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| **Problem Statement**Permanency has not been achieved for all children in care under the jurisdiction of the juvenile court. The result is devastating in that far too often youth age out of care with little or no family support and have dismal outcomes such as homelessness, arrest, conviction, poverty, and mental illness.[[1]](#footnote-1) The failure of the system to achieve permanency negatively affects all children in care, with a particularly disproportionate impact on African American and Native American children.  |
| **Goals** | **Objectives** | **Action Steps** | **Timeline** | **Leads**  | **Milestones** |
| Goal 1Increase the number of children who are safely reunified with their parents. | Objective 1.1. By December 31, 2012, develop a strategic plan for statewide implementation of dependency drug courts. | 1. Determine whether or not California is selected for National Center for Substance Abuse and Child Welfare (NCSACW) technical assistance grant; the application’s stated goal will be drug court expansion.
2. If California is selected, work with grant partners to:
3. conduct a literature review as to the benefits of dependency drug courts;
4. inventory dependency drug courts statewide;
5. determine core components of effective drug courts;
6. inventory substance abuse treatment programs by county;
7. identify treatment needs by type (e.g. residential/family etc.)
8. Identify number of parents that would be drug court eligible.
9. Identify court and treatment costs related to drug court and treatment resource expansion.

Make legislative, policy, and fiscal recommendations to the California CWC to implement drug courts statewide, with related sufficient and appropriate treatment options. | TBD | Peggy Bean, Rita McCabe | NCSACW notification of grant.Literature review conducted.Inventory of dependency drug courts completed.Core components of dependency drug courts completed.Inventory of substance abuse treatment programs completed.Treatment needs identified.Number of parents that would be drug court eligible identified.Court and treatment costs for expansion identified.Legislative, policy, and fiscal recommendations made. |
| Goal 2Increase the number of children who have positive permanency outcomes by developing a statewide plan that promotes early identification of all family members and tribal connections for children through the implementation of Family Finding and Engagement (FFE).  | Objective 1.1. By June 30, 2009, develop a strategic plan to implement FFE for all children upfront, and continuously, while they are in the child welfare or justice systems so that they exit the system as early as possible, with positive permanency outcomes. | 1. Identify core components of FFE.
2. Review the cost-effectiveness of FFE by bringing the Alameda County cost analysis and other fiscal impact analyses or relevant fiscal assessments to the committee.
3. Survey all counties and identify counties that are successfully implementing core components of FFE – for all children, upfront, and continuously—and can show positive permanency outcomes for children.
4. Survey all counties and identify fiscal and operational barriers to implementation of FFE.
5. Develop legislative, policy and fiscal solutions to address barriers in order to implement FFE statewide.
6. Make legislative, policy, and fiscal recommendations to the California CWC to implement FFE statewide.
 | TBD | Pat Reynolds-Harris, Bob Friend, Robin Allen | Core components identified.Literature review, counties surveyed, and data showing cost-effectiveness collected.Counties surveyed and those counties identified.Counties surveyed and fiscal and operational barriers identified.Solutions identified and barriers addressed.Recommendations submitted. |
| Goal 3Increase the number of mental health service providers with expertise and training in working with children that have suffered from abuse and neglect and their families and caregivers in order to facilitate permanency. | Objective 2.a. By December 30, 2010, working with the California Mental Health Director’s Association (CMHDA), develop strategies for contracting with and training of mental health providers to expand access to appropriately trained mental health providers.. | 1. Understand the CMDHA strategic planning process as it relates to contracting with mental health providers who are trained on permanency issues.
2. Add contract language requiring that mental health providers receive permanency training. As related to the following topics:
	* Abuse and neglect
	* Grief and loss
	* Trauma
	* Separation
	* Multiple Placements
3. Identify training and technical resources that can train mental health providers on a one-time or on-going basis in the identified areas (such as Kinship Centers, U.C.Davis, and others) to ensure that mental health providers are permanency-competent.
 | TBD | Bob Friend, Carroll Schroeder, Sophie Cabreva | Presentation by the CMHDA of their strategic planning process to the committee.Contract language added. Training and technical assistance identified.Providers of such training and technical assistance identified.  |

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| Goal 4Increase the use of participatory concurrent planning so that every child, family, and tribe has a meaningful voice in every decision regarding services, placement, visitation and permanency.  | Objective 1. By June 30, 2010, develop strategies to implement effective child, family, and tribal engagement and participation in concurrent case planning at every decision point regarding services, placement, visitation, and permanency in order to improve permanency outcomes for children. | 1. Research models of participatory case planning.
2. Identify core components of the participatory case planning model to be implemented statewide.
3. Identify counties that are implementing the participatory case planning model.
4. Identify fiscal and operational barriers to statewide implementation.
5. Develop legislative, policy and fiscal solutions to address barriers.
6. Make legislative, policy, and fiscal recommendations to the CWC to implement comprehensive participatory case planning statewide.
 | TBD | Karen Gunderson, Jonathan Pearson, Leah Davis | Research completed.Core components identifiedCounties identified.Feasibility study completed.Solutions identified.Recommendations made. |

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| Goal 5Ensure that caregivers are permanency trained and provide support to children and nonminor dependentswhich facilitates their movement into permanency whether with birth and/or extended family or other alternatives. | Objective 1. By June 30, 2011, develop strategies to recruit, train, and support caregivers who can provide or facilitate permanency for the children in their care. | 1. Identify or develop tools to assess potential nonrelative caregivers to become foster parents.
2. Identify or develop assessment tools that take into consideration a child’s needs and desires to determine if a given foster parent can appropriately care, nurture, and support the child.
3. Identify assessment tools to assess children’s satisfaction in care.
4. Working with the California Youth Connection and caregiver groups, conduct surveys and focus groups to identify what type and level of services are needed to support caregivers to make decisions that any prudent parent would in caring for and supporting permanency for a child in their care
5. Conduct a literature review to ascertain evidence –based practices that promote the recruitment, training, and retention of caregivers, including relative, nonrelative, and tribally approved families.
6. Make legislative, policy, and fiscal recommendations to the CWC to increase the number of caregivers who can provide nurturing, supportive, and permanent homes for children who cannot safely live with their parents.
 | TBD | Regina Diehl, Nory Behana, Karen Gunderson | Nonrelative caregiver- readiness tools identified or developed.Child-specific tools to assess whether a given foster parent can meet a given child’s needs.Child-satisfaction tools identified or developed.Surveys and focus groups conducted.Type and level of services identified.Literature review completed.Recommendations made. |

1. Chapin Hall Center for Children at the University of Chicago, *Midwestern Evaluation of Adult Functioning of former Foster Youth: Outcomes at Age 21*, (December 2007) (homelessness: 18% homeless at least once since exiting care, and more than half of these young adults had been homeless more than once; arrest and conviction rates: 77% of former male foster children reported being arrested (vs. 20.1%) and 54% of former female foster children reported being arrested (vs. 4.3%); 47.9% of former male foster children reported being convicted (vs. 12.1%) and 22.3% of former female foster children reported being convicted (vs. 1.3%); economic hardships: the precarious economic situation of these young adults was reflected in the material hardships they reported. Half reported experiencing at least one economic hardship, and they were more likely to experience one or more of these hardships than their peers. Also, more than 25% could be categorized as having low or very low food security. [↑](#footnote-ref-1)