

CALIFORNIA CHILD WELFARE COUNCIL
Discussion Highlights
December 10, 2014

I. Call to Order, Introductions and Announcements

Justice Raye extended a personal welcome to Council members and noted that Secretary Dooley had been called to other state business. He announced that the Council has two members who are retiring, Barbara Needell and Charlene Reid. He first thanked Barbara for her seven years of service as a Council member – she was a charter member – and as Chair of the Data Committee and called on her to introduce her replacement, Daniel Webster. Barbara assured Council members that Daniel was fully prepared to take the helm, not only as her replacement at U.C. Berkeley School of Social Welfare Outcome Indicators Project, but also as a Council member and Chair of the Data Committee.

Justice Raye thanked Charlene Reid for her two years of services on the Council and as member of the Steering Committee. He announced that her replacement will be Lori Cox, Alameda County Social Services Director.

Justice Raye also announced three other new members to the Council: Judge Shawna Schwarz, Santa Clara County Juvenile Court; Judge Carolyn Caietti, Presiding Judge, San Diego Superior Court Juvenile Division; and Martin Hoshino, Administrative Director, Judicial Council of California.

Members of the Council members and others in attendance then introduced themselves.

II. Approval of the September 10, 2014 Discussion Highlights (Action Item)

Justice Raye asked for comments or suggested revisions to the September 10, 2014 Child Welfare Council Discussion Highlights. There being none, they were approved on a consensus vote.

III. Priority Access to Services and Supports (PASS) Project Update (Information Item)

Justice Raye called on Frank Mecca as Co-Chair of the PASS project to lead the presentation. Frank expressed his appreciation for the significant progress made by the partners on the project, Behavioral Health – headed by Karen Baylor; Workforce – headed by Tim Rainey; Corrections and Probation – headed by Millicent Tidwell and Philip Kader; and Housing – headed by Lisa Bates.

Karen Baylor informed the Council about a Behavioral Health Policy Forum held on December 3, 2014, attended by Brenda Grealish and Marjorie McKission of her staff; Will Lightbourne and Greg Rose from California Department of Social Services, Don Kingdon from the County Behavioral Health Directors Association, Nadia Sexton from Casey Family Programs, and Sylvia Pizzini, from California Health and Human Services Agency. Participants developed strategies and timelines to advance the following Behavioral Health Goals, using points of leverage in the system of care that can make a difference for parents with a family reunification plan:

Goal 1: Pathways. DHCS and CDSS provide guidance to, and identify and remove barriers for, County Mental Health Departments and Contracted County Managed Care Health Plans to provide priority access to mental health and substance use disorder treatment for parents of children in foster care.

Goal 2: Continuum of Care/Care Coordination. Ensure that (1) the full continuum of evidence-based programs and practices for mental health and substance use disorders treatment are available on a priority basis to parents with a child in foster care; and (2) that parents in reunification have the support they need to navigate complex service systems.

Goal 3: Implementation Tools. State oversight and local management tools to facilitate priority access are disseminated by state partners and actively utilized by counties.

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The Behavioral Health Team will meet in January to go forward with these and other strategies, working closely with Child Welfare.

Tim Rainey described a proposed “Accelerator Fund” that the Workforce group was spearheading. The idea for each of the partners to contribute funding towards supporting a small number of PASS pilot projects at the county level.

Lori Clarke presented on behalf of Millicent Tidwell, and shared a flyer that has been distributed by CDCR to Parole Agents. The flyer contains general information on the PASS initiative and key steps parole agents can take to link parolees to PASS priority services in an effort to fulfill child reunification court orders, based on the identification of a shared population between parents, who are either incarcerated or on active parole, and their children in foster care with a reunification plan. The department’s commitments to the PASS initiative includes increased awareness of parole agents regarding parolees who have child reunification court orders, and to ensure priority access is given through linkage to PASS service partners in the community. The flyer provides information about the Child Welfare Family Reunification Plan and the benefits of the PASS project. It further lays out the key steps parole agents can take to implement *PASS* and help parolees safely reunify with their families.

Other concrete actions taken by CDCR include:

- Issued a joint (CDCR and Parole) signature Memorandum to the field, along with outreach literature guiding parole agents to facilitate priority access to services.
- Initiated discussions with CDSS to develop a new data sharing interagency agreement that will allow linkages between offenders and parents with child reunification orders.
- Building a child reunification data element into Automated Reentry Management System that will identify inmates or parolees with reunification plans and promote earlier access to services.

Lori also reported on behalf of Lisa Bates, and described the two-pronged approach to housing as focusing on opportunities in both existing and new housing stock. Specific strategies include:

- Prioritizing access to housing in state administered programs.
- Promoting collaboration and practice enhancements across sectors, e.g., housing, behavioral health, child welfare.
- Use data and research to understand the population overlaps and needs; for example, Alameda County is currently comparing Child Welfare and homeless families in a *Family Options Study*.

IV. Foster Children’s Use of Psychotropic Medications (Information Item)

Pete Cervinka, Chief Deputy Director, California Department of Social Services, and Harry Hendrix, Chief, Pharmacy Benefits, Department of Health Care Services, reviewed the structure of the state’s Quality Improvement Project (QIP) to address issues related to appropriate use of psychotropic medications by foster youth as follows:

Clinical Workgroup: The Clinical Workgroup’s focus is to develop tools to assist prescribers, pharmacists and the juvenile courts improve their roles in the provision of psychotropic medications. These tools will include prescribing and dispensing guidelines to pharmacists and medical professionals, as well as revisions to forms and processes used by judges and social workers. This workgroup is also responsible for producing protocols and practices for improved oversight and monitoring.

Data & Technology Workgroup: The Data and Technology Workgroup’s focus is to conduct analysis of child welfare and managed care and fee-for-service pharmacy claims data. This data regarding court

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authorizations and pharmacy claims will be reconciled and compiled into reports to assist county child welfare departments monitor court approval of psychotropic medication usage. The workgroup is also responsible for developing outcome measures as an additional monitoring mechanism.

Youth, Family & Education Workgroup: The Youth, Family and Education Workgroup's focus is to develop and disseminate training materials and information about psychotropic medications for youth, parents, caregivers, social workers, juvenile court staff, and other key figures supporting the foster care population. Pete then presented the updated Project Workgroup Timeline:

WORKGROUP	ACTIVITY	DATE
Data & Technology		
	Joint Workgroup Meeting: meeting with Clinical Workgroup to refine outcome measures	12/18/2014
	Issue instructional ACIN re client-level county reports	1/1/2015
	Distribute client-level county reports to counties	1/1/2015
	Workgroup Meeting: agenda TBD	1/13/2015
	Outcome Measures: develop program logic, produce county test data, distribute test data to counties, publicly post outcome measures	Feb-May 2015
	Workgroup Meeting: outcome measures; specific agenda TBD	2/19/2015
	Develop cross-system oversight and monitoring process	3/1/2015
	Workgroup Meeting: outcome measures; specific agenda TBD	3/18/2015
Youth, Family & Education		
	Disseminate <i>Youth Mental Health Bill of Rights</i>	1/1/2015
	Disseminate <i>Questions to Ask</i>	1/1/2015
	Joint Workgroup Meeting: meeting with Clinical Workgroup re hierarchy of interventions/decision tree	1/14/2015
	Workgroup Meeting: training for foster parents and professionals	2/18/2015
	Workgroup Meeting: connection youth to services	3/11/2015
Clinical		
	Joint Workgroup Meeting: meeting with Youth, Family & Education Workgroup re hierarchy of interventions/decision tree	1/14/2015
	Post to DHCS website <i>Clinical Guidelines for Prescribers</i>	2/1/2015
	Workgroup Meeting: Judicial Council feedback re JV-220 form revisions and process efficiencies	2/12/2015
	Finalize <i>Guidelines Appendices A, B, C and D</i> and post to DHCS website	3/1/2015
	Workgroup Meeting: dissemination of <i>Guidelines/Appendices</i>	3/19/2015
Expert Panel		
	Meeting: workgroup updates and work product presentation to the expert panel for comment	2/26/2015
	Meeting: workgroup updates and work product presentation to the expert panel for comment	5/21/2015
Other		
	Stakeholder Semi-Annual Update Webinar	12/8/2014

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Pete and Harry emphasized that CDSS and DHCS wanted broader stakeholder involvement in the QIP process and invited Council members and the public to recommend additional stakeholders who could contribute to the deliberations of the QIP and inform recommendations to be presented to the expert panel and included in the QIP final report.

Bill Grimm commented on the presentation by Pete and Harry, emphasizing that to improve the Court Authorization Process, the following should be in place:

- Increasing or expanding access to psychiatric consultants.
- Regular trainings should be available and should be easy to access by judges new and old to the responsibility because Judges change seats often in most counties.
- The court should ensure screenings are completed before authorizing.
- Judicial Council, judges, advocates, foster youth, lawyers, CASAs, caregivers and medical consultants (all of whom would like access to a medical consultant) should be involved in the January 2015 QIP JV220 Best Practices Conversation,

Bill then shared the results of a County Behavioral Health Directors Association survey conducted by CBHDA and Rena Burns:

Does Your County Use a Medical Reviewer for the JV220 process?

Answer Options	Response Percent	Response Count
Yes	40.0%	14
No	60.0%	21
<i>answered question</i>		35
<i>skipped question</i>		1

These data show that over half of the counties in California currently do not use a medical reviewer to support court oversight and review of medication authorizations. Of those that do use a reviewer, the majority use a psychiatrist.

Of those that do use a medical reviewer, the majority of counties employ a psychiatrist to review the JV220 form as shown below. This psychiatrist is often only available at the front end of the process of review. Many advocates and decision makers request the support during the entire time the child or youth is in foster care in order to ensure that treatment options, baseline, follow up monitoring and appointments for foster children receiving psychotropic medication are happening.

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Answer Options	Response Percent	Response Count
Psychiatrist	80.0%	12
Other physician	0.0%	0
Pharmacist	6.7%	1
Nurse practitioner	13.3%	2
Public health nurse	20.0%	3
Other (please specify)	13.3%	2
<i>answered question</i>		15
<i>skipped question</i>		21

Bill then spoke about the role of Public Health Nurses, as described in Welfare and Institutions Code 16501.3: (a) The State Department of Social Services shall establish a program of public health nursing in the child welfare services program. The purpose of the public health nursing program shall be to identify, respond to, and enhance the physical, mental, dental, and developmental well-being of children in the child welfare system. Studies, federal, and state reports show that baseline and ongoing monitoring of psychotropic medications do not occur with children in foster care. Alternatives to medication treatment are not routinely offered to foster children who have been prescribed psychotropic medications. Counties can and should use Public Health Nurses to oversee the health and well-being of children who have been prescribed psychotropic medications. Public Health Nurses are to oversee the healthcare of foster children and coordinate with child welfare workers. Counties should continue and expand the program with increased funding to support proper access to mental and behavioral health care.

Bill advocated for the Council and CDSS to make more explicit connections between the QIP project and the Katie A and Continuum of Care Reform efforts, e.g., through the use of the Child and Family Team and Assessment processes and through the Specialty Mental Health Services available in the Intensive Care Coordination, Therapeutic Foster Care, and Intensive Home-based Services programs. Foster children with moderate to severe mental health diagnoses are often prescribed psychotropic medications and would fall under Katie A services. Also, 60% of foster children in group homes receive authorization for psychotropic medications across California. The January 2015 combined clinical and youth family education meeting will provide the first opportunity to link work from Katie A, CCR, and QIP, so it is important that stakeholders be involve in the process and that agreement is reached on how the ongoing goals of the QIP project will be supported, as well as other opportunities being explored.

Finally, Bill urged that there be a formal discussion of what form the guidelines and other documents will take. For example, will there be an All County Letter, formal regulations, policy manual amendments, Medicaid provider manual amendments, DUR board standards; when and how will they be disseminated to counties; and where can they be accessed.

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V. CALYouth Research Project (Information Item)

Justice Raye called on Teri Kook to announce the speaker on the topic of the California Youth Transitions to Adulthood Study (CalYOUTH). Teri introduced Mark Courtney, Ph.D. from the School of Social Service Administration, University of Chicago to present highlights of the Child Welfare Worker and Youth Surveys that were completed as a part of the study.

Dr. Courtney explained that the goal of the study was to conduct an evaluation of the impact of California Fostering Connections to Success Act (AB 12) on outcomes for foster youth, and the data to be presented today would comprise the baseline, in other words, what the youth looked like prior to entering AB 12 services so that changes could be measured against where the youth started. The study included: (1) Collection of data from transition-age foster youth and child welfare workers; (2) Analysis of administrative program data; and (3) qualitative research on living arrangements. The surveys were stratified by county.

Caseworker Survey

The purpose of Child Welfare Worker (caseworker) Survey was to obtain perceptions of service delivery context, including county level availability of and need for services, coordination of services with other service systems, and attitudes of caseworker, county court personnel and youth toward extended care. The survey period was 9/27/13 – 11/27/13, using an online survey platform (Qualtrics). The sample included participation by 50 counties: 262 caseworkers received survey and 235 eligible caseworkers completed survey, yielding an amazing **89.7% response rate**. To be eligible to participate, caseworkers had to have one young person on caseload who turned 18 during previous 6-month period. If eligible, the caseworker was asked to: “...think of the youth who most recently turned 18 while on your caseload” (and if only one person turned 18 on caseload) “...think of that youth.” The caseworker survey findings are presented below.

AVAILABILITY OF TRAININGS AND SERVICES

Service Type	None	Few	Some	Wide Range
Secondary Education	4%	21%	50%	25%
Postsecondary Education	3%	205	52%	25%
Employment/Vocation Prep	2%	26%	48%	24%
Independent Living Prep	2%	28%	47%	23%
Mental Health	8%	37%	36%	19%
Sexual/Reproductive Health	7%	41%	38%	14%
Pregnancy and Parenting	7%	39%	42%	12%
Alcohol/Substance Misuse	8%	42%	39%	11%
Financial Literacy	4%	38%	47%	11%
Pregnancy Prevention	5%	43%	41%	11%
Health Education	9%	42%	40%	9%
Addressing Safety Concerns	10%	49%	36%	5%
Interpersonal/Relationship Skills	10%	51%	36%	3%

AVAILABILITY AND APPROPRIATENESS OF HOUSING OPTIONS

Availability		Appropriateness	
None	1%	Mostly Not Appropriate	9%
Few	49%	Slightly Appropriate	23%
Some	41%	Somewhat Appropriate	51%
Wide Range	8%	Very Appropriate	17%

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SATISFACTION WITH COLLABORATION WITH OTHER SYSTEMS

System	Completely Satisfied	Somewhat Satisfied	Neither Satisfied nor Dissatisfied	Somewhat Dissatisfied	Completely Dissatisfied
Housing	4%	29%	28%	30%	9%
Postsecondary Ed	3%	28%	49%	17%	3%
Secondary Ed	4%	27%	52%	14%	3%
Health	4%	27%	49%	18%	2%
Mental Health	5%	25%	31%	29%	10%
Employment	3%	30%	31%	30%	6%
Substance Abuse Treatment	3%	13%	46%	29%	9%

CHALLENGES TO EFFECTIVE AB12 IMPLEMENTATION

Extent to which each is a challenge (5-point scale: 1=not a challenge, 5=a great challenge)	% (4 or 5)
Not enough placement options	81%
Not enough services	66%
Lack of clarity in policies and procedures of extended care	59%
Lack of coordination between county CW agencies and other systems (e.g., education, housing, employment, health)	48%
Available services are not appropriate to needs of county's youth	46%
Lack of support by foster care providers	38%
Lack of support by county administrators	25%
Lack of interest from youth approaching age 18	25%
Lack of support by court personnel	15%
Lack of support by county caseworkers	12%

Youth Survey

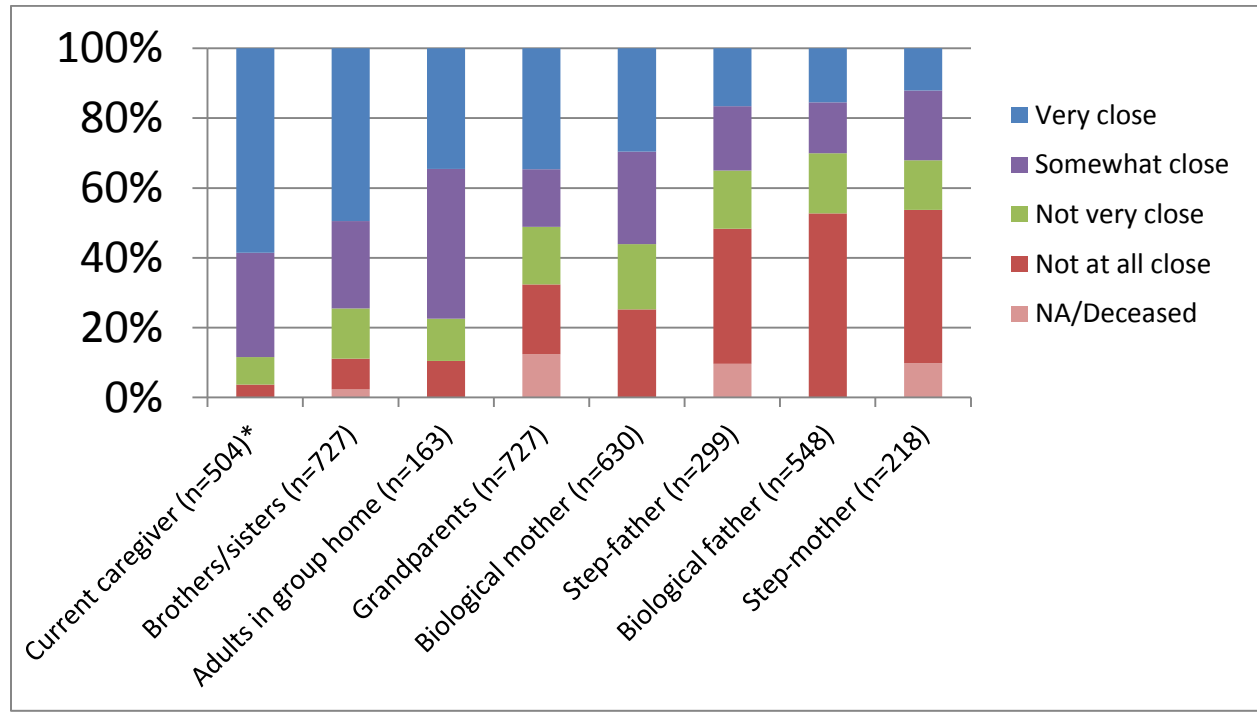
The purpose of Youth Survey was to obtain information about a broad range of life experiences & young adult outcomes, including foster care placement, service utilization and preparation, knowledge of extended care, education and employment, health and development, social support, delinquency, and pregnancy and children. The sample included eligible youth between 16^{3/4} and 17^{3/4} years of age who had been in care at least 6 months. The sample was drawn from CDSS administrative data records and stratified by county based on number of eligible youth in each county. The survey period for in-person interviews was 4/15/13 – 10/11/13, and there were 51 counties included in final sample (seven counties had zero youth who met inclusion criteria). The number of youth meeting the criteria was 763, with 727 of them completing an interview, for an another amazing **response rate of 95.3%** The Youth survey results are presented below.

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CURRENT LIVING SITUATION

	#	%
Foster home without relatives	337	44.3
Group care or residential treatment facility	164	24.1
Foster home with an adult relative	125	18.2
Legal guardianship arrangement	43	6.3
Independent living arrangement	26	2.5
Other	17	2.5
Adoptive home	14	1.9

CLOSENESS TO OTHERS



SOCIAL SUPPORT

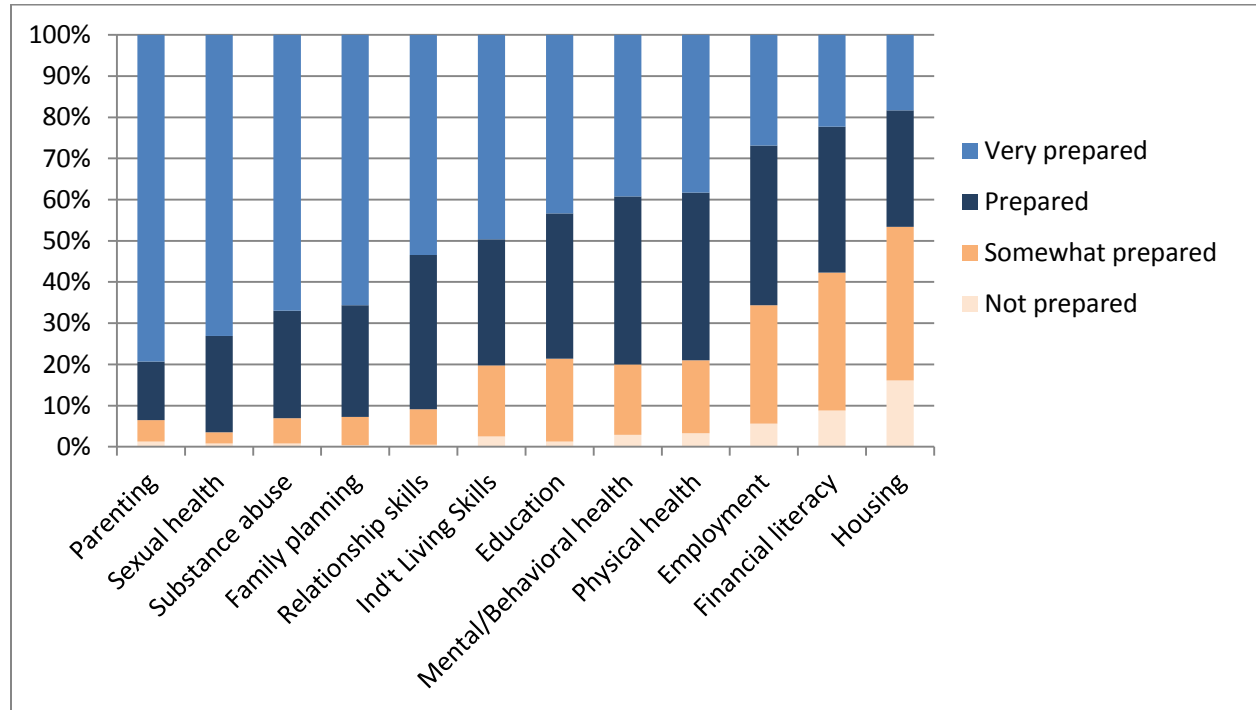
Number of Available Supports		
	Median	Mean (SD)
Emotional	4	5.6 (6.6)
Tangible	3	3.9 (6.2)
Advice/Guidance	3	4.6 (9.2)

ADEQUACY OF SUPPORTS

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Adequacy of Amount of Support						
	Enough		Too Few		No One	
	#	%	#	%	#	%
Emotional	497	65.1	206	31.4	23	3.3
Tangible	443	59.5	266	37.8	18	2.8
Advice/Guidance	542	71.8	172	26.3	13	1.9

PERCEPTION OF PREPARATION



MENTAL HEALTH STATUS

	#	%
During past year...		
Received psychological or emotional counseling	406	54
Psychiatric hospitalization	71	10
Attended drug or alcohol abuse treatment program	124	19
Received medication for emotional problems	220	29
MINI (positive diagnosis)		
Major Depressive Episode (current, past, and/or recurrent)	152	21

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Post-Traumatic Stress Disorder	56	8
Social Phobia	42	6
Alcohol Abuse or Dependence	103	12
Substance Abuse or Dependence	164	21
Oppositional Defiant Disorder and/or Conduct Disorder	87	12

EDUCATION

	#	%
Currently enrolled in school	653	89.9
Type of school		
High school	590	80.6
GED classes	3	0.2
Vocational school	3	0.4
2-year community college	25	3.7
4-year college	4	0.3
Other	96	14.7
Ever placed in special education classroom	257	33.6
Repeated or been held back a grade	248	33.3
8 th grade or less reading level [^]	376	51.3
Aspire to graduate from college or beyond	578	79.8

[^]Based on assessment from the Wide Range Achievement Test: 4th Edition.

EMPLOYMENT

	#	%
Currently employed full-time	12	1.7
Currently employed part-time	102	13.0

	CalYOUTH		Add Health	
	#	%	#	%
During last four weeks, worked - for pay -for anyone outside home	249	32.1	1157	71.4***

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*** $p < .001$

CRIMINAL JUSTICE SYSTEM INVOLVEMENT

	#	%
Ever been arrested	283	39.2
Ever been convicted of a crime	150	21.3
Ever been confined in jail, prison, correctional facility, or juvenile or community detention facility, in connection with allegedly committing a crime	178	25.0

PREGNANCY AND CHILDREN

	CalYOUTH		Add Health	
	#	%	#	%
Females...				
Ever got pregnant ($n = 426$)	104	26.0	94	9.6***
Gave birth to any children ($n = 104$)	39	35.7	--	--
Males...				
Ever got a female pregnant ($n = 294$)	29	9.3	--	--
Fathered children that were born ($n = 151$)	22	13.5	--	--

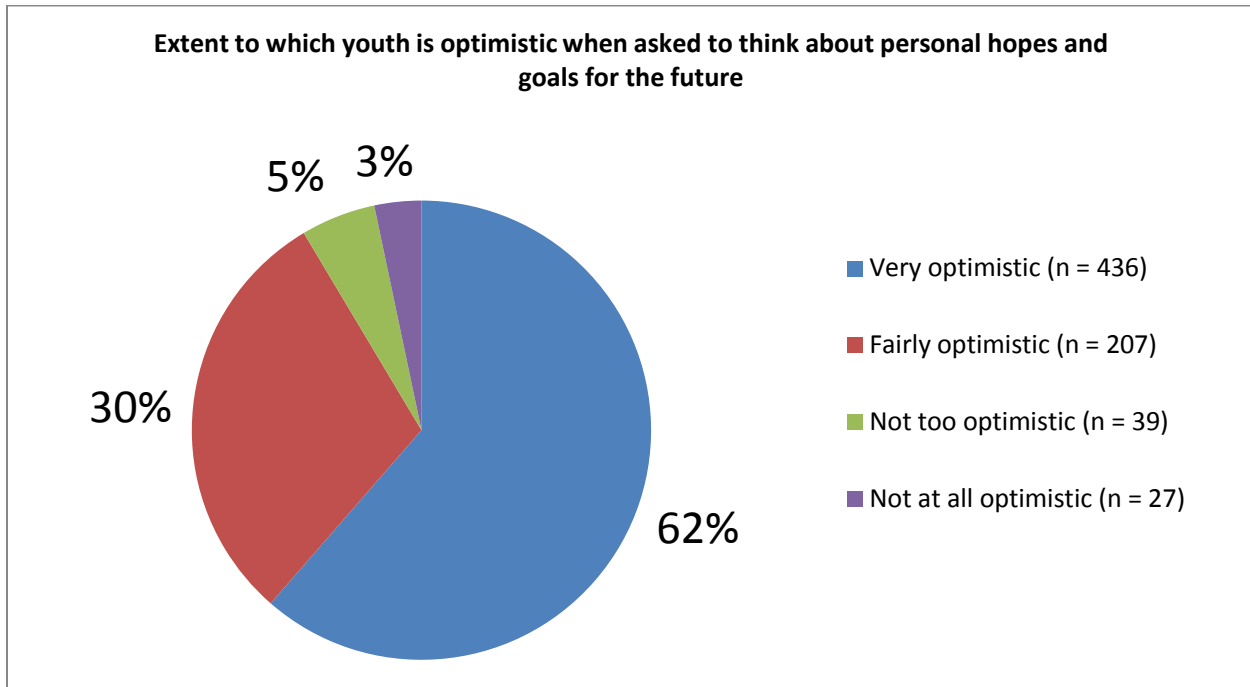
*** $p < .001$

DESIRE TO STAY IN CARE

	#	%
Want to stay in foster care after age 18 (yes) ($n=727$)	475	67.4
Top 3 most cited reasons for <u>NOT WANTING</u> to stay in care after age 18:		
Wants to be on own and have more freedom	103	38.6
Does not want to deal with social workers anymore	36	15.0
Wants to live with biological parents	23	9.3
Top 3 most cited reasons for <u>WANTING</u> to stay in care after age 18:		
Wants help achieving educational goals	217	45.6
Wants to continue receiving housing and other material support	190	37.1
Is happy in current foster care placement	51	8.8

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OPTIMISM ABOUT THE FUTURE



Dr. Courtney concluded by reviewing next steps for the survey:

- Release worker and youth survey reports and qualitative study of youths' living arrangements
- Develop and release issue briefs on:
 - Mental and physical health needs of transition age foster youth
 - Youth attitudes toward the foster care system, knowledge of AB 12 and desire to stay in care
 - Education
- Administrative data analyses of extended care and:
 - Legal permanency
 - Post-secondary education
- Carry out interviews with youth at age 19 in 2015

Council members commented on the value of this study and looked forward to learning the results of the follow up study, which will inform the field about the effectiveness of AB 12 services, what works and what should be changed. Laurie Kappe from the California Child Welfare Co-Investment Partnership distributed a pamphlet containing additional information on the topic, which may be found at <http://www.chapinhall.org/research/report/findings-california-youth-transitions-adulthood-study-calyouth>.

VI. Commercially Sexually Exploited Children (CSEC) Action Team Update (Information Item)

Justice Raye called on Leslie Heimov and Kate Walker to provide a status report on the CSEC Action Team's efforts since the last meeting. Kate informed Council members and the public about the CSEC Program created through 2014 budget process. The statute authorizes \$5 million for training and protocol development in the current year, and \$14 million annually to be distributed to participating counties for provision of services for CSEC, additional training, and specialized care rates. Counties may elect to participate by submitting an interagency protocol for serving CSEC and A plan for spending the

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allocation. The Protocol must utilize a multidisciplinary approach, with required agencies to include Child Welfare, Probation, Mental Health, Public Health, and Substance Abuse.

The CSEC Action Team is supporting counties' efforts to participate in the program through the following activities:

- Training – CSEC Identification & Awareness Learning Objectives
 - Partnership with CalSWEC, RTAs, and the Prevention & Training subcommittee
 - Defined learning objectives for the 6-hour training required for child serving staff
- Prepare counties to opt into CSEC Program
 - Model Framework: guidance on forming an interagency protocol
 - ✓ Delineates required and optional agencies
 - ✓ Provides basic infrastructure – Steering committee and individualized MDTs
 - ✓ Defines responsibilities of participants
 - ✓ Provides guidance on promising practices
 - CSEC Practice Guidance Toolkit Model Framework
 - ✓ Further guidance on needs of CSEC case management, placement, and available resources

The CSEC Action Team agenda for the afternoon includes the following Action Items:

- Action Item #1: Approval of Model Interagency Protocol Documents
Purpose: Prepare county agencies and their partners to better serve CSEC through a coordinated manner. Documents include Background and Purpose document, Model Interagency Protocol Framework, and Appendix.
- Action Item #2: Approval of Holistic Needs of CSEC
Purpose: Identify the holistic needs of CSEC to better inform policy and practice. Range of needs identified include, but are not limited to: basic needs, health care, mental health services, education/vocational services, housing/placement, sexual assault/intimate partner violence, and support networks/ mentorship

Council members expressed appreciation for the work of the Action Team and look forward to learning about continued progress in establishing systems, protocols, and best practices to serve CSEC victims and prevent victimization.

VII. New Laws Passed in 2014, Effective 2015 (Information Item)

Justice Raye called on Alan Herzfeld, Associate Attorney with the California Judicial Council to provide members and the public with a summary of newly enacted legislation related to child welfare issues. Alan provided the following summary:

DOMESTIC VIOLENCE RELATED LEGISLATION

AB 1850 (Waldron) Restraining orders

Chapter 673, Statutes of 2014

Summary: Provides that a minor who was not a victim, but who was physically present at the time of an act of domestic violence, is deemed to have suffered harm for the purpose of issuing a protective order in a pending criminal case.

SB 910 (Pavley) Domestic violence: restraining orders

Chapter 638, Statutes of 2014

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Summary: Expands the definition of domestic violence to include abuse perpetrated against a child of a party to the domestic violence proceedings or a child who is the subject of an action under the Uniform Parentage Act, as specified, or against any other person related to the defendant by consanguinity or affinity within the 2nd degree.

VISITATION AND PLACEMENT RELATED LEGISLATION

AB 1628 (Fox) Visitation rights: grandparent rights

Chapter 328, Statutes of 2014

Summary: Adds as a basis to grant standing for a grandparent to file a petition for visitation with a grandchild if one of the parents is incarcerated or involuntarily institutionalized.

SB 977 (Liu) Juveniles

Chapter 219, Statutes of 2014

Summary: Among other things, authorizes a court to place a child with a parent who is enrolled in a certified substance abuse treatment facility that allows a dependent child to reside with his or her parent.

JUVENILE DEPENDENCY RELATED LEGISLATION

AB 388 (Chesbro) Juveniles

Chapter 760, Statutes of 2014

Summary: Requires the Department of Social Services to list licensing complaints and law enforcement contacts by group homes, transitional housing placement providers, community treatment facilities, and runaway and homeless youth shelters, and requires these facilities to report such contacts. Further requires the Department of Social Services to inspect such facilities at least annually if the facility has a greater than average number of law enforcement contacts. Among other things, requires that the decision to detain or continue the detention of a dual-status minor not be based on either the minor's status as a dependent of the court, or on the child welfare services department's failure to find a suitable placement for the minor.

AB 1618 (Chesbro) Juveniles: case file inspection

Chapter 57, Statutes of 2014

Summary: Provides tribal courts, entities, and officials with access to juvenile case files of children who are members of, or eligible for membership in, that tribe when their counterparts in the Superior Court or county are authorized to access the files.

AB 1658 (Jones-Sawyer) Foster care: consumer credit reports

Chapter 57, Statutes of 2014

Summary: Requires a county welfare department, county probation department, or the State Department of Social Services to inquire of each of the 3 major credit reporting agencies as to whether a foster child who is at least 16 years old has any consumer credit history.

AB 1761 (Hall) Dependent children: placement

Chapter 765, Statutes of 2014

Summary: Among other things, expands the time periods during which a County Department of Social Services must conduct a suitability assessment of a relative or nonrelative extended family member who requests temporary placement of a child who has been taken into temporary custody based on allegations of abuse or neglect, if the child is not released to a parent or guardian. Also requires consideration of placement of siblings or half-siblings together, unless such placement would be contrary to the best interests of one or more of the dependents.

AB 2454 (Quirk-Silva) Foster youth: nonminor dependents

Chapter 769, Statutes of 2014

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Summary: Allows a nonminor dependent to petition for resumption of dependency jurisdiction who received either Kin-GAP aid or adoption assistance aid after turning 18 years old, and the nonminor's parents, adoptive parents, or former guardians no longer provide support to, and no longer receive support on behalf of, the nonminor. Also adds these same justifications for setting a hearing on the petition within 15 days of filing. This is in addition to the previous justification for both resuming dependency under WIC §388.1 and the 15 day setting, namely the death of the nonminor's parents, adoptive parents, or former guardians.

AB 2607 (Skinner) Juveniles: detention

Chapter 615, Statutes of 2014

Summary: Among other things, limits a court's authority to decide what is a reasonable ground for continued detention of a dual-status minor or nonminor, specifically eliminating administrative delays or a probation officer's inability to find an appropriate placement for the minor or nonminor. Options for relief include releasing the minor or nonminor from custody. Expands all placement options under WIC §§727 and 737 to nonminor dependents, in addition to minors. Also allows placement for dual-status minors and nonminors to be with a resource family.

AB 2668 (Quirk-Silva) Foster care: nonminor dependent parents

Chapter 770, Statutes of 2014

Summary: Effective July 1, 2015, authorizes the development of a parenting support plan between a nonminor dependent parent who resides in a supervised independent living placement, an identified responsible adult who has agreed to act as a parenting mentor, and a representative of the county child welfare agency or probation department.

SB 855 (Committee on Budget) Human Services

Chapter 29, Statutes of 2014

Summary: Establishes the Commercially Sexually Exploited Children (CSEC) Program, administered by the Department of Social Services (Department). The Department, in consultation, will determine and develop a methodology for distributing funding to counties for training related to CSEC. Each county receiving funds under the CSEC Program shall develop a multidisciplinary team to address CSEC issues in a rapid manner, which shall include representatives from the juvenile court in the county. Among other things, allows a court to find that a minor is a dependent of the court on the basis of having received food, shelter, or money in exchange for performing sexual acts and whose parent or guardian has failed, or is unable, to protect the minor.

SB 873 (Committee on Budget) Human Services

Chapter 685, Statutes of 2014

Summary: Among other things, clarifies that a superior court has the authority to issue a ruling making findings that support a minor's petition for Special Immigrant Juvenile Status (SIJS) to the Federal government. Requires a court to make specified findings if those findings are supported. Requires a court to maintain the confidentiality of records relating to a request for SIJS findings by limiting who is authorized to inspect the records. Confirms the court's authority to provide interpreters in proceedings relating to a request for SIJS findings. Declares it is to take effect immediately as a bill providing for appropriations. (Took effect immediately when signed on September 27, 2014.)

SB 1099 (Steinberg) Dependent children: wards of the juvenile court: sibling visitation

Chapter 773, Statutes of 2014

Summary: Extends preference of placing minor siblings together to all out-of-home placements of wards in foster care. Allows a dependent child to assert a sibling relationship and request sibling visitation, in addition to the currently-allowed non-dependent sibling to assert a sibling relationship and request visitation. Among other things, requires a court to review the reasons for not placing siblings together, and for any suspension of sibling visitation with a minor or nonminor dependent.

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SB 1460 (Committee on Human Services) Child welfare

Chapter 772, Statutes of 2014

Summary: Among other things, requires a juvenile court to transfer a case file to a tribe having jurisdiction over a juvenile court case, and requires both the juvenile court and the tribe to document the finding of facts supporting jurisdiction over the child by the tribal court. Requires that a transfer order shall have precedence in scheduling, "and shall be heard by the court at the earliest possible moment after the order is filed." Further allows a child who has been removed from the custody of his or her parents to be placed with a resource family, as defined.

Alan stated that to obtain the text, status, history, or analyses of any these bills, go to leginfo.legislature.ca.gov, and use the Bill Information button to locate the bill. If you have further questions, you may contact him at (916) 323-3121, or alan.herzfeld@jud.ca.gov.

VIII. Child Welfare Services – New System Project Update (Information Item)

Justice Raye called on John Boule, Director, and Amy Tong, Deputy Director, Offices of Systems Integration (OSI) within the California Health and Human Services Agency, to provide an update on the Child Welfare Services – New System. John provided brief background information on the experiences that led them to these positions. John has 25 years in health and human services with the majority being in technology management and consulting (Project Director SAWS Consortium IV (C-IV), Private sector Manager/Consultant in HHS in California and 9 years with the State of Arizona in HHS program and technology management. Amy has 20 years in technology, and management in the public sector (Deputy Director and Chief Information Officer (CIO) at CA Lottery, Chief Technology Officer (CTO) at Board of Equalization (BOE); Chief of Data Center at California Public Employees' Retirement System (CalPERS); and acting CIO at the Water Resources Control Board/CalPEPA.

The Mission of OSI is to procure, manage, and deliver technology systems that support the delivery of health and human services to Californians. The office oversees CHHSA's multi-billion dollar automation portfolio through direct project management of automation initiatives in collaboration with CHHSA sponsor Departments; and project oversight and providing guidance to CHHSA Department managed automation projects through the Office of the Agency Information Officer (AIO). The Initiatives currently under the responsibility of OSI are:

- CMIPS II - Case Management Information and Payrolling System
- SAWS (County Managed) - Statewide Automated Welfare System (SAWS)
 - ❖ Consortium IV (C-IV),
 - ❖ Los Angeles Eligibility, Automated Determination, Evaluation (LEADER)
 - ❖ LEADER Replacement System (LRS)
 - ❖ C-IV Migration
 - ❖ Welfare Client Data System (WCDS) Consortium, (CalWIN)
- EBT - Electronic Benefit Transfer
- SFIS - Statewide Fingerprint Imaging System
- WDTIP - Welfare Data Tracking Implementation Project
- ACMS – Appeals Case Management System
- CalHEERS – California Healthcare Enrollment and Eligibility System

And, most relevant to the Child Welfare Council:

- CWS/CMS - Child Welfare Services / Case Management System
- CWS-NS Child Welfare Services-New System

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The timeline for moving forward involves a draft CWS-NS Procurement Documents available to Stakeholders for review and comment by February 2015, followed by one month to review and comment; Stakeholder Collaborative Review Sessions in Spring 2015; ongoing communication through project governance process.

John stressed that input from the Child Welfare Council membership is needed! The RFP Philosophy is to have a procurement document that encourages innovation, does not require business as usual and transforms the tools and abilities of Child Welfare professionals across the State. Set up a vendor relationship that is geared toward delivery and accountability. His contact information is John.Boule@osi.ca.gov; 916-263-0263, and Amy's contact information is Amy.Tong@osi.ca.gov; 916-263-4261. Other members of the team include Carolyn Nordstrom - Deputy Director, Child and Adult Technology Support Division (starting 1/5/2015); Carolyn.Nordstrom@osi.ca.gov; Stephen Hensley – CWS/CMS Project Director; Stephen.Hensley@osi.ca.gov, 916-263-1116; and Les Fujitani – CWS-NS Project Director, Les.Fujitani@osi.ca.gov, 916-654-0602.

IX. Young Children in Foster Care Partnership with First 5 California (Information Item)

Justice Raye asked Camille Maben, Executive Director of First 5 California, to walk the Council through new links on the First 5 website designed to provide information and assistance for foster parents and others involved in caring for young foster children. Camille took the group to the website: <http://www.first5california.com/parents/services-support.aspx?id=26> and showed them the following new message and links that had gone live as of the day of the meeting:

Young children involved with child welfare have faced challenges in their young lives and need extra support so they can heal. Early childhood experiences can affect children's development and have a lasting effect on their lives. Infants and toddlers in child welfare are especially vulnerable.

Relationships are critical to set them on a path for healthy development and brighter outcomes. For additional information on early childhood adversity and child welfare, visit the following resources (links provided):

- Access information about what trauma is, how it affects children, and recommendations for serving children who are exposed to complex or traumatic stress.
- Quick facts on young children in foster care.
- Infants and toddlers in foster care require special care to develop their full potential. All partners who work with them have a role.
- Access videos and further knowledge on the impact maltreatment can have on the developing brain.
- Access one of the largest online sources for issues addressing child welfare, the families, and children they serve.

X. Approval of Revised Child Welfare Council Operations Handbook (Action Item)

Justice Raye directed members' attention to the draft of the Revised Child Welfare Council Operations Handbook which had been posted for previewing and invited comments. Under the Steering Committee description on page 6, Patrick Gardner suggested that the document be expanded to add a statement indicating that the Council would decide on criteria for selecting Steering Committee members prior to the effective date of the new appointments (July 1, 2015).

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Under the Overarching Issues section on page 7, Pete Cervinka suggested that in addition to stating that the Council's overarching responsibility includes monitoring and reporting on the overrepresentation of African American and Native American in the child welfare population, that a phrase be added to indicate that the Council's role is also to monitor and report on culturally appropriate services provided to all racial and ethnic groups, which would cover Latinos who are represented in the Child Welfare system on a par with the total Latino population in California.

Under the Decision-Making Processes on page 8, Judge Edwards suggested the creation of a new heading regarding types of decisions appropriate to the purview of the Council and include a sentence to say that the Council does not take positions on pending legislation, which comes under the authority of the Governor's Office and Judicial Council.

Council members approved the Revised Operations Manual, incorporating the changes suggested above, on a consensus vote.

XI. Status Reports from Committees and Task Forces

Prevention/Early Intervention Committee-Statewide Citizen Review Panel

Kathy Icenhower presented the draft Statewide Citizen Review Panel Report and Recommendations that Committee members would consider at the afternoon meeting. The report will be finalized and presented to the Council in March for approval and forwarding to the U.S. Department of Health and Human Services. It focuses on the two major accomplishments of the past year: (1) Development and dissemination of a federal child welfare finance reform toolkit, and (2) Promotion of the previously developed Differential Response Framework. Kathy said she would welcome feedback on the draft before the March meeting in addition to having a discussion at that meeting.

Permanency Committee

Bob Friend reported that at the afternoon meeting the Committee will revisit its recommendations from 2009 to update them and add new ones. An additional meeting planned for January 21 to further refine and develop an action plan.

Child Development and Successful Youth Transitions Committee

Gordon reported that the Committee continues to monitor progress on the topics that it has studied and reported on at previous meetings, including the topics we heard about today, the Psychotropic Medication Work Group and the Partnership with First 5 California which is incorporating information about the special issues related to developmental needs of young foster children into the First 5 Media Campaign. The Committee also plans to participate in the First 5 Annual Conference next Spring.

He further reported that in the afternoon meeting the Committee will continue to make progress on projects that have been reported on previously by:

- Previewing an *Expanded Partial Credits Toolkit* that promotes increased implementation of the original toolkit that was approved by the Council for voluntary use by school districts throughout the state, thanks to excellent training by Paige Fern and her colleagues at the Alliance for Children's Rights.
- Working on plans for a day-long special forum to gather information from foster youth, former foster youth, foster parents, child welfare social workers, community care licensing staff, and educators regarding how to improve policies and practices that will promote healthy sexual development of foster youth. The forum will take place in the East Bay on February 5, 2015.

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In addition the Committee will review and update its work plan based on consensus of Committee members regarding current priorities related to Child Development and Successful Youth Transitions.

Data Linkages and Information Sharing Committee

Barbara Needell reported that the Committee is tracking the progress of national, state and local initiatives and will update the Council in 2015. On the afternoon's agenda is a presentation on cumulative risk interactive data by Emily Putnam-Hornstein and a presentation on the elements of the upcoming third round of the federal Child and Family Services Review.

Priority Access to Services and Supports Task Force

Please see above agenda item for report.

Out-of-County Mental Health Task Force

Dina Kokkos-Gonzalez reported that DHCS and CDSS are working on a concept paper for how foster children placed out of the county where their dependency cases are held can access medically necessary mental health services. The approach envisions a "collaborative team" model, and feedback to date indicates that more detail is needed. Dina acknowledged that this effort has taken too long and that staff resources that have been focused on implementing the Katie A Settlement provisions could now shift to resolving this problem.

Patrick Gardner stated that he was frustrated by the long delay, reminding Council members that they had approved a plan four years ago in December 2010 and further commitments were made by CHHS Agency at a meeting with stakeholders in June 2012, with no resolution in sight. Karen Grace-Kaho echoed Patrick's concerns stating that the problem had been documented in a 1998 Code Blue report, and she felt the state was not taking the problem seriously.

Karen Baylor acknowledged the long delay and stated that as DHCS Deputy Director for Behavioral Health Services she is committed to resolving this issue. Pete Cervinka also acknowledged the delay and stated that CDSS is committed to working with DHCS and stakeholders to solve the problem, starting with outlining the action steps and timelines to complete the work.

Patrick concluded the discussion by emphasizing that this is an administrative problem that the state and counties can solve in a matter of weeks, not months and years, with continued delay not being an option any longer.

Ending Commercial Sexual Exploitation of Children (CSEC) Action Team

Please see above agenda item for report.

XII. Public Comment and Adjournment to Committee Meetings

Justice Raye then called for public comments. Gail Johnson Vaughn, CEO of Mission Focused Solutions, addressed the Council regarding AB 1790, an act to amend Section 16125 of the Welfare and Institutions Code, which was passed by the Legislature and signed by the Governor (Chapter 766, Statutes of 2014). This bill would require the State Department of Social Services to convene a stakeholder group to identify barriers to the provision of mental health services by mental health professionals with specialized clinical training in adoption or permanency issues to children receiving those medically necessary specialty mental health services. The bill would require the stakeholder group to make specific recommendations by January 31, 2016, for voluntary measures to address those barriers, but

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would provide that those recommendations are not binding on any state or local government agency or private entity. The bill would require the stakeholder group to coordinate with, and endeavor not to duplicate, existing local, state, or national initiatives.

In signing the bill, the Governor issued this message, "I am signing Assembly Bill 1790 even though the Department of Social Services is quite capable of convening the types of meetings envisioned by the bill. The problems that foster care children encounter are deep and serious. Finding a permanent home is a good outcome but not always a panacea, so appropriate collaboration by interested parties is always welcome. While the bill is not needed, I trust that its enactment will stimulate greater attention to the problems of these youth by mental health professionals, their associations and the boards - namely, the Board of Psychology and the Board of Behavioral Sciences - that regulate them."

Gail reported that CDSS is beginning the process to set up the stakeholder group and launch the effort to carry out its charge.

There being no further public comment, Justice Raye thanked everyone for their participation and adjourned the meeting