

**SAN FRANCISCO COUNTY'S FAMILY PRESERVATION PROGRAM: FROM
CONTRACT TO IMPLEMENTATION
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INTRODUCTION: TIMES ARE A CHANGIN'

" The pendulum has swung: our enchantment with family preservation, is a thing of the past. Family Preservation was to the last 10 years what concurrent planning and shortened reunification services will be to the next 10 years " — Anonymous C.P.S. Social Worker

Sentiments like the ones expressed by this social worker and the related implications for child welfare practice are currently a popular topic of discussion in child welfare literature. Now, more than ever, we are challenged to demonstrate the effectiveness of Family Preservation Programs (FPP). Furthermore, to ensure the viability of such intensive home-based services, it is incumbent upon those of us working in the field of FPP to adopt a proactive response to the legislative changes occurring around us.

BACKGROUND

Santa Cruz County's FPP consists of one Children's Services social worker, whose role is case management, as well as a \$45,000 contract with a nonprofit agency which provides counseling and substance abuse assessment and referrals. In the past seven years, there have been four different contractors, none of which has reapplied after the contract expired. Despite these circumstances, the program has on average a 75% success rate in preventing placement (follow-up period = two years). With the current contract due to expire in June 1999, a new Request for Proposals process will begin. Thus, the timing is right to develop a strategic plan that builds upon the strengths of the program while striving to eliminate past instability. As the newly appointed supervisor of the FPP I was given the charge of analyzing the program and proposing changes that would become the basis of this strategic plan.

Fortunately, I was able to utilize the BASSC interagency exchange project to examine San Francisco County's Family Preservation Program and to consider whether adopting any of their methods could benefit Santa Cruz County. As promised, this experience was invaluable: I had the opportunity to speak to social workers, supervisors and managers involved with the FPP; attended "MDT" meetings where new referrals to the FPP program are reviewed; attended bidder's conferences; interviewed the directors of the non-profit agencies that have contracts with the Department to provide Family Preservation services; observed a site visit and participated on a review committee that rated proposals under consideration.

THE COMMUNITY SPEAKS

As anyone who has visited the city knows, much of San Francisco's tremendous charm is based largely on its rich ethnic diversity. (According to Mai Ho, Director of the Asian Pacific Center, over 13 different Asian ethnic groups, each speaking a different dialect, call San Francisco home!) Its geographic density and liberal political climate contribute to the fact that many of these groups are well organized and "blessed" with a number of vocal advocates. The community

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asks (some would say "demands") that the Department be both accessible and responsive to its diverse populace. This environment of strong community involvement and influence has as its by-product increased visibility and accountability for the Department. This, coupled with SF's political context (namely, the influence of the Mayor's office and the fact that San Francisco is both a city and county), affects the Department on almost every level: from policy decisions to service delivery. Thus, the Department cultivates community partnerships as it strives to become seen as a helping partner within the community rather than separate and apart from it.

As a visitor to the Department, I was struck by the extent to which managers in the Family and Children's Division meet regularly with community leaders. appoint staff to represent the Agency at numerous Multi-Disciplinary Teams, collaboratives, commissions and community forums and strive to assimilate the information learned from these contacts into their programs.

THE CONTRACTING PROCESS: THE AGENCY'S INTERFACE WITH COMMUNITY BASED ORGANIZATIONS

Cultivating such close working relationships with community advocates means not only that the Department is well aware of the needs in the community but means also that the Department is expected to do something to respond to those needs. Toward that end, San Francisco's Department of Children and Family Services funds 31 contracts worth more than six million dollars with various CBO's in the city. This extensive contracting out reflects the Department's commitment to providing services that are accessible, culturally appropriate and cost effective. According to one of San Francisco's contract managers. Peter Dahlin," The contracting process is the epitome of collaboration: the point at which the Department, the community and the service providers intersect."

The following list is a summary of the six contracts the Department has with service providers who provide Family Preservation Services. You will notice not only a diversity in the services offered but diversity in the CBO's providing the service:

1. Talkline Parental Stress Line (\$200,000)

- 24 hour crisis and counseling line for parents in need of support
- Provides emotional support, information and referral, telephone counseling, crisis intervention and follow-up services

2. Asian Perinatal AdvoeatesParental Stress Line (838,000)

- Family Preservation hotline services in different Asian languages
- After hour community-based Asian specific telephone counseling, support and referrals

3. Asian Perinatal Advocates In-home Support Services (\$75,650)

- Intensive in-home program for Asian families with children ages 0-5 who are at risk of abuse or neglect

4. Epiphany Center-Mt. St. Joseph In-home Preservation Program (\$394,800)

- Intensive in-home program whose target population is families with infants who are substance-exposed and/or at-risk
- Outreach workers provide parenting skills, child development, substance abuse treatment, mental health services and other services
- Open CPS case not required

5. Family Support Services Family Preservation In-Home Services (\$699,500)

- Intensive home-based services to at-risk families to prevent out-of-home placement
- Services include teaching, parenting, money management, nutrition and referrals
- Priority given to cases in ER and CPS service status

6. Family Support Services Respite Program (\$319,316)

- Short-term in-home or out-of-home respite for families to use on a voluntary basis when their children are at risk of abuse or neglect

Each of these contracts is coordinated by a contract manager who is responsible for monitoring the performance of each contractor via a review of quarterly reports prepared by the provider, soliciting feedback from CWS staff (there are formal procedures in place for doing so) and making regular site visits during which records are reviewed and modifications negotiated. Based on my observation, it is largely because of this three-part feedback loop, as well as the scrutiny that proposals undergo before a reward is made, that contributes to the success of the Department's contracts.

SAN FRANCISCO'S FAMILY PRESERVATION PROGRAM

In addition to the Family Preservation Services provided by the CBO's described above, San Francisco's Department of Children and Family Services has two of its own Family Preservation Units each comprised of six social workers and a supervisor. Interestingly, at the time of my exchange, the front-end units (including Family Preservation) were undergoing a redesign. In part because referrals to the FPP are made primarily by social workers in the Emergency Response (ERU) and Court Dependency Units (CDU), San Francisco's management team decided to reconfigure the units so that each now consists of two Emergency Response workers, two Family Preservation workers and two Court Dependency workers. One of the goals of the redesign is to facilitate coordination among these inter-dependent units.

Regardless of the unit configuration, FP workers will continue to provide "community resource based voluntary in-home services to parents and caretakers of children who are victims or who are at imminent risk of child abuse or neglect or out-of-home placement". The goal of the program is to maintain children safely in their own homes without the intervention of Juvenile Court. Concentrated efforts are made to connect the family with community resources thereby strengthening their support system. In addition to their primary case management duties, each worker is also responsible for spending four hours at selected family resource centers and

schools where the family resides, in a consultant role. As a result, the worker is better able to coordinate the family's services as well as identifying other families who may need services. Several social workers reported that in their estimation, these early intervention and prevention efforts are one of the best ways to keep families out of the child welfare system altogether.

Social workers in the FP Unit have an average caseload of 5-7 families and cases are kept open for an average of 90 days. During the first month, while the family is at the height of crisis, at least three face-to-face visits per week are made with the family. Assessments are made, case plans developed and the family is inundated with services. These services include:

- Assistance with enrolling in and/or monitoring substance abuse treatment
- Mental health counseling
- Medical/Dental follow-ups
- Transportation
- Money for tangible services (move-in costs. utilities. furniture. etc.)

Another unique aspect of San Francisco's program is their "payment only" caseload. This caseload was developed so that services, primarily therapy, could be provided to families whose risk level is not serious enough risk to continue traditional child welfare services but who, in the absence of some services, are likely to deteriorate. In most instances, these payment only cases are those who have recently been closed by an ERU, CDU or FPP social worker. The former social worker is required to summarize how the need for the requested services mitigates risk to the children and the anticipated cost and length of services. These cases are reviewed by the supervisor at three and six month intervals and cannot stay open longer than one year without administrative approval.

IMPLICATIONS AND RECOMMENDATIONS FOR SANTA CRUZ COUNTY

Though making direct comparisons between the counties is difficult given the dramatic differences in population size and make-up, there are still a number of components to San Francisco County's FPP that are transferable and in my estimation, would be beneficial if adopted in Santa Cruz County:

Refine our contracting process: Require contractors to include more information in their proposals, including detailed information about program design (how will referrals will be solicited, how much and how soon services will be delivered), program management, (use of in-kind resources, or other organizational resources) service objectives and outcome measures; build in a mechanism whereby staff who will be making referrals have an opportunity to review proposals and offer feedback before the contract is awarded; assign a contract manager to each contract (this could be someone at the supervisory level) who is responsible for making site visits and monitoring the progress of the contract.

With Proposition 10 monies on the horizon, the number of contracts we enter into is anticipated to rise dramatically. With well-defined procedures in place, we enhance our chances that these contracted out dollars will be used effectively.

Develop formal policies and procedures for the program including delineating a referral process, outlining criteria for acceptance, caseload standards, timelines for services, etc To better define the direction that should be taken in these areas, we should develop an evaluation form that allows social workers as well as current and past contractors to offer their impressions of what is working well and what needs improvement. This sort of feedback loop in San Francisco has greatly enhanced the quality of their program.

Facilitate early intervention and prevention efforts: Create a "payment only" caseload similar to San Francisco's. Currently, there is no mechanism that allows us to pay for counseling for a family even if they call the Hotline requesting help. Moreover, the existence of such a payment only caseload would allow cases throughout the system to close more expeditiously as there would no longer be a need to keep cases open simply so that services can be funded.

CONCLUSION

In the years ahead. I will continue to recall fondly the experience that this exchange provided me and would like to thank all those that were instrumental in making it happen. What an invaluable opportunity to allow oneself to be an observer into a world that is, as a participant, all consuming. In addition to the program analysis and recommendations described previously, I'd like to share a final impression which will have the most lasting effect on me. That is, the extent to which each county is struggling with EXACTLY the same issues: foster parent recruitment, unmanageable caseloads, psychotropic medication policies, filling vacant positions and insufficient resources. The list is long. With minor exception, I could have taken the agenda from nearly every meeting I attended while in San Francisco (at both the management and line staff level), changed the header and used the same agenda in the meetings I attend in Santa Cruz. Now there's a thought that's simultaneously comforting and overwhelming!