

CHILD WELFARE SERVICE INTEGRATION IN ALAMEDA COUNTY'S "FRONT END" PROGRAMS

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EXECUTIVE SUMMARY

Many social services agencies are talking about service integration as a critical issue facing their agencies. What exactly does it take to implement a successful service integration plan? Alameda County Social Services, Office of Agency Planning believes that a successful service integration plan requires, minimally, two substantive changes. The first is that there needs to be greater focus on the needs and strengths not only of the client, but also of her/his whole family and the neighborhoods in which they live and work. The second is that a greater emphasis needs to be placed on integrated services for prevention and improvements beyond immediate response to crisis need. Both of these areas are areas that Child Welfare Agencies are not always the most responsive to given high caseloads, the crisis nature of the work and the restrictions of confidentiality, just to name a few.

Alameda County Social Services Agency, Department of Children and Family Services have begun to look at service integration and believe that they have found an innovative way to provide comprehensive services to their clients, while meeting State and Federal mandates. They are beginning to implement the Alternative Response System. This program will divert "low risk" Child Protective Services referrals to contracted Community Based Organizations. The community based organizations will provide in home/in person responses where they will assess the families functioning. They will be using, as will the Child Protective Services social workers, the California Structured Decision

Making System/Model to help ensure that consistent through assessments are conducted.

The Alternative Response System appears to have the system changes that service integration finds essential to success. It focuses on the entire family and the community in which the family lives. It takes services out of Child Welfare offices, where clients often feel uneasy, and puts services into neighborhood agencies that the client is often familiar and comfortable with. It also places emphasis on prevention and improvements beyond immediate response to crisis. One of the programs main assumptions is that families will be more likely to work with the community based organizations on an on-going "voluntary" basis, thus helping to ameliorate family problems and making the likelihood of subsequent referrals less likely.

The following paper will provide details on the Alternative Response System and the California Structured Decision Making System/Model as they are being implemented in Alameda County.

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BACKGROUND

For my BASSC Executive Development Project, I selected to look at service integration in Alameda County. Although there are many benefits to working in a small county, smaller counties do not typically have an entire office dedicated to looking at specific areas like service integration. I completed my half day BASSC project at Alameda County, and I was aware that they were looking at service integration in their "front end" programs in the Department of Children and Family Services. Alameda County has been working closely with the Child Welfare League of America on service integration, in particular on beginning to design and implement the Alternative Response System.

In Alameda County, as in Santa Cruz County, they are looking at ways to collaborate with community-based organizations and provide more comprehensive services to clients. They have been looking for innovative and effective ways to approach the work that they do and meet the state mandates they are charged to comply with. I was also aware that the California Structured Decision Making System/Model is a key part of the Alternative Response System. Santa Cruz County has been looking at implementing a standardized risk assessment. The California Structured Decision Making System/Model was one our county wanted to explore. Not only did I get the opportunity to take a close look at the Alternative Response System and the California Structured Decision Making System/Model, but I also got an opportunity to see the inside workings of another county. I found the entire experience invaluable.

ALAMEDA COUNTY SOCIAL SERVICES, OFFICE OF AGENCY PLANNING

I chose to complete my internship in Alameda County's Office of Agency Planning, not directly in the Department of Children and Family Services because I wanted to get a bigger picture of service integration and its key assumptions and goals. The Office of Agency Planning is responsible for the overall agency strategic planning and service integration. The office believes that a successful service integration plan requires, minimally, two substantive system changes. The first is that there needs to be a greater focus on the needs and strengths not only of the client, but also of his/her whole family and the neighborhoods in which they live and work. The second is that a greater emphasis needs to be placed on integrated services for prevention and improvements beyond immediate response to crisis needs. Both of these areas are areas that Child Welfare Services are not always the most responsive to given high caseloads, the crisis nature of the work and the restrictions of confidentiality.

The Office of Agency Planning is currently looking at service integration within the entire Social Services Agency. The project will be organized around cross-functional units who will provide comprehensive services to families who are involved in many services with different departments throughout the Agency.

As I previously mentioned, I specifically wanted to look at how Alameda County was looking at service integration, on a smaller scale, in the "front end"

programs in Children and Family Services where they are applying the two key system changes that are crucial to service integration:

- That there needs to be a greater focus on the needs and strengths not only of the client, but also of his/her whole family and the neighborhoods in which they live and work.
- That a greater emphasis needs to be placed on integrated services for prevention and improvements beyond immediate response to crisis needs.

ALAMEDA COUNTY SOCIAL SERVICES, DEPARTMENT OF CHILDREN AND FAMILY SERVICES: AN OVERVIEW

The Children and Family Services department in Alameda County carried out a major organizational restructuring in 1998 in order to better serve the families and children in their system. Three new program and service configurations were developed: the Family Services Division, the Support Services Division and the Community Services Division.

The Family Services Division serves a variety of families, most of who are under the supervision of the Juvenile Court. Emphasis is placed on reunifying families whenever possible, or offering more extensive intervention to prevent placement. In the event that a child cannot return to his/her family of origin, best efforts are made to place the child in caring permanent home.

The Support Services Division houses programs that do not provide direct services to families, but that are broadly supportive of all service programs. Such programs include licensing, eligibility, CWS/CMS, and placement services.

The focus of my internship was on the Community Services Division. The Community Services Division encompasses the “front end” or “point of entry” programs, including Emergency Response, Dependency Investigations, and Family Preservation. Other programs in this Division are the Family Mediation Program, School Linked Services, Neighborhood Services and the CALICO Center. These programs are designed to divert families from formal involvement in the court dependency process.

“FRONT END” SERVICES IN ALAMEDA COUNTY: AN OVERVIEW

In 1998, Alameda Counties Emergency Response Child Abuse Reporting Hotline received over 18,000 calls. Sixty percent of the calls (11,350) receive a minimal response from Emergency Staff. A majority of these calls to the Hotline, 7,238, are not allegations of child maltreatment and do not require a CPS response. Approximately 4,000 calls are duplicate or repeat calls about the same incident or family, or are call about cases already open to CPS.

Over 7,000 referrals were assessed for possible child maltreatment by Emergency Response staff and, of this number, 5,355 cases received a face-to-face assessment and investigation from a social worker. Over 2,200 cases received a more intensive assessment by a Dependency Investigation worker and half of these cases ere opened for services: 260 to the Family Preservation program, 300 to Family Maintenance, and 632 were placed out-of-home in the Family Reunification program.

ALTERNATIVE RESPONSE SYSTEM

In Alameda County, as in Santa Cruz County, the only response to referrals of child abuse and

neglect available is to investigate the referrals, and if there is risk of abuse and neglect, families are referred for services. Unfortunately, following investigations many families are not open to working with the agency to remediate family problems. Families where parenting problems exist, but where the risk does not justify court ordered services, often go unserved until the problems escalate and the child is harmed.

The Alternative Response Systems divert “low risk” referrals from Child Protective Services investigations to an outreach program that offers services to the family to remediate family problems. These cases must meet one or more of the definitions of child abuse contained in Penal Code 11165.1 to 11165.6. They are not cases that would be assessed out. These identified families are sent to a community-based agency that is contracted to visit the family and offer services to improve parenting.

All families referred to Child Protective Services and who meet the screening criteria, will be rated at intake as high, intermediate or low risk. Those families rated low risk will be referred to a community-based contracted agency that will offer and provide services to the family. “Low risk” has been defined as neglect allegations, physical abuse allegations on children 5+ years old and physical abuse allegations on parent-teen conflicts. Child Protective Services will track those families referred to the Alternative Response System, but will provide no further services or intervention to those families unless a new referral is received or unless the contracted agency identifies the family as high risk for further abuse and neglect.

The guiding principles of the system are:

- Child safety will always be the top priority of all programs operated or funded by Child Protective Services.
- Families make changes best in an environment in which they feel they are respected and are able to decide how best to address their needs in partnership with the serving community-based agency.
- It is best to provide services to families in their own community where culturally-based services are emphasized.
- It is best to provide “preventative” services to help strengthen and preserve families.
- A standardized and uniform decision making model is essential to ensure consistency throughout the program.

Each community based agency contracted to provide outreach services to families in the Alternative Response System will have the ability to:

- Respond in person/in home to the family within seven days of the referral
- They will conduct family strength based assessment with the family’s input. They will assess the family for their ability to parent, protect their children from abuse and neglect, and provide for the children’s special needs
- Identify when risk of abuse or neglect is high and refer those families back to Child Protective Services for intervention
- Provide in-home parent support and/or education
- Screen all children in the home for health and developmental needs
- Provide referrals to other treatment agencies in the community (this includes providing background to the agency, assisting the parents to schedule appointment and determine funding sources and assist the parents in attending services)

- Purchase basic needs for the family to enable them to meet parenting responsibilities.

When the community-based agency meets the family they will explain that a CPS referral was received concerning their family and that the referral has been diverted to the Alternative Response System. They will then ask the family to participate in an assessment that will include:

- Family strengths
- Parenting abilities
- Family supports
- Safety of the home
- The ability to meet the special health and education needs of the children

The assessment will be shared with the family and modified to address their input. Services to address any problems will be offered. The agency may provide six in-home visits to the family if they are not assessed as high risk.

If the assessment indicates that the risk of abuse or neglect of the child is high, or that the child has current injuries resulting from abuse or neglect, the family will be referred back to the Emergency Response Unit of Child Protective Services for investigation. The family will be told that the referral is being made and will be encouraged to make the referral themselves.

The community-based contracted agency will maintain a file for each family served. A report will be provided to Child Protective Services following the closure of each family file. The report will include an assessment of the family's risk for child abuse and neglect, whether services were offered to the family and whether the family accepted services.

STRUCTURE DECISION MAKING

As stated previously, in order to implement the Alternative Response System a systematic risk assessment is needed. Alameda County has chosen to begin implementing the California Structured Decision Making System (SDM). The overall goal of the Structured Decision Making System/Model is better protection of children. The process goals are:

- To improve assessments of family situations in order to better ascertain the protection needs of children
- To increase consistency in case assessment and case management among child welfare staff within a county, among counties and in the case of the Alternative Response System, among contracted Community-Based Organizations
- To increase the efficiency of child protection by making best use of the available resources
- To provide management with data needed for program administration, planning, evaluation and budgeting.

The System goals are:

- To reduce the rate of subsequent abuse/neglect complaints and substantiation's
- To reduce the severity of subsequent abuse/neglect complaints
- To reduce the rate of foster care placements
- To reduce the length of stay in foster care

The System/Model begins with the response decision trees to assess how quickly the investigation must be initiated (immediate or within 10 days). There is a decision tree for each category of abuse/neglect: caretaker absent/incapacitated, emotional abuse, physical abuse, sexual abuse and neglect. The response priority decision trees are to

be completed on every new child protective services referral that is taken for which an in-person investigation will be completed. This includes new information received on families already open to services in the agency. The decision trees are designed to guide decisions, not to replace worker judgment. If, after consultation with a supervisor, it is agreed that appropriate completion of the tree leads to a decision that does not apply to a particular case due to unique circumstances not captured by the tool, the supervisor may approve an alternate decision using policy or discretionary overrides.

All referrals that are assigned for in-person investigation or any open referrals or cases in which circumstances require an assessment of safety due to change in family circumstances, change in information known about the family and/or change in ability of safety interventions to mitigate safety factors require that the social worker complete the California Safety Assessment. The purpose of the safety assessment is to help assess whether any children are likely to be in immediate danger of serious harm/maltreatment which requires a protecting intervention and to determine what intervention should be initiated or maintained to provide appropriate protection. Safety assessment differs from risk assessment in that it assesses the child's present danger and the interventions currently needed to protect the child. In contrast, risk assessment looks at the likelihood of future maltreatment.

The safety assessment consists of three parts. The first is safety items. This is a list of critical factors that must be assessed by every worker on every case. These factors cover the kinds of conditions, that if they exist, would render a child in danger of immediate harm. The second is safety interventions. This section is completed only if one or more safety factors were identified. If one or more safety

factors are present, it does not automatically follow that a child must be placed. In many cases, it will be possible for a temporary plan to be initiated that will mitigate the safety factors sufficiently so that the child may remain in the home while the investigation continues. The safety intervention list is made up of general categories of interventions rather than specific programs. The worker should consider each potential category of intervention and determine whether that intervention is available and sufficient to mitigate safety factors and whether there is reason to believe that the caretaker will follow through with a planned intervention.

The last part of the safety assessment is safety decision. In this section, the worker records the result of the safety assessment. There are three choices: no safety factors were identified, one or more safety factors were identified and the worker was able to identify sufficient protective interventions that lead the worker to believe the child may remain in the home for the present time, and children could not be safely kept in the home even after considering a complete range of interventions.

If a referral is substantiated or inconclusive, the worker must then complete the California Risk Assessment. The risk assessment is composed of two scales: the neglect assessment scale and the abuse assessment scale. The scales are based on research on cases with substantiated abuse/neglect that examined the relationships between family characteristics and the outcomes of subsequent substantiated abuse/neglect. The scales do not predict recurrence, but simply assess whether a family is more or less likely to have another incident without intervention by the agency. The risk assessment is completed based on conditions that exist at the time the incident is reported and investigated as well as the prior history of the family. The risk

assessment identifies families which have low, moderate, high or very high probabilities of continuing to abuse or neglect their children. By completing the risk assessment, the worker obtains an objective appraisal of the likelihood that a family will maltreat the children in the next 18 to 24 months.

The difference between risk levels is substantial. High risk families have significantly higher rates of subsequent referral and substantiation than low risk families and are more often involved in serious abuse/neglect incidents. When risk is clearly defined and objectively quantified the choice between serving one family or another is simplified. Agency resources can then be used to target higher risk families because of the greater potential to reduce subsequent maltreatment.

On every referral that is promoted to a case, the California Family Strengths and Needs Assessment is used. The family strengths and needs assessment instrument is used to evaluate the presenting strengths and needs of the family. This assessment is used to systematically identify critical family needs and help plan effective interventions. The strengths and needs assessment helps to ensure that all social workers consistently consider each family's strengths and needs in an objective format when assessing need for services. It also provides an important case planning reference for workers and supervisors. When the initial strength and needs assessment is followed by periodic reassessments, it makes it easy to assess changes in the family functioning and thus, assess the impact of services on the case. The strengths and needs assessment could also be used by the Community Based Organizations before they close a case to detail where (and why) families were referred to on-going services.

Both the Alternative Response System and the California Structured Decision Making System/Model are in the beginning stages of implementation in Alameda County and cannot yet be evaluated. I have developed good relationships with the staff in Alameda County and hope to be able to follow the progress of these programs.

IMPLICATIONS AND RECOMMENDATIONS FOR SANTA CRUZ COUNTY

The Alternative Response System is an interesting and exciting program. I know that in Santa Cruz County we have put a priority on developing our relationships with community-based organizations and value collaboration. We have also talked about getting the community's help in dealing with child abuse and neglect. The Alternative Response System accomplishes all of these things. It also allows families to work with agencies within their own community whom they might already know and trust more than a Child Protective Services Agency. It could be a great "preventative" program as a key assumption is that families will be more likely to work with the community-based organizations on an on-going "voluntary" basis.

A major concern would be with non-Child Protective Services workers conducting child abuse investigations/assessment. I was involved with our Agency's Family Violence Response Team and we attempted to set up a similar model where a community-based organization would conduct investigations/assessments. Our county counsel would not agree to such a model. The Child Welfare League of America has been working with Alameda County on the Alternative Response System and report that several other counties have successfully implemented this model with their county counsel's approval.

More immediately applicable to our county is the California Structured Decision Making System/Model. The Child Welfare League of America has also been in our county recently and had recommended that we implement a standardized risk assessment. The California Structured Decision Making System/Model is being piloted in several counties and appears to be the direction risk assessment will take in California. Because of this, and as a result of my BASSC internship, Santa Cruz County has already scheduled to have a consultant come meet with key staff to go over the Model. Once this happens it is anticipated that we will move forward in beginning to train and implement this Model.