



THE LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES

To Enrich Lives Through Effective and Caring Services.



ANNUAL
REPORT

Fiscal Year
2012 - 2013



Gloria Molina
First District



Mark Ridley-Thomas
Second District



Zev Yaroslavsky
Third District



Don Knabe
Fourth District



Michael D. Antonovich
Fifth District

Commissioners Serving from July 2012 – June 2013

**Supervisor Gloria Molina
First Supervisorial District**

Steven M. Olivas, Esq.
Adelina Sorkin, LCSW/ACSW
Martha Trevino Powell

**Supervisor Mark Ridley-Thomas
Second Supervisorial District**

Dr. La-Doris McClaney
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Daphne Ng
Harriette F. Williams, Ed.D.
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**Supervisor Zev Yaroslavsky
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Carol O. Biondi
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Ann Franzen
Dr. Sunny Kang
Sandra Rudnick

**Supervisor Michael D. Antonovich
Fifth Supervisorial District**

Genevra Berger
Patricia Curry
Becky Shevlin
(Appointed April 30, 2013)

Commission Officers

Genevra Berger, Chair
Susan F. Friedman, Vice Chair
Helen Kleinberg, Vice Chair

**Commission Staffed by
Executive Office, Commission Services**

Sylvia Drew Ivie, Executive Liaison
Martha Arana
Garen Khachian
Vibiana Navarro

Commission Mandate

Twenty-nine (29) years ago, on May 8, 1984, the Board of Supervisors (Board) approved the creation of the Commission for Children and Families (Commission). The Commission was given the responsibility to monitor and evaluate the recommendations made by the Children's Services Task Force.

The Commission was given the added responsibility in its Ordinance to:

- Review all programs administered by County Departments that provide programs and services for all children at risk.
- Receive input from appropriate community groups and individuals concerning County-administered children's services programs.
- Review and make recommendations to your Board concerning legislation dealing with children's services.
- Make recommendations, as necessary, to various department heads to improve children's services.
- Make recommendations, as necessary, to your Board on action to be taken to improve children's services.
- Provide an annual report to your Board concerning the status of children's services, along with recommendations for their improvement to be utilized for broad community distribution and discussion.

Historically, and in Fiscal Year (FY) 2012/13, the Commission advocated for enhanced coordination and collaboration of County Departments and community partners in an effort to improve outcomes for children and families within Los Angeles County. This continued commitment emphasizes key elements of the Family + Community + County Continuum of Care (FC4) model that was developed by the Commission and first introduced in the [Commission's 2004/05 Annual Report](#).

The Commission now in its 30th year has demonstrated the ability to pose difficult questions, suggest solutions across department boundaries, advocate for children and families in the communities and child welfare system, envision need for structural changes and County/Community partnerships, value the role of caregivers, community resources, and the need for preventive supports for families, children, and Transitional Age Youth (TAY).

Our continuing goal is to advocate for children and families, and to ensure a continuum of care that is comprehensive, coordinated, and well integrated with County Departments, County Clusters (i.e. Children and Families' Well-Being, Health and Mental Health Services, and Public Safety Clusters), Service Integration Branch, caregivers, the private sector and the community.

Commission Activities in 2012/13

Introduction

During Fiscal Year 2012/13, the Commission has focused on three primary areas: 1) collaboration with the Department of Children and Family Services (DCFS) in the development of activities needed to implement their Strategic Plan; 2) preventative programs to minimize the number of families coming into the departmental system or to minimize the escalation of service in treatment modalities once they are in the system; and 3) improvement in interdepartmental and community partnerships including a continuum of care that, if not entirely seamless, is consistent throughout and is punctuated with aftercare programs, which can help maintain the family progress.

Community Partnerships

Fiscal Year 2012/13 began with a public discussion of the DCFS Safe Children Strong Families redesign, under which DCFS' plan was to issue new contracts providing a full continuum of care for families and children in community-based organizations. The redesign also called for a collaborative effort with other agencies in the development of the continuum. To this end, a Request for Proposal (RFP) was issued and subsequently recalled and reissued. The Commission is following closely the effects of these collaborations and the departmental monitoring of the selected contracts. In this regard, the Commission has two long-standing **recommendations**: 1) to monitor all community contract agencies by using objective measures of contract compliance, fiscal accountability, and quality outcomes; and 2) to involve community agencies in the development of monitoring strategies.

Department of Mental Health

The Commission addressed mental health issues in its Children/TAY Mental Health Workgroup. The Workgroup reported to the Commission and adopted the following **recommendations** for the Department of Mental Health (DMH) to:

- Report outcomes on housing occupancy by TAY due to low occupancy of some providers;
- Improve services for TAY in the Antelope Valley;
- Provide greater transparency in the Mental Health Services Act (MHSA) financial reporting;
- Require all committees, ad hoc committees and subcommittees of the Systems Leadership Team (SLT) to be posted and open to the public;
- Deploy mental health services staff to Probation Day Centers to meet unmet mental health needs;
- Expand respite programs for care providers;
- Provide transparent tracking of MHSA prudent reserve and unspent funds by age group;
- Increase the responsibility and oversight authority of the SLT to provide more oversight of MHSA funding and programs;
- Restructure the SLT to be more responsive to different age groups and representative of the community;
- Expand the SLT membership to include more representatives of children and TAY and reduce the number of DMH employee members;

- Initiate greater and more in-depth collaboration with other departments to work on shared mental health concerns of children and TAY; and
- Expand prevention and support for youth who are at-risk of crossing over into the juvenile justice system.

Department of Children and Family Services

Strategic Planning was initiated under Director Philip Browning for the first time in many years. Commissioners were invited to participate in the following discussion groups for DCFS Strategic Planning and two-thirds of the Commission members volunteered for this additional assignment, attending numerous meetings over an eight-month period:

- Prevention/aftercare;
- Timelier Reunification;
- Self Sufficiency for TAY;
- Increased Relative Placements;
- Technology Needs Assessment and Provision of Tools to Staff;
- Reduction in Crossover Youth;
- Securing Title IV-E Waiver;
- Reduction of Youth in Care Three Years or Longer (including facilitation of focus groups of youth in care more than 36 months as approved by Judge Nash);
- Contracting and Oversight of Contracted Services;
- Training Needs Assessment/Redeveloped Curriculum with Inter-University Consortium;
- Coordination and Teaming with Public Health Nurses;
- Visitation Centers;
- Regional Office Community Advisory Bodies to Develop Resources, including Resource Centers;
- Outreach and Training for Partners (including Contracted and Non-contracted Partners); and
- Parents in Partnership Program.

A Strategic Plan Objective was initiated as a result of the Commission's recommendation to form a workgroup that examines issues concerning children age zero to five, focusing on young children remaining under care of the DCFS for more than two years.

Implementation of AB 12 was initiated allowing youth, turning 18 years of age in 2012, to stay in the child welfare system or opt out. Eighty percent of eligible youth opted to stay in. The Commission has worked closely with the DCFS Independent Living Program and Probation Department concerning necessary structural changes required.

The Commission is represented on the State Commission and County Taskforce on Commercially Sexually Exploited Children. In June 2013, the County Task Force submitted a preliminary plan to the Board. The Chief Executive Office (CEO) will work with the Task Force to construct a plan to implement their regulations.

The Commission has been working with DCFS to assure that hiring of additional social workers includes personnel who will have the necessary language and cultural competence to work effectively with foster families.

First 5 LA

The First 5 LA Commission (First 5), on which the Commission holds a seat, approved the allocation of \$25 million to provide supportive housing for homeless mothers/fathers with children ages zero to five that were either previously involved in the child welfare system or were existing foster care families and at risk for homelessness.

In addition, a Commission representative met with First 5 leaders and others to **recommend** that an allocation of some portion of grants already in place be allocated to foster youth in:

- Parent-Child Interactive Therapy (PCIT) with DMH;
- Substance Abuse Services with the Department of Public Health (DPH) for documented and undocumented women with substance abuse challenges;
- Support for Pregnant and Parenting Teens known to DCFS and Probation, particularly in light of AB 12 youth who opted to stay in the child welfare system; and
- Increased collaboration with DPH and their Nurse/Family Partnership Program under a new Memorandum of Understanding (MOU).

Probation Department

Jerry E. Powers, Chief Probation Officer, continued his reorganization and rebuilding of the Department. The Commission assisted those efforts by supporting specialized programs for youth in Probation camps. For example, one of the Commissioners was closely involved with State, County, and private foundation support to: 1) rebuild Camp Gonzalez; 2) support the Annual Solar Cup competition sponsored by the Metropolitan Water District (MWD) of Southern California in which Camp Gonzales youth built electric boats; 3) develop a Public Service Announcement on water conservation which took first place in MWD's competition; and 4) Champion Road to Success participation in Freedom Schools held at Camps Miller and Afflerbaugh during the summer of 2013.

With respect to nutrition, three Commissioners visited Challenger Memorial Probation Camp (Challenger) after receiving complaints about the food served at Challenger from staff and youth. The Commissioners met with staff from the CEO to discuss these issues and need for improvement. The Commission adopted and forwarded the following **recommendations** to the Probation Department:

- Solicit from the proposed contractor of food services a detailed plan to improve the quality and taste of food at Challenger, including any additional cost estimates and a description of the United States Department of Agriculture (USDA) and State regulations that are barriers to addressing the problems;
- Establish a group of peer advisors at each of the detention facilities to evaluate food service and quality on a quarterly basis;
- Hold quarterly Town Meetings in the facilities to discuss facility conditions including nutrition, and to hear suggestions for improvement in quality and taste of meals;

- Have DPH and Department of Health Services (DHS) report to the Probation Department and Board on issues of weight gain and loss in the 3rd, 6th and 9th months after arrival of the youths at camp;
- Have DPH investigate and report health, safety, and sufficiency indicators and provide the vendor and Probation responses concerning:
 - temperature of foods at time of consumption
 - expiration dates on milk
 - methods being used to ensure food does not run out before all youth are served
 - lag time between preparation and service of meals
 - ongoing accountability; and
- Have Probation document, within 60 days, USDA requirements and State regulations of snack offerings and service of meals on the posted menu to ensure they are being met.

With the assistance of several Board offices, substantial improvements were made. Camp Challenger changed the way the food is delivered, the quality of the food has improved, and DPH now makes regular checks on the food.

Policy Roundtable for Child Care and Development (Roundtable)

The Commission has long held a seat on the Roundtable and has worked collaboratively to identify gaps in child care, including children in the foster care system. The Roundtable is concerned about the diminishing slots for infants, the need to ensure quality child care, and addressing access to child care. The Commission, through a joint Workgroup with the Roundtable, developed a set of key recommendations relating to young children in care. The Commission adopted these **recommendations** as part of its ongoing effort ([Download Joint Working Group Recommendations](#)).

ADDITIONAL RECOMMENDATIONS 2012/13

In addition to the recommendations contained in the foregoing sections, the Commission made two broad recommendations:

- I. DEVELOP A COUNTY STRUCTURE TO COORDINATE AND INTEGRATE SERVICES AND BLEND FUNDS FOR COUNTY DEPARTMENTS THAT PROVIDE SERVICES FOR AT-RISK CHILDREN AND FAMILIES.**
- II. UTILIZE MHSA FUNDING TO PROVIDE THE CRITICALLY IMPORTANT PREVENTION AND INTERVENTION SERVICES NECESSARY TO GIVE CHILDREN A SELF-SUFFICIENT AND PRODUCTIVE LIFE AND AVOID INVOLVEMENT IN THE CHILD WELFARE AND/OR CRIMINAL JUSTICE SYSTEM. THE SPECIFIC RECOMMENDATIONS ARE:**
 1. New Initiatives for 0-5 Children
 - a) Increase the number of professional people trained in dealing with children, especially in Prevention and Early Intervention (PEI) programs.
 - b) Identify and provide supportive services for fathers of young children.

- c) Evaluate and expand the best Evidence-Based Practices (EBPs) for dealing with early childhood trauma. Establish referral resources and education outreach on the evaluated program.
- d) Co-locate part-time mental health workers in Women Infants and Children (WIC) offices to counsel young mothers in the foster system.

2. New Initiatives for TAY

- a) Provide enhanced services by the DMH, DHS, and DPH to address co-dependent youth especially for TAY.
- b) Provide programs and services for pregnant and parenting teens. These services should include screenings for perinatal depression, support groups for pregnant teens in foster care, and creation of a pilot with DHS to support maternal depression services in obstetrical and gynecological clinics in public hospitals.
- c) Identify and fund appropriate mental health services for youth who are victims of sexual exploitation and sex trafficking.
- d) Fund Psychiatric Social Workers (PSWs) to: 1) support Crossover Prevention Delinquency Project as needed; 2) support child and family teams for teens up to age 21 or 24 preparing to transition from foster care; 3) develop after-care services; and 4) support ongoing services for the 241.1 Project.
- e) Create housing programs for TAY forming a continuum of care that would connect the foster and Probation youth needing special support because of mental health challenges. The continuum would include emergency shelter, transitional housing and planned affordable permanent housing. Provide housing specialists who would work directly with youth prior to their exit from foster care or Probation to connect the youth to appropriate housing and support to meet their needs.
- f) Provide a continuum of aftercare services for both Probation and foster care youth who are returning to their communities.
- g) As part of a prevention plan and to ensure a successful transition from foster care and Probation, work with Community and Senior Services and other relevant entities to identify and assist youth with mental health needs in finding a job, job training, and appropriate workplace behavior.
- h) Develop a pilot for 13-15 year-old foster youth who re-enter the DCFS system and need mental health support (13-15 year-olds have the highest rates of re-entry).
- i) Continue or newly initiate PEI or Community Services and Supports (CSS) services for youth in the Probation camps.
- j) Continue Full Service Partnership (FSP) services for those Probation youth leaving the camps and transitioning to the community.
- k) Continue FSP and appropriate prevention services for youth who are Home on Probation (HOP) to reinforce placement and ensure that the youth remain in the community instead of in Probation camps.

3. New initiatives for all Ages

- a) Connect the DCFS differential response to hotline calls to EBPs in Mental Health.
- b) Link Prevention Initiative Demonstration Project (PIDP) families to DCFS differential response for referral to EBPs in Mental Health.
- c) Collaborate and contract with faith-based organizations to provide mental health services for prevention and aftercare services.
- d) Enhance communication with schools in order to increase utilization on school campuses of Cognitive Behavioral Intervention for Trauma in Schools (CBITS).
- e) Work with First 5 LA to connect EBPs to Best Start work. Work with Best Start communities to connect to EBPs for parenting.
- f) Build in a plan for sustainability for First 5 LA grants including PCIT and future Best Start grants.

4. Continued Funding All Ages

- a) Provide respite care for caregivers including birth-parents, relatives, adoptive parents and reunifying families.
- b) Ensure initial provision of Multidisciplinary Assessment Team (MAT) mental health assessments and appropriate treatment for all children detained and repeat assessments prior to court appearances.
- c) Fund training for professionals to work with 0-5 children, TAY, pregnant and parenting teens, sexually abused and trafficked youth, and fathers of foster youth.
- d) Continue or newly initiate PEI or CSS services for youth in the Probation camps.
- e) Continue FSP services for those Probation youth leaving the camps and transitioning to the community.
- f) Continue FSP and appropriate prevention services for youth who are HOP to reinforce placement and ensure that the youth remain in the community instead of in Probation camps.
- g) Support school-based health clinics with MHSA funds for student services such as drug and alcohol addiction to prevent criminal justice involvement at further points in their lives.
- h) Provide necessary services to support the work of the mental health court for children and TAY; MHSA funds should be used wherever appropriate in conjunction with programs and services to support the mental health needs of children and TAY.

5. Addressing Implementation

- a) Re-organize the SLT membership to reflect a more inclusive community and advocate stakeholder process less populated by DMH employees and providers. Stakeholders from the communities should be more representative of all age groups and should be participants in the new planning process. All SLT committee meetings should be noticed and open to the public under the Brown Act.
- b) Address capacity building challenges in order to meet the need for more mental health support for children and TAY. Areas of particular

- need for providers for young children, such as the Antelope Valley, should be made a priority.
- c) Evaluate EBPs servicing young children regarding the efficacy of each program for the particular ages and problems to be addressed. One size does not fit all youth.
 - d) Set aside funding for outreach to develop bridges for referral of foster youth from DCFS hotline calls, 2-1-1 calls (especially of young women exhibiting signs of perinatal depression), or other community agencies well positioned to identify the need for mental health support for such youth.
 - e) Review and change the role of the TAY Navigators to reflect their original supportive services. The initial document for CSS programs included several efforts to support TAY by 15 TAY System Navigators. Over time, the role of the TAY Navigators has changed from the initial intent. Also review and enhance the role of the housing specialists who dispensed emergency shelter vouchers and advised youth on housing. We hope to see these programs continued and re-invigorated.
 - f) Continue other successful programs under CSS and PEI for children and TAY.

COMMISSION RECOGNITION 2012/13

Commission recognition by the Board for efforts supporting Family Reunification

The Commission received a five-signature scroll from the Board recognizing the Commission's advocacy for family reunification, respecting parents and their strengths, developing visitation guidelines, and identifying key factors necessary for success in reunification. The Commission continues their pioneering efforts to get the draft guidelines on visitation drawn up in 2006, actually implemented.

Recognition by the Loyola Law School Center for Juvenile Law

A five-signature scroll was presented in June 2013 to a member of the Commission in recognition of her receipt of the Sister Janet Harris Juvenile Advocate Award from Loyola Law School. The Board expressed gratitude for her outstanding efforts on behalf of the County's juvenile detainees. Her work continues to be enhanced by her on-going membership in the California State Advisory Committee on Juvenile Justice and Delinquency Prevention.

CONCLUSION

In sum, it has been a very busy and productive year identifying problems, celebrating collective endeavors, working in earnest with the interest and support of the public and private partners dedicated to the well-being of our children and youth. We thank you all for your invaluable assistance.

Commission Committees and Workgroups 2012/13

Standing Committees 2012/13

Childhood Wellness Committee

Adelina Sorkin, LCSW/ACSW, Chair
Ann Franzen
Helen A. Kleinberg

Faith-Based Committee

Dr. Sunny Kang, Chair
Ann Franzen
Dr. La-Doris McClaney
(Served until April 8, 2013)
Adelina Sorkin, LCSW/ACSW
Martha Trevino-Powell

Ad-Hoc Committees

Crossover Youth Ad-Hoc Committee

Carol O. Biondi, Chair
Patricia Curry
Helen A. Kleinberg

Relative Care Committee

Harriette F. Williams, Ed.D
(Served until December 5, 2012)
Patricia Curry, Co-Chair
Helen A. Kleinberg, Co-Chair

Workgroups

Transitional Age Youth (TAY) Mental Health Workgroup

Susan F. Friedman, Chair
Patricia Curry
Helen A. Kleinberg
Adelina Sorkin, LCSW/ACSW
Martha Trevino Powell
Genevra Berger,

Children's Mental Health Services Act (MHSA) Workgroup

Genevra Berger, Chair
Helen A. Kleinberg
Patricia Curry
Adelina Sorkin, LCSW/ACSW
Susan F. Friedman

Commission Representation on County Bodies 2012/13

In addition to the work the Commission performed in their standing committees and workgroups, the Commission also participated in a number of committees and workgroups of other County bodies that cover a wide range of important topics affecting children and families.

Agency Court Cooperation Committee	Adelina Sorkin, LCSW/ACSW
Delinquency Representation Guidelines Committee	Carol O. Biondi
Education Coordinating Council	Helen A. Kleinberg Martha Trevino-Powell
Youth Development Services (YDS) Redesign Workgroup	Patricia Curry
DCFS Young Children in Care Workgroup (Merged with DCFS Strategic Plan Committee)	Helen A. Kleinberg
Independent Living Program (ILP) Budget Workgroup	Patricia Curry
Casey Regional Planning Group on 5 Protective Factors	Helen A. Kleinberg
First 5 LA	Patricia Curry
Mental Health Services Act System Leadership Team (SLT)	Adelina Sorkin, LCSW/ACSW
Policy Roundtable for Child Care and Development	Adelina Sorkin, LCSW/ACSW Ann Franzen
DCFS Pregnant and Parenting Teen Workgroup	Sandra Rudnick
DCFS/Probation Child Sex Trafficking Task Force	Susan F. Friedman

Commission Meetings

The Commission had presentations and discussions at Commission meetings on several key areas and topics of concern to the Commission. Through information gathered from these meetings, the Commission has purposefully examined the implementation of new projects, questioned outcomes of new and old programs, encouraged collaborations, brought the children and families' point of view to light, enabled the public/private sector players to understand each other's point of view, and gained invaluable knowledge to better represent your Board and the County child welfare system on various collaborative bodies.

July 9, 2012

Presentation: Promoting Safe and Stable Families Act and Child Abuse and Neglect Prevention, Intervention and Treatment, Safe Children Strong Families Redesign.

Presented by: Eric Marts, Deputy Director, DCFS; and Marilynne Garrison, Division Chief, DCFS Community-Based Support Division

Subject: Safe Children Strong Families Redesign.

This Request for Qualifications (RFQ) addresses a comprehensive five part redesign intended to create a continuum of care beginning with prevention and continuing through Aftercare. It builds on the following:

- Successes in the Prevention Initiative Demonstration Project (PIDP), a prevention effort to keep families from entering, re-entering, and extended involvement with the child welfare system, using case navigation, specialized services and supports meeting community needs, and peer-based support and capacity building
- Promotes a “no wrong door” philosophy along the continuum of care
- Is guided by the Strengthening Families Protective Factors Approach which has been demonstrated to diminish the likelihood of child abuse by strengthening parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and social and emotional competence of children.
- Redesign is aligned with new Shared Core Practice Model which includes engaging, teaming, assessment and understanding, planning and intervention, and tracking and adapting.
- The five components of the contract are:
 1. Community Family Resource Centers - services received through walk-in inquiries and referrals by DCFS, schools, hospitals, or law enforcement;
 2. Child Abuse Prevention, Intervention and Treatment (CAPIT) - which entails prevention and treatment, including individual, family and group counseling;
 3. Differential Response Path 1 - referral of hot line cases that do not merit in-person response to Community Family Resource Centers;
 4. Partnership for Families (PFF) - supportive services such as education, childcare, concrete support, counseling; and
 5. Assessment and Intervention Contract - the redesigned Family Preservation services model includes screening of hot line referred families for mental health, substance abuse and domestic violence challenges; convening of a child and

family team; and if unfounded, referred to the Community Resource Center for additional services. If inconclusive, potentially referred to Alternative Response services if the risk is moderate or PFF if the risk is considered high or very high, or if substantiated, a case is opened and the child is channeled through Family Maintenance or Family Reunification. If removed, the goal is to achieve permanency for the child as soon as possible with the help of Adoption Promotion and Support Services.

July 23, 2012

Presentation: The California Partners for Permanency (CAPP)

Presented by: Rhelda Shabazz, DCFS Deputy Director, Bureau of Strategic Management

Subject: CAPP is funded by the Federal Government. This \$100 million dollar Presidential Initiative funded six projects to focus on disproportionality of African American and Native American children in the child welfare system. In California, Los Angeles, Fresno, Humboldt and Santa Clara are the participating counties. The first year was designated for planning, and the second for implementation. Transparency and trust were identified as core values with an emphasis on community engagement. A final report was to be issued in September 2012.

Presentation: Youth Development Services (YDS) and California Fostering Connections to Success Act, Assembly Bill 12 (Beall), California Fostering Connections to Success Act

Presented by: Harvey Kawasaki, DCFS Division Chief, Youth Development Services; Jed Minoff, Probation Director, Placement Services Bureau; Dave Mitchell, Probation Chief, Placement Services Bureau; Michael Verner, Probation ILP Director

Subject: YDS and AB 12

- AB 12 allows youth turning 18 years of age in 2012 to stay in the child welfare system or opt out. Approximately 500 youth were eligible in 2012 with 80% opting to stay in.
- Youth who were 19 in 2012, that exited the system at 18, now have re-entry rights
- Eligible youth may identify independent living arrangements in the (Subsidized Independent Living Program (SILP). The youth have to identify the housing resource; YDS independently conducts a SILP inspection. The majority of youth; however, stay in their current placements
- Extended foster care for Probation youth considers youth as those who are under Juvenile Justice jurisdiction and on probation with an order of foster care placement on their 18th birthday. Youth 17 ½ to 20 years of age and otherwise eligible, may have their probation terminated, and remain under extended foster care jurisdiction. Probation houses some youth using Transitional Housing Placement Plus Foster Care (THP-Plus FC). Title IV-E covers these costs.

August 6, 2012

Presentation: Project SAFE (Screening and Assessment for Family Engagement)

Presented by: Donna Fernandez, Program Manager, Child Welfare Health Services, DCFS; Steven Reyes, Supervisor, Community Assessment Service Centers, Substance

Abuse Prevention and Control, DPH; Natalie Manns, Contract Program Auditor, Substance Abuse Prevention and Control, DPH

Subject: Screening and Assessment for Family Engagement

- Funded through Title IV-E to place substance abuse experts in DCFS offices.
- Piloted in El Monte and Metro North (homeless healthcare) and Metro North (Prototypes); 200 participants.
- Evaluation completed in August 2012.
- Program was initiated to determine whether DCFS should continue with traditional drug and alcohol testing, adopting Project SAFE, or creating a hybrid of the two.

Presentation: Department of Public Health (DPH) Project: Access to Substance Abuse Services for High-Risk Parents and Caregivers

Presented by: Donna Fernandez, Program Manager, Child Welfare Health Services, DCFS; and Holly McCravey, Executive Director, Antelope Valley Rehabilitation Centers, DPH; Sandy Song Groden, Substance Abuse Prevention and Control, DPH

Subject: Access to Substance Abuse Services for High-Risk Parents and Caregivers.

- DCFS and DPH sought funding from First 5 LA to place substance abuse experts in DCFS offices. A three-year program was approved in December 2011. Navigators were placed in perinatal daycare, rehabilitative, outpatient and residential treatment services centers. University of California, Los Angeles (UCLA) conducted an evaluation of the project.
- The goals of the program are to improve access to services for pregnant women and parents of children ages zero to five who are under the supervision of DCFS and to demonstrate the positive impact of early identification, intervention and timely referral to treatment for those at-risk for substance use disorder.
- A Memorandum Of Understanding (MOU) between DPH and DCFS was executed.
- A Referral form has been finalized.
- Navigators with authorization may share the results of the screening with the Children's Social Worker (CSW) and Juvenile Court.
- The project is Countywide and had a \$15 million budget.
- The selected residential treatment providers can accommodate children on site.
- Documented and undocumented persons are eligible for these services.

Presentation: Time-Limited Family Reunification (TLFR) Substance Abuse Program

Presented by: Marilynne Garrison, Division Chief, Community-Based Support Division, DCFS; Corey Hanemoto, Program Manager, TLFR Program, DCFS; and Jonathan Sydes, Children Services Administrator I, TLFR Program, DCFS

Subject: TLFR Substance Abuse Program.

- TLFR is funded through the Federal Promoting Safe and Stable Families Act (PSSF).
- DCFS and DPH partnered to utilize funds to provide substance abuse assessment and treatment to DCFS clients.
- Program requirements: children cannot be placed with the parent, must have open DCFS case with family reunification status, ineligible for other drug and alcohol assistance programs.

- DCFS social workers refer clients to the closest Community Assessment Service Center, provided in all eight SPAs by DPH (Shields for Families, Inc. and Special Services to Groups in SPA 6, Behavioral health Services in SPA 8, Didi Hirsch Mental Health Services in SPA 5, Prototypes in SPA 4, San Fernando Valley Community Mental Health Center in SPA 2, and Tarzana Treatment Center in SPA 1, and CAL Hispanic in SPA 7).
- 80-100 clients were referred each month.
- Between 80 to 90% were deemed eligible for the substance abuse program.
- Statistical extraction difficult. Statistics reported were obtained by reading individual case reports.
- Average time the individual stayed in treatment was 10 months, with an average of four months in residential treatment.
- 58% of those who went into treatment had their children returned home.
- Children who did not go back home went to adoptive, relative or foster homes.

August 20, 2012

Presentation: Update by DCFS on child fatalities

Presented by: Brandon Nichols, Senior Deputy Director, DCFS; Francesca LeRúe, Acting Division Chief, Risk Management Division, DCFS

Subject: In-Person Response Referrals and Child Fatality Data Summary” for 2011 and 2012 (updated as of April 11, 2012).

- In 2011 there were 917 child fatalities.
- 360 of the families were previously reported to DCFS.
- 160 of the families had prior history with DCFS.
- 78 of the deaths were caused by abuse or neglect.
- 18 of the 78 deaths caused by abuse or neglect had a prior DCFS history.
- Male children die at a higher rate than females.
- Hispanic children die at a higher rate than other groups.
- The Los Angeles County Coroner’s office does not provide the mode of death for four to six months after the death of a child.
- DCFS was not able to provide data specific to the child fatalities’ age range at the time of the meeting.

Presentation: Domestic sex trafficking of children and youth

Presented by: Eric Marts, Deputy Director, Services Bureau 2, DCFS; Emilio Mendoza, MART (Multi-Agency Response Team), DCFS; Blanca Vega, Acting Regional Administrator, Compton Office, DCFS; Michelle Guymon, Director, Placement Services Bureau, Probation Department; Marian Thompson, Los Angeles County Deputy District Attorney, Pasadena Juvenile Division

Subject: County Efforts to Prevent Sex Trafficking of Children and Youth.

- Senate Bill 1279 (Pavley), Commercially sexually exploited minors passed in 2010, and provided statutory authority of the District Attorney to partner with other county agencies, law enforcement and community-based organizations (CBOs) on developing a diversion program to address needs of sex trafficked youth.

- A multi-agency task force and program was created. The program is voluntary for the trafficked youth and allows children that are cited and not detained to be diverted without a case being filed against them.
- A ten-week course is provided by Probation and CBOs titled, “My Life, My Choice,” an empowerment curriculum co-led by survivors of sex trafficking.
- In Los Angeles County, 174 girls were in juvenile detention as a result of prostitution related charges in 2010. The average age is between 12 and 14.

September 10, 2012

Presentation: Pregnant and Parenting Teens

Presented by: Donna Fernandez, Program Manager, Child Welfare Health Services, DCFS; Sandra Rudnick, Commissioner

Subject: Pregnant and Parenting Teens.

- In 2003, DCFS formed the Pregnant and Parenting Workgroup in collaboration with Children’s Law Center, Public Counsel, and the Alliance for Children’s Rights.
- Senate Bill 500 (Kuehl), AFDC-FC: pregnant and parenting foster youth keeps teenage mothers in foster care united with their babies.
- One-day fairs are held to offer resources and education. Pregnant and Parenting Teen conferences are held on a voluntary basis to support pregnant teens. As of September 2012, there have been 20 fairs held and 58 Teen Conferences.
- One of the goals of the workgroup is to stop the intergenerational cycle of teen pregnancy and wrap services around these teens to ensure that they have a viable future.
- Currently there are 270 parenting teens in the child welfare system
- An MOU is being prepared that allows more teens eligibility for the DPH Nurse Family Partnership Program.
- The Workgroup is focusing on improving the sex and reproductive education of youth.

Presentation: Report on the Department of Public Health’s Early Childhood Obesity Prevention Project

Presented by: Adelina Sorkin, LCSW/ACSW, Commissioner

Subject: Childhood Obesity.

- A child wellness policy was adopted by the Board in 2009, recognizing that quality of life was as important as safety for children in Los Angeles County.
- First 5 LA awarded DPH a \$41 million, multi-year grant to address obesity in children zero to five. Thirty clinics will be reached during the grant period. DPH staff has met with Commission for Children and Family Commissioners to discuss their recommendations regarding implementation.

Presentation: Public Counsel’s holistic and collaborative advocacy work on behalf of foster and TAY

Presented by: Paul L. Freese, Jr., Vice President, Public Counsel

Subject: Paul Freese, Vice President of Public Counsel has been with Public counsel since 1994, and has provided advocacy support for TAY for 18 years.

- It was a clarion call for action when the Board revealed in a study that 75% of all state prisoners had been in foster care.
- The Homeless and Prevention Law Project within Public Counsel has 20 of the 106 staff of the agency. They work to support guardianships and adoptions, and recently celebrated their 7000th adoption out of foster care.
- Mr. Freese has worked closely with the Commission on housing for TAY to prevent crossover into the criminal justice system. In 1994, there were only 200 transitional living housing programs; today there are 1,200.

October 1, 2012

Presentation: Pregnant and Parenting Teens

Presented by: Jacquelyn McCroskey DSW, USC John Milner Professor of Child Welfare; Barbara Facher, M.S.W., The Alliance for Children’s Rights; Leslie Starr Heimov, Executive Director, Children’s Law Center of California; Mara Ziegler, LCSW, Senior Social Worker, Children’s Rights Project, Public Counsel; Nina Powell McCall, M.S.W., Children’s Services Administrator, Family & Community Partnership Section, DCFS; Donna Fernandez, LCSW, Program Manager, Child Welfare Health Services, DCFS; Francesca LeRúe, Acting Division Chief, Risk Management Division, DCFS; and Brandon Nichols, Senior Deputy Director, DCFS

Subject: Needs of Pregnant and Parenting Teens.

- Document distributed on “Addressing the Needs of Pregnant and Parenting Teens”.
- Family Group Decision Making model invites pregnant teens to bring together individuals that the teen has identified as important in her life. Together they create a plan. Education is a significant aspect. The Belvedere office of DCFS has the highest number of pregnant and parenting teens.
- There are four resource specialists in the Alliance for Children’s Rights who provide knowledge of resources available through DCFS and CBOs.
- Unmet needs include sufficient education advocates, child care advocacy for teen parents in child welfare, and funding for resource specialists.
- Another challenge is finding sufficient numbers of providers willing to be certified to care for teen mothers and their children. Currently, there are 17.
- Children’s Law Center provides a 6 to 10 hour reproductive health curriculum to Group Homes.
- Whole life programs and education work most effectively for prevention of further pregnancies.
- 67% of fathers of babies born to teens are adults. Often the younger the teen, the older the adult. In most cases the fathers do not participate in the Pregnant and Parenting Teen Conferences.
- First 5 has set aside \$5 million for the County initiative to create a data network to provide guidance on policy questions. There is opportunity to integrate services for pregnant and parenting teens.
- The Hilton foundation is supporting State efforts to provide a better picture of this population.
- There is a higher rate of teen pregnancy in the foster youth population than the general teen population.

- There is approximately one fatality a year of a child whose parent is in foster care at the time of death. Child fatalities among minor parents are low.
- In 2011, there were 74 referrals on teen parents that alleged abuse and neglect and in 2012 there were 30 referrals.

November 5, 2012

Presentation: Status report by Antonia Jimenez, Deputy Chief Executive Officer, Children’s and Family Well-Being Cluster, Chief Executive Office (CEO) on Strengthening the 241.1 Project and Delinquency Prevention Pilot for Crossover Youth approved at the Board of Supervisor’s meeting held September 4, 2012 (Item No. 2)

Presented by: Antonia Jimenez, Deputy Chief Executive Officer, Children’s and Family Well-Being Cluster, CEO

Subject: “Crossover Youth Board Motion” that was submitted to the Board on November 2, 2012.

Antonia Jimenez shared an implementation report with five recommendations:

1. Hire 5 additional DMH Psychiatric Social Workers (PSW) to bring the total to 11 to serve approximately 100 youth arrested monthly. A Stakeholder Process may be used to identify and support funding;
 2. Review AB 1405 (Maze), Juveniles: joint assessment of status: confidential information (2008) and submit language prohibiting the County from using incriminating information collected during the clinical interview with the youth from being used against the youth in court proceedings;
 3. Instruct PSWs to provide specific recommendations as to the type of mental health services a youth needs;
 4. Develop process for referring crossover youth identified by the multi-disciplinary team to a DPH contracted provider for substance abuse assessment and treatment services when needed. Currently, there is no avenue for services if substance abuse is the youth’s only problem; and
 5. Report annually on evaluation measures.
- Funding for the five additional PSWs is one-time funding; the other recommendations will be funded through Title IV-E.
 - The DCFS Prevention Assessment Project works with an assessment tool to identify at-risk youth with a rating of five and above triggering a teaming process that expedites attention to these youth; DMH participates in the teaming process.

Presentation: The Los Angeles 241.1 Multi-Disciplinary Team Data Findings

Presented by: Denise Herz, Ph.D., Director of the School of Criminal Justice and Criminalistics, California State University, Los Angeles

Subject: Overview of Key Program Developments and Data.

- The 241.1 Multi-Disciplinary Teams commenced in 2007 to provide an alternative to probation sentencing by juvenile courts.
- Average age of arrested youth is 15 ½.
- The average time crossover youth had been in the child welfare system was six years.
- The youth evaluated were more likely to have lived in group homes.
- The average number of placements was 10.

- The majority of violent charges consisted of assault, one-third of which occurred while the youth was in group home placement.
- One-fourth of the offenses were school related.
- Mental health issues were significant in 70% of the youth with 37% having both mental health and substance abuse problems; 52% received mental health and education services. Minor efforts were being made concerning living arrangements and permanency.
- Outcomes showed an increase in participation in social programs, improved school attendance, decrease in academic and behavioral problems, improved mental health, and decrease in recidivism. Minimal services were provided to youth with substance abuse problems which was evident in the lack of improvement in this area.

November 19, 2012

Presentation: Education Coordinating Council (ECC) Update

Presented by: Helen Kleinberg, Commission ECC Representative

Subject: ECC Update.

- The ECC, a multi-agency unit under the CEO, is focusing on the need to personalize working with the individual children to reach each one's distinct needs.
- Diversion for those not succeeding in the regular curriculum is being explored.
- The Gloria Molina Foster Care Program is being expanded Countywide.
- Decrease in truancy citation under Judge Michael Nash's initiative is having a good effect on attendance.
- Los Angeles Unified School District (LAUSD) is doing home visitations for youth who have dropped out of school.
- Early education is being facilitated in DCFS by a "click" system in computers, but more follow up is needed to see if the minors are actually enrolled.

Presentation: Youth Development Services (YDS) Redesign Workgroup Update

Presented by: Patricia Curry, Commission Representative

Subject: YDS Redesign.

- Probation and DCFS are working together to serve youth ages 14-21 eligible for the Independent Living Program (ILP) funding.
- 23,000 youth are eligible and \$12 million are allocated for these services.
- 1400 youth counselors will work with youth 16-18 preparing them to exit the system.
- YDS will develop policies, employment opportunities, locate resources and communicate legislative changes.

December 3, 2012

Presentation: Systems Leadership Team (SLT) Update

Presented by: Adelina Sorkin, Commission Representative

Subject: SLT Membership and Recent Activities.

- Discussion of MESA and composition of the 48-Member SLT. SLT is composed of 20% DMH employees and 28% DMH Providers, and minimal representation of children and TAY.
- SLT voted to recommend a \$500,000 allocation for the Crossover project as recently passed in a Board Motion.

December 17, 2012

Presentation: DCFS Strategic Plan Objectives and Children’s Special Investigation Unit (CSIU) Trend Analysis

Presented by: Amy Naamani, DCFS Program Development/Strategic Initiative Director

Subject: DCFS Strategic Plan Objectives and CSIU Trend Analysis.

- A trend analysis was conducted with an in depth review of 15 child fatality cases, and overall evaluation of 200 cases. Emerging patterns from the analysis led to focus on four areas of recommendations:
 1. More preparation needed for social workers on the front end.
 2. Existing programs services and policies should be continually reassessed.
 3. Different experts are needed to create a continuum of care for children.
 4. Human resources must be evaluated.

The DCFS Strategic Plan will address these recommendations including use of Core Practice Model, creation of a DCFS University type training that supports Core Practice model, and rewriting the Policy manual, with Casey Family Programs support.

January 14, 2013

Presentation: Los Angeles County Policy Roundtable for Child Care and Development on the Impacts of Child Care Funding.

Presented by: Jacquelyn McCroskey, D.S.W., Policy Roundtable for Child Care, Chair

Subject: Impacts of Child Care Funding, The Children’s Data Network.

- Los Angeles County has two quality rating systems for child care: Los Angeles Universal Preschool (LAUP) and Steps for Excellence. Los Angeles County is one of 15 counties sharing recent Federal grant funds to improve quality ratings.
- Children’s Data Network will help inform policy decisions through data. One of its projects is related to early childhood education.
- A recent report was issued mapping damage done to early childhood education programs between 2008 and 2011. \$1.2 billion in funding were lost, creating loss of access for over 100,000 children across California.
- Los Angeles County lost 22,000 licensed child care spaces. Family child care homes accounted for 15% of these losses.
- The Board sent a letter to the Governor requesting consideration of alternatives to the proposed budget cuts in 2012.
- There is a childcare alternative payment program available for children in the DCFS system; however, once the case is closed the continuity of care is questionable.

- The level of education that is provided to children who are cared for by relative caregivers continues to be a concern.

January 28, 2013

Presentation: The Sierra Health Foundation on the Positive Youth Justice Initiative.

Presented by: Matt Cervantes, Senior Program Officer

Subject: Improving health and social outcomes for crossover youth.

- The Sierra Foundation, an Endowment for Northern California has invested in youth in the juvenile justice system, committing \$1.8 million over three years.
- The Positive Youth Justice Initiative is aimed at improving health and social outcomes for crossover youth. Part of the initiative incorporates the Positive Youth Development approach which focuses on key elements including shifting views of these youth as problems to being viewed as an asset to be engaged, prioritizing community-based development supports, and ensuring that opportunities increase during the youth's life.
- The initiative utilizes trauma informed care combined with youth development principles and delivers both approaches using wraparound services. Systems currently do not often track or acknowledge trauma in a youth's life that can be treated through mental health services.
- Wraparound delivery brings youth in placement home faster, and ensures the family and youth have the supports needed.
- Improved data systems are a key part of improving capacity within the juvenile justice system.
- Impacts of the initiative include; better collaboration with County departments, service providers, community-based organizations, families, and youth; and development of case-planning processes, coordination of supports and services, and influence on statewide policy.
- An evaluation will be conducted of the success of the project.

February 4, 2013

Presentation: Update by DCFS on Child Fatalities

Presented by: Brandon Nichols, Senior Deputy Director, DCFS; Francesca LeRúe, Acting Division Chief, Risk Management Division, DCFS

Subject: Child Fatalities in Los Angeles County.

- Child Welfare regulations and the state statute on reporting child fatalities differ in the required breadth of reporting. A recent case will require broader information sharing.
- In 2012, there were 62 child fatalities, 28 of which were determined to be a result of abuse and neglect.
- The Board has expressed interest in having a single source for collecting and reporting child fatalities. The CEO is leading that effort to determine where that responsibility should be placed.
- Staff is placed on desk duty while child fatality cases are investigated.

- Administrative Review roundtable discussions are held with individuals from multi-disciplines including other County departments.

Presentation: Update by DCFS on Adoptions

Presented by: Bill Thomas, Adoptions Acting Division Chief, DCFS; Joseph Prusak, Adoptions Assistant Regional Administrator, DCFS

Subject: Adoption Promotion and Support Services.

- Adoptions declined, according to Bill Thomas, between 2007 and 2012. One reason given was an increase in family reunifications.
- Of children detained 57.7% were reunited with their families in 2007 and 54.7% in 2012.
- Approximately 50% of current adoptions are with relatives.
- 16 to 17% of those detained are enrolled in the Kinship Guardianship Assistance Program (Kin-Gap) which, provides financial assistance to relatives with legal guardianship.
- With the death of grandparents, some children re-enter the system.
- The Commission suggested more Title IV-E funds be used for aftercare services for those adopted, especially children with difficult emotional issues. Funds should also be used to promote adoption of older youth.
- Through Promoting Safe and Stable Families Program funding, experts in adoptions, case management and therapy/support groups are available through DCFS Adoption Promotion and Support Services.
- Adoption Assistance Program Wraparound provides help where a child is “acting out,” and residential care is an option with an 18-month stay limitation.
- Fox Network promotes adoptions on *Wednesday’s Child*. The Commission suggested reaching out to more TV stations.
- The Department is not reaching the Federal goal of completing 36.6% of adoptions within 24 months. The current rate of adoptions finalized within 24 months is between 25 and 30%. Regional Center evaluations are one reason for the delay. The Commission suggested DCFS contract directly with Regional Centers instead of the State contracting with them. This would allow DCFS to seek out the best performing centers.

March 4, 2013

Presentation: Current County Efforts to prevent youth from crossing over to juvenile delinquent status.

Presented by: Dr. Hellen J. Carter, Chief, Juvenile Fields Services Bureau, Probation; Dr. Sharon G. Watson, Education Coordinating Council (ECC); and Jacqueline Caster, Founder and President of the Everychild Foundation

Subject: School Attendance Task Force Executive Summary, Probation Department’s Citation Diversion Program.

- A School Attendance Task force was founded by Juvenile Judge Michael Nash in 2010 to address truancy issues leading to detention in the juvenile detention system. School districts, law enforcement, County agency and CBOs developed a comprehensive strategy.

- Los Angeles Police Department (LAPD) has issued directives instructing ticketing forces to not cite students on their way to school or on school campuses. Los Angeles School Police Department (LASPD) has followed this lead and issued directives in line with LAPD. The City of Los Angeles Municipal Code was changed to reflect these directives.
- The LASPD has since reported a 40% reduction in truancy citations.
- Reforms also took place with the Informal Juvenile Traffic Court (IJTC), providing the option of community service to lessen the burden of fines. However, due to State Budget cuts, the IJTC was closed in June 2012.
- Truancy is highest in the 9th grade, followed by kindergarten.
- The Probation Department has a Citation Diversion Program (Program). The cases are cross-referenced with DCFS to have a fuller picture of the youth.
- Infractions may be diverted with a letter of warning and community service.
- The top six offenses are fare evasion, curfew violations, possession of tobacco, fighting, petty theft, and loitering.
- Upon successful completion of the Program, the juvenile is removed from a diversion list, and the process has no negative ramifications on eligibility to join the military, qualifying for the "Dream Act," or disqualification from gaining certain employment.
- Jacqueline Caster, Founder and President of the Everychild Foundation (Foundation), described the Foundation as a non-profit organization comprised of 200 women, each contributing \$5,000 annually for children's causes.
- Each year \$1 million is donated to projects which must be innovative and sustainable over time.
- In 2011, the Centinella Youth Services was selected for its diversion program in the Inglewood Courthouse.
- A pilot in South Los Angeles is being implemented with collaboration of LAPD, Probation, DCFS, Public Defender, and the District Attorney. The Pilot is funded by a federal grant and focused on providing a case management program including a full mental health assessment to determine services needed.
- Completion of the program will prevent juveniles from entering the Probation system.

March 18, 2013

Presentation: Renewal of Independent Contractor's Nutrition Services Contract for the Challenger Memorial Youth Center

Presented by: Carol O. Biondi, Commissioner; and Adelina Sorkin, Commissioner

Subject: Recommendations on renewal of the food provider contract of Morrison Management Specialists, Inc. as a result of the Commissioners visit to the camp.

- Commissioners reported on their findings from a site visit at Juvenile Justice Camp Challenger addressing concerns with the nutrition provided to the youth. Some of the Camps are independently contracted; and some are operated by the County. The federal government provides nutritional guidelines that must be met by both.
- The contract, then under review, was chosen because it was the lowest bidder, among other reasons.

- The Justice Cluster of the CEO's office discussed the problems with the Commissioners and Probation Chief Jerry Powers. A number of improvements were made.
- Due to the camp being located in Lancaster, it was noted that most parents and relatives do not visit the boys because of difficulties in reaching the remote area. Skype was recommended as a possible means of overcoming this barrier for the well-being of the youth and his family.

Presentation: Kidsave Presentation on Adoptions

Presented by: Randi Thompson, CEO/Executive Director; and Lauren Reicher Gordon, Vice President/Director Family Visit Programs

Subject: Permanency for older kids, Kidsave's Weekend Miracles Program.

- Kidsave has been working with DCFS for six years, with 150 older youth.
- Kidsave's model includes family visits, advocacy, mentoring and family support to reach permanency for older youth 9 to 17 years of age.
- DCFS identifies and refers the youth to Kidsave. Hosting is a one-year commitment, and families must spend a minimum of two weekends a month with the child.
- Families must undergo a Live Scan.
- Some of the children that participate in the Program are adopted or the family becomes a guardian. Some families stay connected with the youth when they exit the child welfare system.
- Monthly advocacy events are held, including cooking, bowling and park recreation in order to provide opportunities for the youth and families to interact. Some families that attend are prospective parents.
- Of the 150 youth referred to date, 37 exited or were put on hold. Of the remaining youth, 53% have achieved or are in the process of legal permanency.
- 29% are currently connected or have exited care with a host family.
- 82% have made some kind of connection.
- Funding has not been available to do an evidence-based study; however, research has shown that this type of program has a dramatic impact on child welfare costs.
- 75% of the funding for the program comes from foundations and private donors.
- 25% of their funding is from a federal grant that that has expired. The total program budget is approximately \$378,000.

Presentation: Commission for Children and Families Mental Health Workgroup Update on Transitional Housing

Presented by: Patricia Curry, Commissioner

Subject: Vacancy rates for Step Out, Hillview and Athena Transitional Housing Programs (Fiscal Year 2011/12).

April 8, 2013

Presentation: Report by Child Welfare Initiative (CWI) on recommendations regarding housing, programs and services related to TAY

Presented by: Andrew Bridge, Executive Director, Child Welfare Initiative, Housing for TAY

Subject: “Transition Age Youth, Housing and Service Roadmap, A Best Practices Framework”.

- While the foster care population has fallen nearly 50% since 2002, number of youth aging out of the system has declined by only 27% (1,500 to 1,100).
- CWI developed a framework addressing barriers to housing imposed by providers limiting access, and imposing rules and restrictions difficult for youth to meet because of their stage of development. They also address government imposed barriers that impede implementation of Best Practices. They recommended the following five changes:
 1. Allow 3 years instead of 24 months of ILP housing services.
 2. Allow ILP funding to be used for both housing operations and supportive services.
 3. Remove THP-Plus requirement that 50% of youth must already have a job or find a job within 60 days.
 4. Amend the County’s THP-Plus requirement for a youth interview during the admission process to allow providers to use this tool to assess the immediate safety of the youth and to conduct more thorough assessments in later case planning.
 5. Change the County’s aggregate outcome requirements in ILP, THP-Plus, and HUD housing contracts to allow providers to measure youth’s progress along a continuum in meeting their case-plan goals.

April 22, 2013

Presentation: Discussion and approval to draft a letter to the Board expressing the Commission’s support of Assembly Bill 643 (Stone), Public Schools: pupil records: confidentiality which facilitates access to school records of foster youth without court orders; and for Senate Bill 528 (Yee), Dependents: care and treatment: minor parents and non-minor dependent parents, which addresses supportive services for pregnant youth in foster care, including ensuring reproductive health care access, child care prioritization, data collection and conferences focusing on the parenting skills for this population.

Presented by: Patricia Curry, Commissioner; and Sandra Rudnick, Commissioner

Subject: Barbara Facher, The Alliance for Children’s Rights sought Commission support for SB 528, to improve data on parenting teens, address pregnancy prevention through enhanced reproductive health education, to provide greater access to childcare for parenting teens in foster care whose children are not detained by the child welfare system, to support the expansion of Parenting Pregnant Teen Conferences statewide. The Commission voted to urge the Board to support the legislation.

Presentation: First 5 LA Update

Presented by: Kim Belshé, Executive Director, First 5 LA

Subject: First 5 LA Initiatives

- First 5 LA is following a learning initiative titled, L3 (Listening, Learning and Leading Initiative).

- The goals of L3 initiative focuses on implementation of their current 2009 – 2015 Strategic Plan by the following four principles:
 1. Building on a common understanding among staff, Commissioners and the community of the status of implementation of the strategic plan;
 2. Identifying critical implementation issues;
 3. Highlighting opportunities to strengthen internal processes to execute implementation and to identify ways to strengthen external partnerships; and
 4. Providing the Board a roadmap for the strategic direction, identifying any necessary mid-course adjustments required to sharpen our strategic direction while acknowledging First 5 LA's evolving and declining financial picture.
- The Commission is considering their external context by identifying key social, demographic, and political trends that affect the zero to five population as well as recognizing other collaborative organizations that share common goals.
- Key programmatic focal points include Best Start, Parent Child Interactive Therapy, LAUP, and Welcome Baby. There has been no discussion to date of collaboration on the MHSA.
- First 5 LA is funded by Proposition 10 tobacco tax revenues, which are declining each year as smoking declines; and therefore, funding has decreased. This year's budget is \$85 million.

May 6, 2013

Presentation: DCFS' 241.1 and Delinquency Prevention Project

Presented by: Rhelda Shabazz, Juvenile Court & Adoption Bureau Deputy Director

Subject: Report on the DCFS Delinquency Prevention Project (DPP), piloted in Compton, Glendora, Palmdale, and South County offices. Ninety-three youth were identified as high risk of cross over and participated in the DPP. A preliminary report showed issues with the DPP process and inconsistent data entry. The Commission expressed concern that the DPP report does not speak to services for the identified youth, making it difficult for Commission to urge further allocation from MHSA funds without providing justification. It was stated that DCFS would request more funds in the next MHSA process (not done as of November 2013).

May 20, 2013

Presentation: Update by DCFS on Child Fatalities

Presented by: Brandon Nichols, Senior Deputy Director, DCFS; and Francesca LeRúe, Acting Division Chief, Risk Management Division, DCFS

Subject: In 2012, there were 316 child fatalities reported to DCFS. Of that number 145 had some sort of contact with DCFS, with 94 having specific contact. Latino children are dying at a higher rate. Males are dying at a higher rate. The Second District has a higher rate of child fatality incidents (but it was not determined if the child lived in the Second District). Of the 94 cases with specific DCFS contact, children between zero and one had the highest rate of death.

Presentation: System Leadership Team Update

Presented by: Adelina Sorkin, Commission Representative

Subject: Commissioner Sorkin provided a brief background on the MHSA and added that the Mental Health Services Oversight and Accountability Commission (MHSOAC) oversee the MHSA funding at the State level. In June of 2013, MHSOAC will discuss whether a new formula for allocation of funds will be applied. Additionally, the MHSOAC May 23, 2013 agenda includes a report titled, *Updated: MHSOAC Paper "Children, Youth and Families: MHSOAC Prevention and Early Intervention (PEI) Action Plan Priorities for the First Three Years" (Action)*.

Sylvia Drew Ivie, Commission Liaison, informed that the MHSOAC also defines integration of mental health funding. The definition and types of integration is unclear.

June 3, 2013

Presentation: Issues related to young children in care

Presented by: Diane Wagner, Chief, DCFS Adoptions & Permanency Resources Division/Young Children In Care Workgroup; Dr. Richard Cohen, Director, Project ABC, Children's Institute Inc.; Angela Vazquez, Advancement Project; and Jacquelyn McCroskey, Chair, Policy Roundtable for Child Care

Subject: Young Children in Care; findings of Advancement Project and the DCFS Work Group on Young children

Ms. McCroskey distributed a document titled, *Joint Working Group – Commission for Children and Families and Policy Roundtable for Child Care* and explained that through this short-term Workgroup, a set of key recommendations were developed.

The Commission voted to adopt the following recommendations as part of the Commission's ongoing efforts:

- Commission for Children and Families should develop partnerships with key institutions to assist families, kin and caregivers to enroll children in high quality child care and development;
- The Policy Roundtable and the Office for Child Care should work with DCFS to develop policy and practice supports to ensure information reaches parents, foster parents and kinship caregivers on all available types of subsidized child care;
- DCFS should consider adding responsibility of assessment of early care and education needs to contract requirements for CBOs serving families with young children;
- DCFS and First 5 should work together to assess best practices in other jurisdictions, and analyze option in Los Angeles County; and assess value of two generation approach with child care and evidence -based parenting training; and
- Make recommendations on key performance indicators to track participation of young children in early care and education programs.

June 17, 2013

Presentation: Presentation on MHSA funding for DCFS children

Presented by: Dr. Charles Sophy, Director, Bureau of Clinical Resources and Services; and Lisa Sorensen, CSA III, High Risk Youth Project

Subject: MHSA funding allocation.

- There are shortages of beds for youth that need hospitalization. DMH holds the contracts with the hospitals;
- List of needed mental health services includes:
 1. Mental health services must follow the child from placement to placement and back;
 2. Placement providers must accommodate in-home intensive mental health services;
 3. Placement providers must provide individualized placement and treatment plans; some are rejecting youth because they are not “working the program well enough”;
 4. MHSA funds should be used to train mental health providers on how to work within the States’ Core Practice Model to help mental health professionals understand how they should be informing the youth's team regarding underlying needs and helping to formulate intervention strategies to meet those needs;
 5. The “too little too late “ pattern of mental health service delivery in wraparound should be corrected by intense in-home services where necessary;
 6. DCFS, DMH staff and contracted providers should consider use of in-home one on one behavioral aides to address behaviors that are difficult for caregivers to manage before resorting to congregate care;
 7. Mental Health providers should be trained to document the youth and caregiver’s underlying needs and strengths in addition to behavioral observations, diagnostic impression and treatment recommendations;
 8. Provide more resources to meet the mental health needs of indigent children who are uninsured and their families;
 9. More MHSA PEI funded services are needed to reach TAY; absence of such support makes DCFS provider of last resort for out of control teens; and
 10. MHSA funding for TAY in the Full Service Partnership program need to serve more TAY especially in transition out of DCFS care.
- Treatment foster care contracts need to be altered; funding received by Foster Family Agencies are not currently required to be spent on treating foster care, so program is underutilized; insufficient funding for TAY; no specific funding in MHSA Plan for TAY.

Letters Sent

During FY 2012/13, the Commission sent letters to the Board and other officials on the following issues or areas of concern:

- **Letter Dated January 15, 2013**

Letter to the Board following the Sandy Hook Elementary School tragedy in Newtown Connecticut, urging more support for a system that focuses on prevention and early intervention for children and that provides a continuum of care throughout life. Since 1996, there have been 56 shooting incidents in schools considered “mass murders,” and in 43 of the 56 shootings, the shooters were under the age of 25. It is especially critical that more attention be paid to the mental health needs of TAY.

- **Letter Dated May 8, 2013**

Recommendation to the Board to better support pregnant and parenting teens in the child welfare system supporting SB 528. The legislation addressed the need to prioritize child care access due to high dropout rates among this population, improve access to parenting, childcare, counseling and educational supports for this population, enhance reproductive education, and improve collection of data on this population in order to develop appropriate policies to address the issues involved.

- **Letter Dated May 10, 2013**

Letter to the Honorable John A. Pérez, Speaker of the California Assembly, urging passage of AB 643, which would provide California child welfare agencies access to school records for children under their supervision. Existing law prohibited a school district from permitting access to pupil records by any person without written parental consent or judicial order. Federal law in 2013 adopted a law permitting such access. This Bill will conform California law to the federal statute.

- **Letter Dated May 22, 2013**

Recommendations to DMH Director Marvin J. Southard to be included in the next MHSA three-year plan. Recommendations include: new MHSA Initiatives for children ages zero to five and TAY, continue funding for all youth in certain much needed mental health programs, and that implementation of improved processes for decision making within the Strategic Leadership Team is adopted.

- **Letter Dated July 8, 2013**

Letter of support to the Board for the creation of a Blue Ribbon Commission to vigorously examine and suggest reforms for child Protection in Los Angeles County. The Commission expressed its readiness to support the Commission in its efforts to preserve the safety and well-being of Los Angeles children.