



2016-2017



**CALIFORNIA CHILD WELFARE COUNCIL
ANNUAL REPORT**

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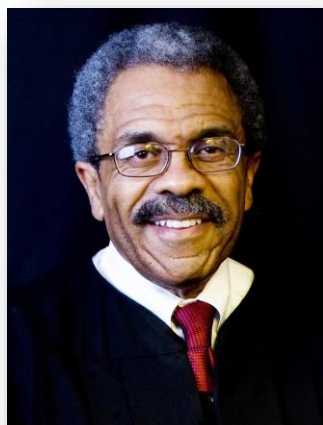
COUNCIL MEMBERSHIP

LETTER FROM THE CO-CHAIRS



Diana S. Dooley

Secretary
California Health and
Human Services Agency



Vance Raye

Administrative Presiding Justice
Third District Court of Appeals

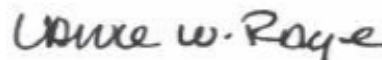
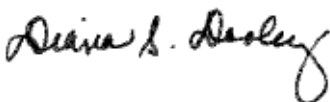
Dear Friends of the Child Welfare Council,

We are pleased to submit the 2016-2017 Annual Report of the California Child Welfare Council (Council) pursuant to Welfare and Institutions Code Section 16540. Over the course of the past year, the Council built on the work begun in prior years to improve services to children and families in the child welfare system, and those at risk of entering the system.

This report provides an overview of the Council's work during the past year. The Council, in partnership with its Committees and Task Forces, adopted principles for enhanced data sharing; developed a framework for prevention practice; drafted recommendations for priority employment for foster youth and former foster youth; and issued a report on a pilot to prioritize access to behavioral health services and supports. The reports and recommendations related to these topics, in addition to others addressed by the Council, may be found on the Council's website at www.chhs.ca.gov.

We are grateful to the members of the Council, and the wide-range of organizations and individuals who have so generously given their time and talent to further the work of the Council. We are grateful for their commitment and leadership as we work toward improving the child welfare system in California.

Sincerely,



CHILD WELFARE SYSTEM OVERVIEW

California counties are the primary governmental bodies that directly interact with children and families to address child abuse and neglect. The county social services department or agency, through its child welfare division, administers and provides child welfare and foster care services under Sections 300 et seq. and 16500 of the California Welfare and Institutions Code. The county child welfare division investigates reports of child abuse and provides case management and other services to help families stay together whenever possible.

Each county maintains a hotline to receive reports of suspected child abuse and/or neglect. Once a call or report is received, a child welfare social worker will evaluate the referral and find that either more information is needed or that it does not rise to the level of abuse and will be closed. If more information is needed, a child welfare social worker will go out to the child's home and assess for risk and safety factors.

When possible the child welfare social worker works with the family to find the least intrusive approach to keep the child safe while supporting the parents in ameliorating the issues that brought them to the attention of the child welfare division. If the child welfare social worker's assessment of the problem indicates that formal court intervention is needed, the child may either be removed from or remain in the home while court oversight is requested through the juvenile court dependency system. Child welfare services are provided using a family-focused, needs-driven approach.

When children are removed from the care of their parents by the juvenile court, the child welfare social worker provides family reunification services based on individualized case plans that will support safe return of children to their parents, with specified exceptions in situations involving severe abuse of children under age three. The child welfare social worker is responsible for reporting on the progress of the family to the court six and 12 months after a child's removal from the parents, with the court authorizing reunification at any point the parents have demonstrated the ability to safely care for their children. After 12 months, the court may hold a permanency planning hearing to determine an alternate permanent family for the child through adoption or guardianship. Children who remain in foster care after they turn 18 years of age, may be eligible for extended foster care services up to age 21 as well as transitional housing and other services up to age 24, and retain eligibility for Medi-Cal until they reach age 26.

COUNCIL PURPOSE AND STRUCTURE

The California Child Welfare Council (Council) was established by the Child Welfare Leadership and Accountability Act of 2006 (Chapter 384, Statutes of 2006). The Council serves as an advisory body that is charged with developing recommendations to improve outcomes for children and youth in the child welfare system through increased collaboration and coordination among the programs, services, and processes administered by the multiple agencies and courts that serve children and youth in California's child welfare system.

OUR VISION

Every California child lives in a safe, stable, permanent home, nurtured by healthy families with the capacity to meet the child's needs and support the child's well-being, and is prepared for the transition into adulthood and becoming a contributing member of society.

OUR MISSION

We provide an effective, collaborative forum for the three branches of government, foster youth and their families, and key stakeholders to advocate for effective and promising strategies and adequate resources to improve outcomes for children, youth and families involved with or at risk of involvement with the child welfare system.

The Council meets quarterly under the leadership of its Co-Chairs: Diana Dooley, Secretary of the California Health and Human Services Agency, and Vance Raye, Administrative Presiding Justice of the Third District Court of Appeal. Additionally, the Council is comprised of members representing a broad spectrum of agencies, advocates, and consumers involved in the child welfare system. The Council's structure encourages participation by Council members and other stakeholders, both during these quarterly meetings and in between through the standing committees and task forces.

STANDING COMMITTEES

Prevention and Early Intervention & Citizen Review Panel

- Identifies and promotes services and support systems that prevent the need for families to enter the child welfare system.
- Serves as the Citizen Review Panel required of agencies receiving funds under the federal Child Abuse Prevention and Treatment Act.

Permanency Committee

- Identifies and recommends strategies to remove barriers that keep children in foster care so that they do not grow up in temporary homes but rather have permanent, nurturing families.

Child Development and Successful Youth Transitions Committee

- Identifies and advocates for services to ensure that the health, mental health, educational and social development needs of foster children can be met, and that older foster youth can be prepared for successful transition to adulthood.

Data Linkage and Information Sharing Committee

- Identifies and shares ways that data can be accessed across major child-serving agencies to provide essential information to those involved in the care of foster children and to measure foster children's outcomes from the services they receive.

Steering Committee

The Steering Committee provides Council staff with ongoing assessment of the work of the Council and its Committees and Task Forces, gives guidance to Council staff regarding Council agendas prior to approval by Council Co-Chairs, and advises Council staff regarding Council membership to promote active participation.

Council Partners

- Former foster youth
- Parents
- Service providers
- Educators
- Advocates
- Researchers
- Leaders from all three branches of government at the state and local level
- Other stakeholders

TASK FORCES

Priority Access to Services and Supports Task Force

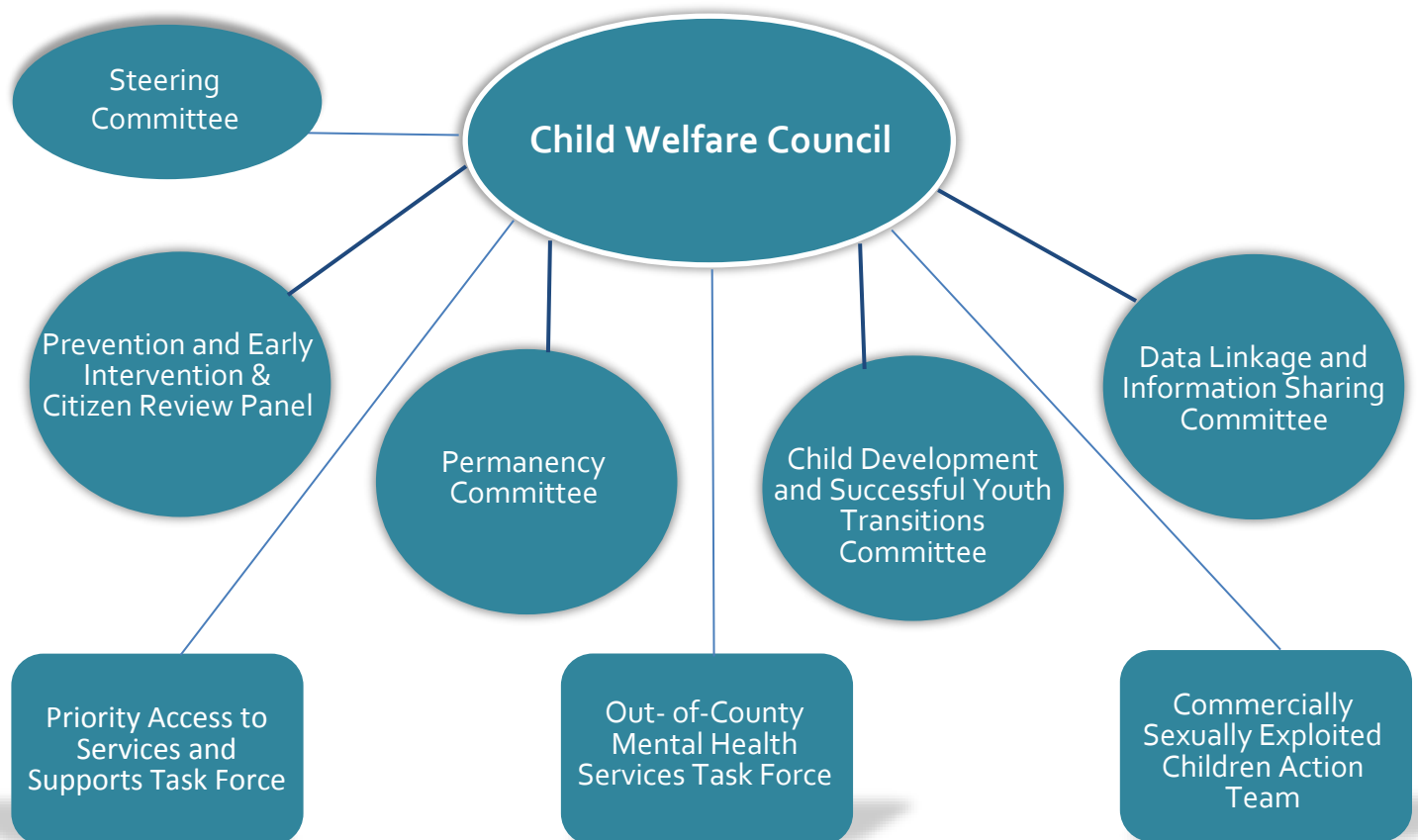
- Examines how parents of foster children who have a reunification plan can receive priority access to services they need in order to have their children safely returned home, including services across multiple systems.

Out- of-County Mental Health Services Task Force

- Advocates for a system that ensures access to mental health treatment for foster children is not compromised when they reside outside their county of court jurisdiction.

Commercially Sexually Exploited Children (CSEC) Action Team

- Is engaged with system partners in developing an infrastructure for serving children who are victims or at-risk of becoming victims of commercial sexual exploitation, focusing on children in foster care.



COUNCIL GUIDING PRINCIPLES

1

Collaboration is essential among the three branches of government, foster youth and their families and key stakeholders to achieving improved outcomes for children, youth and families.

2

Accountability for child, youth and family outcomes is shared between federal, state, and local governments and among multiple agencies, the courts, community partners, families, and youth.

3

Engaging families and youth in the development, implementation and evaluation of services, programs, and policies is essential to achieving improved system outcomes.

4

Sharing data and information across governmental jurisdictions, agencies and the courts promotes more informed program planning, development and evaluation. At the local level, it enables the linkage of children, youth and families to appropriate community services and supports.

5

Best and promising practices should be replicated statewide where appropriate and possible.

6

Maximizing and using multiple funding sources flexibly across systems provides resources needed to meet the comprehensive and complex needs of children, youth and their families.

7

Recommendations will be culturally appropriate, strength-based, evidence-informed, and outcomes-driven to ensure that all children, youth and their families are treated fairly and equally without regard to age, race, gender, sexual orientation, and ethnicity.

PREVENTION AND EARLY INTERVENTION

The Prevention and Early Intervention Committee identifies and promotes services and support systems that prevent the need for families to enter the child welfare system. The responsibility of a Citizen Review Panel, mandated under federal law, has been incorporated into the Committee, and serves in a statewide capacity as one of California’s three panels. The Prevention and Early Intervention Committee is led by Dr. Kathryn Icenhower, Chief Executive Officer and co-founder of the SHIELDS for Families and David Swanson Hollinger, Senior Program Manager at the County of Ventura Human Services Agency.

2016-2017 Activities and Accomplishments

Since taking on the responsibilities of the statewide Citizen Review Panel, the Council’s Prevention and Early Intervention Committee has focused on a review of policies and systems that are needed not only to facilitate *prevention* of child abuse and neglect, but also *promotion* of health and well-being for all children and families. The Prevention and Early Intervention Statewide Citizen Review Panel’s (PEI-CRP) efforts to date have focused on two broad areas:

1. Statewide quality and uniformity of prevention practice.
2. Adequate resourcing/financing of prevention efforts.

The PEI-CRP increased representative and diverse “voices” on the Committee by adding an additional family member, family advocate, lawyer, education administrator and county child welfare leader. The child welfare leader also agreed to co-chair the Committee.

As mandated by federal law, the PEI-CRP presented its recommendations to the Office of Child Abuse Prevention and the California Department of Social Services (CDSS) leadership in February 2017. This year’s recommendations were:

1. Disseminate and integrate the core elements, strategies and resources of the Child Welfare Prevention Toolkit in the ongoing improvements to the California Child Welfare System, and
2. Incorporate the Prevention and Early Intervention Statewide Citizen Review Panel prevention and promotion efforts in the Continuum of Care Reform rollout.

Additionally, this year the Committee identified and reviewed six models and philosophies of prevention practice that are in current use across the country and generally recognized to have significant positive impact on the prevention of child

abuse and neglect, as well as on family preservation and reunification. These include:

- Differential Response Framework;
- Strengthening Families;
- Standards of Quality for Family Strengthening;
- Essentials for Childhood;
- Core Practice Model; and
- New Jersey Standards for Prevention

The Committee analyzed each model and developed a matrix to identify key common elements across these models, as well as those essential elements unique to each model of practice. In addition to the key components, the Committee identified beliefs critical to the effective implementation of prevention programming in all communities:

- The ultimate goal for any community is to have safe, stable, and nurturing families.
- All children must be kept safe from abuse and neglect, and thriving.
- Strategies are most effective when they target children, families, and communities and all are valued, respected, and have a voice.
- All entities that participate in prevention must work closely together, understand each other's roles, share information and training, and view the system as starting with prevention and early intervention, continuing through permanency and after-care.
- From a systems perspective, robust prevention practice in child welfare produces significant savings in terms of both the human and financial costs averted.

The Committee recommended that these key elements of child welfare prevention practice guide program design, service delivery, and evaluation of effectiveness, at both the state and county levels for child welfare agencies and partner providers. They should also guide related funding and resource allocation priorities. Ultimately, to reduce the incidence of child abuse and neglect, and prevent out of home or out of family placements, the Committee recommended that a long-term, collaborative investment in effective prevention practice be implemented across systems throughout the State of California.

The PEI-CRP also developed the Child Welfare Prevention Toolkit, comprised of the Child Welfare Prevention Core Elements Framework and Child Welfare Prevention Action Guide. The Framework consolidates core elements of child welfare prevention practice that can be consistently and uniformly utilized by

state and county child welfare agencies and partner providers. The Action Guide is a compendium of resources that reinforces the Framework, including specific best practice examples for each of the core elements. The Action Guide also contains cross-walk resources, as well as web links and publications that users of the Framework can access.

All entities that participate in prevention are more successful when they partner with each other, understand each other's roles, share information and training, and view the system as starting with prevention and early intervention, and continuing through permanency and after-care. From a systems perspective, robust prevention practice in child welfare leads to better long-term outcomes for children, families, and communities, while generating significant financial savings. This is consistent with the values of the Child Welfare Council, statewide standards and initiatives, and the federal standards under the Child Abuse Prevention and Treatment Act (CAPTA).

2017-2018 Goals and Objectives

For the 2017-2018 year, the Prevention and Early Intervention Committee will focus on the following goals:

- **CAPTA Implementation:** As outlined in the Child Abuse Prevention and Treatment Act, each year the PEI-CRP presents recommendations to the Director of the CDSS, following review and discussion with the Child Welfare Council. In the next phase of its work, the PEI-CRP will promote and disseminate the Prevention Toolkit to key stakeholders while highlighting new opportunities and available resources.
- **Further investigating connections between parental substance abuse and the Child Welfare System.** The Prevention and Early Intervention Statewide Citizen Review Panel will continue to pursue the Council's interest in the role of substance use disorders as a contributor to child abuse and neglect, and make recommendations on the effective policy, program and practice interventions to improve child, family and community well-being.

PERMANENCY

The Permanency Committee identifies and removes barriers, and recommends best practices to achieve speedy permanency for all children in foster care. Robert Friend, Director of the National Institute for Permanent Family Connectedness with Seneca Family of Agencies, and Carrol Schroeder, Executive Director at California Alliance, co- chair the Permanency Committee.

2016-2017 Activities and Accomplishments

The Permanency Committee's work plan focuses on three primary goal areas:

1. Increasing the number of children who are safely reunified with their parents;
2. Decreasing time to permanency including reunification, adoption, and guardianships; and
3. Increasing permanency outcomes for older foster youth.

Increasing the number of children who are safely reunified with their parents:

The Committees activities have focused on Judge Leonard Edwards' efforts to expand the number of Dependency Drug Treatment Courts. Dependency Drug Treatment Courts are a family reunification program designed to address the issues of parents whose children have been removed from the home by the county because of the parents' abuse of drugs or alcohol. Participants who qualify for acceptance into these programs must comply with specific requirements which include frequent and random drug and alcohol testing, individual and group counseling, regular court appearances, and attendance in perinatal or parenting classes.

The Dependency Drug Court program is a collaborative effort that includes the Social Services Agency, the Health Care Agency, the County Counsel, the Public Defender, the parents' retained legal counsel, and the law offices retained by the county to provide legal representation for the children.

The goal is to provide parent(s) with the necessary parenting skills and substance abuse treatment. This would allow children to remain safely in their care and to help decrease the number of children placed in foster care. Currently, there are 33 Dependency Drug Treatment Courts in the Superior Courts of 25 counties.

Decreasing time to permanency including reunification, adoption and guardianships:

One objective related to decreasing time to permanency is supporting meaningful engagement and relationship building between youth, families, and all juvenile court stakeholders. Engagement behaviors that are part of the Child Welfare Core Practice Model have been provided to the courts and the Committee is awaiting approval for inclusion of engagement behavior in basic training for dependency court personnel.

The Judicial Council and the California Department of Social Services (CDSS) convened a team of trainers, which included Court Appointed Special Advocates (CASA) and the Seneca Family of Agencies to provide training in four sites across California on Continuum of Care Reform implementation. Kelly Beck, of Seneca Family of Agencies, provided an interactive, hour-long practice training portion of the full day's agenda addressing "Ingredients and Process for Successful Family Finding and Engagement." Highlighted during this session were current outcomes for youth without family, healthy development for all youth, the importance of social capital and family connections, as well as a deeper understanding that children in care are suffering from unresolved grief, which is demonstrated outwardly as "behaviors." Also included was a discussion of the importance of paternal involvement, relative notification, and an overview of all "family focused" legislation, including Reasonable Efforts and Fostering Connections.

A second objective of decreasing time to permanency focused on the role of reasonable efforts. Kelly Beck, and Permanency Committee co-chair Bob Friend co-authored *How Reasonable Efforts Leads to Emotional & Legal Permanence*, published in the Capital University Law Review, 45 Cap. U. L. Rev. 249 (2017). The article details how the leadership and oversight provided by courts via reasonable efforts findings, combined with the innovative practices of child welfare agencies, advocates and partners, can advance and secure the safety, permanence, and wellbeing of the children, parents, family members, and communities they serve.

Additionally, the Committee focused on the need for urgency in permanency services. Gail Johnson-Vaughn, Chief Permanency Officer at Families NOW, participated on the stakeholder workgroup convened to identify barriers to the provision of mental health services by mental health professionals, with specialized training in adoption or permanency clinical issues, as part of the implementation of Assembly Bill 1790 (Chapter 766, Statutes of 2014). The stakeholder workgroup developed recommendations, which CDSS adopted and disseminated through the release of the All County Information Notice I-26-16.

Ms. Johnson-Vaughn presented an Implementation Guide and Toolkit developed by Families NOW to assist agencies and mental health professionals in implementing the guidance in the All County Information Notice.

The Committee also discussed that, as a result of the passage of AB 1790, California was selected, among seven other states, to participate in two pilot, evidence-informed, web-based trainings, which build the competency of child welfare and mental health professionals. The National Adoption Competency Mental Health Training Initiative is a federally funded cooperative agreement awarded to the Center for Adoption Support and Education. The first training, designed for child welfare professionals, launched in April 2017, and the second training, designed for mental health professionals, is scheduled to launch in 2018.

Increasing permanency outcomes for older foster youth:

The Committee began collaborating with the Child Development and Successful Youth Transitions (CDSYT) Committee to develop a model protocol for a multi-system response to serve the needs of youth who run away from foster care. The Committee is particularly concerned about the relationship that may exist between runaway behavior and youth permanency, and how that can be addressed. The committees are currently editing the draft of a working proposal for the Council and plan to present it at the September 2017 Quarterly Meeting.

2017-2018 Goals and Objectives

For the 2017-2018 year, Permanency Committee will further build on their committee goals through the following objectives:

Increasing the number of children who are safely reunified with their parents:

- Creating a collaborative research agenda regarding families in reunification;
- Expanding Dependency Drug Treatment Courts; and
- Promoting child and family teaming.

Decreasing time to permanency, including reunification, adoption and guardianships:

- Promoting meaningful engagement and relationship building among youth and families and all juvenile court stakeholders;
- Influencing data collection to track time to permanency; and
- Stressing the need for urgency in permanency services, including concurrent planning.

Increasing permanency services for older youth:

- Following legislation on permanency services, including implementation of Public Law 133-183 which improves efforts to improve permanency outcomes for older children in care by eliminating the use of other planned permanent living arrangements as a permanent plan for children under 16 years of age;
- Ensuring cross-over youth and those youth in probation supervised foster care are achieving permanency;
- Ensuring the Extended Foster Care program is being used for its intended purpose for only those youth who do not have any caring, committed adult permanency options; and
- Exploring relationship between older youth permanency and runaways from foster care, and develop guidance based on findings.

CHILD DEVELOPMENT AND SUCCESSFUL YOUTH TRANSITIONS

The Child Development and Successful Youth Transitions Committee (CDYST) is a committee comprised of state staff, advocates and local stakeholders who are committed to identifying gaps or challenges to child development or successful transition to adulthood. They identify issues, develop intervention strategies and ensure statewide implementation of child welfare programming for foster and transitioning youth. The Child Development and Successful Youth Transitions Committee is co-chaired by Gordon Jackson, Director of the Coordinated Student Support Division at the California Department of Education, and Rochelle Trochtenberg, California Foster Care Ombudsperson at the California Department of Social Services.

2016-17 Activities and Accomplishments

The CDSYT Committee accomplishes its established goals through a work group structure. This year the areas of focus included the following:

- Monitoring the implementation of an improved policy for prescribing psychotropic medications for foster youth;
- Participating in California Department of Social Services (CDSS)-sponsored policy discussions aimed at supporting the healthy sexual development of foster youth;
- Developing model protocols for addressing the issue of foster youth who run away from their placements; and
- Developing model protocols for public agencies to prioritize employment of former foster youth.

Psychotropic Medication:

The Psychotropic Medications Implementation workgroup formed in February of 2016 to address and implement the following legislation, passed in 2015: Senate Bill 238 (Chapter 534, Statutes of 2015), Senate Bill 319 (Chapter 535, Statutes of 2015) and Senate Bill 484 (Chapter 540, Statutes of 2015). Additionally, the work group is now monitoring the progress of the state approved Quality Improvement Project plan. The Quality Improvement Project: Improving Psychotropic Medication Use in Children and Youth in Foster Care is a collaborative effort, between CDSS and the Department of Health Care Services (DHCS), to address issues related to foster youth's use of psychotropic medications.

In February 2017, twenty-seven counties signed the Global Data Sharing Agreement. This will provide the platform to allow counties to more effectively monitor the use of psychotropic medication among children in foster care. The work group continues to focus on exploring best practices for providing mental

health services to youth in foster care, including counseling, therapy, and, when needed, psychotropic medications.

Accomplishments from the past year include:

- Developing a training curriculum, per the requirements of Senate Bill 238 (Chapter 534, Statutes of 2015), regarding foster children and psychotropic medications, trauma, substance use disorder, and mental health treatments. This curriculum is now available as a 1-day in person training or a 90-minute eLearning. The materials included in the training can be viewed at the CalSWEC Toolkit, here: <http://calswec.berkeley.edu/toolkits>.
- Developing a methodology for selecting group homes requiring additional review, as per Senate Bill 484 (Chapter 540, Statutes of 2015), in partnership with CDSS's Child Welfare Data Analysis Bureau.
- Identifying that required additional review, based on the previously mentioned new methodology. The Community Care Licensing Division at the CDSS completed inspections between November 2016 and January 2017. Statewide inspections included staff interviews, child interviews, and file reviews for 206 group homes identified to be within the 75th percentile relative to the home's Rate Classification Level for their utilization of psychotropic medication usage. The committee is currently formulating a report of the results.
- Supporting implementation of the CDSS and DHCS data match, which combines foster youth data with paid claims on psychotropic medications. Counties have the option to opt into one of two different data sharing agreements so that they may receive non-aggregate data about their youth prescribed medications. At this time, 47 counties have signed on to one of the agreements.

Healthy Sexual Development of Youth in Foster Care:

The CDSYT Committee work group on Healthy Sexual Development of Youth in Foster Care was formed to explore the topic of how child welfare systems can better support and promote healthy sexual development of foster youth. This topic stemmed directly from the personal stories, statements, and concerns expressed by former foster youth regarding the barriers they have experienced within the current system, and the lack of policies and practices to address young people's healthy sexual development.

In February 2016, the CDSS along with stakeholders, formed the Healthy Sexual Development workgroup. This workgroup met to address concerns regarding youth and non-minor dependents in care and their reproductive health. The Healthy Sexual Development workgroup met several times between the months of February and October of 2016 to create a statewide plan for preventing unintended pregnancy among California's foster youth and to create various accompanying materials.

In August 2016, "*California's Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependents*" was posted via All County Letter 16-88. The workgroup also assisted the California Department of Social Services with creating a youth brochure about reproductive health rights, and questions to ask a provider, caregiver or other trusted adult. The CDSS has also created a webpage, which houses these materials, at <http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Development-Project>. The Department will be reconvening the Healthy Sexual Development workgroup in October 2017, to begin work required by the passage of Senate Bill 89(Chapter 29, Statutes of 2017). This bill would require, youth in foster care 10 years or older to receive comprehensive sexual health education including information on reproductive and sexual health care, including, but not limited to, unplanned pregnancy prevention and abstinence. This work will include developing a curriculum about reproductive health, which may be provided to case managers, caregivers and other individuals who work with foster youth. A new All County Letter will soon be released regarding new activities of social workers required by Senate Bill 89. Social workers will now be required to annually review case plans for youth ages 10 and older, documenting whether they have received reproductive health education through their school or by other means.

Model protocols for responding to foster youth who run away from their placements:

Based on guidance from the U.S. Department of Health and Human Services through an Administration for Children and Families Letter dated November 4, 2014, the CDSYT Committee formed a work group to develop a model protocol for a multi-system response to serve the needs of youth who run away from foster care. The initial steps included gathering data on what is known about this population, including age, gender, placement prior to running away, and number of previous placements.

The protocol will cover topics including:

- Mental health services for runaway youth as part of the service array;

- Case studies presenting real world examples on the importance of the protocol;
- Methods to make it easier to find a runaway youth;
- A clear message to foster youth that the child welfare agency cares; and
- Outreach to community agencies to collaborate on finding youth and providing safe placements.

The protocol will connect to the permanency work that is under development as part of the Continuum of Care Reform effort, the Engagement-Oriented Practice initiative, and the work of Families NOW and the Family Finding Institute at Seneca Family of Agencies.

Model protocols for public agencies to prioritize employment of former foster youth:

The CDSYT Committee formed a work group to develop a model for state and local public agencies, to provide foster youth and former foster youth seeking employment, a type of credit, similar in concept to Veterans' credits, in the civil service and merit system processes. Eight counties currently provide special consideration for former foster youth who otherwise meet all criteria for employment. The work group did further research and information gathering about what works, and doesn't work, in the counties that implemented such policies. The CYDST presented the Model Policy for Priority Hiring of Foster Youth to the full council in March 2017 and continues to review and include suggestions made by the council.

2017-2018 Goals and Objectives

For the 2017-2018 year, the CDSYT Committee is in the process of determining their goals. The following are a list of potential goals and objectives that may be included:

- Developing policies for working with families who experience trauma.
- Creating child and family teams/family team meeting implementation with youth and families.
- Publishing a model protocol for runaway foster youth.
- Continuing to track Psychotropic Medications and the past years related work.
- Working to address services for the 0-5 population in foster care.

- Developing methods for being more inclusive of the LGBT community in the updated policies and trainings for Healthy Sexual Development and Pregnancy Prevention for Youth in Foster Care.
- Integrating All County Letter 16-82 policies and practices into the Community Care Licensing regulations and program guidelines regarding reproductive and sexual health care and related rights for youth, and developing formalized agreements with the training academy for specialized trainings.
- Tracking Assembly Bill 245, which would require that case plans be updated yearly to indicate that the case management worker has provided the youth or non-minor dependent, 10 years of age and older, information that he or she may access age-appropriate, medically accurate information about reproductive and sexual health care. In addition, developing a method to ensure youth know about their rights through dissemination and measuring the youths' awareness and knowledge.

DATA LINKAGE AND INFORMATION SHARING

The purpose of the Data Linkage and Information Sharing (DLIS) Committee is to support the integration of information across major child-serving agencies (e.g., child welfare, health care services, education, vital statistics, and substance use) and to inform services at the individual and systems levels. Linked data provides caregivers, social workers, multidisciplinary teams and courts with a crucial means to ensure continuity of care for children, youth, and families. The Committee also helps develop essential tools to measure outcomes across systems at the state and local levels, which is critical to improving access to and the quality of services. Dr. Daniel Webster, principal investigator of the Child Welfare Indicators Project at UC Berkeley, and Alicia Sandoval, Staff Services Manager for the Child Welfare data Analysis Bureau within the California Department of Social Services, co-chair the Data Linkage and Information Sharing Committee.

Activities and Accomplishments

In 2016-2017 DLIS continued collaborative efforts to increase data linkage across major child serving agencies.

- **Revised and updated the “Statement of Information Sharing, Data Standardization and Interoperability.”** The updated document reflects more timely technical language, concepts and recent developments such as the new federal final rule on Comprehensive Child Welfare Information Systems. The Committee presented the document to and received endorsement from the Child Welfare Council at the December 2016 meeting.
- **Collaborated with Permanency Sub-Committee.** Conducted new permanency analyses as well as update and revise a report on permanency outcomes for foster youth.
- **Promoted ongoing collaboration.** Collaborated with state agencies, the courts, counties, philanthropy, and academia to promote data linkages that provide further knowledge about California’s children and families.
- **Development of outcome measurement across systems at the state and local levels.** Committee members contributed toward the development of outcome measures across systems (e.g., children in foster care on psychotropic meds), as this is critical to improving the quality of and access

to services and supports for children, youth, and families at risk of or involved with the child welfare system.

- **Continued efforts toward linking data across major child serving agencies.** These efforts provide information around child welfare, education, health, mental health, and alcohol and drugs, in order to give caregivers, social workers, multidisciplinary teams, and the courts the ability to ensure continuity of care and services for children, youth, and families.
- **Participated in national Data Leaders Group conversations and meetings.** Meetings were convened by Casey Family Programs to discuss vital issues related to linkages and application of administrative data (e.g., predictive analytics, federal registers, and final rules on child and family service review outcomes and Comprehensive Child Welfare Information Systems).
- **Continued to provide updates on national, state and local data sharing initiatives.** Also provided updates on significant news related to the agile procurement approach being employed in the development of the state's new child welfare administrative data collection system.

During committee meetings, the DLIS Committee provided updates on critical data issues and acted as a forum for presenting, discussing and disseminating successful data linkages and information sharing efforts. Key topics discussed by the Committee included:

- A presentation from Professor Mark Courtney of the University of Chicago on recent data from the CalYOUTH study of children in extended foster care;
- Hacking Foster Care in California – Digital Innovation to Benefit Children and Youth in Care;
- Mental Health Service Utilization: Children/Youth in the Child Welfare System;
- Child Protection Involvement among Young Adults Receiving Homeless Services: Preliminary Findings from Linked Homeless Management Information System & Child Welfare System/ Case Management System data;
- County to County Flow of Youth Involved in Child Welfare in the Bay Area - 2012 to 2016; and

- The Foster Focus Data System: Integrating Child Welfare and Education Data.

2017-2018 Goals and Objectives

For the 2017-2018 year, the Data Linkage and Information Sharing Committee will focus on the following goals:

- Promoting data linkages and collaborating with multiple stakeholders to promote interoperability of data across service systems and data exchanges.
- Exploring opportunities to enhance information sharing, including learning from practices outside of health and human services. The Committee will also work to identify and provide localized support, guidance, and technical assistance to local courts and counties to overcome barriers to information sharing and advance interoperability.
- Networking with experts from multiple service systems, learning from their efforts, and providing a forum to discuss the opportunities and challenges to data linkage projects, data integration, and information sharing.
- Participating in statewide interoperability planning taking place through the California State Systems Interoperability and Integration Project, including consultation with Assembly Human Services Committee or other staff contemplating or developing legislation on interoperability and information sharing.
- Supporting the coordination and focus of state investments on data and information resources, including identifying funding sources for data linkages, and the continued endorsement of the State's Health Information Exchange goal of Personal Health Records for Children in Foster Care.
- Providing support to other Council subcommittees regarding questions and needs they may have for data that would inform and enhance their respective goals and objectives by providing consultation, data analysis, and technical assistance.

PRIORITY ACCESS TO SERVICES AND SUPPORTS

The Council established the Priority Access to Services and Support (PASS) Task Force to develop and implement protocols that will give parents priority access to services needed to remedy the problems that led to the removal of their children by the courts. The goal of PASS is to expedite priority services to parents to have children in foster care. Services include housing, behavioral health (mental health and substance abuse treatments), corrections/probation, and self-sufficiency/employment needs. Dana Blackwell, Senior Director of California Strategic Consulting at Casey Family Programs, and Frank Mecca, Executive Director of the County Welfare Directors Association of California, co-chair the PASS Task Force.

2016-2017 Activities and Accomplishments

Over the last year, the work of the PASS Task Force has been beta testing a process at the Ventura County Human Services Agency and Behavioral Health Department. Ventura County was selected based on their history of local innovation and collaboration across child and family systems of care. Additionally Ventura County demonstrated strong commitment, by the leadership of County Departments of Child and Family Services (CFS) and Ventura County Behavioral Health, to improving services and quality of care to families served, as well as a willingness by the leadership of Gold Coast Health Plan and Beacon Health Services (the Behavioral Health Managed Care Organization in Ventura) to collaborate.

A summary of the timeliness of services within the Ventura County PASS Program include the following:

- 83% of parents were screened, with (85% within 5 working days);
- 87% had appointments in 5 working days of screening;
- 69% of the parents with appointments had assessments completed;
- 85% of those with assessments were linked with services in 5 working days; and
- Increasing the time frame to 7 working days leads to a rate of 88% for number of assessments conducted.

The opportunity to participate in the PASS beta testing afforded Ventura County's Human Services Agency and Behavioral Health Department an opportunity to put into action a more robust system of care for parents involved in the child welfare system. Prior to implementing PASS, families were reliant on existing contracts, which did not always address the trauma that parents had experienced as children or as adults. Through PASS, parents in reunification were offered priority access

to a therapeutic experience that was, for many of these parents, the first time they have been able engage in treatment for themselves. This beta test operationalized their commitment to serving the entire family and the rejection of treatment focused on the child only.

2017-2018 Goals and Objectives

For the 2017-2018 year, the PASS Task Force will work with Ventura County on the next steps including focus on the following goals:

- Following PASS parents for one year to track impact over time.
- Expanding PASS to all parents in child welfare, not just Family Reunification parents
- Planning to address Alcohol and Other Drugs capacity and thereby the Medicaid priority population rules.
- Assessing and maximizing the availability of trauma informed, quality of treatment services, as well as coordination of care.
- Adapting PASS approach to expedite access to specialty mental health services for children and youth. Ventura County submitted a proposal to the Mental Health Services Act Oversight and Accountability Commission (MHSOAC) for catalytic funding through Innovation Mental Health Services Act. MHSOAC approved the funding proposal in May 2017 and full implementation is targeted for early 2018.
- Revising business processes to ensure smoother transitions between different staff within County Department of Child and Family Services (CFS) and between CFS with Ventura County Behavioral Health and Beacon.
- Coordination with IT to automate exchange of client status data across all three agencies.

OUT OF COUNTY MENTAL HEALTH

The Out of County Mental Health Services Task Force provides guidance on implementing presumptive transfer for children and youth in the foster care system who have been placed out of their county of residence, in order to receive specialty mental health services. Dr. Karen Baylor, Deputy Director of mental health and substance use disorder services at the California Department of Health Care Service, leads the Task Force.

2016-2017 Activities and Accomplishments

The Out of County Mental Health Services Task Force has spent the majority of this year discussing the implementation of Assembly Bill 1299 (Chapter 603, Statutes of 2016). Assembly Bill 1299 provides that foster children, who are placed outside of their county of original jurisdiction, are able to access mental health services in a timely manner consistent with their individualized strengths and needs and the requirements of the Early and Periodic Screening, Diagnosis, and Treatment program standards and requirements. The Department of Health Care Services and Department of Social Services issued guidance for county implementation via Information Notice (#17- 032) and All County Letter (#17-77) both posted to the DHCS website on 7/14/2017.

2017-2018 Goals and Objectives

For the 2017-2018 year, the Out of County Mental Health Services Task Force will focus on the following goals:

- **Outstanding issues with Assembly Bill 1299 implementation.** There are a number of issues regarding Assembly Bill 1299 implementation that will need to be addressed in the coming year (i.e., expedited transfer).
- **Guidance for Counties:** In order to better support implementation of Assembly Bill 1299 the task force will be working on providing additional guidance to counties.

ENDING COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN

In 2011, a coalition of California organizations and providers urged the California Child Welfare Council to adopt the commercial sexual exploitation of children and its intersection with the child welfare system as a special priority. The Council accepted the recommendation and created a special work group focused on the issue of children in the child welfare and foster care system being commercially sexually exploited, or at risk of being exploited. The work group spent two years studying the issue and formulating a multidisciplinary response.

In 2013, the Council released the work group's report, *Ending the Commercial Sexual Exploitation of Children: A Call for Multi-System Collaboration in California*. The Council unanimously adopted the report's recommendations and established and appointed members to the Commercially Sexually Exploited Children (CSEC) Action Team.

In 2014, California established the CSEC Program through Senate Bill 855 (Chapter 29, Statutes of 2014), which funds counties to develop a coordinated, interagency approach to CSEC case management and service planning with a view to recognizing and treating CSEC as the victims they are. Since then, the CSEC Action Team and the State have collaborated to ensure the successful implementation of the CSEC Program and related policy initiatives. Such efforts have included everything from identifying learning objectives for trainings, producing sample protocols for county adoption of the program, and educating state lawmakers and staffers about new integration requirements, such as Senate Bill 1322 (Chapter 654, Statutes of 2016). This bill, which went into effect starting January 1, 2017, renders the charges of prostitution and loitering with intent to commit prostitution inapplicable to minors.

The CSEC Action Team's productivity is due in large part to the deep commitment of its leadership. At the center are Co-Chairs Diana Dooley, Secretary of Health and Human Services; Leslie Heimov, Executive Director, Children's Law Center of California (CLC), and Hon. Stacy Boulware Eurie, Presiding Juvenile Judge, Superior Court of Sacramento. Co-Chairs Heimov and Boulware Eurie also serve on the Executive Committee, which meets to track the team's progress on a weekly basis. Executive Committee members include Chris Cleary, Judicial Council of California; CSEC Action Team staff members Kate Walker Brown and Jasmine Amons, National Center for Youth Law (NCYL); and Susan Abrams and John Skoglund, CLC. The Executive Committee regularly meets with the California Department of Social Services (CDSS) leadership, and Action Team staff have monthly meetings with the California Department of Social Services Child Trafficking Response Unit.

Finally, the CSEC Action Team is fortunate to receive meaningful advice and ideas from its Advisory Board, comprised of 10 adult survivors of childhood commercial sexual exploitation.

2016-2017 Activities and Accomplishments

In 2016-2017, the CSEC Action Team successfully carried out several major steps designed to move California towards its goal of more effectively identifying and serving CSEC as child abuse victims. Primarily, it continued its focus on supporting implementation of the state-funded CSEC Program, as well as helping counties navigate complex implementation challenges following the passage of Senate Bill 1322.

CSEC Action Team recent accomplishments include:

Best Practices and Education. The CSEC Action Team is a go-to resource for counties as they navigate and implement new CSEC program, policy, and practice requirements. Action Team staff and Advisory Board members presented at conferences and judicial trainings throughout the state, discussing changes in California policy and elevating emerging best practices from county and nonprofit partners. Additionally, many counties used the CSEC Action Team's revised Memorandum of Understanding Template to participate in Year Two of the CSEC Program.

Advisory Board. In June 2017, the CSEC Action Team celebrated the survivor Advisory Board's first anniversary. The Advisory Board is comprised of ten adult survivors of child sex trafficking and is the first state-sponsored committee of its kind. Members provide expert feedback on state and local policy and practice, improving how California responds to this population while also increasing awareness of the Advisory Board as a resource to counties. Within the last year, Advisory Board Members engaged in 17 unique consultations; shaped the Senate Bill 794 (Chapter 425, Statutes of 2016) missing/runaway youth debrief interview forms for counties; trained new judges, Court Appointed Special Advocates (CASA) staff and volunteers, high school youth, and California service and placement providers; helped update the Foster Youth Bill of Rights; provided input on CSEC training curricula for students and caregivers; and led three policy workgroups. The Hiring Survivors Work Group surveyed over 400 California entities serving CSEC and received 52 complete responses – including over 20 from child welfare agencies – that identified major barriers to hiring and maintaining survivors of trafficking on staff. The Educating Lawmakers Work Group spent a day at the State Capitol educating over 20 legislative offices on CSEC, the importance of training child-serving agents, and the CSEC Program's impact on counties. The Outreach

Work Group distributed a survey to the 20 non-CSEC Program counties to better understand their reasons for non-participation and identify what resources they need to fulfill other statewide CSEC requirements.

Technical Assistance and Analysis. CSEC Action Team staff regularly provided various CDSS units – including Child Trafficking Response Unit, Permanency, and Continuum of Care Reform-with feedback on resources and other forms of technical assistance related to county practices and major recent policy changes, including Senate Bills 855, 794, 1322, and Continuum of Care Reform.

2017-2018 Goals and Objectives

For the 2017-2018 year, the Ending Commercial Sexual Exploitation of Children Action Team will focus on the following goals:

- **County Guidance and Implementation Support.** Continuing to collaborate with the California Department of Social Services to guarantee counties receive expert, accessible, and integrated guidance and technical assistance for fulfilling all new and existing requirements regarding CSEC.
- **Centering on survivors and support the efforts of the Advisory Board.** Sharing and coordinating professional development opportunities, managing and facilitating official statewide consultation sessions, and opportunities, staffing policy project work groups, and liaising with the full CSEC Action Team.
- **Technical Assistance to the State.** Continuing to provide expert technical assistance to California Department of Social Services. Elevating and helping troubleshoot implementation challenges arising across the state. Developing resources on critical topics as identified, including harm reduction.
- **Educating Stakeholders and the Broader Public on CSEC and Critical Policy Issues.** Organizing trainings and relevant policy discussions at CSEC Action Team meetings. Highlighting opportunities for Advisory Board members to provide feedback and host trainings and/or webinars. Discussing policy changes and emerging best practices through trainings, presentations, and conferences throughout California and nation

COUNCIL MEMBERSHIP

1. Diana Dooley, Co-Chair	Secretary, Health and Human Services Agency
2. Hon. Vance Raye, Co-Chair	Administrative Presiding Justice, Third District Court of Appeal
3. Pam Ahlin	Director, California Department of State Hospitals
4. H.J. David Ambroz	Disney Television Group; Former Foster Youth
5. Joy Anderson	Policy Coordinator, California Youth Connection; Former Foster Youth
6. Nancy Bargmann	Director, California Department of Developmental Services
7. Vincent Bartle	Student, University of California, Berkeley; Former Foster Youth
8. Lisa Bates	Deputy Director, Housing Policy Development Division, California Department of Housing
9. Karen Baylor, Ph.D.	Deputy Director, Mental Health and Substance Use Disorder Services, CA DHCS
10. Ken Berrick	President and CEO Seneca Family of Agencies
11. Dana Blackwell	Senior Director, Strategic Consulting, Casey Family Programs
12. Hon. Stacy Boulware Eurie	Presiding Juvenile Court Judge, Superior Court of California, Sacramento County
13. Sheila Boxley	President and CEO, Prevent Child Abuse California
14. Philip Browning	Director, Los Angeles County Department of Children and Family Services
15. Mary Butler	Napa County Chief Probation Officer
16. Hon. Carolyn Caietti	Presiding Judge, San Diego Superior Court Juvenile Division
17. Hon. Kansen Chu	Member, California State Assembly
18. Rebekah Couch	Parent Advocate
19. Lori Cox	Director, Alameda County Social Services Agency
20. Paul Curtis	Executive Director, California Coalition for Youth
21. Leah Davis	Parent Advocate
22. Hon. Leonard Edwards (Ret.)	Retired Judge, Superior Court of California, Santa Clara County; Judicial Council/CFFC Volunteer
23. Hon. Susan Eggman, Ph.D.	Member, California State Assembly
24. Patrick Gardner	Director, Young Minds Advocacy Project
25. William (Bill) Grimm	Senior Attorney, National Center for Youth Law
26. Leslie Heimov	Executive Director, Children's Law Center of California
27. Vanessa Hernandez	Legislative Coordinator, California Youth Connection; Former Foster Youth
28. Howard Himes	Director, Napa County Health and Human Services Agency
29. Martin Hoshino	Administrative Director, Judicial Council of California
30. Kathryn Icenhower, Ph.D.	Executive Director, SHIELDS for Families, Inc.
31. Gordon Jackson	Assistant Superintendent, California Department of Education
32. Hon. Hannah-Beth Jackson	Member, California State Senate
33. Jennifer Kent	Director, California Department of Health Care Services
34. Hon. Elizabeth Lee	Trial Court Judge, Superior Court of California, San Mateo County
35. Will Lightbourne	Director, California Department of Social Services
36. John Lipp	Executive Director, California Court Appointed Special Advocates
37. Camille Maben	Executive Director, California First 5
38. Aubrey Manuel	President, California State Care Providers Association
39. Frank Mecca	Executive Director, County Welfare Directors Association of California
40. Mike Minor	Director, Division of Juvenile Justice, Calif. Dept. of Corrections and Rehabilitation
41. Michael Newman	Deputy Attorney General, Bureau of Children's Justice, Calif. Department of Justice
42. Cheryl Rave	Crave Productions; Foster-Adoptive Parent
43. Terry Rooney, Ph.D.	Director, Colusa County Behavioral Health Services Department
44. Carroll Schroeder	Executive Director, California Alliance of Child and Family Services
45. Cherie Schroeder	Yolo County Foster and Kinship Care Education Program; Foster Parent
46. Hon. Shawna Schwarz	Juvenile Court Judge, Superior Court of California, Santa Clara County
47. Karen Stapf Walters	Executive Director, California State Board of Education
48. Michelle Francois Traidman	Director of FosterEd, National Center for Youth Law
49. Rochelle Trochtenberg	California Ombudsperson for Foster Youth; Former Foster Youth
50. Sarah Tyson	Dean, California Community Colleges Chancellor's Office
51. Daniel Webster, Ph.D.	Principal Investigator, California Child Welfare Indicators Project, U.C. Berkeley
52. Hon. Scott Wiener	Member, California State Senate
53. Hon. Claudette White	Chief Judge, Quechan Tribal Court, Fort Yuma Indian Reservation