

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



May 12, 1989

ALL-COUNTY LETTER NO. 89-41

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: SECOND ANNUAL STATISTICAL REPORT FOR THE INDEPENDENT LIVING PROGRAM

REFERENCE: ALL-COUNTY LETTER NO. 88-107

The purpose of this letter is to provide you with the reporting instructions for the second annual statistical reports on the Independent Living Program (ILP). These reports are for Federal Fiscal Year 1989 which began on October 1, 1988 and ends September 30, 1989.

The format for this year's reports is essentially the same as last year. The required information concerning client characteristics and other statistical data will be submitted on forms SOC 405 and SOC 405A. The SOC 405 requests identifying information such as case number, case name, and birthdate of each youth in the Foster Care Information System (FCIS) who has been offered ILP services. The SOC 405A requests data concerning the number of youths served, program outcomes, and additional client characteristics not available in the FCIS. We have enclosed a camera-ready copy of the SOC 405 and SOC 405A for your use.

Please note that these reports are due in Sacramento on or before October 20, 1989. Mail your reports to:

Department of Social Services  
Statistical Services Section  
744 P Street, M.S. 19-81  
Sacramento, CA 95814

Any questions concerning the reporting instructions for the SOC 405A should be directed to Ms. Susan Derrick, Statistical Services Section, at (916) 322-5462. Questions concerning the SOC 405 should be directed to Mr. Ray Bacon at the same telephone number.

  
DENNIS J. BOYLE  
Deputy Director

cc: CWDA

Enclosures

# INDEPENDENT LIVING PROGRAM REPORT OF INDIVIDUAL YOUTHS SERVED

PLEASE STAPLE IN UPPER LEFT IF MORE THAN ONE PAGE.

KEY ENTRY USE ONLY	
30006	/
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SENDER'S NAME	PHONE NUMBER ( )	COUNTY CODE
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Enter the case number, name and birthdate of each youth served. Case number must be the same as it currently appears on the Foster Care Information System (FCIS). The number is printed in item B1 of the Form SOC 158 turnaround document for the individual youth.

Enter all children counted in #1 of Form 405A.

	Case Number/Unique I.D.	Child's Last Name	First Name	Birthdate		
				MM	DD	YY
1.						
2.						
3.						
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20.						

# INDEPENDENT LIVING PROGRAM (ILP)

Annual Statistical Report

Federal Fiscal Year 1989

(October 1, 1988 through September 30, 1989)

Send One Copy to:  
 Department of Social Services  
 Statistical Services  
 744 P Street, M.S. 19-81  
 Sacramento, CA 95814

COUNTY	CODE
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## PART A: YOUTHS SERVED AND CLIENT CHARACTERISTICS

1. Youths to whom ILP services were offered during the year .....		1	
2. Youths who received ILP services during the year.....		2	
a. Youths who are single .....	2a		
b. Youths who are married.....	2b		
3. Youths who are parents.....		3	
4. Youths who have special needs which are educational, medical, mental, and/or physical in nature.....		4	
5. Youths who received ILP services during the six month period following exit from foster care .....		5	

## PART B: PROGRAM OUTCOME/CLIENT PROGRESS

6. Youths who completed ILP services or a component of services .....		6	
7. Youths who are continuing to receive ILP services .....		7	
8. Youths who completed high school/GED or adult education.....		8	
9. Youths continuing and/or currently enrolled in high school/GED or adult education.....		9	
10. Youths who have completed vocational education or on-the-job training .....		10	
11. Youths continuing and/or currently enrolled in vocational education or on-the-job training .....		11	
12. Youths enrolled in college .....		12	
13. Youths who obtained either full-time or part-time employment .....		13	
14. Of the number of youths reported in Item 13 above, those who are military or Job Corps enlistees.....		14	
15. Youths actively seeking employment .....		15	
16. Youths determined unemployable, SSI eligible, or other similar special category .....		16	
17. Youths who are living independently of agency maintenance programs .....		17	
18. Youths who obtained housing and other community services.....		18	
19. Youths for whom no informatin could be obtained.....		19	

PERSON TO CONTACT	TELEPHONE NUMBER	DATE
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INDEPENDENT LIVING PROGRAM  
ANNUAL STATISTICAL REPORT  
FORM SOC 405A

CONTENT

The Independent Living Program (ILP) Annual Statistical Report, Form SOC 405A (3/89), records information concerning the number of ILP youths served, program outcome, and certain client characteristics currently not available in the Foster Care Information System (FCIS). The report period is Federal Fiscal Year (FFY) 1989, beginning October 1, 1988 through September 30, 1989.

PURPOSE

The purpose of the report is to meet the reporting requirements specified by the U.S. Department of Health and Human Services in Public Law 100-647.

DISTRIBUTION

Summaries of the information will be made available to departmental managers and interested parties upon request.

DUE DATE

The report for Federal Fiscal Year 1989 is due in Sacramento on or before October 20, 1989.

SUBMITTAL

Send the completed SOC 405A to:

Department of Social Services  
Statistical Services  
744 P Street, M.S. 19-81  
Sacramento, CA 95814

If the report will be either delayed or incomplete in any way, please contact Statistical Services at (916) 322-2230.

ITEM INSTRUCTIONS

PART A. YOUTHS SERVED AND CLIENT CHARACTERISTICS

Effective FFY 1989, both Title IV-E federally eligible and non-federally eligible foster care youths to whom services have been offered must be counted in the Independent Living Program (ILP) Annual Statistical Report, Form SOC 405A.

Item 1. Youths to whom ILP services were offered during the year.

Report the number of youths to whom ILP services were offered by the county during the year. Include in this item those youths who had been determined by the county to be eligible for services but who declined services when offered. A mass mailing of general information to prospective participants is not considered services offered.

The number stated in this line item must be the same as the total number of names submitted on the SOC 405. (The SOC 405 requests the names, case numbers, and birthdates of each youth in ILP.)

Item 2. Youths who received ILP services during the year.

Report the total number of youths who received ILP services provided by the county during the year. Count each youth only once for the year, regardless of the number of services that he/she received. Youths who were placed in your county (out-of-county placements) for ILP services may be included in this count. Both the sending county and the receiving county may count the same individual in their respective reports if the counties provided either an ILP service or conducted a needs assessment.

Item 2a. Youths who are single.

Of the total number of youths who received ILP services reported in Item 2 above, enter the number of youths who are single.

Item 2b. Youths who are married.

Of the total number of youths who received ILP services reported in Item 2 above, enter the number of youths who are married.

Item 3. Youths who are parents.

Report the number of ILP youths who are parents.

Item 4. Youths who have special needs which are educational, medical, mental, and/or physical in nature.

Report the number of youths who have special needs which are educational, medical, mental, and/or physical in nature that impact or create significant impediment toward transitional planning, as compared to other youths eligible for ILP services.

Item 5. Youths who received ILP services during the six month period following exit from foster care.

Of those youths reported in Item 2 above, report the number that received services during the six month period following exit from the foster care system. Exit is defined as the point in time when a youth becomes ineligible for foster care or when he/she is emancipated. This category does not include those youths who have returned home and are in the Family Maintenance Program or those youths whose Family Reunification service plans have been successful in that they were returned home and their Child Welfare Services cases closed.

PART B: PROGRAM OUTCOME/CLIENT PROGRESS

This part provides information concerning program outcome and client progress. ILP results are measured by the status of participant achievement 90 days after completion of all services to be provided, or after completion of a component of services which can lead to a measurable program outcome. The county having jurisdiction for the youth is responsible for identifying and reporting the program outcome/client progress on the Form SOC 405A.

The youths for whom a program outcome/client progress is to be reported are those youths who have completed all ILP services or a component of services by June 15, 1989. To facilitate meeting the reporting requirements stated herein, we recommend that you

identify this population on June 15, 1989 or shortly thereafter. This is the population for whom a 90-day follow-up/progress report will be completed. The 90-day follow-up or client contact to ascertain program outcome/client progress should be made between September 15 and September 30, 1989. An individual may have more than one program outcome or client progress report. Report all applicable program outcome/client progress.

Item 6. Youths who completed ILP services or a component of services.

Report the total number of youths who completed ILP services or a component of services as of June 15, 1989.

OF THE TOTAL NUMBER OF YOUTHS SPECIFIED IN ITEM 6 ABOVE, REPORT THE INFORMATION REQUESTED IN ITEMS 7-19 BELOW.

Item 7. Youths who are continuing to receive ILP services.

Report the number of youths who are continuing to receive ILP services.

Item 8. Youths who completed high school/GED or adult education.

Report the number of youths who completed high school/GED or adult education during the year.

Item 9. Youths continuing and/or currently enrolled in high school/GED or adult education.

Report the number of youths who are continuing and/or currently enrolled in high school/GED or adult education.

Item 10. Youths who completed vocational education or on-the-job training.

Report the number of youths who completed vocational education or on-the-job training.

Item 11. Youths continuing and/or currently enrolled in vocational education or on-the-job training.

Report the number of youths who are continuing and/or currently enrolled in vocational education or on-the-job training.

Item 12. Youths enrolled in college.

Report the number of youths enrolled in college.

Item 13. Youths who obtained either full-time or part-time employment.

Report the number of youths who obtained either full-time or part-time employment. Include military and Job Corps enlistees in this item.

Item 14. Of the youths reported in Item 13 above, those who are military or Job Corps enlistees.

Of the number of youths specified in Item 13 above, report those who are military or Job Corps enlistees.

Item 15. Youths actively seeking employment.

Report the number of youths who are actively seeking employment.

Item 16. Youths determined unemployable, SSI eligible, or other similiar special category.

Report the number of youths determined unemployable, SSI eligible, or other similiar special category.

Item 17. Youths who are living independently of agency maintenance programs.

Report the number of youths who are living independently of agency maintenance programs and are self-sufficient.

Item 18. Youths who obtained housing and other community services.

Report the number of youths who obtained housing and other community services such as training, educational testing, and financial assistance.

Item 19. Youths for whom no information could be obtained.

Report the number of youths for whom no information could be obtained or whose whereabouts are unknown.