

Assessment of Dependent Minors for Placement and Recruitment of Resource and Adoptive Parents

BRIAN REEMS

EXECUTIVE SUMMARY

Adoption of best practices for assessing and placing children and youth in out-of-home care is extremely important for the San Francisco Department of Human Services Agency, Family and Children Services. It will help ensure that clients are placed in safe and enriching out-of-home placements.

The purpose of this case study is to describe the manner in which Alameda County Social Services Agency (SSA), Department of Children & Family Services (DCFS) assesses dependent children and youth who have been abused and/or neglected for out-of-home placements. My 15-day internship consisted of tours and meetings at the Alameda County Children's Assessment Center and the Alameda County Foster Parent recruitment consortium. These meetings were important because of the urgency to ensure all children and youth placed out of home receive the behavioral, therapeutic, and educational enhancement needed to compete with their peers who are not in foster care. I chose to focus on Alameda County Social Services Agency (SSA) due to their visionary effort in developing an extraordinary sys-

tem to place children and youth in homes where they can advance educationally and developmentally.

Alameda County has also implemented a system to recruit foster parents by utilizing the local faith community as a recruitment strategy to enrich the lives of dependents of their Juvenile Dependency Courts. The meetings between the faith community and Alameda County DCFS serve the purpose of allowing the agency to collaborate with the community to better serve disenfranchised families and children/youth.

Establishing a progressive system in San Francisco to address out-of-home placements of children and youth acknowledges the extreme need to invent a revolving door recruitment method for foster parents that will serve to address several imminent concerns. First, this much-needed "state of the art" system will lead to more children and youth being placed in their own neighborhoods and communities. Second, we may find that fewer children require institutional placements. Finally, the system suggests fewer moves for children once in placement.

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Introduction

The purpose of this case study is to better understand the manner in which the Alameda County Children's Assessment Center provides placement for their clients who are dependents of the family court. This case study also examines the manner in which Alameda County recruits foster parents by using traditional recruitment efforts and an exciting partnership with the local faith community.

The expected outcome of my 15-day internship was to make recommendations to the San Francisco County Family and Children's Division on best practices for assessing clients for placement and how to creatively recruit foster parents. Alameda County's process displayed a manner in which an agency can develop a best practice protocol for finding clients supportive placements and developing better partnerships with the community partners to assure safety, permanence, and well-being for at risk children and youth.

Background

The San Francisco County's Department of Human Services Family and Children Services Division is working diligently to help families, struggling through the crisis of child abuse and neglect, to obtain the resources toward healing. As of July 1, 2005, San Francisco County had 2,084 children and youth under the supervision of the City and County's Juvenile Dependency Court. From July 2004 to June 2005, 29.5% of children and youth first entering foster care were placed with kin. From July 2004 to June 2005, 11.9% of children and youth first entering foster care were placed in a group home or shelter

care setting. As of July 2005, 53.6% of the child welfare cases were placed with kin. From July 2003 to June 2004, 79.8 % of children and youth were still in care 12 months after their first entry into care. As of July 2005, 63.9% of children and youth in foster care were placed with all or some of their siblings. As of July 2003 to June 2004, 7.8% of children and youth in a first year foster care episode, who were still in care 12 months after the date of removal, were placed less than one mile from the address where they were removed. The aforementioned numbers illuminate the importance of assessing children and youth for appropriate placement and aggregate recruitment of foster families.

Seventy-two percent of foster children and youth in California are school-aged. Evidence increasingly presents educational achievement as a key component towards stability in placement as well as successful transition out of the foster care system (Altshuler, 1999; Jackson & Martin, 1998). Twenty five percent to 50% of children and youth in foster care fail at least one grade or must repeat a grade in school. One study indicated a third to one-half of adults formerly in foster care had failed or repeated a grade when school-aged (Benedict, Zuravin & Stallings, 1996). Children and youth in foster care are less likely to be enrolled in high school college preparatory classes. Fifteen percent of children and youth in foster care were enrolled in college prep classes, as compared to 32% of a group of children and youth matched for age, gender, and ethnicity but not in foster care (Blome, 1997). Thirty-seven percent of children and youth living in foster care leave high school before graduation, and five years later, 23% of them

have not received a high school degree or the equivalent (McMillen, et al., 2003). Dropouts are 15% less likely to be employed and earn almost 30% less than those who graduate or hold a GED.

Fifty percent of the children and youth in foster care perform below grade level (George, Van Voorhis, Grant, Casey & Dubowitz, 1992; Altshuler, 1997). Children and youth in foster care are more likely to end up in special education classes. While 10% to 12% of the general population receives special education services, 25% to 40% of children and youth in foster care are placed in special education, generally for reasons related to learning disabilities or serious emotional disturbances (Weinber, Zetlin & Shea, 2001). Nine is the average number of schools that a California child in foster care attends by age 18. High levels of residential mobility and behavioral problems contribute to school transfers (Kelly, 2000).

In the past, I was a direct services worker, and I have also supervised a direct services unit. I witnessed through these experiences unfortunate outcomes for children and youth being placed in homes where education was not deemed of great importance to the foster parent concerning their foster child. Many of our clients were placed in positions to pull themselves up by their own bootstraps when out of home placement has left them “without boots or feet.”

Extraordinary foster parents can and will do everything possible to ensure their foster child reaches past their potential educationally. Each foster parent must understand that a child’s education is the only path out of poverty as well as the key to social awareness and activism. The task is considerable; it is not merely to bring foster children and youth to higher educational levels, but to close the gap between their educational levels and those of their peers who are not in foster care. If this does not happen, as foster children and youth advance educationally, their peers who are not in foster care will be moving ahead even more rapidly.

In the last two years, San Francisco has reduced the number of children and youth coming into foster care significantly. It has raised concerns, however,

about children and youth living in the community with higher levels of risk. The San Francisco Human Services Agency has embarked on a number of systems reforms, including Team Decision Making meetings, that involve the community in decisions related to foster child/youth placement. It has also implemented a Differential Response effort to use to intervene early on in those families who are cooperative and willing to reserve informal, voluntary services during the early stages of child abuse and neglect. There is increased focus on the needs of families affected by parental substance abuse and emphasis on family preservation. It has created special units to support families willing to accept help, including having opened an out-station in the Bay View, Hunter’s Point District, deployed substance abuse specialists, coordinated more closely with treatment programs, and invested in neighborhood Family Resource Centers to enable families to seek support before crises erupted or grew worse.

Even with all these services in place, there is still an extreme need to provide more services for families and children and youth in the child welfare system. Another difficulty is meeting the cultural needs of children and youth living in foster care. San Francisco County does not have the culturally-specific homes needed for the plethora of cultures coming into the system. Another aspect of these efforts is the dramatic flight of families from San Francisco to other communities.

These reasons among others have led me to examine new ways in which the Department of Human Services of San Francisco County can enhance the development of best practice protocol and procedures for services to the children and youth they place and the foster families they recruit. The development of programs to address the special needs of the families and communities, while balancing the mandates of the court, fiscal limits, and the agency’s mission statement (which states “We discuss, develop and implement family-focused plans that all parties can embrace. We provide the resources and the skills that will help families”) can be troublesome for any public child welfare entity.

The Procedure

Alameda County became the emphasis of my 15-day internship because they have a specialized system to assess their clients psychologically, therapeutically and behaviorally. In meeting with the program manager, child welfare supervisor, childcare supervisor, childcare counselor, public health nurse, and the mental health consultant, I learned about the methods they use to ensure placement changes are diminished. My observation of the Resource Parent & Adoptive Parent Orientation and the Faith Advisory Council meeting helped me to understand the manner in which the Department of Human Services in San Francisco County could partner with the faith community to develop a process to enhance the number of foster homes available in the county. Trainings set up by the Resource Parent & Adoptive Parent Program and the Faith Advisory Council can offer information to county employees concerning what ways work best in placing children and youth in safe and secure homes. Additionally, trainings offered by these groups could also help keep clients stable when they are placed in homes where they feel supported.

Alameda County Children's Assessment Center

The purpose of the Alameda County Children's Assessment Center is to:

- Provide a supportive child friendly place where children and youth can be brought in and looked after safely while more thoughtful placements are researched, including an assessment of relative placement options;
- Allow more qualified staff to provide timely crisis intervention services to lessen the trauma of removal; and
- Initiate basic physical health and mental health screening with appropriate linkages and referrals.

Generally, Assessment Centers adhere to basic childcare licensing regulations as defined by Community Care Licensing.

HOURS OF OPERATION

The center is open 23 hours per day, 7 days a week (it is closed from 12:00pm to 1:00pm daily). Capacity/occupancy is based upon facility regulations. Staff schedules are based upon child welfare peak intake history. Staff/child ratio is based upon needs of children/youth, with the length of stay not to exceed 23:59 hours.

ELIGIBILITY

Appropriate registrations for the Assessment Center include:

- Youth ages newborn up to age 18 years;
- New referrals for abuse and neglect whether that abuse/neglect occurred while the child was in the family home, relative kin home, or in a foster home;
- Foster Family Agency (FFA) or a group home; and
- Changes of placement due to placement failures or youth AWOL from placement.

Inappropriate registrations for the Assessment Center include:

- Youth who have been arrested for a crime or status offense;
- Youth being released from juvenile hall (whether booked or not);
- Youth released from psychiatric hospitals or from 5150 assessment and not admitted,
- and Wards of court under sections 601 or 602 of Welfare and Institutions Code.

In some instances, and on a case-by-case basis, these registrations may be considered by the Assessment Center Program Manager

INTAKE

A child welfare worker (CWW) or police officer registers a child by calling (510-780-8800). Registration must be conducted via telephone prior to the child or youth being admitted to the Center. The registrar should be prepared to provide important information to the Assessment Center staff regarding the conditions of removal, medical needs, and observed behavior that may be useful to the effectiveness of the Center.

SERVICES

Services at the Assessment Center include:

- Medical and dental screenings;
- Mental health screenings;
- Comprehensive placement services, including, but not limited to, relative placement assessments;
- Developmentally appropriate child care; and
- Access to comfort food, a clothes closet and rest prior to placement.

PARTNERS

Center partners include:

- Social Services Agency;
- Department of Children and Family, Health Care Services Agency;
- Department of Behavioral Health Care, Health Care Services Agency;
- Department of Public Health;
- Kairos Unlimited, Inc.;
- Alameda County Sheriff; and
- Police Jurisdictions.

ASSESSMENT/RECEIVING CENTERS'

BASIC REQUIREMENTS FOR OPERATION

(MODIFIED APRIL 2004)

Physical Plant

- Kitchen facilities, laundry facilities,
- Bathrooms (including bathtub/shower)
- Office space for child welfare staff, including county phones, access to CWS/CMS, copier and fax.

Key Components/Services

- Supervision of children/youth, snack/meals, clean clothing, and/or washing of child's own clothing, supervised/assisted bathing facilities, and crisis intervention and support.
- Transitional counseling, preparing child for next step,
- Child-specific information gathering for emergency placement, completion of intake forms, and
- Personal items (e.g. duffel bags/suitcases toiletry kits, toys etc.)

Screening to determine child's level of wellness is provided by the medical staff. Arrangement and coordination of urgent medical care is made, if needed, prior to placement. Documentation of findings of screening, and any other health information, is obtained. Consultation to social worker and other staff around child-specific health issues or general health concerns is provided along with linkage to CHDP nurses for case management and follow up. Coordination with placement providers and other medical providers (including hospitals and clinics) with medication assistance is also available.

Crisis intervention and stabilization of clients is provided by the mental health specialist. The mental health specialist also provides consultation with staff and resource families, and facilities coordination with other mental health providers.

STABILIZATION TRANSITION ASSESSMENT

TEAM (STAT)

The STAT Team is contracted by West Coast Children's Clinic. The county does not fund the STAT team. The STAT team intervenes with children and youth the day they are removed. This is of great importance because many times these children and youth are placed out of home until relatives can be cleared for placement. STAT's intake includes identifying information, referral/presenting situation, abuse history, developmental history, educational history, placement history, medical history, psychiatric history, substance abuse history, special needs, and disposition/planned services.

STAT is a wraparound program inside the Assessment Center that provides the menu of what the child needs to have a chance at reaching his/her full potential. This team works to diminish AWOLs and looks to enhance stability in placements. It is a 30-day program that gives information to the social worker regarding what is the best placement for the child behaviorally and therapeutically. It clearly defines what placement will work for the child and what placement will not work. STAT assesses every child that comes to the Assessment Center and provides therapy referrals, socialization groups, parenting educa-

tion, and provides extensive consultation with the CWW and the childcare staff at the Center. STAT is about making sure the children, staff, and parents are always safe. STAT goes into the child's home or school to provide support to the parent and social worker. STAT is of utmost importance because it helps enhance a child's strengths and diminishes his or her weaknesses.

RESOURCE PARENT AND ADOPTIVE PARENT RECRUITMENT, DEVELOPMENT & SUPPORT

Parent Resource for Information, Development, and Education (PRIDE) is the vehicle by which Alameda County DCFS recruits, trains and supports its foster parents. It provides information the prospective foster/adoptive parent needs and clearly sets the department's expectations in an effort to make a mutual decision about whether fostering and/or adopting is the right decision for both parties. PRIDE helps prospective parents develop the special knowledge and skills important for fostering or adopting the children and youth the department serves, and it enhances the skills many parents already have.

PRIDE clearly defines their clients as the children and youth who have experienced the tragedy of physical abuse, sexual abuse, neglect and exposure to or involvement with drugs. The children and youth often feel angry or upset because of the unfortunate experiences they have had. They need time to learn things: that adults can be trusted, that they are not going to be hurt, and that there are acceptable ways to express their difficult, sad, or angry feelings.

PRIDE assures prospective parents are being supported before a child/youth is placed in their home, when children and youth are placed, and once they transition out of the home as they emancipate out of the system. PRIDE offers a high level of support for the parents and the children and youth they serve.

Alameda County Social Services is licensed as a Public Adoption Agency by the California Department of Social Services. The Adoptions Program provides services related to the adoption of court-dependent children and youth in the child welfare system in Alameda County, and children and youth

voluntarily relinquished by their parents to the agency. These adoptions are referred to as "agency adoptions." The majority of agency adoptions in Alameda County are of court-dependent children and youth, only a small number of children and youth are voluntarily relinquished to the county annually. The Adoption Program also provides Independent and Step-parent Adoption services for the community and non-dependent children and youth.

In 2006, 76 children and youth were adopted in Alameda County; 39 boys and 37 girls. Ages range from 10 months old to 18 years old. There were 9 sibling groups. 64 families adopted children and youth in 2006. 26 were relatives, and these families included single, two-parent families, and are traditional and alternative families. Using alternative families is just as important as recruitment in the churches because every child deserves a family, and Alameda County recognizes the value of all types of families in a child's life. The orientation and Faith Advisory Meetings are held in community settings where people feel comfortable to share their strengths and weaknesses providing safe and secure homes for dependent children and youth.

Alameda County DCFS is now using billboards and radio messaging in the community they serve to recruit resource parents and adoptive parents. The Alameda County Faith Initiative Faith Advisory Council is making presentations in churches and other faith-based institutions to compel individuals to become resource parents or adoptive parents. Many may say that it is never good to mix church and state, but there once was a time in Alameda County where there were 1,000 resource homes. Today, that number has dwindled to 200. Alameda County recognizes it is now time to think outside the box in regard to obtaining the targeted 400 foster homes for children and youth who need to be placed out of home and in their communities. Alameda County has several outcome goals to address recruitment and retention of resource parents and adoptive parents:

- 1 Increase the number of children/youth/youth in foster care who are placed within their own neighborhood.

- 2 Reduce the number of children and youth in congregate care.
- 3 Decrease the length of time children and youth are in placement.
- 4 Reduce the number of placement moves.

Potentially, all of these goals can be met because Alameda County is training its prospective and current resource parents and adoptive parents to not only develop the art of having a child placed appropriately, but also the art of having the skills to keep that child in a home in good times and bad. Alameda County has a great chance to meet its goals because it has opened up recruitment to everyone in the community. Alameda County is teaching people that those who nurture and educate children and youth well are to be honored. Permanence for children and youth in foster care must garner the same priority as safety in public child welfare.

Factors Contributing to the Success of the Alameda County Children's Assessment Center

Alameda County has a contract with Kairos to facilitate staffing its Assessment Center. This takes the burden off of the county and leaves more county staffing available for other staffing needs. The Assessment Center's main goal is to make sure children and youth feel at home before being placed. I HOP restaurants donate 8 meals a day to the facility. The Assessment Center has a very team-oriented style in regard to counseling clients in a thorough manner because they are coming from an environment that leaves them anxious. The Assessment Centers biggest obstacles are teen prostitution, children and youth going AWOL, and placement instability. The Assessment Center turns these scars into new beginnings, with teamwork being the key for their staff. The Assessment Center staff teaches the clients that it does not matter how many times they fall down, what really matters it is how many times they get up. The staff are ethnological landscapers as well as advocates. They "plant the seed of responsibility and accountability into children and youth and turn shrubbery into oak trees." The staff at the Assessment Center educate their clients that choice not chance

determines human destiny. The essence of the feeling of the children and youth at the Assessment Center is conveyed as, "Oh the inexpressible comfort of feeling safe with a person having neither to weight thoughts nor measure words, but pour them all out just as they are, chaff and grain together, knowing that a faithful hand will take and sift them, keep what is worth keeping and then with the breath of kindness blow the rest away."

Placement and foster care recruitment are housed in the same building, and this leads to all three parties working together for the common goal of providing culturally relevant services to help children and youth and their families to help them remain secure and healthy well into the future. A clinically trained play therapist designed the playroom for children ages 3 and under. The older children and youth have a specific area designed to keep their minds and hearts in tune with having educational and therapeutic needs met.

The Assessment Center is working so well because of efforts made to place children and youth in the community they came from. The Assessment Center works diligently to place all siblings together. Siblings placed in different homes too many times lose that last connection they have. The Assessment Center staff are specifically trained on how to deal with out of control children and youth and teenage prostitutes. The training enhances the Center because it enables the staff to feel comfortable dealing with any crisis that occurs and thereby helps the children and youth to feel extremely comfortable in a very uncomfortable situation. The staff are also trained to never get involved in any power struggles. They understand that this impedes the child's chance at reaching his or her full potential developmentally.

Modeling is used at the Assessment Center from the program manager to the childcare staff in regard to everyone being courteous to the client because nothing costs so little and goes so far as courtesy. The Assessment Center does not use any homes that just shelter dependent children/youth. Children and youth are placed in homes where they have a chance to accomplish their goals universally. The Assessment

Center is such a wonderful place that children and youth at times really do not want to leave because of the social contact and care.

The facility is always immaculate, and this is so important because so many of the children and youth are removed from chaotic dirty environments. The Assessment Center has an employee that specializes in art projects with the children and youth. They made four murals that are at the Assessment Center, and they are extraordinary because you can see the time and energy put into the artwork.

The Assessment Center is a well-oiled machine because no one is concerned about who is getting the credit for the Center's extreme success. There is buy-in for the Assessment Center from the agency director to the security guard. Everyone is working toward one common goal because the managers of the Assessment Center have set and implemented an overarching agenda for the whole group. The Assessment Center is also working well because the managers understand they are enmeshed in a web of relationships, not only with subordinates but also with bosses, peers and others inside and outside the organization, all of whom make relentless and often conflicting demands. The childcare supervisor understands the importance of devoting time and attention to managing relationships with superiors and peers. This manager is doing wonderfully because he has exhibited the character and competence to his staff and they know he is going to make the best decisions to meet the agency's vision for the Center.

Wal-Mart donates underclothes, pants and dresses to the Assessment Center monthly. A women's group donates 100 blankets to the Assessment Center each month. The facility also gets bags donated that include a water bottle, hats, t-shirts, and basic amenities needed by the children and youth as they are placed. The clients are given special containers to hold their things. Some may say that the kids get too many things, but how can one criticize that when we are talking about everything that has been taken from this child during their entire life.

The Assessment Center is very considerate of the manner in which the children are treated from the

time they enter the facility until they leave. The public health nurse does a health screening on every client that matriculates through the Center. A health screening form obtains information on last physical exam, allergies, medications, sleep patterns, history of illnesses, diseases, chronic illnesses, bed-wetting and self-harm. The public health nurse also does an oral health screening that defines last dental visit, last time child ate, any appetite concerns (Anorexia/Bulimia) and type of formula/ special feeding concerns. The health screening ends with observed findings and a summary of discharge comments/recommendations by staff and referrals made to pertinent parties. The public health nurse for Alameda County had the same concerns as most county public health nurses concerning dependent children and youth having a full CHDP physical exam within 30 days of placement. The public health nurse said some children and youth are not seen for a physical exam for over 4 months. This issue could be circumvented if foster care funds were held until physical and dental exams were completed by foster parents.

Implications and Recommendations

The San Francisco County Department of Human Services Agency's Child Protective Center (CPC) provides great service to the clients it serves. San Francisco County is examining enhancing the comprehensiveness and quality of services and should consider adopting some kind of the key program elements found at the Alameda County Children's Assessment Center. San Francisco County should first find a building that is more child-friendly and aesthetically pleasing. Taking CPC out of San Francisco General would help the children and youth that come there feel more at ease before placement. A building or space is needed for the children and youth to have the chance to go out and enjoy the fresh air, play basketball, or just sit in the sun and read.

The CPC should also partner with a Mental Health Consortium to provide the same services being offered by the Alameda County Children's Assessment Center by the Stabilization Transition

Assessment Team. Also of supreme importance as county, state, and federal budgets are cut yearly.

The CPC could also advance by having a contract with an agency that would staff the Center. This would leave more county employees to fill gaps that could help better serve the disenfranchised citizens. The CPC would also flourish if there was a better partnership with the San Francisco Unified School District. This partnership would help ensure that the Assembly Bill 490 is being implemented to have children and youth in foster care treated in the same manner educationally as their peers who are not in the foster care system.

The CPC also needs two staff who specialize in arts and crafts to create art that can be displayed at the Center. CPC needs to partner with Wal-Mart and other agencies that will donate gift bags, containers, food, and specialized gifts to make sure the children and youth there know they are very special.

Furthermore, San Francisco County should partner with the faith community to recruit foster and adoptive parents. San Francisco County should also partner with the gay community to recruit alternative families. Using the faith community and the gay community will raise the number of homes available for dependent children and youth. There is a great need in San Francisco County to garner homes for Spanish-speaking youth in foster care. A special program should be set up to let the Latino community know that more homes are desperately needed. However, one obstacle that will occur in garnering Spanish-speaking homes is that many families who would like to help might be undocumented.

The CPC must partner with their licensing, placement, and community-based organizations to deal with children and youth who are involved in prostitution and AWOL behavior. San Francisco County needs a task force to deal with children and youth who just flat out refuse to accept any placement extended to them. Children and youth who

refuse to go to school, therapy, or any program to improve themselves, should be placed in a specialized unit that can deal with this population. This unit should have the training and support from the agency to work more intensively with clients who can be of great concern and liability to the agency.

Instead of relying on formal authority to get people motivated at the agency, managers must exercise influence by creating a culture of inquiry. The result will be an organization in which people will feel empowered, committed, and accountable for fulfilling the agency's vision. Managers cannot attend to individual performance while paying little or no attention to team culture and performance. As Marian Edelman Wright said, "We can not spend so little on reunification, a little more on foster care, and so much on congregate care." I do believe San Francisco County is moving in the right direction because daily processes are being created that encourage on-going, open dialogue and shared decision-making.

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