

# **A REVIEW OF SAN MATEO COUNTY'S INTEGRATION OF TANF AND CHILD WELFARE SERVICES WITH INTEGRATION RECOMMENDATIONS FOR CONTRA COSTA COUNTY**

**By Steve Peavler\***

## **PURPOSE**

The goal of this project is to explore San Mateo's SUCCESS Program with an emphasis on the integration of Child Welfare Services (CWS) and TANF and to provide a recommendation for Contra Costa County as to how these two separate programs might be integrated and coordinated.

## **SAN MATEO COUNTY HUMAN SERVICE AGENCY ORGANIZATION**

San Mateo's Child Welfare Services are organized around both a centralized and a regional system. Their recent reorganization has taken the ongoing CWS functions to District offices and has left Adoptions and Adoptive Home Finding, Licensing, Foster Care Eligibility, Screening, and the immediate response of Emergency Response and Court Investigations as centralized functions under the supervision of the North Director. This Administration also has Child Welfare policy, alcohol and drug, and direct service teams under his supervision. This region constitutes the North Region.

The Central Region under the direction of the Job Training and Economic Development Director will be responsible for employment and training policy, child care policy and countywide services around PIC, work center, and economic development.

The Southern Region under the direction of the Assistance Program Director will subsume aid payment policy and be responsible for the countywide Shelter Services as well as CWS.

In addition to the specialized responsibility, each region will have TANF direct service teams that include screening and assessment, eligibility technicians, Work First, Family Self Sufficiency Teams, and rental assistance. Beside the regional offices, San Mateo's Human Service Agency staff is involved in a collaborative effort with other agencies at locales other than the Human Services Agency where local teams are created to provide services. In the Northern Region, the "Futures" Unit has been composed of collaborating agencies such as CPS, mental health, and public health nursing. "Futures" has been in the school for several years. More recently, an effort has been made to outstation Children's Services staff at the schools. The Forty-Niner Program is one example of this model.

## **THE SUCCESS MODEL**

San Mateo's "SUCCESS" program, a community based collaborative approach for moving families who were dependent on public assistance to self-sufficiency, was the product of several years of agency planning at a comprehensive community level and now serves as their state approved CalWORKs program. It is predicated on a commit-

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\* Steve Peavler is a Division Manager in the Children's Service Bureau of the Contra Costa County Social Service Department.

ment to outstation TANF eligibility to community based sites in addition to the Human Service Agency office.

The Screening/Assessment Services Specialist (SAS) undertakes the collection of considerable data to determine the factual basis of eligibility as well as determining numerous “family” facts that could affect the client’s ability to be employed. This information will be entered in the SMART case management system and the client will never have to repeat those basic facts as this system is accessible to all the collaborating agencies working with the family. The client, if TANF eligible, then enters the “Work First” component of SUCCESS.

Work First activities are those aimed at teaching comprehensive life management, employment attainment, and retention skills. There are four sites. Each family enters into an agreement on those activities focused on becoming employable. There are a series of classroom settings that help the family reach their goals. Child care may be utilized during this phase. If the client has not obtained employment or only obtains a minimal paying job, the Income/Employment Service Specialist (IESS) will work with the family to develop a skill development plan. This revised action plan utilizes a variety of strategies to increase their employment capabilities.

### **FAMILY SELF SUFFICIENCY TEAMS AND CHILD WELFARE SERVICES**

Since some families have a myriad of problems that impair their ability to obtain or maintain employment, they are referred to the Family Self Sufficiency Team (FSST) for case management services. Also, families that are in noncompliance and ready to be sanctioned are referred to the FSST.

The team is comprised of representatives from other agencies bound together by a multi-disciplinary MOU. The collaborating agencies include Health Resource Specialist, Mental Health Specialist, Alcohol and Drug Specialist, Housing Resource Specialist, Family Social Worker, IESS, Vocational Rehabilitation Specialist, Child Welfare Worker and Supervisor. The IESS, if the family is there on a referral from Work First, is the client’s Primary Case Manager (PCM). If the family is a Child Welfare family, the Child Welfare Worker is the PCM. For other families, the Primary Case Manager can be a representative from one of the other agencies on FSST, based on the needs of the client following the completion of a comprehensive strength-based assessment, home visit information, or other assessment processes. The Primary Case Manager and the FSST will make both short range and long range plans for the family aimed at ameliorating the problems that prohibited them from being employed. The PCM and the family write a Family Service/Plan Agreement and this covers the essential elements of the activities that are necessary to move toward employment self-sufficiency. When the Child Welfare worker is the PCM, they will also assume responsibility for the employment related activities, rather than the IESS. There are seven FSST sites located in different parts of the County. Clients sign a release of information that allows all of the participating agencies to share relevant information about the client.

During my internship I observed seven cases that were referred to the FSST. These cases ranged from authorizing a sanction for noncompliance to rather complex family problem cases which were multi-agency service users that included Child Welfare, Mental Health, Alcohol and Drug, Housing, and probably Public Health had that representative been there. The multi-faceted level of case manage-

ment services would require the Case Manager to have considerable skill in assessment and diagnosis, knowledge of information and referral within the community, and case monitoring.

### **CHILD WELFARE: HISTORY**

Prior to making a recommendation on the integration of CWS and ESS in Contra Costa, I would preface the following philosophical and practice tenants as the foundation for that recommendation. Child Welfare Services is a somewhat young field and has had an accelerated evolution as it has grown out of the Humane Society where the emphasis was on cruelty to animals. The standard for this evolution is a series of Federal and State laws, as well as Appellate decisions, that define the parameters for Child Welfare practice. While there have been many legal and practice themes over time such as pre-placement preventative service, time limited parental reunification services, reasonable effort and reasonable means; family preservation and family strength-based practice, foster care drift, and nonunification; the overriding standard principal is the safety of the child. Child protection is the cornerstone from which the rest of the program is created.

### **CHILD WELFARE AND CASE MANAGEMENT**

Child protection is the accumulative result of Child Welfare case management services. These services, governed by legal requirements and time frames, follow a comprehensive plan based on the risk of detriment to the child. Due to the vulnerability of children and the readily access that a perpetrator (family member) has to a child, it has been imperative that Federal Standards have existed and not allowed for an arbitrary or capricious definition of

Child Welfare. Practice requires face-to-face contact with the children, face-to-face contact with the parents, collateral contacts with many individuals or agencies involved with the family, knowledge of previous Child Welfare services and it's outcome, the age and vulnerability of the child, the nature of the offense, the probability of a reoccurrence of the offense, and parental capacity to empathize with the child and enter rehabilitative counseling. The information gained from these activities provides the data for the risk assessment and subsequent decision making. Many of these same tools and skills will be needed by ESS Bureau's Intensive Case Managers as they intervene with their clients in the office or as they venture into the homes of clients to ascertain their employability and define and articulate the significant employment barriers that might exist.

### **CHILD WELFARE AND EMPLOYMENT SERVICES: COLLABORATING IN THE PROVISION OF SERVICE**

In Contra Costa County, Child Welfare Services, Employment and Supportive Services, other County agencies, as well as Community Based Organizations, will frequently be providing some form of case management or service activity to the same client. It is essential that there be a common forum for the exchange of information, the delineation of service activities and desired outcomes, and as much as possible one comprehensive plan with prioritized goals and specified responsibilities for the varying parties involved with the family. The recommendation for the type of forum would be based on the premise that there would be a release of information signed by the client that authorized limited exchange of information so that the various agencies working with the family could communicate and coordinate their various activities while

ensuring confidentiality in areas that are protected by law. There would be a biweekly meeting scheduled, similar to the Service Integration Team (SIT) and San Mateo's FSST, whereby CWS and ESS would be able to refer parents back and forth through their respective programs and be able to plan for client outcomes and coordinate activities in a noncontradictory manner. As parents entered the assessment phase of the ESS Bureau there would be a clearance to determine if the case is or has been also involved in CWS. If the case is open in each program, then the respective Bureau representatives would meet at the biweekly ESS/CWS collaborative meeting to discuss their goals for the client, and a coordinated plan would be developed based on the goals of both CWS and ESS. Both the CWS worker and the ESS Intensive Case Manager would be responsible for their respective program areas, but the family plan would coordinate and stipulate the respective plans and serve as a cumulative case management plan. The family would participate in the development of this plan and be present in any of the planning meetings that they were able to or wanted to attend. Other agencies, including Mental Health, Substance Abuse Treatment Services, Domestic Violence Treatment Services, Probation, and other Community Based Organizations staff should be encouraged to attend the planning meetings so that the transmission of information and common goals are clearly understood for all the agencies working with the family. The goals are twofold: obtaining employment and resolving the issues that brought them into the child welfare system. Once a coordinated plan is articulated the affected parties would meet periodically to review the client's progress and to address any significant changes in the circumstances. As the ESS and the CWS time clocks tick, it will be important for the CWS, ESS, and collaborative agencies to understand the impact of either the client succeeding in

their objectives or for noncompliance, sanction, termination of eligibility, or removal of a child from the family due to abuse or neglect.

As CWS is approaching recommending to the Juvenile Court, on Reunification cases, that a child should be returned to the family, it will be important to refer the family to ESS if CalWORKs eligibility is the likely financial means of caring for the child. Each agency and Bureau representative would be responsible for their part in the completion of the plan and for any sanctions for parental noncompliance. For CWS, the ESS plan would be briefly described in the Court Report, and the Case Plan in the Voluntary Family Maintenance Plan.

As ESS and CWS, as well as the Community Based Organizations and other County Departments, develop their collective plans for our clients, it is essential that a corresponding fiscal allocation, tracking, and claiming process be developed. For the Social Service Department, it would be advantageous to maximize the fiscal allocation capabilities in order to increase resources. By developing a fluid allocation and expenditure process the Department would be able to fund services in a holistic manner. This model follows the service requirements of the clients as they move through the Department's service programs. An example of this might be that as long as clients are shared between CWS and ESS, the funding for child care, Community Substance Treatment Services and Substance Abuse Testing, Domestic Violence Treatment Services, and Mental Health Services would be allocated through the CalWORKs claiming process. Once a client obtained employment, the funding stream should be covered through Child Welfare Services as the standards for success may be different and many of the services have been ordered by the Juvenile Court. Furthermore,

as a shift is made to a holistic model, additional funding from other sources can be identified and used in filling the gaps where there might be fiscal limitations.

## **CONCLUSIONS**

### **Reorganization of Contra Costa County Social Service Department**

#### **Conclusion**

San Mateo has organized the Department in a manner where the administration of ongoing Child Welfare Services such as Emergency Response, Family Maintenance, Family Reunification and permanent Placement, as well as employment related services are under the direction of Regional administrators who do not have a Child Welfare background.

#### **Recommendation**

Recommend the continued centralization and regionalization of Child Welfare Services under an Assistant Director, Division Managers and Child Welfare Supervisors from Child Welfare backgrounds. Child Welfare policy, administration, and supervision are intricately linked together in areas of case management decision making, program development and implementation, compliance with Juvenile Court issues, and quality assurance and control.

#### **Conclusion**

San Mateo is collaborating with many agencies and Child Welfare staff are assigned to or connected with other agencies such as school sites. While there is strong support in Contra Costa County to continue the collaborative efforts that are currently under way, there is concern that child safety as the primary focus of Child Welfare not be abandoned.

### **Recommendation**

Recommend that Child Welfare staff remain primarily linked to units of other Child Welfare staff and unit supervisors. There is a danger of Child Welfare Services being redefined when Child Welfare workers are outstationed in collaboratives with other organizations. The local "milieu's" definition of Child Welfare Services has the potential of shifting Child Welfare practice to areas other than those defined in Division 31 regulations.

### **Employment and Supportive Services and Child Welfare Service Integration**

#### **Conclusion**

San Mateo has developed a model that brings together Child Welfare Services, Employment Services, Community Based Organizations, and other County Departments in the development of a comprehensive plan for families as they attempt to resolve their barriers to employment and move to economic self-sufficiency.

#### **Recommendation**

Recommend developing a collaborative team approach to case management in Child Welfare and Employment and Supportive Services. This model would be designed with components similar to San Mateo's Family Self-Sufficiency Teams and Contra Costa's Service Integration Team's case management systems. Child Welfare and Employment and Supportive Services staff would assume responsibility for their respective areas of program expertise with goals of a common, noncontradictory service/case plan that is a collective product of the participant family, Social Service staff, and other related community based organizations working in consort with the same family.