

Attachment A

RIVERSIDE COUNTY JUVENILE COURT DEPENDENCY COURT STRUCTURE

Location	# of Dependency Court Rooms	Judicial Staff (W&IC 300 Cases)	Juvenile Defense Panel (JDP) Attorneys	County Counsel	DPSS Court Services Staff
Riverside Juvenile Court	3 – W&IC 300 2 – W&IC 602	1 – Judge 2 – Commissioners 1 – Court Clerk Supervisor Note: Presiding Juvenile Judge who is in 602 Court is located at this facility	9	6	1 – Assistant Regional Manager (ARM) (Oversight over each court location) 2 – Children’s Social Service Supervisor 2 – Office Support Supervisors 13 – Office Assistants 11 – Court Officers 5 – Parent Locators
Southwest Justice Center	1 – W&IC 300 1 – W&IC 602	1 – Commissioner 1 – Court Clerk Supervisor	5	3	5 – Court Officers 4 – Office Assistants 1 – Supervisor
Indio Juvenile Court	1 – W&IC 300 1 – W&IC 602	1 – Judge 1 – Court Clerk Supervisor	5	2	1 – Supervisor 4 – Court Officers 4 – Office Assistants
TOTALS					
3 Main Court Locations	5 W&IC 300 Court Rooms 4 W&IC 602 Court Rooms	5 Judicial Officers 3 Court Clerk Supervisors	19 JDP Attorneys	11 County Counsel	53 Court Staff

Attachment B

Riverside County 2008 Peer Quality Case Review (PQCR)

SERVICES/RESOURCES	STAFFING	TRAINING	COURT	STRUCTURED DECISION MAKING (SDM)
<p style="text-align: center;"><u>BARRIERS/CHALLENGES</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Service provider schedules <input type="checkbox"/> Accessibility of services [location, service provider hours & types of services] <input type="checkbox"/> Long waiting lists for services <input type="checkbox"/> Placement locations 	<p style="text-align: center;"><u>BARRIERS/CHALLENGES</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> High caseloads <input type="checkbox"/> High turnover (new workers with little or no case management experience) <input type="checkbox"/> Unsupportive supervisors & management <input type="checkbox"/> Supervisors overriding Social Worker recommendations <input type="checkbox"/> Traditional work schedule is not effective in meeting client needs 	<p style="text-align: center;"><u>BARRIERS/CHALLENGES</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Social Workers do not have time to attend training 	<p style="text-align: center;"><u>BARRIERS/ CHALLENGES</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Lack of support from County Counsel & Court <input type="checkbox"/> Court needs to hold clients accountable to complete case plans <input type="checkbox"/> Court going against Social Worker recommendations & returning children prematurely 	<p style="text-align: center;"><u>BARRIERS/ CHALLENGES</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Can be manipulated to parallel/meet SW recommendations <input type="checkbox"/> Not user friendly <input type="checkbox"/> Not useful
<p style="text-align: center;"><u>PQCR RECOMMENDATIONS</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Non traditional services schedule (i.e. after hours drug testing) <input type="checkbox"/> Additional bilingual services (Spanish) <input type="checkbox"/> Additional services for Desert cities & remote regions [therapy for children > 5 & classes on parenting toddlers] <input type="checkbox"/> Additional Family Maintenance (FM) & After Care services (i.e. services post case closure) <input type="checkbox"/> In-Home parent training <input type="checkbox"/> Additional low income housing resources <input type="checkbox"/> Establish rapport w/ community partners & make service providers more accountable for services [Quality Assurance (QA)] <input type="checkbox"/> More placements located in proximity to family <input type="checkbox"/> Increase use of TDMs beyond current capacity (all regions) <input type="checkbox"/> Develop service resource guide (keep updated) 	<p style="text-align: center;"><u>PQCR RECOMMENDATIONS</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Mandate caseload size limits (30 cases max) <input type="checkbox"/> Enable Social Workers to have more client contact (establish rapport w/ family) <input type="checkbox"/> More frequent case conferencing with supervisors <input type="checkbox"/> Social Worker mentoring program <input type="checkbox"/> Supervisor mentoring program <input type="checkbox"/> Intensive, program specific specialized training in area assigned <input type="checkbox"/> Cross training among programs <input type="checkbox"/> Hire more SSW I/II, SSAs & bilingual staff (assist w/ data entry & paperwork) <input type="checkbox"/> Flexible schedule to accommodate family work schedules 	<p style="text-align: center;"><u>PQCR RECOMMENDATIONS</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Cultural sensitivity training <input type="checkbox"/> Mental Health (intensive) <input type="checkbox"/> Substance Abuse (intensive) [stages of recovery] <input type="checkbox"/> Risk & Safety - indicators of abuse <input type="checkbox"/> Social Worker mentoring <input type="checkbox"/> Case Plan Development <input type="checkbox"/> Indian Child Welfare Act (ICWA) <input type="checkbox"/> Time Management <input type="checkbox"/> Utilize In House Trainers - reduce outside contracts <input type="checkbox"/> Professionalism in the Work Place <input type="checkbox"/> Engaging Difficult Clients 	<p style="text-align: center;"><u>PQCR RECOMMENDATIONS</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Brown Bag lunches with Court <input type="checkbox"/> Court training [court process, constructive feedback on SW strengths & areas needing for improvement] <input type="checkbox"/> Court Report Writing 	<p style="text-align: center;"><u>PQCR RECOMMENDATIONS</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Intensive SDM training [inherent value & use of tool] <input type="checkbox"/> Social Workers be mandated to complete the SDM assessment tools two (2) months prior to Status Review Hearings

Attachment C

CSA Aftercare & Transition Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ An “Efforts to Outcomes” (ETO) system is in place that tracks services and outcomes for the Independent Living Program (ILP). <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ DPSS is now holding “Ice Breaker” meetings. These meetings bring foster parents and biological parents together to discuss child needs. Ice Breaker meetings facilitate mentoring relationship between caregivers and parents. <p>QUALITY ASSURANCE SYSTEM:</p> <p>STAFF /PROVIDER TRAINING:</p> <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ The Family Preservation Court. ▪ County social workers and Foster Family Agency (FFA) social workers collaborate on cases with children in FFA placements. ▪ Team Decision Making (TDM) meetings are being held in designated zip codes throughout the County. ▪ DPSS is collaborating well with partners and stakeholders. ▪ Riverside County has done a good job of extending the “olive branch” to foster the concept of – ‘it takes a whole village to raise a child.’ ▪ While DPSS and Mental Health collaborations exist, they could be 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ Develop a better method to share information or invigorate the information sharing process among service providers. The ETO system is in place; however, the Foster Youth Student Information System (FYSIS) has not been completed. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ Care provider (e.g. FFA, foster home, group home, etc.) education on services available to emancipating youth needs to be improved and provided sooner. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Transition plans need to be developed prior to reunification and need to include benchmarks. ▪ Establish a consortium of stakeholders to educate social workers, caregivers, etc. on services available to our families and youth in Riverside County. ▪ All ILP eligible youth are not being served through the Independent Living Program (ILP). More outreach needs to be done to youth through their out of home caregivers and parents regarding ILP opportunities. It is recommended that this issue be further developed during the System Improvement Plan (SIP) process. ▪ Ensure more continuity and quality in the services provided (e.g. mental health services, counseling, etc.). ▪ The process for referring clients to Mental Health services needs to be re-evaluated. <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ A better system for educating group homes, FFAs, etc. about ILP services for emancipating youth needs to be developed. ▪ There is need for better training for “Back End” social workers on detaining children. 	<ul style="list-style-type: none"> ▪ More Parent Educators are needed. ▪ Visitation plans need to be developed that promote the use of overnights and weekend visitations prior to child reunification. ▪ Additional mentors and mentoring programs (e.g. Court Appointed Special Advocates) are needed, to ensure that mentors are available for all children. ▪ Create a “Transitional Service Plan” prior to reunification that includes strategies to achieve improvement and ensures the continuity of services as cases transition from FR to FM status. ▪ There needs to be a system in place to transfer services offered during a child’s FFA placement (e.g. weekly counseling, etc.) to parents after a child’s return home. ▪ Expand eligibility for Wraparound program services to enable more children/families to be served. ▪ Develop a Wraparound type of program for children re-entering foster care. ▪ Involve more partners in TDM activities and increase TDM meetings across all regions. 	<ul style="list-style-type: none"> ▪ Hold TDM meetings on all substance abuse cases transitioning from FR to FM prior to the court date to address any service gaps and areas of need. This could be done when the social worker completes the Structured Decision Making assessment of the family, generally completed two months prior to the court date. ▪ Develop a plan to assist parents to transition into the community and successfully maintain their sobriety. ▪ Move from traditional parenting methods, classes, instructions to strategies for parenting children who have been exposed to abuse and neglect in their lives. ▪ Establish “Life Coach Mentors” and other support services for our families using faith based organizations, support hotlines, etc. ▪ Establish services to help and support our families prior to, and after, reunification that are free of cost (e.g. free health care). ▪ Develop and implement an aftercare support program at the Family Resource Centers. Establish ongoing “Parent Partner” meetings. ▪ Create a “helpline” type of resource for families to facilitate better access to programs and services. ▪ Limit the number of children being returned at once and develop reunification plans that allow time for the parents to adjust to having their children back in the home. 	<p>PREVENTION PARTNERSHIPS:</p> <ul style="list-style-type: none"> ▪ DPSS has established partnerships with a number of agencies/individuals in its efforts to reduce child abuse and neglect in Riverside County. These agencies/individuals include: <ul style="list-style-type: none"> ○ Local schools and teachers\ ○ Prevent Child Abuse Riverside County (PCARC) ○ Foster and kinship care educators at Riverside Community College ○ Differential Response (DR) providers ○ Riverside Community College Independent Living Program services ○ Group Homes ○ Foster Family Agencies (FFAs) ○ Mental Health ○ Emancipation Coaches ○ California Youth Connections (CYC), and ○ Former foster youth. <p>STRATEGIES FOR THE FUTURE:</p> <ul style="list-style-type: none"> ▪ Explore the expansion of existing legislation, such as SB500, which offers training and monetary compensation to foster parents who are willing to keep pregnant foster youth in their homes.

Attachment C

CSA Aftercare & Transition Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>further defined to ensure that a TDM meeting is held when DPSS intends to remove a child due to a parent's positive drug test. The TDM meeting should include a substance abuse provider.</p> <ul style="list-style-type: none"> ▪ Meetings such as "Right Partnerships" foster open communication between DPSS and out of home care providers. ▪ Inland Empire Health Plan (IEHP) provides bio parents with a case manager's name to ensure that their child's health care needs are addressed. IEHP has social workers/case managers who specialize in assisting with the needs of foster children. ▪ Family Resource Centers provide information, support, and referrals for families in need. ▪ Transition coaches partner with social workers to ensure family stability. ▪ DPSS provides specialized emancipation services through the ILP Program, such as emancipation coaches, employment skills, daily living skills, educational support, etc. ▪ County resources include group homes and youth centers with private contractors/providers. ▪ The Transitional Housing Plus program provides housing for youth transitioning from the child welfare system to independence. ▪ California Conservation Corp. and Job Corp. have services available in Riverside County for youth. ▪ DPSS holds staff meetings to 	<p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ TDM meetings need to be increased to include holding TDMs when children are transitioning from Family Reunification (FR) to Family Maintenance (FM) status, and when children are removed from their parental homes, etc. ▪ Monthly substance abuse support group meetings need to be started to provide mental health and substance abuse support to families after case closure. ▪ "Termination of Dependency " TDM meetings need to be held on all cases at the time of case closure in order to develop a plan to transition the family to community support. ▪ There is a need to expand all Mental Health services to better meet the needs of children and families in Riverside County. ▪ Transition services for youth need to be established to assist youth who originally declined participation in ILP services. Many youth are returning to their previous caretakers requesting assistance and information on services after they are no longer eligible for services under current program guidelines. ▪ Establish more collaborations with Probation, mental health, and local schools to assist in the provision of comprehensive services to children and families. <p>OTHER NEEDS:</p> <ul style="list-style-type: none"> ▪ Social Workers often change multiple times throughout a case, impacting stability/continuity of services for families. 			

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<p>discuss emancipation services and transition planning for youth starting at the age of 16.</p> <p>OTHER STRENGTHS:</p> <ul style="list-style-type: none">▪ Lower caseloads have led to social workers spending more time with the families.▪ DPSS maintains a specialized Independent Living Program which provides services to youth transitioning from the child welfare system to independence.▪ A Transitional Independent Living Plan (TILP) is created for each youth over the age of 16.				

Attachment D

CSA Core Risk Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ SPUDS - The Department of Mental Health/Substance Abuse software system. ▪ CWS/CMS – The software system used by the Children’s Services Division. ▪ Image Net - full service partnership program, provides information on key incidents, assessments, and exiting services. ▪ DMH ACT clinicians use ECura which has information on whether or not contracted agencies are in good standing or have Quality Assurance issues. ▪ Probation database. ▪ FYSIS - Foster Youth database, receives information from school districts, courts, DPSS and Probation when the liaison inputs information. Social Workers access the database and ascertain credits needed for graduation. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ We have new permission for adopted children to access Mental Health services wherever they live in California. They can go directly through county of residence. ▪ Family to Family (DPSS) is actively recruiting foster homes and ongoing caregiver training is provided. DPSS is also: <ul style="list-style-type: none"> ○ Asking caregiver feedback as needed ○ Inviting any caregiver to foster parent trainings, and ○ Holding trainings quarterly. 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ FYSIS – pull together all the different players and educate them on why the database was done and the importance of data. Have consistency in collaboration of data and get all players to the table to agree. RCOE is currently in contract negotiations with the vendor for the database. If this system gets up and running, it will provide a hub for information. ▪ DPSS Extranet – Not all social workers know how to access the Extranet. The links are not always functional. For example, a new Department Memorandum (DM) was released and the Extranet did not provide a link for social workers to access the new DM. A lot of forms are on the county intranet only and not on the Extranet. Social workers do not have access to county intranet. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ There is a general lack of education among relative caregivers with regard to Substance Abuse, Mental Health (relapse versus re-occurrence), and the cycle of domestic violence. ▪ A lack of education creates frustration with parents, enabling parents. ▪ Relatives do not feel they are getting the support they need. We must teach relative caregivers how to access needed information such as school history, etc. ▪ Someone needs to be there to help families through the initial trauma of child placement and getting children/caregivers services to meet 	<ul style="list-style-type: none"> ▪ FFAs can now call into Mental Health to get access to Mental Health services that they are required to provide. ▪ Quality Assurance is a gap for FFAs and Group Home services. ▪ There is a lack of training for; <ul style="list-style-type: none"> ○ FFAs and Group Homes and ○ Interagency staff on resources and collaboration. ▪ The Interagency Placement Screening Committee is being underutilized. Probation and CSD no longer screen FFAs. Adoption cases are now screened. Enhanced Medical Services cases are now being screened. They assist in assessing and determining the need and level of treatment for the child only. ▪ TDMs deal with parents, but focus on placement. We need to have exiting placement TDMs. ▪ We need TDMs on call cases and increase the services provided under TDMs, There is a need for: <ul style="list-style-type: none"> ○ Additional TDM facilitators and ○ Additional TDM clinicians. ▪ Mental Health Substance Abuse (MHSA) – every time a client comes in for services, they are assessed (ASAM – placement criteria). This addresses the most appropriate placement/services in the continuum of care, screens for history, treatment options that worked/failed before, and assesses for drug of choice. Note: MOU between MHSA and DPSS was not renewed. 	<ul style="list-style-type: none"> ▪ If social workers are experiencing delays in services, they should notify their supervisors who can consult with the ACT supervisor. Previous delays resulted from DPSS 2468s not being filled out completely by social workers. Current audit of ACT found no areas of improvement needed. ▪ Reentry cases need a coordinated staff of all applicable players at table to work with family to determine needs. ▪ An aftercare piece is needed for support services, direction, advice, and referrals for parents when the children are returned. Include Parent Partners or parent participation in this process. ▪ Establish a mentoring program with families who have other families to look to for support (sponsor family). ▪ Build more connections with Faith Based Resources. ▪ Moreno Valley Unified School District (MVUSD) is a resource/partner and currently has a youth council. MVUSD is developing alliances with the community that can provide a safety net for families. 	<p>COUNTY-WIDE PRIMARY PREVENTION EFFORTS:</p> <ul style="list-style-type: none"> ▪ Guillermo Henry brought a parent into a meeting who talked about what worked and did not work for him in successfully leaving the system. ▪ ICE Breakers are already in process and are going to be very helpful. <p>PREVENTION PARTNERSHIPS:</p> <ul style="list-style-type: none"> ▪ Mental Health Substance Abuse has a huge prevention program – attend health fairs, recovery happens events (community based, schools, etc.). ▪ Educate parents on experimental drug use and what to watch out for and be aware of. ▪ Provide a lot of information – education vs. treatment. Some may need more education than treatment. ▪ Mental Health has done a lot to develop Parent Partners. ▪ Develop a collaborative relationship with the hospitals to create easier access to services in the community. <p>STRATEGIES FOR THE FUTURE:</p> <ul style="list-style-type: none"> ▪ Exit TDM – create an exit plan on paper – a plan of support and commitment from client as to what they are willing to do. ▪ Offer Differential Response Education. ▪ Family Resource Center – knowledge of what they do and where they are. ▪ Give feedback from the child death review team. ▪ Share information from meetings and disseminate information on data, etc.. ▪ DPSS should develop Parent Partners to attend meetings, provide feedback, etc. Statistically, this increases the likelihood of success by parents and gives them a sense of responsibility to

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CSA Core Risk Focus Group Discussion

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<ul style="list-style-type: none"> ▪ DPSS is holding Ice Breakers to bring foster parents and bio parents together to discuss children’s needs. This facilitates a mentoring relationship between caregivers and parents. ▪ Ice Breakers will: <ul style="list-style-type: none"> ○ Be implemented Countywide on 10/1/08 ○ Help to reduce out of home child abuse reports, and ○ Humanize the child welfare process, reducing animosity. ▪ Mental Health – Foster parents meet weekly – evidence based program for Multidimensional Treatment Foster Care that has daily contact with foster parents to discuss behaviors, level of stress, points system for behavior modification. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ DPSS has: <ul style="list-style-type: none"> ○ Safe Measures ○ Peer Quality Case Review ○ Contract Monitors ○ Internal Quality Assurance unit, and ○ SDM (Structured Decision Making). ▪ Mental Health/Substance Abuse has: <ul style="list-style-type: none"> ○ Contract/clinic monitors (quarterly review) ○ Corrective action tools given with timeframe for compliance – ensures continuous quality improvement, and ○ Quality Improvement Unit. ▪ Community Partners have their own internal systems that coincide with DPSS contracting monitors. <p>STAFF /PROVIDER TRAINING:</p>	<p>their needs.</p> <ul style="list-style-type: none"> ▪ Education is empowerment. ▪ DPSS needs to do a better job educating caregivers as to what services are available and who pays for them. ▪ Recommendation - ongoing orientation for relative caregivers. ▪ Need to look at easing situation for relatives to increase ability of relatives to be caregivers. ▪ Adoptive parents are not being appropriately trained as to the types of issues or possible issues they might face with the children that are being placed with them through the county. Children have drug, alcohol exposure, etc. – A lot of our children have Mental Health issues. ▪ Adoptive parents concerned with ongoing support from the County, after adoption is closed and the child now years later is having difficulties. ▪ Give adoptive parents information as to post adoption support (DPSS has 2 social workers dedicated to post adoption support services) Note: DPSS also has to provide support for children whose adoptions were finalized by other counties. ▪ The State is working on an education brochure for adoptive parents. ▪ We need to educate caregivers on normal child development and when to ask for help. ▪ FFAs need to provide more comprehensive training to caregivers. ▪ Standardized curriculum of parent training that all need to take would be helpful. ▪ We need for more county licensed 			<p>maintain success.</p> <ul style="list-style-type: none"> ▪ Offer monthly picnics for relative caregivers. ▪ Have people who have successfully had their children returned come back to talk about it. ▪ Interagency Re-Entry Review Committee – Quality Assurance report that results – strengths and needs.

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<ul style="list-style-type: none"> ▪ The Training Region was created in DPSS and is rolling out in July; mentoring program to go alongside new supervisors (provide mentors). ▪ Mental Health – folks in charge of setting up training – collaborates with substance abuse (MH); training - treatment philosophy and matrix to address families needs with co-occurring disorders; MH adult side – manual designed to assist therapists to know how to do groups – ensure more similarity in program provision; training has broken down communication barriers. ▪ Mental Health is moving toward evidence based treatment. ▪ Riverside County Regional Medical Center takes part in county induction classes. Now seasoned workers have been identified as needed updates to changes in RCRMC protocols, etc. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Embedded child welfare social workers are at Riverside County Regional Medical Center. ▪ Embedded Mental Health workers in Child Welfare. ▪ Screening Committees – enhances service coordination. ▪ Wraparound Program Services and other specialty services. ▪ Team Decision Making (TDM) meetings: <ul style="list-style-type: none"> ○ Bring everyone to the table ○ Eliminate parental procrastination ○ Gives parent an audience to be heard ○ Ensures the case plan is 	<p>foster homes.</p> <ul style="list-style-type: none"> ▪ We need for more DPSS Parent Partners. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Hold FFAs to their contract requirements to have therapists available. ▪ We need a monitoring component for Group Homes and FFAs. ▪ FFAs who are not providing services as required per their contract should be put on a “do not refer” list until such time as they bring their services up to par. <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Train staff on how to access different resources and different agencies. ▪ Train staff on different procedures such as DPSS 2212 – updated Release of Information. ▪ Provider training – how to access DPSS divisions/services. ▪ We need to train new people so we can start meetings from where we left off instead of restarting the discussion each time. ▪ All agency staff training on what to disclose and who to disclose it to (DPSS, Mental Health, Education System, etc.). ▪ Staff need to do a better job of coordinating services for clients who may be overwhelmed by the number of things they need to accomplish. ▪ Referrals to ACT clinician (10 day time clock) – when the authorization is in place – social workers need to be educated on the process. Perhaps some miscommunication is currently happening. 			

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<p>implemented timely.</p> <ul style="list-style-type: none"> ▪ Riverside County Regional Medical Center participates in meetings with the County (DA, CPS, etc.). Look at data numbers (over sight board originally); strategic planning committee meeting (monthly) develop county wide system for medical services in Blythe or Desert cities for forensic medical exams. Barbara Sinatra Center has been identified. RCRMC is the only agency that provides physical abuse exams. We need more medical providers in various areas of the county – currently in process of being assessed. Medical exams – 24/7/365. ▪ Kinship Care Program – DPSS sends reports that go to Edgewood that contain statistics and data on who is being placed in the county. This is reported to state; participate with strategic planning for substance abuse (1 month period) – monitored by DPSS – feedback process going well. ▪ Mental Health ACT clinicians provide an increased pool of resources, plus an increased pool of funding. Clinicians actually assess the level of service needed – one stop shop to determine which provider is a best match for the client. 	<p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Relevant players need to be around the table. We need to connect players from various agencies to discuss databases. ▪ Legal constraints (42 CFR Substance Abuse – regulations for the sharing of information). ▪ We need to educate players as to legality of sharing of information (legal parameters). ▪ Sharing of information facilitated through use of Releases of Information: <ul style="list-style-type: none"> ○ Social Workers do not always get clients to sign the Release of Information form (Mental Health Substance Abuse Program has received 3 signed releases in the last 6 month). ▪ We have a huge communication gap with Inland Regional Center. We need to have IRC join this group discussion; it would be helpful. IRC is currently under staffed and has experienced funding cut backs. 			

Attachment E

CSA Court Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ DPSS and Probation staff no longer have to wait for Court personnel to print and distribute Minute Orders as they can access them electronically. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <p>QUALITY ASSURANCE SYSTEM:</p> <p>STAFF TRAINING:</p> <p>PROVIDER TRAINING:</p> <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Social workers, parents and foster parents are all participating in “Ice Breaker” meetings. ▪ Bench Officers meet with DPSS management and social workers on a regular basis to provide feedback and address issues impacting the court process. ▪ Probation uses a graduated transition plan when children are being returned. ▪ Judge Shelton’s Court Room in Indio could be used as a model for teamwork. Judge Shelton has done a great job of fostering collaborative working relationships between attorneys, DPSS, and other members of the Court room. <p>OTHER STRENGTHS:</p> <ul style="list-style-type: none"> ▪ The Children’s Services Division (CSD) is conservative in its approach to returning children to parents. CSD works hard to ensure that parents are prepared for their child’s return and recommends returning children only when it is safe to do so and the problem 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ There is a need to be able to access, in one location, a child’s most current information from all agencies (probation, DPSS, education). This may require the ability to create downloads from each agency or create logons for social workers and probation officers to access each others information. ▪ Children’s addresses in out of home placement (e.g. foster care, group homes, and family member homes, etc.) need to be updated on a daily basis. There are delays in updating addresses and this has caused some hearing notices to be sent to wrong locations. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ When siblings cannot be placed together, it impacts their relationship with each other. After reunification parents want to return children because of all the fighting, increasing child re-entry into foster care. ▪ DPSS needs to look into getting support from foster parents and FFAs to ease the transition of children back to their parental homes. ▪ Foster parents need training during and after licensing that covers: <ul style="list-style-type: none"> ○ The availability and purpose of the JV-290 form ○ Caregiver legal rights ○ Hearing notices. Foster parents/relative caregivers need additional training that will empower them to ask for hearing notices if they have not been received, and ○ Confidentiality issues. 	<ul style="list-style-type: none"> ▪ More Foster Parent input needs to be obtained before a child is home. ▪ Stable Housing is needed for families to prevent parents from going into homeless shelters. Further exploration needs to be done to see how DPSS and the Courts can assist families with housing. ▪ Child welfare court cases are being closed too early. Judicial Officer should require cases to remain open until the parents have finished all of their programs or services. ▪ Probation youth would benefit from mentoring programs. ▪ Increase the availability of mentors for Probation youth and foster children (e.g. Court Appointed Special Advocates). ▪ Expand Independent Living Program services available to Probation youth. ▪ Emancipated youth, who are 17 years of age or older should be able to receive transitional housing services. ▪ There is a need for more Family Preservation Services. ▪ There is a gap in service delivery by Probation and DPSS while kids are in Juvenile Hall. ▪ Increase communication between the Children’s Services Division and Probation for dual status cases (e.g. youth involved in both the child welfare and probation system). ▪ Social Service Assistants appear to be making more contact with the families than the social workers. ▪ What level of discussion are we having with Parents that do not want their child returned to their care? ▪ Youth need to have more input into their cases. Youth who have drug addictions 	<ul style="list-style-type: none"> ▪ JV290 caregiver information should be filed in Court to give Foster Parents input regarding child. ▪ SDM Visitation Evaluation Form (DPSS 3300) is another good source to give feedback to the SW when there is a question about the quality of interaction during visitations with the Bio. Parent and child. ▪ Improvement on services being ordered for children and families so that services are meaningful. ▪ Probation is doing away with rubber stamped case plans – moving to more narrative and information on case plan. ▪ DPSS is moving to a two page case plan for its TILP. ▪ We need an MOU to increase communication on Dual Status (Probation & DPSS) children. ▪ We need to look at the differences in CWS/CMS on the physical versus the mailing address of the foster parent to assure that notices reach them in a timely manner. ▪ Develop a system to notify FFAs and Group Homes regularly of hearing dates and times for children placed. (Noticing issue may be more of a DPSS issue than Probation issue.) ▪ Create an incentive for senior citizens – reduce their property taxes in turn for mentoring children. ▪ Look into original JV 290 being filed and a copy given Court services for distribution to the attorneys. ▪ Ensure that visitation information is not just in the Delivered Service Log, but also in the body of the report. Bench officers do not always read the delivered service log. 	<p>COUNTY-WIDE PRIMARY PREVENTION EFFORTS:</p> <ul style="list-style-type: none"> ▪ Probation’s Independent Living Program (ILP) has increased the number of Probation youth obtaining their GEDs. There is no current information available as to whether these youth are continuing their education at vocational schools of their choice. <p>PREVENTION PARTNERSHIPS:</p> <p>STRATEGIES FOR THE FUTURE:</p>

Attachment E

CSA Court Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>that brought the family to the attention of DPSS no longer exists or has been mitigated.</p> <ul style="list-style-type: none"> ▪ Judicial Officers base their decisions to return children to parents on a case by case basis. Judicial Officers must weight the recommendations of the Department as outlined in the court reports submitted against legal standards for continued child detention in out of home care. ▪ DPSS is proactive in its approach to providing Family Reunification services, as evidenced by its use of Team Decision Making meetings and additional Family to Family strategies. ▪ DPSS respects parents rights and works hard to include parents in the decision making process. <p>600 Probation Cases</p> <ul style="list-style-type: none"> ▪ Probation Officers see youth on their assigned caseloads on a regular basis. ▪ Parents are ordered to participate in services that help to improve family functioning. ▪ Probation works to motivate minors and help them establish plans for the future. ▪ Families are encouraged to participate in programs and maintain contact with minor when placed in out of home care. 	<p>Caregivers need to be aware of what information social workers are able to share and not share with them.</p> <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ A system needs to be in place to automatically send Probation youth to counseling services when parents do not want them returned home. ▪ The “Warmline” should be expanded to include children who have emancipated from the system. There should be a program in place to provide support or answer questions to both children who have emancipated and children who have runaway. ▪ Court reports need to be written more uniformly. Currently they are written differently based on which Court (Bench Officer) they will be submitted to. <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ While a family is in Family Maintenance status, the social worker should see the family more than one time per month. ▪ Develop a structured transition plan to assist families transitioning from Family Reunification (FR) services to Family Maintenance (FM) services. This plan should include intensifying visits up to overnight/weekends to prepare parents for reunification. ▪ DPSS has cases returning due to legal guardians wanting their guardianship terminated. This is increasing re-entry into out of home care for Riverside children. ▪ Intense service requirements set up Parents to fail. ▪ More partnership is needed between DPSS and Probation. Phone calls are not always returned in a timely manner. 	<p>who are pushed to sobriety are often unsuccessful in maintaining their sobriety as they lack the desire to change their lives.</p> <ul style="list-style-type: none"> ▪ Children need the opportunity to accept ownership of their lives. Children who chose what they want to do, instead of being told what they will do, have better outcomes. ▪ The Court needs to order Probation youth who are 16 years of age or older and have served at least 24 hours in a private placement unit to enroll in Independent Living Program (ILP) services. The Probation Department determines out of home placement location and eligibility for ILP services. ▪ Need better communication between Riverside community College, DPSS, and the Probation Officer regarding ILP services provided to children. ▪ Court reports reflect that DPSS and Probation may not always be communicating with regard to the provision of ILP services to children/youth. This does not appear to happen frequently. ▪ Need to assure that foster parents are receiving notices of court hearings. Some foster parents are getting notices and some are not. Social workers need to ensure that foster parents are kept informed of upcoming court hearings. ▪ Youth need to be given more opportunities in court to speak on their own behalf (Judge are stipulating to recommendations submitting by the Department and not providing youth the opportunity to be heard). ▪ Children 10 years of age and older are noticed and given the opportunity to go to court to be heard if they so choose. 	<ul style="list-style-type: none"> ▪ Allow SW’s to receive text messages on their mobile phones/give parents mobile numbers. ▪ Induction training should include the best resources for families. ▪ Induction training should visit court room to speak with judicial officer about requirements. ▪ Vocational/educational requirements for parents. ▪ Post reunification treatment services continued. ▪ Require parents with serious drug issues to participate in the year long FPC Program. ▪ Require court standards for visitation through out the county. ▪ More follow up from TDM’s – get confirmation from referrals of parents participation or non participation. ▪ Keep cases open until the parents are completely through their programs. ▪ Provide access to specialty programs such as ILP and FPC by expanding capacity – provide local funding. ▪ Nurturing Families – Parenting program - Parenting classes should have a “hands-on” component where the child participates in the program with the parent (Nurturing Families in FPC has this component) in cases where it is deemed appropriate, and may be especially helpful to mentally slow or young parents. ▪ FPC requirements for employment and/or school - Parents who experience financial problems and inability to maintain a household are more likely to resort to drug use, or become easily frustrated. FPC requires parents to work or attend 	

Attachment E

CSA Court Focus Group Discussion

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	<p>Probation officers and social workers now share email information in an effort to facilitate more timely communication.</p> <ul style="list-style-type: none"> ▪ Additional training is needed for social workers in the following areas: ▪ Social workers must inform foster parents 10 days before the court hearing of their recommendations and provide the foster parents with information on JV 290 form (new law). ▪ Confidentiality. Social workers need to be aware of what information they are able to share or not share with foster parents. ▪ Court report writing. Court reports are being written at a level too high for parents to understand. Interpreters in court speak rapidly and parents don't always understand all that is being stated by the interpreters. Parents are not being given the time to digest the information and ask questions. ▪ Not all social workers know the requirements of programs that are court ordered, and on occasion, provide the parents with incorrect information. ▪ Ensure social workers are talking with clients regularly about the status of their case so parents have no surprises. Social workers need to talk with parents about what they will be recommending to the court and why. Social workers need to consistently re-affirm with parents legal timelines and the court process. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ More "Ice Breaker" meetings need to be held between biological parents and foster parents. ▪ The centralization of "Dual Status" cases appears to have fostered better 	<p>These children need to be more a part of/participant in the court process, which children and care givers have court information critical.</p> <ul style="list-style-type: none"> ▪ An educational service component needs to be required for parents, which includes viable sources to assist them in obtaining their goals or meeting their case plan requirements. ▪ Language barriers often create issues/challenging in providing reasonable services to non English speaking parents. ▪ Court dates for families are often postponed because all information regarding the family has not been collected and is not ready to be presented. ▪ Cases are being closed before parents have finished treatment or other case plan services. ▪ Social workers need to ensure that they provide adequate monthly contacts and supervision of parents and children during the reunification process. ▪ Social workers need the opportunity to work with families on safety plans that will prevent children being removed from their parental home. ▪ Poor families in bad environments who lack resources appear to be the ones re-entering the system (both child welfare and probation). ▪ Is there any way to check up on the child? Need to develop a system that would enable foster parents to support children who have transitioned to Family Maintenance status. ▪ What level of discussion are we having with Parents that do not want a child returned? 	<p>school and helps them to achieve these goals. Parents should be strongly encouraged to get a job or enroll in school, especially individuals with no work history or extremely low incomes.</p> <ul style="list-style-type: none"> ▪ It is critical that judicial officers participate in the strategic planning efforts for the County's plan to work effectively. ▪ Limit the number of children being returned at one time and develop a reunification plan that allows time for the parents to adjust to having their children back in the home. <p>600 Probation:</p> <ul style="list-style-type: none"> ▪ Referrals to the Independent Living Skills Program (ILP). 	

Attachment E

CSA Court Focus Group Discussion

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	<p>communication and collaboration between DPSS and Probation.</p> <ul style="list-style-type: none"> ▪ There is a need for better communication and collaboration between the Court Services Branch (CSB) and Foster Parent Associations. Foster Parent Associations and foster parents need to be provided more training on the Court system and the court process. ▪ A court mentoring program needs to be established to explain the court process to children and Need court mentor program for children to explain the court process. ▪ The relationship between DPSS and the Courts needs to be improved. DPSS currently meets with Bench Officers every 2 months, but opportunities for increase interaction need to be explored (e.g. "Brown bag lunches"). ▪ There is a concern that parents have too many requirements for reunification. DPSS and the Court need to look into streamlining case plan services by combining services in order to meet case plan goals without overwhelming clients. Another suggestion to streamline case planning is to make some services optional if they do not address the reason for removal or present issues affecting child safety. ▪ The primary factors that bring families to the attention of the child welfare system need to be clearly identified. ▪ The primary factors that continue to child re-entry into child welfare services need to be clearly identified. ▪ The types of cases that are re-entering child welfare services need to be clearly identified (e.g. cases with substance abuse, or domestic violence issues). 	<ul style="list-style-type: none"> ▪ Visitation Standards: There are dramatic differences between regions and court rooms when it comes to visitation. Visitation needs to be uniform and consistent countywide. Visits should be frequent and liberal, taking place as often as possible. Visits for children less than 2 years of age should be no less than 2 times per week for at least 1 hour each visit,. For children 2 years of age and older, visits should be no less than 1 time per week for at least 1 hour each visit. ▪ Telephone contact: Children should be allowed telephone contact with parents, if possible, in addition to physical visits. ▪ Visits should be arranged and handled by the social worker and not delegated to FFA workers or foster parents. Sometimes meeting locations are unreasonable for parents who rely on public transportation which can cause them to be late. ▪ Supervision of visits: Social workers should monitor visits first hand for appropriateness, observe bonding and interaction, if any. If someone else supervises or monitors the visit, there should be a "log" that the person must fill out with specific questions/categories to be addressed, such as: <ul style="list-style-type: none"> ○ In the beginning, how did the child react to seeing parents? ○ What activities did the parent and child engage in during the visit? ○ How did the child react when it came time for the parent to leave? ○ Who was present at the visit besides the parent and child? (If child has been with a foster 		

Attachment E

CSA Court Focus Group Discussion

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	<ul style="list-style-type: none"> ▪ There needs to be more communication between the court and new social workers regarding what is expected and needed from them. ▪ There needs to be more/better communication between social workers and parents. Social workers needs to seek parents out, maintain frequent contact with parents and have more availability to answer questions, facilitate services, and monitor progress. ▪ DPSS needs to develop a plan for returning children to ensure children are not returned all at once. ▪ Further exploration needs to be done to address issues that surface when children return to same environment. 	<p style="text-align: center;">family for a long time it may make a difference if the foster parents are present.)</p> <ul style="list-style-type: none"> ▪ Reports: Any report recommending reunification should have a detailed visitation log attached that addresses those issues previously mentioned and include a recommendation addressing the best interest of the child. ▪ Reunification: When it is anticipated that a child will be returned to a parent, the social worker/probation officer should begin unsupervised day visits, then overnight visits, then weekend visits prior to returning the child home. Workers can submit an ex parte to the court requesting authorization to extended child visits prior to the scheduled review hearing. (It appears that this is sometimes being done, but perhaps should be considered an option in more cases.) ▪ Feedback and input: In cases where a child's return to a parent is being considered, foster parents /care providers would be required to provide a written closing summary (JV290) that contains the information they believe to be important about the child/youth; including any identified behavioral concerns and what the foster parent has done to address those concerns. Having a written update that is submitted directly to court will be helpful for foster parents or caretakers who do not want to be put in a position of having direct contact with parents. In addition, it can give the court, attorneys and parties better insight as to the child's well being and what is in his or her best interest. ▪ Minors 10 years of age or older can be asked to write an "essay" or can be 		

Attachment E

CSA Court Focus Group Discussion

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		<p>verbally asked questions, such as “What do you want?” or “If you could have 3 wishes, what would they be?” This could provide insight for the court as to what the child would like to see happen without leading the child’s answers. Children should also be asked what adoption means to them and this information could be reflected in the court report submitted by the Department. Currently reports say the child was asked if they wanted to be adopted and document the child’s response as a yes or no answer.</p> <ul style="list-style-type: none"> ▪ Court Appearances: When return is being considered children (3 years of age and older) should be in court to talk with their attorney. This will enable the attorney to inquire as to the child’s feelings about returning home and to ensure that no changes in circumstance have occurred since the report was written. The child will also be available if any inquiry is necessary by the court, or otherwise. ▪ Drug cases: When return to a parent is being considered, parents should do a hair follicle drug test and the results should be provided at the court hearing. This only exception to this would be when a parent has provided a “dirty” or positive urine drug test within the past 90 days. Parents reunifying should obtain a sponsor, actively work through the 12-Step Program and develop a support system. ▪ Family Maintenance (FM) Cases: Many cases in FM status are being closed too soon. It is very important that the parent <u>completes</u> all programs and case plan activities before their case is closed. 		

Attachment E

CSA Court Focus Group Discussion

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		<p>Probation:</p> <ul style="list-style-type: none"> ▪ Probation is understaffed and needs more services and resources to assist its youth and families. ▪ Programs for youth offenders are closing and lack of services is a drain on the system. ▪ Probation youth are returning to poor home environments, substance abuse and Gang involvement, result in youth re-offending. Family members are often involved in substance abuse and gangs. ▪ Probation lacks quality group homes and treatment services for its youth. ▪ Probation lacks of sufficient funding for needed services and resources. ▪ Attorney represents probation youth, but does not represent parents. Attorneys do not always speak to the parents or explain the court process. ▪ The District Attorney's Office views placement as a punishment and not as a treatment option. ▪ The Court /District Attorney's Office and child attorneys do not utilize the Probation Officer's knowledge of the youth. They often do not involve the Probation Officer in the court process or case decisions. ▪ The Court needs to hold the parents accountable. ▪ There is inconsistency in court processes from region to region. Visitation in the Desert Region is too infrequent, and the Court is not requiring the parents to finish their case plan services before closing their case. ▪ The Court is not ordering Independent Living Program services for juveniles in the Probation system. ▪ There is not enough follow up 		

Attachment E

CSA Court Focus Group Discussion

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		<p>supervision on the results of/progress in case planning after TDM meetings, unless the client is referred to a program like family Preservation Court (FPC).</p> <ul style="list-style-type: none">▪ Department of Juvenile Justice is refusing to take kids.		

Attachment F

CSA Education Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ FYSIS (Foster Youth Services Information System). ▪ CWS/CMS. ▪ Individual Database used by School Districts. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ Pride Training. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ There is a lot of effort on the part of schools at this time to generate new ideas/new methods for keeping youth in school through graduation. Examples include the following: establishing Regional Learning Centers and CAHSEE labs where youth can practice/get assistance in passing the High School Exit exam. <p>STAFF TRAINING:</p> <ul style="list-style-type: none"> ▪ Training Unit. <p>PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Counselors in many schools are taking note of which children are in foster care/group homes to offer additional assistance. ▪ There is more general awareness in the educational system about the requirements of AB 480. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Many educational services and programs are available that can be tapped: intervention programs, life skills programs (for children/youth and parents), expansion of ROP programs (now called CTE, Career Technology Education), and Capturing Kids Hearts 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ Synthesis of different databases. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ When people understand what child games and activities are doing to help their children learn, they are more vested in doing the activity for the children's betterment. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Ongoing review of needs. <p>STAFF TRAINING:</p> <ul style="list-style-type: none"> ▪ The group noted that there is a lack of life skills among foster youth and they need a lot of work in this area. Some members in the group felt that this learning would work better if the parents were also involved Youth need assistance with the following: better communication skills, learning to be a team member, learning to interact more appropriately with others, learning where they "fit in." ▪ Education of staff and foster parents regarding educational requirements and resources. ▪ Send CPS Workers to "Student Assistance Programs" trainings and encourage their participation in the "Core Team." Student Assistance Programs assist students in need (i.e. academic difficulties, behavior problems, substance abuse, etc.). Riverside County schools have adopted this model. <p>PROVIDER TRAINING:</p> <p>Although many educational services and programs are available, the information is not "getting out." School counselors need additional information on what's</p>	<ul style="list-style-type: none"> ▪ More need to be done to improve educational services for youth before they get too behind and he/she gives up. It would be beneficial if there were additional oversight of the 12-15 year-olds so that there are fewer barriers when the youth enter ILP. ▪ Overall, more services are needed in the Desert Region. The group discussed some of the additional problems posed when parents of youth cannot assist with homework (be an active part of the child's education) and don't know how to approach the school system. Outreach to parents in need would be helpful. ▪ Transportation is always a need in the Desert Region and other remote areas of Riverside County ▪ More advocacy is needed for children with special needs. ▪ Additional services are needed upon reunification; the child/youth may have been receiving needed support while in out-of-home placement which stops when they reunify. ▪ Foster children need more life skills training to increase their employability. 60% of kids at high school level will not go to college/have a harder time getting into college. ▪ There are more children competing for the same number of slots on college campuses as were available 20 years ago. ▪ There needs to be more ownership by teachers on the success of children in their class and less "writing off" kids under the premise that the child will not be in the classroom long term. ▪ ROP is getting more academic and 	<ul style="list-style-type: none"> ▪ We need to invite additional partners in the discussion. To include: Youth Opportunity Centers, more representation from RCOE, more representation from local community colleges, need representation from the Adult Schools and someone from CTE. If we have a wider array of collaborators, information will get out more readily about services that are available and we can determine other services which we may tap into that we are currently not aware exist. ▪ We need to strategize on how to disseminate information about resources available. Who should receive and who will update? ▪ Discuss where are safe places to learn so that we can get the services out in a place where consumers don't feel threatened or intimidated. ▪ Need to work more closely with GHs and urge them to make education a top priority. ▪ Overall need for better planning to get available services where they are needed. ▪ Financial incentive for foster parents whose children maintain at least a C average and pass all of their classes. ▪ Incentives – Scandia – free token – something for the kids if they do well. ▪ Invite business community to the table to help with this. ▪ Outstation Social Worker at Schools. ▪ Partner with Student Assistance Program where available. ▪ Utilize "Student Assistance Programs" to assist students in need (i.e. academic difficulties, behavior problems, substance abuse, etc.). 	<p>COUNTY-WIDE PIMRARY PREVENTION EFFORTS:</p> <ul style="list-style-type: none"> ▪ Increased partnership with RCOE and other community colleges. ▪ Regional Learning Center – multiple programs housed in the same location. It will be available on line on July 9th. ▪ RCOE – Next year, the Latino Literacy Program will be rolled out. The goal of the program is to support parents and their children's literacy skills. ▪ Life skills through Boy Scouts Learning for Life. ▪ Evidenced-based play – certain school districts are utilizing this program. ▪ RCEO head start program has home visitors – IRC has home visitor program and mentors. ▪ Infant Circle – local education agency point of contact for PAT programs if the child is not referred through IRC. ▪ Adult Education classes - GED, ESL, etc. The Mexican Consulate program has a literacy program that provides all the textbooks if a volunteer tutorial program is created – assessment of persons skills. Completed – 2 year program from illiteracy to literacy). ▪ Volunteer Center – alternative sentencing program - ESL education support. ▪ PathWays Ministries in Perris offers life skills training. ▪ AEWay – meet the 2nd Friday of each month at YWCA. The program needs to be expanded. ▪ WINGS. ▪ Schools are now using Process facilitated by trainers (Flip Flippen) Capturing kids hearts – need to have kids heart before you start "messing"

Attachment F

CSA Education Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
	<p>available for foster children and what their special needs may be</p> <ul style="list-style-type: none"> ▪ Parents need additional training regarding taking care of the educational needs of their children when the children are returned so that there is less chance of re-entry. ▪ It was also noted that there are efforts to have school administrators think differently about their approach to educating today's youth: a more collaborative approach is needed, a paradigm shift. One group member mentioned that some administrators are getting on board to do what is necessary, but others are resistant. ▪ Education of staff and foster parents regarding educational requirements and resources. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ At Community College level – service to parents needs to come from here – career technical skills to assist recovering parents to become employable ▪ Early learning – helping teen moms learn that it's okay to play with your child ▪ Teaching the significance of play in child learning ▪ How to be a member of a team, communication, bullying, all those things that make someone a good worker ▪ Kids are missing the life skills piece. They do not know how to communicate – cannot speak to friends in a manner in which to get thoughts across, do not know what it means to be a good employee ▪ Have teens connect, engage with others and talk about their lives – begins to help youth to see where they are at, set goals 	<p>less “hands on” It is based on UC system of entry requirements and does not to serve everyone like it should.</p> <ul style="list-style-type: none"> ▪ Kids are being lost in the education system by 7th grade. This is when kids drop out of high school. More funding is needed at this academic level. ▪ Lack of consistency in FP training (statewide and in the County). ▪ ROP's programs and space availability needs to be expanded. ▪ Component – empower kids – offer opportunities to lead and talk to others – do for their peers what an adult has done for you. ▪ Engage parents in the education process. 	<p>Riverside County schools have adopted this model. Send CPS Workers to SAP trainings and encourage their participation in the “Core Team.”</p> <ul style="list-style-type: none"> ▪ Seek out local community support. Moreno Valley Promise is doing a pilot project with local high schools bringing career partners during lunchtime to expose youth to various career paths, build connections with local businesses, etc. The overall goal is to start having youth care about their future. 	<p>with their heads.</p> <ul style="list-style-type: none"> ▪ F2F – faith based – 4 areas – recruitment of quality foster homes, support of foster homes, respite, etc., mentors (Responsible Adult, Big Brother/Big Sister, CASA), help with emancipating youth, other – i.e. prom, grad night, etc. \$\$\$. ▪ Harry and Stella – First 5 – Faith Based Community access. ▪ RCOE – Foster Youth Services and tutoring services. <p>PREVENTION PARTNERSHIPS:</p> <ul style="list-style-type: none"> ▪ Riverside County has an MOU with RCOE to acquire an Educational Liaison in the GH Unit. Efforts will be made despite budget cuts to expand and have more educational liaisons positions. <p>STRATEGIES OFR THE FUTURE:</p> <ul style="list-style-type: none"> ▪ Parent partners who are willing to advocate for educational rights of children. ▪ Training ILP SWs to advocate for ed rights of ILP youth. ▪ Offering other intervention programs to youth who are getting into trouble behaviorally and running behind on credits. ▪ Offer children and youth more career/life skills type classes. Some feel lost because they can't go to college and feel that there isn't a place for them at school. ▪ Work with providers at Group Home to share information.

Attachment F

CSA Education Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
	<p style="margin-left: 20px;">and move in the right direction</p> <ul style="list-style-type: none">▪ Training on Life Losses – Stevensons▪ Need to have uniformity in trainings▪ Collaborative efforts not competitive trainings.▪ Consideration should be given to the development or classification of staff at school or DPSS to identify, monitor and support foster children who are having problems in school▪ Involving industry and business leaders in the county's plan to improve outcomes/success for emancipating/transitioning youth.▪ Getting information out regarding educational services (i.e. 211).▪ Early identification of students in academic difficulties.▪ Transportation issues and rising fuel costs makes it harder to get foster children/youth to appropriate schools.			

Attachment G

CSA Global Assessment Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> Structured Decision Making. The Department's use of SDM is strength-based and covers the gamut of contact with the family, from an initial risk and safety assessment, to a reunification reassessment and family strengths and needs assessment, to a risk reassessment (or an assessment of the likelihood of abuse/neglect recurrence in the family). <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> Exigent Circumstances Training. The Department is re-familiarizing its staff with the Welfare and Institutions Code, and refining its understanding of the legal basis for the removal of children in Riverside County. The projected outcome is threefold: a) obtaining prior judicial review when possible before detaining children; b) a reduction on the overall number of children detained; and c) a reduction in the likelihood that the detentions will be overturned at the Court of Appeals. <p>STAFF /PROVIDER TRAINING:</p> <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> Team Decision-Making Meetings. The Department's use of TDMs has led to increased communication between Children's Services Division, and other community partners. It is believed that this collaboration lends itself to safety, permanence and well being for Riverside County dependent children. 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> Termination of Services Contracts at the End of the Fiscal Year. When contracts with service providers terminate at the end of the fiscal year, and are not renewed, it is difficult for children and families to continue receiving services. What's more, when contracted providers change, families are often times assigned a new therapist, counselor, clinician, etc., who necessarily needs to learn the family dynamics and relevant issues, which can protract timelines and lead to client and Social Worker frustration. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <p>QUALITY ASSURANCE SYSTEM:</p> <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> Disagreement between the Juvenile Court and the Department. At times, the Juvenile Court disagrees with the Department's recommendation to continue a case in Family Maintenance, and the decision is made to terminate dependency. The Department may have not had the time it needs to fully offer services to the family, and the family itself may have not had the time to complete all the essential elements of their case plans. It is thought that incomplete case plan fulfillment lends itself to re-entry into the system. Training for community partners on available resources, substance abuse recovery/relapse prevention services, state laws, etc. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> Collaboration and Communication between Children's Services Division 		<p><u>Social Worker Training</u></p> <ul style="list-style-type: none"> The Global Assessment Workgroup recommends extensive training for Department Family Maintenance and Family Reunification Social Workers, focusing on the following areas: Learning to collaborate and communicate effectively with community partners; Dependent decision-making, which takes community partners' opinions and perspectives into account; The exploration of alternative decisions, not just re-entry into care; A thorough understanding of the Welfare and Institutions Code, especially sections 387 and 342 and their relation to the legal authority to re-detain children; A greater understanding of substance abuse issues and the marriage of a positive test with concomitant child and abuse risk factors, rather than a Social Work focus on the dirty test, and an understanding that re-use does not equal relapse; An understanding of the "observation effect" concept, that families are being closely scrutinized by the Department and other agencies, which should not lend itself to a "waiting for the family to fail" mentality. In conjunction with increased training for back-end Social Workers around these issues, we suggest end of dependency Team Decision-Making Meetings, or a similar meeting (Global need assessment meeting prior to reunification). Discussed further in the next two sections: Plan to Prevent Reentry and Plan of Action meetings. <p><u>Plan to Prevent Reentry Meeting</u></p> <ul style="list-style-type: none"> The Global Assessment Workgroup 	

Attachment G
CSA Global Assessment Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
	<p><u>and Community Partners/Service Providers</u>. Although improved, communication and collaboration between CSD and community partners can always be improved, especially regarding the prevention of reentry into care.</p>		<p>recommends a formalized meeting two months prior to the Department's recommendation to terminate dependency, or as soon as possible if the Juvenile Court terminates dependency against CSD recommendation:</p> <ul style="list-style-type: none"> ▪ The meeting would be set-up by the case-carrying Social Worker and Supervisor and would include all relevant family members, community partners and collaborating agencies. ▪ The meeting would also include clients and older dependent children. ▪ The meeting would follow a Team Decision Making type approach, focusing on strengths, and then addressing concerns, and ideas to express those concerns. ▪ The Department's goal would be one of transparency, an honest assessment of the areas of concern for the Department and community partners post termination of dependency, as well as a realistic appraisal of the family's continuation in services without the Department. ▪ The group also discussed some other strategies to coincide with the Plan to Prevent Reentry Meeting, namely Quarterly Resource Fairs in the various Court jurisdictions for families to attend, and the assignment of parent mentors, clients who have successfully reunified. <p><u>Plan of Action</u></p> <ul style="list-style-type: none"> ▪ The Global Assessment Workgroup's last strategy to achieve reentry improvement is to create a Plan of Action as a product of the Plan to Prevent Reentry meeting. ▪ The Plan of Action would be signed 	

Attachment G
CSA Global Assessment Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
			<p>and agreed upon by the clients, the Department, and any community partners involved.</p> <ul style="list-style-type: none"> ▪ The Plan of Action would consist of general action statements created in response to the list of ideas generated from the concerns expressed about the family. For example, a concern could be that the family has no transportation to counseling sessions without the Department. An idea could be that an outside agency assists the family with transportation post termination of dependency. A Plan of Action item could be "Agency X agrees to provide weekly transportation to the family for the purpose of attending individual therapy sessions through the month of October." ▪ Each participant in the Plan of Action meeting has an equal stake in the outcome, and an equal voice at the table. The Department's opinion does not carry more weight than the clients or the community partners. Disagreements will be mediated by the whole group in an effort to achieve consensus. ▪ The goal for the Plan of Action is to ready the client for life post termination of dependency and to ensure that good work, once began, continues. 	

Attachment H

CSA Partnership and Collaboration Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ The use of the Dept. of Mental Health’s ICOP report to share information regarding placements. ▪ There is approximately a 70% dissemination rate of child history information to agency in order to facilitate need assessment development. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ Strong effort between DPSS and community partners to recruit more foster parents. ▪ Strong communication between DPSS and foster parents. ▪ Ice Breakers (Desert) – foster parents and bio parents working together to discuss child’s needs. ▪ Angels in Waiting – recruits foster homes for the medically fragile. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Riverside County’s ILP assists youth to become self-sufficient and independent. ▪ Placement Tracking Report – tracks the number of placement changes, number of TDM’s, etc. <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ PRIDE training is effective and efficient. ▪ Foster parenting training is very beneficial. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Monthly meetings with county staff to discuss the Wraparound Program. ▪ Integrating the use of same services. ▪ Good working relationships and 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ There is a need for partners to receive information/reports from DPSS on performance (i.e. re-entry rate, placement changes, reunification, etc.). ▪ Utilization of county dollars and resources to better serve the community. ▪ Use of reports/data to supplement request for funds. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ There is a need for more homes for parenting minors. ▪ There is a need for homes for medically fragile children in the Desert Region. ▪ There is need for more collaboration and communication between regions. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Lack of tracking mechanisms for children close to emancipation. ▪ RFP’s are too restrictive and do not allow for the flexibility of agencies to provide client specific needed services. ▪ Lack of supportive services after a child turns 18 years old. ▪ There is a need to integrate databases within the regions. <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Lack of adequate training for agencies and foster parents. ▪ Staff recruitment and retention in the Desert area is difficult. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Need for better communication among DPSS regions, which will lead to better communication with partners. 	<ul style="list-style-type: none"> ▪ Develop more MOU’s with school districts. ▪ Create more PPS credential liaisons. ▪ Cross training between regions and between DPSS and community partners in order to share knowledge of how the system works. ▪ Need to educate partners/colleagues in place. ▪ Need for the Student Assistance Program (SAP) in the other regions and school districts. ▪ Increase the use of Wraparound for children in group homes. ▪ Enhancement and expansion of the Transitional Housing Program- Plus program. ▪ More support is needed for emancipation services/ ILP program by DPSS staff and foster parents. ▪ More frequent community forums to share progress, updates, revise plan, etc. ▪ More parent engagement strategies. ▪ There are many collaborative efforts, but lack a large database to track efforts and progress. 	<ul style="list-style-type: none"> ▪ Increase child history information dissemination rate to agencies from 70% to 100%. ▪ Consolidate efforts with permanent placement – use of one database. ▪ Regular meetings with all parties so that there is no service overlap. ▪ More awareness of CASA to DPSS staff. ▪ Invite CASA to foster parent recruitment events. ▪ Need to restructure contracts between DPSS and agencies to address issues of flexibility of services provided. ▪ Better tracking of progress for children between the ages of 14 – 18 years will: <ul style="list-style-type: none"> ○ Prepare them for independent living ○ Decrease number that return to system after age 18. ▪ Centralized data for tracking purposes so that families are better surrounded with services. ▪ Create a new 2-1-1 component (i.e. section with questions and answers) ▪ Need to train foster parents on services available after child turns 18 years old. ▪ Cross training among staff (DPSS and Agencies). ▪ Awareness of availability of trainings for community partners to include the use of more video trainings. ▪ DPSS must ensure that the appropriate SW responds to all requests from CNUSD. ▪ FFA must effectively communicate to SW the information they need. ▪ DPSS Placement Unit will be 	<ul style="list-style-type: none"> ▪ Invite Partners/CASA to present at managers meetings. ▪ “Ice-Breakers” are great!

Attachment H
CSA Partnership and Collaboration Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>networking between DPSS and agencies.</p> <ul style="list-style-type: none"> ▪ Team Decision Making (TDM) Meetings: <ul style="list-style-type: none"> ○ Community is more connected ○ brings everyone to the table, and ○ breaks down communication barriers between DPSS and agencies. ▪ Student Assistance Program (SAP) in the Desert Region – collaboration meetings on how to improve the quality of services to children in the community. ▪ THP-Plus program has huge impact on emancipating youth. 			<p>responsible for ensuring that agencies receive child information in the HEP Passport in a timely manner.</p> <ul style="list-style-type: none"> ▪ Invite schools to attend TDM Meetings. ▪ Strengthen communication and collaboration between agencies. ▪ Invite foster parent to share success stories. ▪ Provide presentation on Wraparound project to keep agencies informed. ▪ Enhance the Wraparound program to increase number of available slots. ▪ Invite parents to share their success stories about the availability and benefits of supportive services. ▪ Increase knowledge of pre-reunification services to ensure continuance of services. ▪ Invite community partners to induction training. ▪ To better keep partners informed develop a centralized location for community partners to obtain information. ▪ Schedule meetings every six months between CPS and major partners to review progress of the county plan. 	

Attachment I

CSA Tribal Consortium Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <p>QUALITY ASSURANCE SYSTEM:</p> <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Noticing has improved to the Indian Child and Family Services (ICFS). They regularly receive notices for cases involving Native American children. ▪ Spirit Parenting (culturally based parenting education) available and provided to anyone in the Native community. ▪ Overall training and TDM meetings are a strength. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ TDMs have helped to improve communication. TDMs are to be done on all cases involving Native American children, not just when the case is designated ICWA by the Court. Tribal representation at TDMs has helped in the provision of services to Native American children and families. ▪ Riverside/San Bernardino Indian Health Clinic Inc. and TANF provide substance abuse counseling and have available offices throughout the county – however they cover such a large area that they are often full. ▪ Currently have “Tribal Alliance” meetings between tribes, Court Judges, Children’s Services executives and staff, Mental Health, Riverside County Substance Abuse and CASA <p>MISCELLANEOUS:</p> <ul style="list-style-type: none"> ▪ Substance Abuse Prevention events held by tribes. Next event to be held in 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ Only one (1) outcome measure is specific to Native American children/families. More data specific to Native American children is needed (e.g. rate of Native American children in foster care, rates of substance abuse for cases involving Native American children, etc.). ▪ The U.S. Census may be under reporting Native Americans in Riverside County. ▪ ICFS unfamiliar with UC Berkeley website where outcome measure compliance data can be found. ▪ Information on Native American children is not always being entered into CWS/CMS correctly and consistently. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ Participation in services is at the discretion of the caretaker and they do not always choose to participate. ▪ Need to recruit for more Native American foster homes. Riverside County and ICFS need to collaborate to accomplish this goal. ▪ More training for tribal foster parents on working effectively with the TDM process. ▪ Relatives need additional training/education on behavioral issues and how to provide care for children placed in their care. ▪ Native American children typically internalize trauma and stress rather than act out. Destructive acting out occurs later in teenage years. Need services and funding to help children externalize trauma so acting out does not happen later. 	<ul style="list-style-type: none"> ▪ Tutoring for Native American children. ICFS is not aware that Riverside County Office on Education (RCOE) offers free tutoring for children in need of the service, as does Riverside County child welfare for those children in care ▪ Need to look into Kinship Care funding for specific populations (e.g. Native Americans, etc.). ▪ ICFS needs additional CAPIT or funding source to do the work. ▪ Families have a need for substance abuse and domestic violence services that are culturally relevant. ▪ Parenting education (e.g. Spirit Incredible Years) is best done when child is in the home – gives the parents an opportunity to practice what they are learning. The Court requests that children are not returned home until parenting is done, however, evidences based shows that parenting should be done with the child in the home. ▪ More services to Native American adolescents needed. ▪ Need services that address/account for “Historical trauma” suffered by Native Americans – many do not want people to know they are Indian – not wanting to embarrass or humiliate themselves – better understanding needs to occur. Some tribal members may have already gone through Indian services and they may not have worked. They may be hesitant to say they are Indian as they do not want to be pigeon holed into only participating in Indian services. ▪ Alliance needs to be co-run by tribal members not run by judges solely. This would help ICFS to feel more vested and heard during the meetings. Currently having a hard time getting on 	<ul style="list-style-type: none"> ▪ Add ICFS’ “Spirit Incredible Years” program to parenting education providers list (Services Referral Laminates). ▪ More funding for Indian education programs. ▪ Riverside County to fund a position for ICFS to hire a person to attend all TDMs involving Native American children/families. ▪ Children’s Services meets monthly with service providers. ICFS to be invited to participate in these meetings. ▪ Look into In-home services contracts (parenting/counseling). This would allow for a different mechanism in current billing structure. ▪ ICFS to be invited to conference hosted by Riverside County fiscal on state billing requirements. 	<p>COUNTY-WIDE PRIMARY PREVENTION EFFORTS:</p> <p>PREVENTION PARTNERSHIPS:</p> <ul style="list-style-type: none"> ▪ ICFS has been invited by RCOE to participate in community fairs. <p>STRATEGIES FOR THE FUTURE:</p> <ul style="list-style-type: none"> ▪ More linkage with school districts. ▪ Tutoring specifically for Native American children (especially during critical Middle/High school years). ▪ Native American programs in school districts. Dedicate more funding/more funding to programs already in place in school districts rather than develop new programs. ▪ DPSS has an MOU with local schools to allow for the transfer of information between the school district and the county. SWs provide schools with needed court information in order for an IEP to be processed.

Attachment I

CSA Tribal Consortium Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>September.</p> <ul style="list-style-type: none"> ▪ ICFS currently does PCIT – currently in the process of analyzing program effectiveness. ▪ ICFS provides in-home services to Native American families (e.g. Multi-System Family Therapy). ▪ AA meetings are offered on some reservations along with retreats and conferences to assist with sobriety. ▪ Programs to foster cultural restoration being held on reservations (e.g. basket making, language/cultural revitalization conferences, food preparation, inter tribal sports). ▪ ICFS provides follow up services to families for up to one year and families can always come back for additional services. ▪ ICFS currently doing focus groups with MH – issues surfacing are stigma – concerns that MH with “Lock us up” or that a family member will be released too early. 	<p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Clarity of when TDMs are done with tribal children (done immediately – not when court designates the child as tribal). <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Training for Legal Guardians (LGs) on IEP process and paperwork involved. System is confusing and services can be difficult to access. ▪ Judicial officers need more multi-cultural awareness training. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Increased collaboration with school district to enhance a mutual understanding of both systems. School districts need to understand Native American children’s educational needs and parents need to be education on what they can ask for. ▪ TDMs need to work better to figure out what is happening and who is relation to the child involved. ▪ ICFS receives children in foster care placement, but does not always receive court reports on those children (by mandate reports go to parents and children 12 years and older). ▪ Link foster parents to training offered by the tribes when Riverside becomes aware that foster parent is Native American. ▪ Training on how to deal with foster youth. <p>MISCELLANEOUS:</p> <ul style="list-style-type: none"> ▪ Foster children are not always at grade level due to missed school and get behind academically. ▪ Native American children being mainstreamed off IEPs (before Middle School), and later flunking/ struggling in High School - input from 	<p>the agenda to be heard.</p> <ul style="list-style-type: none"> ▪ Bio parents confused about what other services they need to do and how to get access to them. If ICFS was linked to families and were aware of services, they could provide additional education and support to parents. ▪ Transportation (additional assistance getting parents to ICFS location would also help service provision). ▪ RFP’S are done better through Indian organizations. They provide services to more diverse Indian population. ▪ Need culturally specific Wrap Around services (case management, counseling, parenting, etc.). ▪ Ongoing services /resources for families after care closure (e.g. traditional/healing aftercare). ▪ A lot of families complete “Spirit” but drop out afterwards (some families go through Spirit more than once). ▪ Need a 24/7 hotline for issues, help with problems, referrals to re-link to programs/services. ▪ Children placed with relative caregivers need additional support and resources. ▪ Hard for Native Families to navigate the mental health system. Services take too long to access, therefore persons leave before being served. ▪ Rehabilitation programs for parolees on reservations do not exist. There is a need more supportive services. ▪ Support services not available for youth leaving group homes and ward ship. ▪ Need for tribal courts – will impact the way in which tribes interact with counties. 		

Attachment I
CSA Tribal Consortium Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
	<p>caregivers/tribal representative may help in service provision for Education. ICFS not informed of IEPs for kids not in care (e.g. LG homes).</p> <ul style="list-style-type: none"> ▪ Greater understanding of tribal system, who is who and how to communicate with tribes/consortium is needed. RMs meet with consortium every 6 -12 months to improve communication. ▪ Mental Health Treatment. There is a lot of stigma regarding getting services. Perhaps stigma could be overcome if service delivery was approached with more sincerity. Some families will not participate in culturally based programs as they are considered either “not Indian enough or too Indian.” ▪ Culturally competent ILP services are needed. Kids not currently getting ILP. ▪ Notifications of conferences/services offered on reservations are provided through a mail out. 			

Attachment J

CSA Services and Resources Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>ELEVANT MANAGEMENT INFORMATION RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ JFK states that the Differential Response Database is helpful when it works. ▪ Riverside County Evaluation Database (RCEDB), utilized by Child Abuse and Intervention Treatment (CAPIT)/Promoting Safe and Stable Families (PSSF) providers. ▪ Program Development Unit (PDU) database, an internal database which tracks contacts between CSD liaison and providers. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ Training through RCC (funding), 12 educational hours per year are required. ▪ Advertising. ▪ Parent by choice meetings – Association presidents address needs. ▪ Events internal/external. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Monitoring (between DPSS and contracted provider). ▪ Out of Home Investigation Unit (OHI). ▪ Screening Committee. ▪ Customer service satisfaction survey. ▪ Random calls to parents and caregivers. ▪ Parents Anonymous customer service survey. ▪ Concurrent Planning every 6 months. ▪ 17 year+ staffing and follow-up from previous meeting. <p>STAFF TRAINING:</p> <ul style="list-style-type: none"> ▪ Training region (mentors). ▪ Family centered services (TDM, icebreakers). 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ Strengthen/monitor data systems with providers. ▪ Provide additional training for RCEDB. ▪ Expand knowledge of 211. ▪ Provide a link to data. ▪ Allow Community providers access to data. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ Give ongoing additional support. ▪ Access funding through collaborative grants. ▪ Increase partnership with Ann E. Casey to receive help with recruitment, development, and support. ▪ Build up collaboration with the community. ▪ Expand advertising to PTA and churches. ▪ Give more information to 211 regarding foster parenting and adoption. ▪ Provide extended respite care, which would enhance support. ▪ Stabilize FP Placements and put children in more home-like environments. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Evaluator should follow through with providers as to why data is collected and provide results. ▪ Surveys should be utilized for program improvement. ▪ Follow up with clients after are completed. <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Evaluate Social Worker training needs (Education, emancipation, etc.). ▪ Provider training – FP & Bio parents 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS</p> <ul style="list-style-type: none"> ▪ CAPIT/PSSF providers have access to RCEDB, other providers need an evaluation database. ▪ A common definition for training needs to be created. ▪ The community at large is unaware of 211 (Social Workers, providers, clients). ▪ County data is not accessible to the community. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ More support is needed after PRIDE training; it is a critical time for outreach. ▪ Offer more activities that build collaborations with partners. ▪ Need to focus on increasing efforts with Churches and PTA. ▪ In an effort to increase respite care identify funding and community partners to assist. ▪ Disseminate information to caregivers that tells them where /how to get resources. ▪ Improve marketing for 211. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Make data and results more accessible to community and providers. 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS</p> <ul style="list-style-type: none"> ▪ Expand databases beyond CAPIT/PSSF providers. ▪ Define training based on vendor need. ▪ More training on 211 for vendors, Social Workers, and the community. ▪ Make data accessible to general public. ▪ Create a link on the County website to Berkeley website – County data could be used to improve services to the clients. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <ul style="list-style-type: none"> ▪ Boost development of Parent Partner contracts <ul style="list-style-type: none"> ○ Continue to identify funding opportunities for Resource Family support ○ Provide 211 with more information for Foster families ▪ Expand recruitment for PTA and Church. ▪ Develop respite care program – Identify funding and community partners i.e. Faith Based Organizations. ▪ Send out resource information with provider checks. ▪ Market 211 - SW can give flyers to clients. County HR, utility companies can also disseminate this information to the general public. <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ Better utilize existing providers for surveys. ▪ Further develop existing CAPIT/PSSF survey to capture additional information. ▪ Centralize location for all surveys currently in place. 	<p>COUNTY-WIDE PRIMARY PREVENTION EFFORTS:</p> <ul style="list-style-type: none"> ▪ CAPIT/PSSF contracts. ▪ CWS contracts. ▪ TDMs. ▪ Family to Family. ▪ System Improvement Plan. ▪ 211. ▪ Differential Response. ▪ An agency that focuses on prevention should be put in place. <p>PREVENTION PARTNERSHIPS:</p> <ul style="list-style-type: none"> ▪ In-home parenting shows real family setting. ▪ Community Faires – invite the community and educate them on prevention strategies. ▪ Collaboratives – Increase prevention efforts. ▪ Parent Child Interactive Training (PCIT). <p>STRATEGIES FOR THE FUTURE:</p> <ul style="list-style-type: none"> ▪ Follow up feedback to providers. ▪ Provide more tools, more in-service training, data access, etc. ▪ Conference with multiple agencies that target the community. ▪ Additional agency training. ▪ Variation of faires. ▪ Explore additional community outreach with a focus on children and families. ▪ Promote in-home services.

Attachment J

CSA Services and Resources Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<ul style="list-style-type: none"> ▪ State approved induction and 20 hrs. per year training. ▪ Working with difficult clients (PCWTA provides ongoing training). <p>PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Caregivers are provided training (PRIDE Training) to work with children who experienced trauma, working with bio families, and receive parenting techniques. ▪ Family centered services (TDM, icebreakers). ▪ Quarterly provider meetings (CAPIT/PSSF). <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Provider Faires ▪ TDMs ▪ F2F meetings with the community and providers. ▪ SIP Forums ▪ FP Appreciation Event ▪ CAPIT/PSSF vendor meetings ▪ PCARC ▪ RFP workshop – training to encourage more agencies to submit RFPs ▪ Vendor Meeting – All county contracts (Aug) ▪ Joint Operational Meetings (JOM) ▪ Collaboration with Family Resource Centers (FRC). ▪ Operational Regions Community Events 	<p>should have consistent training.</p> <ul style="list-style-type: none"> ▪ A parenting model should be implemented as part of the Resource Family Training. ▪ The county needs to be more consistent with what community providers are teaching. ▪ Match up the needs of the family with contracted services and caretaker model. ▪ Additional training resources are needed for bio parents and caretaker (bridge). Expand Parent Partner Contracts. ▪ Provider agency's line staff need more training. ▪ Social Workers need to reach out to providers. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Additional collaboration between the Provider/Social Workers, Foster Parent/Bio Parent is needed. ▪ Increase the number of Provider Faires to at least two times a year for each region. ▪ Reunited families need to receive a Service Referral Laminiate. ▪ There needs to be a faire where providers can learn about Children's Services agency and its organization. ▪ There is a need for an increase of collaborations with: <ul style="list-style-type: none"> ○ PCARC ○ Faith Based Organizations ○ Emancipated youth ○ Family Resource Centers ○ Community Centers ○ Betty Ford 	<p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ There are gaps in the knowledge levels for Social Workers on clients needs, resources, and services. ▪ Identify a parenting model. ▪ Consistency of training from providers. ▪ Provider line staff needs to be trained. ▪ Increase the number of Resource Faires. ▪ A need to better educate provider staff. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ A need for greater collaboration. ▪ Increase family knowledge of community services. ▪ Increase collaboration with community partners. ▪ More frequent community forums to share progress, updates, revise plan, etc. ▪ Utilize youth in various ways (i.e. health projects) for community service/ peer- to-peer teaching. ▪ Increase publicity and number of Family Resource Centers to better expose community partners to FRC services. 	<p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Evaluate knowledge of Social Workers <ul style="list-style-type: none"> ○ Provide consistent training for all Social Workers ▪ Icebreakers and trainings have started to address parenting issues. Bridge the gap and consistency between the bio parent and Foster home. Strengthen the support system. ▪ Continue to develop training for providers, line staff, vendors, FFA's, Foster Homes, and Group Homes. <ul style="list-style-type: none"> ○ Joint staffing/training with providers. ○ Continue to have more resource faires ○ Invite provider staff to region meetings ○ Develop Expos <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Provider Expos ▪ Service Referral Laminiate ▪ Develop knowledge of resources available in the community. 	

Attachment K

CSA Sytemic Factors Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <ul style="list-style-type: none"> ▪ Some written resources are available in Non-English. ▪ Interpreter services. ▪ CSD has an MOU with the Mexican Consulate. <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <p>QUALITY ASSURANCE SYSTEM:</p> <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Court orientation program is very helpful. ▪ CSD has a designated International Liaison staff. ▪ Bilingual Social Workers. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ The County has various programs to address economic and poverty issues. ▪ EDA has program to assist clients with criminal history re: job search. ▪ Services offered through the Welfare to Work Program. ▪ DPSS Community Action. ▪ Multiple resources are available both during and after case closure. ▪ CSD is contracting with agency to identify SSI eligible children/youth. ▪ Increased MH/Drug Treatment services available throughout the County. ▪ Team Decision Making (TDM) Meetings may be a forum to discuss service needs prior to closure. ▪ Services Resource Books/Sites (2-1-1, CSD Laminated of Contracted Services, Kinship Warmline, etc.). 	<p>RELEVANT MANAGEMENT INFORMATION SYSTEMS:</p> <p>FOSTER/ADOPTIVE PARENT LICENSING, RECRUITMENT, & RETENTION:</p> <p>QUALITY ASSURANCE SYSTEM:</p> <ul style="list-style-type: none"> ▪ On going reassessment of needs. ▪ Need to improve awareness and coordination of services available. ▪ No strategy in place for in-person case transfer. <p>STAFF /PROVIDER TRAINING:</p> <ul style="list-style-type: none"> ▪ Lack of awareness regarding culture/language barriers. ▪ Need more diverse workforce, trainings, etc. ▪ Sensitivity training for SWs specific to poverty. ▪ Lack of communication between workers ▪ Better training of SW staff with annual updates at minimum. <p>AGENCY COLLABORATIONS:</p> <ul style="list-style-type: none"> ▪ Need for adequate permanent housing. ▪ Housing for people with convictions, eviction and bad credit. ▪ Need transportation in remote areas of county (High cost of gas). ▪ Improve community relations. ▪ Increasing the utilization of informal resources. <p>MISCELLANEOUS:</p> <ul style="list-style-type: none"> ▪ Rising population of “over qualified” unemployed people. ▪ High level employment training. ▪ Need client participation, engagement and follow through. ▪ Parents don’t understand the timelines for family reunification. ▪ Need to improve awareness and 	<ul style="list-style-type: none"> ▪ Lack of services in eastern end of county. ▪ Lack of knowledge/awareness of resources. ▪ IRC services available to specific population; not all qualify and may need mental health services instead. ▪ Parents can’t afford co-pay. ▪ Cultural differences in how one views abuse and neglect. ▪ Disproportionate number of African / Indian American children in the child welfare system. ▪ Reentry children/parents may require more intensive treatment. ▪ Need for individual counseling for child/youth. ▪ Need for a better case transfer process. <p>FINANCIAL:</p> <ul style="list-style-type: none"> ▪ Budget cuts across the board impact service availability. ▪ Need to improve awareness and coordination of services available. ▪ Need for real world approach to services and informal support (i.e. utilizing faith based organization, tribal liaisons, parent partners, etc.). ▪ Family Unification Program (FUP) only for those with no drug conviction. 	<ul style="list-style-type: none"> ▪ Identify community liaison in each agency. ▪ Foundation of support system. ▪ Identify and link clients to informal and community based support and thereby establish a foundation of support system. ▪ Recruit faith based organization, tribal liaisons, parent partners, etc. ▪ In addition to providing list of service resources, provide follow up to ensure client connected to needed services. ▪ Induction presentation on available services and resources. ▪ Resources Fairs and induction trainings. ▪ Knowledge of the effects of fiscal year restrictions to services. ▪ Using parent mentors for parents. currently in the system. ▪ Employ housing advocates. ▪ Increase continuity of care by reducing program transfer (e.g. FM transferring to FR). ▪ Implement policy/practice on worker to worker consultation upon case transfer. ▪ Increase the utilization of SDM tools. ▪ Increase the use of TDMs. 	<p>COUNTY-WIDE PRIMARY PREVENTION EFFORTS:</p> <p>PREVENTION PARTNERSHIPS:</p> <ul style="list-style-type: none"> ▪ Consolidate resources. ▪ One stop shop (i.e. 2-1-1 with a follow up component). <p>STRATEGIES FOR THE FUTURE:</p> <ul style="list-style-type: none"> ▪ Utilize and employ parent mentors. ▪ Identify and increase utilization of community partners. ▪ More involvement of community partners.

Attachment K
CSA Sytemic Factors Focus Group Discussion

AREAS OF STRENGTHS	AREAS OF NEED	SERVICE ARRAY GAPS & NEEDS	STRATEGIES TO ACHIEVE IMPROVEMENTS	COUNTY-WIDE PREVENTION ACTIVITIES AND STRATEGIES
<ul style="list-style-type: none"> ▪ Use of CAPIT funds to provide array of services to parents to prepare them for reunification. ▪ The Wraparound program. ▪ ACT program – mental health assessment and referral. <p>MISCELLANEOUS:</p> <ul style="list-style-type: none"> ▪ Family Unification Program (Section 8). ▪ Shared Housing Program. ▪ HUD. ▪ Path of Life Homeless Transitional Program. ▪ Some funding available for relocation of domestic violence victims. ▪ Some funding for housing available through Prop 63. ▪ CSD provides bus passes to parents to get to services (when open case exists). ▪ WTW provides transportation for job interviews. ▪ GAIN provides reimbursement/vouchers for gas. 	<p>coordination of services available</p> <ul style="list-style-type: none"> ▪ Need to revisit orientation based on case circumstance. ▪ Nobody wants to “recreate the wheel”, which is understandable. But some parts of the wheel need re-structuring. 			