

CALIFORNIA CHILD WELFARE COUNCIL
Discussion Highlights
March 2, 2016

I. Call to Order and Introductions

Secretary Dooley and Justice Raye extended a personal welcome to Council members and the public, acknowledging that many had suffered through particularly bad traffic on the Bay Bridge to get to the meeting. Justice Raye welcomed new member Joy Anderson, a former foster youth who now is the Policy Coordinator for the California Youth Connection. Secretary Dooley proudly acknowledged that Council member Rochelle Trochtenberg was recently appointed to the position of California Ombudsperson for Foster Care, joining Will Lightbourne's team at the Department of Social Services. Justice Raye then asked Council members and members of the public to introduce themselves.

II. Approval of the December 9, 2015 Discussion Highlights (Action Item)

Secretary Dooley asked for comments or suggested revisions to the December 9, 2015 Child Welfare Council Discussion Highlights. There being none, they were approved on a consensus vote.

III. Education of Youth in Foster Care

Justice Raye commented that the Council is monitoring two projects aimed at advancing education outcomes of youth in foster care. He called on Judge Stacy Boulware Eurie who provided an update on the Keeping Kids in School and Out of Court initiative (KKIS), which is entering its third year since the summit in December 2013. The Judge reported that over the last two years the KKIS Steering Committee developed plans for effective communication and provided support to the county teams. Regional convenings for the county teams were held in Anaheim (December 2015) and in San Francisco (February 2016). These convenings brought together 21 of the county teams and gave them the opportunity to get to know their neighbors and to begin making the relationships across county lines that should lead to improved services to the children and youth they are serving—particularly those who are in the juvenile dependency and delinquency systems.

Among the issues raised by some of the county teams concerns out-of-county placements in foster homes or group homes where a child with special needs, learning issues, or mental health challenges is placed by one county into another, and the new county does not have the services needed by the child, resulting in the child either not receiving the needed services or being required to travel for hours to the originating county for services. These types of issues will benefit from these county multidisciplinary teams being able to pick up the phone and call their county counterparts in the sending or receiving county to work out the problems. The KKIS project members would like these issues to also be addressed during the implementation of California's Child Welfare Continuum of Care Reform.

When the Chief Justice first launched the KKIS initiative she appointed two members of the California Blue Ribbon Commission on Children in Foster Care (BRC) as chair and vice chair (Justice Richard Huffman and Judge Stacy Boulware Eurie) to lead the new initiative to ensure that relevant issues and recommendations from the BRC (which sunsetted shortly after the launch) would be carried forward into the initiative. The initiative participants believe that they have done this by seeking improvements for all students in California in terms of reducing suspensions, expulsions, and chronic absenteeism, and improving school climate and culture, but at the same time focusing particular attention on the needs of students subject to juvenile court jurisdiction in the child welfare and juvenile justice systems.

In the coming year the initiative members will continue to visit and support the established county teams; will produce a bench book and card for all juvenile court judges on all the issues addressed by the initiative; will provide training for judges on the issues; and will develop intra- and inter-county communications on the issues. The initiative recently received a new grant from the Walter S. Johnson Foundation that will fund some robust work in the Northern California rural counties. Many of the innovations on these KKIS efforts are being implemented and are making a difference in urban areas; however, California educates the second largest

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percentage of rural minority students in the nation, with 341,491 rural students. We know that these rural parts of the state tend to have high adult unemployment and other socioeconomic challenges, along with lower expenditures per pupil in state education funding. We look forward to digging into this challenging work in the coming months.

Judge Boulware Eurie then introduced Jill Rowland, Education Program Director at the Alliance for Children's Rights, to provide an update on the Education Toolkit.

Jill reminded Council members about progress to date, starting with the Partial Credits Model Policy, which was initiated by a Council work group, followed by the Education Toolkit 1.0. The Alliance for Children's Rights and other partners have now completed the Toolkit 2.0. This version includes a new section on addressing trauma-related needs of foster youth who are often affected by the Initial abuse, neglect, or abandonment that brought them into the child welfare system, the trauma of being removed from their family, and the trauma of repeated home placement changes while in the system. The effects of trauma on learning may include decreased intellectual functioning, decreased reading ability, lower grade-point average, increased school absences, and decreased rates of high school graduation.

The new version also allows for the addition of foster youth's Local Control Accountability and Planning (LCAP) goals (page 3), a more user friendly evaluation (page 24), and information related to AB 167/216 Graduation (pages 49-55), i.e., military applications, all schools operated by the school district (including adult schools) are covered, the duty to determine eligibility retroactively, the removal of California High School Exit Examination references, and modifications to the Notification Letter to add the category of "already certified" as an option and information regarding the impact of partial credits on a four year university application.

Jill and her team at Alliance for Children's Rights are disseminating Toolkit 2.0 via e-mail with a distribution list with more than 2,100 persons receiving Toolkit updates and notices about webinars. The recipients include all AB 490 Liaisons, County Foster Youth Services Coordinators, School District Directors of Student Services, anyone who has received a training on the Toolkit, and partner agencies distribute to their membership as well, e.g., California Department of Education, California School Boards Association, California County Superintendents Educational Services Association, and Association of California School Administrators. Training on Toolkit 2.0 is provided by the Alliance for Children's Rights, Lisa Guillen from the California Department of Education, Teri Burns from the California School Boards Association, and a team of 30 volunteer attorneys from Latham & Watkins. So far over 3,100 people have been trained: 1036 on the Partial Credit Model Policy; 683 on AB 167/216 Graduation; and 1173 on the Toolkit Overview.

In addition, training has been provided at the California School Board Association Conferences in 2013, 2014, 2015; the Foster Youth Education Task Force Ed Summit in 2014, 2015, 2016; the Los Angeles County Partnership Conference; the San Diego Foster Youth Summit; the John Burton Blueprint Conference; and over 50 school districts and county offices of education across the state. Last Fall there were webinars that covered the basics, i.e., Foster Youth and their Educational Rights Holders; Immediate Enrollment; School of Origin; Partial Credit Model Policy; AB 167/216 Graduation; and Disciplinary Needs. Recordings and materials are available on the Alliance for Children's Rights website (www.kids-alliance.org/edtoolkit). This Spring there will be a series covering special topics, i.e., Early Education Needs; Writing LCAP Goals; Transition Planning; Trauma Needs; Education Evaluation; Special Education Needs; AB 379 Complaints.

Jill then described the Bonita Unified School District Pilot Project as an example of a partnership that allowed utilization of Toolkit in a real life setting in order to learn even more about what districts need to build a meaningful foster youth education program. The Bonita Unified School District is located in San Dimas and La

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Verne, with 10,000 students including 500+ foster students served each year, 50% of which reside in group homes. It has eight elementary schools, two middle schools, two comprehensive high schools, and one alternative /continuation high school.

Challenges involved in implementation of the Toolkit included:

- School Instability
 - Lack of Control: school districts are not in control of foster youth placement changes
 - Lack of Information: how often are students changing schools/districts? Where are they coming from and where are they going to?
 - Partial credits and AB 167/216 graduation certification
- Lack of a Consistent Education Decision Maker
 - Information access and sharing
 - Lack of clear lines of decision-making authority
 - Communicating with other agencies, caretakers, parents, and providers
- Trauma
 - Training, policies and practices to support “trauma-informed teaching”
 - Accessing and leveraging non-academic services and supports

The implementation steps and timeline was:

- January 2015 - ACR conceives of partnership to pilot implementation
- February 2015 - ACR approaches Los Angeles County Department of Children and Family Services(DCFS) for commitment to the pilot and to identify partner school district
- Spring 2015 - ACR approaches DCFS for commitment to the pilot and to identify partner school district
 1. July 2015 - MOU signed to create supportive relationship to work collaboratively to: build a sustainable and well-staffed foster youth education program; utilize the toolkit as a starting point to redesign and develop district policies and practices; develop data sharing, collection, and tracking systems; share information and records between BUSD and DCFS; and train DCFS recruited education rights holders.
- Summer 2015 - Monthly partnership meetings to finalize high school policies, discuss training needs, and begin discussion of data collection
- August 2015 - Training of all staff in trauma-informed teaching; new partial credits and AB 167/216 policies go live
- Fall 2015 - Development of enrollment policy to address overrepresentation of group home youth in continuation high school
- Winter 2015 - Enrollment policy goes live at one high school; ongoing monthly meetings

Key components of partnership were:

- Shared Purpose to utilize the Foster Youth Education Toolkit to help develop policies and practices in BUSD in furtherance of LCFF goals for foster youth.
- Investment and Commitment of Leadership from Superintendent Kurt Madden, Assistant Superintendent Nanette Hall, Director of Student Services Mark Rodgers, and Foster Youth Liaisons Maureen Williams and Tiffany Merrill
- Trust + Open Communication between partners facilitated by memorandum of understanding
- Flexibility + Patience in understanding practical challenges and identifying solutions that work in the community and context of BUSD
- Engaging the Community including probation, group homes, Foster Youth Services, and other stakeholders to problem solve and make changes that work

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Lessons learned so far involved:

- Trauma Informed Educators Training at the high schools and middle schools had a meaningful impact.
- Lack of education rights holders is a huge barrier; there is a need to involve the courts and children’s attorneys to address the problem.
- Education Evaluation needs to be more user friendly.
- Utilization of social work interns is a cost effective way to increase staff.
- Partial Credit Model Policy: semesters of different length and the tool had to be adjusted accordingly.

Next Steps: Toolkit 3.0 Updates

- Increased focus on needs of 3-5 year olds
- AB 379: Enforcement of foster youth education rights through the uniform complaint procedures act
- Youth/Caregiver Materials/Trainings
- LCAP Activities

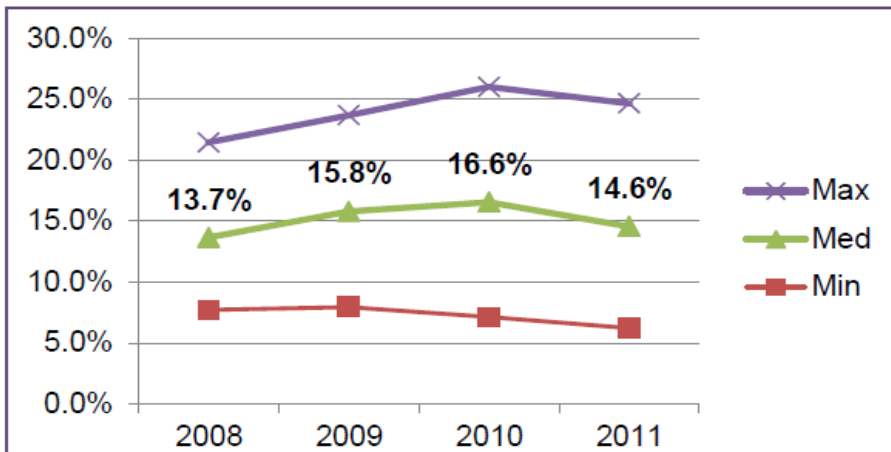
Justice Raye thanked Jill for her informative presentation, and others joined in expressing their appreciation for Jill’s leadership of the amazing work to advance the education of foster children.

IV. Update on Psychotropic Medications

Secretary Dooley reminded Council members that they had provided input to a joint Health Department- Social Service Department project to address issues related to Foster Youth’s use of psychotropic medications. She called on Pete Cervinka to make the presentation.

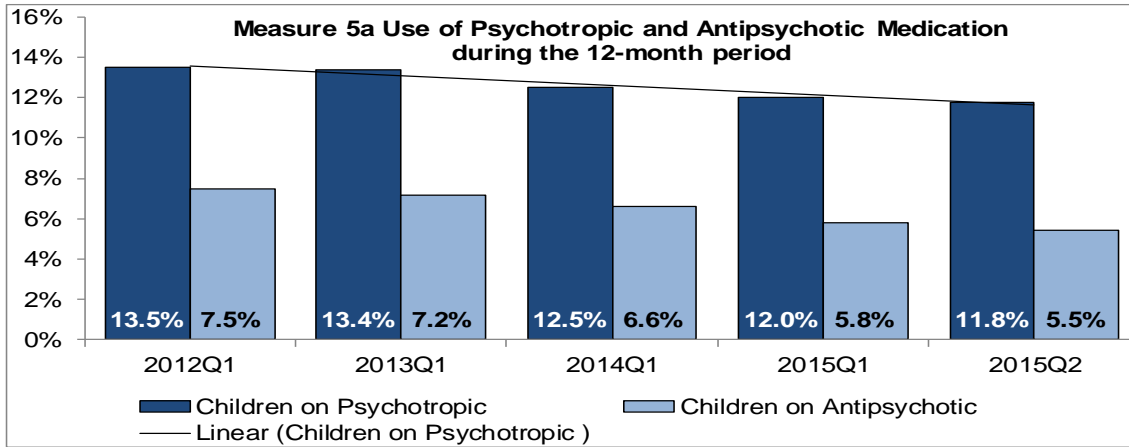
Pete provided context by defining foster care as children removed from their homes and under the care custody of the county child welfare or probation agencies. During state fiscal year 2014-51m 79,166 children less than 18 years old were in foster care for at least 30 days. He then gave a brief overview of the Quality Improvement Project (QIP), which was comprises of (1) an Expert Panel; (2) Workgroups (Clinical, Youth, Family and Education; Data and Technology; Medication Protocol; and Psychotropic Medication Legislation Implementation); (3) a Global Data Sharing Agreement; and (4) QIP Data Measures. The Department of Health Care Services was responsible for interventions and monitoring of the Drug Utilization Review Board, Treatment Authorization Requests (TARs), Public Health Nurses, Specialty Mental Health Services, and Healthcare Effectiveness Data and Information Set (HEDIS). Data informing the project included the following chart on Antipsychotic Medication Use – Nine State Summary (California excluded)

Foster Care Children/Adolescents Using AP Medications



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Data on use of Medications over time showed (*Note: Results are preliminary for most recent time periods*):



	Children on Psychotropic			Children on Antipsychotic		
	Children on Psychotropic	Children in Foster Care	%	Children on Antipsychotic	Children in Foster Care	%
2012Q1	10,515	77,653	13.5%	5,815	77,653	7.5%
2013Q1	10,226	76,576	13.4%	5,487	76,576	7.2%
2014Q1	9,792	78,049	12.5%	5,169	78,049	6.6%
2015Q1	9,512	79,303	12.0%	4,595	79,303	5.8%
2015Q2	9,317	79,166	11.8%	4,326	79,166	5.5%

The QIP also provided additional Interventions and Activities by conducting site visits to a sample of group homes to assess various processes related to use of psychotropic medications; doing case reviews to examine first incident of psychotropic medication while in foster care; preparing a statewide JV220 Reconciliation Summary Report that was distributed to all counties; and disseminated psychotropic medication data to all counties.

Pete summarized the progress to date:

- Clinical Guidelines have been developed and disseminated to Prescribers.
- Educational materials are available to youth and caregivers.
- Group Homes have received some technical assistance resource materials to facilitate improved oversight of psychotropic medication by the youth in their care.
- Counties are beginning to receive and use client data which is providing new insights.

Pete then outlined next steps:

- Begin reporting quality of care measures (HEDIS and QIP) to identify focus areas for improvement.
- Implementation of new bills passed in 2015 related to care of children in foster care, including training and oversight activities (SB 238, SB 319, SB 484).
- Continue to develop integration (policy and technical) among the various organizations that support children in foster care.
- Continue to monitor use of medication.

Pete introduced Elizabeth Harris, Ph.D., Human Services Agency, City and County of San Francisco, who provided an overview of how San Francisco is using data to inform practice through the benefits of the global MOU. To underscore the difficulty of getting useful data before the Global MOU, Elizabeth pointed out that the health

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and education passport of San Francisco's current out-of-home youth has 93 variations of the name for Adderall and 23 variations of the name for Prozac. In addition there are discrepancies between what drugs are authorized in JV-220s and the fewer number that are claimed for payment. Rates of paid claims were:

- 3.75% of all of the youth in care between 4/1/2014 and 3/31/2015 had Medi-Cal paid claims for antipsychotic medications.
- 8.79% of all of the youth in care between 4/1/2014 and 3/31/2015 had Medi-Cal paid claims for a psychiatric condition.

In a logistic regression analysis of all youth in care for at least one day between 4/1/14 and 3/31/15, race and gender did not have a statistically significant relationship with antipsychotic use after mathematically controlling for group home placements trends, which show large percentage of children on psychotropic medications. The practice implications and next steps include:

- Explore medication patterns within specific group homes.
- Conduct informed education and outreach to group homes.
- Explore strategies for dissemination to case managers.
- Use MOU data to track progress.

Secretary Dooley thanked Pete and Elizabeth for their presentations and asked for comments from Council members. Bill Grimm stated that California is a leader in addressing issues related to foster children's use of psychotropic medications, but offered the caveat that states vary in how they define who gets these medications. He suggested that when describing the problem, California should use foster children ages six and over as the total population base because there are only 202 out of the 30,000 foster children ages five and under who are on medications; by using the total foster care population as the base the percentage a more accurate picture of the degree of usage is made.

Vanessa Hernandez stated that the California Youth Connection values the data and encourages service providers to as why foster children need medication; CYC has found that often the lack of a caring adult in a child's life, who advocates on behalf of the child, can make a difference in the need for medication. Patrick noted that the data show we have an overuse problem, and Secretary Dooley cautioned that we should also pay attention to situations where children could benefit from medication but have not been provided prescriptions.

Bill pointed out that 4,300 foster youth are on antipsychotic medications and that the Judicial Council's new rules on the JV 220 should help with oversight of this population. Frank Mecca encouraged the collection of data on mental health treatment services to give a complete picture of services. Patrick agreed and said that we need to improve data collection on other services, and that the JV 220 does not provide a good understanding of what clinicians are doing.

Ken Berrick proposed that since we now have some sense of the children who are on medication, what medications they are being prescribed, and where they are living, we are in a position to do real research that can compare children with the same diagnosis who are on medication with those who are not. David Ambroz encouraged us to keep the "humanness" in the data by considering issues such as turnover of therapists and assumption that children placed in group homes need medications.

Carroll Schroeder suggested we look at the bio-social-psychological approach to treatment that was in use in the 1980s, pointing out that the date presented was startling and offered no clues as to how effective psychotropic medications or treatment is for foster children who receive these services. Leah Davis offered that parents can find the responsibility of caring for children in need of medication challenging. Terry Rooney said that in Colusa County children are always provided treatment if they are prescribed psychotropic medication.

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Secretary Dooley thanked Council members for the thoughtful discussion.

V. Citizens Review Panel Annual Report, required by the federal Child Abuse Prevention and Treatment Act

Justice Raye informed Council members that this item was originally scheduled to be an action item, but due to a family emergency Dr. Kathryn Icenhower was not able to attend the meeting and the report will be scheduled for approval at the next meeting. He then called on Sheila Boxley to remind everyone how a Citizen Review Panel works, and then report on progress to date.

Sheila expressed appreciation to Angela Ponivas, Chief of the Office of Child Abuse Prevention within the California Department of Social Services and her staff who have been very supportive of the efforts of Prevention and Early Intervention Committee, especially since undertaking the responsibilities of a statewide Citizen Review Panel (CRP). The Prevention and Early Intervention (PEI) Committee functions well as a CRP because:

- It promotes the consideration of policies, practices and procedures through a prevention lens.
- The committee membership meets and exceeds CRP requirements, assuring informed and meaningful review.
- Tapping into expertise of the PEI committee avoids duplication and promotes integration of systems.
- The committee has a broad policy perspective and recommendations could result in statewide impact.

The federal Child Abuse Prevention and Treatment Act (CAPTA) provides funding to states in support of prevention, assessment, investigation, prosecution, and treatment activities. CAPTA also lays out requirements states must meet in order to maintain eligibility for federal funding. The Office of Child Abuse Prevention administers CAPTA for the Department. Citizen Review Panels for Child Welfare were established as a requirement in the 1996 CAPTA reauthorization. The 2003 and 2010 CAPTA reauthorizations confirmed the importance of Citizens Review Panels and added requirements and specificity. Most states are required to have three Citizens review Panels, although some states have only one based on population. California is currently in compliance with three CRPs. There are two local panels in San Mateo County and Ventura County and the PEI/CRP which is the only panel in California operating on a statewide basis. Per CAPTA, we are required to meet at least quarterly (a good fit with the Committee meeting structure).

Once per year the PEI/CRP Committee produces a report containing perspectives and considerations to improve child welfare at the state level. As with all Committee products, the draft report is presented to the full Council for review and approval, then forwarded to the Department of Social Services as required under the CRP federal requirements. Within six months of receiving the report, CDSS will forward a written response to the PEI/CRP describing whether and how we will incorporate recommendations of the panel.

The PEI/CRP Committee's efforts to date have focused on two broad areas: quality and uniformity of prevention practice statewide, and on resourcing/financing prevention. Last year the CRP focused on (1) the development and dissemination of a toolkit on federal child welfare financing to better inform partners of issues and opportunities related to reform; and (2) expanded thinking on the benefit of a uniform statewide Prevention Framework. The *Toolkit on Federal Reform of Child Welfare Financing* has been widely disseminated throughout California and to child welfare leadership in several additional states. It is particularly timely and relevant now with the introduction of a child welfare legislative proposal titled the "Family First Act," by Chairman Orrin Hatch (R-UT) and Ranking Member Ron Wyden (D-OR) of the U.S. Senate Committee on Finance. Staffs for both Chairman Hatch and Ranking Member Wyden have expressed their interest in bringing this legislative proposal before the U.S. Senate Committee on Finance for its consideration in 2016 as part of a Committee markup session. As currently outlined, the legislative proposal would have two sections – one to provide funding for

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prevention services as well as other legislative changes, and one to outline federal policy around placement setting for children in foster care.

This year the PEI/CRP is continuing the work towards making a set of recommendations to support more uniform prevention practice and has developed a cross-walk of the core elements of major prevention platforms being implemented in California counties. Also, the CRP is looking at the cost of prevention through the lens of Haddon’s matrix, a public health model that focuses on health and wellness for all children and families. The PEI/CRP has made significant progress towards articulating a broad framework for statewide prevention practice. One of the tools developed by the PEI/CRP during this period is the “*Prevention Practice Core Elements—A Cross-Walk*”. It lays out how the identified core elements of practice apply to the full continuum of prevention activities. In the next phase of its work, the PEI/CRP will look closely at the role of trauma-informed systems and practice that address the impact of early, adverse childhood experiences. Of particular concern is the role of substance use disorders as a contributor to child abuse and neglect. It is anticipated that the core elements of practice will incorporate a focus on promotion of child, family, and community health and well-being, thus building resilience while mitigating risk.

VI. Continuum of Care Reform Initiative

Secretary Dooley commented that the Governor recently approved legislation sponsored by the administration to implement the Continuum of Care Reform (CCR) Initiative and called on Department of Social Services Director Will Lightbourne to introduce the topic. Will stated that the Department is making great strides in convening the many stakeholders, including many of the organizations represented on the Council, involved in its implementation under the leadership of Sara Rogers. Sarah then provided a brief overview of the vision, framework and timelines for CCR. The Vision is that:

- All children live with a committed, permanent and nurturing family
- Services and supports should be individualized and coordinated
- System focus is on achieving a permanent family and preparation for successful adulthood
- When needed, congregate care is a short-term, high quality, intensive intervention that is just one part of a continuum of care available for children, youth and young adults

The framework for implementation involves the establishment of a **State/County Implementation Team**, which includes representation from the Department of Social Services, Department of Health Care Services, County Welfare Directors Association, Chief Probation Officers of California, California Behavioral Health Directors Association and County Supervisors Association of California, as well as county representatives. There is also a **Stakeholder Implementation Advisory Committee**, which includes Providers, Youth, Caregivers, Tribes, Advocates, Counties, Legislative Staff and others.

Workgroups have been formed in the following areas: **Program & Licensing; Rate Structures; Oversight Framework; Resource Family Approval; Training; Mental Health; and Probation**. Deliverables fall into three Categories:

Program Instructions

- Interim Standards
- Regulations
- ACLs/ACINs/CFLs
- Forms
- RFA Written Directives

Capacity Building Activities

- County and Provider Implementation Guides
- Training Gap analysis
- Training Curricula
- Child Welfare Assessment Tool

Accountability & Oversight

- Accreditation Process
- License application review process
- Oversight framework/measures
- Provider Performance dashboard
- Consumer Survey

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The CCR Implementation timetable goes through June of 2018, and started with the release of the Initial All County Information Notice. It calls for stakeholder engagement throughout, and there will be ongoing legislative reports. Elements of implementation include policy and program development; rate structure development; retention and recruitment of caregivers; Resource Family approval process; training; assessment tool; an oversight and accountability framework; and data measurements and methodology.

Sara thanked Council members who are currently serving on workgroups and encouraged others who wished to join a work group to contact her. Secretary Dooley thanked Will and Sara for their leadership of this effort.

VII. Request for Volunteers to form a Work Group on Priority Employment for Former Foster Youth

Justice Raye introduced this item in which Judge Len Edwards and David Ambroz asked for volunteers to help them with a project to provide employment opportunities for former foster youth. A work group on this topic had been formed under the previous administration, but due to other priorities was not pursued. David reminded Council members that youth aging out of foster care often are underemployed or unemployed and lack families or other support systems to call on for help, and therefore they are vulnerable to poor economic outcomes. While adolescents most often find their first job through family or community connections, foster youth often do not have these types of connections, and therefore the recommendation is to establish a model policy for use by public agencies which would establish a foster youth credit in the civil service hiring process.

The Walter S. Johnson Foundation has supported initiatives that prioritize employment for former foster youth. In addition, several California counties have recognized the importance of continuing to support the foster youth formerly in their care by prioritizing employment opportunities for them. In 2006, Santa Clara County created a pathway for foster youth to enter the county workforce, and was honored with a top award by the County Supervisors Association of California. To date, 27 youth have been hired, and of these, 19 have been promoted, three remain in the entry level position, two resigned, and three were terminated.

Len and David asked for Council members to volunteer to work with them to develop a model policy that could guide policy-makers throughout the state in initiating priority employment practices in their respective jurisdictions. Specifically they want to include work with Los Angeles County. Phil Browning said he welcomed the focus on Los Angeles, and his Department has worked with the Workforce Investment Board to establish ten positions for former foster youth in the South Bay area of the county.

Leslie Heimov shared that the Children's Law Center has a program at the national level that supports former foster youth with job preparation and retention. David said that, while those services were vital, his goal at this point is to get the youth "in the door" before expanding the breadth and depth of workforce support services, especially since there is no or low cost involved. Jill Rowland indicated that the Alliance for Children's Rights would be interested in working on the project.

VIII. Status Reports from Committees and Task Forces

Secretary Dooley noted that Committees and Task Forces had submitted written reports and called on co-chairs to add comments.

▪ **Prevention/Early Intervention Committee-Statewide Citizen Review Panel (PEI/CRP)**

Please see the agenda item above for the report from this Committee.

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▪ **Permanency Committee**

Carroll Schroeder announced that Jane Troglia from CDSS will now provide staff support to the Committee.

Major activities include:

Research Convening: Judicial Council staff has not moved forward with planning for the Research Convening, which was originally scheduled for March 2016 and is now on hold. With the loss of the Judicial Council staff who previously provided support to the Permanency Committee, a new contact within the Judicial Council needs to be made in order to resume this effort.

Dependency Drug Treatment Courts: Conducting a survey of counties with DDTCs to determine how they are being sustained and will report out to Council on results of survey.

Promote Child and Family Teams: Developing as the Core Practice Model is being established.

▪ **Child Development and Successful Youth Transitions Committee**

Rochelle Trochtenberg reported the following areas of focus:

Education Work Group – Focus on issues related to implementation of the Education Rights Holder legislation: Gathering information from experts from providers, caregivers and youth; exploring how CWS/CMS can include information on Education Rights Holders. Compile and analyze information. Look for opportunities to improve ability of Education Rights Holders to support educational achievement of youth in foster care.

Housing/Runaway and Homeless Youth Work Group – Learning from the John Burton Foundation for Children Without Homes about resources available through the state’s Transitional Housing Programs administered by the California Department of Social Services (CDSS); gathering information from providers, caregivers and youth to understand the nature and scope of homelessness among youth, including youth in foster care status; exploring resources that can be available to provide support to youth in foster care or transitional housing; continuing to study housing issues and resources for transition age youth; and expanding scope to include runaway and homeless youth.

Supporting Healthy Sexual Development of Youth in Foster Care Work Group – Exploration of how child welfare systems can better support and promote healthy sexual development of foster youth. Working with the Community Care Licensing Division and Child and Family Services Division within the California Department of Social Services to provide input to regulations under development to implement the newly revised “Responsible and Prudent Parenting Standard” for foster parents and Short-Term Residential Treatment providers. Continue to work with Community Care Licensing to provide input on Regulations for implementing the Responsible and Prudent Parent Standard. Join relevant Stakeholder Groups to be formed by CDSS for implementation of the Continuum of Care Reform initiative.

Psychotropic Medications Work Group – Engaged in reviewing and monitoring the work of the Quality Improvement Project, collaborative effort led by the California Department of Health Care Services. Three products were developed by the QIP with Work Group members participating in the process: (1) California Guidelines for the Use of Psychotropic Medications for Children and Youth in Foster Care; (2) Foster Youth Bill of Rights; and (3) Questions to Ask. Continue to monitor implementation of the products.

▪ **Data Linkages and Information Sharing Committee**

Daniel Webster reported on the following activities:

Global Data Sharing Agreement – Seventeen counties have opted into the DHCS/CDSS/County agreement and CDSS has exchanged psychotropic medication data with numerous counties. Additional counties and partners anticipated to join in the coming months.

California Child Welfare Services Case Management – New System – The agile development approach for CWS-NS adopted in November 2015 is moving forward to promote cohesiveness across the organization, and better describe the goals it intends to achieve, the organization has renamed itself Child Welfare Digital Services (CWDS)... Application Program Interface (API) and Intake modules planned for contract award by May 2016.

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California Statewide HHS Open DataFest – Stewards of Change Institute is sponsoring symposia and convenings on increased access to public health, health care, human services, and other data to explore the intersection of open data and academic research and how these perspectives can drive innovation in the human services. Statewide conference is scheduled for 3/14-3/15/2016 in Sacramento.

Identify and schedule demonstrations of exemplary data tools and presentations of important topics related to linkages and the sharing of data – Presentations scheduled for 3/2/16 on Sharing Linked Psychotropic Medication Data with Counties, and Predictive Risk Modeling: A Tool for Child Protection. Sub-Committee attendees and other stakeholders are invited to suggest future presentations pertinent to sharing and joining cross-system information.

▪ **Priority Access to Services and Supports Task Force (PASS)**

Dana Blackwell and Frank Mecca reported that:

The Corrections Team is comprised of partners from the California Department of Rehabilitation and Corrections (including parole division), and also Chief Probation Officers of California. PASS Corrections partners are currently undertaking a review of the extent to which further prioritization of parents with a child in foster care is possible; of those options, which are feasible and aligned with current priorities; and what barriers to further prioritization exist.

The Behavioral Health Team is preparing to beta test a protocol in Ventura County for timely assessment, referral to services, and service delivery. The goal of the beta test is to improve timely engagement and retention of FR parents in behavioral health services in order to support improved Family Reunification outcomes. The steps to access mental health and substance use disorder services for parents who are in Family Reunification are:

- *Part I: Determining need for mental health and substance use disorder services, and referring for further assessment, if necessary. Total time: No later than 5 working days from the detention hearing; it is optimal to begin as early as possible as research shows parents to be more receptive to accepting supportive services when they are in crisis. Then five working days to begin assessment and initiate treatment services.*
- *Part II: Reunification Care Coordination. Total time: 6 - 18 months* Once the parent(s) are linked with the appropriate mental health and/or substance use disorder services, the Child Welfare Social Worker will contact said provider(s) to establish a care coordination linkage(s) and a regularly scheduled progress update and suggested action steps if parent(s) are not compliant or an emergency occurs.

▪ **Out-of-County Mental Health Task Force**

Secretary Dooley asked Patrick Gardner for comments, and he reported that the focus is on AB 1299 (Ridley-Thomas) and also on AB 1339 (Monning), which was recently introduced. Patrick commented that there are unresolved issues relating to who would make the decision to waive “presumptive transfer” (for example, would it be the court? the child welfare worker? the probation officer?) and how services would be arranged for children already placed out-of-county at the time a new policy goes into effect.

▪ **Ending Commercial Sexual Exploitation of Children (CSEC) Action Team**

Leslie Heimov reported that the CSEC Action Team’s activities in early 2016 include:

- **Survivor Advisory Board:** The CSEC Action Team and the California Department of Social Services. (CDSS) will launch the survivor advisory board in June 2016. This new advisory body will provide critical guidance to California counties with regard to survivor engagement. It will also be tasked with preparing recommendations on CSEC Action Team priorities, state policy and other topics as brought to the attention of the CSEC Action Team by counties or state agencies. Applications will be available in April.

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- SB 794 CSEC Protocols & Procedures: To support California's compliance with the federal Preventing Sex Trafficking and Strengthening Families Act (HR 4980/SB 794), the CSEC Action Team will be modifying its 2015 Interagency Protocol MOU Template to incorporate the new statutory requirements, such as documenting and reporting CSEC. The revised guidance will be reviewed by a statewide cross-agency workgroup.
- Continuum of Care Reform: As CDSS undertakes its overhaul of the foster care system, it is critical that the needs of CSEC are effectively integrated into the new regulations and guidance. To support this goal, the CSEC Action Team has coordinated two listening sessions with its members and organized a small workgroup for preparing recommendations to be finalized in late March.

IX. Public Comment and Adjournment to Committee Meetings

Justice Raye called for public comment, and the following individuals presented:

- Laurie Kappe, reported on behalf of the California Co-Investment Partnership that its Insights article on Crossover Youth has been highly acclaimed and that the next issue of Insights will feature an article on the Role of the Courts.
- Leticia Ortiz urged the Council to advocate for services to be culturally and linguistically appropriate.
- Anna Johnson, National Center for Youth Law, expressed appreciation for the work San Francisco is doing in gathering data on use of psychotropic medications by youth in foster care and the expansion of the Global Data Agreement to include Los Angeles and Riverside Counties.
- Carol Brown, State Foster Care Committee, state that she believes whether or not a foster child placed out-of-county received needed mental health services is arbitrary.
- Gail Johnson Vaughn, Families NOW, expressed appreciation for the leadership of Greg Rose and Sara Rogers in implementing the Continuum of Care Reform. She noted that the new requirement for therapists who work with foster children to have training on the impacts of trauma would be a key factor in planning services under CCR.
- Lisa Pion Berlin, Parents Anonymous, announced that February was National Parent Leadership month and that her organization was promoting family reunification services.

Secretary Dooley and Justice Raye thanked the Council members and the public for their participation and adjourned the meeting.