# STATEWIDE LEGISLATIVE ADVOCACY (CWDA) AND THE ENHANCEMENT OF FOSTER CARE PLACEMENT PRACTICES IN SAN FRANCISCO COUNTY

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# INTRODUCTION

It is an assumption by most people that when children are removed from their parents or legal guardian(s) that they are always placed in suitable homes and receive adequate care. In recent years, there have been numerous media reports disclosing that foster children have been abused, neglected, and receive substandard care in county licensed foster homes or group homes. It has also been reported that some county placement agencies have been negligent in the care and supervision of court dependent children. In 1998, Senate Bill 933 (SB 933) was enacted to improve services for children in out of home care. The specific focus of the bill is on licensed group homes. As a result of this bill, legislation required the initiation of several work groups to address implementation of policy and procedures of child welfare placement practices and services.

SB 933 implemented changes that holds the State of California Department of Social Services (CDSS), county placement agencies, child welfare staff, treatment providers, and other individuals involved with placement care services accountable for the care, services, and supervision provided for children in out of home care.of the San Francisco Department of Human Services.

This case presentation will give a brief overview of my special assignment with the County Welfare Directors Association (CWDA); summarize the current placement practices with the San Francisco Department of Human Services (SF DHS); and discuss recommendations that would enhance the placement practices for foster children in San Francisco County.

# BACKGROUND

I chose to do my project with the County Welfare Directors Association of California based upon my experience in child welfare and foster care placement practices and my desire to learn about the legislative process (See Appendices A and B)... CWDA is a long-standing organization of social service professionals. CWDA is a publicly funded, private non-profit corporation which represents the views and concerns of California's 59 county social service directors. The association maintains a fulltime office in Sacramento, California with professional staff that includes an Executive Director, Frank Mecca; a Legislative Advocate, Andy Shaw; a Fiscal and Program Specialist, Wendy Russell; and a Legislative Secretary, Cyndi Girardi.

The purpose of CWDA is as follows:

- Advise legislative policy makers and state and federal agencies of impacts of existing and proposed policies on county social service departments;
- Advocate for adequate funding to ensure that programs administered by counties are able to serve California's most needy and vulnerable citizen;

- Advocate for a system of public social services that is responsive to society, helps persons in need and encourages individuals to reach their full potential;
- Establish and maintain effective communication between county social service agencies and the state and federal supervision agencies:
- Develop mutual understanding and interpretation of state and federal laws governing public social service programs;
- Provide a forum for the sharing of information and knowledge of best practices among county social service departments.

My experience at the CWDA office provided a valuable opportunity to work with program facilitator. Frank Mecca and Wendy Russell. I shadowed Mr. Mecca to various SB 933 committee meetings. As a BASSC fellow. I participated in three work groups as well as represented the CWDA office at SB 933 status meetings at the State Capitol in Sacramento. California. I worked in collaboration with several representatives from the California Department of Social Services (CDSS), directors and staff from county placement agencies, attorneys. group home care providers, youth advocates, and treatment providers throughout the state of California. My assignment was to monitor the status of seven SB 933 task forces and work groups required to fulfill various tasks and recommendations mandated by legislation. This project allowed me to become familiar with the legislative process as well enhanced my knowledge of the placement practices and policies initiated by SB 933. My primary assignment was to prepare a monthly report for CWDA and county placement directors. The report entailed a brief summary of meeting dates, required actions, deadlines, and obstacles and challenges encountered by the following seven task forces and work groups.

#### **Reexamination of the Role of Group Home Care and Foster Care**

The primary task of this work group was to reexamine the role of group home care within a family based system

#### Level of Care Assessments

SB 933 Legislation removed the mandates that counties use the Level of Care instrument and replace it with SIC Section 165012 as well as to develop guidelines for a pilot to test the effectiveness of the Best Practice Assessment Protocol.

#### **Development of Procedures and Treatment Plans for Children Prescribed Psychotropic Medication who are in Out of Home Care**

The primary task of this workgroup was to develop a procedure for review of treatment plans for children in out-of-home care who are receiving psychotrophic medication.

#### **Model Group Home Placement Protocol**

This workgroup consists of director's county welfare agencies. group home providers, foster and former foster youth. children advocacy agencies, and other interested parties to develop

placement protocols for emergency and non-emergency placement of court dependent foster children in group homes.

#### Foster Cute Ombudsperson Program

Legislature directed CDSS to establish a foster care Ombudsman program. The intent of the bill is to ensure the protection of children in out-ofhome care. The Ombudsperson program is expected to assist foster children in resolving problems, complaints, or inquiries related to the care and placement needs.

#### **Community Care Facilities Law Enforcement Task Force**

The bill required CDSS to establish a Community Care Law Enforcement Task Force. The primary task of this group was to identify and recommend appropriate policy to ensure effective criminal prosecution of individuals affiliated with Community Care licensing facilities that illegally utilize public funds.

#### **Group Home Education and Training Work Group**

The bill required CDSS in collaboration with the State Department of Public Health, State Department of Developmental Services, county placement agencies, and provider organizations to standardize continuing education for direct care workers and facility managers.

Appendix C will provide a brief description and timelines of the SB 933 task forces and work groups.

#### **OBSTACLES AND CHALLENGES**

To date, all but two work groups have completed their required task mandated by the bill. The most common obstacle experienced by the majority of the work groups was the lack of cooperation from county placement agencies. Work group participants frequently expressed the importance of having input from placement staff to develop appropriate and realistic placement practices. On three occasions, CWDA distributed draft of reports and recommendations to all 59 county social service agencies. Unfortunately, only 20 percent made an effort to respond. One of the most common challenges that I observed was the interaction among the various group participants. It appeared as if each agency representative had his or her own agenda. More importantly, they adamantly justified their agency's position related to policy recommendations that directly impacted their functions. In spite of the common challenges, it was exciting to interact with a large number of individuals who had a common interest in the care of children.

#### ASSESSMENT OF PLACEMENT PRACTICES IN SAN FRANCISCO COUNTY

San Francisco Department of Human Services (SF DHS) has developed innovative programs and changes in departmental policies that will augment the efforts to implement SB 933. The following placement practices have been implemented to strengthen the departmental placement system and services: the use of multidisciplinary team meetings; establishment of a

kinship/relative caretaker and teen units; frequent use of case staffing and reviews; additional services training for staff, implementation of concurrent planning; use of the Placement Advisory Review Committee (PARC); improved collaborative efforts with community advocates and treatment providers; family meetings; development of an African-American cultural specialist; implementation of CWS/CMS computer case management system; development of SF DHS placement task force; expansion of the Independent Living Skills Program; additional hiring of staff; and the addition of the Foster Care Ombudsperson.

SF DHS recently developed a placement task force. The primary task of the group is to review and examine current department policies impacting the care and supervision of foster children. The participants in this task force are representatives from the various service units in the Family and Children Services Division of San Francisco Department of Human Services. Two members of the San Francisco Unified School District have recently joined the group. The group plans to solicit the participation of County Licensed Foster Parents, Group Home Care Providers, Foster Care Ombudsperson, Mental Health Consultant, and the Independent Living Skills Coordinator.

# RECOMMENDATIONS

As a BASSC fellow with CWDA, I had an opportunity to explore the placement policies and procedures of several county placement agencies and group home care providers throughout the state of California. Most of the practice guidelines and recommendations developed by SB 933 work groups are current policy in San Francisco County. I have devised the following recommendations that I feel will enhance SF DHS placement practices and systems:

- 1. Development of a SF DHS Placement Screener
- 2. Redesign Placement Services Integration of Long-term Placement System into the current SF DHS shelter Placement Unit
- 3. Development of a Relative Caretaker Coordinator

# DEVELOPMENT OF SF DHS PLACEMENT SPECIALIST

The SF DHS placement specialist would enhance the current placement system by being responsible for but not limited to the following tasks and duties:

- Ensure that placement workers address common placement factors such as educational history and service needs; dental history, visitation plan, mental health history; social needs and activities; cultural factors; and any additional factors identified in the case plan.
- Ensure accurate completion of additional information packet and documentation mandatory for high level residential placement facilities
- Work in conjunction with SF DHS Foster Family Agency/Group Home Coordinator
- Follow-up status and utilization of placement referrals given to Child Welfare Workers by PARC
- Document and follow-up of reported problems and concerns regarding long-term placement facilities

- Initiate placement holds for long-term placement facilities as a result of complaint investigations
- Document reason for minimally used or unused long-term placement homes
- Examine frequent threats and causes of placement terminations
- Monitor timely exchange of information between SF DHS and placement homes

# **REDESIGN OF PLACEMENT PROGRAM - INTEGRATION OF LONG-TERM PLACEMENT NEEDS INTO THE SF DHS SHELTER INTAKE UNIT**

Placement issues will be an on-going challenge in the child welfare profession. At this time, SF DHS does not have a specialized system to track the use or non-use of long-term placement referrals. Furthermore, there is not a system in place to monitor the quality and supervision of staff and care providers for foster homes and group homes frequently used for long-term placement.

SF DHS has shelter intake staff who monitors vacancies, status of complaint investigations and initiate placement holds on certified foster family agencies homes, group homes, and county licensed foster home specifically used for emergency shelter placements. Shelter intake staff also provide additional support of transporting and transitioning children into new placements. Unfortunately, there is not a specialized program or staff to perform the same duties for facilities used for non-emergency placement.

Strong consideration should be given to integrating a long-term placement system into the existing shelter intake unit. The major change would be adding staff rather than incur additional expenses to develop and implement a separate program with duplicate functions. The shelter intake unit would become a specialized placement program. Foster care licensing function would remain a separate entity within the Department. Five staff positions are needed to integrate this function. The positions would consist of a Placement Specialist, two Child Welfare Workers, and two BA level Social Workers.

#### DEVELOPMENT OF A RELATIVE CARETAKER COORDINATOR

Fifty percent of children in out of home care in San Francisco County are placed with relative caretakers. This population of care providers often receive minimal services, resources, and support made available for licensed care providers. Although SB 933 does not focus on relative caretakers, it has been included in my recommendation. The same problems that occur in licensed care facilities are likely to occur with relative caretakers.

Departmental placement practices should ensure that relative caretakers receive the same quality of services, resources, and care standards made available to licensed care providers.

SF DHS currently work in collaboration with Edgewood Kinship Program to provide additional support for relative caretakers. Unfortunately, most of their resources are available for San Francisco County residents only.

The Relative Caretaker Coordinator would be responsible for but not limited. to the following tasks and duties:

- Monitor complaints and inquires related to relative caretakers
- Develop a separate training series specifically for relative caretakers
- Work in collaboration with the foster care licens ing unit to include relative caretakers in additional training opportunities
- Update relative caretakers about legislation which has a significant impact on Relative and Kinship Care
- Coordinate administrative meeting with SF DHS administrators to address the needs of relative caretakers
- Ensure that placement workers make an effort to provide relative caretakers with the same amount of support and resources made available to licensed care providers
- Monitor the number children placed in relative homes

# **ACTION STEPS**

The DHS placement Task Force should address the following steps necessary to assist with the implementation of the above mentioned recommendations:

- Planning process
- Development of implementation plan
- Budgetary impacts
- Motivation of staff to change and improve
- Preparation for challenges, obstacles, and pitfalls
- Identification and involvement of stockholders
- Evaluation and measurements of outcomes

# SUMMARY

The BASSC project was a valuable experience. It enhanced my knowledge of the primary functions of CWDA, the legislative process, and the impacts that SB 933 in terms of placement practices services in the state of California. It provided an opportunity to reflect on what San Francisco County is doing to improve foster care placement services for children in out of home care.

# THE LIFE CYCLE OF LEGISLATION — From Idea into Law





22 Task Farans and Committee	9	
933 Task Forces and Committee	s TimeframeslDeadlines	Appointments
xamination of the Role of vrvup ne Care and Faster Care	Mtg. Dates: Effective January 7, 1699 subsequent meetings will be heia every two weeks. Final Mtg. March 4, 1999 Finalize product - March 1999 Publish product - April 1,1999 Committee will reconvene SeptlOct 1999	Terry Longoria Prank Mecca Steve Brohmer Peter Digre Charlene Chase Yolanda Rinaldo (By Executive Committee)
el of Care Assessment Process elop state wide standards and l research-based assessments by y 1, 2000	DSS mailed "best practices" ACIN December 17, 1998. Pilot project committee must be convened by July 1, 1999. Identify participants for pilot by July 1, 1999, Pilot to begin September 1, 1999 Evaluation of pilot 2000 Finalize recommendations for implementation May 1, 2001	CWDA Children's Regional Committee's to select representatives Kristy Grasty (Kern County)
of Psychotropic Medication elop procedures for review of ment plans for children in out- ome care.	Last MW April 7, 1999 Next Mtg May 1999 Final procedures to be developed by Department of Mental Heafth July 1, 1999.	Emma Montero (Los Angeles)
ement Protocols to outline the s and responsibilities of ement agencies '	Final Meeting - March 24, 1999 Protocol submitted to CDSS April ,1999 Finalize report to Legislation Ma 1999	Frank Mecca CWDA Danna Fabellla CWDA Debbie Williams (Madera)

ter Care Iblish an Ombudsperson program children in foster care	Final Mtg. March 25,1999 Recommendations finalized March 25, 1999. Recommendations to be submitted to CDSS b Aril 30 1999	Chedy Napier (San Bernardino) Homer Haugh (San Joaquin) Kathy Merrill (San Joaquin) Martha Pina (Loa Angeles) Pies Fisher (Sacramento)
nmunity Care Facilities Law orcement Task Force	Final Mtg. February 19, 1999 Recommendations have been finalized Product released March 4 1999	Dennis McFall (Shasta)
up Home Provider Training ndardized training and continuing cation curriculum for direct care f and facility managers	Fnal Mtg. January 29, 1999 Recommendations to be submitted to CDSS office April 1999	Chris Quentmeyer (Sacramento)
er Children's Policy Committee	S,	<u> </u>
2030 - Workload Study	Final Mg. January 29, 1999	Larry Leaman CWDA
1901- Kinship Guardianship ulations Committee	Last Meeting March 12, 1999	Existing Kinship Care workgroup will function as regulations advisory committee Kathy catkins San Bernardino)
ndardized Curriculum for Social rkers	Last Mtg. March ,1999	Terry Cook (Stanislaus) Juan Ramirez (Stanislaus) CALSWEC Representative 7

#### SB 933 TASK FORCES AND COMMITTEES Status Update Report

#### April 14,1999

In 1998, Senate Bill 933 was enacted to improve services for children in out of home cars. The specific focus of the bill is on licensed group homes. Legislation policy and procedures of placement. practices and services for children. The following is an update of the seven primary workgroups and task forces.

#### **Reexamination of the Role of Group Care and Foster Care**

As referenced in previous status update reports, the primary task of this work group was to reexamine the role of group home care within a family based system. This workgroup has been established to function as a Steering Committee.

A recap of the phases and task are Nsfed below:

- 1. Phase one will involve developing the vision, values, scope and preliminary work plan by the group, which Include background information and the vision of family based service plans.
- 2. Phase two will involve information and data collection, which includes identifying issues, topics, and categories to be addressed, as well as establishing timeframes to accomplish task and activities.
- 3. Phase three will involve information being directed *back* to the Steering committee for summary, distillation of major issues, and development of recommendations.

Since January 7, 1999 the group has had subsequent meetings every two weeks. At this time the Steering Committee b transitioning to phase two of tire work plan. Thib steering committee will reconvene In September or October 1999.

Steering Commife members consist of representatives from various service agencies such as County Welfare Directors Association (CWDA), California Department of Social Services (CDSS), Health and Welfare Agency (HWA), California Services for Children (CSC), California Association of Children Horses (CCH), County Mental Health Directors Association (CMHDA), and California State Fo:aer Parent Association (CSFPA).

On March 9, 1999 a draft of the 39-page report was d'sstributed for review. The proposal and work plan to be submitted to legislature by April 1999.

#### **Development of Procedures of Treatment Plans for Children Receiving Prescribed EOotropic Medication and Who Are Place in Qut of Home Care.**

During the month of March 1999, seven subcommittees within this workgroup developed draAs *related to the* following service factors, which Impacts children in a4A of home required to use psychoactive medication:

- Best Pnecdae the Aftnapement of Psychobplc Wdlcabon fww Children PlacOdIn Out-of-borne Care Subcommittee group number one developed best pmCioa standards focusing on provider responsibilities. diagnostic evaluation, consent and communication, follow-up, docurtlentation, and exceptions were addressed in the draft
- Authorfzatlon of Interagency Exchange of ConfdentW information.
- Subcommittee group number two devised a template that appears to be adequate to use of interagency exdrange of confidential information.
- Recommandatrons ibr Assassmems of Factors in the Home and School Subcommittee group number three addressed the importance of assessing relevant information affiliated with the child's environment als well as potential risk factors in the child's place of residence as part of the treatment plan. A special emphasis was placed on psychosoaal and medical factors.
- Court authorization of psychotropic medkatlon Subcommittee works group number four devised recommendations necessary to obtain authorization of psychotropic medication from the Court.
- Hwfh and Education Passports Summar Subcommittee work group number five addressed the capabilities integration of the health and Education Passport with the Child Welfare ServicesICase Management System (CMS).
- Training Subcommittee work group number six developed the bast practice training outline for group home and FFA staff, foster parents, relative caregivers, placement social workers, judges and other professional involved with the medication management of children in out-of-home care.
- Emancipation Preparation Contact Subcommittee workgroup number seven devised an emancipation contract to be used by foster youth of 14 years of age or older.

The last meeting was held on April 7, 1999. During this meeting efforts were made to finalize all recommendations developed by the sever-subcommittee workgroups. Monthly meeting will continue to be held the next two months. Final procedures will be developed by the Department of Mental Health by July 1, 19£?9\_

# Level of Care Assessments

As of its date, potential participants in the Level of Care pilot project have not been determined. As referenced in the status update report dated March 9, 1999, county line staff from several counties have stated an interest In participating in the pilot. The formation of the work committee

is still in progress. The project pilot Is scheduled to begin September 1, 1989. Participants will be identified by July 1,1999.

#### **Model Group Home Placement Protocol**

This work group consists of director's county welfare agencies, group home providers, foster and former foster youth, children advocacy agencies, and other interested parties to develop rut protocols for emergency and non-emergency placement of court dependent foster children in group homes. As n0erenced in the monthly status update report dated March 9, 1999, the bill required the protocol to address at a minimum:

- 1. Relevant information regarding the child and family that placement workers shall provide to group home, including health, mental health, and educational information.
- 2. Appropriate orientation to be provided by group homes for foster children and if appropriate their families.
- 3. County to provide responsibilities ensuring the child receives timely access to treatment and services.
- 4. County and provider responsibilities include periodic monitoring of foster children to ensure continued appropriateness of placement and continued progress towards achieving case plan and testament plan goals.
- 5. Appropriate mechanism, timelines, and information sharing regarding discharge planning.

The work group developed a nine-page protocol, which summarizes best placement practices. Input and suggestions from county placement agencies, *CDSS staff*, group home providers and work group members was instrumental with the successful development of the Model Group Home Placement Protocol.

A recommendation to revise the outline from an MOU to a protocol format was made on March 10, 1999. Fnal revisions were made on March 24, 1999. The finalized report was submitted to CDSS on April 6, 1999. The group successfully completed the task required by the bill. No additional meetings an: required.

#### Foster Care Ombudsperson

Legislature directed CDSS to establish a foster care ombudsman program. The intent of the bill is to ensure the protection of children in out of home cars. The Ombudsperson program is expected to assist foster children to resolve problems, complaints, or inquiries related to the care and placements needs.

As ice in the monthly update report dated March 9,1999, the Ombudsman Program work group was required to complete the following task:

- 1. (Develop qualification criteria of the Ombudsperson
- 2. Develop the roles and responsibilities of the Ombudsperson
- 3. Outline the process for tracking complaint investigations and inquiries

The workgroup identified that the ombudsman duties would include but would not be limited to:

- Investigating and resolving complaints
- Answering questions and supplying information
- Advocating for foster children with county welfare departments, group home facilities, foster parents, foster family agencies, and health care providers.
- Documenting the number, source, origin, location, and nature of complaints.
- Representing the foster care program before county and state government

That 16 page report references the qualification and autonomy of the ombudsman's duties and responsibilities; the proposed workflow structure of the program; and additional task which requires further exploration in order to contribute to the success of the program.

This qualifications and autonomy of the Ombudsman position requires the Ombudsperson to possessing skills and experiences *that be* specifically related to foster care practices, laws, and resources.

The group identified the following factors which are considered to be pertinent to the workflow and structure of the Ombudsperson program; processing and handling complaints; Intake, mediation, investigations, referrals, data analysis and reporting, and the need for local.

The group also identified three important issues, which requires *further* exploration and consideration to ensure the progress and Implementation of the program:

- 1. CDSS director to select the Ombudsperson in consultation with the Foster Care Ombudsman working committee.
- 2. CDSS to contract with an Independent entity to conduct a third party to evaluate the organizational effectiveness of the Ombudsperson office.
- 3. The committees that policies with respect to 18 to 21 year old foster you be reviewed to ensure tat they receive appropriate social service referrals.

Participants In this group consist of representatives from child advocacy groups, current and former foster youth, county placement agencies, the Ombudsperson council, and CDSS staff. The group finalized their recommendation during their final meeting, which was hell on March 25, 1999. The final product will be submitted to CDSS director Rita Saenz by April 30,1999.

#### **Community Care Facilities Law Enforcement Task Force**

The bill required COSS to convene a community Care Law Enforcement Task Force. The primary task of this working group was to identify and recommended appropriate policy to

ensure a criminal prosecution of individuals affiliated why Community Care Licensing Facilities who illegally utilize public funds.

Task force members were selected in October 1998. The workgroup consisted of representatives from foster and former foster youths, care providers, CDSS, pmbatlon, child welfare workers, and CWDA. Four subsequent meetings were held on October 28, 1998, December 2, 1998, January 13, 1999, and January 29, 1919. The group successfully completed their task on February 19, 1999. The report was finalized and released on March 4,1999.

#### **Group Home Education and Training Workgroup**

This bill required CDSS in collaboration with the State department of public Health, State Department of Developmental Services, county placement agencies, and provider organizations to standardize and continuing education for direct care workers and facility managers.

Thai workgroup was convened on October 23, 1998. Group participants consist of representatives from CWDA, Community Care Licensing; California. State University, Department of Development Services, Policy Development Bureau, Foster Care Rates Bureau, California Association Services for Children, California Association of Children Homes, Family Resource Advisory Team, and Yuba County Probation fflice. Four meeting were hold on November 13, 1998, December4, 1998, January 6,1999, and January 29,1999.

This group successfully completed their required task mandated by the bill. A summarization in the report clearly states that their recommendations are not intrmded to replace current regulatory requirements but to enhance established training plans.

As referenced in the monthly update reported dated March 9, 1999; the work group targeted the following 11 categories:

Initial Staff Training Ninety Day Training Requirements Annual Training Requirements Training Plan Quality Assurance Employee Handbook/Manual Policies and Procedures Owlside Training Emergency Intervention Training Group Training for Children Under Six Approval of Training Content and Trainer Qualifications Training Requirements for Facility Managers (See attached draft)

The workgroup successfully completed their task As of this date no additional meetings are required. Final recommendations will be formalized and forwarded to CCLD Policy Development Bureau by April 1999. PDB will develop emergency regulations and integrate recommendations by July 1, 1999. PD9 will develop permanent regulations by January 1, 2000.

This report was prepared by: Sophia Isom, M.S.W. CVIDA BASSC Fellow

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