could provide an opportunity for practice improvement. As such, as described above, 3-P4 Re-Entry rate was selected by Orange County CFS as an area of focus. During the CSA and SIP development processes, literature reviews on re-entry were conducted, summarized, and shared with the SIP Planning Team and incorporated into the SIP planning process. Orange County took a collaborative approach to gather input on the SIP strategies from various stakeholder groups where stakeholders had an opportunity to review CSA findings and through an interactive process, provide input on SIP strategy priorities. This process enabled Orange County to have a robust SIP process with varying perspectives in the SIP strategy development.

Informed by the CSA, in this next SIP reporting cycle, Orange County will aim to improve two systemic factors: Agency Collaboration and Service Array Coordination. There was agreement among stakeholders and community partners that more collaboration around resources and services in Orange County is needed, especially with aftercare services. Above all, stakeholders emphasized the need to

leverage existing partnerships and programs to better serve families rather than creating new programs. As the service array is already large in Orange County, strategic communication and interaction between organizations enhances how families are served and the quality of the services they receive. A focus on streamlining efforts and leveraging existing initiatives could lead to less duplication of staff efforts and higher quality services for families.

Strategy Rationale

Guided by the stakeholder input, Orange County identified strategies that would have impact across the spectrum of the continuum of care and which would involve all departments within the agency; thereby, encouraging active participation and ownership in the implementation of SIP strategies. For example, it was a deliberate approach to select prevention-focused strategies for lower risk families, intervention-focused strategies for those families served by CFS, and aftercare strategies for families exiting the system. The development of SIP strategies, action steps, and implementation timeline was done in collaboration with the CFS management staff that would be leading the strategy; therefore, increasing the likelihood of success.

- **Strategy #1: Conduct Child and Family Team meetings at Family Resource Centers (FRCs) at the time of transition from Family Reunification (FR) to Family Maintenance (FM) to connect families to the community.** This strategy has a twofold aim (i.e., to help the families establish aftercare and prevention of re-entry into care). The premise behind this strategy is that if families are connected to their own community resources, they are less likely to re-enter the child welfare system. Furthermore, this would allow the families to access and receive FRC services other than court ordered services (e.g., basic needs, financial literacy, child enrichment activities, etc.).
- **Strategy #2: Conduct a retrospective Failed Family Maintenance study to identify trends/root-cause that led to re-entry care.** This strategy will allow CFS to identify opportunities to strengthen its use of evidence-based practices and service delivery. This study will assist in understanding of any traits that families who re-enter into foster care might have in common, what trends can be identified, as well as provide essential recommendations regarding the policies, procedures and strategies the Agency consider implementing to prevent/reduce re-entry. This is elaborated further in Exhibit 7.
- **Strategy #3: Optimize Drug Medical Services for families and youth in need.** This strategy would help CFS address one of its largest needs identified in the CSA to provide substance abuse services tailored to youth and families.
- **Strategy #4: Increase capacity of Intensive Family Support Services (IFSS) to support families with transition of children back to their home.** The IFSS program was initiated within the most recent SIP cycle and showed promising results with meeting the goal of returning children home quicker. However, CFS also observed that families with an IFSS worker were more likely to have children safely stay at home. Therefore, this strategy was brought forward to this new SIP cycle to assess whether families that have this service re-enter. However, this program continues to struggle with proper staffing as the agency encounters difficulty filling positions, retaining social workers, and adding positions to meet the client needs. In order to maximize capacity and build on the success of the IFSS program, CFS will need to re-evaluate staffing levels during this next SIP cycle.

Summary of CWS Outcome Measures Performing Below National Standard

CWS used 2017 Quarter 4 data (CSA baseline) in determining what CFSR measures were below the national standard.

3-P1: Permanency in 12 Months for Children Entering Foster Care. CFS focused on permanency during the last SIP cycle and made several improvements during that time period. The baseline was 34.8 percent (Q4, 2017) and the current performance is 36.4 percent (Q2, 2018). No consistent trends were observed in data by age, ethnicity or gender. Considering that in 2014 the performance for this outcome measure decreased to a low of 23.1 percent, Orange County has made great strides in improving this measure over the last 5 years. There was a fairly consistent growth in reunification likely attributed to the last SIP's focus on reunification. Most exits to permanency are reunifications. Although Orange County is not meeting the national standard of 40.5 percent, it exceeds California's performance of 34.5 percent (Q2, 2018). It should be noted that the early implementation of the Resource Family Approval (RFA) program had unintended consequences such as delays to permanency for some youth waiting for adoption. Another contributing factor to Orange County not meeting standards in this measure could be attributed to lengthy court processes and continuances.

3-P4: Re-Entry into Foster Care in 12 months. CFS did very well in this outcome measure in the past; however, possibly due to the focus on 3-P1 and 3-P2 in the last SIP cycle, this outcome measure dramatically increased. During the CSA and Peer Review process, it was determined that it would be a measure that CFS would focus on during the next SIP cycle to ensure that CFS would trend in the desired direction for this outcome measure. See Exhibit 5 for more detail.

3-P5: Placement Stability. Orange County's placement stability at baseline was 4.34 (Q4, 2017) and is now 4.19 (Q2, 2018), falling slightly short of the National Standard of 4.12. The 5-year change also showed an overall decline in placement stability. Placement changes increased two years ago, likely due to implementation of RFA directives, which made it difficult for kinship caregivers to meet home approval standards. These directives were much stricter than what was previously in place; thus, fewer kin homes could meet the criteria for the new approval needed. For example, when Orange County implemented RFA in February of 2016, many children were already placed in relative approved homes. It was understood that those homes would need to eventually "convert" to Resource Family Homes and meet the RFA standards for children to remain in those homes. The State has delayed the deadline for conversion of these homes to the end of 2020. Orange County has converted many of the relative homes approved under the old system into Resource Family Homes. Many remain to be converted. Of note, a relative retains their Relative Approval until the children leave the home, until the children's adoption is finalized, until they are approved as a Resource Family or until the State deadline, whichever comes first. Also, should a family not meet Resource Family Approval standards and their RFA conversion application be denied, they continue to retain their Relative Approval. To date, Orange County has only denied one RFA conversion application for a relative or nonrelative extended family member (NREFM) home. The children remain in that home in compliance with a court order.

In addition, a large group home provider suddenly terminated their contract resulting in several children experiencing placement changes. In general, placement moves are positively correlated with children's age, such that older children tend to have more placement moves. Black youth tend to have more placement moves than youth of other race/ethnicities, but there are no consistent trends amongst other ethnic or gender groups. Also, the conversion of Orangewood Children and Family Center (OCFC) to a ten-day shelter has caused more placements for children. Before OCFC was the receiving

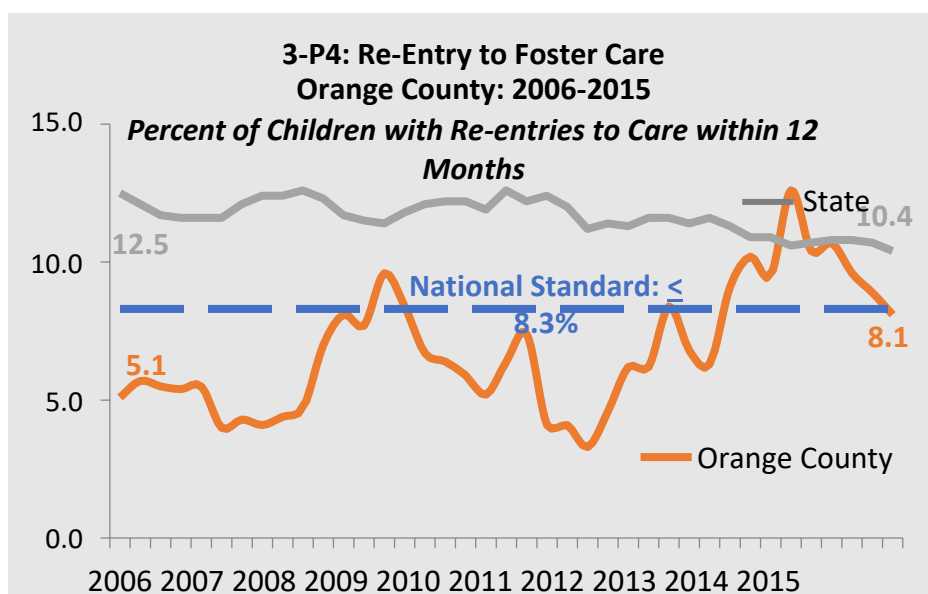
home that allowed CFS Staff to assess for the best and most permanent place for the child to remain in while in out of home care. Now emergency placements occur more often however children can be moved out of those emergency placements if a more suitable placement is found. Also, the increase in big sibling sets makes it harder to find suitable placements that can keep all the siblings together.

2B: Timely Response (10-day Response Compliance). The baseline performance for 10-day response is 85.3 percent (Q4, 2017) and current performance is 92 percent (Q2, 2018) which exceeds the National Standard by 2 percent. Strategies that may impact performance could be staff capacity building, expedited processing for maltreatment referrals, updated technology, accurate and expedited data entry processes and regionalization.

3-P4 Re-Entry into Foster Care in 12 months (Area of Focus)

Exhibit 5. Orange County Performance - Re-Entry into foster care in 12 months

	Time Period	Data Point
Baseline Performance	01/01/15-12/31/15	9.6%
National Standard	NA	<=8.3%
Current Performance	07/01/15-06/30/16	8.1%



Currently, Orange County's performance in regard to re-entry into foster care within 12 months is 8.1 percent (entry cohort 07/01/15-06/30/16), which exceeds the National Standard of <= 8.3 percent and California's performance of 10.4 percent. A 5-year change shows an increase in re-entries into foster care within 12 months.

Across those five years, there has been an increase in foster care re-entries, which may be attributed to growing efforts on increasing timely reunification. However, in the most recent year, there has been a decline in re-entries; nevertheless, there remains an overall increase when looking at a 5-year change. Strategies that may impact the performance in this outcome include: Child and Family Team (CFT) meetings, Wraparound, Safety Organized Practice, Family Resource Centers, and Differential Response (Path 1 and 2).

Note about data: There are large fluctuations in data due to relatively small cohorts measured,

especially when broken down by ethnicity, age, and gender. The cohort for this measure includes only youth in care who reunify or enter guardianship within 12 months, though many youth reunify after 12 months. It is limited in that the re-entry measure does not assess the recidivism of all youth who reunify, and only captures the timeframe in which reunification occurred. Orange County generally reunifies foster youth between 12-24 months, which is not assessed in this measure.

CFS Strategy Rationale to Address Outcome Measure 3-P4 and Systemic Factors (Agency Collaboration and Service Array)

Exhibits 6-9 detail the strategies CFS will implement in this SIP reporting cycle to address 3-P4, Agency Collaboration and Service Array.

Exhibit 6. Outcome Measure: 3-P4-Re-Entry to Foster Care in 12 months and System factors: Agency Collaboration and Service Array

Strategy #1: Conduct Child and Family Team Meetings at Family Resource Centers at the time of transition from Family Reunification to Family Maintenance to connect families to the community

Justification Rationale:

A primary purpose of a Child and Family Team Meeting (CFTMs) is to engage families, children and youth in the decision-making process and obtain the most successful outcome for the families, while maintaining safety. The meeting ensures the family voice and choice is heard, and provides an opportunity to build the family's network and supports to guide them through their journey.

Orange County has had a strong teaming process throughout the years, starting with Wraparound Family Team Meetings and Family Group Decision Making (FGDM) meetings and later Team Decision Making (TDM) meetings. Given the Continuum of Care Reform (CCR) efforts, Orange County now is implementing CFTMs. The implementation of CFTMs differ from the implementation of earlier teaming models in that all aspects of the case, and not just placement decisions, are discussed and families serve as their own experts, informing the agency of their needs.

In the CSA it was determined that the agency needs to work on community aftercare services to ensure that families do not re-enter the system. This effort aligns with Agency Collaboration and Service Array systemic factors. Orange County has chosen to conduct a small pilot of CFTMs for cases transitioning from Family Reunification (FR) to Family Maintenance (FM) to take place at local Family Resources Centers (FRCs) near the family's home. The purpose of holding these CFTMs at an FRC is to connect the family to their community resources and services at a critical time of the case. i.e. when the child(ren) are transitioning from out-of-home care back into a parent's(s') home and care. The service array found in the local FRCs will also eliminate transportation barriers as well as language barriers for families who need these vital services. Because FRCs have already done a service needs analysis to determine what is needed in the community it is serving, this establishes community buy-in and trust. FRCs promote protective factors which in theory will assist in families establishing positive relationships in their communities and reduce the need for CFS involvement. If families feel connected to their community especially after their children are returned from out of home care, this will more than likely reduce the re-entry of these families back into the child welfare system. The families will have the services and agency collaboration needed to ensure their success.

The transition from out of home care into in home care, includes overnight visits, weekend overnight visits and the start of a trial period when the child(ren) return home and the parent(s) is/are fully

responsible for the child's(ren's) care and supervision. The goal of having these CFTMs at the FRCs is to assist families with this transition by developing a collaborative plan that will ensure that supports, resources and services are in place and will promote the families' successful reunification. The CFT members may include but is not limited to the parents, family members, family support friends, service providers, caregivers, social workers, Probation Officers, PHNs, community advocates and/or school/education partners. CFS will work collaboratively with the FRCs by attending quarterly meetings to discuss any operational as well as systemic needs that either agency may be experiencing. The pilot will also be discussed in the meetings and need to change or modify the plan will be looked at on a regular basis.

The pilot will start at one of the FRC's in the city of Santa Ana, as this is the city where CFS receives the highest numbers of referrals. Families and Communities Together (FaCT), comprised of 15 FRCs located throughout the county's highest-risk communities, has been engaged in conceptualizing this pilot and is looking forward to this new collaboration with the CFS since it closely aligns with its organizational mission. Through partnerships, FaCT works to strengthen prevention and intervention services designed to reduce the risk of child abuse and neglect. Every FRC is unique to its community and services are offered by multicultural staff that reflect the surrounding neighborhoods and families they serve. To support this strategy and the development of the pilot, CFS will work collaboratively with FaCT to plan, develop and operationalize the pilot. During the planning phase, we will determine if an Memorandum of Understanding (MOU) will be needed or if through this new collaboration CFS will be able to leverage existing relationships/ partnerships to better serve the families. This pilot will assist families by connecting them to a local FRC that can assist with aftercare services and support they may need. A secondary gain from this pilot will be to build families awareness and connections to other supports within their own community. As the pilot is conducted, Orange County will monitor the outcomes by logging the number of meetings occurring at the FRC and will make necessary adjustments to ensure the goal of connecting families to aftercare services within their community is being achieved, in hopes that families will then not re-enter into the public child welfare system since they have the resources they need when they start to experience stress in their families.

Outcome Measures Affected: 3-P4, systemic factors: Agency Collaboration and Service Array

Action Steps:

- A. Conduct literature scan to determine successful efforts related to implementing this model. For example, the Child Welfare Information Gateway has extensive resources and findings from federally-funded demonstration projects on the implementation of family centered models akin to CFTMs within community settings and in partnership with community agencies.
- B. Reach out to other counties and other jurisdictions to elicit information to determine if any are conducting CFTMs at FRCs to identify potential promising practices.
- C. Orient FaCT managers on intent and desired outcome of strategy and solicit input for implementation.
- D. Orient FRC on intent and desired outcome of strategy and solicit input for implementation.
- E. Form a workgroup that will develop a business protocol to establish guidelines for the use of FRCs to ensure clarity in role, coordination of meetings, and expectations related to the CFTM model.
- F. Develop and execute a communication plan to inform all staff of new guidelines.
- G. Build and maintain a working relationship with FRCs by having on-going quarterly meetings between FRCs and CFS staff involved in CFTMs. The meetings will discuss any operational as well as systemic needs that either agency may be experiencing. The agency's collaboration will continue to be addressed to ensure that the agency understands the needs of the FRCs. FRC's will have the opportunity to discuss and bring any successes or barriers they are experiencing with the

CFTM pilot. These meetings will continue until such time as the pilot is active or moved into a sustainable practice.

- H. Train CFS and FRC staff on collaboration to support this strategy. For example, CFTMs held at the FRCs will discuss the transition of the case from FR to FM and resources needed to have a successful transition. The CFT participants will be invited to participate to support the family as is done in all CFTMs. The CFTM will invite a FRC representative to participate in the meeting so that they can better understand the family's needs establish a connection for the family. The training will be completed by in house training. Training will occur in the FRC's and a curriculum will be developed as more needs are determined. A topic that will be covered will be educating the FRC staff understand what the purpose of a CFTM, the state mandates associated with CFTMs, etc. This training will be conducted by a CFTM facilitator.
- I. Implement the pilot project in the City of Santa Ana.
- J. Track and monitor implementation and outcomes by pulling the business objects report from CWS/CMS and creating a CFTM log in excel that tracks where the CFT meetings are occurring, number of families served, and re-entry status. The CFTM excel log sheet will be created and kept in the CFT Program. The log will ensure we are able to track the CFTMs that occur in the FRC's since CWS/CMS does not have the capacity to indicate the exact location of where the CFTM occurred if it's not in the list of the following places: Court, CWS Office, Home, In Placement, Other, School. The business objects reports will look at those cases that have had a CFTM at an FRC and look at the recidivism of those cases as compared to those that did not have a CFTM at an FRC.
- K. Hold annual meetings with stakeholders to report recommendations, outcomes and elicit input.
- L. Make necessary modifications to business referral protocols and CFTs based on recommendations from annual meetings. The meetings will discuss the finding from the reports created to track implementation and outcomes of the CFTMs at FRCs. If outcomes are positive then continue to roll out to other high impact FRCs based on staffing capacity.

Systemic Needs to Achieve this Strategy:

- Assess CFT staffing needs and make adjustments as needed
- Possible budget modifications
- Space, supplies, and equipment to conduct meetings

Education/Training Needs to Achieve this Strategy:

- Training of both CFS and FRC staff on collaboration to support this strategy

Roles of Other Partners in Achieving this Strategy:

- Team with FRC
- Attend FRC Leadership Council Meeting
- Court Programs, who have FR caseloads, to monitor staff compliance in scheduling transition CFTMs at the participating FRCs.
- Collaborate with FaCT managers
- Collaborate with Policy Development Unit (PDU) to explore need for a protocol or additional policies and procedures to support this strategy
- Partner with Contract Services/Administration Teams

Evaluating and Monitoring:

- Internal
 - Create a tracking excel log of CFT meetings conducted at FRCs that will be maintained by the CFT program
 - Create a procedure and communication piece regarding this new process to share with all staff
 - Monitor compliance with new FRC protocol
- External
 - Data analysis of successful transition from Trail Home Visit to Family Maintenance without re-entry
 - Data analysis of re-entry cases assigned to an FRC for a CFT to assess impact on recidivism

Exhibit 7. Outcome Measure: 3-P4-Re-Entry to Foster Care in 12 months

Strategy #2: Conduct a retrospective Failed Family Maintenance (FM) study to identify trends/root-cause that lead to re-entry care

Justification Rationale:

A clear understanding of the families that re-enter into foster care is essential to providing recommendations regarding the policies, procedures and strategies the Agency needs to implement to assist families in sustaining reunification back in the home.

A research study on Failed Family Maintenance cases will provide a starting point to identify areas of need with regard to recidivism of children who exit the foster care system. Such a study will focus on the Orange County foster care caseloads and will allow recommendations from the study to be tailored to cases within the county.

Outcome Measures Affected: 3-P4

Action Steps:

- A. CFS Administrative Manager I will work with the Research Unit to finalize the research question (e.g., What are the client and CFS characteristics that lead to failed FM) and determine criteria for selecting cases, and data sources.
- B. Research Unit to extract existing secondary data (e.g., Safe Measures, Child Welfare Services/Case Management System (CWS/CMS), conduct data analysis, and provide findings to management.
- C. Conduct literature review to identify emerging best practices to support FM.
- D. Research Unit and SET team to hold a data review session with Data Analyst to review findings from the secondary data analysis and literature review mentioned above.
- E. Research Unit and SET team to develop and submit recommendations to CFS administration based on review of data analysis findings.
- F. Implement recommendations as feasible.
- G. Track rates of failed FMs following implementation of recommendations using manual log recording of failed FMs.
- H. Hold annual meeting with stakeholders to review rates of failed FMs and elicit input.
- I. Develop an action plan based on the findings of the study and present to CFS leadership. Leadership will determine the feasibility of executing the plan based on the data received.

Systemic Needs to Achieve this Strategy:

- Dedicated Research Analyst

Education/Training Needs to Achieve this Strategy:

- Research Analysts trained in research methods and statistics
- Research Analysts will meet with CFS staff to brainstorm potential factors that may be contributing to failed FMs to understand what areas need improvement and lead to less recidivism

Roles of Other Partners in Achieving this Strategy:

- The majority of the work can be handled within the Agency. Research Analysts may need to ask for assistance from sister agencies such as the Health Care Agency, Probation, Dependency Court

Evaluating and Monitoring:

- Evaluate the factors that may contribute to failed FM code court reports for non queryable information, extract data from CWS/CMS, evaluate which factors are significant in contributing to failed FMs.
- Objectives are threefold: 1) to examine factors that may have contributed to the subsequent 387 petitions being filed, 2) provide characteristics of children and families who have had 387 petitions filed, 3) examine family supports offered and engaged prior to the 387 petition.
- Approximately 70 families (~120 children) will be included in the sample. The Research Unit is creating a codebook to standardize coding of reports. For each family, juris-dispo and detention reports will be coded. Research Analysts will be coding the court reports. They will meet to discuss coding rules to ensure that there is a clear understanding of how information should be coded.
- In addition, information from County Council narratives as well as queryable CWS/CMS data will be combined with coded data to form a more comprehensive dataset used in analysis.
- Review results of study with the SIP team.
- Once the study is complete, use continuous quality improvement (CQI) approach by continuously looking at our structure, process, output, outcome and feedback loop to monitor the action plan, review relevant data, and continue to problem solve solutions to improve the re-entry rates.

Exhibit 8. Outcome Measure: Agency Collaboration and Service Array **Strategy #3: Optimize Drug Medi-Cal Services for families and youth in need**

Justification Rationale:

Extensive evidence from the literature and from our CSA findings indicate that parents, youth and families affected by substance use are at increased risk of re-entering foster care without proper interventions and ability to connect to resources within their community. During the CSA process stakeholders, community partners, parents and youth indicated that Orange County needed to improve drug treatment service delivery. CFS families are not currently connected to Drug Medi-Cal services despite identifying a need for this service during the CSA process. Thus, through a collaborative approach, CFS and Orange County's Health Care Agency, will work to optimize access to Drug Medi-Cal Services for families and youth who present with substance use treatment needs. Drug Medi-Cal (DMC) is a treatment funding source for eligible Medi-Cal members. In order for Drug Medi-Cal to pay for covered services, eligible Medi-Cal members must receive Substance Use Disorder (SUD) services at a

Drug Medi-Cal certified program. Drug Medi-Cal Services are contingent on medical necessity and defined as following for Adolescents: an adolescent individual shall be assessed to be at risk for developing a SUD or meet the American Society of Addiction Medicine (ASAM) adolescent treatment criteria. For an adult, the criteria is either the individual shall have received at least one diagnosis from the Diagnostic and Statistical Manual of Mental Disorders (DSM) for Substance Related and Addictive Disorders (with the exception of Tobacco-Related Disorders and Non-Substance Related Disorders), or the individual shall meet the ASAM Criteria definition of medical necessity for services based on the ASAM criteria.

Drug Medi-Cal services in Orange County include but are not limited to outpatient drug free which is less than nine hours of service/week (adults) and less than 6 hours a week for adolescents. In this program no drugs are administered as a weening method. Intensive outpatient services which are nine or more hours of service a week for adults and 6 hours or more for adolescents. Clinically-managed low intensity residential which is 24 hours of structure with available trained personnel; at least 7 hours of clinical services a week for adults and at least 5 hours of clinical services a week for adolescents. Clinically-managed high intensity residential 24-hour care with trained counselors to stabilize multidimensional imminent danger and prepare for outpatient treatment; at least 14 hours of clinical services a week for adults and at least 5 hours of clinical services a week for adolescents. Other programs include clinically managed residential withdrawal management which uses a social model detox, medically monitored inpatient withdrawal management (medical detox) and medication assisted treatment.

Outcome Measures Affected: Agency Collaboration and Service Array

Action Steps:

- A. Outreach to other counties who are utilizing Drug Medi-Cal Services to understand how this is being implemented and impact on re-entry.
- B. Engage and partner with Health Care Agency (HCA) through the Child Welfare System Improvement Partnership (CWSIP) monthly meeting to orient them to the intent and desired outcome of strategy, and to solicit input and cooperation for implementation.
- C. Develop and execute a communication plan to inform all staff of new screening tool and practice change.
- D. In collaboration with HCA, provide staff training to include awareness of resources, improve child welfare practice in optimizing Drug Medi-Cal Services and use of harm reduction approaches. The training plan includes but is not limited to presentations to all court case carrying programs. The presentation is called Drug Medi-Cal Organized Delivery System (DMC-ODS), Overview of Services and is conducted by HCA. In the training the SUD criteria is outlined. Training is delivered once a month until all court programs have received the training in their All-Staff meetings, anywhere between 50 to 100 staff are being trained once a month. The target completion date is August 2021.
- E. Identify participants through the use of screening tool that has already been developed by HCA for Drug Medi-Cal services. See attachment for SUD criteria.
- F. Collaborate with HCA to identify a practical approach to evaluate effectiveness of the screening tool and develop a referral process to increase access to Drug Medi-Cal Services for families and youth.
- G. Develop a tracking mechanism for referred families and youth.
- H. Monitor implementation of services to determine if desired goals are being met.
- I. Hold annual meeting between CFS and HCA to review service/program data.
- J. Identify opportunities to improve child welfare practice and services based on recommendations from annual meetings.

Systemic Needs to Achieve this Strategy:

- Systems Coordination of HCA and Child Welfare around drug treatment services for youth and adults, including optimizing Drug Medi-Cal benefits

Education/Training Needs to Achieve this Strategy:

- Increase awareness of available Drug Medi-Cal Services and other related resources and how to access them (messaging...once developed new policy and procedure)
- Train staff on harm reduction approaches
- Increase awareness among CFS staff of substance use disorders and co-occurring disorders

Roles of Other Partners in Achieving this Strategy:

- Collaborate with HCA to optimize utilization of Drug Medi-Cal Services and those served by CFS in need of treatment services

Evaluating and Monitoring:

- Using the agreed upon tracking and developing an evaluation process between HCA and CFS, monitor service utilization, including barriers and gaps in service
- Using the agreed upon evaluation process between HCA and CFS, evaluate participant treatment progress and outcomes by tracking how many parents and youth are referred, how many actually participate and out of those who participate and reunify, how many of those re-enter back into care
- Assess correlation of treatment to re-entry rates

Exhibit 9. Outcome Measure: 3-P4-Re-Entry to Foster Care in 12 months**Strategy #4: Build on the current Intensive Family Support Services to support families with transition of children back to their home****Justification Rationale:**

Intensive Family Support Services (IFSS) is a supportive service provided to parents that will have their child(ren) released to them during a trial visit, prior to Family Maintenance being court ordered. An IFSS worker is a secondary Senior Social Worker (SSW) assigned to visit the families more frequently during the transition from FR to FM. Eligible candidates for referral will be parents that require more intensive contact, to increase the parents' protective capacities to successfully regain custody of the child(ren) and avoid re-entry into the dependency system.

Another opportunity to build on the current IFSS program is the use of a parent mentor during the transition period. Currently parent mentors are only assigned to cases before the disposition of a case in the dependency investigations phase due to limited number of parent mentor FTE's. However, during this current contract cycle CFS has the opportunity to increase the number of FTE's so that the parent mentor can be assigned during the transition. The transition occurs on cases with the disposition of Family Reunification (FR) and SSWs are getting ready to transition the case from FR to FM.

Outcome Measures Affected: 3-P4

Action Steps:

- A. Conduct literature scan to identify emerging best practices.
- B. Review existing policies and procedures related to support services.
- C. Determine training/support needed for IFSS in order to ensure ability to provide enhanced supports (e.g., determining fit, conducting assessment, effectively documenting in court documents, ensuring fidelity to the process). Enhanced supports include:
 - In-person contacts, both announced and unannounced. Consideration will be given to the family's level of compliance with the IFSS Agreement and whether other service providers are meeting with the family, in the home environment, on a weekly basis
 - Providing service referrals and direct services, as needed
 - Providing linkage to other community resources
 - Providing crisis intervention
 - Assistance with meeting Goals and eliminating/minimizing Danger
 - CWS/CMS data entry of IFSS contacts and services
 - Immediate notification to the assigned SSW if the IFSS Agreement is violated or the safety of the child is at risk
 - Preparing a case summary of observations/interactions with the family to include progress towards goals and/or concerns for the purpose of inclusion in the Family Reunification Status Review Reports, subsequent addendums, Interim Reports and/or any other required court documents
- D. Educate IFSS social workers on the factors most attributed to re-entry.
- E. Educate social workers on the tenants of IFSS and how to identify eligible candidates for referral.
- F. Ensure that criteria is being followed for the referral process by random spot checking of the cases by the assigned Senior Social Services Supervisor (SSSS).
- G. IFSS to assist the family in making connections to the community and continue to grow their network.
- H. Track by excel log IFSS services and activities to ensure fidelity of enhanced support.
- I. Create new RFP to increase parent mentor FTE's.
- J. Implement the use of Parent Mentors to FR cases during the transition from FR to FM to help assist with the transition of children back to their home.
- K. Schedule and hold annual meeting with stakeholders to conduct SWOT analysis of quality and impact of IFSS
- L. Make necessary modifications to business referral protocols (clients served) and services based on recommendations from annual meeting.

Systemic Needs to Achieve this Strategy:

- 1 FTE Senior Social Services Supervisor
- 6 FTE Senior Social Workers
- Average caseload – 8 to 10 cases per worker
- Increase current parent mentor contract to a minimum of 6FTE's
- High Risk families are determined by the severity of the sustained allegation or subsequent allegation and their level of engagement in services. Additional factors to be considered will be the families' demonstrated ability to provide protective capacity with input from the Child and Family Team (CFT). Approximately 48 to 60 families will be served

Education/Training Needs to Achieve this Strategy:

- IFSS staff will receive training regarding the services provided by staff and partners
- IFSS staff will receive education regarding the intent and desired outcome of the strategy as well as the specialized needs of families receiving IFSS services
- IFSS staff will have exceptional leadership skills; demonstrate the ability to manage complex issues; collaboratively resolve conflict and achieve time-sensitive results;

exhibit excellent verbal and written communication skills; demonstrate proven success in methods and techniques in counseling, working with all levels of staff, and partnering with other government and professional entities, businesses and the public, as well as have a deep understanding of available community services

Roles of Other Partners in Achieving this Strategy:

- Collaboration and access to the following partners:
 - o Social Services Agency (SSA), CFS Resource Development & Management Program
 - o Consulate of Mexico
 - o Orange County Department of Education
 - o Orange County Health Care Agency
 - o Orange County Family Resource Centers
- Orange County Juvenile Court

Evaluating and Monitoring:

- Internal:
 - Assessing referrals for appropriateness of program
 - Monitoring IFSS staff performance in IFSS job duties will be the responsibility of the Supervisor over the program. This to occur via monthly meetings, review of caseload, and monitoring of workflow
- External:
 - Data analysis of successful transition from a Trial Release to court ordered service component of Family Maintenance
- Data analysis of re-entry cases that received IFSS

Probation

Based on the data analysis, Orange County Probation selected outcome 3-P2 Permanency in 12 Months for Children in Foster Care 12-23 Months as the focus during the Peer Review and Stakeholder sessions. After review of the outcome measures and systemic factors, Probation has identified outcome measure 3-P2 and systemic factor Foster and Adoptive Parent Licensing, Recruitment and Retention as the focus areas for the 2019-2024 SIP period. Performance on the 3-P2 permanency measure has fluctuated dramatically from 2008 to 2017 and current performance is at 0.0 percent (Q2 2018). A review of Probation data revealed that this group comprised the smallest number of youth in care, and was also the most challenging population with complex needs that included sex offender history as well as the need for mental health and substance abuse treatment. Stakeholder reflections also centered attention on this population of youth with recommendations to provide quality programming and increase mental health support services. Continuum of Care Reform (CCR) mandates that the use of home-based care be increased. Probation has encountered many barriers in its efforts to increase home-based care. Thus, strategically focusing on 3-P2 would also positively affect CCR efforts.

Summary of Probation Outcome Measures Performing Below National Standard

Probation used 2017 Quarter 4 data in determining what CFSR measures were below the national standard.

3-P1: Permanency in 12 Months for Children Entering Foster Care. Baseline performance of permanency in 12 months for children entering foster care was 9.1 percent for study period of 1/1/16-12/31/16 and is below the national standard of 40.5 percent. Current performance is 0.0 percent (Q2

2018) for study period 7/1/16-6/30/17. This was an outcome focus area for the last SIP cycle and in Q3 2017, when performance was 16.0 percent. Although there was an upward trend of exits to permanency observed during the SIP cycle and Probation exceeded its SIP goal of 14 percent, there was a dramatic drop. It is possible that the strategies in place may have contributed to the percentage of youth that exited to permanency; however, our rudimentary data collection process limits our ability to confidently make this attribution. Several factors including staff turnover and a change in the use of incentives may have played a part in the dramatic drop in this outcome measure. There were no consistent trends in exits to permanency by age, ethnicity or gender. Probation works to keep youth with family and addressing their issues with the use of Wraparound and other community-based interventions when possible. However, those youth that do require out of home placement have a myriad of challenges to be addressed. Youth that come into care when they're nearing age 18 are at times unwilling to work on permanency with their parents and instead opt to focus on transitional housing options; thus, also contribute to lower exits to permanency.

3-P2: Permanency in 12 months for youth in foster care 12-23 months. This permanency measure was selected as a focus area for the current CSA and SIP cycle. As is displayed in Exhibit 12, baseline performance was 20.0 percent for study period 1/1/17 – 12/31/17 and current performance is 0.0 percent, falling below the national standard of 43.6 percent. Current performance is also significantly lower than the most recent SIP report of 18.2 percent (Q3 2017). This measure was selected as a focus area in part because it represents Probation's most challenging cases of youth with sex offending behaviors and cases where serious mental health concerns are present in the youth or families served. These populations have required long periods of time in care and have had difficulty reaching permanency. Exhibit 12 depicts the dramatic fluctuation in performance for this outcome.

3-P3: Permanency in 12 months for youth in foster care 24 months or more. Probation did not meet the national standard of 30.3 percent for this outcome measure. Current performance is at 7.7 percent. Baseline performance was 16.7 percent for study period 1/1/17 – 12/31/17. These youth present challenging barriers. This population includes youth suffering with serious mental health issues, severe drug addiction and sex offenders. They spend a longer period of time in treatment and transitioning to permanency is very difficult for this group. This group generally select transitional housing over permanency.

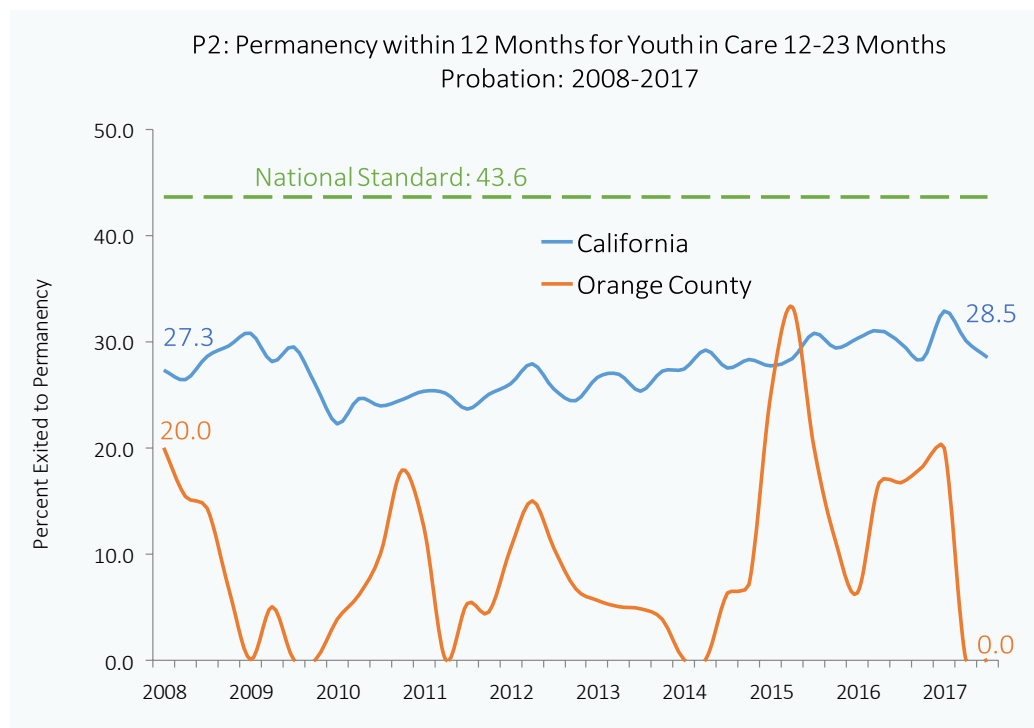
2F: Monthly Visits (Out of Home). Probation did not meet the national standard of 95 percent for face-to-face monthly visits. Baseline performance for this measure for study period 1/1/17 – 12/31/17 was 87.7 percent.

There was a slight improvement noted in the current performance of 88.2 percent for study period 7/1/17 – 6/30/18. The improvement could be attributed to improved data entry. Probation officers enter contacts into the Integrated Case Management System (ICMS), an automated system specific to Probation. A clerk transfers information provided by Probation staff into CWS/CMS. Probation continues to work on improving its data entry system.

3-P2 Permanency in 12 months for children in foster care 12-23 months (Outcome of Focus)

Exhibit 10. Orange County Performance- Permanency in 12 months for children in foster care 12 to 23 months

	Time Period	Data Point
Baseline Performance	1/1/17-12/31/17	20.0%
National Standard	N/A	43.6%
Current Performance	07/01/17-06/30/18	0.0%



Currently, Orange County's performance for this measure is 0.0 percent (study period 7/1/17-6/30/18), which is not meeting the National Standard of 43.6 percent. The percentages for this outcome fluctuate dramatically from year to year due to the large variations in the number of youth in care between 2008 and 2018. Strategies that may impact performance include parent/guardian participation and education, family finding tools, and family engagement services and activities.

Probation Strategy Rationale to Address Outcome Measure 3-P2 and Foster and Adoptive Parent Licensing, Recruitment and Retention Systemic Factor

Exhibits 11-13 detail the strategies Probation will be implementing in this SIP reporting cycle to address 3-P2 and the identified systemic factor.

- Strategy #1: Improve Probation staff practice using new and existing family finding tools throughout the placement episode
- Strategy #2: Increase family engagement utilizing community-based organizations

- Strategy #3: Increase resource family recruitment efforts via relative placements and community outreach

Exhibit 11. Outcome Measure: 3-P2- Permanency in 12 Months for Children in Care 12-23 Months Strategy #1: Improve Probation staff practice using new and existing family finding tools throughout the placement episode

Justification Rationale:

Placement officers have access to a web-based search tool for family finding (Reuters CLEAR). Initial inquiry for family information is obtained upon initial contact with the juvenile justice system. Web-based search is made only after the case comes to the placement unit. Probation data reflects that ongoing efforts to conduct these searches throughout the life of the case is inconsistent. Thus, the Probation Department seeks to standardize the procedure for these tasks by including family finding inquiries in Child and Family Team meetings. Greater emphasis has been placed on family finding activities with the implementation of CCR. It is imperative that officers make a concerted effort to utilize all tools available to seek home-based care and life-long connections for the youth in care. These efforts may prove to be fruitful in finding important connections for Probation youth, potentially provide an appropriate permanency option and improve Probation outcome measures.

Outcome Measures Affected: 3-P2

Action Steps:

- A. Staff will contact family/caregivers prior to CFT to seek information regarding additional supports to be invited to CFT.
- B. Seek and facilitate training for all placement staff on family finding techniques or practices.
- C. Staff to conduct and document identified family finding efforts and submit results quarterly
 - Staff will conduct family searches at least once per quarter for each youth on their caseload and document these efforts. Staff will submit findings on a quarterly basis to their supervisor.
- D. Develop family finding interview worksheet.
- E. Develop and establish a plan for on-going refresher and skill development training on family finding techniques or practices for all placement staff.
- F. Create policy and procedure that defines requirements and process for proper family finding.
- G. Track family finding outcomes.
- H. Monitor and evaluate family finding efforts.

Systemic Needs to Achieve this Strategy:

- Procurement and contracting for training officers on CLEAR data base navigation

Education/Training Needs to Achieve this Strategy:

- CLEAR trainings and annual updated training on this tool
- Seek and facilitate training on family finding techniques or practices

Roles of Other Partners in Achieving this Strategy:

Family, caregivers, advocates, court, CFS

Evaluating and Monitoring:

- To determine the effect of personal contact with family members and invitations to CFTs, track family member participation in CFT meetings. The CFT forms will be submitted to research who will compile participation information.

- Periodic caseload audits will be conducted to review family finding efforts and utilization of CLEAR Placement supervisors are tasked to complete an audit of ten cases per month. These caseloads audits include reviewing contact standards, reviewing automated contact notes for family contacts, review of the file for important documents and a search for utilization of CLEAR. Supervisors can run reports of what searches the officers have run.
- Quarterly audit reports from CLEAR database will be run.
- Utilize findings regarding family member participation in CFT meetings to adjust family contact measures
An assessment will be made of the outcomes of our efforts to increase family participation in CFT and our efforts to locate additional family members. This evaluation will include recommendation to modify our contact measures. For example, are in person contacts more effective than phone contacts will family members. We will assess whether our efforts are improving participation in CFT meetings and if we are able to engage natural family supports.
- Review family finding efforts during caseload audit and analyze completed CFT forms and identify missing family members to determine if further outreach is needed or if those efforts are appropriately documented.

Exhibit 12. Outcome Measure: 3-P2- Permanency in 12 Months for Children in Care 12-23 Months

Strategy #2: Increase family engagement practices utilizing community-based organizations

Justification Rationale:

Available data reflects that there is a lack of documented family and extended family contact on a regular/on-going basis with those youth in care. Padres Unidos, a community-based organization that works with Probation families has shown success in engaging families to complete a 26-week parenting course. Many of these parents are participating in Wraparound services which have demonstrated their effectiveness in preventing out of home care. Utilizing community-based organizations to assist in parent and family engagement would be beneficial in preparing these families to provide for the youth. Connecting families with supports in their community is family centered and it will be available to them long after they have exited the juvenile justice system. Community-based organizations could also participate in CFT meetings and help prepare parents to be active participants in these meetings. Probation has a current contract with Padres Unidos for probation families. The contract is under-utilized and still has spots for placement youth and their families to participate. Padres Unidos will assist families by providing support, resources and parenting courses. Probation will also continue to search for other community-based programs to assist with families.

Outcome Measures Affected: 3-P2

Action Steps:

- A. Increase frequency of family/caregiver and extended family contact with youth in STRTP or while serving a custodial commitment.
Community-based organizations (CBO) will be utilized to help engage family members while the youth is serving a custodial commitment or has been placed in a STRTP. This will include phone calls and in person contacts. A CBO representative can also be invited to a child and family team meeting with the agreement of the youth and family.
- B. Utilize findings regarding family/caregiver contacts to develop recommendations for more effective family engagement practices. We will assess our contacts to develop best practices given our successful interactions to engage families with community-based organizations. An

assessment will be made of the success of engaging family members in the 26-week parenting class and increased participation with the community providers.

- C. Increase the number of staff trained as CFT Facilitators.
- D. Identify and facilitate training for all placement staff on engagement practices, such as Integrated Core Practice Model and trauma-informed care.
- E. Identify community-based organization that is able to provide evidence-based family engagement services.
- F. Develop parent expectation survey (pre-CFT) and satisfaction survey (post-CFT).
- G. Conduct pre- and post- CFT surveys.
- H. Track and monitor survey outcomes.

Systemic Needs to Achieve this Strategy:

- On monthly basis supervisors to conduct audits/case reviews of 10 cases including reviewing engagement practices to ensure compliance

Education/Training Needs to Achieve this Strategy:

- Training on engagement practices for all placement officers
- Training on CFT facilitation

Roles of Other Partners in Achieving this Strategy:

- Collaboration with CFS partner on shared process

Evaluating and Monitoring:

- Collect data regarding family/caregiver contacts (number, type, individuals involved) to determine baseline contact and to measure improvements.
- Utilize findings regarding family/caregiver contacts to adjust family engagement measures.
- Compile information from CFT meetings (number, individuals involved, issues discussed and handled) to determine baseline and to measure improvements in the frequency and quality of CFT meetings.
- Analyze survey data and make recommendations to adjustment in process/procedure, if warranted.

Exhibit 13. Outcome Measure: 3-P2- Permanency in 12 Months for Children in Care 12-23 Months and Foster and Adoptive Parent Licensing , Recruitment and Retention Strategy #3: Increase Resource family recruitment efforts via relative placements and community outreach

Justification Rationale:

Probation is in need of home-based care for its youth. Probation is significantly lacking in this option for youth who have been in a Short-Term Residential Therapeutic Program (STRTP) and can be safely transitioned to a lower level of care. It is hoped that finding relative care can lead to guardianship or adoption as permanency options for youth who are unable to return to their parents. Advertising will allow Probation to reach a large number of people that visit the department's internet site. This stems from the belief that the site is visited by individuals that are interested in volunteering or making an impact on the youth served by Probation. Recruitment efforts must be varied and include Probation's collaborative partners.

Outcome Measures Affected: 3-P2 and Foster and Adoptive Parent Licensing, Recruitment and Retention

Action Steps:

- A. Develop messaging, branding and campaigning for the Probation internet site which specifically focuses on targeted recruiting foster families for Probation youth. Pamphlets will be developed and recruitment information on the department's internet site.
- B. Identify new potential RFA caregivers.
- C. Develop relationship with Foster Family Agencies to seek Resource Families willing to provide care for Probation youth.
- D. Develop a process and a database to collect pertinent information from new potential caregivers. Kinship and Significant adult information data sheet will be developed and included as a tool to gather pertinent information in the probation file. This data collection will begin at the intake level and will be maintained by the assigned probation officer. The RFA probation officer will input pertinent contact information about possible caregivers in our placement management system. We will continue to work with our child welfare partners who use Benti and explore incorporating Benti in our process. Our RFA officer completes all aspects of RFA approval and families participate in RFA pre-approval training with our child welfare partners. We receive notification after the family has completed this training. There are currently four youth in homes that are pending approval.
- E. Establish procedure for referral to the Probation RFA officer for family orientation and RFA training.
- F. Track number of interested families.
- G. Monitor and evaluate the number of Certified Resource Families.

Systemic Needs to Achieve this Strategy:

- Resource reallocation to include staffing
- Procurement and contracting of services for Benti database
- Integrating shared programs and services with CWS

Education/Training Needs to Achieve this Strategy:

- Participation in regional TARFA (Technical Assistance for Resource Family Approval) meetings
- Participation in monthly statewide technical assistance RFA calls

Roles of Other Partners in Achieving this Strategy:

- Collaboration of Foster Family Agencies to recruit and license Resource Family Homes

Evaluating and Monitoring:

- Participation in local, regional and statewide CCR/RFA committees.
- Maintain database of new potential RFA caregivers to include pertinent information related to caregivers and status updates.

Prioritization of Direct Service Needs

During the CSA process, community indicators associated with child maltreatment were reviewed and analyzed and discussed by stakeholders in forums, focus groups and during the peer review process. Several key concerns emerged that informed the selection of SIP strategies and the direct service needs that will be addressed through the state funding of CAPIT, CBCAP and PSSF funding, along with additional county funding sources:

- Many biological families and resource families need assistance in meeting basic needs such as housing and transportation so that they can meet the needs of the children in their care. Rent in Orange County has increased significantly in the last several years. The medium home price as of April 2018 was \$715,000. The average rental rate in May 2018 was \$2,189.
- Other service gaps identified were substance abuse prevention, intervention and treatment. Current research indicates that substance abuse is a contributing factor in approximately one-third of all child abuse and neglect cases. The recommendation to the Board of Supervisors was to continue funding initiatives aimed at achieving better outcomes for families and children where substance abuse is a known issue (CAPC FY 2017-2018 Annual Report).
- Aftercare planning and services was also identified as a service gap. The FRCs will play a very important role in closing this gap.

Including the above mentioned concerns, such factors as key indicators of child abuse, services necessary to assist in successful placements of children, and services ordered by the Orange County Juvenile Court contribute to the direct service needs being addressed with CAPIT, CBCAP, and PSSF funding. No one service is given priority, as all are considered high needs. For high needs service areas see the attached Service Needs. Services provided by funding source are:

- CAPIT: Child Abuse Intervention and Treatment Services- Family Counseling, In-Home Coach Services, Child Abuse Intervention and Treatment Services/Counseling and Parent Education Services, Respite Care Services, Monitored and Supervised Visitation with Transportation Services
- CBCAP: Community Engagement Advisory Committee (CEAC), Youth Action Council (YAC), PSSF: Counseling, Emergency Assistance, Family Support Services, Basic Needs/Livescan, Information and Referral (I&R), Families and Communities Together (FaCT) Network Development Line, Out of School Time (OST) Youth Program, Parenting Education, Personal Empowerment Program (PEP), Monitored and Supervised Visitation with Transportation Services, Differential Response (DR).
- Evidenced Based Programming (EBP) is used for Parenting Classes. Exploration of where further EBP can be implemented is ongoing and will be implemented as appropriate.

In addition, the CSA and Peer Review indicated the following strengths and opportunities which informed the development of the SIP strategies.

Strengths:

- Orange County CFS and Probation have a history implementing and integrating evidence-based/promising practices, which will facilitate the integration of future evidence-based practices.
- Service Array: Overall, there is an agreement of the wide array of services available to families. The service array in the region is seen as robust and available, with some exceptions.
- Agency Collaboration: Participants noted improved communication/collaboration in case development and consultation with providers and caregivers, development of agreements, and participation in collaborative meetings, trainings, and other events.

- Practice Reforms: Practice reforms such as Safety Organized Practice (SOP) and Trauma-Informed practices have led to more effective screening, assessment, and service delivery planning.

Areas to Improve

- Fathers/Paternal Engagement/other Parent: Ongoing efforts to identify and engage are needed.
- Service Array Coordination: Gaps in services are often due to coordination and timing of services.
- Staff Training/Support: Review caseloads and ongoing training and supervision to ensure staff have the support they need to implement practices with quality.
- Visitation Service Support: High quality visitation services contribute to improving placement and reunification. Suggested improvements in visitation services included an increase in support staff to fulfill mandates.
- Aftercare Planning and Services: CFS and Probation staff work with families and providers to develop long-term safety planning with robust aftercare plans and services.

Several strategies outlined in the 2019-2024 SIP take into account complex contributing factors to abuse and neglect. The SIP strategies include:

- Helping biological and resources families meet their basic needs and provide a safe and nurturing home for children. CFS has already been looking for opportunities to help families with stable housing. Although not a direct strategy, another project that we implemented due to available funding is Bringing Families Home, which has been very successful in housing approximately 60 families. This is a grant that requires a county match in order to qualify.
- Enhancing aftercare services for families to support permanency and reduce re-entry, including linking them to their local FRCs and building their safety network will be strengthened by finding and engaging more family members who can provide support to the family now and in the future.
- Researching and exploring a multi-agency in- and out-patient treatment program for families and youth will be a priority for CFS this coming SIP cycle. CFS will also be strategizing how to optimize utilization of Drug Medi-Cal services to support improved outcomes for children and families.

4. Child Welfare/Probation Placement Initiatives

Joint Initiatives

Probation/CFS Collaboration: In 2009, SSA agreed to a jointly-developed written protocol with the Probation Department and the Orange County Juvenile Court to implement dual jurisdiction in Orange County. This dual status allows a child who comes within the description of both a dependent (pursuant to WIC §300) and a ward (pursuant to WIC §§ 601 or 602), to be designated simultaneously as both. Dual status is intended to improve coordination among Probation, CFS, and the Juvenile Court, and increase access to appropriate services and resources in a timely manner and avoid duplication in case management and services.

Continuum of Care Reform (CCR- AB403)/Resource Family Approval (RFA)

CCR responsibility rests primarily with CFS for contracting, licensing and now certifying Foster Family Agencies. However, in Orange County a partnership has been formed between Probation and CFS. There is a steering committee that oversees all new CCR mandates and agency input is gathered not only from CFS but also Probation and HCA. Several trainings have been provided to all 3 agency's staff on CCR and the Core Practice Model. Several other CCR sub-committees were formed to help establish processes and protocols, including forms, that would meet the needs of CFS, Probation, and Health Care Agency. Some of these subcommittees are the Interagency Placement Committee (IPC), Presumptive Transfer workgroup, and Child and Family Team committee.

Short-Term Residential Treatment Programs (STRTPs)

Probation and CFS have partnered in reviewing program statements from former group homes that are converting to STRTPs. Both agencies are participating in meetings and are providing input, feedback, and support throughout this process.

Orange County Probation and CFS hold a joint quarterly Group Home Forum meeting where all of the group homes utilized by both agencies are invited to attend and address current issues. A guest speaker is always invited to provide information and address the group.

Fostering Connections after 18 Program

In 2011, Orange County began preparing for implementation of AB12/Extended Foster Care. In 2012, CFS staff, as well as foster and relative caregivers, were provided information and training on all provisions of AB12 so they would understand their roles and responsibilities. Meetings were also held with community partners, stakeholders, and court staff to educate and involve them in the process.

CFS continues to refine its practice in relation to Non-Minor Dependents (NMDs). A specialized group of social workers has been formed to work with NMDs, carrying specialized caseloads and are a part of the Transitional Planning Services Program. In this way, expertise and resources can be shared and learning enhanced.

CFS successfully implemented AB12 regulations by serving 472 NMDs in 2014, 488 NMDs in 2015, 491 NMDs in 2016, 491 NMDs in 2017, and 492 NMDs in 2018. Currently CFS averages approximately 300 NMDs participating in Extended Foster Care at any one time.

Child and Family Team (CFT) Meetings

In Orange County, the process of Child and Family Teaming was developed with input from social workers, probation officers, supervisors, and managers. The CFT is created to strengthen networks around the family and to support enduring connections. CFT meetings engage families by including their voice in identifying strengths, risks, and needs. The meetings encourage children, parents, and others invested in the family's success to contribute to case plan development, placement support, and the delivery of services. By sharing decision-making and working together, professionals, children, youth, and families can work in collaboration towards positive outcomes for safety and permanency.

Probation has worked collaboratively with CFS and HCA in developing training and ensuring that meetings are streamlined for dual jurisdiction cases. Probation also has one dedicated staff to facilitate their Pathway's CFT meetings for their non-dual jurisdiction cases.

Commercially Sexually Exploited Children (CSEC)

CFS continues to increase efforts to address the Commercially Sexually Exploited Children (CSEC) population. A policy and procedure was published in 2016 to ensure the early identification, documentation, and tracking of CSEC hotline referrals. Specialized CSEC social workers have been identified at every level of case intervention, including Emergency Response and ongoing case management. A community-wide Steering Committee meets regularly to look at service provisions and needs. The collaboration among community partners and other county agencies ensures a comprehensive case management plan to provide targeted services to this vulnerable population. The Gathering Resources to Abolish Child Exploitation (GRACE) courtroom has been established in Orange County to closely work with this population. The collaboration continues to grow with law enforcement, County Counsel, District Attorney, minor's counsel, Public Defender, Mental Health, Department of Education, Probation, Juvenile Court, and other community partners to address specialized case management issues as part of a multidisciplinary team established to review CSEC cases in Orange County. CFS also designated a social worker assigned to engage, prevent, and recover youth that have run away and are at increased risk of being involved in CSEC. This identified staff member works in tandem with staff at Orangewood Children and Family Center to coordinate efforts and trainings to educate vulnerable youth and strategize methods to decrease potential involvement in CSEC. There has been a steady increase in CSEC referrals, as well as the ability to successfully identify CSEC youth. From 2014 to the present, 245 youth have been identified and 42 youth have been brought into protective custody under WIC § 300 (b)(2).

Probation has two probation officers that are assigned placement youth identified as CSEC or at risk of CSEC. These officers are in the Dual Supervision Unit and several of their cases are in GRACE court or assigned to Teen Court.

Children and Family Services State and Federally Mandated Initiatives

Pathways to Wellbeing

Orange County has submitted its Pathways to Wellbeing Delivery Plan and the plan is summarized as follows:

- SSA will conduct an initial screening to identify potential mental health needs for children in the general class, then refer any identified children to the HCA for assessment for mental health services and screening for the subclass.
- HCA will conduct a full mental health assessment to determine the medical need for mental health services and subclass eligibility. The assessment tool includes an eligibility checklist, services currently received and/or under consideration, identification of the child's current living situation, and quarterly tracking of 90-day assessments.
- All children/youth who are dependents of the court are required to be screened by their respective social workers every six months (or sooner if a youth's behavior warrants) and be referred to HCA if needed.
- SSA has had a long-standing Memorandum of Understanding (MOU) with HCA to cover a variety of areas, such as sharing information between Clinical Evaluation & Guidance Unit (CEGU), Continuing Care Placement Unit (CCPU) and Treatment Foster Care Oregon (TFCO) with social workers. SSA and HCA have also obtained Miscellaneous Orders from Juvenile Court that have

aided in facilitating information sharing and coordination of such services.

Safety Organized Practice

Safety Organized Practice (SOP) integrates concepts from Family Engagement, Risk Assessment and Trauma-Informed Practice into one child welfare framework. The goal of SOP is to draw from a variety of tools and techniques to assess and facilitate the safety, permanency, and well-being of children in the child welfare system. SOP is a holistic framework developed for family engagement, understanding family trauma and evaluating and coming to solutions with a plan for child safety with the family. An SOP Leadership Team, which consists of Supervisors and Program Managers from all programs, has been formed and is leading the implementation of SOP in CFS. In 2013, SOP was implemented in Orange County and is continuing to integrate deeper into practice. SOP champions are now conducting coaching, with the support of the contracted coaches, to develop Orange County's internal capacity. Manager coaching has been provided and has proven to be a valuable resource. A leadership offsite meeting, led by the manager coach, was also valuable in advancing the implementation and integration of SOP. Each manager developed a strategy to incorporate SOP coaching in their program, ensuring the continued roll-out of SOP implementation in the agency as a whole.

Resource Family Training and Recruitment in Collaboration with Faith in Motion

The RFA Training and Recruitment team is a part of the larger Resource Family Approval program. The primary goals of this team are to use a variety of tools, techniques, and best practices to engage and recruit new resource families, as well as to provide and coordinate both Pre- and Post-Approval training for caregivers. This team monitors the needs of existing county homes and recruits targeted resource families for specific high needs youth. This team contributes to the larger agency efforts by providing ongoing support to current caregivers with a specific focus on retention events, as well as supportive and educational learning opportunities that address real-time concerns of caregivers. Faith in Motion (FIM) is a specific collaborative strategy coordinated by this team. While the main goal of FIM is to recruit resource families through the various congregations and faith organizations, a secondary goal is to raise awareness for foster care through partner advocacy. One advantage of recruiting specifically through churches and faith-based organizations is that participants already are embedded in a social network that can provide additional information and support to recruitment activities. FIM also offers opportunities for dialogue among partners where exchange of ideas and information create a connection on a deeper level that builds community and relationships.

Probation State and Federally Mandated Initiatives

The Orange County Probation Department has implemented two initiatives starting in 2012.

Extended Foster Care

Extended Foster Care is a state initiative implemented on January 1, 2012. Extended Foster Care allows youth who have active Placement orders on their 18th birthday to remain under Juvenile Court jurisdiction until age 21 in order to continue to receive foster care benefits and services. In order for the youth to be eligible for the services, at least one of the following participation criteria must be met:

- Completed high school or an equivalent program;
- Enrolled in post-secondary education or vocational school;
- Participating in a program or activity that promotes or removes barriers to employment;
- Employed at least 80 hours per month; or
- Is incapable of participating in any activity as described above due to a documented medical

condition.

Federal Prison Rape Elimination Act of 2003 (PREA)

The federal Prison Rape Elimination Act of 2003 (PREA) allowed for the creation of the National Prison Rape Elimination Commission (NPREC) and charged it with developing standards for the elimination of sexual abuse in confinement. The law required the Department of Justice (DOJ) to review the NPREC standards, make revisions as necessary, and pass the final standards into law.

PREA applies to all public and private institutions that house adult or juvenile offenders. It addresses both youth-on-youth sexual abuse and staff sexual misconduct. The Orange County Probation Department has trained all staff in order to be in compliance with PREA.

Large placement facilities have opted to comply with PREA, and they train all employees who may have contact with residents on topics, such as sexual abuse and harassment; effective communication with Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) youth; mandatory reporting of sexual abuse to appropriate authorities; boundary setting with residents; and laws regarding the applicable age of consent.

Orange County Contribution to CFSR Performance Improvement Plan (PIP)

Both CFS and Probation are contributing to the successful achievement of California's goals for outcomes for children and families by participating in the following PIP activities.

Child Welfare

Expand the use of participatory case planning strategies

- Orange County caseworkers meet with parents and youth at various times throughout the dependency case to engage in case planning. This practice has been enhanced with the use of case planning CFTs which are now a state mandate. Conversations occur at the Emergency Removal/Imminent Risk of Removal CFT and during the investigation stage of the dependency proceedings when parents and caseworkers develop the family's case plan and, on some cases, follow-up with a My Action Plan (MAP) which is an easy-to-read version of the case plan. Throughout dependency, caseworkers meet with the parents and children to review progress on the case plan, discuss family strengths and needs, and develop updated plans should the need for dependency continue.
- Orange County has a Linkages Workgroup that is attended by CFS, FSS and community partners such as Prototypes, which meets regularly to discuss improvement in communication and service provision for mutual clients. In addition, CFS and Family Self-Sufficiency (FSS) meet with mutual clients and service providers at CFT and Multi-Disciplinary Team meetings to collaborate on needed services and case planning. At these meetings, mutual clients have an opportunity to give input on decision making. As part of these efforts, FSS staff are available to participate in CFT meetings to support the family with benefits information and discuss with the primary assigned Senior Social Worker (SSW) what services a family may already be receiving.

Sustain and enhance permanency efforts across the life of the case

- Potential relative caregivers are identified during the Emergency Response phase and continue to be identified and evaluated throughout the reunification phase. Every attempt is made to create permanent placements with a relative when reunification is not successful.

- From the first contact with CFS, parents are engaged in discussions about permanency for their children, whether that will be reunification or permanent out-of-home care. In cases where the reunification prognosis is poor, a permanency planning assessment is generated by the worker and assessed by RFA supervisors. Furthermore, a permanency CFT is scheduled when appropriate. In CFT meetings, these discussions occur at the initial CFT and at any subsequent CFT meeting. Orange County's bench officers and attorneys also have discussions with parents about the timelines for permanency planning, should reunification not be successful.
- Reunification CFT meetings are scheduled with parents and their support systems to talk about barriers preventing children's return to the parents' home and the parents' wishes for permanency if reunification fails.
- A large array of services is available to assist parents in successful reunification with their children. These include early engagement with Parent Mentors, assigned Family Services Workers (FSWs) who help parents during the investigation stage, counseling, and a variety of treatment services. The Diversion/Placement program works with relatives and NREFMs, seeking permanency for children and providing caregiver support services to help sustain placements and provide stability for children.

Enhance and expand caregiver recruitment, training, and support efforts

- Orientation (1-hour) providing general information on becoming a resource family is offered monthly in English and every other month in Spanish.
- Partnering with Children and Family Services (3-hour) is a collaborative training focused on concepts and resources that strengthen and empower the vital relationship between caregivers and CFS. These are offered on weeknights.
- Trauma Informed Parenting (TIP) (8-hour) focuses on trauma, caregiving, advocacy, and self-care while utilizing a broad variety of multi-age/multicultural case studies. TIP is divided into two 4-hour modules. The individual modules are offered on weeknights. Both modules are offered on Saturdays.
- Age-appropriate training in CPR and First Aid is offered on-site Saturdays with blended training also offered through a contractor with on-line and in-person modules.
- Senior Leadership is participating in statewide efforts around CCR and Katie A/Pathways to Wellbeing.

Expand options and create flexibility for services and supports to meet the needs of children and families

- The Conditional Release to Intensive Supervision Program (CRISP) offers time-limited intensive in-home supportive services to qualifying families involved in Juvenile Court (Court) proceedings, so that a child detained by the Juvenile Court may be released, upon Court approval, to the custody of one or both parents. CRISP is designed to facilitate earlier resolution of presenting problems and reduce the need for out-of-home placement.
- Differential Response offers an alternative to dependency, when appropriate, by linking families to services in their own communities.

- Wraparound provides services to families who are already reunified, or working to reunify, to address issues that brought their children into foster care.
- CFT meetings occur prior to reunification to discuss the ongoing needs of the family and to put a plan in place that will address the family's needs.
- Parent Mentors work with parents early in the reunification process and promote early engagement and services to address the parents' issues.

Sustain and expand staff/supervisor training

- CFS management meets with Training and Career Development (TCD) and Public Child Welfare Training Academy (PCWTA) twice yearly to develop the designated training for the upcoming year.
- TCD has further enhanced staff training with a variety of E-Learning programs, which allows staff to learn outside of the classroom and at their own pace.
- Strategy workgroups, such as Eliminating Racial Disparity and Disproportionality, Foster Youth Outcomes, Child Welfare System Improvement Partnership, and the Self-Evaluation Team, all provide opportunities for cross-training with other county agencies and community-based organizations (CBOs).
- Supervisors and Program Managers have guest trainers at their meetings to provide training on special topics, resources, and policies and procedures.
- Trainings that are considered critical for staff development are mandated for all appropriate staff.
- The SSA Quality Services Team (QST) conducts systemic and individual case reviews. Feedback is provided to supervisors and managers directly to strengthen supervisory skills.

Strengthen implementation of the state-wide safety assessment system

- Orange County utilizes Structured Decision Making (SDM) to assist staff in the assessment of safety, risk, and family strengths and needs. Initial training and ongoing monitoring is provided to ensure all staff are familiar with the use of SDM. E-Learning provides ongoing reviews and refreshers on this topic.
- Several Orange County staff have become "experts" in the use of SDM and are available to assist caseworkers with the use of SDM and Safe Measures.
- Orange County has adopted Safety Organized Practice (SOP), which will support the use of the SDM tool.
- Orange County recently began implementing use of the Child and Adolescent Needs and Strengths (CANS) Assessment to aid in evaluation of a child/non-minor dependent (NMD), as well as the caregiving environment. CANS assists CFT members with identifying individual strengths and needs, aids in care coordination and case planning activities, and helps to inform decisions about placement.

Probation

Since 2009, the Probation Placement Unit has been using State funds to sponsor an incentive program implemented as part of a formal "System Improvement Plan." This supports the state PIP goal of "expanding options and creating flexibility for services and supports to meet the needs of children and

families." The incentive program identifies specific activities to be incentivized in the areas of behavior, education, employment, emancipation preparation, socialization, self-esteem, motivation, and other basic needs.

Placement Deputy Probation Officers (DPOs) award incentives, usually in the form of gift cards, to youth for completion of specific tasks.

Expand the use of participatory case planning strategies

- The placement intake process has been modified to be youth and family centered. The intake officer contacts family and other known supports to engage the youth and family in the Child and Family Teaming. For families that have not previously participated in a Wraparound or CFT, this is explained, and families are prepared for participation.
- Placement staff and supervisors have been trained in CFT facilitation. Trainings for CFT facilitation will be sought for new staff to the unit.
- Staff will be trained in Integrated Core Practice Model and this will be implemented into practice.

Enhance practices and strategies that result in more youth having permanent homes, stable placements, and connections to communities, culture and important adults

- The SIP 2019-2024 systemic factor, Foster & Adoptive Parent Licensing, Recruitment & Retention, will focus on targeted recruitment of resource families
- Youth that participated in focus group for our CSA requested that they have Independent Living Program (ILP) services in Orange County. Programs are encouraged to transport Probation youth to activities and ILP services available on weekends in Orange County for those placed in neighboring counties.
- Parent Engagement Deputy Probation Officer reaches out to parents/caregivers for youth attending court for the first time to ensure they are aware of the hearing date and address any questions they may have about the juvenile justice system and to invite them to attend the Parent Orientation meeting on their scheduled hearing date.
 - Parent Engagement program began in 2014 as a result of a UC Irvine study that indicated that a child's success in the Juvenile Justice System is directly related to the parent's ability to understand and navigate the system. With that information, the Probation Department launched a Parent Orientation Program. A Juvenile Justice Guide was developed which provides families with information about the Juvenile Justice System including the court process. Additionally, the guide provides parents with community-based resources and helpful tips when navigating through the court process. A Juvenile Court Parent Orientation was also developed which is offered every morning to parents and youth before the scheduled court hearing. The Probation Department began collaborating with Padres Unidos to provide parenting support groups. Padres Unidos offers a comprehensive, culturally relevant program for highest represented group of parents, the Latino population. They provide a 26-week parenting course in juvenile hall with parents from all over Orange County attending. Graduation ceremonies, complete with caps and gowns, are held at the end of the program. The ceremony itself is a very symbolic experience for the families as they have learned valuable new tools, taken responsibility for their children, made connections to community resources and other supportive services. This program,

although available to parents of youth in placement, is focused on serving all families that come to the attention of the Probation Department. The Probation Department seeks to provide increased services for placement families that have shown positive results. The goals of the program are:

- Strengthening families and building resilience
- Improving communication in the families of incarcerated youth and with the Probation Department
- Assisting families in working with the juvenile justice system to increase community safety
- Assisting in safely reintegrating the youth into their family and community and to promote a culture of shared responsibility between the family, the Probation Department and the community

Strengthen ongoing educational and training opportunities for staff and supervisors

- Administrative Placement Supervisor is tasked with seeking training for staff in CFT, ICPM and other training opportunities for staff.
- Placement supervisor is participating in a workgroup with CPOC (Chief Probation Officers of California) and CDSS staff on the revised curriculum for placement core training to be provided statewide to all new placement officers.

5. Five-Year SIP Chart

Child and Family Services

Priority Outcome Measure or Systemic Factor: 3-P4-Re-Entry into Foster Care in 12 months

National Standard: <=8.3%

CSA Baseline Performance: 9.6% (Q4 2017)

Current Performance: 8.1% (Q2 2018)

Target Improvement Goal: The target improvement goal is to continue to meet or exceed the national standard of <=8.3%. Orange County's current performance of 8.1% (Q2 2018) is exceeding the national standard. The goal is to continue to stabilize around 8% over the five-year period.

5-year plan

- Year 1: Maintain current performance of 8.1%
- Year 2: Decrease by 0.1% to 8.0%
- Year 3: Maintain Year 2 performance of 8.0%
- Year 4: Maintain Year 3 performance of 8.0%
- Year 5: Maintain Year 4 performance of 8.0%

Priority Outcome Measure or Systemic Factor: Agency Collaboration

National Standard: N/A

CSA Baseline Performance: Findings from the CSA process suggest a high level of collaboration between CFS, its contracted partners, providers, and other relevant stakeholders; however, there is a desire to

improve the understanding of the quality and effectiveness of collaboration in responding to the needs of Orange county families. Currently, CFS has no metric to capture quality and effectiveness of collaboration; however, Years 1 and 2 will be used to develop the assessment process and establish a baseline from which to set improvement benchmarks for the remaining 3 SIP years.

Current Performance: N/A

Target Improvement Goal: Over the five-year period, Orange County CFS will work within its existing collaboratives and partnerships to determine a useful and sustainable assessment process with the overall end goal of measuring and improving the quality and effectiveness of Agency Collaboration.

5-year plan

- Year 1 and Year 2: Identify appropriate assessment process and method to measure a baseline for Agency Collaboration (e.g., implement a quantitative standardized tool such as Levels of Collaboration Scale and if appropriate use Social Network Analysis to visually map out the change in collaboration across time depending on resources) Social Network Analysis is a method used to measure the level of coordination and collaboration between key organizations and normally involves organizations completing a survey. The survey data is analyzed and visualized in a map that allows organizations to visualize and measure levels of collaborations across time and measure improvements.
- Year 2: Survey members of collaboratives and partnerships to establish a baseline and set benchmarks for improvements in collaboration for the next 4 years
- Year 3: Repeat survey and assess if improvements identified in Year 2 were met
- Year 4: Repeat survey and assess if improvements identified in Year 3 were met
- Year 5: Repeat survey and assess if improvements identified in Year 4 were met

Priority Outcome Measure or Systemic Factor: Service Array

National Standard: N/A

CSA Baseline Performance: CFS families are not currently connected to Drug Medi-Cal Services despite identifying a need for this service during the CSA process. Currently 0.0 percent of CFS families are being referred to this service.

Current Performance: N/A

Target Improvement Goal: Over the five-year period, Orange County CFS will work with Orange County Health Care Agency (HCA) to establish a referral process for CFS involved families with the ultimate goal of increasing access and the use of Drug Medi-cal services for CFS involved families.

5-year plan

- Year 1: Schedule regular and dedicated meetings between HCA and CFS to build connections, build understanding of each other's roles/needs, and define an appropriate referral process for CFS families to access drug services
- Year 2: Build data sharing agreements between HCA and CFS to allow for referrals to be sent and gather service access and utilization data from HCA. CFS and HCA to monitor the effectiveness of the referral process by creating a matrix that captures the number of parents and youth that have participated in the Drug Medi-cal service. Year 3 HCA to provide service access and utilization data (e.g., referrals, screened, received drug medical services) and make

improvements

- Year4: HCA to provide service access and utilization data (e.g., referrals, screened, received drug medical services) and make improvements

Strategy 1: Conduct Child and Family Team meetings at Family Resource Centers at the time of transition from Family Reunification to Family Maintenance to connect families to the community

CAPIT CBCAP PSSF ☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

- 3-P4 Re-Entry to Foster Care in 12 months-Agency Collaboration and Service Array Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project

Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Conduct literature scan to determine successful efforts related to implementing a model.	December 2019	October 2020	CFT Facilitator
B. Reach out to other counties and jurisdictions to elicit information to determine if any are conducting CFTMs at FRCs to identify potential promising practices.	January 2020	June 2020	CFT Facilitator
C. Orient Families and Communities Together (FaCT) managers on intent and desired outcome of strategy and solicit input for implementation.	April 2020	May 2020	CFT Manager
D. Orient FRC on intent and desired outcome of strategy and solicit input for implementation.	May 2020	December 2020	CFT and FaCT Manager
E. Form a workgroup that will develop a business protocol to establish guidelines for the use of FRCs to ensure clarity in role, coordination of meetings, and expectations related to the CFT model.	January 2021	May 2021	CFT Manager & Court Manager(s)
F. Develop and execute a communication plan to inform all staff of new guidelines.	May 2021	August 2021	CFT Manager
G. Build and maintain a working relationship with FRCs by having on-going quarterly meetings between FRCs and CFS staff involved in CFTMs. These meetings will continue until	August 2021	August 2021 and Ongoing	CFT Manager

	such time as the pilot is active or moved into a sustainable practice.			
H.	Training CFS and FRC staff on collaboration to support this strategy. For example, CFT meetings held at the FRCs will discuss the transition home and resources needed to have a successful transition from FR to FM. The CFT participants will be invited to participate to support the family as is done in all CFTMs.	August 2021	October 2021	CFT Manager
I.	Implement the pilot project in the City of Santa Ana.	October 2021	October 2021 and Ongoing	CFT Manager and FaCT Manager
J.	Track and monitor CFT implementation and outcomes by pulling the business objects report from CWS/CMS and creating a CFT Log in excel that tracks where the CFT meetings are occurring, number of families served, and re-entry status (e.g., are CFT's happening as planned and are they having an impact in reducing recidivism).	December 2021	December 2021 and Ongoing	CFT Manager and Research
K.	Hold annual meetings with stakeholders to report recommendations, outcomes and elicit input.	February 2022	February 2022 and Annually	CFT Manager
L.	Make necessary modifications to business referral protocols and CFTs based on recommendations from annual meetings. The annual meetings will be used to share findings from the reports created to track CFTM implementation and outcomes. If outcomes are positive, then expand to other FRC's based on staff capacity.	March 2022	March 2022 and Ongoing	CFT Manager

Strategy 2: Conduct a retrospective Failed Court Ordered Family Maintenance study to identify trends/root-cause that led to re-entry care

CAPIT CBCAP PSSF ☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

- 3-P4 Re-Entry to Foster Care in 12 months

Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project

Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. CFS Admin Manager I work with Research Unit to finalize the research question (e.g., What are the client and CFS characteristics that lead to failed FM) and determine criteria for selecting cases, and data sources.	July 2019	July 2020	Research Manager
B. Research Unit to extract existing secondary data (e.g., Safe Measures, Child Welfare Services/Case Management System (CWS/CMS), conduct data analysis, and provide findings to management.	July 2020	July 2021 and Ongoing	Research Manager and Analysts
C. Conduct literature review to identify emerging best practices to support FM.	October 2020	February 2021	Research Manager and Analysts
D. Research Unit and Self Evaluation Team (SET) team to hold data review sessions with Data Analyst to review findings the secondary data analysis and literature review mentioned above.	January 2021	March 2021 and Ongoing if needed	Research Manager and Analysts
E. Research Unit and SET team to develop and submit recommendations to CFS administration based on review of data analysis findings,	January 2021	March 2021	Research Manager and Analysts
F. Implement recommendations.	July 2021	December 2021	CFS Leadership Team
G. Track rates of failed FMs following implementation of recommendations using manual log recording of failed FMs.	January 2022	January 2022 and Ongoing	Research Analyst

H. Hold annual meeting with stakeholders to review rates of failed FM's and elicit input.	July 2022	July 2022 and Annually	Research Manager and Analyst
I. Develop an action plan based on the findings of the study and present to CFS leadership. Leadership will determine the feasibility of executing the plan based on the data received.	Sept 2022	November 2022	Research Manager and Analyst

Strategy 3: Optimize Drug Medi-Cal Services for families and youth in need

CAPIT CBCAP PSSF ☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

- Agency Collaboration and Service Array

Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project

Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Outreach to other counties who are utilizing Drug Medi-Cal Services to understand how this is being implemented and impact on re-entry.	October 2020	March 2021	Independent Living Program and Permanency Services Managers
B. Engage and partner with Health Care Agency (HCA) through the Child Welfare System Improvement Partnership (CWSIP) monthly meeting to orient them to the intent and desired outcome of strategy, and to solicit input and cooperation for implementation.	November 2020	November 2020 and ongoing	Independent Living Program and Permanency Services Managers
C. Develop and execute a communication plan to inform all staff of new screening tool and practice change.	February 2021	August 2021	Independent Living Program (ILP) and Permanency Services Program (PSP) Managers
D. In collaboration with HCA, provide staff training to include awareness of resources, improve child welfare practice in optimizing Drug Medi-Cal Services and use of harm reduction	February 2021	August 2021	HCA and ILP/PSP Managers

	approaches.			
E.	Identify participants using screening tool that has been developed by HCA for drug Medi-Cal services.	March 2021	August 2021	Senior Social Workers
F.	Collaborate with HCA to identify a practical approach to evaluate effectiveness of the screening tool and develop a referral process to increase access to Drug Medi-Cal Services for families and youth.	May 2021	September 2021	ILP and PSP Managers
G.	Develop a tracking mechanism for referred families and youth.	September 2021	January 2022	ILP and PSP Managers
H.	Monitor implementation of services to determine if desired goals are being met.	January 2022	January 2022 and Ongoing	ILP and PSP Managers
I.	Hold annual meeting between CFS and HCA to review service/program data.	March 2022	June 2022 and Yearly	HCA and ILP Manager
J.	Identify opportunities to improve child welfare practice and services based on recommendations from annual meetings.	June 2022	June 2022 and Ongoing	Child Welfare System Improvement Partnership (CWSIP)

Strategy 4: Build on the current Intensive Family Support Services to support families with transition of children back to their home

CAPIT CBCAP PSSF ☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

- 3-P4 Re-Entry to Foster Care in 12 months

Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project

Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Conduct literature scan to identify emerging best practices.	August 2019	January 2020	Integrated Continuing Services Manager
B. Review existing policies and procedures related to support services.	August 2019	January 2020	Integrated Continuing Services Manager
C. Determine training/support needed for IFSS in order to ensure ability to provide enhanced supports (e.g., determining fit, conducting assessment, effectively documenting in court documents, ensuring fidelity to the process.	March 2020	August 2020	Integrated Continuing Services Manager
D. Educate IFSS social workers on the factors most attributed to re-entry, ex. Relapse prevention.	April 2020	December 2020	Integrated Continuing Services Manager
E. Educate Social Work staff on the tenets of IFSS and how to identify eligible candidates for referral.	April 2020	December 2020	Integrated Continuing Services Manager
F. Ensure that criteria are being followed for the referral process by random spot checking of cases by Senior Social Services Supervisor.	May 2020	May 2020 and Ongoing	Integrated Continuing Services Manager
G. IFSS to assist the family in making connections to the community and continue to grow their network.	May 2020	May 2020 and Ongoing	Integrated Continuing Services Manager
H. Track by Excel log IFSS services and activities to ensure fidelity to enhanced support.	May 2020	May 2020 and Ongoing	Integrated Continuing Services Manager
I. Create new RFP to increase parent mentor FTE's.	June 2020	July 2020	Contract Services Team

J.	Implement the use of Parent Mentors to FR cases to help assist with the transition of children back to their home.	September 2020	January 2021	Child and Family Team Manager
K.	Schedule and hold annual meeting with stakeholders to conduct SWOT analysis of quality and impact of IFSS.	May 2021	May 2021 and Annually	Integrated Continuing Services Senior Social Services Manager
L.	Make necessary modifications to business referral protocols (client served) and services based on recommendations from annual meeting.	July 2021	July 2021	Integrated Continuing Services Senior Social Services Manager and Supervisor

Probation

Priority Outcome Measure or Systemic Factor: 3-P2 Permanency in 12 Months for Youth in Foster Care 12-23 Months

National Standard: 43.6%

Current Performance: Q2 2018 is 0.0%

CSA Baseline Performance: Q4 2017 was 20.0%

Target Improvement Goal: The target improvement goal is to improve to 50 %

5-year plan

- Year 1: 20% to maintain baseline performance
- Year 2: 30% to increase baseline performance
- Year 3: 40% to increase baseline performance
- Year 4: 50% to increase baseline performance
- Year 5: 50% to maintain performance

Priority Outcome Measure or Systemic Factor: Foster and Adoptive Parent Licensing, Recruitment, and Retention

National Standard: N/A

CSA Baseline Performance: as of September 30, 2019, Probation has 2 Resource Families

Target Improvement Goal: Over the course of the five years, Probation will develop a messaging and branding campaign, increase relationship with foster family agencies, and establish a referral process with foster family agencies with the ultimate goal of increasing the number of resource families available for Probation youth.

5-year plan

- Year 1: Develop messaging campaign, identify potential caregivers
- Year 2: Develop relationship with RFA agencies, process and database to track potential caregivers, and a referral process
- Year 3: Monitor recruitment
- Year 4: Monitor recruitment
- Year 5: Monitor recruitment

Strategy 1: Improve Probation staff practice in using new and existing family finding tools throughout the placement episode

CAPIT CBCAP PSSF ☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

- 3-P2 Permanency in 12 months for youth in care 12-23 months

Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project

Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Staff will contact family/caregivers prior to CFT to seek information regarding additional supports to be invited to CFT.	September 2019	September 2020 and Ongoing	Deputy Probation Officers Probation Intern
B. Seek and facilitate training for all placement staff on family finding techniques or practices.	October 2019	June 2020 and Ongoing	Supervising Probation Officers
C. Staff to conduct and document identified family finding efforts.	October 2019	October 2020 and Ongoing	Deputy Probation Officers
D. Develop family finding interview worksheet.	February 2020	July 2020	Supervising Probation Officers
E. Develop and establish a plan for on-going refresher and skill development training on family finding techniques or practices for all placement staff.	December 2021	June 2022 and Ongoing	Supervising Probation Officers
F. Create policy and procedure that defines requirements and process for proper family finding.	December 2021	June 2022	Supervising Probation Officers
G. Track family finding outcomes.	June 2022	June 2023 and Ongoing	Deputy Probation Officers
H. Monitor and evaluate family finding efforts.	June 2022	June 2023 and Ongoing	Supervising Probation Officers

Strategy 2: Increase Family Engagement through utilizing community-based organizations

CAPIT CBCAP PSSF ☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

- 3-P2 Permanency in 12 months for youth in care 12-23 months

Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project

Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Increase frequency of family/caregiver and extended family contact with youth in care.	December 2020	June 2021 and Ongoing	Deputy Probation Officers
B. Utilize findings regarding family/caregiver contacts to develop recommendations for more effective family engagement practices.	December 2020	June 2021 and Ongoing	Supervising Probation Officers
C. Increase the number of staff trained as CFT Facilitators.	January 2020	November 2020	Supervising Probation Officers
D. Identify and facilitate training for all placement staff on engagement practices.	April 2020	December 2020	Supervising Probation Officers
E. Identify community-based organization that can provide evidence-based family engagement services.	July 2022	July 2023	Supervising Probation Officers
F. Develop parent expectation survey (pre-CFT) and satisfaction survey (post-CFT).	June 2021	December 2021	Research Analyst
G. Conduct pre- and post- CFT surveys.	January 2022	January 2023 and Ongoing	Supervising Probation Officer
H. Track and monitor survey outcomes.	January 2023	December 2023 and Ongoing	Supervising Probation Officers and Research Analyst

Strategy 3: Increase resource family recruitment efforts via relative placements and community outreach

CAPIT

CBCAP

PSSF

☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):

- 3-P2 Permanency in 12 months for youth in care 12-23 months
- Foster Parent Licensing, Recruitment and Retention

Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project

Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Develop messaging, branding and campaigning for the Probation internet site which specifically focuses on targeted recruiting foster families for Probation youth.	March 2021	March 2022	RFA Deputy Probation Office/ Supervising Probation Officer
B. Identify new potential RFA caregivers.	April 2020	April 2021 and Ongoing	RFA Deputy Probation Office/Deputy Probation Officer
C. Develop relationships with Foster Family Agencies to seek Resource Families willing to provide care for Probation youth.	May 2020	June 2021	RFA Deputy Probation Officer
D. Develop a process and a database to collect pertinent information from new potential caregivers.	June 2021	June 2022	Research Analyst/ Supervising Probation Officer/ RFA Deputy Probation Officer
E. Establish procedure for referral to the Probation RFA officer for family orientation and RFA training.	June 2021	December 2021	Supervising Probation Officer
F. Track number of interested families.	January 2022	January 2023 and Ongoing	RFA Deputy Probation Officer
G. Monitor and evaluate the number of Certified Resource Families.	June 2021	June 2022 and Ongoing	Supervising Probation Officer

6. Service Provision for CAPIT/CBCAP/PSSF Programs

See Appendices B and C for the OCAP Expenditure Workbook and CAPIT, CBCAP, and PSSF Program and Evaluation Descriptions. This report will be attached with the BOS approval for the SIP.

7. Appendices

Appendix A: C-CFSR Core Stakeholders

Below is the list of stakeholder types that contributed to the SIP development.

SIP Stakeholders	
All For Kids	Juvenile Court attorneys
Court Appointed Special Advocates (CASAs)	Knowledge 2 Careers (K2C) Academy
Casey Foundation	New Alternatives
CFS and Probation Staff	Orange County Asian and Pacific Islander Community Alliance (OCAPICA)
Child Welfare System Improvement Workgroup	Olive Crest Housing (staff and youth)
City of Santa Ana – Youth Services	Orange County Department of Education
County Counsel	Orange County Department of Education, Foster Youth Services
California State University, Long Beach, School of Social Work	Orange County Social Services Agency Administration
Department of Probation	Orange County Social Services Agency Research
Doing Good Works	Orange County Social Services Agency
Eliminating Racial Disparity Disproportionality	Orangewood
Family Support Network	Orangewood Children’s Foundation
Foster youth (current, former, and non-minor dependents)	Padres Unidos (probation parent group)
Foster Youth Outcomes Group	Parent Mentors
Golden West College	Parent Union (Parent Union for Child Public Education)
Health Care Agency; Orange County Acceptance through Compassionate Care, Empowerment, and Positive Transformation (OC ACCEPT)	Parent Volunteer
Health Care Agency/ Mental Health Services Act (MHSA)/Transitional Age Youth (TAY)	Resource Parents
Health Care Agency	Social Services Agency
Health Care Agency /Behavioral Health Services (BHS)/ Child Youth Services (CYS)	The Raise Foundation
Health Care Agency /Children & Youth Behavioral Health (CYBH)	Vision 2020 Saddleback
Health Care Agency/Behavioral Health Services (BHS)/Children & Youth Programs/Innovation Projects	Young Lives Redeemed
Heat Come Home	Youth Development Board
Human Options/Family Resource Center	Youth Voice Representative; (Orange County Department of Education)

Appendix B: CAPIT/CBCAP/PSSF Expenditure Workbook

(1) DATE SUBMITTED: _____ (2) DATES FOR THIS WORKBOOK: 6/7/19 thru 6/7/24 (3) DATE APPROVED BY OCAP: _____
 (4) COUNTY: Orange (5) PERIOD OF SIP: 6/7/19 thru 6/7/24 (6) YEARS: 5 Internal Use Only

(7) ALLOCATION (Use the latest Fiscal or All County Information Notice for Allocation):

					CAPIT: \$ 610,366	CBCAP: \$92,838	PSSF: \$2,024,606			
No.	Program Name	Applies to CBCAP Programs Only	Name of Service Provider	Service Provider is Unknown, Date Revised Workbook to be Submitted to OCAP	CAPIT Dollar amount to be spent on CAPIT Programs	CBCAP Dollar amount to be spent on CBCAP Programs	PSSF Dollar amount to be spent on PSSF Programs	OTHER SOURCES Dollar amount from other sources	NAME OF OTHER List the name(s) of the other funding source(s)	TOTAL Total dollar amount to be spent on this Program (Sum of Columns E, F, G5)
A	B	C	D1	D2	E1	F1	G1	H1	H2	I
1	Child Abuse Intervention and Treatment Services/Parent Education Services		multiple providers		\$7,250	\$0	\$0	\$62,750	CWS, STOP	\$70,000
2	Child Abuse Intervention and Treatment Services/Family Counseling		multiple providers		\$17,750	\$0	\$0	\$5,500	CWS, STOP	\$23,250
3	In-Home Coach Services		New Alternatives, Inc.		\$355,366	\$0	\$0	\$293,522	CWS	\$648,888
4	Respite Care Services		New Alternatives, Inc.		\$112,500	\$0	\$0	\$52,909	CWS	\$165,409
5	Monitored and Supervised Visitation Services		multiple providers		\$0	\$0	\$404,921	\$763,579	CWS, Trust	\$1,168,500
6	Parenting Education		multiple providers		\$0	\$0	\$10,936	\$21,576	CWS, STOP	\$85,768
7	Out of School Time Youth Program		multiple providers		\$0	\$0	\$23,556	\$49,793	CWS, STOP	\$125,549
8	Basic Needs/Livescan		Orange County Child Abuse Prevention Center		\$0	\$0	\$0	\$404,921	CWS, Trust, KCECF	\$646,561
9	Families and Communities Together (FACT)	Network Development	multiple providers		\$0	\$61,273	\$0	\$0	CWS, STOP	\$66,008
10	Community Engagement Advisory Committee, Youth Action Council	Parent Leadership	multiple providers		\$0	\$31,565	\$0	\$162,652	CWS, STOP	\$237,667
11	Differential Response		multiple providers		\$0	\$0	\$232,380	\$0	CWS, STOP	\$407,237
12	Personal Empowerment Program		multiple providers		\$0	\$0	\$14,972	\$21,098	CWS, STOP	\$123,331
13	Family Support Services		multiple providers		\$0	\$0	\$93,495	\$184,435	CWS, STOP	\$649,108
14	Counseling		multiple providers		\$0	\$0	\$77,821	\$164,497	CWS, STOP	\$453,063
15	Information & Referral		multiple providers		\$0	\$0	\$48,077	\$94,848	CWS, STOP	\$442,115
16	Transportation Services for Visitation		multiple providers		\$117,500				CWS/Trust	\$147,500
17	Emergency Assistance		multiple providers				\$4,915	\$9,713		\$14,628
Totals					\$610,366	\$92,838	\$506,152	\$708,612	\$404,921	\$2,024,606
							25%	35%	20%	100%

Appendix C: CAPIT/CBCAP/PSSF Program and Evaluation Description

COUNTY: ORANGE COUNTY

DATE APPROVED BY OCAP:

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Community Engagement Advisory Committee (CEAC), Youth Action Council (YAC) Line. No. 10

SERVICE PROVIDER

Children's Bureau of Southern California, The Raise Foundation, Community Action Partnership of Orange County, Friendly Center, Institute for Healthcare Advancement, City of Garden Grove, and City of Westminster

PROGRAM DESCRIPTION

CEACs encompass neighborhood residents (e.g. parents, grandparents, community members) and stakeholders from the business, nonprofit, and faith communities, and are designed to play an active role in influencing positive community change in partnership with the FRCs. Included in some of the CEACs are youth within the community and at some of the FRCs that have further developed this program to include a Youth Action Council (YAC), a "Youth CEAC," to specifically address issues the youth within the community are identifying as a need. We consider the CEACs and YACs an invaluable strategy for providing community members with an opportunity to actively participate in their community's well-being through the network of FaCT FRCs.

The CEAC's and YAC's overall goal is to create meaningful change at the community and personal level by implementing a specific community agenda developed in conjunction with its corresponding FRC. The CEAC/YAC should strive to unite, educate, and keep the community informed regarding FRC services and other related matters. It also serves in an advisory capacity to the FRC Coordinator and staff in regard to FRC operations, direction and delivery of programs and services, and the effectiveness of the FRC's engagement with the community. CEAC/YACs may offer advice and assistance in the following areas:

- FRC philosophy and program priorities
- Current and new FRC services, facilities, equipment, and learning resources
- Safety programs and policies and procedures
- Community outreach and leadership
- Coordination of community meetings to facilitate collaboration between stakeholders
- Informing the community about FRC, city, and county decisions and issues affecting them
- Encouraging civic participation and its importance (CEAC/YACs do not favor or support any party)

- or candidate; they simply provide open forums in which all candidates can express their views)
- Engagement of community individuals and groups who do not utilize FRC services
- Communication of community ideas and perspectives to FRC and FaCT staff
- Alternatives for identifying, communicating, and meeting unique community needs
- Racial and cultural understanding and a sense of community within the FRC neighborhood
- Resolution of FRC-community differences and improved relations
- Resource development, fundraising, and solicitation of in-kind donations
- Contribution of individual talents, knowledge, and abilities in service to community (e.g. workshop lead)

The composition and CEAC guidelines vary by FRC. There is a predominantly high rate of Hispanic Females involved in all of the CEACs. Additionally, some Caucasian, African American, and Asian members. The YACs are comprised of a diversity of races and genders. Some FRCs have an interview process, some have an application process, some utilize both application and interview, and a few base memberships on participation and prior FRC involvement. Additionally, some CEACs have a board and others implement term limits. The composition and guidelines are left flexibility in an effort to allow each community to determine what works best for them.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	Parent Leadership Training, Peer Support
PSSF Family Preservation	
PSSF Family Support	Parent Leadership Training, Peer Support
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	

OTHER Source(s):

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Connecting/Linking families to their communities
- Provide streamlined services to reduce gaps
- Improve coordination and timing of services
- Supporting aftercare services

TARGET POPULATION

Councils consist of neighborhood residents (e.g. parents, grandparents, youth, community members) and stakeholders from the business, nonprofit, and faith communities. The majority of CEACs are comprised of mothers with children that live within the neighborhoods immediately surrounding the FRC, however, any community member or stakeholder that wants to be involved within their community is invited to participate. Since this is a volunteer position certain demographics are not required to be reported.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached

grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

SIP CYCLE: 2019-2024. A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Increased social connections	Increased outreach and community engagement in family	Increased social connections	Increased outreach and community engagement in family
Quality Assurance (QA) Monitoring			
Ensure quality program delivery	Accurate and complete data entry into CEAC logs, CEAC Rubric	CEAC Participation log CEAC Rubric	Meet monthly in person to discuss goals and outcomes
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Counseling Line No. 14

SERVICE PROVIDER

Western Youth Services, Human Options, Child Guidance Center, FACES (Family Assessment Counseling & Education Services)

PROGRAM DESCRIPTION

Individual, family, group, and crisis counseling services are for children, parents and/or caregivers who are experiencing a crisis due to interpersonal conflicts, family crises, difficult parenting issues, challenging child needs, and/or traumatic loss. Services shall include providing emotional support, stabilizing immediate crisis, and developing goals for the family. Group and crisis counseling are strongly suggested as the modalities of counseling due to high demand within the community as well as the FRC's short term capacity. Crisis counseling is comprised of a minimum of one and maximum of four, fifty-minute sessions. Individual, group and family counseling is comprised of a minimum of four and a maximum of twenty, fifty-minute sessions.

Counseling is provided by a licensed clinician or a qualified mental health professional under clinical supervision. The counselor provides therapy including assessment, treatment planning, termination, and documentation. Administering the FaCT-approved pre/post measurement tools and entering the results into the FaCT database.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Counseling and Case Management Team Meetings
PSSF Family Support	Counseling and Case Management Team Meetings
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY NEED OUTLINED IN CSA: pages 103-110

- Provide streamlined services to reduce gaps
- Improve coordination and timing of services

TARGET POPULATION

Services are provided to Orange County children and families at risk of abuse or neglect, and the community-at-large whom have no other means to access counseling services.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

SIP CYCLE: 2019-2024 A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Primary outcomes are based on client need and would address any or all of the 5 protective factors	Clients demonstrate progress toward their identified goals from pre to post test	Protective Factors Pre/ Post Tests	Before and after counseling services are provided
Quality Assurance (QA) Monitoring			
Ensure quality service delivery	Accurate and complete data entry, identified goals improved or met, clients served	Monthly service grids, and pre/post tests	Meet monthly in person to discuss goals and outcomes, and weekly Case Management Team (CMT) meetings as needed
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Emergency Assistance Line No. 17

SERVICE PROVIDER

Children's Bureau of Southern California, Human Options, The Raise Foundation, Friendly Center, Friendly Center Orange, Friendly Center Placentia, Institute for Healthcare Advancement, City of Westminster

PROGRAM DESCRIPTION

Emergency Assistance funds are to provide the basic needs of clients in support of services described. Allowable costs include emergency food, emergency clothing, diapers, medicine, bus tickets to access services, safety items, one-time rent payment assistance, and one-time utility payment assistance.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Basic needs, concrete supports
PSSF Family Support	Basic needs, concrete supports
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Assist families stabilize and ensure basic needs
- Continue to provide service while identifying ways to measure effectiveness of service

TARGET POPULATION

Services are provided to Orange County children and families for those who have an open child welfare case, those at risk of abuse or neglect, and the community-at-large.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high-risk communities:

San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

SIP CYCLE: 2019-2024 A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Families have concrete support in times of need	Client received emergency assistance for their expressed need as indicated on the tracking log.	Tracking Log	Daily
Quality Assurance (QA) Monitoring			
Ensure quality program delivery	Accurate and complete data entry, outcome goals met; clients served	Monthly service grids	Meet monthly in person to discuss goals and outcomes
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Child Abuse Intervention and Treatment Services- Family Counseling, Line No. 2

SERVICE PROVIDER

Associates in Counseling and Mediation, Boys and Girls Club of Garden Grove, Casa de la Familia, Family Assessment Counseling and Education Services

PROGRAM DESCRIPTION

Counseling (Family Counseling) provides services to families with children ages birth (0) through seventeen (17) years, who are at risk, or have a history, of child abuse and/or child maltreatment. Children and some families will be in crisis and may require immediate intervention services and/or resources to prevent the children from being removed from the home. Other families will have had their child(ren) removed from the home and will require intervention services and/or resources to assist them in reunifying with their children. Families will receive up to sixteen (16), fifty (50) minute counseling sessions. Frequency will be one time a week.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	Family Counseling
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Provide streamlined services to reduce gaps
- Improve coordination and timing of services
- Continue to provide service while identifying ways to measure effectiveness of service

TARGET POPULATION

Services are provided to Orange County children and families who have an open child welfare case.

TARGET GEOGRAPHIC AREA

The program is throughout Orange County. Counseling services are provided throughout Orange County

with physical locations in the following zip codes: 90621; 92606; 92618; 92653; 92701; 92705; 92706; 92805; 92831; 92832; 92833; 92840; 92841; and 92867.

TIMELINE

SIP CYCLE: 2019-2024 Orange County anticipates releasing an RFA for this service in 2020 as current Counseling Agreement expires on June 30, 2021.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Increase parental resilience	Improved scores on pre/posttest tool	Protective Factors pre/post test	Prior to and upon completion of service
Quality Assurance (QA) Monitoring			
Ensure quality service delivery	Accurate and complete data entry, clients served, improvement on measured indicators in pre and post test	Referral completion, tracking log, pre/post test	Ongoing review of pre/post test results
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Family Support Services Line No. 13

SERVICE PROVIDER

Children's Bureau of Southern California, Human Options, Friendly Center, Institute for Healthcare Advancement, City of Westminster, City of Garden Grove, Community Action Partnership of Orange County, The Cambodian Family

PROGRAM DESCRIPTION

Family Support Services are those services provided by a Family Support Specialist. The primary goal is to link clients in crisis with multiple needs to resources, services, and opportunities. The goal is to teach and empower clients to access community resources and strengthen problem solving skills.

The Family Support Specialist is responsible for assessing the strengths and meeting the multiple needs of a client and family; arranging, coordinating, monitoring, evaluating, and advocating for multiple services for families. They are specifically responsible for assessing needs and assisting families to access resources to meet those needs, including court ordered families to facilitate family reunification; case planning; compiling and maintaining records; preparing reports; present cases at Case Management Team meetings; completing the FaCT- approved assessment tools; data entry into FaCT-approved database; and attending all required FaCT meetings and trainings.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Assessment and Case Management
PSSF Family Support	Assessment and Case Management
PSSF Time-Limited Family Reunification	Assessment and Case Management
PSSF Adoption Promotion and Support	Assessment and Case Management
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Establishing aftercare and preventative services
- Establishing linkages to community agencies
- Coordination and determining gaps in services

TARGET POPULATION

Services are provided to Orange County children and families with an open child welfare case, and those at risk of abuse or neglect, as well as the community-at-large.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high-risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

SIP CYCLE: 2019-2024 A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Families have concrete support in times of need	Clients are assessed for needs and strengths, connected to appropriate resources, and ongoing monitoring, follow-up, and support provided	Family Development Matrix (FDM)	At initial assessment on every client, and as needed for re-assessment
Quality Assurance (QA) Monitoring			
Ensure quality service delivery	Accurate and complete data entry, identified goals improved or met, clients served	Monthly service grids	Meet monthly in person to discuss goals and outcomes, and weekly Case Management Team (CMT) meetings as needed
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Basic Needs/Live Scan Line No. 8

SERVICE PROVIDER

Orange County Child Abuse Prevention Center

PROGRAM DESCRIPTION

Services are aimed at assisting families receiving child welfare services to facilitate placement of a child or to maintain a placement. Basic needs include emergent and non-emergent. Emergent basic needs must be fulfilled within three business days and may include, but are not limited to, such items as new mattresses, bed frames, beds, cribs, smoke/carbon monoxide alarms, refrigerators, etc. Non-emergent basic needs must be filled within ten business days and may include, but are not limited to, such items as dressers, kitchenware, vacuum cleaners, clothing and infant related items. The goal is to meet children's basic needs and placement preparation needs to aid in placement approval, preservation of existing placement, maintaining children with parents/caretakers and/or reunify children with their parents/caretakers. PSSF funding is specifically used toward the basic needs required for Resource Family Approval (RFA) families to facilitate placement of children in potential adoptive homes. Further, PSSF funds are used to cover Live Scan expenses for RFA families to facilitate timely and safe placements.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	Adoption Support Services

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Increase stable placement for youth
- Increase community engagement

TARGET POPULATION

Services are provided to RFA families with children (ages 0 through 17), who are receiving child welfare services and lack basic resources or require assistance with home repairs and/or modifications in order to comply with placement requirements prior to a child's placement in the home.

TARGET GEOGRAPHIC AREA

Services are county-wide, targeting families receiving child welfare services. Specifically, funding is allocated for RFA families to facilitate placement.

TIMELINE

SIP CYCLE: 2019-2024 A new RFP will be released for Basic Needs in 2020 with a new contract cycle scheduled to begin July 1, 2021. The current contract for convenience (unilateral contract) for Live Scan will end October 2019 and will renew, beginning November 2019 through October 2024.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Children's basic needs and placement preparation needs are met	Fulfillment of Live Scan, and emergent/non-emergent need requests expediting the availability of RFA families.	Monthly Service Reports	Monthly, upon completion of service
Quality Assurance (QA) Monitoring			
Ensure quality of Service Delivery	Accurate and complete data entry, clients served, number of emergent and non-emergent needs requests fulfilled	Monthly Service Reports, customer satisfaction tools	On-going monitoring of requests fulfilled and customer satisfaction tools
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Random Quality Assurance Phone Calls to Clients	Monthly	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning
Random Quality Assurance Phone Calls to Social Workers	Monthly	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning
Client Satisfaction Surveys	Upon Delivery of Basic Needs Item (s)	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

In-Home Coach Services Line No. 3

SERVICE PROVIDER

New Alternatives, Inc.

PROGRAM DESCRIPTION

Intervention services provided for families in the family home. Children are birth through 17 years old. Families range from low- to high-risk of abuse/neglect and require an intervention or coaching and support with specific issues. They may be recently reunified with or at risk of the children being removed from the home. Services begin with identifying strengths, assessing needs and developing a treatment plan. Services include home management skills, appropriate parenting techniques through role modeling, coping skills, linkage with community resources, etc. SSA refers families for this service. Services will consist of six (6) to eight (8) in home services, with a duration of two (2) to six (6) hours per session.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	Parent Education
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Addresses need for tailored services to families to prevent re-entry into care
- Increase family engagement
- Increase building safety networks and linkages within their community

TARGET POPULATION

Services are provided to Orange County children and families who have an open child welfare case.

TARGET GEOGRAPHIC AREA

The program is throughout Orange County and the service is provided in the family's home.

TIMELINE

SIP CYCLE: 2019-2024 Orange County anticipates releasing an RFP for this service in 2022 as current In-Home Coach Agreement expires on June 30, 2023.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Increased knowledge of parenting and child development	Improved scores on pre/post test tool	Protective Factors pre/post test	Prior to and upon completion of service
Quality Assurance (QA) Monitoring			
Ensure quality service delivery	Accurate and complete data entry, clients served, improvement on measured indicators in pre and post test	Referral completion, tracking log, pre/post test	Ongoing review of pre/post test results
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Information and Referral (I&R) Line No. 15

SERVICE PROVIDER

Raise Foundation, Friendly Center, Institute for Healthcare Advancement, City of Stanton, City of Westminster, City of Garden Grove, City of Placentia, 211OC, Western Youth Services, Mission Hospital

PROGRAM DESCRIPTION

An Information and Referral (I&R) Specialist provides services at the Family Resource Center reception area. They are the first point of contact for walk-in and telephone/email inquiries during FRC operating hours. Services include an assessment of need and referral to services including but not limited to: emergency housing; emergency food; family counseling; child care; substance abuse counseling and treatment; parenting training; utility assistance; health and mental health treatment; education and job training; legal aid; and youth academic and recreation services. The I&R Specialist shall collaborate with other community agencies by receiving and referring clients, which may include, but not limited to 2-1-1 Orange County, Help Me Grow, etc.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Assessment of need and referral to services
PSSF Family Support	Assessment of need and referral to services
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Aftercare services in the community
- Establishing a point of contact for referrals at FRCs
- Improve coordination of services

TARGET POPULATION

Services are provided to Orange County children and families for those who have an open child welfare case, those at risk of abuse or neglect, and the community-at-large.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high-risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

SIP CYCLE: 2019-2024. A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Families have concrete support in times of need	Client needs were assessed and appropriate referrals and linkages to needed services provided	Tracking Log	Daily
Quality Assurance (QA) Monitoring			
Ensure quality program delivery	Accurate and complete data entry, outcome goals met, clients served	Monthly service grids	Meet monthly in person to discuss goals and outcomes
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Families and Communities Together (FaCT) Network Development Line No. 9

SERVICE PROVIDER

Charitable Ventures of Orange County (CVOC), The Olin Group, Inc. (TOGI) (2019-2020 only), Orange County Alliance for Children and Families (OCACF)

PROGRAM DESCRIPTION

The goal of FaCT Marketing is to increase access to and awareness of the FaCT Family Resource Centers in Orange County, promote best practices and collaboration, and to communicate the value of FaCT to regional stakeholders. FaCT's marketing and administrative coordinator works to achieve this goal through education, in-person outreach, presentations, physical collateral distribution, email marketing, relationship development and outreach to regional stakeholders and providers, and events. Through the marketing and administrative coordinator's role, information and referral linkages were made through connecting families and community partners to FaCT Family Resource Centers and other resources.

Further, FaCT's marketing and administrative coordinator assists in developing and coordinating a county-wide child abuse prevention, public awareness campaign for Child Abuse Prevention Month. The campaign is held annually in April and is a time to acknowledge the importance of families and communities working together to prevent child abuse and neglect and to promote the social and emotional well-being of children and families.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	Network Development
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Establishing aftercare and preventative services
- Establishing linkages to community agencies
- Coordination and determining gaps in services
- Building Safety Networks for families to prevent re-entry

TARGET POPULATION

Services are provided to Orange County children and families for those who have an open child welfare case, those at risk of abuse or neglect, and the community-at-large.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high-risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Further targeted outreach has begun within the school districts and will soon begin with law enforcement agencies. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

SIP CYCLE: 2019-2024 A new RFP will be released mid 2020 with a new contract cycle scheduled to begin July 1, 2021.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
FaCT network marketing focuses on all 5 Protective Factors and outreach to isolated families	Increased awareness and community engagement in family strengthening programs	Multiple Tracking logs to include google analytics, website tracking, outreach events logs, training logs, monthly and quarterly presentations, outreach material logs	Ongoing
Quality Assurance (QA) Monitoring			
Ensure quality outreach and engagement	Accurate and complete data entry	FaCT Logic Model	Meet monthly in person to discuss strategies, goals, and outcomes
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Out of School Time (OST) Youth Program Line No. 7

SERVICE PROVIDER

Friendly Center, Boys and Girls Club La Habra, YMCA Orange, Anaheim Family YMCA, City of Stanton, City of Westminster, City of Placentia, Human Options, Girls Inc., Ocean View School District, Boys and Girls Club of Westminster, Orange County Children's Therapeutic Arts Center, Team of Advocates for Special Kids

PROGRAM DESCRIPTION

OST program services are designed to provide participants with a safe and nurturing place during after school and non-school hours. Activities may include, but are not limited to recreation, education, healthy development, artistic and cultural enrichment, and leadership development.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Youth Program
PSSF Family Support	Youth Program
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Provide prevention/intervention services for youth
- Increase engagement

TARGET POPULATION

Services are provided to Orange County at risk youth from the community-at-large and child welfare clients.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high-risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached

grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

FY2019-2020 A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020. This service will no longer be required as of 2020. FRCs may choose to provide this.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Children's social and emotional development needs are met	Increased options for safe out-of-school care	Monthly Service Grid Pre/Post Test	Monthly, prior to and upon completion of service
Quality Assurance (QA) Monitoring			
Ensure quality of service delivery	Accurate and complete data entry, clients served, improvement on measured indicators in pre and post test	Monthly Service Grid, Pre/Post Test	Monthly in-person meetings, and ongoing review of Pre/Post test results
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Child Abuse Intervention and Treatment Services/Counseling and Parent Education Services Line No 6

SERVICE PROVIDER

Associates in Counseling and Mediation, Boys and Girls Club of Garden Grove, Casa de la Familia, Family Assessment Counseling and Education Services, Guardians of Life Foundation, Korean Community Services

PROGRAM DESCRIPTION

Parents with children ages birth through 17 years that are at risk, or have a history, of abuse/maltreatment are referred. Curriculum must cover the topics indicated in the Welfare and Institutions Code, such as: building self-esteem, handling stress/anger, nutrition, child development, communication skills, positive discipline, appropriate boundaries. Contractors must provide resource linkages to parents served. Parenting programs used include Common Sense Parenting and Nurturing Parent.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	Parent Education
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Provide streamlined services to reduce gaps
- Improve coordination and timing of services
- Continue to provide service while identifying ways to measure effectiveness of service

TARGET POPULATION

Services are provided to parents and/or caregivers who have an open child welfare case.

TARGET GEOGRAPHIC AREA

Parent Education Services are provided throughout Orange County with physical locations in the following zip codes: 90621; 92606; 92618; 92653; 92701; 92705; 92706; 92805; 92831; 92832; 92833;

92840; 92841; and 92867.

TIMELINE

SIP CYCLE: 2019-2024

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Increase parenting and child development	Improved scores on pre/post test tool	Protective Factors pre/post test	Prior to and upon completion of service
Quality Assurance (QA) Monitoring			
Ensure quality service delivery	Accurate and complete data entry, clients served, improvement on measured indicators in pre and post test	Referral completion, tracking log, pre/post test	Ongoing review of pre/post test results
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Parenting Education Line No. 6

SERVICE PROVIDER

Women's Transitional Living Center (WTLC), Human Options, Family Assessment Counseling & Education Services, Inc. (FACES), Westminster School District, City of Garden Grove

PROGRAM DESCRIPTION

FaCT requires an evidence-based or evidence-informed parenting curriculum. Elements of an effective parenting education program improve parenting skills and family functioning by teaching parents/caregivers about child development (e.g., developmental expectations), behavior management (e.g., discipline techniques), and coping skills (e.g., communication and stress management). As applicable, parenting education emphasis shall be placed on the prevention of recurrence of maltreatment and/or shall address attachment, bonding, and traumatic loss issues. Different FRCs use different parenting curriculum which include Love and Logic (6 weeks, 2hrs each class), Common Sense Parenting (6 weeks, 2hrs each class), Positive Parenting Program (6 weeks, 2hrs each class), and The Incredible Year (8 weeks, 1 1/2hrs each class or 6 weeks, 2hrs each class). Beginning on 2020 all FaCT Funded FRCs will be required to provide an evidence-based parenting curriculum.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Parent Education
PSSF Family Support	Parent Education
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITRY AREAS OUTLINED IN THE CSA: pages 103-110

- Provide streamlined services to reduce gaps
- Improve coordination and timing of services
- Continue to provide service while identifying ways to measure effectiveness of service

TARGET POPULATION

Services are provided to Orange County parents who have an open child welfare case, those at risk of abuse and neglect, and the community-at-large.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

SIP CYCLE: 2019-2024 A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Increased knowledge of parenting and child development	Improved scores on pre/posttest tool	Protective Factors Pre/Post Test	Prior to and upon completion of service
Quality Assurance (QA) Monitoring			
Ensure quality service delivery	Accurate and complete data entry, clients served, improvement on measured indicators in pre and post test	Monthly Service Grid, Pre/Post Test	Monthly in-person meetings, and ongoing review of Pre/Post test results
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Personal Empowerment Program (PEP) Line No. 12

SERVICE PROVIDER

Human Options, Interval House, Women's Transitional Living Center (WTLC)

PROGRAM DESCRIPTION

PEP is designed to help victims break the cycle of domestic violence through education on the dynamics of domestic violence, effect of violence on victims and their children, and to help victims protect children who live in domestic violence homes. Topics include safety planning, boundaries, anger management, legal aspects of domestic violence, working through denial, and maintaining healthy relationships. Services target the general community as well as families involved in the Child Welfare System. PEP is a ten (10) week educational support program. Classes are once per week for two hours.

Additional Requirements: When providing PEP TLFR, additional documentation is required to include but not limited to, verification of attendance, certificates of completion, and verbal and/or written reports to County social workers.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Domestic Violence Services
PSSF Family Support	Domestic Violence Services
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Provide streamlined services to reduce gaps
- Improve coordination and timing of services

TARGET POPULATION

Services are provided to Orange County victims of domestic violence with an open child welfare case, and those at risk of domestic abuse, as well as the community-at-large.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several

indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high-risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. Please find attached grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC.

TIMELINE

SIP CYCLE: 2019-2024 A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Increased parental resilience	Improved scores on pre/posttest tool	County specific pre/post survey	Prior to and at completion of PEP
Quality Assurance (QA) Monitoring			
Ensure quality service delivery	Accurate and complete data entry, identified goals improved or met, clients served	Monthly service grids	Meet monthly in person to discuss goals and outcomes, and weekly Case Management Team (CMT) meetings as needed
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Respite Care Services Line No. 4

SERVICE PROVIDER

New Alternatives, Inc.

PROGRAM DESCRIPTION

Respite is provided primarily to foster parents, giving them a brief period of "time out." The contractor recruits and trains Respite Care providers, who are County-licensed or FFA-certified foster parents. The contractor also coordinates respite care between the parties, ensuring that any special needs of the child are considered. Respite care services will be provided for a minimum of one (1) hour, up to a maximum of fourteen (14) days per child per respite episode.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	Respite care for foster parents
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Increase services and support for resource families
- Increase placement stability for youth

TARGET POPULATION

Services are provided to Orange County foster families

TARGET GEOGRAPHIC AREA

The program is throughout Orange County

TIMELINE

SIP CYCLE: 2019-2024 Orange County anticipates releasing an RFP for this service in 2020 as current Respite Agreement expires on June 30, 2021.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Foster families are provided respite care when needed	Foster families receive respite care for their foster youth when needed	Referrals and Tracking log	On-going
Quality Assurance (QA) Monitoring			
Ensure quality program delivery	Accurate and complete data entry, clients served	Referral completion and tracking log	On-going
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Monitored and Supervised Visitation Line No. 5

SERVICE PROVIDER

New Alternatives, Inc., Olive Crest

PROGRAM DESCRIPTION

Monitor and supervise visitation between children and their parent(s) who are court-ordered into monitored or supervised visitation as part of the family reunification plan. Services are up to four (4) times per week or as ordered by the Juvenile Court, for a period of up to twenty-six (26) weeks.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	Parent/Sibling Visitation
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Support family visitation and coaching
- Support family connections

TARGET POPULATION

Services are provided to Orange County children and families who have an open child welfare case

TARGET GEOGRAPHIC AREA

The program is throughout Orange County and may involve neighboring counties

TIMELINE

SIP CYCLE: 2019-2024. Orange County anticipates releasing an RFP for this service in 2022 as current Monitored and Visitation Agreement expires on June 30, 2023.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Children are able to visit with their parents as ordered by the Court	Court ordered visitation for children and their families is facilitated	Referrals and Tracking log	On-going
Quality Assurance (QA) Monitoring			
Ensure quality program delivery	Accurate and complete data entry, clients served	Referral completion and tracking log	On-going
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Transportation Services Line No. 16

SERVICE PROVIDER

New Alternatives, Inc., Olive Crest

PROGRAM DESCRIPTION

Transportation is provided to facilitate the ability for children to visit with their parent(s). Transportation may also be provided for the visitor (parent or legal guardian) only when the visitor lives in a different county and cannot provide his/her own transportation to the visit. Services are up to four (4) times per week or as ordered by the Juvenile Court, for a period of up to twenty-six (26) weeks.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	Visitation transportation
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Support family visitation and coaching
- Support family connections

TARGET POPULATION

Services are provided to Orange County children and families who have an open child welfare case

TARGET GEOGRAPHIC AREA

The program is throughout Orange County and may involve neighboring counties

TIMELINE

SIP CYCLE: 2019-2024. Orange County anticipates releasing an RFP for this service in 2022 as current Monitored and Visitation Agreement expires on June 30, 2023.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Children are able to visit with their parents as ordered by the Court	Court ordered visitation for children and their families is facilitated	Referrals and Tracking log	On-going
Quality Assurance (QA) Monitoring			
Ensure quality program delivery	Accurate and complete data entry, clients served	Referral completion and tracking log	On-going
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME

Differential Response (DR) Line No. 11

SERVICE PROVIDER

Children's Bureau of Southern California, Institute of Healthcare Advancement, Friendly Center, Human Options

PROGRAM DESCRIPTION

This service is offered to families referred by Children and Family Services (CFS) during an investigation of alleged child abuse. A CFS Senior Social Worker (SSW) teams with a Family Support Specialist (FSS) from the FRC, completing an assessment of strengths and needs. The CFS case is closed and the family has the opportunity to participate in case management, family support and in-home support services through the FRC with the goal of stabilizing the family and preventing further incidents of abuse or neglect. DR services are provided through five HUB FRC locations, one in each region of Orange County as defined by the Board of Supervisors. The DR FSS from their HUB site then travels to the FRC closest to the client to provide services. The DR FSS will maintain the case management of the family regardless of where the services are provided.

FUNDING SOURCES

Source	LIST FUNDED ACTIVITIES
CAPIT	
CBCAP	
PSSF Family Preservation	Differential Response
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

IDENTIFY PRIORITY AREAS OUTLINED IN THE CSA: pages 103-110

- Establishing aftercare and preventative services
- Establishing linkages to community agencies
- Coordination and determining gaps in services

TARGET POPULATION

Services are provided to Orange County Social Services Agency – Children and Family Services clients with an open child abuse report.

TARGET GEOGRAPHIC AREA

The program is countywide, targeting higher risk communities within Orange County based on several indicators such as: poverty, child abuse reports and substantiations, employment, single parent homes, etc. The FRCs currently within the funded platform are located in the following high-risk communities: San Juan Capistrano, Lake forest, Newport Beach (bordering Costa Mesa), Huntington Beach, Santa Ana, Westminster, Garden Grove, Stanton, Orange, Anaheim, Placentia, and La Habra. The current HUB sites that case manage the families referred through DR are located in La Habra, Santa Ana, Orange, Huntington Beach, and Lake Forest. Please find attached grid showing child abuse reporting and child poverty rates broken down by the cities within each Orange County Supervisor District. Note: A new contract cycle will begin in 2020. The current funded locations may change based on awarded proposals, but we would anticipate the majority of the current cities listed to retain an FRC. The new cycle will require all sites to provide DR services, there will no longer be HUB sites.

TIMELINE

SIP CYCLE: 2019-2024 A new RFP was released in July 2019 with a new contract cycle scheduled to begin July 1, 2020.

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING			
Desired Outcome	Indicator	Source of Measure	Frequency
Based on client need and address any or all 5 Protective Factors	Assessment of clients strengths and needs, reduced subsequent child abuse report, and successful linkages to supportive services	Family Development Matrix (FDM), Pre/Post surveys, CWS/CMS	At initial intake and as needed on all DR clients
Quality Assurance (QA) Monitoring			
Ensure quality service delivery	Accurate and complete data entry, identified goals improved or met, clients served, reduced recidivism	Monthly service grids	Meet monthly in person to discuss goals and outcomes, and weekly Case Management Team (CMT) meetings as needed
Client Satisfaction			
Method or Tool	Frequency	Utilization	Action
Customer Satisfaction Survey	Ongoing	Clients have the opportunity to provide feedback on their experience and if needs were met	Information gathered is used to review and improve program functioning

