

23. **PROCUREMENT SERVICES** - Authorized the Purchasing Manager to sign the following:
- a. Blanket Purchase Order #13561, Oil & Lube Products Public Works - Approved Change Order #4 with Hunt and Sons, Inc., in the amount of \$4,800.
 - b. Competitive Bid #9658, Heating, Ventilation & Air Conditioning Units - Awarded to Valair, in the maximum amount of \$85,000.
24. **PUBLIC WORKS:**
- a. Abandonment – Resolution 2007-60 adopted abandoning a pedestrian access easement on Lot 14, Meadow Estates, Phase 1, located in North Auburn.
 - b. Barton Road Bridge Project - Resolution 2007-61 adopted approving the Right-of-Way Contract, in the amount of \$60,900, and accepting the Highway Easement Deed from Jonathan Long.
 - c. Barton Road Bridge Project – Resolution 2007-62 adopted approving the Right-of-Way Contract, in the amount of \$60,400, and accepting the Highway Easement Deed from Dallas and Mark Maniord.
25. **TREASURER/TAX COLLECTOR** – Resolution 2007-63 adopted approving the Treasurer's Statement of Investment Policy for year 2007 and Resolution 2007-64 adopted delegating the authority to invest certain funds under the control of the Board to the Treasurer.

*****End of Consent Agenda*****

ITEMS FOR INFORMATION:

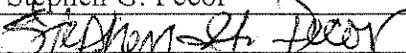
26. **AUDITOR/REFUNDS** - Report of refunds, \$1,000 or less, issued by the Auditor-Controller from January 1, 2006 to December 31, 2006. Refunds of \$1,000 or less total \$20,054.61.
27. **TREASURER/TAX COLLECTOR** – Treasurer's Statement for the month of January 2007.

ADJOURNMENT – Next regularly scheduled meeting is Tuesday, March 20, 2007.

BOARD OF SUPERVISORS' 2007 MEETING SCHEDULE:

March 20, 2007
March 27, 2007 (Strategic Planning-Rocklin)
April 02, 2007 (Tahoe)
April 03, 2007 (Tahoe)
April 17, 2007

**2007 Placer County Child Welfare Services
System Improvement Plan**

California's Child and Family Services Review System Improvement Plan	
County:	Placer
Responsible County Child Welfare Agency	Placer County Children's System of Care
Period of Plan	March 12, 2007 – March 12, 2010
Period of Outcomes Data	Data from State Report: October 2006
Date Submitted	March 8, 2007
County Contact Person for County System Improvement Plan	
Name:	Michelle Labrador
Title:	Program Manager
Address:	11716 Enterprise Drive, Auburn, CA, 95603
Phone/E-Mail	530.889.6703 / MLabrado@placer.ca.gov
Submitted by each agency for the children under its care	
Submitted by:	County Child Welfare Agency Director (Lead Agency)
Name:	Richard S. Knecht, M.S.
Signature	
Submitted by:	County Chief Probation Officer
Name:	Stephen G. Pecor
Signature	

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**2007 Placer County Child Welfare Services
System Improvement Plan**

Placer County System Improvement Plan

Introduction

This document presents Placer County’s System Improvement Plan (SIP) for its Child Welfare System. Unique among California counties, Placer County administers child welfare services as an integral part of the Systems Management, Advocacy and Resource Team (SMART) Children’s System of Care (CSOC). The system is governed by the multi-agency SMART Policy Board, consisting of the Chief Probation Officer, the Director of Health and Human Services, the Public Health Officer, and the Deputy Superintendent of Schools, and chaired by the Presiding Juvenile Court Judge. Within the traditional county departmental structure, child welfare services are located within the Health and Human Services (HHS) Department.

CSOC is a fully integrated, full-scale system which has provided a continuum of services including Child Welfare Services, Adoptions Services, Foster Care Licensing, Mental Health, Substance Abuse, Foster Care Eligibility, portions of Probation, Foster Youth Services, Alternative Education and elements of Community Health programs since 1988. It operates under the vision, “All children, adults and families in Placer County will be self-sufficient in keeping themselves, their children and their families safe, healthy, at home, in school/employed, out of trouble and economically stable.” Its mission is to “ensure that all public programs for children and families will provide services in a comprehensive and integrated manner, regardless of the agency door by which families enter.” All services are administered through integrated CSOC teams.

The Accountability Process: Self-Assessment, System Improvement Plan, Peer Quality Case Review

This SIP represents three years of focused work to improve Placer County’s child welfare system, in full compliance with state and federal systems accountability requirements. Starting in early 2004, CSOC worked with court and juvenile probation staff and many community partners to conduct an in-depth Self Assessment of Placer County’s progress meeting state and federal child welfare system outcome measures. Findings and recommendations from the 2004 Self Assessment were incorporated in the 2004 System Improvement Plan improvement, submitted to the State Department of Social Services, in September 2004. The 2004 SIP goals are outlined below.

2007 Placer County Child Welfare Services System Improvement Plan

2004 System Improvement Plan Goals

- Children are, first and foremost, protected from abuse and neglect.
 - Key Indicators: Recurrence of Maltreatment
- Children are maintained safely in their homes whenever possible and appropriate.
 - Key Indicators: Rate of Recurrence of Abuse, Timely Response to Referrals for Abuse or Neglect and Timely Social Worker Visits with the Child.
- Children have permanency and stability in their living situations without increasing re-entry into foster care.
 - Key Indicators: Length of Time to Reunification, Length of Time to Adoption, Multiple Foster Care Placements and Rate of Foster Care Re-Entry.
- The family relationships and connections of the children served by CWS will be preserved, as appropriate.
 - Key Indicators: Siblings Placed Together in Foster Care and Foster Care in Least Restrictive Settings.

Since 2004, CSOC has engaged in intensive efforts to implement a range of strategies to improve performance on state and federal child welfare system outcomes. In March 2006, CSOC conducted an in-depth, state-required Peer Quality Case Review of sixteen child welfare and probation cases in which children and youth in foster care had reunified with their parents but subsequently returned to foster care within a year. The findings and recommendations from the Peer Quality Case Review are included in Appendix A. Placer County's second Self Assessment, was conducted between March and November, 2006 by a work group composed of CSOC, probation and court staff, as well as representatives of community collaboratives, education, parents, providers, family resource centers and others (See Appendix B). Data from the 2006 Self Assessment were used to frame this 2007 System Improvement Plan.

Methodology

Data for the 2006 Self Assessment and 2007 System Improvement Plan were gathered from several sources.

- **Peer Quality Case Review**, described above.
- **Three Staff Focus Groups**, including CSOC and juvenile probation staff, provided an assessment of CSOC and juvenile probation policies and procedures and offered suggestions for improving child welfare system outcomes.
- **Four Community Focus Groups** hosted by community partners offered the client and community perspectives on the child welfare system. Participants included of providers, foster parents, youth and families involved in the CWS system. Additional input was gathered from a Spanish-speaking parent group.
- **Research on Outcomes and Systemic Factors** - Accountability work group sub-committees comprised of CSOC staff and community members were assigned to research, analyze and recommend improvements for each of the CWS outcomes and systemic factors included in the Self-Assessment.
- **Demographic and data analysis** - CSOC analysts gathered and analyzed demographic and educational statistics regarding Placer County children and families.

2007 Placer County Child Welfare Services System Improvement Plan

Findings from the 2006 Self-Assessment

Key findings from the 2006 Self-Assessment, which examined Placer County's progress on meeting prescribed state and federal outcomes are described below.

Outcome 1: Children are, first and foremost, protected from abuse and neglect.

Outcome 2: Children are maintained safely in their homes whenever possible and appropriate.

Recurrence of Maltreatment

Federal and State Indicators	Jan 03	July 06		Oct 06	
	Placer	Placer	Statewide Average	Placer	Statewide Average
1A. Recurrence of maltreatment (Fed) <i>National Std < 6.1%</i>	12.6%	12.5%	8.4%	9.6%	8.0%
1B. Recurrence of maltreatment within 12 months	16.3%	13.0%	12.4%	13.3%	12.3%
1B. Recurrence of maltreatment within 12 months after <i>first</i> substantiated allegation	14.8%	14.0%	10.7%	14.4%	10.7%
2A. Rate of recurrence of abuse/neglect in homes where children were not removed (no federal standard)	14.7%	9.4%	8.4%	8.3%	8.1%

Placer's 2004 Systems Improvement Plan (SIP) established the goal of reducing recurrence of maltreatment (Outcomes 1A and 1B; Outcome 2A) by 1.2%. Based on the latest data received from CDSS, Placer has met the 2004 SIP goals. To reduce recurrence of maltreatment, CSOC has implemented Structured Decision Making to improve safety and risk assessment; Differential Response to tailor services to family needs and prevent recurrence of maltreatment; Family to Family to keep children in their own communities and promote successful reunification; Team Decision Making and Family Team Meetings to increase participation of parents and youth in case planning and placement decisions; and earlier assessment and treatment of mental health and substance abuse issues. CSOC has also improved information about and access to services and resources for families at risk of entering or in the CWS system. Placer County believes that although significant progress has been made, the rate of recurrence of maltreatment for children in the CWS System should be further reduced.

Rate of Child Abuse/Neglect in Foster Care

State data reports no cases of child abuse or neglect in foster care in Placer County since 2000 as there was no protocol in place. Placer County is now tracking this data and has implemented a

2007 Placer County Child Welfare Services System Improvement Plan

protocol to address the reporting, entering, and investigating of referrals of abuse or neglect in foster care.

Rate of Child Abuse/Neglect Referrals with a Timely Response

Federal and State Indicators	Jan 03	July 06		Oct 06	
	Placer	Placer	Statewide Average	Placer	Statewide Average
2B. Percent of child abuse/ neglect referrals with a timely response (no federal standard) – Immediate Response Compliance	98.5%	88.4%	96.0%	85.8%	96.6%
2B. Percent of child abuse/ neglect referrals with a timely response (no federal standard) – 10-day Response Compliance	94.3%	69.8%	92.6%	79.3%	94.1%

In March 2006, due to a drop in compliance rates for timely response to referrals for child abuse or neglect, the State Department of Social Services requested that improvement in ten-day response rates be added to Placer County’s SIP. CSOC set a goal to improve response rates by 15% over 24 months. Strategies included training ACCESS staff on response time, meeting with staff on a bi-weekly basis to review response time on ten-day referrals, and exploring the purchase of Safe Measure software to monitor compliance. In the past nine months, SafeMeasures has been purchased; ACCESS staff has received additional training; and CWS supervisors have met regularly with staff to review compliance. Placer County’s rate of timely response to referrals for child abuse and neglect continues to need further improvement.

Timely Social Worker Visits With Child

Federal and State Indicators	June 03	January 2006		February 2006		March 2006	
	Placer	Placer	State Average	Placer	Statewide Average	Placer	Statewide Average
2C. Timely social worker visits with child (no federal standard)	73.6%	83.6%	90.1%	85.5%	90.5%	86.8%	90.9%

Recent data indicate a decline in compliance for social worker visitation requirements. The Self Assessment concluded that additional staff training is needed to enter visitation data into CWS/CMS in a consistent and accurate manner. The Self Assessment also recommended that policies be reviewed and updated on visitation exceptions.

**2007 Placer County Child Welfare Services
System Improvement Plan**

Outcome 3. Children have permanency and stability in their living situations without increasing reentry to foster care.

Length of Time to Exit Foster Care to Reunification

Federal and State Indicators	Jan 03	Jul 06		Oct 06	
	Placer	Placer	Statewide Average	Placer	Statewide Average
3E. % reunified within 12 months (Fed) <i>std:76.2%</i>	82.5%	79.6%	68.1%	79.9%	69.0%
3A. % reunified within 12 months (entry cohort)	59.1%	61.3%	37.5%	61.5%	38.0%

Placer County's rates for reunification within a year are above the federal standard and statewide average rates. System strengths include close compliance with court and statutory timelines for reunification; the depth and breadth of services offered by CSOC and its community partners; better assessment of safety and risk before reunification; and increased involvement of youth and families in decisions regarding placement and case plans. Additional attention is needed in the areas of analysis of data and case files, review of social worker caseloads, and recruitment of foster families.

Length of Time to Exit Foster Care to Adoption

Federal and State Indicators	Jan 03	July 2006		Oct 2006	
	Placer	Placer	Statewide average	Placer	Statewide average
3D. % adopted within 24 months (Fed) <i>Federal standard: 32%</i>	41.5%	40.8%	29.0%	41.7%	29.2%
3A. % adopted within 24 months (entry cohort)	7.7%	10.2%	6.9%	10.3%	7.0%

Placer County has a strong, effective adoptions program, and performs above state and federal standards on this indicator. Strengths include compliance with court and mandated deadlines, and an emphasis on concurrent planning and relative placement. Improvement is needed to increase recruitment of adoptive parents, particularly for concurrent foster/adoptive families, ethnically diverse families and those willing to adopt older children or children with multiple issues.

2007 Placer County Child Welfare Services System Improvement Plan

Multiple Foster Care Placements

Federal and State Indicators	Jan 03	Jul 06		Oct 06	
	Placer	Placer	Statewide average	Placer	Statewide average
3B. % with 1-2 placements within 12 months Federal std: 86.7%	83.3%	83.7%	84.8%	80.9%	84.7%
3C. % with 1-2 placements – if still in care at 12 months (entry cohort)	57.7%	62.7%	67.1%	61.3%	67.2%

Placer County has a higher rate of multiple placements than the federal standard and the statewide average. System strengths include involvement of birth and resource families in Team Decision Making, Family Team Meetings and placement meetings; a formal plan and a public-private partnership dedicated to increased recruitment, training and support of foster/adoptive families; use of shelter care and the county's receiving home for emergency placement; an extensive menu of training options for foster families; and a broad array of services available to support foster families. In addition, expansion of RAFT has permitted many children to avoid out of home placement altogether. Three areas for improvement include: reducing the average length of stay in shelter care, intensively pursuing relative placements and increasing foster care recruitment efforts.

Rate of Foster Care Re-Entry

Federal and State Indicators	Jan 03	July 06		Oct 06	
	Placer	Placer	Statewide Average	Placer	Statewide Average
3F. % of admissions who are re-entries (Fed) <i>Federal std - 8.6%</i>	16.0%	11.2%	9.9%	8.3%	10.3%
3G. % who re-entered within 12 months of reunification (entry cohort reunified within 12 months)	22.6%	14.0%	11.8%	16.2%	12.3%

Placer's 2004 Systems Improvement Plan (SIP) established the goal of reducing re-entry to foster care by 1.2%. Based on the latest data received from CDSS, Placer has surpassed its numerical goal and met the federal standard. To reduce re-entry to foster care, CSOC has implemented Structured Decision Making to improve safety and risk assessment; Family to Family to keep children in their own communities and promote successful reunification; Team Decision Making and Family Team Meetings to increase participation of parents and youth in case planning and placement decisions; and earlier assessment and treatment of mental health and substance abuse issues. CSOC has also improved information about and access to services and resources for families at risk of entering or in the CWS system.

**2007 Placer County Child Welfare Services
System Improvement Plan**

Outcome 4: The family relationships and connections of the children served by the CWS will be preserved, as appropriate.

Siblings Placed Together in Foster Care

Federal and State Indicators	Jan 03	July 2006		Oct 2006	
	Placer	Placer	Statewide average	Placer	Statewide average
4A. Percent of children in foster care that are placed with ALL siblings	49.4%	59.9%	45.4%	57.2%	45.8%
4A. Percent of children in foster care that are placed with SOME siblings	66.4%	69.2%	67.7%	70.6%	68.0%

Placer County performs well in placing children with their siblings. Both the courts and CSOC emphasize family group placements. The indicator could be further improved by greater intentional recruitment of families willing to foster and adopt sibling groups.

Foster Care in Least Restrictive Settings

Federal and State Indicators (October 2006 Data Report)	Initial Placement		Primary Placement		Point in Time Placement	
	4/1/05-3/31/06		4/1/05-3/31/06		4/1/06	
	Placer	State Average	Placer	State Average	Placer	State Average
Relative	10.5%	20.8%	39.3%	39.1%	30.2%	36.4%
Foster Home	26.0%	22.6%	16.0%	16.4%	9.2%	10.5%
FFA	19.6%	37.8%	26.0%	33.9%	29.9%	24.7%
Group/Shelter	43.8%	17.0%	18.3%	7.8%	13.3%	8.8%
Other	0.0%	1.9%	0.5%	2.8%	17.4%	19.5%

Although less restrictive placements are increasing, more attention should be focused on reducing the number of children in Foster Family Agency placements, conducting searches for relative and NREFM placements, and freeing caseworker time to focus on finding and maintaining successful placements.

Rate of Indian Child Welfare Act (ICWA) Placement Preferences (Data unavailable)

CSOC works diligently to identify ICWA-eligible children and comply with all ICWA requirements. The county has developed a close relationship with the United Auburn Indian Community to address the needs of ICWA-eligible children. Areas of improvement include

2007 Placer County Child Welfare Services System Improvement Plan

recruiting additional Native American foster and concurrent planning families, and ensuring that ICWA eligibility is clearly documented.

Outcome 8: Youth emancipating from foster care are prepared to transition to adulthood

Federal and State Indicator	
Number of youth ages 16-21 who received ILP services (2004-05)	145*
<ul style="list-style-type: none"> • Youth who completed ILP services or a component of services 	83
<ul style="list-style-type: none"> • Completed high school/GED or adult-education 	50
<ul style="list-style-type: none"> • Continuing or currently enrolled in education 	30
<ul style="list-style-type: none"> • Living independently of agency maintenance programs 	77
<ul style="list-style-type: none"> • Employed or other means of support 	60

Placer’s strong Independent Living Program focuses on one-to-one mentoring and guidance, and Transition Teams. Areas of improvement include collecting data on ILP participation, and educating schools and foster parents about services and ILP eligibility.

System Improvement Plan

The 2007 Placer County Child Welfare Services System Improvement Plan (SIP), described in the next section, outlines how Placer County plans to improve its child welfare system. For each state and federal outcome in need of improvement, numerical goals, and strategies and activities to achieve better outcomes are described. Timelines are included for each activity.

2007 Placer County Child Welfare Services System Improvement Plan

Outcome:

Outcome 1: Children are, first and foremost, protected from abuse and neglect. Indicators 1A and 1B: Recurrence of Maltreatment
 Outcome 2: Children are maintained safely in their homes, wherever possible and appropriate. Indicator 2A: Recurrence of maltreatment where children were not removed from their homes.
 Outcome 3: Children will have permanency and stability in their living situations without increasing re-entry to foster care. Indicators 3F and 3G: Re-entry to foster care

County's Current Performance: (Oct 2006 data)

1A. Recurrence of Maltreatment 9.6 %
 1B. Recurrence of maltreatment within 12 months 13.3%
 1B. Recurrence of maltreatment within 12 months after first substantiated allegation 14.4 %
 2A. Rate of recurrence abuse/neglect in homes where children were not removed 8.3%
 3F. Percentage of admissions who are re-entries 8.3%
 3G. Percentage who re-entered within 12 months of reunification 16.2%

Improvement Goals

Improvement Goal 1.0: Reduce recurrence of maltreatment (1A and 1B) by a rate of 1.2% to 8.4%/12.1% and maintain reduction.
 Improvement Goal 2.0: Reduce recurrence of maltreatment where children were not removed (2A) by a rate of 1.2% to 7.1%, maintain 7.1% rate
 Improvement Goal 3.0: Maintain rate of re-entry to foster care (3F) at 8.3% or below
 Improvement Goal 4.0: Reduce rate of foster care entry among those entering foster care for the first time (3G) by 1.2% to 15%.

Strategy 1. 1

Re-implement Structured Decision Making (SDM) and re-train staff to improve consistency and reliability of safety and risk assessments

Strategy Rationale:

Placer County's Self assessment showed that social workers differ in their decision making processes and criteria regarding leaving the children in the home or placing them in protective custody. Current compliance with SDM requirements is approximately 27%. A renewed effort to implement SDM will provide structured safety and risk assessments, providing consistency and reliability.

Milestone	1.1.1 Develop re-implementation plan	Timeframe	05/30/07	Assigned to	SDM Manager And Core Team
	1.1.2 Train all CWS staff in SDM		08/30/07		SDM Manager, Core Team and Regional Training Academy (RTA)

**2007 Placer County Child Welfare Services
System Improvement Plan**

Strategy 1. 2 Monitor use of SDM tools and measure changes in decision-making; ensure staff compliance of 80%.		Strategy Rationale To ensure staff have adopted the philosophy of SDM and are using the tools properly to measure recurrence of maltreatment.			
Milestone	1.2.1 Develop and implement procedures for monitoring staff use of SDM	Timeframe	6/30/07	Assigned to	SDM Manager And Core Team
	1.2.2 Train supervisors to use systems for monitoring staff compliance		8/30/07		SDM Manager, Core Team and CSOC Supervisors
	1.2.3 Supervisors report to Program Managers and SDM Core Team to ensure and maintain 80% compliance		11/30/07 and ongoing.		SDM Manager, Core Team and CSOC Supervisors
Strategy 2.1 Expand, improve and fully implement new Differential Response intake structure		Strategy Rationale: Implementation of Differential Response will permit CSOC and community partners to use engagement strategies that are individualized to families but provide standardized responses. The new system will provide greater opportunities for families to participate in preventive services within their communities and avoid involvement in the CWS system. Full implementation of Differential Response will also increase compliance with 10-day responses.			
Milestone	2.1.1 Revise and simplify confidentiality procedures pertaining to Differential Response Path 1	Timeframe	1/31/07	Assigned to	ACCESS Program Manager and County Counsel
	2.1.2 Develop an MOU to overcome confidentiality barriers between ACCESS and community partners		1/31/07		ACCESS Program Manager, County Counsel and community partners
	2.1.3 Implement Differential Response Path 1 referrals seven days a week		1/31/07		ACCESS leadership team and community partners

**2007 Placer County Child Welfare Services
System Improvement Plan**

Strategy 2.2 Review and make needed changes in procedures and staff assignments for Differential Response		Strategy Rationale: Current procedures for Differential Response multi-disciplinary team meetings, assignments and referrals may contribute to compliance issues.			
Milestone	2.2.1 Analyze current procedures for Differential Response meetings and referral assignments. Consider staff suggestions and possibly restructure	Timeframe	6/30/07	Assigned to	ACCESS Leadership team, ACCESS staff and community partners
	2.2.2 Develop job description for Community Engagement Specialist		7/31/07		Community partners and ACCESS leadership
	2.2.3 Contract with Child Abuse Prevention Council to hire a community engagement specialist (AmeriCorps) who will be stationed at ACCESS, participate in daily Path decisions and coordinate Path 2 appointments		9/30/07		Community partners and ACCESS leadership
	2.2.4 Implement Differential Response for all referrals seven days a week countywide		12/31/07		ACCESS Leadership team, ACCESS staff and community partners
Strategy 3. 1 Implement training and best work practices related to methamphetamine treatment and relapse prevention		Strategy Rationale Methamphetamine use is prevalent in Placer County and the primary reason children are removed from their parents. Placer County currently has no effective relapse prevention system in place to treat individuals (within family systems) with methamphetamine abuse and dependence.			
Milestone	3.1.1 Design Meth Project plan	Timeframe	2/28/07	Assigned to	ASOC and CSOC Directors, managers and identified staff.
	3.1.2 Develop and present plan and procedures for implementing meth project activities to CSOC staff		4/30/07		Meth Project and Wrap-Around Team Managers
	3.1.3 Implement multi-systemic treatment modality plan within CSOC		6/30/07		Meth Project Team: Placer County Board of Sups, Placer County Sheriff, Placer County DHH
	3.1.4 Train all staff in Meth Project activities and protocols		12/31/07		SMART Policy Board, Supervisors, Staff and Training Team

2007 Placer County Child Welfare Services System Improvement Plan

	3.1.5 Enroll and provide services to approximately four parents participating in family reunification services		6/30/08		SMART Policy Board
	3.1.6 Identify and enroll eight to ten additional child welfare clients in the multi-systemic treatment modality related to the Meth Project		6/30/08		SMART Policy Board, Supervisors, Staff and Training Team.
	3.1.7 Ensure that all staff work to create community wide awareness of what we can do in our communities to stop methamphetamine use		6/30/08		SMART Policy Board, Managers, Supervisors, Staff and Training Team.
Strategy 3.2 Implement training and best practices related to treatment of child welfare services clients with co-occurring disorders			Strategy Rationale Co-occurring disorders are associated with recurrence of maltreatment. Placer County currently has no effective system in place to treat individuals with co-occurring disorders.		
Milestone	3.2.1 Form MHSA Transformation Group; identify Change Agents	Timeframe	2/28/07	Assigned to	ASOC and CSOC Directors, managers and identified staff.
	3.2.2 Develop co-occurring competence plan and procedures for implementation. Present plan to ASOC and CSOC staff		6/30/07		Transformation Team, Change Agents, SMART Policy Team ASOC and CSOC Directors, managers and identified staff.
	3.2.3 Develop co-occurring disorders program plan and identify transformation team		6/30/07		Transformation Team, Change Agents, SMART Policy Team ASOC and CSOC Directors, managers and identified staff.
	3.2.4 Develop and implement procedures for best practices; present procedures to staff in small group training		6/30/07		Transformation Team, Change Agents, SMART Policy Team ASOC and CSOC Directors, managers and identified staff.
	3.2.5 Train all staff to use best practices in treating co-occurring disorders		12/31/07		Transformation Team, Change Agents, SMART Policy Team ASOC and CSOC Directors, managers and identified staff.

2007 Placer County Child Welfare Services System Improvement Plan

Strategy 4.1 Provide increased support for parents participating in family reunification services		Strategy Rationale Some parents participating in reunification services indicate that their services are often delayed due to inconsistent and un-timely social worker contact with their assigned social workers and service providers.			
Milestone	4.1.1 Develop a CSOC Agency policy stating that it is best practice to respond to requests from parents within seven days	Timeframe	5/30/07	Assigned to	Program Director and team of managers, supervisors and seniors.
	4.1.2 Review and reissue policy guidelines to all staff regarding 24-hour response to phone calls and e-mail. Include best practice for completing requests for services within 7 days		3/30//07		Program Director and team of managers, supervisors and seniors.
	4.1.3 Develop and implement a protocol for exit interviews with parents who successfully reunify with their children, at the close of placement. The interview, conducted with a family advocate, will include a review and rating of CSOC services, support, and responsiveness during the reunification process		8/30/07		Program Director and team of managers, supervisors and seniors, family advocate.
Discuss changes in identified systemic factors needed to further support the improvement goals.					
<ul style="list-style-type: none"> • Caseload sizes are too large, and will need to be reduced in order to make room for training and maintenance of new practices. 					
Describe educational/training needs (including technical assistance) to achieve the improvement goals.					
<ul style="list-style-type: none"> • Training takes time away from the actual practice of social work, and caseloads are high, making time scarce. • Train ACCESS leadership and staff and community partners on new confidentiality MOU and procedures • Educate all ACCESS staff and community partners on role of Community Engagement Specialist • Staff will require periodic feedback (from exIT interviews) about what works to promote reunification, and what to avoid 					
Identify roles of the other partners in achieving the improvement goals.					
<ul style="list-style-type: none"> • Create AmeriCorps position for Community Engagement Specialist • Community Partners must ensure staffing for Path 1 and Path 2 referrals seven days a week • Managers and Supervisors must incorporate use of tools and application of new best practices (SDM, DR, meth project, Co-occurring Treatment Practices, etc) into supervision to help ensure compliance. 					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.					
<ul style="list-style-type: none"> • Resolve confidentiality issues between Placer County and Community partners regarding Path 1 referrals. 					

2007 Placer County Child Welfare Services System Improvement Plan

Outcome: Outcome 1: Children are, first and foremost, protected from abuse and neglect. Indicator 2B: Timely Response to Referrals						
County's Current Performance: (Oct 06 data) 2B: Timely Response to Referrals 85.8% (immediate response) and 79.3 (ten-day response)						
Improvement Goal 5.0: Increase rates for immediate response by 4.2%, and 10-day response by 10.7% to at least 90%; maintain 90% rate.						
Strategy 5. 1 Ensure staff compliance to immediate and 10 day response requirements			Strategy Rationale Immediate and 10 day response compliance are expected performance outcomes, and should be included in employee evaluations			
Milestone	5.1.1 Using SafeMeasures data, review compliance with response requirements in each weekly or biweekly supervision session with staff	Timeframe	1/31/07 and ongoing		Assigned to	ACCESS/CSOC supervisors
	5.1.2 Ensure compliance by reviewing SafeMeasures report on emergency response monthly with ACCESS supervisors		2/28/07 and ongoing			ACCESS/CSOC Program Manager
	5.1.3 Ensure compliance by reviewing SafeMeasures report on 10-day response with ACCESS and CSOC supervisors		2/28/07 and ongoing			ACCESS/CSOC Program Managers
Strategy 5. 2 Clarify requirements for compliance when contact is attempted but not completed within 10 days			Strategy Rationale Contact requirements are unclear			
Milestone	5.2.1 Identify ACCESS leadership and MIS/IT team members to research contact requirements to clarify definitions for proper response	Timeframe	3/15//07		Assigned to	ACCESS leadership team member
	5.2.2 Conduct research; report to Leadership Team		4/1/07			ACCESS leadership team member/ MIS/IT team
	5.2.3 Train staff on contact requirements		5/30/07			MIS/IT Team

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Strategy 5. 3 Review and (if needed) restructure ACCESS work assignments.		Strategy Rationale Current configuration of CWS and Mental health emergency response assignments may contribute to compliance issues for 10 day assessments			
Milestone	5.3.1 Request ACCESS Staff to review and consider new configurations for ER assignments	Timeframe	3/01/07	Assigned to	All ACCESS staff
	5.3.2 Analyze current assignment configuration and consider staff suggestions and possible restructuring		3/30/07		ACCESS leadership team
	5.3.3 Implement recommendations for changes in assignment configuration as appropriate		4/15/07		ACCESS Program Manager
Discuss changes in identified systemic factors needed to further support the improvement goals.					
<ul style="list-style-type: none"> Reduce social worker caseloads, to facilitate consistent 10-day responses. 					
Describe educational/training needs (including technical assistance) to achieve the improvement goals.					
<ul style="list-style-type: none"> None 					
Identify roles of the other partners in achieving the improvement goals.					
<ul style="list-style-type: none"> None 					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.					
<ul style="list-style-type: none"> None 					

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Outcome: Outcome 2: Children are maintained safely in their homes, wherever possible and appropriate. Indicator 2C:Timely Social Worker Visits with Child						
County's Current Performance (Oct data) 2C: Timely Social Worker Visits with Child: 86.8%						
Improvement Goal 6.0 Improvement Goal 6.0: Increase timely social worker visits by a rate of 3.2% to 90%; maintain 90% rate.						
Strategy 6. 1 Monitor social worker visits through the use of SafeMeasures			Strategy Rationale Full use of SafeMeasures will assist workers and supervisors in effectively monitoring social worker visits.			
Milestone	6.1.1 Train all Supervisors and Management staff to use SafeMeasures to monitor staff	Timeframe	3/31/07		Assigned to	Program Manager, MIS/IT staff
	6.1.2 Train all CWS staff to use SafeMeasures		4/30/07			Program Manager, MIS/IT staff
	6.1.3 Monitor CWS staff use of SafeMeasures during one on one supervision		5/31/07 and ongoing			Supervisors/Managers
Strategy 6. 2 Ensure all eligible cases have up to date contact exceptions in CWS/CMS case plans			Strategy Rationale Ensuring every case plan is reviewed for contact exceptions will assist staff in making appropriate decisions about visitations.			
Milestone	6.2.1 Review every case for contact exception eligibility	Timeframe	6/30/07 and ongoing		Assigned to	Supervisors and staff
	6.2.2 If eligible, complete contact exceptions in the CWS/CMS case plan		7/31/07 and ongoing			Staff
	6.2.3 Ensure timely update of contact exceptions in the case plan through CWS/CMS and SafeMeasures		12/31/07 and ongoing			Supervisors, Staff and Managers
	6.2.4 Develop guidelines for monthly contact, including exception criteria, in accordance with Section 31-320 of Division 31 regulations		8/31/07			Program Manager, MIS/IT Team
	6.2.5 Develop and issue procedures for updating case plans, including contact exceptions		12/31/07			Program Manager, MIS/IT Team

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Strategy 6. 3 Provide clerical assistance to input visitation notes in CWS/CMS		Strategy Rationale Clerical assistance will ensure timely data input and will allow CWS workers more time for visits.			
Milestone	6.3.1 Review existing Case Activity Contact /Visit Log and modify if necessary to match CWS/CMS system	Timeframe	6/30/07	Assigned to	Supervisor workgroup
	6.3.2 Review workload of each staff. Staff that need assistance will use Case Activity Contact /Visit Log		12/31/07		Managers/Supervisors/Seniors
	6.3.3 Train clerical staff to input information from Case Activity Contact /Visit Log		12/31/07		MIS/IT and Supervisors
Discuss changes in identified systemic factors needed to further support the improvement goals.					
<ul style="list-style-type: none"> Caseload reduction would support more timely visits. 					
Describe educational/training needs (including technical assistance) to achieve the improvement goals.					
<ul style="list-style-type: none"> None identified 					
Identify roles of the other partners in achieving the improvement goals.					
<ul style="list-style-type: none"> None identified 					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.					
<ul style="list-style-type: none"> Consider regulation change to allow other qualified staff to conduct monthly contacts. 					

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Outcome: Outcome 3: Children will have permanency and stability in their living situations without increasing re-entry to foster care; Indicators 3B and 3C- Multiple Foster Care Placements					
County's Current Performance (Oct Data) 3B. Percentage of children with 1-2 placements within 12 months - 80.9% 3C. Percentage of children with 1-2 placements –if still in care at 12 months – 61.3%					
Improvement Goal 7.0 Improvement Goal 7.0: Increase percentage of children with 1-2 placements by a rate of 5.8% to 86.7%					
Strategy 7. 1 Recruit additional concurrent planning families for older children			Strategy Rationale In Placer County, children over six years old typically experience a greater number of foster placements, with fewer opportunities for permanency, than younger children. In part, this is due to an inadequate number of concurrent planning families interested in adopting older children.		
Milestone	7.1.1 Contract with the Child Abuse Prevention Council to hire a foster parent recruiter through AmeriCorps	Timeframe	2/28/07	Assigned to	Recruitment and Outreach Team
	7.1.2 Identify geographic areas and age groups (including older children) for targeted recruitment of foster parents		5/31/07		Recruitment and Outreach Team and MIS/IT Team
	7.1.3 Monitor the number of families willing to foster older youth		8/30/07 and ongoing		Recruitment and Outreach Team and MIS/IT Team
	7.1.4 Provide regular training to staff on concurrent planning and permanency planning issues emphasizing the needs of older youth		Twice a year beginning by 6/30/07		Managers, supervisors, seniors and permanency planning workers on each team

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Strategy 7. 2 Provide increased support for Resource Parents		Strategy Rationale Some resource parents report that when they call or e-mail caseworkers about issues with foster children or need for additional support, they do not receive a timely response within the agency's guideline of 24 hours. They also report delays in obtaining needed services. The perceived lack of caseworker responsiveness and support may result in frustration, requests to move children from placements, or even resignation of resource families.			
Milestone	7.2.1 Develop a CSOC agency policy stating that it is best practice to complete requests from resource parents for services within 7 days	Timeframe	4/30/07	Assigned to	Program Director and team of managers, supervisors and seniors.
	7.2.2 Review and reissue policy guidelines to all staff regarding 24hour response to phone and email. Include best practice for completing requests for services within 7 days		3/30/07		Program Director and team of managers, supervisors and seniors
	7.2.3 Consider creating a full time permanent Foster Parent Liaison position to assist case workers in providing resource parents with information and other supports		06/30/08		CSOC mgmt team.
	7.2.5 Develop and implement a protocol for exit interviews with Resource Parents at the close of placements. The interview will review CSOC services, support, and responsiveness during the placement.		09/30/07		Foster Parent Liaison.
	7.2.6 Recruit 5 Resource Families specifically for Respite Care		12/31/07		Recruitment and Outreach team

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Strategy 7.3 Expedite the relative/Non-Related Extended Family Member (NREFM) approval process		Strategy Rationale Delays in the approval of placements with relatives and NREFM may result in unnecessary temporary placements in other foster care.			
Milestone	7.3.1 Develop and implement an agency policy requiring ACCESS investigators to include a list of relatives or NREFM in the detention report or transfer summary to permit ongoing workers to immediately pursue possible placement	Timeframe	6/30//07	Assigned to	ACCESS Program Manager
	7.3.2 Develop and implement best practice policy of conducting assessments of relatives/NREFM within 10 days of the child's removal		6/30/07		CSOC program managers
	7.3.3 Monitor and assist caseworkers with relative/ NREFM approvals during monthly supervision		6/30/07 and ongoing		Team supervisors/seniors
Discuss changes in identified systemic factors needed to further support the improvement goals.					
<ul style="list-style-type: none"> • Staffing systemic factor: 1) Reduce CWS ongoing social worker caseloads from 35 to 20 by hiring new workers. 2) Create Full Time Permanent Position for Resource Parent Liaison. 					
Describe educational/training needs (including technical assistance) to achieve the improvement goals.					
<ul style="list-style-type: none"> • Periodically train ongoing workers; review concurrent planning and permanency goals for children in foster care. 					
Identify roles of the other partners in achieving the improvement goals.					
<ul style="list-style-type: none"> • Encourage partner FFA's to actively seek concurrent planning families for older children 					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.					
None					

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Systemic Factor: Management Information System					
County's Current Performance: County has implemented SafeMeasures, case management software that allows an almost real-time reporting of case information and AB636 performance measures. CSOC MIS Team and Evaluator for CSOC produce monthly report on performance measures and productivity.					
Improvement Goals 8.0					
<ul style="list-style-type: none"> • Ensure correct and appropriate entry of data and closure of immediate and 10-day assessments to improve Timely Response to Referrals • Ensure correct and appropriate entry of data and approval of CWS Case Plans to improve Timely Social Worker Contacts • Ensure correct and appropriate association and evaluating out of referrals in CWS/CMS to reduce false reporting of Recurrence of Maltreatment. • Help reduce Re-Entry into Foster Care by completion of an ongoing analysis of reasons for re-entry. • Create an additional analyst position to work with the evaluation team. 					
Strategy 8. 1 Set standard procedures for entry of contacts and required data on immediate and 10-day assessments			Strategy Rationale Due to the lack of clarity of statewide data entry standards, data may be entered in a format that is not queried by state performance measures. Setting standard procedures will insure that all "fields" required for correct measurement are completed.		
Mile stone	8.1.1 Complete standard procedures for data entry of face-to-face contacts for immediate and 10-day assessments	Time frame	4/30/07	Assigned	MIS/SIP Committee
Strategy 8. 2 Train staff on data entry standards and ensure timely and correct supervisor approval of immediate and 10-day assessments			Strategy Rationale Training staff will ensure appropriate entry of investigative contacts with children and families, ensure proper closure of immediate and 10-day assessments, and ensure that supervisors are signing off on immediate and 10-day assessments in a timely and correct manner for closure of the immediate and 10-day assessments.		
Milestone	8.2.1. Train teams on data entry process	Timeframe	5/15/07	Assigned to	MIS SIP Committee
	8.2.2 Train Supervisors on correct process for approval and closures of immediate and 10-day assessments		6/30/07		MIS SIP Committee

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Strategy 8.3 Conduct monthly reviews of immediate and 10-day assessments that do not meet performance standards to determine if data entry contributed to the reporting of non-compliance.		Strategy Rationale Ensures effectiveness of training and helps establish appropriate data entry standards.			
Milestone	8.3.1 Randomly sample 10% of all immediate and 10-day assessments that do not meet established performance standards	Timeframe	June 30, 2007 and Ongoing	Assigned to	MIS SIP Committee
	8.3.2 Complete report on findings as related to data entry standards and distribute to Manager and Supervisors for review		August 30, 2007 and Ongoing		MIS SIP Committee
	8.3.3 Make recommendations for procedural changes or training needs based upon findings of study		September 30, 2007 and Ongoing		MIS SIP Committee
Strategy 8.4 Set standard procedures for entry of social worker contacts, ensure timely and correct supervisor approval of CWS Case Plans and train staff on standards.		Strategy Rationale Due to the lack of statewide data entry standards, data may be entered in a format that is not queried by state performance measures, setting standard procedures will insure that all "fields" required for measurement are completed and that supervisors are signing off on CWS Case Plans in a timely manner, a procedure that is necessary for measurement of this performance standard.			
Milestone	8.4.1 Complete standards for entry of social worker contacts	Time frame	June 30, 2007	Assigned to	MIS SIP Committee

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Strategy 8.5 Train staff on data entry process for recording Social Worker contacts, submitting CWS Case Plans to supervisor and how to correctly approve the CWS Case Plans including requests for exceptions for Social Worker contacts		Strategy Rationale Training staff will ensure appropriate data entry of Social Worker contacts in a manner that will be correctly queried by the state performance measures. Since the CWS Case Plan is linked in the query language to successful compliance with this measure, training Supervisors on approval will ensure that the contact requirements for the case “match” the Social Worker contacts.			
Milestone	8.5.1 Conduct training for each service team to ensure compliance with standards	Timeframe	August 30, 2007	Assigned to	MIS SIP Committee
	8.5.2 Conduct training for supervisors on appropriate and timely process for approval of case plan		August 30, 2007		MIS SIP Committee
	8.5.3 Review and consider staff compliance when completing performance appraisals		November 30, 2007		Managers, supervisors, seniors
Strategy 8.6 Conduct monthly reviews of Social Worker contacts that do not meet performance standards to determine if data entry contributed to the reporting of non-compliance		Strategy Rationale Ensures effectiveness of training and helps establish appropriate data entry standards.			
Milestone	8.6.1 Randomly sample 10% of all Social Worker contacts that do not meet established performance standards	Timeframe	September 30, 2007 and Ongoing	Assigned to	MIS SIP Committee
	8.6.2 Complete report on findings as related to data entry standards and distribute to Manager and Supervisors for review		October 31, 2007 and Ongoing		MIS SIP Committee
	8.6.3 Make recommendations for procedural changes or training needs based upon findings of study		December 1, 2007 and Ongoing		MIS SIP Committee

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Strategy 8.7 Set Standards for recording referrals of maltreatment or abuse in CWS/CMS that will link related referrals		Strategy Rationale Sample reviews of referrals for recurrence of maltreatment suggest that referrals that are subsequent to and related to a previously substantiated referral are not always being associated with the substantiated referral or being evaluated out. Failure to complete the association or to evaluate out the referral can result in recording the subsequent referral as a recurrence of maltreatment or abuse.	
Milestone	8.7.1 Work with program staff to set standards for determination of relationship of subsequent referrals to previously substantiated referrals	Time frame	January 31, 2008
Assigned to	MIS SIP Committee		
Strategy 8.8 Train staff on guidelines for association of referrals or on procedures for evaluating out referrals as appropriate		Strategy Rationale Currently there are a number of referrals that are open on ongoing cases. Many of these referrals are on reports for maltreatment or abuse that is a part of the approved CWS Case Plan for the child or family. Training staff to evaluate these referrals out can result in a more accurate reporting of recurrence of maltreatment or abuse.	
Milestone	8.8.1 Conduct training for intake and ongoing teams to ensure that subsequent referrals are associated with previous substantiated referrals as appropriate or that subsequent referrals on ongoing cases are evaluated out as necessary	Timeframe	March 31, 2008
Assigned to	MIS SIP Committee		
Strategy 8.9 Conduct quarterly reviews of recurrence of maltreatment or abuse to determine if data entry contributed to an inappropriate report of cases		Strategy Rationale Ensures effectiveness of training and helps establish appropriate data entry standards	
Milestone	8.9.1 Disaggregate recurrence of maltreatment report and sample 10% of cases reported	Timeframe	September 30, 2007 and Ongoing
Assigned to	MIS SIP Committee		
Milestone	8.9.2 Complete report on findings as related to data entry standards and distribute to Manager and Supervisors for review	Timeframe	September 30, 2007 and Ongoing
Assigned to	MIS SIP Committee		
Milestone	8.9.3 Make recommendations for procedural changes or training needs based upon findings of study	Timeframe	September 30, 2007 and Ongoing
Assigned to	MIS SIP Committee		
Strategy 8.10 Conduct six (6) month reviews of Re-entry into Foster Care to ensure		Strategy Rationale Analysis of reasons for Re-entry into Foster Care can help establish	

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that cases are reported appropriately in CWS/CMS		practices that better address the service needs of our children and families.			
Milestone	8.10.1 Disaggregate recurrence of maltreatment report and sample 10% of cases reported	Timeframe	October 30, 2007 and Ongoing	Assigned to	MIS SIP Committee
	8.10.2 Complete report on findings as related to data entry standards and distribute to Manager and Supervisors for review		November 30, 2007 and Ongoing		MIS SIP Committee
	8.10.3 Make recommendations for procedural changes or training needs based upon findings of study		January 31, 2008 and Ongoing		MIS SIP Committee
Strategy 8.11 Identify resources to either create an additional analyst position for CWS or re-engineer existing functions to create capacity for increased reviews, analysis, and reporting		Strategy Rationale Data analysis and evaluation are integral to improvement of performance measures. Without accurate reporting and assessment of data and ongoing evaluation of results, decisions meant to effect program change may be based solely staff experience and anecdotal evidence. Failure to base decisions on data analysis and evaluation is evident in Placer's 2004 System Improvement Plan strategies to reduce re-entry to foster care. Because Placer was unable to evaluate the cause of the rate of re-entry at the time, 2004 SIP strategies did not address what was later determined to be the primary cause of the re-entry into foster care-- parental relapse of substance abuse,. The addition of an analyst position will provide staff time necessary for evaluation of factors contributing to successful completion of performance measures.			
Milestone	8.11.1 Work with CSOC administration and accounting to determine feasibility of creating an additional position for evaluation	Timeframe	September 30, 2007	Assigned to	MIS SIP Committee
	8.11.2 Rewrite job description or re-assign duties		November 30, 2007		CSOC Accounting

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Discuss changes in identified systemic factors needed to further support the improvement goals.

Statewide standards for data entry have not been set, potentially resulting in reporting inaccuracies in state performance standards. As a result, the county is left with the review of formulas for reporting of state performance standards and the drafting of appropriate data entry standards. Completion requires learning the performance standard formulas and then learning how to enter data into CWS/CMS in a manner that will result in data being entered in the appropriate field for the particular performance query.

Staffing: It is recommended that the County consider creating an additional analyst position to work with the evaluation team. Currently, Placer has the software necessary for disaggregating data required for determination of factors contributing to the success or failure in achievement of our performance outcomes. However, disaggregating only gives us the names of the cases which either met or did not meet the performance criteria. Determination of the factors that contributed to the criteria usually requires a hand review of each of the cases. For example, a review of all cases of children re-entering foster care demonstrated that the primary reason for the re-entry was parental relapse of substance abuse. Absence of that information prevented Placer from implementing a program strategy that actually targeted successful achievement of the goal to reduce re-entry. That level of analysis requires additional staff time that CSOC does not presently have available.

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

Client Services Supervisor/Evaluator needs to be trained on query language for CWS/CMS.

MIS Committee needs technical assistance on deciphering performance standard formulas.

CSOC staff needs training on standards as designed by the MIS Committee to ensure appropriate data entry.

Supervisors require training on correct procedures for approval of immediate and 10-day assessments, approval of CWS Case Plans and review of CWS/CMS cases to ensure staff responsiveness to performance.

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

CSOC Service Teams need to help establish criteria for determination of association or evaluating out referrals related to Recurrence of Maltreatment. Managers and Team Supervisors must incorporate reports into supervision to help ensure compliance with record keeping requirements and reporting in CWS/CMS.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None at this time.

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Systemic Factor CWS Case Management Caseloads						
County's Current Performance: The average caseload for family-centered service teams, providing case management services to children in placement is 35 children for each caseworker. This compares to caseloads for direct services for mental health, wraparound and special education of 18 to 1, or less.						
Improvement Goal 9.0 Reduce average caseloads for workers providing CWS case management services to 20 children to meet AB 2030 workload standards.						
Strategy 9.1 Use supplementary state funding for CWS to hire additional caseworkers			Strategy Rationale <ol style="list-style-type: none"> 1. The Placer CWS Self-Assessment, completed in November, 2006 concluded that high caseloads were a factor in every outcome for which Placer County is not meeting the state/federal standards. 2. The Peer Quality Case Review, completed in March, 2006, indicated that high caseloads were strongly related to high rates of re-entry to foster care. 3. Placer's CWS caseloads are considerably higher than many other counties. 			
Milestone	9.1.1 Apply supplementary state funding to employment of CWS caseworkers		Timeframe	8/1/08	Assigned to	CSOC Management Team
	9.1.2 Hire additional CWS caseworker staff					9/30/08
Strategy 9.2 Employ bachelor's level staff or para-professionals, where appropriate, to handle some of the duties of social workers, where permitted by law			Strategy Rationale : To a limited extent, bachelor's level staff or para-professionals could take some of the burden off current caseworkers, at a potentially lower cost			
Milestone	1.2.1. Review caseworkers duties to determine which duties could be assigned to other staff; develop job specifications as needed		Timeframe	5/31/08	Assigned to	CSOC Management Team/HHS Human Resources
	1.2.2 Hire and train new CWS caseworkers					9/30/08

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**Appendix A
Peer Quality Case Review Findings and Recommendations
March 2006**

The following cross-cutting conclusions and recommendations emerged from the Peer Quality Case Review.

I. Methamphetamine use appears to be a primary driver of child abuse and neglect, leading to involvement in Placer County's child welfare system. Based on the PQCR, successful treatment of drug abuse is a primary factor determining either successful family reunification or re-entry to foster care. Systemic and practice recommendations include:

1. Increase financing and availability of substance abuse treatment for families in the child welfare system.
2. Increase the treatment capacity for dual diagnosis substance abuse-mental health issues.
3. Ensure that substance abuse treatment providers have had adequate training to effectively treat families in the child welfare system, and are utilizing best practices to promote best possible outcomes.
4. Improve coordination between the Adult System of Care, which administers adult mental health and substance abuse services, and CSOC which operates child welfare services to facilitate and speed services to clients of CWS.
5. Increase the hours of operation for drug testing services to permit more frequent use of random testing.

II. Parental motivation to change their behavior and reunify with their children, and their engagement in case planning and implementation are instrumental to successful reunification. Systemic and practice recommendations include:

6. Continue to emphasize and expand strengths-based, family-centered approaches to casework.
7. Expand the use of family team meetings for case planning for both probation and child welfare services caseworkers.
8. Continue expansion of Team Decision-Making for placement decisions.

III. Excessive caseloads and other staffing issues diminish the effectiveness of social workers and probation officers, and reduce the likelihood of successful reunification. Systemic and practice recommendations include:

9. Hire additional case-carrying social work and probation staff to reduce caseloads.
10. Identify tasks, such as the coordination, transport and supervision of family visits that can be handled by other staff. Continue to provide assistance with scheduling, coordinating and facilitating family team meetings and team decision-making.
11. Recruit bilingual, bicultural caseworkers; provide basic instruction in Spanish to caseworkers.
12. Review the practice of assigning both CWS and 26.5 cases to social workers.

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13. Review case assignment processes to support continuity on cases, limit the number of workers assigned to a case, ensure that caseloads are balanced, and evaluate split caseloads.
- IV. Probation officers and newly hired social workers need additional training.
Recommendations include:
14. Require and pay for probation officers to receive training in case planning, management and placement.
 15. Offer a standardized, county-specific training program for newly hired social workers.
- V. Errors in CWS/CMS data entry may over-count cases of re-entry to foster care.
Recommendations include:
16. Provide regular training to child welfare staff to ensure that case information is entered properly and consistently.
 17. Provide increased data analysis support to CSOC so that errors are more readily caught.
 18. Ensure that Placer County representatives participate regularly in statewide meetings of child welfare MIS representatives.
- VI. Effective, regular and ongoing supervision of social workers and probation officers appears to promote effective reunification. Recommendations include:
19. Ensure that child welfare and probation supervisors schedule and spend supervision time regularly with all caseworkers.
 20. Consider utilization of SafeMeasures software to increase level to supervision and review of case requirements for CWS cases.
- VII. Court-mandated timelines for reunification may be too short to accommodate effective methamphetamine abuse treatment, especially when there are underlying mental health issues. Recommendations include:
21. Social workers should be well prepared for court appearances, by carefully documenting court updates and progress notes.
 22. Social workers and probation officers should ensure that all visitation requirements are met.
 23. Ongoing communication and education is needed between CSOC, probation and the courts to ensure that all parties understand the issues and requirements of each agency.
- VIII. With the exceptions noted above, services for children, youth and families are generally available, accessible and effective, except for families in some rural areas. There were no specific recommendations in this area.
- IX. Collaboration between Probation and CWS is the norm and generally works well. Closer collaboration with the Adult Systems of Care is needed (See I above)

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Appendix B Accountability Workgroup

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Foster Care Licensing
Placer County Children's System of Care

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North Tahoe Family Resource Center

Kezzia Bullen, Team Leader
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