

California - Child and Family Services Review

County Self-Assessment

JANUARY 2, 2019- JANUARY 2, 2024

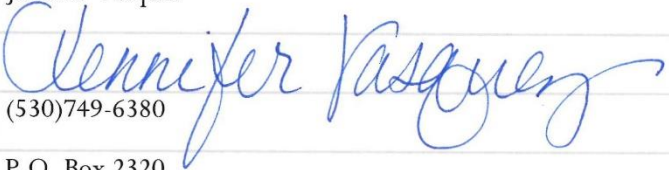


California – Child and Family Services Review Signature Sheet


For submittal of: CSA ☒ SIP ☐ Progress Report ☐

County	Yuba
SIP Period Dates	January 2, 2019 – January 2, 2024
Outcome Data Period	January 2018, Q3 2017

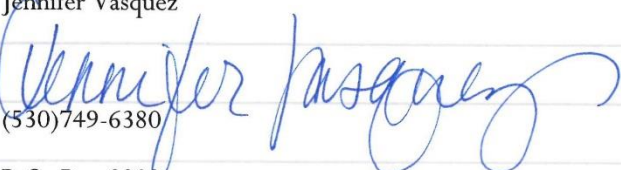
County Child Welfare Agency Director

Name	Jennifer Vasquez
Signature*	
Phone Number	(530)749-6380
Mailing Address	P.O. Box 2320 Marysville, CA 95901

County Chief Probation Officer

Name	Jim Arnold
Signature*	
Phone Number	(530)749-7551
Mailing Address	215 5 th Street Marysville, CA 95901

Public Agency Designated to Administer CAPIT and CBCAP

Name	Jennifer Vasquez
Signature*	
Phone Number	(530)749-6380
Mailing Address	P.O. Box 2320 Marysville, CA 95901

Board of Supervisors (BOS) Signature

BOS Approval Date	Signature not required for CSA report.
Name	
Signature*	

Mail the original Signature Sheet to:

*Signatures must be in blue ink

Children and Family Services Division
Outcomes and Accountability Section
California Department of Social Services
744 P Street, MS 8-12-91
Sacramento, CA 95814

Contact Information

Child Welfare Agency	Name	Jennifer Vasquez, Director
	Agency	Yuba County Health and Human Services Department
	Phone & E-mail	(530) 749-6380, jvasquez@co.yuba.ca.us
	Mailing Address	P.O. Box 2320 Marysville, CA 95901
Probation Agency	Name	Jim Arnold, Chief Probation Officer
	Agency	Yuba County Probation Department
	Phone & E-mail	(530) 749-7551, jarnold@co.yuba.ca.us
	Mailing Address	215 5th Street Marysville, CA 95901
Public Agency Administering CAPIT and CBCAP (if other than Child Welfare)	Name	Not Applicable. Child Welfare administers CAPIT and CBCAP.
	Agency	
	Phone & E-mail	
	Mailing Address	
CAPIT Liaison	Name	Julie Mahon, Program Manager
	Agency	Yuba County Health and Human Services Department
	Phone & E-mail	(530)749-6296, jmahon@co.yuba.ca.us
	Mailing Address	P.O. Box 2320 Marysville, CA 95901
CBCAP Liaison	Name	Julie Mahon, Program Manager
	Agency	Yuba County Health and Human Services Department
	Phone & E-mail	(530)749-6296, jmahon@co.yuba.ca.us
	Mailing Address	P.O. Box 2320 Marysville, CA 95901
PSSF Liaison	Name	Julie Mahon, Program Manager
	Agency	Yuba County Health and Human Services Department
	Phone & E-mail	(530)749-6296, jmahon@co.yuba.ca.us
	Mailing Address	P.O. Box 2320 Marysville, CA 95901

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Introduction

The Yuba County Health and Human Services Department, Child and Adult Protective Services Division (CAPS) and Probation Department (PO) have completed this County Self-Assessment (CSA) in accordance with the provision of the Child Welfare Outcome and Accountability System, referred to as the California Child and Family Services Review (C-CFSR). The Yuba County Self-Assessment is one piece of a larger continuous quality improvement process which relies on both qualitative and quantitative data to guide public child welfare (both social services and probation) in planning for program enhancements. The California Children's and Families Services Review (C-CFSR) was established by the California's Child Welfare System Improvement and Accountability Act (AB 636). As required by AB 636, Yuba County must regularly analyze, in collaboration with key community stakeholders (e.g., parents, youth in foster care, public agency personnel, staff from community-based organizations, foster parents and relatives caring for youth in foster care), through a structured format, its performance on specific child welfare and probation outcomes.

State and Federal outcomes for child welfare, including those served by probation, are measured using data collected by the statewide child welfare database (CWS/CMS). In addition to analyzing the outcome indicators the Yuba County Child and Adult Protective Services (CAPS) Department and Probation Department must review systematic and community factors that correspond to the federal review. Areas needing improvement are incorporated into a multi-year (5) System Improvement Plan (SIP), which is also developed in partnership with community stakeholders and partners. The SIP must be approved by the Yuba County Board of Supervisors (BOS) and submitted to the State Department of Social Services.

In addition, the Yuba County Self-Assessment includes plans for the expenditure of federal and state funds for the Promoting Safe and Stable Families (PSSF), Child Abuse Prevention, Intervention and Treatment (CAPIT) and Community Based Child Abuse Prevention (CBCAP). Yuba County's last County Self-Assessment was completed in 2013 and was the basis for the most recent SIP goals and strategies. Planning for the current CSA was built upon the

progress that was made during the past five years and related to the SIP to improve collaboration and increase resources for families in Yuba County despite limited resources and the challenges that face moderately small rural counties in California. The commitment of child welfare, probation and community partners has been vital to the progress of strengthening families and ensuring the safety of children.

A Yuba County Peer Review of both child welfare and probation cases was conducted in Marysville, California, May 30 - June 1, 2018. The Peer Review process is used in California as an avenue for each county's child welfare and probation to conduct an in-depth qualitative analysis on one specific focus area, or outcome measure. This process requires both agencies to conduct a quantitative analysis of outcome measures and, in partnership with the California Department of Social Services, select one outcome measure on which to focus a qualitative peer review. CAPS elected to examine Safety Measure Two, Recurrence of Maltreatment within 12 months. Yuba County Probation Department decided to focus on Permanency Measure Two, Permanency in 12 Months, specifically for children in care 12 to 24 months. Peer reviewers were recruited from counties which have consistently performed well on the selected outcome measures during the past five years; a total of seven social workers and two probation officers served as the peer reviewers. Peer reviewers represented a total of six unique counties. Details of the event's schedule and findings is part of the [Peer Review section of this document](#).

C-CFSR PLANNING TEAM & CORE REPRESENTATIVES

C-CFSR TEAM

As per AB 636, Yuba County Health and Human Services Department, Probation and the CDSS partnered together to plan, conduct and implement the Yuba County Self-Assessment. The core planning team included the 1) social services director, program managers, program specialists and one supervisor, 2) probation program manager and supervisor, 3) consultants with the CDSS Outcomes and Accountability and the Office of Child Abuse and Prevention, and 4) staff from the University of California, Davis, Northern California Training Academy who were contracted to serve as consultants, facilitators and event

coordinators. Throughout the development of the County Self-Assessment the core planning team met regularly to ensure overall progress of all required activities.

CORE REPRESENTATIVES

Yuba County sought participation of key community stakeholders as part of the county self-assessment to discuss child welfare and probation strengths and challenges, county demographics, regional needs and resources, and individual areas of focus related to outcomes for children and families. Community partners were invited to a stakeholder meeting on June 19, 2018, during which participants discussed demographic and outcome measure data for Yuba County children in placement (both child welfare and probation). Small groups were formed to discuss a range of pertinent topics: permanency, re-entry, well-being and transitional age youth, recurrence and a variety of global questions interrelated to child welfare.

A total of five focus groups of key stakeholders were also conducted to receive feedback on the strengths and challenges of both Yuba County CAPS and Probation Department. Focus groups were conducted with biological parents, (2 participants), child welfare supervisors (3 participants), ILP youth (22 participants), foster parents (6 participants), and social workers (25 participants). Focus groups were held on May 23rd, May 31st, June 1st and June 18, 2018. Findings from the stakeholder event and focus groups have been incorporated into this report and identified as such.

All of the required core participants contributed to the Yuba County Self-Assessment, along with a significant number of other recommended participants. The following attended the Stakeholder Meeting on June 19th, 2018.

Name	Agency Affiliation	Position
Francisco Reveles	Yuba County Office of Education	Superintendent of Schools
Amy Molina-Jones	Yuba County Office of Education	Prevention Coordinator
Nick Roberts	Yuba County Office of Education	Prevention Assistant

Jolie Carreon	Marysville Joint Unified School District	Director of Student Discipline and Attendance
Toni Vernier	Marysville Joint Unified School District	Executive Director of Special Education
Jessica Guth	Marysville Joint Unified School District	Director of Program Services
John Floe	Sutter Yuba Behavioral Health	Program Manager Community Services
Shannon Secrist	Sutter Yuba Behavioral Health	Deputy Director
Greg Stone	Peach Tree Health	CEO
Rachel Pena-Roos	Victor Services	Director
Martha Moreno	Victor Services	Family Advocate
Nahum Holloway	Victor Services	Facilitator
Cathy Le Blanc	Camptonville Community Partnership	Executive Director Rural Health Advocate
Debra Givens	Yuba County Superior Court	Judge
Coleman Segal	County Counsel	Attorney
Leah Eneix	Yuba College	Foster Kinship Care Education (FKCE)
Diana Adams	Yuba College	FKCE/YESS ILP Program Specialist
Karen Stanis	Yuba College	Program Director
Sherry Scott	El Shaddai	Lead Social Worker
Brent Hungrige	Probation	Deputy Superintendent of Juvenile Hall
James Moralez	Probation	Deputy Superintendent of Maxine Singer Youth Guidance Center
Tara Moseley	Probation	Program Manager
April Sonnenburg	Probation	Supervisor
Lisa Lit	Probation	Analyst
Tracy Bryan	Health and Human Services Department	Public Health Program Manager II
Del York	Health and Human Services Department	Public Health Supervisor
Karleen Jakowski	Health and Human Services Department	Deputy Director
Jennifer Vasquez	Health and Human Services Department	Director
Tony Kildare	Sutter Yuba Behavioral Health	Program Manager
Robin Timoszyk	First 5	Program Specialist
Reem Burris	Health and Human Services Department	Child and Adult Protective Services Supervisor
John Harvey	Health and Human Services Department	Child and Adult Protective Services Supervisor
Monique Phillips	Health and Human Services Department	Child and Adult Protective Services Supervisor
Cheryce Williams	Health and Human Services Department	Child and Adult Protective Services Supervisor
Chuck Yang	Health and Human Services Department	Child and Adult Protective Services Supervisor

Demographic Profile

GENERAL COUNTY DEMOGRAPHICS

Located in Northern California, Yuba County encompasses 644 square miles which includes 632 square miles of land and 12 square miles of water. It is the fifth smallest county in California by total area and lies along the western slope of the Sierra Nevada Mountains in the Central Valley. The local economy has traditionally been agriculturally based, boasting fruit orchards, rice fields and cattle grazing. As of July 1, 2017, Yuba County has a total estimated population of 77,031 individuals, with 27.4% of those individuals under age 18. The county has a population per square mile of 114.2. Over the past decade, the population and racial and ethnic breakout of the county have remained consistent. The following tables illustrate these demographics based on U.S. Census data as of July 1, 2017 (V2017).¹ Racial and ethnic data breakdowns are provided in the tables below.

Yuba County is home to two incorporated cities, Marysville, the county seat, and Wheatland. Unincorporated communities include Olivehurst, Linda, Arboga, Plumas Lake and the more isolated foothill communities of Hallwood, Brownsville, Browns Valley, Camptonville, Challenge, Loma Rica, Dobbins, Oregon House, Rackerby, Smartsville, and Strawberry Valley. Yuba County's foothill communities struggle with high unemployment rate, a lack of public transportation and limited human service resources. While there is a centrally located community center, family resource center and small medical clinic, accessing these facilities can be a challenge for those with no transportation. As is common in rural counties, isolated families who live outside of city centers have a difficult time accessing employment, health care and other needed resources. The foothill region of Yuba County does not have daily public transportation (bus routes), though there are two round-trips every Tuesday, Wednesday and Thursday from Brownsville, Oregon House,

¹ U.S. Census Bureau: State and County QuickFacts data are derived from: Population Estimates, American Community Survey, Census of Population and Housing, Current Population Survey, Small Area Health Insurance Estimates, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits. Accessed May 3, 2018 at <https://www.census.gov/quickfacts/fact/table/yubacountycalifornia,US/PST045217>

Willow Glen and Loma Rica to Marysville and most points in between.

Public transportation within the city limits provides many convenient routes that allow access to services and resources. There are six routes of service to Yuba City, Marysville, Linda and Olivehurst. Buses operate on a set schedule from 6:30 a.m. to 6:30 p.m. weekdays and 8:30 a.m. to 5:30 p.m. on Saturdays. However, there is no public transportation available on Sundays. The south region of Yuba County, which includes a portion of Olivehurst, all of Arboga and Plumas Lake, does not have any public transportation available which can be a challenge for families to access services and resources. Community partners in the CSA stakeholder meeting raised this issue as one of the most challenging for low-income Yuba County residents. In general, stakeholders indicated several challenges, including rural access to public transportation and challenges with families maintaining multiple agency-directed schedules across locations using the current bus schedule.

Because of the proximity with Sutter County and certainly the overlap in clients and resources, Sutter-Yuba Behavioral Health (SYBH) has expanded services in an effort to serve more clients; yet the demand outweighs available services. In addition, many of the local substance abuse facilities serve both Yuba and Sutter Counties which can result in parents obtaining treatment from facilities that are further out of county. This can be a challenge to coordinate visitation and services for families however CAPS staff work collectively with families and the courts to ensure reunification is a success.

Yuba County has also been challenged with homelessness and affordable housing. In December 2015, the Housing Support Program (HSP) was implemented which provides supportive services and housing assistance to families eligible to the CalWORKs program. In July 2016, the 14Forward project was launched which provides emergency temporary shelter and case management services to assist homeless individuals by overcoming personal and financial obstacles. Both of these programs are geared towards helping homeless individuals and families stabilize their lives and secure permanent housing.

Figure 1.1: Yuba County Estimated Population, by Race, 2017²

Race	Est. Number	Percent
White, alone	60,932	79.1%
Black African American, alone	3,235	4.2%
American Indian or Alaska Native, alone	2,234	2.9%
Asian, alone	5,623	7.3%
Native Hawaiian or Pacific Islander, alone	385	0.5%
Two or More Races	4,699	6.1%
Hispanic or Latino	21,415	27.8%
White, not Hispanic or Latino	42,983	55.8%
Total	77,031	

According to the US Census in 2017 of the 77,031 residents of Yuba County, approximately 7.9% are children under the age of 5 and 27.4% are children under the age of 18.

Figure 1.2: Yuba County Population under Age 20 by Race/Ethnicity, 2017²

Race/Ethnicity	Number	Percent
White, alone	11,311	45.6%
Hispanic or Latino	8,889	35.8%
Native American, alone	311	1.2%
Asian/Pacific Islander (P.I.), alone	1,689	6.8%
Black, alone	693	2.8%
Two or More Races, alone	1,936	7.8%
Total	24,829	100.0%

Analysis

According to these US Census Bureau data, 23.7% of persons aged 5 years or older speak a language other than English at home. Additional data that stratify which languages are spoken by whom are not currently available. Upon review of referrals recorded in CWS/CMS, Yuba County's foothill region is predominantly white however; there is greater diversity of ethnicity within the other Yuba County communities that consist of White, Hispanic and African American.

² U.S. Census Bureau, State and County Quick Facts, July 1, 2017 (V2017).

Figure 1.3: Additional County Demographic Information, 2016

Category	Information ³
Median Income ⁴	The latest available census data indicates that the median household income was \$51,776 in 2017
Unemployment Data ⁵	The unemployment rate was 7.4% in March 2018, down approximately 51% from 2013 (14.4%)
Poverty Rate ⁴	As of 2016 census data, 15.3% of people in Yuba county lived below the federal poverty line
Average Housing Costs ⁴	The median value of owner-occupied housing units in 2016 was \$190,700 with the median monthly mortgage payment at \$1,541 and the median gross rent at \$918
Homelessness Data ⁶	There were 760 homeless individuals in the Continuum of Care (CoC) which include Yuba and Sutter Counties (CA-524), based on the latest survey data (CoC HUD, 2017). 117 of these individuals were children under the age of 18.
Federally Recognized Tribes	Yuba County has no federally recognized tribes.

Analysis

Yuba County's median household income is \$15,393 below California's median income of \$67,169. Most notable is the poverty rate; Linda has a rate of 27.9% and Marysville is 26.0% compared to the other surrounding communities that align closer to the county's overall rate of 15.3%. During Fiscal Year 2017/2018, the CWS/CMS system showed that 50.24% of referrals came from Marysville and Linda. Olivehurst accounted for 30.05% of the referrals received in FY 2017/2018. These three communities are heavily condensed compared to Yuba County's other outlying communities which would contribute to the high number of referrals.

³ All figures represented in the dollars of their listed years with no adjustments for inflation

⁴ U.S. Census Bureau: State and County QuickFacts data are derived from: Population Estimates, American Community Survey, Census of Population and Housing, Current Population Survey, Small Area Health Insurance Estimates, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits. Accessed May 3, 2018 at <https://www.census.gov/quickfacts/fact/table/yubacountycalifornia,US/PST045217>

⁵ United States Department of Labor, Bureau of Labor Statistics: Local Areal Unemployment Statistics. Accessed May 3, 2018 at <https://data.bls.gov/map/>

⁶ HUD Exchange. HUD 2016 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. Accessed May 3, 2018 at https://www.hudexchange.info/resource/reportmanagement/published/CoC_PopSub_CoC_CA-524-2017_CA_2017.pdf

CHILD MALTREATMENT MEASURES

Figure 1.4: Child Maltreatment Indicators

Category	Information
Number of Low-Birth Weight Newborns ⁷	82 newborns had low birth weight in 2013 (6.8%), up from 63 in 2012.
Number of Children Born to Teen Parents ⁸	86 children were born to teen parents in 2013, at a rate of 31.5 births per 1,000 young women ages 15-19.
Family Structure ⁹	<p>2014</p> <p>Female-Headed Households - LNE</p> <p>Male-Headed Households - LNE</p> <p>Married Couple (Opposite Sex) - LNE</p> <p>Unmarried Couple (Opposite Sex) – 15.0%</p> <p>Unmarried or Married Same-Sex Couple – N/A</p> <p>Other Households (includes children living alone or with nonrelatives) – 0.6%</p> <p>Note: LNE (Low Number Event) refers to data that have been suppressed because the margin of error was greater than 5 percentage points.</p>
Housing Costs & Availability ¹⁰	The median value of owner-occupied housing units in 2018, was 290,000. In 2016 was \$190,700, with the median monthly mortgage payment at \$1,541 and the median gross rent at \$918. The owner-occupied rate is 58.3%. As of July 1, 2016, there were 28,357 housing units in Yuba County.
2-1-1 Monthly Call Averages ¹¹ Yuba County does not have a 2-1-1 service.	
Substance Abuse Data	The rate of opioid overdose hospitalizations in 2016 was 13.4 cases per 100,000 people (age-adjusted), which was a total of 10 people in 2016. ¹²
Mental Health Data ¹³	2,422 adults received Specialty Mental Health Services in FY 2014-2015 compared to 2,229 adults in FY 2013-2014 and 1,948 adults in FY 2012-2013 (Yuba and Sutter Counties combined).
Child Fatalities & Near ¹⁴ Fatalities	3 children aged 1-4, 1 child aged 5-14, 1 youth aged 15-19 and 3 young adults aged 20-24 died of unintentional injuries in 2015. That same year, 1 youth aged 15-19 died of homicide, 1 young adult aged 20-24 died of a disease of the heart and another young adult aged 20-24 died of suicide. The child/youth death rate was 37.0 per 100,000 in 2013-2015.

⁷ Kidsdata.org, accessed May 3, 2018 at <https://www.kidsdata.org/topic/301/lowbirthweight/table#fmt=91&loc=335&tf=73&sortColumnId=0&sortType=asc>

⁸ Kidsdata.org, accessed May 3, 2018 at <https://www.kidsdata.org/topic/314/teenbirths/table#fmt=1192&loc=335&tf=73&sortColumnId=0&sortType=asc>

⁹ Kidsdata.org, accessed May 3, 2018. <https://www.kidsdata.org/topic/41/families-with-children-type250/table#fmt=470&loc=335&tf=79&ch=1074,1075,1067,1078,1077,1072&sortColumnId=0&sortType=asc>

¹⁰ United States Census Bureau, QuickFacts, Yuba County, California. Accessed May 3, 2018 at <https://www.census.gov/quickfacts/fact/table/yubacountycalifornia,US/PST045217>

¹¹ 2-1-1. Accessed May 3, 2018 at <http://www.211.org/search?zip=&city=MARYSVILLE&state=CA>

¹² California Opioid Overdose Surveillance Dashboard, Yuba County Dashboard, retrieved 9-20-18 from <https://discovery.cdph.ca.gov/CDIC/ODdash/>

¹³ Performance Outcomes Adult Specialty Mental Health Services Report Date August, 2017. Accessed May 3, 2018 at [http://www.dhcs.ca.gov/services/MH/Documents/Performance%20Dashboard%20\(adult%20reports\)/Adult%20Reports-%20Non%20ADA/POS_Adult_Report_Sutter_Yuba.pdf](http://www.dhcs.ca.gov/services/MH/Documents/Performance%20Dashboard%20(adult%20reports)/Adult%20Reports-%20Non%20ADA/POS_Adult_Report_Sutter_Yuba.pdf)

¹⁴ Kidsdata.org, Child/youth deaths, by age and cause. Accessed May 3, 2018 at <https://www.kidsdata.org/topic/660/childdeaths-age-cause/table#fmt=939&loc=335&tf=84&ch=1307,1309,446,1308,530,531,1324,533,532,534,529&sortColumnId=0&sortType=asc>

Children with Disabilities ¹⁵	1,499 children or 7.3% of the children in Yuba County have a major disability, compared with 3.1% for the state as a whole
Rate of Law Enforcement Calls for Domestic Violence ¹⁶	Yuba County law enforcement received 510 calls for domestic violence in 2016, of which 30.6% (156) involved a weapon. Calls for domestic violence have steadily increased over the past 10 years (9.8%) with a total of 460 calls in 2007. However, calls involving a weapon have significantly decreased over the past 10 years (274 in 2007 and 156 in 2016, a 43% decrease).
Rates of emergency room visits for child victims of avoidable injuries	In 2014, there were 1,897 cases of ER visits for unintentional injuries for children. ¹⁷

Analysis

Low birthweight can be indicative of infants who are born too small, too early, or both. Compared to infants of normal weight, low birth weight infants may be at higher risk of short and long-term health problems¹⁸. Risk factors that may increase a pregnant woman's chances of having a low birth weight baby include: smoking, drinking alcohol, using street drugs, late or no prenatal care, lack of weight gain, being younger than 15 or older than 35, chronic health conditions, low socioeconomic status, and domestic violence or other abuse¹⁹. Yuba County's rate has increased by 1.2% since 2010 however, Yuba County is equal to California's rate of 6.8% for low birthweight.

Yuba County's teen birth rate is 31.5 births per 1,000 young women ages 15 – 19, compared to California's teen birth rate of 23.2. While Yuba County remains above California's average rate, there has been a decrease in teen pregnancy since Yuba County's last county self-assessment which was 42.2. Teen pregnancy and childbearing can have short- and long-term negative consequences for teen parents, their children, and their community. Recent research has recognized that pregnancy and childbirth have a significant impact on educational

¹⁵ Kidsdata.org, Children with Major Disabilities, by City, School District and County (Regions of 10,000 Residents or More). Accessed May 4, 2018 at <https://www.kidsdata.org/topic/770/special-needs-major-disabilities10/table#fmt=1178&loc=2,335&tf=94&sortColumnId=1&sortType=desc>

¹⁶ Open Justice, Domestic Violence Related Calls for Assistance, Yuba County 2007-2016. Accessed May 4, 2018 at <https://openjustice.doj.ca.gov/crime-statistics/domestic-violence>

¹⁷ EpiCenter Data Portal, CDPH, retrieved 9-20-18 from <http://epicenter.cdph.ca.gov/ReportMenus/CallReportingServicesCustomDataTable.aspx?reportID=44&minYear=2014&maxYear=2014&minAge=0&maxAge=18&countyList=58&dd1=0&dd2=0&dd3=0&dd4=0&OutputFormat=1&causes=201&icdCauses=&raceEthList=101&reportDataID=3&populationFlag=False>

¹⁸ Low Birthweight and the Environment, CDC, Accessed March 5th, 2019 at <https://ephtracking.cdc.gov/showRbLBWGrowthRetardationEnv.action>

¹⁹ Low Birthweight Key Points, March of Dimes, Accessed March 5th 2019 <https://www.marchofdimes.org/complications/low-birthweight.aspx>, Accessed March 5th, 2019.

outcomes of teen parents. Additionally, children who are born to teen mothers also experience a wide range of problems. For example, they are more likely to:

- have a higher risk for low birth weight and infant mortality;
- have lower levels of emotional support and cognitive stimulation;
- have fewer skills and be less prepared to learn when they enter kindergarten;
- have behavioral problems and chronic medical conditions;
- rely more heavily on publicly funded health care;
- have higher rates of foster care placement;
- be incarcerated at some time during adolescence;
- have lower school achievement and drop out of high school;
- give birth as a teen; and
- be unemployed or underemployed as a young adult.

These immediate and long-lasting effects continue for teen parents and their children even after adjusting for the factors that increased the teen's risk for pregnancy—e.g., growing up in poverty, having parents with low levels of education, growing up in a single-parent family, and having low attachment to and performance in school. In addition, generational poverty has been a challenge for Yuba County residents which can impact the health and well-being of children if families are not connected with resources and supportive services.

Over the past years, CAPS has seen an increase in substance abuse and its impact on children and youth. Several of the severe and general neglect allegations CAPS received are due to parental substance abuse. Substance abuse is a significant public health problem and is a priority area of concern that was highlighted in Yuba County's recent countywide Health Assessment that was completed by the Public Health division. Children and youth who grow up in homes with prevalent substance abuse are more likely to begin misusing drugs and alcohol themselves, which can lead to multigenerational cycles of addiction. The adverse impact of parental substance use on children and youth is often a combination of the toxic effects of exposure to drugs and alcohol, as well as the inability of parents struggling with substance use disorders to provide basic physical, psychological, and emotional needs for their children. Children whose parents use drugs and misuse alcohol are three times more likely to be

physically, sexually, or emotionally abused and four times more likely to be neglected than their peers.²⁰

CAPS has also seen a steady increase in referrals for newborns with positive toxicology results for legal and illegal substances which include marijuana, opioid prescriptions, methamphetamine and other drugs. Data within the CWS/CMS system reflects the following referrals received for newborns with positive toxicology results: 35 referrals in 2014, 32 referrals in 2015, 50 referrals in 2016, and 59 referrals in 2017. Prenatal exposure to alcohol, tobacco, and illicit drugs has the potential to cause a wide spectrum of physical and developmental challenges for infants. There is also potential for ongoing challenges in the stability and well-being of infants who have been prenatally exposed, and their families, if substance use disorders are not addressed with appropriate treatment and long-term recovery support. The intersection of pregnancy and substance use creates a need for a collaborative approach among medical, substance use, child welfare, and early childhood providers to address the multifaceted needs of the mother, infant, and family.²¹ Yuba County has many community partners that offer maternal support services for Yuba County residents. SYBH operates the First Steps Perinatal Day Treatment Program, which provides intensive day treatment services and utilizes an evidence-based curriculum. In addition, CAPS contracts with residential treatment facilities, Progress House and Community Recovery Resources (CoRR), to ensure parents have flexibility to choose the best treatment facility to meet their needs.

The need for mental health services has been steadily rising over the years. This has prompted CAPS to further expand supportive services to meet the needs of children and families within the child welfare system. CAPS contracted with SYBH to place two therapists at the child welfare office to expedite service delivery for children and parents in need of mental health services. If children are found to need a higher level of care, the onsite SYBH therapists will refer children to SYBH's Children's Systems of Care (CSOC) or Youth for Change for further

²⁰ Families Affected by Parental Substance Use, American Academy of Pediatrics, <https://pediatrics.aappublications.org/content/138/2/e20161575>

²¹ Infants with Prenatal Substance Exposure, National Center on Substance Abuse and Child Welfare, Accessed March 5th, 2019. <https://ncsacw.samhsa.gov/resources/substance-exposed-infants.aspx>

treatment. In addition, social workers complete an application for the California Victim's Compensation Program (CalVCP) and submit referrals to Yuba County Victim Services for therapy, when appropriate. CAPS recognizes that the need for mental health services is continuously growing and currently outweighs the capacity and thus remains committed to collaborating with community partners and stakeholders to further expand resources available to children and families of Yuba County.

Child Welfare and Probation Population

The following tables provide demographic information on children in referrals and in out-of-home care. These data come from the California Department of Social Services quarterly reports available from the UC Berkeley Center for Social Services Research, <http://cssr.berkeley.edu/cwscmsreports> unless otherwise noted. Each item in the data presented below may be pulled from different years, depending on what was the most recent available year.

Source:

Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). *CCWIP reports*. Retrieved 5/4/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare.

Explanatory Notes for Participation and Caseload Demographic Tables: UC Berkeley counts unduplicated numbers of children, so if a child is included in multiple referrals during the year, they are only counted once during the year.

Figure 1.5: Children with Maltreatment Referrals in Child Welfare by Age, Yuba County, January 1, 2017 to December 31, 2017

Age Group	Children w/ Allegations	Total Child Population	Incidence per 1,000 Children
Under 1	142	1,169	121.5
1 - 2	177	2,328	76.0
3 - 5	250	3,616	69.1
6 - 10	410	6,153	66.6
11 - 15	381	5,937	64.2
16-17	106	2,299	46.1
Total	1,466	21,502	68.2

Figure 1.6: Children with Maltreatment Referrals in Child Welfare by Ethnicity, Yuba County, January 1, 2017-December 31, 2017

Ethnic Group	Children with Referrals	Total Child Population	Rate per 1,000 Children
Black	71	588	120.7
White	429	9,734	44.1
Latino	158	7,751	20.4
Asian/Pacific Islander	20	1,440	13.9
Native American	9	262	34.4
Multiracial	0	1,727	0.0
Missing	779	0	0.0
Total	1,466	21,502	68.2

Figure 1.7: Children in Out-of-Home Care in Child Welfare by Age, Yuba County, on July 1, 2017

Age Group	In Care	Total Child Population	Rate per 1,000 Children
Under 1	13	1,169	11.1
1 - 2	35	2,328	15.0
3 - 5	27	3,616	7.5
6 - 10	39	6,153	6.3
11 - 15	44	5,937	7.4
16-17	24	2,299	10.4
Total	182	21,502	8.5

Figure 1.8: Children in Out-of-Home Care in Probation by Race / Ethnicity, Yuba County, as of July 1, 2017

Age Group	Total	Total Child Population	Rate per 1,000 Children
Under 1	0	1,169	0
1 - 2	0	2,328	0
3 - 5	0	3,616	0
6 - 10	0	6,153	0
11 - 15	3	5,937	0.05%
16-17	4	2,299	0.2%
18-21	6	3,875	0.2%
Total	13	25,377	0.05%

Figure 1.9: Children in Out-of-Home Care in Child Welfare by Race / Ethnicity, Yuba County, as of July 1, 2017

Ethnic Group	In Care	Total Child Population	Prevalence per 1,000 Children
Black	14	588	23.8
White	116	9,734	11.9
Hispanic	42	7,751	5.4
Asian/Pacific Islander	3	1,440	2.1
Native American	6	262	22.9
Multi-Race	1	1,727	0.0
Total	182	21,502	8.5

Figure 1.10: Children in Out-of-Home Care in Probation by Race / Ethnicity, Yuba County, as of July 1, 2017

Ethnic Group	In Care	Total Child Population	Prevalence per 1,000 Children
Black	2	588	0.3
White	9	9,734	0.9
Hispanic	2	7,751	0.0
Asian/Pacific Islander	0	1,440	0.0
Native American	0	262	0.0
Multi-Race	0	1,727	0.0
Total	13	21,502	0.6

Figure 1.11: Yuba County Child Welfare Report

Category	2012	2012 Rate,1000	2017	2017 Rate/1,000	CA 2017 Rate/1,000
Child Population	21,261	-	21,502	-	-
# Children in referrals	1,627	76.5	1,466	68.2	54.1
# Children in Substantiated Referrals	276	13.0	215	10.0	7.5
Children Entering Out-of-Home Care	97	4.6	97	4.5	3.0
Children in Out-of-Home Care ²²	110	5.2	182	8.5	5.8

Figure 1.12: Yuba County Substantiated Allegations Stratified by Ethnicity

Ethnic Group	Total Child Population	Children with Substantiations	Incidence per 1,000 Children
Black	588	13	22.1
White	9734	76	7.8
Hispanic	7751	47	6.1
Asian/Pacific Islander	1440	8	5.6
Native American	262	1	3.8
Multi-Race	1727	0	0.0
Missing	0	92	0
Total	21502	237	11.0

Figure 1.13: Yuba County Substantiated Allegations Stratified by Age

Age Group	Total Child Population	Children with Substantiations	Incidence of Substantiation per 1,000 Children
Under 1	1169	70	59.9
1 - 2	2328	33	14.2
3 - 5	3,616	43	11.9
6 - 10	6,153	47	7.6
11 - 15	5,937	38	6.4
16-17	2,299	6	2.6
Total	21,502	237	11.0

²² Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). *CCWIP reports*. Retrieved 5/4/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare. Point in Time July 1, 2012 and July 1, 2017.

Analysis

There was a slight decrease in both allegations (8.3 per 1,000 children) and substantiated allegations (3 per 1,000 children) of between 2012 and 2017. This follows a similar slight decrease in substantiated allegations in the state of California for the same time periods. It is likely that statewide trends are the main driver of these decreases, perhaps due to the many reforms to child welfare that have occurred and are being implemented statewide.

Figure 1.14: Children in Child Welfare with Reentries by Age, Yuba County, October 2014-September 2015

Age Group	In Care	Children with First Reentry	Children with Subsequent Reentry
Under 1	9	1	0
1 - 2	7	0	0
3 - 5	7	0	0
6 - 10	18	1	0
11 - 15	7	0	0
16-17	0	0	0
Total	48	2	0

Figure 1.15: Children in Child Welfare with Reentries by Ethnicity, Yuba County, October 2014-September 2015

Ethnic Group	In Care	Children with First Reentry	Children with Subsequent Reentry
Black	4	0	0
White	38	2	0
Hispanic	4	0	0
Asian/Pacific Islander	0	0	0
Native American	1	0	0
Missing	0	0	0
Total	48	2	0

Figure 1.16: Children in Probation with Reentries by Age, Yuba County, October 2014-September 2015

Age Group	In Care	Children with First Reentry	Children with Subsequent Reentry
Under 1	0	0	0
1 - 2	0	0	0
3 - 5	0	0	0
6 - 10	0	0	0
11 - 15	0	0	0
16-17	1	0	0
Total	1	0	0

Figure 1.17: Children in Probation with Reentries by Ethnicity, Yuba County, October 2014-September 2015

Ethnic Group	In Care	Children with First Reentry	Children with Subsequent Reentry
Black	0	0	0
White	1	0	0
Hispanic	0	0	0
Asian/Pacific Islander	0	0	0
Native American	0	0	0
Missing	0	0	0
Total	1	0	0

Figure 1.18: Children with Open Service Component, April 1, 2018

Service Component Type	Court-Ordered	Voluntary	Missing	Total
Emergency Response	14	4	14	32
No Placement FM	1	9	0	10
Post-Placement FM	6	0	0	6
Family Reunification	75	1	0	76
Permanent Placement	84	16	0	100
Supportive Transition	20	0	0	20
Total	200	30	14	244

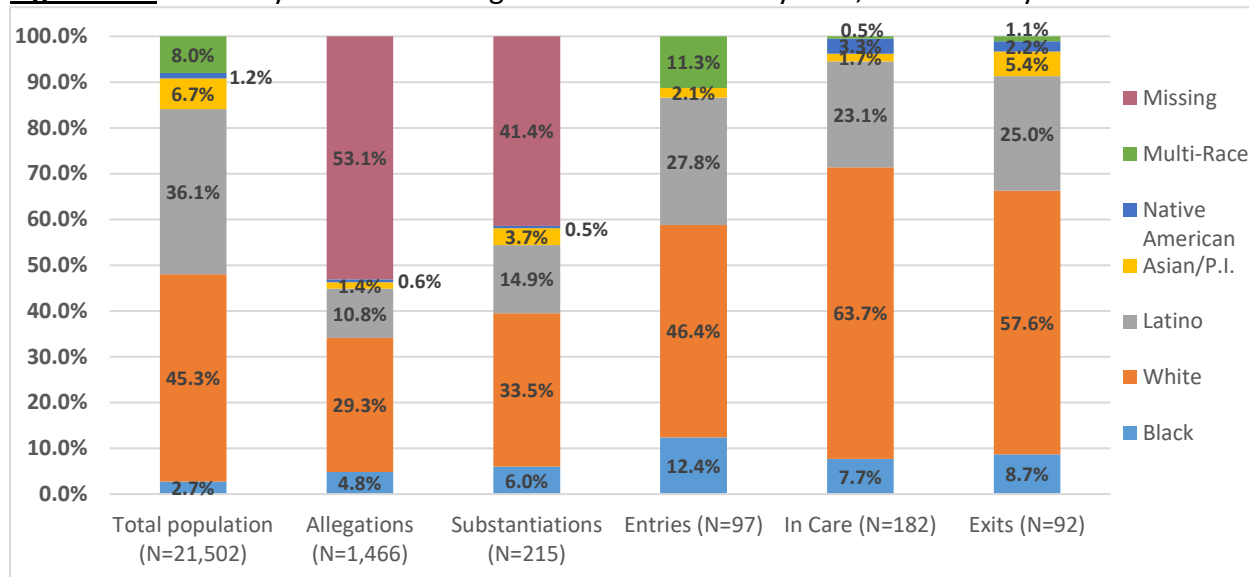
Figure 1.19: Allegation Type

Allegation Type	2012 Count	2012 Percent	2017 Count	2017 Percent
Sexual Abuse	125	7.7	123	8.3
Physical Abuse	301	18.5	230	15.3
Severe Neglect	45	2.8	25	1.6
General Neglect	819	50.3	788	52.9
Exploitation	1	0.1	0	0
Emotional Abuse	100	6.1	186	12.3
Caretaker Absence/Incapacity	44	2.7	20	1.4
At Risk, Sibling Abused	192	11.8	114	8.0
Total	1,627	100	1,486	100

Analysis

The rate of emotional abuse has doubled in the last five years; however, overall there has been a slight decrease in allegations since the last cycle of the CSA in 2012 from 1,627 to 1,486. This decrease can be attributed to a lower proportion of at-risk siblings as well as a lower proportion of physical abuse cases. Overall, CAPS has been focused on educating community partners regarding mandated reporter responsibilities. CAPS has worked with various community partners and schools to create open dialogue regarding the responsibility of being a mandated reporter and provided informational bookmarks as a reference tool. This has improved communication and has resulted in increased reports from community partners, which has likely allowed for more specificity regarding the types of referrals. The majority of severe neglect allegations are cases of newborns with positive toxicology results for legal and illegal substances which include marijuana, opioid prescriptions, methamphetamine and other drugs.

Figure 1.20: Ethnicity and Path through the Child Welfare System, Yuba County 2017



Analysis

As the above table shows, disproportionality exists for Black, Native American and White children across various paths through the child welfare system. White children represent the highest number of children in out of home care in 2017 (63.7%).

Public Agency Characteristics

POLITICAL JURISDICTIONS

Board of Supervisors

The County of Yuba is governed by County Board of Supervisors (BOS). Members of the BOS serve as the legislative and executive body for Yuba County and provide policy direction for all branches of county government. The five-member BOS is elected by district for a four-year term of office. The members are as follows:

District 1 – Andy Vasquez Jr.

District 2 – Mike Leahy

District 3 – Doug Lofton

District 4 – Gary Bradford

District 5 – Randy Fletcher

Each supervisor is responsible for their assigned regional designated area. Supervisorial districts vary greatly in geographical size; however, they all have approximately the same population. The selection of the chair and vice-chair are appointed annually by a majority vote of the BOS.

Federally Recognized Tribes

Yuba County does not have any federally recognized tribes.

Law Enforcement Agencies

Child and Adult Protective Services (CAPS) has a good working relationship with local law enforcement agencies. There are a total of six law enforcement agencies with whom CAPS interacts:

1. Marysville Police Department
2. Wheatland Police Department

3. Yuba County Sheriff's Department
4. Yuba-Sutter Narcotics Enforcement Team (NET-5)
5. Yuba Community College District Police Department
6. Beale Air Force Base (BAFB) Security Forces

CAPS social workers attend the Peace Officers Standards and Training (POST) and are deputized to take children into protective custody. In addition, law enforcement and Yuba County Office of Education (YCOE) participate in the Yuba County Commercially Sexually Exploited Children Multi-Disciplinary Team (CSEC MDT). The CSEC MDT members have worked together to understand their roles and ensure a swift response for exploited children. In addition, they are providing training to the community and other important stakeholders to increase CSEC awareness.

School Districts/Local Education Agencies

Yuba County CAPS also has excellent working relationships with the various school districts and local education agencies within the county. To ensure foster care youth are connected with services and resources within their school, CAPS and YCOE signed an MOU in July 2017 to allow for a YCOE prevention assistant to be located at CAPS once a week to ensure foster children are connected with educational programs and provided with as many supports as possible. Blue Ribbon Commission (BRC) is also in the early stages of conceptualizing alternative transportation so foster children may have a better opportunity to remain at their school of origin. Additionally, Yuba County HHSD collaborates with the YCOE by using a shared statewide database system called "Foster Focus". The Office of Education and CAPS enters predetermined academic information about dependent children to improve information sharing. The focus is to ensure educational support services are available to youth residing in a group home or licensed resource family home.

Public Health

Within the Public Health Division, social workers from the Family Stabilization Unit work with CAPS social workers to assist families in becoming self-sufficient and increase the

safety of children through the Linkages Program. This partnership ensures families are able to meet the requirements, goals and timeframes of both, CalWORKs and CAPS and allows for the family to receive additional supports from their Family Stabilization social worker during Child and Family Team meetings (CFTs) and home visits with the CAPS social worker.

CAPS has a public health nurse (PHN) assigned to the division. The PHN monitors the dental and health care needs of dependent children. The PHN reviews all psychotropic medication orders to ensure all appropriate paperwork is on file. In addition, the PHN and CAPS social workers communicate consistently to ensure medications are appropriate for the child. Dental, health care needs and prescription information is documented in the Health and Education Passport in the CWS/CMS system by PHN. Additionally, the PHN completes the Ages and Stages Questionnaire (ASQ) developmental screening tool for all cases with children ages 0 to 5.

COUNTY CHILD WELFARE AND PROBATION INFRASTRUCTURE

For CAPS and Probation Department organizational infrastructure, refer to Attachment #1 for the CAPS Division and Attachment #2 for the County Probation Department.

CAPS Infrastructure

The CAPS division is located at the Yuba County Health and Human Services Department which also includes Public Health, Employment, Eligibility, Administration and Finance, Special Investigations Unit, and Veterans Services.

CAPS is divided into five units: two Emergency Response (ER) units; Family Maintenance (FM) and Family Reunification (FR); Permanent Plan (PP); and a Specialized Unit. Social workers are assigned to these units based on their experience and their interests. However, to ensure that each worker understands the entire operation of CAPS, they are rotated between units to gain experience across the continuum of Child Welfare. The average caseload is 22 cases per social worker in the Ongoing unit which contains FM and FR. The assignment of these cases is based on the total number of cases the worker has and the difficulty of each case. ER referrals are assigned as they come in, based on the individual worker caseload and their experience with specific types of cases, e.g. having expertise in

sexual or physical abuse investigations. Each worker has approximately 11 active referrals at any given time. Additionally, the ER supervisors will take into consideration if a social worker has a particularly complex case that requires more court hearings when determining case assignments. The ER unit social workers are also assigned court work on a rotational basis to keep each caseload balanced. PP caseloads are assigned based on the specific worker's total caseload and level of experience.

In response to rising caseloads and statewide Child Welfare reform initiatives, CAPS created additional social worker positions to improve the quality of services available to children, youth and families. Point in time data available through the California Child Welfare Indicators Project (CCWIP) through the University of California at Berkeley shows that CAPS experienced a dramatic increase in total children/youth ages 0-17 in care midway through the last SIP cycle. On July 1, 2013 there were 137 children/youth in care; on July 1, 2014 there were 167 children/youth in care; on July 1, 2015 there were 196 children/youth in care; and on July 1, 2017 there were 184 children/youth in care.

In the last five years, Yuba County CAPS created six additional social worker positions, an additional social worker supervisor position, two program specialist positions, and a second program manager position. In addition to newly created positions, CAPS has experienced staff turnover and promotions which created vacancies and positions needing to be filled by new social workers within the CAPS division. Time periods when there are vacant positions can negatively impact CAPS operations. There are no current bargaining issues. Tracking of vacancies and turnover rate is monitored by Human Resources.

Vacant positions were filled quickly; however, each new staff member has been required to attend training which has impacted productivity. To ensure the safety of children and that State mandates are met, social workers are diligent and will occasionally utilize overtime to conduct home visits with foster youth and families, prepare court reports and manage crises. Due to time constraints, CWS/CMS data entry can fall behind as social workers work towards meeting their competing priorities, however they make a concerted effort to document their cases as soon as it is feasible. Supervisors' duties have also been impacted

due to having a higher ratio of new social workers that need continuous coaching to further improve their skills.

The department is committed to hiring the most experienced workers possible. Over the last several years, Yuba County has attempted to hire people holding master degrees in social work and other related fields. Currently, 19 staff in the CAPS workforce holds master degrees, 13 of which are MSWs, and of those, nine were Title IV-E supported. There is an average number of approximately nine years of experience within the described CAPS workforce. Recruitment of CAPS staff is a collaborative process with the Human Resources department to ensure that recruitment efforts capture the best possible candidates. Over the last several years, CAPS has implemented assessment centers into social worker recruitments which include role-play simulations, a writing exercises and group problem solving activities.

Other workforce information includes: 56 percent of the CAPS workforce being White, with the remaining 23.3 percent Hispanic, 6.6 percent African American, 6.6 percent Asian and the remaining 6.6 percent mixed. The base salary for a Social Worker III (requires a bachelor's degree with two years of paraprofessional case management experience) is \$4,684.00/month and for the Social Worker IV position (requires a Master of Social Work degree or a master's degree in a related field with two years of professional case management experience) is \$5,117.00/month. The base salary for a Social Worker Supervisor is \$5,590.00/month. The supervisor to worker ratio in CAPS is one to five.

CAPS is responsible for taking reports of suspected child abuse 24 hours a day, seven days a week. A child is only removed from the home if the social worker and family cannot mitigate the safety concerns while keeping the family intact. Families working with CAPS receive assistance through ER, FM, FR, PP, independent living program, resource family recruitment, adoption, and resource family home placement. When working with families, social workers utilize contemporary practices and strategies such as Differential Response (DR), Structured Decision-Making® (SDM), and Child and Family Team meetings (CFTs). Many of the supportive services that families can receive when working with CAPS include substance abuse treatment, counseling, anger management, and parenting classes so parents can provide a safe, healthy, and nurturing home for their children. In addition to the services

provided by CAPS, social workers connect families with other community resources and services to further strengthen the family unit.

CAPS staff include:

1. (2) Program Managers
2. (2) Program Specialists
3. (1) Public Health Nurse
4. (5) CAPS Social Worker Supervisors
5. (1) Supervising Legal Office Assistant
6. (13) CAPS Social Worker IIIs
7. (13) CAPS Social Worker IVs
8. (5) Program Aides
9. (6) Support staff - including legal staff

Again, community partners praised Yuba County staff for their work and dedication to serving children and families. They indicated they work in close collaboration with both CAPS and Probation staff and that it is evident that staff want the best for children, youth and families.

Probation Infrastructure

A deputy probation officer is required to complete the Probation Officer Core Course and training pursuant to Section 832 of the Penal Code (Arrest, Search and Seizure and Firearm Familiarization) within the first year of employment. A deputy probation officer is required to complete an additional 40 hours of training each year. A deputy probation officer assigned to the placement caseload is required to complete a Probation Officer Placement Core Course within two years and a portion of their yearly training must be directly related to placement. The newly assigned placement officer has participated in the Probation Officer Core Course, Probation Officer Placement Core Course, Setting the Stage of Quality Visits, CWS/CMS, and a

variety of other probation related trainings as approved by the California Board of State and Community Corrections.

The Juvenile Division Supervising Deputy Probation Officer (SDPO), who supervises the placement officer, has completed the Probation Officer Core Course, Probation Supervisor Core Course, Probation Officer Placement Core Course, Case Planning for Juveniles, Title IV-E, Motivational Interviewing, Resource Family Approval (RFA) Recruitment and a variety of other probation related trainings as approved by the State of California Board of State and Community Corrections. She has not yet completed the Probation Placement Supervisor Core Course, as she has been the SDPO for placement for less than one year. The SDPO will be attending various CCR trainings and conferences within the next few months.

The Juvenile Division Probation Program Manager has also completed the Probation Officers Core Course, Probation Placement Officer Core Course, Supervisor Placement Core Course, Leading the Commitment to Youth in Placement, CWS/CMS, Concurrent Case Planning, CFT meetings and various CCR trainings and conferences. In addition to trainings, the Probation Program Manager attends the monthly Probation Advisory Committee meeting. These meetings are comprised of probation departments throughout California, the CDSS and U.C. Davis with the main topic being mandates as they pertain to out-of-home placement.

The placement officer has a Bachelor of Science in Criminal Justice and has been employed with Probation since 2016. The SDPO has a Bachelor of Arts in Public Administration and has been employed with Probation since 2001. The Probation Program Manager has a Bachelor of Arts in Social Work and has been employed with Probation since 1996. In addition to supervising the placement caseload, the deputy probation officer is responsible for preparing step-parent adoption reports and juvenile record sealing reports to the Court.

The SDPO is currently responsible for supervising a total of 12 staff; which includes one placement officer, four P.A.S.S. officers (located at Lindhurst High School, Marysville High School, McKenney Intermediate School and Thomas E. Mathews School), one supervision officer, one truant officer, two court officers, one intervention counselor, one substance abuse

counselor and one therapist. Staffing changes have been due to turnover and promotional opportunities. Probation uses an applications (initial), assessment centers (second phase) and interview (final selection) process to ensure the best candidate is selected.

The Placement Unit consists of one placement officer (3 years, Hispanic, position title is Deputy Probation Officer II – base pay is \$4,248.00) and one supervisor (17 years, Caucasian, position title is Supervising Deputy Probation Officer – base pay is \$5,431.00). The Hispanic probation officers are bilingual and are culturally aware of the Hispanic populations. The average caseload is four to six placement cases.

FINANCIAL/MATERIAL RESOURCES

The county's CAPS budget is funded by both federal and state allocations, including but not limited to Title IV-E, Title XIX, CWS Outcome and Improvement Project (CWSOIP), and Foster Parent Recruitment, Retention and Support (FPRRS). In addition, CBCAP funds, CAPIT funds, Children's Trust Funds and PSSF funds, which are leveraged, when appropriate, to increase available services.

CHILD WELFARE/PROBATION OPERATED SERVICES

Probation Juvenile Detention Facilities

The Tri-County Regional Juvenile Rehabilitation Facility (Juvenile Hall) is a Tri-County facility (Yuba, Sutter and Colusa), but the operations and management fall under Yuba County. The juvenile hall is comprised of two buildings; the main facility which has a capacity of 45 minors and the Security Housing Unit (SHU) which has the capacity of 15. The SHU unit is not currently being used due to budget constraints, but has been used to house the more serious offenders. The SHU is a self-contained living unit, which is designed to provide both educational and recreational space. The main facility is composed of two separate units; one section providing secure housing for females and the second, which is divided into four wings, for the housing of males. This facility also contains the booking and receiving areas, as well as a medical clinic. Most detained juveniles in the juvenile hall are awaiting adjudication of a formal matter or are pending Transfer to Adult Court. Some are committed to Juvenile Hall for

extended periods, waiting out-of-home placement or are pending a commitment to the Maxine Singer Youth Guidance Center (MSYGC).

The operations and management for the MSYGC, fall under Yuba County. The facility was built in 2002 and is located next to the Juvenile Hall. The primary objectives of the MSYGC are community protection and the redirection of delinquent behaviors by holding juveniles accountable for their behavior. This is accomplished by programs being provided by a myriad of individuals and organizations. Supervising Juvenile Corrections Counselors and Juvenile Corrections Counselors, Behavioral Health Therapist, Drug and Alcohol Counselors, Intervention Counselors from Sutter and Yuba County Probation Departments, Community Based Organizations, faith-based organizations and volunteers all work together to provide programming to the juvenile. Programs vary in time but range from 30 minutes to two (2) hours in length. The programs are partitioned throughout the week to improve the effectiveness of the programs by ensuring the juveniles have time to fully absorb the content. Youth are typically committed to the MSYGC for a period of 1 year. MSYGC provides services to youth from 10 counties: Yuba, Sutter, Colusa, Placer, Calaveras, Tehama, Santa Cruz, Shasta, Amador, Napa and most recently, Lake.

County-Operated Shelter

Yuba County CAPS does not operate a county shelter. Yuba County CAPS social workers are well aware of the trauma to children who are separated from their families and the detrimental effects of placement disruptions. CAPS is making every effort to lessen the negative effect that abuse, neglect and removal have on children. CAPS seeks to place a child removed from their family first with a non-custodial parent, then with relatives or non-related extended family members (NREFM) and, finally, with resource families.

Social workers ensure children are placed in a safe, stable and nurturing environment. In addition, social workers' complete referrals for children to be assessed and evaluated for trauma by two therapists embedded in the CAPS office to expedite the delivery of mental health services. If children are found to need a higher level of care, the onsite SYBH therapists

will refer children to SYBH's Children's Systems of Care (CSOC) or Youth for Change for further treatment.

County Licensing

During 2016, CAPS hired an additional social worker to complete the Resource Family Approval (RFA) process. The supervisor, RFA social worker and the adoption social workers received training and utilize the RFA Written Directives guidelines to certify resource families.

The county is responsible for:

1. Recruitment;
2. Orientation;
3. Reviewing both the application packet and home site to ensure that both the family and the home are within the guidelines required by Community Care Licensing (CCL) regulations;
4. Criminal background checks;
5. Granting a waiver for past criminal history, if applicable;
6. Notifying the family of their final status: denied or granted;
7. Ensuring that adequate training is available;
8. Tracking the training hours of the foster parents to ensure that they attend sufficient hours of training to meet the minimum standards;
9. Investigating any complaints made against the foster parents and reporting the findings to CCL; and
10. Completing incident reports and forwarding copies to CCL.

CAPS is responsible for implementing, enforcing, and complying with all California state laws, including regulations for the licensing of foster family homes.

County Adoptions

As of July 1, 2013, Yuba County CAPS assumed responsibility for processing adoption cases. Prior to this, the Sacramento District Office of the California Department of Social Services-Adoptions Bureau had provided adoptions services to the county. CAPS has two social workers dedicated to adoptions. 28 children were adopted during 2016, 34 children were adopted during 2017 and 54 children were adopted during 2018.

Yuba County has two dedicated social workers to promote adoptions and provide supportive services to children and youth awaiting adoption. The social workers meet with children and youth to identify potential adoptive parents by identifying family members, friends, and other individuals with whom they have had a relationship. In addition, social workers attend adoption events and other community events to recruit resource families and adoptive families.

Due to the success rate of adoptions during 2017, CAPS was awarded \$83,534.00 through the Adoption and Legal Guardianship Incentive Program for FY 2017/2018. CAPS utilized these funds to support adoptive families by purchasing necessary items for children such as beds, dressers, paint for the adopted children's room, washing machine, and other items to support the adoption.

Yuba County provides direct adoption services with assisting the adoptive parent with completing all the required adoption paperwork, filing the necessary adoption paperwork with the court, completing a new birth certificate, facilitating financial negotiations for AAP, facilitating matching of the adoptive parent with the children, and educating the adoptive family about post adoption services. Post adoptive services are provided through Lilliput Family Services who is contracted through CDSS.

OTHER COUNTY PROGRAMS

Employment Services

The Employment Services Division is committed to assisting individuals in their efforts to become self-sufficient by providing a variety of workforce development programs and supportive services, in addition to administering California Work Opportunity and Responsibility to Kids (CalWORKs) payments. Services include: temporary cash assistance, domestic violence services, job readiness and preparation workshops, learning disability screening, resume writing and job search assistance, mental health counseling, high school diploma and GED classes, job retention services, supportive services (transportation, child care, clothing for employment, etc.), substance abuse treatment, and work experience. In

Yuba County, the Employment Services Division is co-located in the same building as the CAPS division.

CAPS and Employment staff work collaboratively to coordinate supportive services for families working with both divisions. This ensures families are connected with all available services and community resources. This collaborative effort also ensures there aren't any duplicative efforts being done by the divisions. In addition, social workers conduct joint home visits to streamline the communication with families. Employment social workers also participate in CFTs as part of the family's support network and provide input to help develop a family's case plan.

Public Health

Public Health aspires to ensure a strong and healthy community by assessing community needs, promoting healthy lifestyle choices, enhancing the quality of the community through health education, prevention and intervention services, as well as assisting individuals and families in their efforts to become housed and self-sufficient by providing case management and connection to community services. These services include: public health nurse home visiting program, tobacco cessation education, oral health programs, community outreach, fluoride varnish application, birth and death certificates, public health emergency preparedness, California Children's Services (CCS), child injury prevention classes (car seat, bike helmet, life vests), communicable disease investigations, General Assistance Program, case management to vulnerable citizens, CalWORKs Homeless Assistance Program, Social Security Administration advocacy, CalWORKs Housing Support Program (HSP) and the CalWORKs Family Stabilization and Linkages Program. Public Health staff working with CAPS families are also invited to participate in CFTs.

Alcohol and Drug Treatment

Yuba County has multiple substance abuse programs for families to obtain treatment. F.O.R. Families offers an outpatient program, counseling, relapse prevention and other services to support sobriety. SYBH operates the First Steps Perinatal Day Treatment Program, which provides intensive day treatment services to pregnant women and utilizes an evidence-

based curriculum. Additionally, CAPS utilizes Progress House, CoRR and the Salvation Army programs for residential substance abuse treatment.

Mental Health

Sutter Yuba Behavioral Health is a bi-county mental health plan that offers a broad continuum of outpatient behavioral health services. To meet the needs of children and families within the child welfare system, CAPS contracts with SYBH to embed two therapists at the child welfare office to streamline screening and assessment processes and expedite service delivery for children in need of behavioral health services. If children are found to need a higher level of care, such as intensive community based services like In-Home Behavioral Services (IHBS) or Therapeutic Behavioral Services (TBS), the onsite SYBH therapists will refer children to SYBH Youth Services, SYBH Children's System of Care (CSOC), SYBH Transitional Age Youth (TAY) Full Service Partnership (FSP) program, or to Youth for Change, a private non-profit organization contracted with SYBH, for further services. In addition, social workers complete an application for the California Victim's Compensation Program (CalVCP) and submit referrals to Yuba County Victim Services for therapy when appropriate.

Displaced Youth Multidisciplinary Team (DY MDT)

An MOU was signed in June 2017 to develop an MDT, utilizing a collaborative team approach to provide coordinated services and supports to children and youth experiencing homelessness and their families. The team meets weekly and works with the children and youth referred and their families to develop a plan of action to address immediate needs and secure a safe living environment. The goal of the MDT is to link children, youth and their families to housing, counseling, mentoring, educational and other services designed to help families meet basic needs, provide stability and enhance emotional and physical well-being.

Contractors

CAPS contracts and partners with various community and faith-based organizations to provide supportive and preventative services to clients. Services include differential response,

counseling, psychological evaluations, substance abuse treatment, etc. CAPS remains directly in charge of the core CAPS programs such as ER, detention, FM, FR and PP.

Bargaining Units

The local bargaining unit for CAPS social workers is the Yuba County Employees Association (YCEA). Probation officers are represented by Yuba County Probation Peace Officers Association (YCPPOA), which is affiliated with YCEA. The Probation Department's Intervention Counselor, Substance Abuse Counselor and Therapist are represented by Sutter County Employees Association (SCEA). There are no collective bargaining issues that impact the provision of CAPS or Probation services.

State and Federally Mandated Child Welfare/Probation Initiatives

Commercially Sexually Exploited Children (CSEC)

The Yuba County CSEC Multi-Disciplinary Team (MDT) was established upon completion of the County CSEC protocol. Partner and stakeholder agencies include: Sutter Yuba Behavioral Health (SYBH), Yuba County Victim Services, the Yuba County District Attorney, local law enforcement agencies, Yuba County Office of Education (YCOE), Probation and CAPS. The CSEC MDT has a formalized process in place for crisis situations involving at risk children/teens who are believed to have been exploited. Yuba County CSEC MDT can be assembled within 2 hours of a report or suspicion of human trafficking when brought to the attention of CAPS, Probation, SYBH, Victim Services, schools or Law Enforcement. The MDT members worked together to identify roles to ensure this swift and appropriate response to delicate situations. The MDT response to CSEC reports/cases includes an advocate from Victim Services, a multi-disciplinary forensic interview by a trained interviewer, a clinician or other Behavioral Health representative and an investigator from the partner law enforcement agency. Assistance with safe placement, should it be needed, and ongoing supportive services are coordinated to address any needs.

In June 2017, CAPS invited ILP participants to a CSEC awareness training and provided a fifty-dollar gift card as an incentive to those that attended. The training proved to be successful as the youth were engaged throughout the training and many stayed after the training to speak with the instructor. Again, in 2018, members of the CSEC MDT attended a regularly scheduled ILP class to provide ongoing CSEC awareness training to foster youth.

In April 2018, members of the CSEC MDT provided three community awareness workshops that were geared towards youth 10-13 years old accompanied by a parent/guardian, teens 14 and older, parents, educators and other community members. Yuba County Office of Education spearheaded these workshops which were held in two community locations in Marysville and a local middle school in Plumas Lake. The CSEC MDT

members were able to provide specific and detailed data regarding the local area and the importance of CSEC awareness.

Continuum of Care Reform (CCR) and Resource Family Approval (RFA)

To assist with the implementation of the RFA program, CAPS dedicated a supervisor and specific social workers to be trained on the Resource Family approval process. July 2017, Yuba County signed a contract with Binti software to streamline the application process. CAPS also ensured the curriculum for the Foster Kinship Care Education (FKCE) classes was updated with the necessary training materials. In March 2018, the county began utilizing the Foster Parent College (ACIN I-51-17) for those resource families that are unable to attend classes in person due to scheduling conflicts. In addition, CAPS has been focused on recruiting more resource families; brochures have been created and CAPS has attended multiple community outreach events. There is an agreement in place to ensure that the Yuba County Office of Education invites CAPS to back-to-school nights to conduct outreach and recruitment of Resource Families. In regards to the RFA process, the most significant local impact has been in the increase in relative and NREFM caregivers. Yuba County CAPS has not seen as significant of an increase in recruitment of non-related caregivers but nonetheless, there was an increase in the number of local county homes. Utilizing Binti for RFA recruitment has been very advantageous as it has significantly streamlined the county's application process. Additionally, Binti has been a strong partner, making helpful adjustments to the system/process based on the RFA Social Worker's feedback.

Yuba County has created a specialized position within Child Welfare-Placement Coordinator which is a social worker who is solely tasked with coordinating placement searches for children/youth, which benefits a more proactive and well-planned placement strategy. In the past, CAPS had instances where placements may not have been a good fit and that dedicated time and effort to proactively plan visits was lacking. This may have had an impact on increased placement instability. The other benefit of having a dedicated placement coordinator is that this person attends CFT meetings, becoming familiar with children/youth, local resource families and their strengths, experience, etc. Additionally, this coordinator is able to practice child-specific outreach to existing resource families. The same goes for

attempts to access congregate care/STRTPs when necessary- social workers often had to submit dozens of requests attempting to find a placement and again weren't always able to secure placements based on what was the best fit, particularly when 7-day notices are involved. The placement coordinator becomes part of the Child and Family Team and an additional resource to the case carrying Social Worker and CAPS has seen a tremendous benefit investing in this role.

Yuba County has made significant strides in reducing the use of congregate care. There are likely a variety of local efforts that are contributing to the successful reduction in the use of congregate care including, but not limited to, making concerted efforts to better match children/youth in placements based on the child/youth's needs, the make-up of the resource family, access to services, education needs, etc. When staff are more proactive about identifying the placements that are a good fit rather than just a placement, there is increased placement stability.

CAPS and Probation has had a monthly placement review committee meeting for approximately five years and is known as SuperCAT. This group is comprised of Child Welfare, Probation, Behavioral Health, Community Based Organizations (contracted BH providers, CFT/CANS provider), Regional Center (when applicable) and local education partners (County Office of Education and local school districts) to review both probation and child welfare youth in congregate care. With the implementation of CCR, the minimum review frequency for each child was increased to every other month. Each youth in congregate care is reviewed with the team every other month and then monthly when they are within 90 days of transition. This team has been instrumental in identifying opportunities for less restrictive placement such as home-based settings and in identifying and securing the resources needed to successfully transition youth out of congregate care. The team utilizes a standardized review form that helps formalize the review process and is targeted to explore what the child/youth (and family) need to transition out of congregate care. CAPS and Probation find that staff are feeling empowered to come to this team with more creative solutions and leadership is more willing to consider out of the box solutions than they have been in the past.

Yuba County CAPS and Probation have contracted with Victor Community Support Services (VCSS) to facilitate Child and Family Team (CFT) meetings, a requirement under

Continuum of Care Reform (CCR). VCSS provides a Family Advocate and a CFT Facilitator. The Family Advocate is responsible for processing CFT referrals from probation officers and social workers; completing a connection map with youth, probation officer or social worker; conducting family finding efforts; engaging natural support for the youth; and setting up CFT meetings. The facilitator coordinates with the family advocate to schedule CFTs; conducts initial and follow-up CFTs; and completes the CFT Meeting Success Plan. On a monthly basis, the family advocate, facilitator and their immediate supervisor from VCSS meet with Yuba County Probation and CAPS program managers and supervisors to discuss progress and any needed changes. The Sutter-Yuba Behavioral Health Clinical Program Manager of Youth and Family Services or designee also attends the meetings for input regarding mental health services.

In addition to VCSS' family-finding efforts, the Probation placement officer continues to utilize internet search engines to attempt to locate additional family members of the youth or additional persons the youth feels are significant and could serve as a lifelong connection. The placement officer has located and connected with biological parents and family members the youth did not know existed. It is hoped that during this process, the youth will have a permanent living arrangement upon exiting foster care. The CFT process has been integral on many levels and has been particularly impactful regarding placement, as we have found natural supports who have expressed interest in becoming a child-specific Resource Family for child (i.e. a teacher or other school staff, group home staff) and some of these have eventually become stable placements for children/youth. Effective CFT implementation has contributed significantly to efforts in reducing the use of congregate care.

Pathways to Mental Health (Katie A.)

CAPS and SYBH have partnered together to ensure children and youth have access to the services needed to stabilize their mental health and their placements. A Katie A. referral form has been in place for several years and staff are trained to ensure Katie A. requirements are met. CAPS management and SYBH continue to meet quarterly to work collaboratively to meet the needs of foster children who meet the medical necessity criteria and for subclass members.

CAPS continues to expand and strengthen their collaborative partnership with Behavioral Health. CAPS has a long standing history of partnering well with Behavioral Health and the recent onboarding of a new child welfare director with extensive behavioral health experience has been helpful in these expanding these efforts, as having in depth knowledge of BH services and opportunities to access and embed these services within child welfare has proved advantageous. One of the projects implemented in this area include embedding behavioral health therapists within the child welfare division and having those staff serve as the single point of screening/assessment for child welfare youth needing specialty mental health services. CAPS is in the process of expanding the current contract with BH to add an additional therapist to provide SMHS to foster youth. Behavioral Health has been concurrently working to expand and improve access to community-based behavioral health services including Full Service Partnership (FSP) services, Therapeutic Behavioral Services (TBS), In Home Behavioral Services (IHBS), and Intensive Care Coordination (ICC). Quick access to high-quality community-based BH services has been helpful in keeping children and youth in home-based settings and reducing the need for congregate care.

AB 12

The Yuba County Probation Department currently has 11 youth participating in extended foster care services. The placement officer has assisted youth in locating an appropriate residence during the transition process; all of which have included various types of residences such as resource family homes, Transitional Housing Plus + Foster Care program (THP+FC), and a Supervised Independent Living Program (SILP). Despite the Probation Department's low number of youth participating in this program, the probation officer has had the opportunity to work with youth on all supportive services that THP+FC and SILP have to offer. As a result, the Probation Department composed an extended foster care manual as a reference tool.

During 2017/2018, CAPS had an average of 42 participants in extended foster care services. A dedicated social worker assists youth in locating a residence during the transition process which includes resource family homes, THP+FC, and a SILP. In addition, Yuba County utilizes the Youth Empowerment Strategies for Success (YESS) program that incorporates

community training in the areas of education, employment, life skills and financial literacy. This program allows youth to obtain skills through field trips and retreats conducted in the community where they are able to complete hands on training in nutritional cooking, personal hygiene, banking, job searches, resume writing, housing applications, college applications, and computer skills.

Federal Case Review

The Child and Family Services Review (CFSR) focuses on identifying CAPS' efforts to engage children and parents in case planning and services by reviewing case files, interviewing biological parents, foster parents, previous placement caregivers and other collateral contacts including service providers. Initial case reviews were completed on cases for multiple quarters and submitted for quality assurance (QA) review. In past years, there were various staffing changes which created barriers for completing a full case review. During 2017, a social worker was appointed to this position full time, completed the required training and assumed responsibility for federal case review duties for Federal Fiscal Year 2017/2018. A total of nine cases have been reviewed during the first two quarters of FY 2017/2018. Since that time, the Federal Case Review social worker has worked diligently to ensure all state-assigned cases are reviewed quarterly and when the assigned case doesn't meet the qualifications, the social worker follows state directives in requesting an exemption and a replacement case for review. QA duties have been assigned to a program specialist in the CAPS division.

Probation

Yuba County CAPS and Probation have contracted with Victor Community Support Services (VCSS) to facilitate CFTs which are a requirement under the Continuum of Care Reform. VCSS provides a family advocate and a CFT facilitator. The family advocate is responsible for processing CFT referrals from probation officers and social workers; completing a connection map with youth, probation officer or social worker; conducting family-finding efforts; engaging natural support for the youth; and setting up CFT meetings. The facilitator coordinates with the family advocate to schedule CFTs; conducts initial and follow-up CFTs; and completes the CFT Meeting Success Plan. On a monthly basis, the family advocate,

facilitator and their immediate supervisor from VCSS meet with Yuba County Probation and CAPS program managers and supervisors to discuss progress and any needed changes. The Sutter-Yuba Behavioral Health Clinical Program Manager of Youth and Family Services or delegate also attends the meetings for input regarding mental health services.

In addition to VCSS' efforts in family finding, the placement officer continues to utilize internet search engines to attempt to locate additional family members of the youth or additional persons the youth feels are significant and could serve as a lifelong connection. This has been extremely beneficial and rewarding to the youth. The placement officer has located and connected with biological parents and family members the youth did not know existed. It is hoped that during this process, the youth will have a permanent living arrangement upon exiting foster care. The placement officer intends on contacting CAPS' adoptions social worker at the onset of the youth entering foster care. The placement officer, and the Probation Department as a whole, is not accustomed to having 602 Welfare and Institutions (W&I) Code youth adopted. Therefore, it will be requested that a training session be provided in order to begin referring youth for adoption services.

A number of Probation staff have participated in the Strengthening Families Program training provided by SYBH. The intent of training probation staff is to begin providing the Strengthening Families Program within the Probation Department. Offering this program to youth and their families will enhance their relationships and promote a successful reunification.

The Probation Department utilized a portion of the CWS Outcome Improvement Augmentation allocation to purchase gift cards for local restaurants and the theater for utilization during home visits. This encouraged the family to participate in pro-social activities together. In doing this, the family was able to spend quality time together, which involved communication and bonding during meals. These activities were vital to successful reunification with family. In addition to family pro-social activities, the allocation has paid for a membership at YMCA for a youth who resides out of the area and is unable to return to his mother's care. The remaining allocation money was utilized to purchase gift cards at gas, clothing and household item stores. These gift cards are utilized to purchase clothing and

shoes for youth entering foster care that had very little clothing. The youth would often arrive with clothing that did not fit or was not suitable (torn, stained, etc.). The placement officer often took youth shopping in order to obtain appropriate clothing and helped teach them how to budget money. The clothing purchased was also often used for court appearances and/or employment interviews. Having access to clothing would also prepare the youth for establishing a relationship with professional mentors. The youth gained more confidence in wearing quality and professional clothing. The Probation Department purchases household items or furniture at other stores for youth who are transitioning into adulthood. The allocation has also been used to pay for hotel rooms to assist parents in visiting their children.

The placement officer encouraged families to be an active participant in the youth's education. The placement officer ensured families were aware of the youth's needs and their successes. The Probation Department utilized a portion of the CWS Outcome Improvement Augmentation allocation to purchase gas cards. The gas cards assisted families with traveling to the placement facility/school (often out of the local area) to attend Individualized Education Plan (IEP) meetings or other equally important school meetings. Engaging the youth's family in their child's education was extremely important and beneficial to the youth's success in school. The youth felt supported by their family and were excited to share their achievements.

The placement officer has contacted various foster family agencies (FFAs) regarding the recruitment of 602 W&I Code resource family homes. During these conversations, the placement officer has established relationships that resulted in minors being placed in resource family homes. Although the resource family homes were not primarily 602 W&I Code, they were accommodated to meet the minor's needs. Additionally, the placement officer is an active participant in the Foster Youth Advisory meeting and the BRC. During both of these meetings, the placement officer has had the opportunity to continue advocacy for 602 W&I Code resource family homes. The Juvenile Unit Supervisor and the Placement Officer have attended resource family recruitment trainings and have discussed future recruitment activity ideas with Sutter County Probation and the possibility of partnering and sharing resources for 602 W&I foster youth.

The placement officer regularly monitors the youth's participation and progress in the Independent Living Program (ILP). Additionally, the placement officer has regular contact with the ILP coordinator and receives progress reports. These progress reports are discussed monthly with the youth and often with the youth's parents.

Board of Supervisors (BOS) Designated Commission, Board of Bodies

THE BOS-DESIGNATED PUBLIC AGENCY

CAPIT/CBCAP/PSSF Funding

YCHHSD is the BOS designated agency to administer the CAPIT, CBCAP and PSSF programs. Yuba County Children's Council (CAPC) partners with YCHHSD to provide recommendations for community prevention programs and outreach materials for how funds should be spent. The CAPIT/CBCAP/PSSF allocated funds that are received and held in the County Children's Trust Fund are to be used to support community based organizations.

CAPIT and CBCAP Funds

The CAPIT and CBCAP funds are used to provide prevention services for DR activities initiated by CAPS. CAPS recognizes that in order to accomplish and maintain the mission of reducing the recurrence of maltreatment, CAPS had to continue to develop and sustain services that allow families to access preventive and supportive services before potential risk to child safety escalates to a level warranting CAPS intervention. Therefore, CAPS expanded and fully implemented a DR program in November 2011 to include Path I and Path II responses. CAPS, through the Request for Proposal (RFP) process, selected GraceSource, Inc. to provide services, and developed and executed a contract that was approved by both the BOS and the Yuba County Children's Wellness and Child Abuse Prevention Council (YCCW/CAPC) before the contract was implemented.

In February 2015, another RFP process was completed and GraceSource, Inc. was selected/contracted to provide DR services from July 2016 through June 2018. In February 2018, YCHHSD and YCCW/CAPC reviewed expectations for a successful DR program, reviewed GraceSource, Inc.'s engagement and success rates and decided to issue an RFP for the 2018-2021 contract period. The success of the DR program with GraceSource, Inc. had been dismal from CAPS' last 2013 CSA report through the end of the contract. During FY 2016/2017:

- 204 families were referred to GraceSource, Inc. for DR services;

- 154 families declined DR services;
- 50 families accepted DR services.

A CAPS Social Worker had been located at the GraceSource, Inc. office to provide coaching and assistance with DR referrals. In early 2017, the CAPS social worker's onsite hours were reduced and support was primarily provided through weekly meetings at YCHHSD. GraceSource, Inc. believed participation rates decreased due to the CAPS social worker no longer assisting them with home visits and encouraging families to participate in DR services. In addition, the majority of families that agreed to DR services did not follow through, which attributed to the low success rate. Yuba County believed GraceSource, Inc. struggled with engaging families and needed to improve their skills in family engagement. To further improve participation, \$10.00 gift cards and transportation assistance were utilized as incentives for families to participate; however, this did not improve DR participation rates. During the course of the contract with GraceSource, Inc., which expired in June 2018, Yuba County and YCCW/CAPC continued to discuss approaches to further engage families and improve participation rates. The RFP process was completed in 2018 and a new Differential Response provider was selected.

PSSF Funds

Parenting classes are contracted with YCOE. The programs are open to CAPS and non-CAPS involved parents/caregivers. Childcare and a nutritional meal/snack are provided. A total of five series per year are offered, based on identified need.

- Parenting with Positive Discipline is an 8-week parenting series, focused on children ages 0-5 years old. The Positive Discipline curriculum provides information and strategies to understand and support children's growth and learning patterns.
- Loving Solutions is a 10-12-week parenting series focused on children ages 5-10 years old. The Loving Solutions curriculum includes improving concrete solutions for challenging behaviors; learning to never argue with your child again; stopping unwanted behaviors; and improving school performance.

- Parent Project is a 12-week parenting series focused on children 10-18 years old. The Parent Project curriculum includes empowering parents and transforming teens and tools to strengthen the family unit and increase parent involvement.

Structured Family Visitation Program

The parent education curriculum works in conjunction with the county's Structured Family Visitation (SFV) program. The SFV program is conducted primarily in the state of the art CAPS Visitation Center located in the CAPS office. The CAPS Visitation Center provides a home-like setting that includes toys and games, comfortable furnishings, an outdoor children's playground, activities, and use of a fully operational kitchen for meal preparation.

A visitation plan is developed jointly with the visitation social worker and parents, identifying the strengths and needs of each parent, and outlines skill areas the family wants to work on during the visits. The visitation social worker and program aides coach parents with the skills gained from parenting classes so parents have the ability to practice the skills they've learned with their children while visiting. Each visit is structured with a parent-child activity such as reading a story, doing homework, working on art projects, or cooking meals. During these activities, visitation staff observe parents with their children and provide guidance on parenting techniques if needed.

To further improve the Structured Family Visitation program, a visitation social worker was assigned in April 2017. The social worker meets with each family to review visitation rules, establish clear expectations and develop strength-based visitation goals. The social worker completes assessments which are reviewed with the case carrying social worker and can be utilized in court reports and during CFTs. In addition, the visitation social worker has been creating a parenting toolbox for parents to utilize for parenting tips, life skills and community resources. The visitation social worker has provided a structured environment to ensure families have a quality visit in a homelike environment while they work towards reunifying.

CAPIT/CBCAP/PSSF Fund Usage Reporting

CAPIT/CBCAP/PSSF program information is gathered, stored and disseminated using spreadsheets for the YCCW/CAPC. Contractors are required to conduct client satisfaction surveys designed to track attendance, satisfaction, and to determine if participants felt comfortable with the service and found it beneficial. Contractors are required to submit summaries of client satisfaction surveys at six-month intervals to the YCHHSD county liaison. Contractors submit monthly reports and invoices that are carefully reviewed for accountability, grant compliance, and data collection. Communication continues between the contractor and the YCHHSD county liaison on a regular basis via the telephone and in-person which allows both parties to clarify grant compliance and adjust services as appropriate.

The county liaison and CAPS program manager are responsible for monitoring the CAPIT/CBCAP contractor. Grant compliance, data collection, and budget expenditures are monitored via the subcontractor's monthly reports and invoices. The invoices are logged monthly on a spreadsheet to track expenditures. Contractors are required to attend a monthly CAPC meeting and provide updates on their programs, report on successes they are having within the community and any barriers they may be facing. If the contractor should fall out of compliance with the terms of the contract, YCHHSD will engage the contractor in an interactive process to advise the contractor about the discrepancies. YCHHSD will document the actions that need to be taken with appropriate time frames for the corrections to take place.

YCHHSD consistently monitors attendance and participation rates in parenting classes. Success outcomes (short, medium, and long-term) are monitored through FR rates and recurrence rates. A satisfaction survey is administered to each new participant to assist in the collection of demographics for reporting purposes and PSSF data collection requirements.

CHILD ABUSE PREVENTION COUNCIL (CAPC)

Since 2003, the Yuba County Children's Wellness and Child Abuse Prevention Council (YCCW/CAPC) has been recognized as the local CAPC by the Yuba County BOS (Resolution No. 2003-06) and is established as an independent organization within the county government. The YCCW/CAPC serves as a policy and advisory body to the Yuba County BOS and simultaneously serves as the executive CAPC for Yuba County.

YCCW/CAPC is comprised of members from local agencies such as:

- **Behavioral Health/Substance Abuse:** 2019 Council Chair – John Floe, Sutter-Yuba Behavioral Health
- **2019 Council Vice Chair:** Jason Roper, Yuba County Probation/Victim Services
- **Education:** Francisco Reveles, Yuba County Office of Education
- **Criminal Justice/Law Enforcement:** Jim Arnold, Yuba County Probation
- **Education & Early Care:** Ericka Summers, First 5 Yuba
- **Employment/Training:** Caron Job, Yuba County Office of Education/Regional Career Center
- **Community Governance:** Gary Bradford, Yuba County Board of Supervisors
- **Social Services:** Karleen Jakowski, Yuba County Health and Human Services Department
- **Health:** Greg Stone, Peach Tree Health
- **Faith Based Community:** Rev. Berni Fricke, Faith Lutheran Church
- **Community Based Organizations:** Cathy LeBlanc, Camptonville Community Partnership, Inc.
- **Community Representation:** George Siler, Youth for Change

Recommendations for voluntary appointment to the policy group emanate from the members of the various functional groups with the concurrence of the individual recommended for appointment. The purpose of the council is to provide a forum for reviewing and reporting on the status of children and families in Yuba County and planning on issues related to children and families in Yuba County. Additionally, the council coordinates policies and programs that impact the county's children and families; develops recommendations for the consideration of any or all of the governmental agencies whose scope of governing impacts the children of Yuba County. Lastly, the council collaborates to find and obtain funding resources for programs that benefit children and families who reside in Yuba County.

COUNTY CHILDREN'S TRUST FUND COMMISSION, BOARD OR COUNCIL

The YCCW/CAPC, as described above, is also the designated Child Abuse Trust Fund Commission for the distribution of child prevention funds by making recommendations about the Children's Trust Fund. Prevention materials for community outreach events are purchased with CCTF allocations. In addition, funds are used to assist with transportation for Family Resource Center participants who may experience transportation barriers to accessing

education resources, medical services, and other needed services/resources. All funds spent are noted in YCCW/CAPC meeting minutes. Yuba County's entire allocation of CBCAP is deposited into the CCTF. CAPS collects surveys and participation rates from contracted service providers to track the success of the programs. Surveys are collected annually and participation rates are collected monthly. The information is not currently published however HHSD will be implementing a mid-year check-in with the BOS to show how funds are being utilized which will then be published on the Yuba County website.

PSSF COLLABORATIVE

In order to meet the PSSF collaborative requirement, Yuba County uses the in YCCW/CAPC as its planning body. The BOS has designated the YCHHSD to oversee the distribution of the federal PSSF funds. The primary goals of PSSF are to help families alleviate crises that might lead to out-of-home placement; maintain the safety of children in their own home; support families preparing to reunify and adopt; and assist families in obtaining multiple needs. The funds are being used for providing parent education classes using the Positive Discipline, Loving Solutions, and Parent Project programs. In addition, PSSF funds part of the SFV Program.

Systemic Factors

MANAGEMENT INFORMATION SYSTEMS

Child Welfare Services/Case Management System (CWS/CMS)

Yuba County CAPS utilizes all sections of the CWS/CMS to include Referral/Case Management, Client Management, Placement Management, Service Management, and Court Management sections. However, there are some areas that are not utilized to their fullest capabilities. Examples of these areas include:

1. Health & Education Passport (Client Management Section): CAPS has a dedicated PHN that enters data into the Health & Education Notebooks. Accuracy of data for the Adoption and Foster Care Analysis and Reporting System (AFCARS) has been a challenge due to social workers not being certain of qualifying disability conditions for this tracking field. CWS/CMS will be updating the system in the near future to streamline this data entry and ensure more accurate, data compliant entries.
2. Placement Home Notebook (Placement Management Section): Placement home characteristics are not consistently entered for all types of homes. This lack of data entry inhibits use of the placement match functionality in CWS/CMS.
3. Associated Services Page, Contact Notebook (Service Management Section): Users do not consistently record services provided to clients.

For 2 and 3, competing workload demands is the reason for the underutilization. Social workers focus on meeting minimum mandatory data entry requirements so they have more time to work with their families.

CWS/CMS data is available to all CAPS staff within Yuba County. The data contained within CWS/CMS is vital in carrying out the agency's responsibilities. Staff uses the information to assess potential level of risk at the time referrals are received. The information is also used by staff to assess services that have been, and/or need to be, provided to clients when performing case planning activities and preparing court reports. Supervisory staff uses the data contained within CWS/CMS to review referral/case activities to ensure that appropriate

services are being provided to clients and that these services are being provided as outlined in Division 31 Regulations and the W&I Code. Management uses CWS/CMS data to monitor outcomes through monthly Quality Assurance Reviews (QARs) and to provide statistics to various outside agencies.

Structured Decision Making (SDM)

SDM is an approach to child protective services that uses clearly defined and consistently applied decision-making criteria for assessing safety and risk in child abuse and neglect referrals and cases at key decision points. Child and family needs and strengths are identified and considered in developing and monitoring progress toward a case plan. Human services agencies face a growing dilemma of providing services with limited public resources in a climate of increasing demand for those services. The National Council on Crime and Delinquency (NCCD) and the Children's Research Center (CRC) work with state and county agencies to implement SDM systems to provide workers with simple, objective, and reliable tools with which to make the best possible decisions for individual cases, and to provide managers with information for improved planning, evaluation, and resource allocation. The principle behind the SDM system is that decisions can be improved by the following:

- Clearly defined and consistently applied decision-making criteria.
- Readily measurable practice standards, with expectations of staff clearly identified and reinforced.
- Assessment results directly affecting case and agency decision making.

Currently, child welfare agencies are hard-pressed to respond effectively to an increasing and complex volume of cases. The results have included burdensome workloads, high staff turnover, children falling through cracks in the system, frequent media exposés resulting from child deaths and lawsuits, increased concerns over worker and agency liability, and a continuous search for new strategies and resources to address the burgeoning problem. How child welfare decisions are made and how agency resources are utilized are the key issues addressed by the SDM model. The components of SDM for child protective services are as follows:

- Screening criteria tool to determine whether or not the report meets agency criteria for investigations.
- Response Priority Tool, which helps determine how soon to initiate the investigation.
- Safety Assessment for identifying immediate threatened harm to a child.
- Risk Assessment based on research, which estimates the risk of future abuse or neglect.
- Child Strengths and Needs Assessment (CSNA) for identifying each child's major needs and establishing a service plan.
- Family Strengths and Needs Assessment (FSNA) to help determine a family's level of service and guide the case plan process.
- Case planning and services standards to differentiate levels of service for opened cases.
- Case reassessment tools to ensure that ongoing treatment is appropriate.

The hotline tool is utilized consistently however other parts of SDM are not used consistently due to the competing demands of the social workers' workloads. CAPS recognizes the value of SDM and will be focusing on revitalizing the usage of all aspects of the SDM tool while strengthening SOP practice.

SafeMeasures

SafeMeasures improves outcomes by giving managers, program specialists, supervisors, and social workers the most up-to-date performance indicators at regional, agency, unit, and caseload levels. Using any desktop computer with a web browser, the entire agency can track compliance with hundreds of quality measures in just seconds. By monitoring key activities proactively, SafeMeasures helps the team spend more time on what it does best: strengthening families and promoting safety and well-being.

Supervisors and program specialists utilize SafeMeasures consistently to monitor the division's caseloads however there is a challenge with many social workers not having a set routine to monitor their caseload independently. Although, it is clearly evident that the social workers that do consistently utilize SafeMeasures have proven to have higher levels of compliance with their caseloads.

Business Intelligence

In addition to SafeMeasures, Business Intelligence is used to extract data from CWS/CMS for statistical purposes, to identify trends, and to provide detailed data regarding certain outcome measures. Ad hoc report requests can be submitted to the Program Specialist. In addition, the Program Specialist produces specified reports on a monthly and/or weekly basis. These reports are used as tools by staff to help ensure compliance with mandated requirements.

Binti

Yuba County is contracting with Binti to utilize a software program to record/track data regarding the Resource Family Approval (RFA) process. This program contains the functionality for resource family applications to completed and submitted online, including supporting documentation. In addition, Binti contains the functionality for Yuba College, contracted to provide the required Resource Family approval training, to submit training data for RFA applications. Lastly, Binti enables CAPS staff to monitor the application process for RFA applicants and to run reports to determine trends and identify potential issues with the county's RFA application process.

Probation

The Juvenile Probation Department utilizes the CWS/CMS to obtain information for intakes, detention and dispositional reports. The placement officer is responsible for inputting data in CWS/CMS for youth in out-of-home placement. Probation has its own computer system (JALAN) to track data and for case management.

In addition to the JALAN computer system, the Probation Department utilizes contracts with Noble Software Group and utilizes the Positive Achievement Change Tool (PACT), which is an evidence-based practice assessment tool. The PACT consists of 12 domains which include areas such as Criminal Referrals, Mental Health, Attitude/Behavior Indicators, School History, Use of Free Time, Employment History, History of Relationships, Family History, Living Arrangements, Alcohol and Drug, and Aggression and Skills. The PACT is utilized to assess a minor's criminogenic needs and develop case plans to address those needs. A PACT is completed on all minors referred to the Probation Department. Once services are established,

a reassessment is conducted every six months or when a major change in circumstances occurs (additional arrests, death in the family, divorce in the family, etc.). All PACTs are reviewed with the minor and their parents in attempt to provide the most appropriate services.

There are some barriers to maintaining CWS/CMS within the probation department. Each CWS/CMS user is only able to access the system via a token and on a computer that has the system downloaded. Additionally, CWS/CMS is not integrated with JALAN or Noble. This ultimately creates triple the workload for the placement officer. Additionally, due to the low number of youth in placement, there are no outcome data measures collected.

CASE REVIEW SYSTEM

Structure of the County Juvenile Court

The presiding Juvenile Court Judge hears, by assignment, both §300 W&I Code Dependency and §602 W&I Code Delinquency matters. Having the Judge hear both §300 and §602 W&I Code Dependency and Delinquency matters is a beneficial structure, as it allows the Judge to hear all cases so that she has a clear understanding and view of the totality of the Juvenile Court in Yuba County. The working relationship between Probation, CAPS and the Court is collaborative, positive and effective. There have been significant strides made to improve and open lines of communication, which has strengthened the collaboration between the agencies.

Timely Notification of Review Hearings

CAPS and probation are responsible to provide notifications for court hearings. CAPS complies with the notification requirements in W&I Codes §290.1 through §297, which specifies notice of hearings timelines and procedures. Legal office assistants assist in this process by completing the written notices and sending them to all entitled parties which includes parents, caregivers, children over the age of 10, attorneys and tribes. The case managing social worker is required to ask at the time of detention if the child has potential Native American ancestry. If the parent/child is enrolled and/or eligible with a federally recognized tribe, they are required to complete the required ICWA forms and submit to the

juvenile court. The ICWA-20 form is completed and signed by the parent who indicates potential Native American ancestry. Once identified, the tribe is contacted immediately and the ICWA-30 is completed so that tribes can research the family history. The social worker gathers all facts and documentation and ICWA documents are filed with the court. HHSD's Legal Office Assistants send all required notices to the appropriate and entitled parties.

Periodic Review Hearings and Timelines

Each child's case must be reviewed by the court at least every six months. Continuances are requested in a court of law when attorneys need more time to review a case. Due to requests for continuances, CAPS has a difficult time meeting the statutory timeframes of ensuring each case is reviewed every six months. Continuances also impact timelines for permanency. Under the correct statute, the court has every right to grant a continuance. When a continuance is granted, CAPS makes every effort to address concerns with the court to ensure permanency is established (i.e. if it is a Family Reunification case but parents are not participating). The Blue Ribbon Commission (BRC) is utilized to collaborate to focus on continuous quality improvement of the court process which, in turn, improves outcomes for children and families.

The Judicial Council liaison reviewed the findings and orders used and identified that Yuba County does well with court documents and timelines. CAPS provides each social worker with desktop access to the necessary findings and orders so that they are able to be inserted into the status review reports. Furthermore, CAPS continually reviews the language in applicable laws and regulations via ACLs/ACINs and adjusts accordingly. A liaison with Judicial Council conducts periodic reviews to provide guidance and ensures that CAPS is in compliance with the law. In order to ensure timely reviews and proper findings and orders, the Judicial Council liaison recently suggested that the court order the next status review two weeks earlier than the due date. This recommendation would ensure that CAPS meets the statutory timeframes and timeliness to permanency.

Termination of Parental Rights for Children in Care 15 of Last 22 Months

It is a requirement to discuss concurrent planning in CFT meetings. Parental rights are terminated in a timely matter in order to secure permanency for a child. When terminating parental rights (TPR), the age of the child is taken into consideration. In California, the court will not terminate parental rights over the objection of a child age 12 or older unless the court finds the child lacks the mental capacity or maturity to decide. Children (or the relatives caring for them) may not opt for adoption in hopes that they will one day be able to reunify. In addition, there can be a delay in the process as TPR will not be considered until an adoptive family has been identified. Some placements may have difficulty with a best-fit as there may be specialized care needs due to complex health and/or behavioral issues. If the child has significant behavior issues, then TPR may not occur or would not occur until an adoptive home is secured.

Yuba County facilitates the adoptions process which ensures that TPR is timely. Having adoptions in house allows for open communication between the adoption social worker and the ongoing social worker. In addition, it has streamlined the process, assisted in permanent planning for the child, and has allowed for more frequent case staffing when needed. Adoptions staffing occurs once per month so that the social workers have an idea of which child or sibling group may not reunify with the parents, and potentially would be in need of adoption. This case staffing gives the adoption social worker advanced notice to start the process so they are not behind if the parents are unable to reunify.

Barriers and Challenges of the Case Review System

The following recommendations were made in the 2018 Administrative Office of the Courts Administrative Review:

- Ensure that all findings required by state law and Rules of Court are made; these include findings and orders related to case plans, the child's education and important individuals.
- Use the recommended findings and orders when a child is returned home.
- Use the date of the child's scheduled permanency hearing as the likely date that the child will be returned home or another permanent plan will be selected.

- Ensure the required supportive findings are made when continuing reunification services beyond the 12-Month Review.
- Ensure that Transitional Independent Living Plans (TILPs) are submitted to the Court for children 14 years of age and older and include activities for the youth to transition to adulthood.

Yuba County CAPS' 2018 Judicial Council review showed that CAPS is in compliance with court related statutes and in meeting Title IV-E mandates. To ensure all aspects of a court hearing are addressed, the division has created templates for social workers to access findings and orders for each type of hearing in the juvenile court process from their computer desktops. In addition, the juvenile court is very conscientious to ensure timely findings are made in compliance with Title IV-E funding.

Efforts to Support Relationship between Child Welfare/Probation and the Juvenile Court

The Juvenile Court Judge, Probation supervisor and/or program manager, CAPS program manager, Deputy Director of Health and Human Services, Behavioral Health program manager, representatives from local Foster Family Agencies, County Counsel, attorneys for parents and children, YCOE, and multiple other educational entities and community based organizations participate in the local Blue Ribbon Commission (BRC) on Children in Foster Care. Although the California BRC ended in May 2014, Yuba County chose to continue the local BRC because of the benefits of the collaboration. The values of the BRC include: collaboration, shared responsibility, accountability, leadership, children and families, child safety, inclusion, permanency and youth voice. The BRC seeks to achieve the following outcomes as a result of its work:

- A comprehensive set of viable recommendations for how courts and their partners can improve child welfare outcomes;
- Improved court performance and accountability between courts and child welfare agencies and others that will support ongoing efforts;
- Improved collaboration and communication between courts, child welfare agencies, and others; and
- Increased awareness of the role of the courts in the foster care system.

Local benefits of ongoing participation in the BRC have included:

- Improved relationships and collaboration between the Court, Behavioral Health, Foster Family Agencies, educational entities, Probation, CAPS and community based organizations.
- Forum to discuss new service programs, provide policy and program clarifications and discuss changes in code or regulation.

Dual Jurisdiction Youth

Yuba County does not practice dual jurisdiction. CAPS and Probation's primary goals are to serve in the best interest of the child and the protection of society. CAPS and Probation have a collaborative approach to youth who fall under the provisions of Welfare and Institution Code 241.1. A cross-department assessment of the youth is utilized to determine which department is best able and appropriate to serve the youth. The departments seek the least restrictive level of care to meet the needs of the youth, family and community safety. Depending on outcome of the assessments, only one of the departments will assume responsibility.

General Case Planning and Review

Parent-Child-Youth Participation in Case Planning

Yuba County utilizes Child and Family Teaming to involve the parents and children (if age appropriate) in the case planning process, as well as to address placement needs. CAPS and Probation contract with VCSS to serve as family advocates, facilitate CFT meetings, provide parent partner services, and conduct family finding activities. VCSS coordinates meetings to ensure a neutral location for all participants of the CFT meeting. During CFTs, past harm and danger is identified which explores the reasons the family is participating in services with CAPS, areas of concern, strengths of the family, and support networks. In addition to the family being active participants in the development of the case plan, concurrent planning is also addressed with the family in the event reunification does not occur. This includes identifying any and all contact information of relatives and friends that may be able to become a resource family for the child. At the end of the CFT, all participants sign a copy of the developed case plan and are provided a copy of the signed document.

CAPS

All children in open cases are screened utilizing developmental and mental health screening tools that are used to identify need for services. Through collaboration and multidisciplinary team meetings such as YCAT, SuperCAT, and CFTs, information sharing and identification of appropriate services and service providers is accomplished. Youth for Change and Sutter Yuba Behavioral Health (SYBH) provide a wide array of clinic and home-based services and supports to children, youth and their families. Services are available to children and youth who are experiencing significant emotional, psychological or behavioral problems that are interfering with their well-being, and their families.

The Child and Adult Protective Services (CAPS) Public Health Nurse (PHN) completes a developmental screening for all children 0-5 years old using the Ages and Stages Questionnaire (ASQ) screening tool. The Case Managing Social Worker (CMSW) will screen all children ages 0-17 for mental health needs by completing the Mental Health Screening Tool (MHST). All children and youth who screen positive are referred for a full mental health assessment. The SYBH therapist embedded within HHSD assesses all children referred to determine the appropriate level of care using the Child and Adolescent Level of Care Utilization System (CALOCUS). Depending on level of need, the child or youth will be offered outpatient behavioral health services at the embedded clinic at Yuba County HHSD or at Sutter Yuba Behavioral Health. Children and youth who are in need of a higher level of care are referred to Youth for Change which provides intensive, community based behavioral health services, including Full Service Partnership (FSP) services.

Social workers also utilize monthly visits to monitor the progress of plans and maintain frequent contact with foster youth, parents and resource families to address any needs that may arise during the life of the case. In addition, the six-month CFT is utilized to reassess any needs that may need to be addressed for the youth and to bring everyone to the table ensuring that parents participate in developing the case plan, behaviorally specific goals and any identifying other supportive services that may be needed. The social worker utilizes monthly visits to monitor progress and is available via phone for communication with the child, bio parents and resource family whenever there is a need. The six-month CFT is utilized

to reassess any needs that the child, bio family and resource family may need. The Structured Family Visitation Program is one of the most important services provided to families. To further strengthen the visitation program, a visitation social worker was assigned in April 2017. The social worker meets with each family to review visitation rules, establish clear expectations and develop strength based visitation goals. The social worker completes assessments which are reviewed with the case carrying social worker and can be utilized in court reports and during CFTs. In addition, the visitation social worker has developed a parenting toolbox for parents to utilize for parenting tips, life skills and community resources. The presence of the visitation social worker has developed a more structured environment which is anticipated to improve outcomes for children, youth and families.

Probation

Once a juvenile is cited and/or arrested by law enforcement for a criminal offense, the Juvenile Intake Unit completes a lengthy interview process with the juvenile and the family. Using Motivational Interviewing, the probation officer interviews the juvenile and family to gather information to complete the Positive Achievement Change Tool (PACT) assessment, in order to determine the juvenile's risk to reoffend, as well as any immediate risk and protective factors linked to criminal behavior. This ensures that the rehabilitative effort can be tailored to address the minor's unique criminogenic needs. Probation communicates a lot with youth and pays attention to patterns in their behavior. Probation focuses on the full picture of the youth's circumstances to ensure that the youth receive the proper services that they require to become successful citizens in the community. A risk and needs assessment is completed which looks at prior criminal history, education, child welfare history, and family history to determine what the needs may be. It pre-populates an automated and customizable case plan focused on reducing risk factors and increasing protective factors and allows managers to run reports to see changes in risk/protective factors over time. The PACT revitalizes the role and responsibilities of the probation officer from that of one who monitors sanctions, to that of one who is provided a working tool to assist while modeling pro-social behavior. The probation officer will continue to work with the juvenile and the juvenile's family to reduce the juvenile's risk to re-offend.

Youth with sex offenses are referred to a licensed clinical psychologist, who completes a Forensic Evaluation to determine the level of treatment the youth should receive. Probation also utilizes the progress reports from the service providers to monitor the youth's improvements while in treatment. Probation rarely places these youth with a resource parent, due to most youth requiring STRTP placement. If a youth is placed with a resource parent, probation will provide support services to ensure needs are met. Typically needs are specific to the youth and probation will assist with purchasing items to help make the placement successful such as football gear, prom attire, etc. to ensure probation youth experience activities like any other youth their age. CFTs are used to help identify any larger scale needs that the caregiver may need assistance with.

The majority of probation youth are currently placed out of the Yuba County area. Probation provides bus passes, gas gift cards, and assist with hotel rooms when needed to ensure parents have the opportunity to visit their children. Probation has also coordinated with out-of-state placement facilities to ensure youth can Skype with their families. If youth are at the point they can do unsupervised weekend visits, the placement officer will transport the youth to their parent's home to ensure there is no barrier to visitation. Probation often struggles with parents not wanting to engage or visit with their children due to the turbulent past and youth's behavioral issues. In addition, visitation can be difficult when the victim is in the home. This can create a barrier for probation youth to visit at home when the victim resides there. Additionally, probation assesses the progress of the youth in treatment prior to setting an unsupervised visit. In addition, parents are referred to Parent Project which provides learning tools and creates a support system for families with probation youth.

The PACT and case plan are completed with the input of the parents and the youth. Once services are established, a reassessment is conducted every six months or when a major change in circumstances occurs. The case plans are regularly reviewed with the youth and their parents in attempt to provide the most appropriate services. The PACT also provides a critical, widely recognized trauma measure, the Adverse Childhood Experiences (ACE) score. The ACE score is generated from relevant questions within the PACT. Utilizing the ACE score

assists us in identifying specific trauma and locating specialized services for the youth's specific need.

After the implementation of CCR/AB 403, the probation department has implemented CFT's for probation youth; primarily those ordered into out-of-home placement. The initial CFT is held within 14 days of the youth's detention. Ongoing CFT's occur at a minimum, every 6 months. Information gathered in the CFT is used to make plans and recommendations to the court in the same manner as with CAPS children.

At the time of detention, the youth and their families are asked about possible family members who would be willing to care for the youth, should they be removed from the parent. This information is documented in JALAN and in Dispositional Reports. Often, this is not relevant at the onset of the case; however, it is utilized in the future when considering out-of-home placement of the youth. It is not common practice in Yuba County Delinquency Court to have the parental rights terminated; however, youth are often placed with other family members in order to maintain family connections.

The Probation Department is also involved in collaborating with YCAT and SuperCAT. Additionally, collaboration and decision making occurs with SYBH, local school districts, and YCHHSD CAPS in order to develop an appropriate case plan for the youth. Prior to a referral being completed, we must have release of information forms (ROI's) signed by parents or the court if parent is unavailable. After discussion at YCAT or SuperCAT, a referral is made to the appropriate agency such as CSOC or Youth for Change to ensure youth receive the necessary mental health services. Constant communication between the probation officer and service provider occur during treatment team meetings to ensure progress is being made during their sessions.

FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT AND RETENTION

Yuba County CAPS Resource Family Approval (RFA)/Adoptions unit follows the RFA written directives mandated by CDSS for the assessment and approval of resource families for children and youth in need of out of home care. RFA is a new approval process that combines elements of the current foster parent licensing, relative approval, and approvals for adoption

and guardianship processes and replaces those processes. The RFA process streamlines and eliminates the duplication of existing processes, unifies approval standards for all caregivers, regardless of the child's case plan, includes a comprehensive psychosocial assessment, home environment inspection, and training for all families, including relatives, prepares families to better meet the needs of vulnerable children in the foster care system and allows seamless transition to permanency.

The RFA process and the [Quality Parenting Initiative](#) (QPI) support the ongoing efforts of the [Continuum of Care Reform](#) (CCR). The RFA process improves the way caregivers (related and non-related) of children in foster care are approved and prepared to parent vulnerable children, whether temporarily or permanently. Together, the RFA and QPI efforts work to build the capacity of the continuum of foster care placement options to better meet the needs of vulnerable children in home based family care. This increased capacity is essential to successfully moving children out of congregate care, which is a goal of CCR.

Because of the streamlined processes associated with RFA, Yuba County CAPS has nearly doubled the number of approved resource family homes, going from around 30 approved through the former foster care licensing system to nearly 60 approved through RFA. Additionally, because of the streamlined RFA process, the CAPS Adoptions unit, which was implemented in July 2013, has been able to significantly improve timelines for finalization of adoptions by approximately six months.

While the number of Yuba County CAPS RFA homes has increased, there are still not enough local, home-based placements that are willing and/or able to accept high needs youth. Often times, resource families are unable/unwilling to accept older youth and/or older youth with emotional and/or behavioral issues for placement into their home(s). And, if placement is accepted, the caregivers may lack the training and experience needed to manage significant emotional/behavioral issues. Another complicating factor is there are no Intensive Services Foster Care (ISFC) homes in the local and/or surrounding area. CAPS collaborates and works closely with local and surrounding county Foster Family Agencies (FFAs) to provide resource families for children/youth in need of out of home care.

CAPS participates in ongoing RFA outreach and recruitment activities. Additionally, the HHSD Outreach Committee participates in approximately 22 community events throughout the year, which provides CAPS with additional avenues and opportunities for RFA outreach/recruitment.

Yuba County CAPS' resource family retention and support efforts include, but are not limited to, contracting with Yuba Community College to provide RFA ongoing education classes; support and services provided through the Yuba-Sutter Foster Parent Association; and a Yuba County CAPS hosted annual RFA Appreciation Dinner and/or BBQ-Picnic. This event is held in efforts to support, recognize and celebrate local resource families and enhances awareness and appreciation of local resource families. Resource families, including relative and non-relative, have given a great deal of positive feedback and appreciation for this event. Additionally, CAPS purchased a subscription to "Fostering Families Today" magazine for the approved resource families. The magazine provides resources and helpful tips for caring for foster children and youth. Furthermore, CAPS provides monetary gift cards to resource families so that they can purchase needed items to meet the child/youth's immediate needs upon entering care.

Additionally, in 2017, CAPS created a placement social worker position which was created not only to support staff in locating placement resources but to also support resource families, build rapport with local FFAs and other placement sources. The placement social worker also regularly attends the Northern California Placement Committee and FFA collaborative meetings to network and locate additional resource families who may be able to meet the needs of youth and help to avoid the need for congregate care.

Placement Resources:

As noted above, Yuba County CAPS has approximately 60 Yuba County approved RFA homes. While the number of approved resource family homes has increased, often times those homes are child-specific meaning the resource family is typically a relative or non-relative extended family member and they are only requesting to be approved to care for that specific child. With that said, due to the experience with Yuba County's RFA staff/program,

some of those resource families have later opened their homes to provide out of home care for other Yuba County children/youth in need. Additional placement resources include FFA resource family homes and on some occasions, Short-Term Residential Treatment Programs (STRTPs), which are only used if the child/youth has high level needs that cannot be met in a home-based setting.

As mentioned in previous sections of the CSA, a placement coordinator position was created in 2017 to focus on building relationships and collaborating with local FFAs, resource families and placement resources to ensure children have the best placement options available to them. The placement social worker has developed strong working relationships with our current resource family homes, FFAs and other placement resources. In the past, CAPS had found that when a placement wasn't a good match and there were early signs that the social worker needed to be looking for a better fit, they were unable to dedicate the time and effort needed to initiate placement searches proactively. This, of course, leads to reactive placements and increased placement instability. The other benefit of having a dedicated placement coordinator, is that the coordinator attends the CFT meetings and becomes familiar with children/youth, local Resource Families and their strengths, experience, etc. and is able to do child specific outreach to existing Resource Families. The same goes for attempts to access congregate care/STRTPs when necessary- social workers often had to submit dozens of requests attempting to find a placement and again weren't always able to secure placements based on what was the best fit, particularly when 7-day notices are involved. The placement coordinator becomes part of the Child and Family team and an additional resource to the case carrying social worker and CAPS has seen a tremendous benefit to investing in this role.

STAFF, CAREGIVER AND SERVICE PROVIDER TRAINING

CAPS Training Infrastructure

All new child welfare social workers shall complete a standardized core training program consistent with Welfare and Institutions Code 16206 as approved by California Department of Social Services (CDSS). Core for social workers provides a foundational understanding and skill set related to child welfare practice in California. Core for social

workers fulfill primary standardized core curriculum requirements and includes 10 total modules that consist of 29 classroom sessions, 22 e-learning and 9 field activities to be completed over a 10-month period. Core modules 1-7 must be completed within 12 months from initial date of hire and Modules 8-10 must be completed within 24 months from initial date of hire, however, cohorts are scheduled such that all requirements are met within 10 months or fewer.

Therefore, within the first 12 months of new hire, social workers must complete the following core training requirements, which include: framework for child welfare practice, child maltreatment identification, assessment of safety, risk and protective capacity, case planning, management and documentation, child and youth development, placement and permanency, and the statewide automated child welfare system. Within 24 months of date of hire, social workers are required to complete additional core training requirements, including: Indian Child Welfare Act (ICWA), Multiethnic Placement Act/Interethnic Adoptions Provisions, court procedures, documentation for legal reports, basic interviewing, domestic violence, substance abuse, mental health, ethics and values, self-care, education needs, child welfare practice in a multi-cultural environment, child maltreatment identification, and sexual abuse and health care needs.

In 2018, the Northern California Training Academy (NCTA) created and piloted a “Fast Track Core for Social Workers” which contains all of the required/mandated social worker core training modules but condensed over the course of 12 weeks. At least three new social workers participated in and completed the new Fast Track Core program. The Fast Track Core program will be utilized for newly hired social workers this year, as well.

Additionally, newly hired, assigned or promoted direct line child welfare supervisors shall complete a standardized core training program, approved by CDSS, within 12 months from the date of hire, assignment or promotion. Supervisor core training shall include, but is not limited to, promising and research informed practice, educational supervision, policy context for child welfare practice, managing for results/supervising toward outcomes, casework supervision, and fiscal fundamentals for children’s services.

Effective July 1, 2008, social work and supervisory staff are required to attend 40 hours of additional training every 24 months. The HHSD training coordinator and an office assistant II maintain a database of all the trainings completed in order to track staff compliance with the mandatory training hours. In order to ensure the completion of the 40 hours of training, social workers and supervisors training hours are reviewed on a quarterly basis. Staff who are in need of training hours receive an advisement notification via e-mail, which includes their total training hours and the amount of training hours they are in need of to be in compliance with regulations. The notification is also sent to the social worker's supervisor. The social worker and their supervisor will then make arrangements through the training coordinator to attend appropriate training that will meet the continued training requirements.

In addition to the training information noted above, all new social workers are supplied with a court report training binder and a copy of the CDSS Division 31 regulations. The court report binder includes all of the hearing types, the explanation for the necessity of each hearing, its purpose, and examples of Court reports identifying the necessary content, format, required notices, findings and orders. All staff can access YCCHSD policy and procedures through the Yuba County Intranet. Support staff in CAPS attend the CWS/CMS Consortium Lab where they learn how to use the CWS/CMS database system. Support staff attend other trainings, relevant to their position and job duties, coordinated through the training coordinator and with the authorization of their supervisor.

Program Managers work with HHSD's training coordinator, CDSS and UC Davis to identify new/needed trainings. In addition, the training coordinator seeks out and receives notifications of available and upcoming trainings and continually provides the information to program managers and staff. Trainings are primarily offered/provided through UC Davis, Northern California Training Academy (NCTA), Child Abuse Training and Technical Assistance (CATT), California Social Work Education Center (CalSWEC), and other various entities. Trainings that have been offered/provided throughout this last year have included: Safety Organized Practice (SOP), Trauma Informed Practice and Well-Being, Vulnerable Populations, Health/Behavioral Health, Court Testimony, Court Report Writing, Substance Abuse, Domestic Violence, Assessing Child Development, Assessing Child Abuse and Neglect, ICWA, Ethics in the

Workplace, Civil Rights Division 21, SDM/Family Strengths and Needs Interviewing, Visitation, Bridges to Emancipation, Evaluating Client Progress, Multi-Ethnic Placement Act (MEPA), Foster Youth Services AB490, Confidentiality, Teaming with Parents/Community Partners, Trust Building for Teams, and Working with Drug Abusing Families. Please refer to Appendix 2 for a matrix of provided trainings.

In addition to the aforementioned list of trainings, all CAPS Social Worker III/IV staff attend Peace Officers Standard Training (POST 832 PC) to become deputized, equipping them with limited peace officer powers and authority to place a child who is found to be at imminent risk of abuse/neglect into protective custody within Yuba County's jurisdiction. In addition to the required core training and ongoing training requirements for social workers, newly hired staff have a 12-month probationary period which requires evaluations to be completed every 3 months during the first year of employment. During that time, supervisors meet regularly with their staff to monitor caseloads, tasks, staff cases and discuss any identified performance and/or disciplinary issues.

CAPS and Yuba College collaborate to ensure materials are being updated appropriately for resource parents. In addition, the contract with Yuba College for Foster Kinship Care Education outlines they must "identify new and emerging activities, ideas and issues which would benefit the resource parents and foster youth." Resource parents are required to attend classes prior to becoming a resource family home and are also required to attend refresher trainings. The Yuba College FKCE program director, instructor and the RFA supervisor collaborate monthly to touch base on curriculum and new trainings that may need to be implemented. The Yuba College instructor and program director are invited to attend in-house trainings at HHSD to ensure they are informed about child welfare policies and best practices. In-house trainings occur at least quarterly and are more frequent when webinars are available via UC Davis. As previously mentioned under the Foster/Adoptive Parent Licensing, Recruitment and Retention section, resource families have FKCE classes available to them through Yuba College. In addition, the county utilizes the Foster Parent College (ACIN I-51-17) for those resource families that are unable to attend classes in person due to scheduling

conflicts. Group homes and FFAs also have internal training programs that are offered by the agencies themselves.

Probation Training Infrastructure

A probation officer is required to participate in Standards and Corrections (STC) training. A probation officer is required to complete the Probation Officers Core Course within the first year of employment. Forty hours of STC training is required every year. A probation officer assigned to the placement caseload is required to complete a Placement Training Core and the Supervisor of the Placement Unit is required to participate in a Placement Supervisor Core within 24 months of being assigned responsibility for Title IV-E placement activities. A portion of their yearly training must be directly related to Title IV-E placement. These trainings include: concurrent planning, visitation requirements and termination of parental rights practices. In addition, supervisor training shall also include: case planning practices, comprehensive assessment of wards who are receiving Title IV-E placement services including screening for educational and mental health needs and understanding the significance of state and federal reporting requirements such as the Adoption and Foster Care Analysis and Reporting System and the National Child Abuse and Neglect Data System.

The Probation Department has a training manager who is responsible for locating appropriate training and registering all probation staff, including the probation officer assigned to the placement caseload, into training. The majority of these trainings have been certified by the California Board of State and Community Corrections, Division of Standards and Training in Corrections. The majority of mandated trainings related to placement activities are offered by UC Davis or Chief Probation Officers of California (CPOC). New employees have quarterly evaluations for the first year of employment and then it becomes annual. In addition, probation officers are required to attend trainings regularly to ensure they stay up to date with the best practices for their specific assigned roles. In addition, juvenile probation has monthly unit meetings to discuss expectations, Federal/State mandates, best practices and the County's policies and procedures. The Probation Department has experienced difficulties in meeting training requirements due to caseload levels, locations of trainings and financial restraints.

Provider Training

CAPS extends invitations to local service providers and caregivers to attend trainings that promote collaboration, education, awareness and service delivery for the youth and families served. In-house trainings related to child welfare practices and policies occur at least quarterly and more frequently when webinars are available via UC Davis. This practice has enhanced system collaboration throughout Yuba County. CAPS has contracted with Yuba Community College for Foster Kinship Care Education (FKCE). The Yuba College FKCE Program Director, instructor and the RFA Supervisor collaborate monthly to review and discuss curriculum and new trainings to implement and provide for care providers/resource families. Included in the contract with FKCE is that the College will “identify new and emerging activities, ideas and issues which would benefit the resource parents and foster youth.” Resource families are required to attend classes prior to becoming an approved resource family, and are also required to attend refresher trainings. Quality Parenting Initiative (QPI) is also integrated into the FKCE curriculum for resource families. One hour of each class is devoted to quality parenting principles education. Participant satisfaction surveys for workshops and trainings are also conducted at the end of each course to further improve the curriculum.

Yuba County’s contracted CAPIT/CBCAP provider attends the Yuba County Children’s Wellness (YCCW)/Child Abuse Prevention Council (CAPC) in their role as the Differential Response (DR) provider for the county. Through YCCW/CAPC the DR provider has the ability to request funds to attend trainings that are related to child abuse prevention. Ongoing technical assistance is provided by the county liaison for any issues and problems that may arise in the administration of the contract. DR staff have received formal training for in-home visitation, SDM, SOP, CFTs and CSEC. While CAPS does not expect the contracted staff to use the SDM tools, having some limited training on how the CAPS social workers assess risk is helpful.

CAPS has two Emergency Response supervisors who routinely conduct mandated reporter training for community partners, including: local schools, Family Resource Centers (FRCs), community based organizations, and other divisions in HHSD. The training provides open dialogue/discussion, example scenarios that would require reporting, question and

answers (Q&A) and a PowerPoint summary which is provided to the community partners for their review and reference. Additionally, quick reference bookmarks are provided which provide a summary of mandated reporter requirements. Overall, the training educates on reporting responsibilities, timelines, and also includes an overview of how reports of abuse/neglect are processed.

Intern Training

Yuba County CAPS has provided 15 Bachelor of Arts in Social Work (BSW) and Master of Arts in Social Work (MSW) students with on the job training and experience through internships over the last five years. Yuba County has a current MOU with California State University (CSU), Chico, and is providing two (2) Title IV-E students, including one BSW and one MSW student, with a social work internship in CAPS. CAPS provides a robust internship experience where social worker interns get exposure and experience with all of the different programs in Child Welfare Services, including but not limited to: Emergency Response, Family Reunification, Family Maintenance, Ongoing/Permanent Plan and Adoptions. Social Work interns receive training and experience with Structured Decision Making (SDM) tools and Safety Organized Practice (SOP). Social Work interns shadow experienced social workers on home visits, face to face contacts with children and families, investigations, serving Protective Custody Warrants for the detention of abused/neglected children/youth, observing and assisting with the Juvenile Court process including coaching and experience with required written documentation and reports. Through the training and experiences gained through Yuba County's internship program, five MSW students have become employed with Yuba County CAPS as full-time social workers and two additional interns have become employed by other county Child Welfare departments in the last 5 years

The [Title IV-E Program](#) provides support for the delivery of a specialized public child welfare curriculum and support for students committed to service in public child welfare. The Title IV-E Child Welfare Training Program also offers financial support to graduate social work students preparing for the field of public child welfare, available at 21 schools of social work. Upon graduation, students work in a county child welfare service for a time equal to the period for which they received support. CAPS will continue this collaboration with the CSU system as

it enriches the learning environment and helps better prepare social work students for pursuing a career in Child Welfare.

AGENCY COLLABORATION

Collaboration with Public and Private Agencies

YCCW/CAPC meets monthly and consists of representatives from CAPS, Probation, YCOE, SYBH, Camptonville Community Partnership, First 5 Yuba, Peach Tree Health, Yuba County BOS, Reverend of Faith Lutheran Church, and Youth for Change. This group is comprised of community and agency members whose duties are primarily related to services for children, with special emphasis upon child abuse and neglect prevention and intervention services. Members encourage and facilitate community support for child abuse and neglect prevention, promote public awareness of child abuse and the resources available for intervention and treatment, and recommend improvements in services to families and victims. The YCOE Superintendent of Schools was the chair during 2018 and the current chair of the YCCW/CAPC is a manager from Sutter Yuba Behavioral Health (SYBH).

Yuba County's Blue Ribbon Commission (BRC) meets monthly. BRC consists of representatives from CAPS, Probation, Yuba College, attorneys, juvenile court judge, Marysville Joint Unified School District (MJUSD), YCOE, local FFAs, SYBH and community based organizations. The values of the BRC include: collaboration, shared responsibility, accountability, leadership, children and families, child safety, inclusion, permanency and youth voice. Currently BRC is focused on developing a transportation system for foster youth to ensure they are able to remain in their school of origin. Foster parents, foster youth and foster family agencies are invited to attend the YCCW/CAPC and BRC meetings. Attendance can be intermittent at times so ongoing outreach and engagement to encourage participation is essential.

YCCW/CAPC and BRC meet monthly to discuss challenges the community, foster youth and child welfare may be experiencing. At these meetings, stakeholders collaborate on how each entity can further improve services and strategize how to implement new processes. Once logistics have been outlined at the YCCW/CAPC or BRC meeting, a workgroup is created

to develop a policy and procedure which is then shared with the committees when the process is finalized.

The Yuba County Assessment Team (YCAT) and SuperCAT collaborative groups are comprised of representatives from Child Welfare, Probation, SYBH, local schools and community based organizations. In YCAT, members work together to strategize, develop plans and identify resources to prevent children from entering placement and/or custody. If in placement or custody, the focus is to coordinate services and supports the child and family need in the least restrictive setting possible. In most cases, lower level local non-custody treatment and intervention options are explored and exhausted before long-term commitment or removal to foster care are considered. SuperCAT is also a network of members working together to strategize, develop plans and identify supports to successfully transition children into less restrictive placements. Preference is given to the least restrictive intervention necessary to address needs and behavior and is prioritized by all participants throughout the process.

Yuba County does not have any Native American tribes located within its boundaries; however, there are tribes in neighboring counties. CAPS has infrequent interaction or contact with neighboring tribes. CAPS contracts with a local ICWA expert to conduct ICWA assessments when needed.

CAPS supervisors and social workers participate in monthly various county-wide interagency meetings which include individuals from the following agencies:

- CAPS
- Alcohol and Other Drug Programs
- CalWORKs
- Education
- Mental Health
- Public Health Services
- Criminal Justice/Law Enforcement (Probation)
- Juvenile Court
- Domestic Violence
- Consumers

- Faith Community
- Community Based Organizations

Existing cross-agency collaborations include the following:

- Yuba County Probation, Victim Services
- Yuba County Assessment Team (YCAT)
- Super County Assessment Team (Super CAT)
- Yuba County Children’s Wellness and Child Abuse Prevention Council
- Yuba County PHNs (Public Health Division)
- Sutter-Yuba Behavioral Health
- Foster Youth Services Advisory Meeting
- Foster Care Kinship Education Advisory Meeting
- Child Death Review Team (CDRT)
- Casa De Esperanza (Domestic Violence Shelter)
- F.O.R. Families
- Schools/Educational Providers
- School Attendance Review Board (SARB)
- Yuba Community College
- Alta Regional Center
- Victor Community Support Services
- Youth for Change
- Blue Ribbon Commission
- Bi-County Early Access Support (BEAS)
- Commercially Sexually Exploited Children Multi-Disciplinary Team (CSEC MDT)

Collaborations with regional agencies:

- County Welfare Directors Association
- Northern County Welfare Directors
- Sierra-Sacramento CAPC Regional Coalition
- Northern California Training Academy

CAPS and SYBH partner together to ensure that children and youth have access to the services needed to stabilize their mental health and their placements. A referral form was created and staff have been trained to ensure compliance with Katie A. mandates. CAPS management and SYBH continue to meet quarterly to improve collaborative efforts to meet the needs of foster children. The Yuba County CSEC Multi-Disciplinary Team (MDT) has been established and includes SYBH, Yuba County Victim Services, Yuba County District Attorney,

local law enforcement agencies, YCOE, Probation and CAPS. The CSEC MDT members have worked together to understand their roles and ensure a swift response. In addition, they are providing ongoing training to community members and stakeholders to increase CSEC awareness and improve responses to CSEC.

Through cross-agency collaboration and community partnership, there has been a greater understanding and shared vision and goals which has led to a unified commitment regarding the protection and well-being of children throughout the county. Annual reports of progress and services are becoming more focused on measurable outcomes using the data available through the Berkeley website and the CFSR outcome measures. Improved information sharing and an increased level of trust in CAPS have been additional positive outcomes of working closely with community partners and stakeholders.

The Probation Department has a long partnership with the MJUSD and YCOE with a program called Probation and School Success (P.A.S.S.). The primary goal of the program has been to counteract factors interfering with student learning and performance with a comprehensive and multifaceted approach, based on interventions facilitated by law enforcement personnel. This collaborative approach includes on campus probation officers at two high schools, one continuation school and one intermediate school. The P.A.S.S. program is a preventative program that focuses on reducing violence in the home and at the school site; identifying and providing intervention services in relation to child abuse; reducing the number of referrals to the criminal justice system; and providing a coordination of resources and behavioral strategies that foster resiliency. To further enhance the P.A.S.S. program, the probation department, in conjunction with the MJUSD and YCOE, provides a truancy mediation program, including a Truant Officer (probation employee), to keep student in school. Truancy is often a gateway to delinquent behavior and is indicative of family dysfunction on a larger scale; including domestic violence in the home, substance abuse, mental illness, poverty, homelessness, abuse and neglect.

During the CSA focus groups with Probation and CAPS staff there were many common themes present related to systemic factors. Although information sharing has improved, there are still barriers to having working relationships with other departments and agencies because

of confidentiality. Some agencies are reluctant to provide information or talk openly about a case or family because of the need to maintain confidentiality. Social workers were able to identify many community partners to refer families for additional resources and services. However, some of the services have long waiting lists and limited resources which have impacted the timeliness of service delivery. There was agreement by the stakeholders that although there are several community agencies providing the most important services to Yuba residents (SA, domestic violence, mental health), all of them are impacted, have high wait times (1-2 months for MH) and are difficult to access via current public transportation schedules. Challenges with access notwithstanding, there was consensus at the stakeholder meeting that social workers are not consistently and systematically referring clients to services, nor are all social workers aware of all potential services. With substance abuse affecting the counties' residents, the clinics and treatment programs are overwhelmed. This was also the dominating theme in both the social worker and social work supervisor focus groups that were facilitated during the peer review week. When Child Welfare social workers attempt to provide "front-end" supports that typically are positively correlated recurrence-prevention, the system of care (community partners and in-house services) struggles to support the demand. However, there are strategies the county is using to ameliorate this in good ways. Per the stakeholders, social workers are more frequently and more effectively using Child and Family Teaming to assist and support families.

SERVICE ARRAY

Availability of Services

Yuba County continues to provide mandated and traditional services for its children and families as it also strives to implement new and innovative programs that are evidence based and will hopefully lead to improved child welfare outcomes. In fact, CAPS utilizes a number of best practice initiatives to promote strength-based, collaborative approaches in working with families. The need for services in Yuba County is far greater than the service capacity. Yuba County is service-deficient in that if all families truly tried to access the necessary services locally, the service agencies would not have the capacity to serve them. Service provision depends on the unique needs of each family. These needs can include

substance abuse treatment, individual and family counseling, parent education and co-dependency, etc. The decision of which services are needed is determined jointly at a CFT meeting by the family, natural supports and agency staff. In 2017, CAPS embraced the CFT practice model which includes strength-based meetings that bring relatives, natural supports, and other resources to the table. These meetings bring to light barriers that families may be facing which allow for the team to problem solve so there is successful reunification and less likelihood for the recurrence of maltreatment. Non-English speaking and hearing-impaired parents are provided with interpretive services. Parenting classes are offered in Spanish. Also, FREED, a non-profit community organization assisting disabled individuals with disabilities, is utilized to ensure access to services.

Independent Living

Yuba College maintains the ILP Program which provides the following classes to assist youth in making the transition to self-sufficiency on weekly basis: housing, budgeting/money management, personal document collection, community resources, self-esteem, nutrition/cooking, education/financial assistance, CPR/first aid, effects of drugs and alcohol, STD's, AIDS and pregnancy prevention, relationships/interpersonal and social skills, conflict management, employment & job skills, goal planning, anger management, foster youth rights, branches of military service, community resources, computer/internet training, and Transitional Housing Placement Plus (THP-Plus) Program.

Additionally, Yuba County utilizes an experiential component in the ILP Program through the YESS Program that incorporates community training in the areas of education, employment, life skills and financial literacy. ILP youth will be able to obtain skills through field trips and retreats conducted in the community where they will be able to complete hands on training in nutritional cooking, personal hygiene, banking, job searches, resume writing, housing applications, college application processes, and computer skills. ILP youth that do not have access to transportation may request to be transported by a CAPS social worker. If a youth lives more than 10 miles outside of Marysville, CAPS will arrange with the foster parent for a halfway meeting point to pick up the youth.

Health Care

The implementation of the Affordable Care Act (ACA) in 2014 allowed for more families in the community to be eligible to health insurance coverage. ACA also increased the network of health care providers. Peach Tree, Harmony Health and Ampla Health remain the primary local providers willing to accept Medi-Cal. The Yuba County Public Health Department has several PHNs who make home visits to high risk families with newborns. Families are determined to be at-risk because of previous child welfare history, premature birth, multiple births (twins), and are low to no income. On May 1, 2017 Rideout Health opened the Family Birthing Center at the Rideout Regional Medical Center in Marysville, CA. The new facility includes two C-section rooms, an ante-partum testing unit, a Well Baby Nursery and six-bed Neonatal ICU designed to treat newborns in need of special care.

Clinics can take up to two weeks to schedule appointments. All three clinic locations and hospital have bus stops directly in front of their locations that are within a short walking distance. Due to local public transportation challenges, it can be a lengthy process to utilize public transportation to get to a local medical clinic.

Mental Health

Sutter Yuba Behavioral Health (SYBH) serves as the Mental Health Plan (MHP) for both Yuba and Sutter counties and are the primary provider of Specialty Mental Health Services in the community. Specialty Mental Health Services (SMHS) are defined as Behavioral Health services which are provided through SYBH, or a contracted provider, through the Mental Health Plan (MHP). There are few local private providers who accept Medi-Cal for behavioral health services. SYBH has seen a consistent increase in number and acuity of children and youth needing Specialty Mental Health Services. At this time, SYBH does not have the capacity to assess and serve all children and youth needing mental health services but are working diligently to expand access to services.

Children and youth ages 0-17 in the Child Welfare system receive an initial mental health screening within 15 business days of the case start date and annually (at a minimum) thereafter. The mental health screening is not required if the child is already receiving

Specialty Mental Health Services (SMHS). In addition, all children ages 0-5 who are in open cases will receive a developmental screening. The Child and Adult Protective Services (CAPS) Public Health Nurse (PHN) completes a developmental screening for all children 0-5 years old using the Ages and Stages Questionnaire (ASQ) screening tool. The Case Managing Social Worker (CMSW) will screen all children ages 0-17 for mental health needs by completing the Mental Health Screening Tool (MHST). The embedded SYBH therapist will screen and assess all children referred to determine the appropriate level of care using the Child and Adolescent Level of Care Utilization System (CALOCUS).

Depending on the child/youth's level of need, the child/youth may be seen in-house by the embedded SYBH therapist, at SYBH Youth Services clinic, SYBH Children's System of Care (CSOC) program, SYBH Transitional Age Youth (TAY) Full Service Partnership (FSP) program, or at Youth for Change, a community based organization that contracts with SYBH. Youth for Change provides a broad array of services including individual and family therapy, collateral and rehab services, Community Based Services (CBS), Full Service Partnership (FSP) services, Therapeutic Behavioral Services (TBS), In Home Behavioral Services (IHBS), Intensive Care Coordination (ICC) and medication support services. The number of children/youth in need of services currently outweighs the capacity which has resulted in delays to accessing services. If it is identified that there is an urgent need for a child/youth to be seen by a therapist, the social worker works collaboratively with SYBH to ensure the child/youth's needs are met. Due to lack of bus routes, transportation can be a challenge and can be a lengthy process to get to the clinic locations, increasing the need for home and community based services.

CAPS has one embedded SYBH therapist that is primarily dedicated to providing services to parents with open Child Welfare case plans. The embedded SYBH therapist will screen and assess all adults referred to determine the appropriate level of care using the Level of Care Utilization System (LOCUS). The therapist will provide ongoing behavioral health services to those that can be served in the HHSD setting. For those requiring a higher level of care, a warm hand off is completed with SYBH's adult outpatient clinic.

Assessment and Treatment Services for Drug and Alcohol Problems

Yuba County utilizes the For Our Recovering (FOR) Families Program for assessments, outpatient and aftercare treatment. FOR Families has CADC certified drug counselors on staff who complete assessments for treatment needs and provide individual and group support when needed. Locally, The Salvation Army Depot is a residential housing support program with a drug and alcohol treatment component much like residential drug treatment. The facility allows children; however, there is often a waiting list that requires a client's constant communication. As previously mentioned, there are no local residential treatment programs that have the transitional housing component for aftercare. As indicated, outpatient services are limited in the county for adults and there are very scarce treatment services for the adolescent population. Currently, parents served by CAPS must go to residential facilities which are located out-of-county and are not accessible by the local public transportation system. CAPS contracts with several out of county residential substance abuse treatment programs to increase access to services.

Developmental Assessment and Services for Children

Yuba County schools, with parent permission and participation, evaluate students for special education services. Upon completion of the assessment, an Individualized Education Program (IEP) meeting is held to review evaluation results and determine eligibility for special education services. The IEP is tailored to the individual student's needs, in the least restrictive environment, as identified by the evaluation process, and helps teachers and related service providers understand the student's disability and how the disability affects the learning process. The IEP describes how the student learns, how the student best demonstrates that learning, and what teachers and service providers will do to help the student learn more effectively.

The Child Development Behavioral Consultation Program (CDBC) operates through the YCOE and is collaboratively funded through First 5 Yuba to support the healthy social and emotional development of young children age 0-5. In-home services are available for typically developing children who have not reached their sixth birthday and are exhibiting challenging

social emotional behaviors that impact or may impact the child's ability to succeed in a school or child care setting. A high level of adult participation by the primary caregiver is required. The program consists of a three-part assessment process and in-home services. The focus is on building the child's skills and social emotional regulation through interactive experiences between the parent and child. Coaching and modeling is provided along with specific positive discipline techniques and information on child development which address the individual goals for each child. Services are available in English or Spanish and referral can be made by the parent or an outside agency with parent consent. The CDBC Program also provides Individual workshops on discipline with a focus on healthy social emotional development in early childhood, a twice yearly workshop series geared to the needs of pregnant and parenting teens, individual phone consultation for both parents and providers, and a twice yearly workshop series on Positive Discipline.

YCOE Prevention Programs include; Tobacco Use Prevention Education provided education, intervention and cessation support for students and families. Parent education is also provided for parents of children of all ages as discussed in detail in the PSSF Funds section beginning on page 48 of this document. The Prevention Program also comprises Foster Youth and Homeless educational supports including; case management, assistance with enrollment, records transfers, transcript review, student advocacy, and general student and family support for students in placement and students experiencing homelessness.

These programs primarily rely on referrals for participation from families to occur. Positive Discipline, Loving Solutions and Parent Project classes rotate through the year and each series is held twice a year. Due to the limited classes, it can be difficult for parents to attend these classes. In addition, three of the classes are held in the evening which is convenient for working parents however if public transportation is needed then this can be difficult for parents to attend since the class ends after the last bus stop.

Domestic Violence Counseling and Shelter Services for Women and Children

Casa de Esperanza is a bi-county domestic violence shelter serving the Yuba and Sutter communities. Services and counseling are limited due to funding issues. The shelter has a 24/7

crisis line and 24/7 intake for survivors of partner abuse and sexual assault and their children. The shelter also offers transportation services, one-on-one counseling for adults and children, advocacy services and the filing of Domestic Violence Restraining Order (DVRO). The shelter employs a wide range of bilingual staff to help serve the diverse community: Spanish, Punjabi, Hmong, Hindi, German and American Sign Language and is wheelchair accessible.

Assistance with Housing

In December 2015, the Housing Support Program (HSP) was implemented which provides supportive services and housing assistance to families eligible to the CalWORKs program. In July 2016, the 14Forward project was launched which provides emergency temporary shelter and case management services to assist homeless individuals by overcoming personal and financial obstacles. Both of these programs are geared towards helping homeless individuals and families stabilize their lives and secure permanent housing. In addition, Yuba County has other community resources such as Salvation Army and Bridges to Housing. In 2017, the Life Building Center opened Coordinated Entry (CE) which is designed to streamline resources and services homeless residents. All homeless individuals and families are triaged at the CE to ensure they are linked to housing, programs and other community resources. These programs work collaboratively with families to ensure their success. Families receive supportive services which include assisting with child care, vehicle repairs, clothing, schooling and obtaining necessary legal documents such as birth certificates and social security cards.

In-Home Safety Services

The community has access to home visitation programs through local Family Resource Centers (FRCs) and Community Based Organizations (CBOs). The in-home services offered to the families vary depending on their needs and safety factors in the home. The FRCs and CBOs offer a variety of services including parenting, support groups, individual counseling, and child development classes in both English and Spanish to better serve the local community. If, after a thorough investigation by CAPS, it is determined that a child can be safely maintained in their home, the family is offered voluntary family maintenance services. If the family does not

accept voluntary family maintenance services, they are strongly encouraged to go to their local FRC or CBO and participate in family-centered services.

Yuba County CAPS utilizes a Differential Response (DR) Program as another avenue to engage and offer families voluntary in-home services. GraceSource, Inc. was the contracted partner to provide DR services from July 2016 through June 2018. GraceSource, Inc. struggled to engage families even though various attempts were made to engage parents. In February 2018, YCHHSD and YCCW/CAPC reviewed expectations for a successful DR program, reviewed GraceSource, Inc.'s engagement and success rates and the decision was made to begin an RFP process for the new contract period. The RFP was posted on Yuba County's site in June 2018 with proposals being submitted and reviewed in August 2018. In September 2018, Youth for Change was selected as the new contractor and began providing services in October 2018.

Services for Reunification

Family Reunification services offered to families (voluntarily and Court-ordered to reunify families or help keep families intact) include ongoing contact, assessment, service referral, and case planning. Other services that assist with FR are parenting classes, drug and alcohol testing, counseling services, parent/child visitation, and transportation assistance. CAPS utilizes CFTs to help identify natural support networks but does not have an established program for respite care.

If reunification is not an option, other more permanent avenues are explored such as adoption, legal guardianship, relative placement, non-related extended family member or another type permanent living arrangement. CAPS has two adoptions social workers in house. The adoptions social workers and CAPS staff meet once a month to go over referrals and staff cases. Each reunification case includes a concurrent plan in the event that the family does not reunify.

Reunifying parents who have attended and completed the Parenting with Positive Discipline education class are encouraged to use these techniques as they participate in the Structured Family Visitation Program (SFV). The SFV staff are trained in this specific parenting curriculum and work with the family through the coaching and modeling of skills. The family

collaboratively develops an individualized visitation plan that targets skills the parents would like to develop and/or those they would like to bolster.

Geographically Isolated Families

There is one FRC located in the isolated foothills of Yuba County. Although the resource center does not offer home visiting services, they do offer an array of community-based services to their residents, such as monthly youth recreational activities, outreach programs for families at risk, parent and staff educational opportunities, parent and youth support groups, emergency information and referral, and linkages to community resources. Public Health also offers a flu shot clinic in the foothill area to encourage residents to promote prevention practices. In addition to the FRC, there is a nonprofit community center which hosts various activities and events such as family movie night, children's theater, fundraisers, dinners and other family friendly community events. The YCHHSD Outreach Committee attends annual community events in the foothills to reach out to families that may be needing services from the department.

Emergency Assistance Related to Food, Clothing and Shelter

Other than the resources available through public assistance programs, which YCHHSD administers, housing resources are limited. The Yuba-Sutter Coordinated Entry Program will assist with emergency needs in addition to offering services for employment assistance; education workshops on budgeting, safety, smoking cessation and nutrition, and one-on-one assistance in reducing barriers faced while attempting to retain permanent housing. The local Salvation Army, which is a bi-county operation, has limited funds to assist with shelter and clothing. YCHHSD relies greatly on food banks and local churches for emergency assistance related to food. Due to the demand, some of the food banks and churches in the local area track the referrals to avoid duplication and monitor utilization of the food closet. Due to limited funds, the network can only provide a three-day supply of food and cannot manage any repeat requests from families within the same month. The food banks and churches serve two counties which creates a secondary challenge to meet the needs of the community. In

addition, referrals are made to local churches in Sutter County that host lunches and dinners for those in need of a meal to meet the family's emergency need.

Early Childhood Development Programs

CAPS contracts with the Yuba County Office of Education (YCOE) to provide a variety of parenting sessions throughout the year. These parenting programs are described in detail in the PSSF section of this document beginning on page 48. Local FRCs and CBOs offer classes and activities related to child development. For the families in CAPS who appear to need more individual attention regarding parenting and child development, in-home parenting is provided. Parent Child Interactive Therapy (PCIT) is available through the local Victim Services program for age appropriate children. Additionally, CAPS recently completed construction on a two-room PCIT center within the Family Visitation Center to provide local provider with access to adequate space to provide this evidence based service.

Network of Community-Based Family Support Services

There are very few community-based family support services other than the local FRCs and CBOs. The FRCs and CBOs are very active in their neighborhoods and offer many services from play groups, support groups, family night, family fairs, food assistance, health referrals, service referrals and home visiting. For CalWORKs customers, Health and Human Services provides assistance via all components of the Welfare-to-Work program including Supportive Services (assistance with transportation, childcare, and counseling), work experience programs, job coaching/mentoring and support, vocational education classes including job search readiness and paraprofessional training, learning disability screening and evaluation.

Services to Native American Children

There are no local services which are specific to Native American children. However, if placement is secured with relatives who do not reside in the local area, the social worker will seek services in that community. CAPS has a contract with an Indian Child Welfare Act (ICWA) professional that can provide ICWA assessments as needed to help assess an ICWA child's needs. Neighboring counties, Colusa and Butte, have active tribes, tribal health services and other tribal connections that can be accessed.

Services for Children and Families with Disabilities

Services for children with disabilities include ongoing contact, assessment, service referral, and case planning. Additional services include Alta Regional Center which is one of a network of 21 regional centers in California. Alta Regional Center is a private non-profit corporation working under contract with the California Department of Developmental Services. Alta California Regional Center creates and maintains partnerships to support all persons with developmental disabilities, children at risk, and their families in choosing services and supports through individual lifelong planning to achieve satisfying lifestyles in their own communities.

Low income families with adults or children with disabilities are encouraged to apply for Supplemental Security Income (SSI). SSI provides monthly income to individuals with physical or mental disabilities and entitles them to additional supportive services including Medi-Cal.

Outreach Activities

The Yuba County Health and Human Services Department has an outreach committee that consists of representatives from each division (CAPS, Eligibility, Employment, Public Health and Veterans). The committee attends various community events to promote services provided by the department which includes information regarding CAPS and recruitment of resource and adoptive families. CAPS provides mandated reporter training to community partners and stakeholders. Yuba County HHSD and the Veterans Service Office participate at the annual Yuba-Sutter Veterans Stand Down for three days to provide veterans with access to showers, barbers, medical, dental, counseling, massage therapy, chaplain services and job-counseling services. Family members of veterans are encouraged to attend this event.

The Yuba County Public Health Department has health-related outreach events that include life vest fittings, bicycle helmet fittings, and free car seat checks. In addition, they conduct classes for smoking cessation classes and car seat classes that include a free car seat at the end of the class. The events/classes are available for Spanish and Hmong families and children. In September 2018, Yuba County HHSD hosted the first community Safety and

Wellness Fair which had approximately 182 participants. The community event had family fun activities such as Zumba and yoga demonstrations, free prize drawings, refreshments and lunch provided, and many community partners provided informational items and a variety of activities and giveaways.

Assessment Process

All Yuba County families involved with Child Welfare, regardless of ethnicity, participate in CFT meetings to assess strengths and needs, and to develop a family case plan. The family helps set the goals and helps to decide the interventions, which include local services and natural supports. Interpretive services are provided to the family during social worker interviews and at the CFTs to ensure that thoughts and ideas are clearly communicated. The family's cultural beliefs and values are taken into consideration during the assessments and interviews. Every effort is made to match the family with appropriate services. CAPS staff are culturally and linguistically representative of the community and work with families to identify support networks that may be aligned with their religious or cultural preferences. Social workers coordinate the sending of referrals and contact with service providers to ensure families obtain specific services needed that are identified during through the Child and Family Teaming process.

The CFT is utilized to bring everyone to the table to ensure parents participate in the case plan, develop behaviorally specific goals and identify any other supportive services that may be needed. The social worker utilizes monthly visits to monitor progress and is available via phone for communication with the child, biological parents and resource family whenever there is a need. The six-month CFT is utilized to reassess any needs that the child, bio parents and resource family may need.

Gaps in Services

Adoption social workers provide basic services within the community as specific services for adoptions are not available. Besides the basic community services, CAPS does not have specific services for kinship care or separate services to find a permanent family for children ages 0-5.

The stakeholder meeting held on June 19, 2018 was extremely helpful to the county self-assessment process and provided information that is helpful to consider moving forward. There was overall agreement by the stakeholders that although there are several community agencies providing the most important services to Yuba residents (substance abuse, domestic violence and behavioral health services), all programs are impacted, have long wait times and are difficult to access via limited transportation. Significant challenges with access notwithstanding, there was consensus at the stakeholder meeting that social workers are not consistently and systematically referring clients to services, nor are all social workers aware of all potential services. Schools identify children at risk of abuse and neglect as early as preschool and kindergarten, so early intervention efforts are critically important. It appears as though schools are underutilized as a resource for increasing safety and consistency with children and youth.

Services Funded Through PSSF/CAPIT/CBCAP/CTF

Promoting Safe and Stable Families (PSSF) Funded:

Yuba County contracts with Yuba County Office of Education (YCOE) to provide parenting education for parents/families of CAPS. The PSSF allocation primarily funds this contracted service.

- Parenting with Positive Discipline is an 8-week parenting series, focused on children ages 0-5 years old. The Positive Discipline curriculum provides information and strategies to understand and support children's growth and learning patterns.
- Loving Solutions is a 10-12-week parenting series focused on children ages 5-10 years old. The Loving Solutions curriculum includes improving concrete solutions for challenging behaviors; learning to never argue with your child again; stopping unwanted behaviors; and improving school performance.
- Parent Project is a 12-week parenting series focused on children 10-18 years old. The Parent Project curriculum includes empowering parents and transforming teens and tools to strengthen the family unit and increase parent involvement.

Each session consists of 8-12 weekly classes at 2-3 hours per class dependent upon the specific curriculum utilized. YCOE provides childcare services to the CAPS parents and families attending the parenting classes when needed and provides nutritional meals to the parents/families attending the classes.

CAPIT/CBCAP Funded

Yuba County's Differential Response (DR) program is funded through CAPIT/CBCAP allocated funds. In 2010, the YCCW/CAPC chose to fund DR as a prevention and early intervention effort for Yuba County. GraceSource, Inc. was the initial DR provider, however, in 2018, a Request for Proposal (RFP) was issued and a community based organization, Youth for Change, was awarded the current contract for DR services. The enhanced prevention and early intervention services provided through DR are designed to engage at-risk families and provide a broad array of community based services and supports to prevent entry into the Child Welfare system.

Children's Trust Fund (CTF) Funded:

The Yuba County Child Abuse and Prevention Council (CAPC) has served as the primary vehicle for raising and maintaining the profile of child maltreatment as a critical issue in the county. The CAPC continues to increase public awareness to the scope and nature of the problem, provides training and networking opportunities for service providers, consumers, advocates and the general public. To this end, the CAPC conducts outreach and public education throughout the county, holds forums and trainings on child abuse and parenting issues, distributes literature, resource posters and multi-media tools, provides access to professional training in the area of mandated reporting and child abuse prevention/detection and treatment. The CAPC is a collaborative body creating interagency coordination through membership and provides a forum for the coordination of child abuse prevention services.

Since 2003, the CAPC has been recognized as the local child abuse prevention council by the Yuba County Board of Supervisors (BOS) (Resolution No. 2003-06) and was designated to make recommendations for the Children's Trust Fund including the CAPIT/CBCAP funds. The CAPC operates on a volunteer basis and has an annual budget of \$2,000 that can be used to

support child abuse prevention activities by distributing funds in any of the following areas: promotion/marketing, printing, outreach/education materials, postage, website maintenance, conference/trainings, and mileage or parent/consumer stipends. The CAPC produced and funded a County Report Card in 2007 and an update in 2012. It has supported the 40 Developmental Assets in the county, which many county agencies continue to use. It also has helped with funding for travel expenses for members of the Yuba County Chapter of the California Youth Connection to attend a statewide conference.

Information regarding the program, services and other activities using CCTF is gathered at the monthly Yuba County Children's Wellness and Child Abuse Prevention Council (YCCW/CAPC) meeting as well as the Yuba County Children's Council Meeting and the monthly Child Abuse Prevention Council (CAPC) functional groups. Both of these meetings are open to the public. Members who participate share what activities they are involved in, as well as how the programs are functioning, and any results that the participants have noted. This information is published in the meeting minutes, which is available to the community. Additionally, some of these programs and services have been published in the Yuba County Report Card that was released in 2012.

Over the last five years, CAPS has been adopting several evidence-based and evidence-informed programs and practices. The most recent evidence-based practices that have been implemented include, but are not limited to, Structured Decision making (SDM), Child & Family Teams (CFTs), and Safety Organized Practice (SOP). Yuba County has not formally implemented the evidence-based Family-to-Family Initiative. However, the basic philosophy that children are better served in their own home and in their community and neighborhood when they must be removed from their homes is one Yuba County fully embraces. CAPS has made a concerted effort to research and adopt evidence-based programs and practices and will continue to do so.

QUALITY ASSURANCE SYSTEM

CAPS

Since the last County Self-Assessment (CSA) in 2013, Yuba County no longer utilizes the monthly Quality Assurance Review as a monitoring tool. CAPS managers/supervisors use SafeMeasures and Business Objects to manage caseload/case management information and statistical data. The up-to-date information provided by SafeMeasures allows supervisors to monitor compliance in many areas including timely in-person investigation and monthly face-to-face contact. SafeMeasures is a case management tool and allows the supervisor and social worker to monitor and ensure caseload compliance.

During supervision meetings, social workers are expected to print their caseloads from SafeMeasures to review and discuss with their supervisor. The Program Specialist and Supervisors also utilize SafeMeasures to monitor staff compliance with timely response to referrals and face-to-face contacts. Business Objects is primarily utilized by the Program Specialist to pull specific data information for management reports. The Structured Decision Making (SDM) tool is required to be utilized by all social workers, which includes the use of the intake referral screening tool known as the Hotline Tool, as well as the SDM Safety and Risk Assessment tools. In February 2018, SDM refresher training was provided to supervisors and social workers to further improve the use and fidelity to the tool.

CAPS utilizes Policies and Procedures (P&Ps) to ensure processes stay up to date with mandates issued via State ACLs/ACINs. In addition, the Child and Family Services Review (CFSR), also known as Federal Case Review process, is utilized to assess areas needing improvement. One CAPS social worker has been dedicated to reviewing cases for the Federal Case Review. The social worker assigned to this process provided staff with a presentation of case review findings in July 2018 to explain strengths, areas needing improvement and recommendations. Recommendations included: ensuring consistent documentation and utilization of the SDM Safety and Risk assessment tools, completion of the Family Strengths and Needs Assessment (FSNA), and to ensure thorough documentation regarding their contact and discussion with youth during the monthly home visits.

CAPS utilizes policies and procedures as well as updated trainings to keep staff informed of federal Indian Child Welfare Act (ICWA) laws/regulations. At the time a child is placed into protective custody, CAPS social workers have been trained to inquire of the parents and/or relatives about Indian ancestry, specifically if the child, parents, or extended family are enrolled with a federally recognized tribe and/or eligible for enrollment with a federally recognized tribe. If the family identifies enrollment/eligibility for enrollment, the social worker attempts to contact and notify the identified tribe immediately. The Juvenile Court also has an affirmative and continuing duty to inquire whether a child is or may be an Indian child. If there is reason to know the child is an Indian child, then CAPS must prove that active efforts were made to prevent the break-up of the Indian family and that those efforts were unsuccessful. Additionally, to the maximum extent possible, active efforts should be provided in a manner consistent with the prevailing social and cultural conditions and way of life of the Indian child's tribe and should be conducted in partnership with the Indian child and the Indian child's parents, extended family members, Indian custodians and tribe. Furthermore, if there is reason to know the child is an Indian child, then CAPS must follow the ICWA placement preference, i.e.: Indian child's extended family; Indian resource family approved by the Tribe and/or resource family approved by the Tribe.

The Multiethnic Placement Act (MEPA) of 1994, as amended, states that an adoption and foster care agency cannot deny a person the opportunity to become a foster or adoptive parent based on the race, color, or national origin of the parent or the child in foster care. CAPS goal is to place children in safe and nurturing homes. Denying or delaying a foster or adoptive placement based on race, color, or national origin is prohibited by Department policy and by law. Major provisions of MEPA include: MEPA allows an agency or entity to consider the cultural, ethnic, or racial background of a child and the capacity of an adoptive or foster parent to meet the needs of a child with that background when making a placement; has no effect on the provisions of the Indian Child Welfare Act of 1978; and made failure to comply with MEPA a violation of title VI of the Civil Rights Act. CAPS social workers make every effort to ensure that all placement determinations are made taking into consideration the best interests of the child. CAPS Placement and Adoptions social workers have received formal and informal training and education regarding MEPA.

CAPS sends referrals for behavioral health assessments to the embedded therapists that are contracted through Sutter Yuba Behavioral Health (SYBH). If it is determined that the client may benefit from mental health services they are referred to behavioral health services and, in some cases, to a psychologist for a psychological evaluation. Clients who qualify for Victims of Crime funding, which pays for counseling services, are connected with a mental health provider who accepts that form of payment for services. The effectiveness of mental health services is determined through interaction with the client receiving services, participation and progress evaluations from the therapist, and overall, the client demonstrating the identified behavioral change over time. Additionally, behavioral health providers utilize a variety of screening and assessment tools that allow the provider to track individual and family change over time.

CAPS contracts with SYBH to ensure the Pathways to Mental Health (Katie A.) requirements are met. In addition, a Public Health Nurse is assigned to CAPS to complete the developmental screening utilizing the Ages and Stages Questionnaire (ASQ) for children between the ages of 0 through 5 years old. The Mental Health Screening Tool (MHST) is being utilized for the mental health screenings for children/youth ages 0-17. Social workers are responsible for completing the mental health screening tool for children ages 0 through 17. The PHN enters the screening data into the Health Notebook in CWS/CMS for all cases. CAPS believes that early identification of developmental delays in infants and young children is essential and utilizes the CAPS Public Health Nurse to screen for delays in children. If delays are identified, referrals to appropriate services are made right away so that the child can begin receiving services to help address their needs.

The Public Health Nurse (PHN) and case carrying social worker are responsible for monitoring prescribed medications. The case carrying social worker communicates monthly with the resource parents who are advised to let the social worker know if there are any issues with medications. Foster Family Agency (FFA) resource homes also provide quarterly reports to CAPS regarding the child which covers behavioral, emotional, and physical health observations. Reports are completed for all medical and dental visits and are provided to the PHN to enter into the CWS/CMS statewide database system. The PHN ensures that the case

carrying social worker is provided with the information and documentation as well and discusses any identified issues with the social worker. All psychotropic medications must be prescribed by a Medical Doctor and approved by the Juvenile Court prior to the psychotropic medications being administered unless the medications were prescribed on an emergency basis at which time an authorization and Court Order is obtained as soon as possible following the emergency prescribed medications.

The PHN communicates with all resource families to identify any special needs that the child may have and will complete the appropriate referrals. Social workers are also responsible for monitoring any special needs. The CAPS foster care liaison with Yuba County Office of Education (YCOE) will also monitor school aged children for any special needs and help to ensure that their needs are being adequately met. To ensure the best placement for children, immediately upon placement, social workers are required to notify resource families of any special needs the child has and must notify any new resource family whenever there is a change in placement. Social workers are required to document in CWS/CMS that the resource family was provided with all available health and education information.

CAPS has made significant strides with family engagement through the implementation of Safety Organized Practice (SOP) and Child & Family Team Meetings (CFTs). CFTs are the central point that brings families, support systems, service providers and staff together to collaboratively discuss and develop the family case plan and/or Transitional Independent Living Plan (TILP) for age appropriate youth. After development of the initial case plan, CFTs are held at a minimum of every six months and/or as the need arises. Additionally, CFTs are held with the family to discuss placement options as well as to explore family finding efforts that are used for possible placement resources and/or lifelong supports/connections for the youth and family. The Initial CFT meeting must be held within 14 days of initial detention of the child(ren) and within 60 days from initial removal for case plan development. CFTs also need to be scheduled and held every 90 days for children receiving specialty mental health services. Also, who meet Katie A. subclass criteria, such as having three or more placements within a 24-month period, need to have a CFT every 90 days. CFTs are essential for team decision making and must be held when any member of the

child and family team believes a CFT should be held. A follow up CFT must be completed prior to each six-month case plan review or upon the identified need for another meeting to discuss and make other key decisions including placement change and additional needs and/or services.

The 366.26 Selection and Implementation Hearing is scheduled be held within four months or 120 days from the date of the hearing where services are either bypassed or terminated. The four-month timeframe is required to allow the Adoptions social worker time to complete the adoption assessment. If the Adoption social worker assesses the child is likely to be adopted and there is a potential adoptive parent identified, then the recommendation is to terminate parental rights so that the child can be adopted. Termination of parental rights only occurs if there is an identified prospective adoptive parent for the child(ren).

CAPS has a dedicated social worker who assists transitional age youth in locating a residence during the transition process which includes resource family homes, Transitional Housing Plus + Foster Care program (THP+FC), and a Supervised Independent Living Program (SILP). In addition, Yuba County utilizes the Youth Empowerment Strategies for Success (YESS) program that incorporates community training in the areas of education, employment, life skills and financial literacy. This program allows youth to obtain skills through field trips and retreats conducted in the community where they are able to complete hands on training in nutritional cooking, personal hygiene, banking, job searches, resume writing, housing applications, college applications, and computer skills.

Probation

Probation conducts monthly reviews of all placement cases to ensure compliance with the law and the progress of the youth and family. The supervising probation officer and placement officer conduct monthly reviews by reviewing case notes, case plans and any other relevant information to the youth and families are receiving all possible services available. By collaborating with peers and supervisors, the placement officer is able to explore various avenues and ensure youth receive the best available services. Due to the low number of

youth in out of home placement, it can be challenging to measure the achievement of performance since each individual case is unique in its circumstances.

The monthly reviews cover Title IV-E requirements, Probation Officer contacts with youth and parent/guardian, contact with placement facilities, educational and any other special needs programs the minor and his/her family may be participating in. Additionally, all placement cases are reviewed monthly at SuperCAT, a monthly Multi-Agency meeting, which includes probation, CAPS, school districts, behavioral health and community-based organizations. These reviews also include planning for the youth's transition from placement; whether that be reunification or to a lower level of care.

The Yuba County probation placement officer has assisted youth in locating an appropriate residence during the transition process; all of which have included various types of residences such as resource family homes, Transitional Housing Plus + Foster Care program (THP+FC), and a Supervised Independent Living Program (SILP). Despite the Probation Department's low number of youth participating in this program, the probation officer has experienced every eligible circumstance included in the extended foster care process. As a result, the Probation Department composed an extended foster care manual as a reference tool.

CAPIT/CBCAP/PSSF

The YCHHSD is responsible for monitoring the CAPIT/CBCAP/PSSF providers, integrating local services, data collection, preparing any necessary amendments to the Three-Year Plan, preparing annual reports and overseeing outcome evaluation. The department ensures subcontractor accountability through monthly monitoring of the providers' activity reports and financial invoices. Records and invoices are reviewed for accuracy and outcome measures are reviewed for progress.

The contractor is required to conduct client satisfaction surveys designed to track attendance and satisfaction and to determine if participants felt comfortable with the service and found it beneficial. The contractor is required to submit summaries of client satisfaction surveys at six-month intervals to the Yuba County Health and Human Services county liaison.

The contractor submits monthly reports and invoices that are carefully reviewed for accountability, grant/contract compliance, and data collection. Communication occurs between the contractor and the Yuba County Health and Human Services county liaison on a regular basis via the telephone and in-person which allows both parties to clarify grant compliance and adjust services as appropriate. The county liaison and CAPS program manager are responsible for monitoring the CAPIT/CBCAP contractor performance. Grant/contract compliance, data collection, and budget expenditures are monitored via the subcontractor's monthly reports and invoices. Invoices are logged monthly onto a spreadsheet to track expenditures.

PSSF activities are evaluated by a pre and post testing of participants in the parenting education classes. The parents are asked to complete a satisfaction survey and CAPS receives almost 100 percent of the participants responding to the survey. Additionally, CAPS monitors the re-entry and reunification outcome measures and evaluates the performance of those measures.

The initial step for a corrective action plan with a service provider would be the program manager reaching out to the service provider to review and discuss the concern. The program manager would review the expectation of the services being provided and would create an action plan. If improvement is still needed by the service provider after 30 days, the program manager would then take the issue to YCCW/CAPC begin a workgroup committee to address the concern and attempt to resolve the issue. If after 90 days, the service provider is unable to provide the contracted services, CAPS would then begin the termination process for the contract and seek another service provider.

Critical Incident Review Process

Yuba County CAPS participates in a quarterly Child Death Review Team (CDRT) meeting. Members of the CDRT include representation from the Yuba County Sheriff's Office (YCSO), Marysville Police Department (MPD), Yuba County District Attorney's Office, Yuba County CAPS, Emergency Medical Services, Yuba County Public Health, Victim Services, and community physicians. The role of the team is to review all accidental and non-accidental child deaths that occur in the County. The team discusses the circumstances that led to the event and identifies potential solutions that could help prevent future deaths. This team meeting is coordinated by YCSO who collects information and data regarding the child death(s) and presents the information to the team for discussion and team decision making. Other activities include reviewing progress with past prevention strategies.

If a child death is the result of abuse/neglect and there are other children in the home, CAPS coordinates with law enforcement and responds to investigate immediately to assess the risk to any other children in the home. CAPS investigates to determine if the (alleged) perpetrator is in the home and/or has access to the children, as well as determines if there is a protecting parent. Depending on the outcome of the investigation, other children in the home may have to be placed into protective custody for their protection.

CDSS has mandated specific reporting requirements whenever there is a child fatality or near fatality and the death or serious injury was caused by, or suspected to be caused by, abuse or neglect. Therefore, Yuba County CAPS has developed a policy and procedure regarding reporting and documentation responsibilities for child fatalities and near fatalities, which requires the submission of the Child Fatality/Near Fatality County Statement of Findings and Information (SOC 826), Part A, submitted within 5 business days of learning of the incident, followed by SOC 826 Part B re-submitted to CDSS within 10 business days of the determination of the cause of the fatality or within 10 business days of when CAPS is informed of the determination by the investigating agency (e.g. coroner, law enforcement).

Additionally, Yuba County HHSD has a Critical Incident Reporting Guidelines policy and procedure to provide staff with guidance and direction for accurate, consistent and timely reporting of critical incidents. The guidelines assist all levels of staff in addressing sensitive, potentially injurious, life-threatening, controversial and/or sometimes tragic critical incidents that may occur in the course of HHSD operations. The guidelines emphasize the requirement of verbally communicating critical incident information immediately to the Director of HHSD. In addition to the immediate verbal notification requirements, staff must also complete a written Critical Incident Report which must be available to the Director for review and signature as soon as possible after a critical incident has occurred.

National Resource Center (NRC) Training and Technical Assistance

Yuba County has not utilized training and/or technical assistance from the National Resource Center (NRC).

Peer Review Results

FOCUS AREA & METHODOLOGY

The Yuba County Peer Review was conducted in Marysville, California, May 30-June 1, 2018. Seven child welfare social workers from four counties and two probation officers from two counties participated as peer reviewers. The Peer Review process is used in California as an avenue for each county's child welfare and probation to conduct an in-depth qualitative analysis on one specific focus area, or outcome measure. This process requires both agencies to conduct a quantitative analysis of each state report outcome measure and, in partnership with the California Department of Social Services, select the outcome measure which requires a closer look. Yuba County Child and Adult Protective Services (CAPS) elected to examine recurrence within 12 months, specifically measure S2. Yuba County Probation decided to focus on permanency in 12 months for children in care 12 to 23 months, measure P2. Peer counties were selected to conduct the review based on a review of data statewide showing counties which consistently perform well on the selected outcome measures.

The Peer Review opened on the morning of May 30, 2018 with introductions and a training which included an overview of the C-CFSR, a description of Yuba County, identification of the outcome area which would be the focus of the review, and a discussion of County performance and progress towards these outcomes. Participating were California Department of Social Services consultants, Northern Training Academy staff (facilitators for the review), and child welfare and probation staff. The presentation was followed by training on the interview process and tools for the peer reviewers.

During the three-day review, a total of 11 interview sessions were conducted; nine of which were child welfare cases and two probation cases. Cases were selected for which the peer review planning team believed would elucidate both strengths and challenges existing in the system which contribute to the county performance on the appropriate outcome measure. The California Department of Social Services provided standardized tools for use during the Peer Review which were based on a review of the literature for best practices relating to each

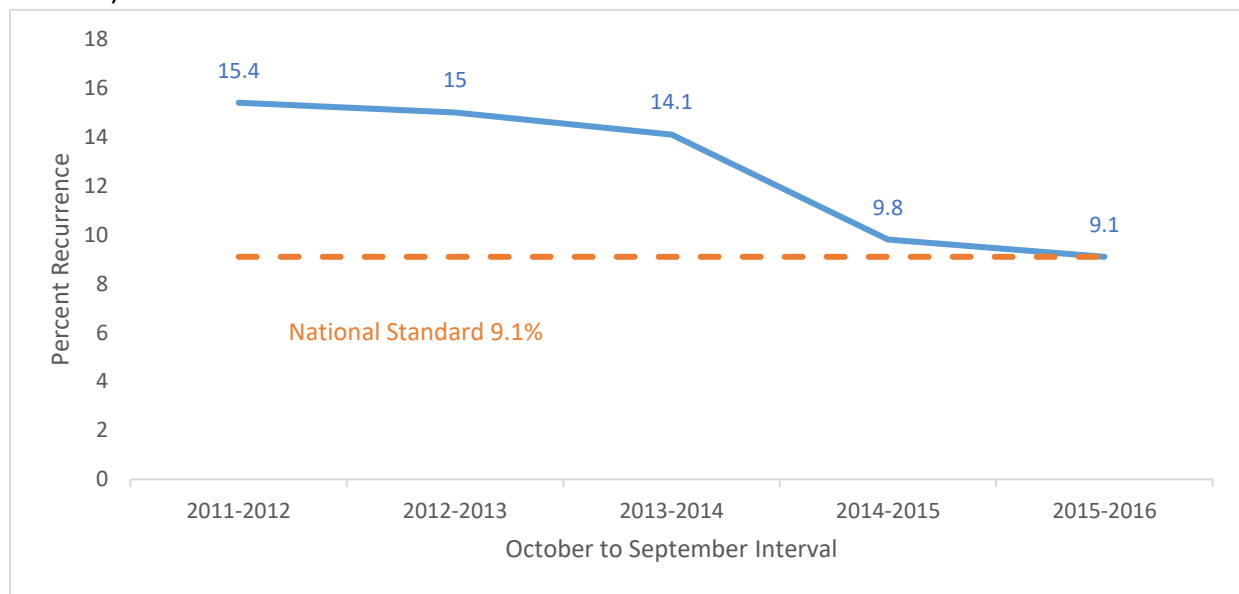
focus area. Once the cases were identified, social workers and probation officers who were the primary practitioners on the case were notified and given the appropriate interview tool to review so they could prepare. A total of 10 social workers and one probation officer were interviewed.

Following the completion of interviews, peers were provided time to debrief, during which they analyzed the interview information to identify common themes regarding strengths and challenges of the Yuba County child welfare and probation systems. They were also asked to provide recommendations for improvement. The summary of these themes are outlined in the Summary of Findings section that follows.

Child Welfare Focus Area

S2: Recurrence of Maltreatment

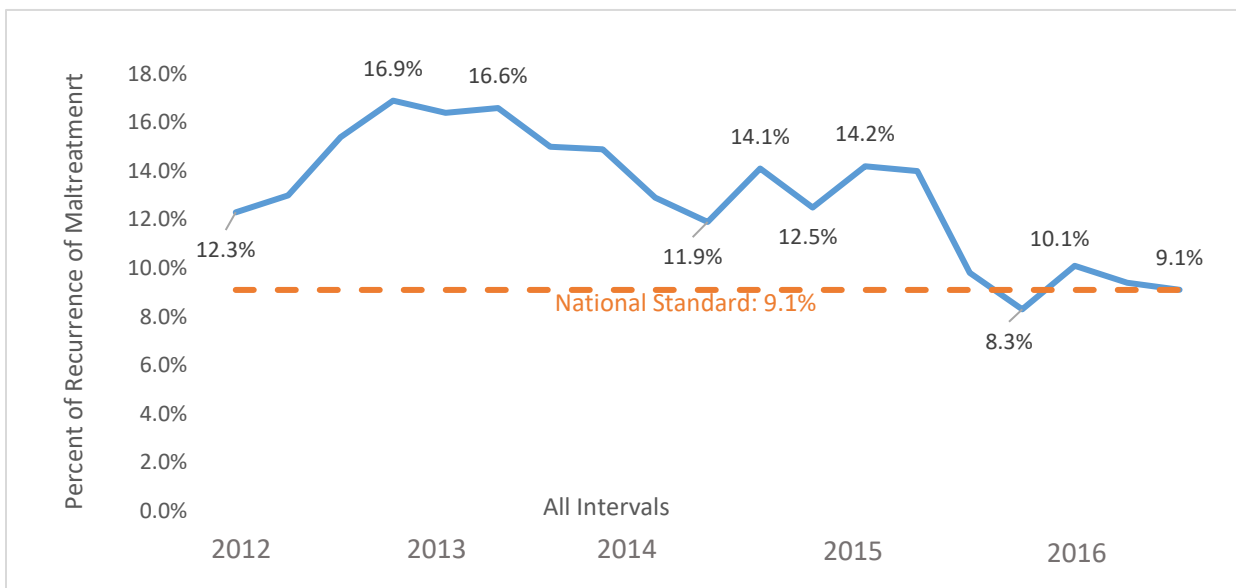
Figure 2.1: Percent of Recurrence in Child Welfare, Yuba County (October to September Interval)



Yuba County is an economically depressed area with pervasive community challenges with housing, alcohol and drug use and generational cycles of poverty. Cases of recurrence are often correlated with individual cycles of entering services or treatment, obtaining counseling or receiving welfare assistance, but then returning to the same community circumstances that led to maltreatment in the first place.

Yuba County has implemented several system-wide programmatic changes which are expected to improve outcomes, starting with recurrence of maltreatment. When looking at just one interval (October to September), there is a downward trend in Yuba's percentage of recurrence of maltreatment. When the data is displayed with all intervals in one graph, a clearer picture of the downward trend emerges; however, some fluctuation in performance does exist (see figure 2.2 below). Although some of this fluctuation may be due to the variability that exists with small numbers, Yuba was interested in finding out if some of the fluctuation and downward trend was related to the recent changes. Over the past few years, the fluctuation in percentages between 2014 and 2016 may be reflective of these changes.

Figure 2.2: Percent of Recurrence in Child Welfare, Yuba County (all intervals)



Several changes in practice may have also contributed to the improvement of recurrence rates in Yuba County in spite of the limited pool of resources in an economically depressed area. Yuba County has made significant strides in establishing a collaborative relationship with SYBH during the last cycle of data collection. Collaboration has increased dramatically with particular success in establishing mental health services. This success has bridged many gaps in services and improvement continues. Change in leadership provided an opportunity to develop new partnerships. Another important factor that may be contributing to the downward trend is that support systems have expanded throughout the county with the creation of a housing support program which provided additional stability in meeting

housing needs. Social workers from the HHSD Employment Services Division have concentrated on conducting more frequent home visits in the community due, in part, to increased collaboration with CAPS. Social workers are invited to CFT meetings, which assists with improving dialogue and communication. The collaboration process continues to develop and grow. All partners work together closely to identify responsibilities and track timelines for completion of tasks which have been delegated during the CFT process.

A social worker focus group discussion was held on June 18, 2018. During the social worker focus group discussion, considerable attention was placed upon the large gap between the substance-abuse rate in families with a history of neglect and services available for treatment. During the discussion a pattern became apparent that while one social worker may be aware of a specific service, other social workers were not. It was also common for social workers to disagree about whether services were still open or available, both for substance abuse and domestic violence.

Challenges with neglect due to parental substance abuse and mental health issues were significant themes in the stakeholder meeting held on June 19, 2018. Due to the widespread substance abuse affecting the counties' residents, the clinics and treatment programs are overwhelmed. This was also the dominating theme in both the social worker and social work supervisor focus groups facilitated during the peer review week. Issues arise when the system of care (community partners and in-house services) is impacted and cannot meet the demand. However, the county is implementing new strategies to ameliorate these challenges. Per the stakeholders, social workers are more frequently and more effectively using CFTs to assist families which has been correlated with recurrence prevention rates.

Probation Focus Area

Permanency in 12 Months for Children in Care 12 to 23 months

Yuba County Probation chose this focus area because there is a trend in detaining youth in placement that are closer to reaching the age of majority. The probation department wants to make sure that the youth in placement are receiving appropriate independent living

skills. The probation department assists these youth with making lifelong connections to ensure they are successful in adulthood.

Table 1: Permanency in 12 months for those in Care 12-23 Months

<i>Interval: October to September</i>					
<i>Measure</i>	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Achieved Permanency	0	0	0	0	1
Total Children	1	1	1	1	3
% Permanency	0%	0%	0%	0%	33.3%

Probation has consistently struggled to achieve permanency for their youth in placement. The average age of youth involved with probation and also in placement is 17. This trend is consistent with state trends in similarly aged populations.

The majority of the youth in placement are adjudicated of a sex offense. Some of the youth have attempted to complete the treatment in the local area, however have not been successful. This is either due to reoffending or lack of monetary funds. A barrier that probation youth encounter is the lack of juvenile sex offender treatment in the local area. There is only one program in the local area that offers juvenile sex offender treatment at a high cost. With this population, public safety is taken into consideration and the youth are ordered by the court to complete their treatment. Most juvenile sex offender treatment programs are not completed within this desired timeframe.

Peer Review Summary of Findings – Child Welfare

In the course of their individual case review and debrief, peer reviewers were asked to identify and assess promising practices, barriers/challenges and to make recommendations for improvement and share promising practices from their own counties. The following sections outline those findings:

Strengths

Peer reviewers identified several best practices utilized by Yuba County CAPS which impacts recurrence, both systemically and individually.

Individual Staff Strengths

- Social workers were well educated, with diverse experience in and outside of Child Welfare.
- Social workers are committed to keeping families together.
- Social workers are knowledgeable about resources and service providers available to best align with family's needs.

Engagement & Use of Best Practices in Case Planning

- Social workers utilized multiple CFTs and safety mapping.
- Social workers utilized SDM.
- Social workers have concrete expectations discussed with family.
- There is timely contact consistent with collaboration.
- Safety planning with family support and involvement is present.
- Social workers provided all families with available resources to meet needs of family.
- Social workers utilized community based programs/resources well and creatively.
- Social workers maintained contact with family over an extended period of time; safety plans were completed.

Organizational Strengths

- Social workers receive strong, reliable guidance from supervisors in assisting in response; no individual decisions are made regarding referral/case without a supervisor.
- Constant staffing, guidance, and involvement of supervisors.
- Social workers were provided foundational trainings.
- Social workers have great collaborative partnerships with service providers, community partners, and law enforcement.

Challenges

Peer reviewers identified specific challenges Yuba County CAPS face in regards to recurrence of maltreatment:

Case Planning Challenges

- Social workers struggle with a lack of due diligence in locating fathers.

- High risk referrals are closed too quickly without enough follow through, investigation, and/or background information.
- Not offering high risk referrals voluntary family reunification and voluntary family maintenance.
- In some cases, Structured Decision Making is still not utilized as an assessment tool.
- Social workers struggle with handling parent's prior negative family environment which impacts their ability to engage.
- Social workers struggle with follow-through on cases to ensure the referral result reached was accurate to ensure safety. No follow up contact with family to assess for safety and/or offer referrals for services.

Organizational Challenges

- Distribution of cases and referrals is not equal which can impact the quality of investigations and casework.
- Limited resources (vehicles, cell phones, community partners) impacts social workers' ability to best serve families.
- Lack of protected time to attend needed trainings.
- Social workers sometimes create safety plans lacking support network, follow up, and behavior specific interventions.
- Social workers face heavy workload challenges which impacts ability to assess, engage, and fully work with families.
- There are few specialized trainings available for workers to attend (regardless of workload).
- Investigations lack thorough assessment and depth of bigger picture.

Recommendations

Peer reviewers were asked to detail promising practices used by their counties regarding recurrence of maltreatment and make potential recommendations:

- Consider implementation of formal Review, Evaluate and Direct (RED) team process which includes the social workers;
- Encourage and support updated, relevant and specialized trainings to assist staff in meeting the needs of population served (substance abuse, codependency, domestic violence);
- Consider transferring cases to ongoing worker after Juris;
- Reevaluate response times for referrals related to marijuana (THC) positive-toxicology tests;
- Consider worker safety as it relates to current cellular phone policies, consider providing work cellular phones to all social workers and potential use of iPads;
- Possibly assign referrals from on-call to ER unit next business day;

- Written Safety Plans need to include Safety Network ID and verified, behavior specific, follow up by social worker prior to closing;
- Consider more vigorous use of SDM (completed prior to each stage of case/referral) and as an assessment tool to guide practice;
- Consider streamlining case management by assigning an ongoing social worker as a secondary worker to begin to familiarize and collaborate with the ER social worker (for smoother transition and to reduce ER workload);
- Consider applying for grants to obtain additional resources and funding (MAA money);
- Possibly offer bilingual services (language line, utilizing county wide staff);
- Encourage/support specialized training;
- Consider availability of vehicles and/or opportunity to use personal vehicles and reimburse for mileage;
- High risk referrals should be required to be staffed for potential VFM/VFR prior to referral closure; and
- Consider recruiting interns/extra help for workload issues.

Summary of Findings - Juvenile Probation Services

Yuba County Probation chose to focus the peer review on permanency within twelve months (P2).

Strengths

Peer reviewers discussed strengths regarding probation staffs' individual strengths:

- The staff are seasoned, educated, and well-rounded.
- Staff utilized county, federal, and local resources effectively.
- Dedication to finding placements for youth, including RFA/THP, was above and beyond.
- Staff have excellent collaboration skills.
- Staff developed a committed relationship with clients and had great rapport.
- Staff are consistent, persistent and committed to clients.

Challenges

Peer reviewers identified specific challenges Yuba County Probation faces in regards to permanency in 12 months, which include:

- Permanency in care at very young age can be discouraging for the youth.
- There are challenges with inadequate local resources for youth special needs.
- Technology the county uses is a barrier.
- There are limited bilingual services for family.

Recommendations

Peer reviewers were asked to make recommendations to improve outcomes for Yuba County Probation regarding permanency in 12 months. Recommendations identified during the peer review included:

- Consider monthly IPC meetings on all placement cases;
- Consider county-issued phones/texting availability;
- Possibly extend ability to attend conferences on CCR/RFA;
- Consider speaking with local foster/kinship groups regarding education about probation youth;
- Potentially provide more robust ILP to assist with transition; and
- Consider family mapping at onset of case.

Outcome Data Measures

****All data for this Outcome Data Measure Section is from the following citation:**

Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). CCWIP reports. Retrieved 5/21/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: <http://cssr.berkeley.edu/ucb_childwelfare>

Table 2: Summary of Federal Outcome Measures in Child Welfare

Statewide Data Outcomes and Measures	National Standard	Yuba County	Ranking in the state (out of 58 counties)
Measures for Safety Outcome 1			
3-S1 Maltreatment in Foster care (October 2016-September 2017)	No more than 8.50 victimizations per 100,000 days in care	No Children Meet Criteria	n/a
3-S2 Recurrence of Maltreatment (October 2015-September 2016)	No more than 9.1%	9.1%	26 th out of all 58 counties
Statewide Data Measures for Permanency Outcome 1			
3-P1 Permanency in 12 Months for Children Entering foster care (October 2015-September 2016)	At or above 40.5%	40.8%	26 th out of the 55 counties for which outcome data on this measure are available.
3-P2 Permanency in 12 Months for Children in foster care 12 to 23 Months	At or above 43.6%	40.0%	42 nd out of the 57 counties for which outcome data on this measure are available.
3-P3 Permanency in 12 Months for Children in foster care 24 Months or More	At or above 30.3%	48.8%	10 th out of the 55 counties for which outcome data on this measure are available.
3-P4 Re-Entry to foster care in 12 Months (July 1, 2014 to June 30, 2015)	No higher than 8.3%	4.2%	2 nd out of the 47 counties for which outcome data on this measure are available.
3-P5 Placement Stability (October 2016-September 2017)	No more than 4.12 moves per 1,000 days in Foster care	5.07 (1 case)	43 rd out of the 55 counties for which outcome data on this measure are available.
Entries to Care	California state average (no national standard): 3.1 entries per 1,000 children in the state	4.6 per 1,000 children	35 th out of all 58 counties

CFSR3: SAFETY PERFORMANCE AREA 1: MALTREATMENT IN FOSTER CARE (3-S1)

Measure

This is a Federal/CWS Outcome Measure that reports the rate of victimization per day for all children in foster care in Yuba County. This measure assesses the degree to which children in child welfare approved placements are abused or neglected.

Methodology

The denominator is the total number of days children were placed in foster care at the end of a 12-month period. Records with an incident date occurring outside of the removal episode are excluded, even if report dates fall within the episode. For days to be included in this count, the foster care episode must be eight or more days in length. The denominator only counts days in foster care for children younger than 18 years. For youth who start out as 17 years of age and turn 18 during the period, days in foster care beyond 18 years of age are not included in the count.

The numerator is the total number of substantiated or indicated reports of maltreatment (by any perpetrator) during a foster care episode within the same 12-month period.

Performance

Performance for this measure is the numerator divided by the denominator and multiplied by 100,000. This rate is expressed in terms of 100,000 days for ease of interpretation. Rates reported for this measure, in this report, differ slightly from federal rates reported by the Children's Bureau due to limitations when constructing the NCANDS and AFCARS files.

National Standard

The national standard for this measure is performance less than or equal to 8.50 substantiated incidents per 100,000 total days in Foster care.

Child Welfare Data & Analysis

Table 3: Maltreatment in Foster Care

<i>Interval: October to September</i>					
<i>Measure</i>	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Rate of Maltreatment (cases per 100,000 days) in Foster Care	13.12	No Children Meet Criteria		3.5	No Children Meet Criteria
Instances of Substantiated Maltreatment in Foster Care	6	0		2	0

The data shows that there are no instances of maltreatment in foster care for 2016-2017 and a total of eight cases in the county within the past five years. Yuba County expected there to be more cases within the past five years than documented here which may indicate issues with data entry practices in the county. Yuba County is a fairly small county where the rate of maltreatment in foster care may not necessarily reflect the good practices that are occurring in the county. There are such low instances of maltreatment in foster care therefore, this indicator rate is not monitored. Rather, the county implements a weekly mandatory practice of monitoring reports of instances of maltreatment in foster care, potential concerns are reviewed and treated as an important standing agenda item. The county will be evaluating the manner in which this information is captured.

Probation Data

There are no children in care who met criteria for this measure in this interval during the past five years.

CFSR3: SAFETY PERFORMANCE AREA 2: RECURRENCE OF MALTREATMENT (3-S2) MEASURE

This Federal/CWS Outcomes Measure reports the percent of children who were victims of a second substantiated maltreatment allegation within a 12-month period. This measure assesses the degree to which Yuba County effectively addresses maltreatment in order to prevent further incidents.

Methodology

The denominator is the number of children with at least one substantiated maltreatment allegation. The numerator is the number of children with another substantiated maltreatment allegation within 12 months of their initial report. Subsequent reports of maltreatment within 14 days are not counted as recurrent maltreatment. Youth who are age 18 or more are excluded from the calculation of this measure.

Performance

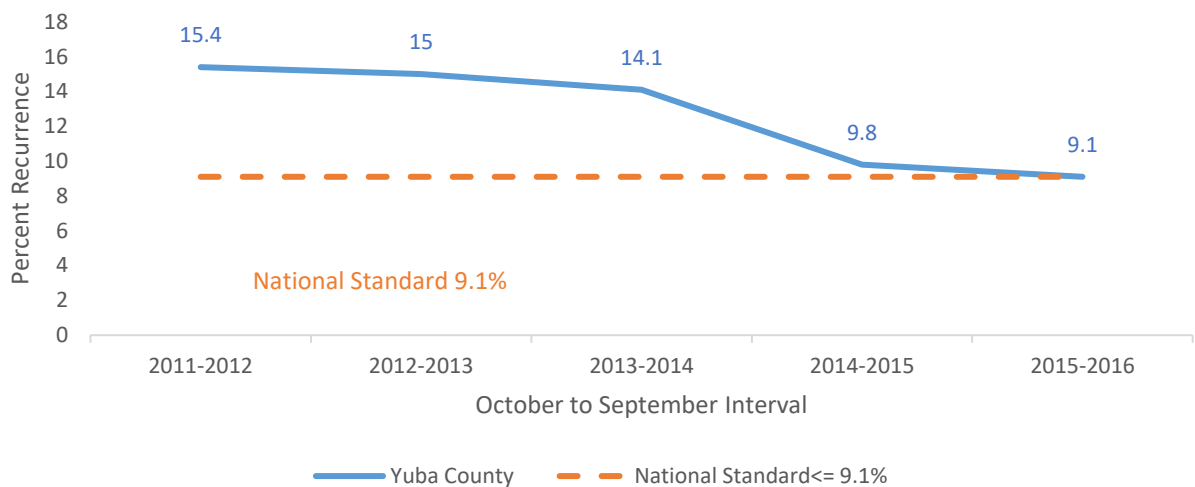
Performance for this measure is the numerator divided by the denominator, expressed as a percent.

National Standard

The national standard for this measure is performance less than or equal to 9.1%.

Child Welfare Data

Figure 2.3: Recurrence of Maltreatment



For a full review of child welfare performance in recurrence of maltreatment please see Peer Review Results.

Probation Data

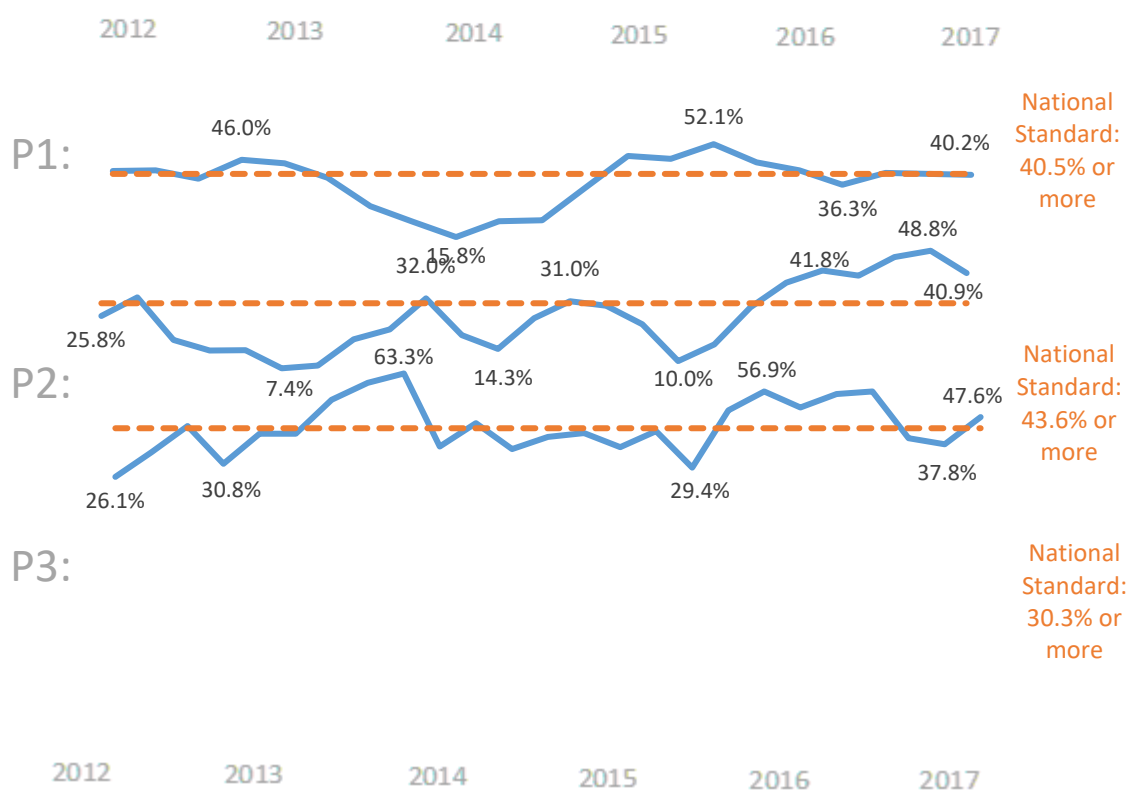
There is no probation data available on this measure.

PERMANENCY RATES AT A GLANCE (P1, P2, P3)

Yuba County's communities face pervasive challenges with overall indicators of stability such as permanent housing, stable employment, physical and mental health and sober livelihood. All of these issues are systemically interrelated, particularly their relationship to permanency placement types such as reunification and kinship which can be a challenge for social workers to manage. Parents sometimes find themselves back in the same negative life circumstances after interventions are completed and permanency may not occur. Potential kinship family members struggle with the similar challenges because many of these issues are pervasive throughout the county, excluding them from placement and further limiting potential placement types.

Despite these challenges, Yuba has recently been successful in achieving national standards or better for all three permanency measures: children in care less than 12 months (P1), children in care 12-23 months (P2) and children in care 24 months or longer. Historically, Yuba's permanency rates have fluctuated partly due to fairly small sample sizes, particularly for P2 and P3 (range: 17-51 children). However, it is worth noting the size of the fluctuations is trending downward. Below are graphs for all three measures displaying all available quarterly permanency rates (in percentages) from April 2012 to March 2017. This is a general snapshot of permanency over the past five years. In-depth analysis for each measure is provided in future sections of this report.

Figure 2.4: Percent of Exits to Permanency for children in care less than 12 months (p1), 12-23 months (P2), and 24 months or longer (P3), all intervals



In addition to the struggles with family placements and kinship placements, one of the consistent struggles in Yuba County is a lack of qualified resource family homes. Resource families stated in their focus group session that they are invested in becoming permanent guardians for children; however, success of placement is limited by lack of supports. There is a lack of services for resource families who agree to house and care for children. For example, in the focus group with resource families this concern was a significant theme and families expressed frustration with being given emergency placements with little to no support. Basic things that would better contribute to successful placements are not available. Things like infant safety items (car seats, cribs, and winter pajamas), transportation and logistical support for all required doctor, dental and mental health appointments, and respite care were some of the most pressing concerns. Recently, Yuba County has made significant progress in the use of Child-Family Teams (CFTs) and this may be one reason why permanency is improving. Potential

supports and placement resources are being defined in the CFT process which is fairly new to the county. The hope is that the CFT process continues to be fully implemented and refined.

Information related to permanency was collected at the stakeholder meeting. Stakeholders indicated a need for more family resource centers in satellite areas both in and around Yuba County neighborhood areas. There was considerable discussion around access to available mental health, substance abuse, medical care services with such a difficult and time-intensive bus schedule. Transportation throughout Yuba and Sutter counties (between Marysville, Yuba City and surrounding suburban areas) is difficult and clients often do not follow through with prescribed services simply because it could take hours to get to the building. Outcomes related to permanency are significantly diminished when considerable focus is placed on parents completing their prescribed “checklist” of services and not on behavioral outcomes because simply attending services is a barrier.

Stakeholders also discussed the pressure upon parents to choose between services or employment. Parents feel the pressure to find, attend and complete the limited services during the day, which also competes with achieving stabilizing factors such as attempting to find a job, housing, or finishing school. The barriers of access due to transportation, time offered, and waitlists add to the chances of failure to meet criteria for permanency. Stakeholders suggested offering mobile mental health services and partnering with other counties for alternative transportation offerings such as an Uber-like city system.

CFSR3: PERMANENCY PERFORMANCE AREA 1: PERMANENCY IN 12 MONTHS FOR CHILDREN ENTERING FOSTER CARE MEASURE (3-P1)

This is a Federal/CWS Outcomes Measure that reports the percent of children in foster care who discharged to permanency within a 12-month period. Permanency is described as a child living in a safe and permanent home, outside of foster care. This measure emphasizes the need for CWS to reunify or place children in other permanent homes within 12 months from removal.

Methodology

The denominator is the number of children who enter foster care in a 12-month

period. Children who are in foster care for less than 8 days are excluded. Children who enter foster care at age 18 or more are excluded. For children with multiple episodes during the same 12-month period, this measure only evaluates the first episode within the period.

The numerator is the number of children in the denominator who discharged to permanency within 12 months of entering foster care. For the purposes of this measure, permanency includes exit status of 'reunified', 'adopted' or 'guardianship'. Children with a current placement of 'trial home visit' are included in the count of children reunified if that visit lasted at least 30 days, its start date fell within 11 months of the latest removal date, and it was the final placement before the child was discharged from foster care to reunification. For details, please see Exit Status.

Performance

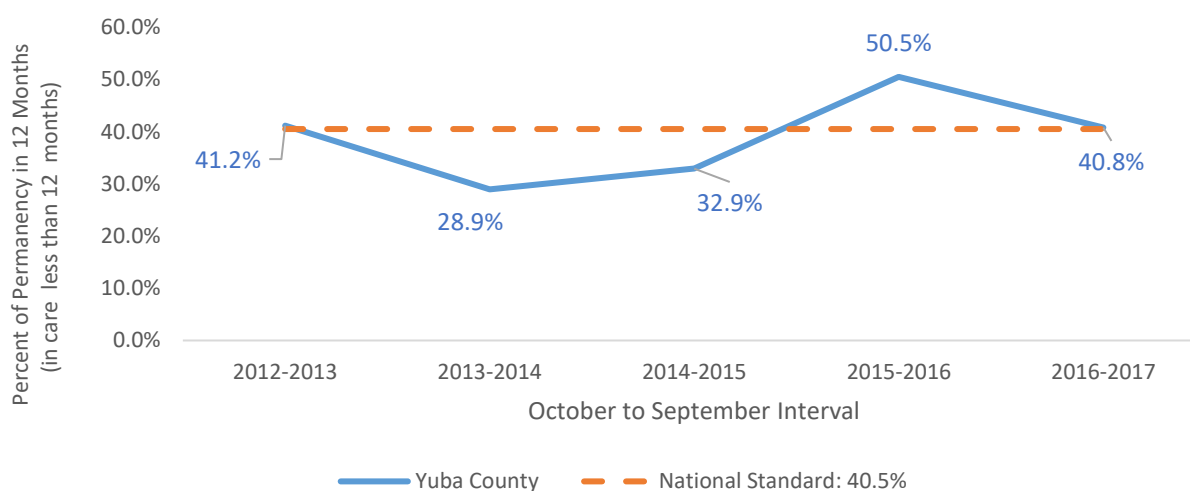
Performance for this measure is the numerator divided by denominator and expressed as a percent.

National Standard

The national standard for this measure is performance greater than or equal to 40.5%.

Child Welfare Data & Analysis

Figure 2.5: Permanency in 12 Months, children in care less than 12 months



Yuba County CAPS has achieved the national standard of permanency in 12 months for those in care less than 12 months for the past two years. There was a slight dip in permanency rates; however, numbers have recovered and were just barely above the national standard of 40.5% for 2016-2017. Below is a table of the different permanency types used over time. The vast majority of children are reunified with their families. However, another contributor to recent success is the inclusion of two adoptions and three guardians, a pattern that has not existed in the past. These may be sibling sets as this group of children has increased over time.

The following did not exit/reunify timely:

- During 2012-2013, CAPS served 8 sibling sets of 3 or more children which totaled 26 children.
- During 2013-2014, CAPS served 11 sibling sets of 3 or more children which totaled 38 children.
- During 2014-2015, CAPS served 5 sibling sets of 3 or more children which totaled 19 children.
- During 2015-2016, CAPS served 6 sibling sets of 3 or more children which totaled 20 children.

The high number of sibling sets in 12/13 and 13/14 are believed to have contributed to lower rates in permanency those years and then increased permanency rates in 14/15 and 15/16 when total children in sibling sets was lower.

Table 4: Percent of Permanency in 12 Months by Permanency Type

<i>Interval: October to September</i>					
<i>Measure</i>	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
Reunified	27	22	25	51	37
Adopted	1	0	1	0	2
Guardianship	0	0	0	0	3
Total Children	68	76	79	101	103
% Permanency	41.2%	28.9%	32.9%	50.5%	40.8%

Probation Data & Analysis

Table 5: Permanency in 12 Months for Children in care less than 12 months

<i>Interval: October to September</i>					
<i>Measure</i>	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
Achieved Permanency	0	0	0	2	0
Total Children	1	5	1	5	2
% Permanency	1	0%	0%	40%	0%

Probation has consistently struggled to achieve permanency for their youth in placement who have stayed 12 months or less. The average age of youth in probation and also in placement is 17. This trend is consistent with state trends in similarly aged populations. Probation has had difficulties with this measure due the specialized treatment programs needed for these probation youth. The majority of probation youth are adjudicated of a sex offense and most juvenile sex offender treatment programs exceed 12 months.

CFSR3: PERMANENCY PERFORMANCE AREA 2: PERMANENCY IN 12 MONTHS FOR CHILDREN IN FOSTER CARE 12-23 MONTHS (3-P2) MEASURE

This is a Federal/CWS Outcomes Measure that reports the percent of children discharged to permanency who were in foster care for 12 – 23 months. This measure emphasizes the need for CWS to reunify or place children in other permanent homes within 12 months from removal.

Methodology

The denominator consists of the number of children in Foster care on the first day of the 12-month period who had been in Foster care (in that episode) between 12 and 23 months. Children age 18 or more on the first day of the 12-month period are excluded. The numerator includes those children with a placement episode termination date that occurred within 12 months of the first day of the 12-month period, and a placement episode termination reason coded as exited to reunification with parents or primary

caretakers, exited to guardianship, or exited to adoption. The category, 'exited to non-permanency', includes those who exited care before 12 months, but not to one of the permanent exit types that make up the numerator. The category 'Still in Care' is those children and youth who remained in care at the end of 12 months.

Performance

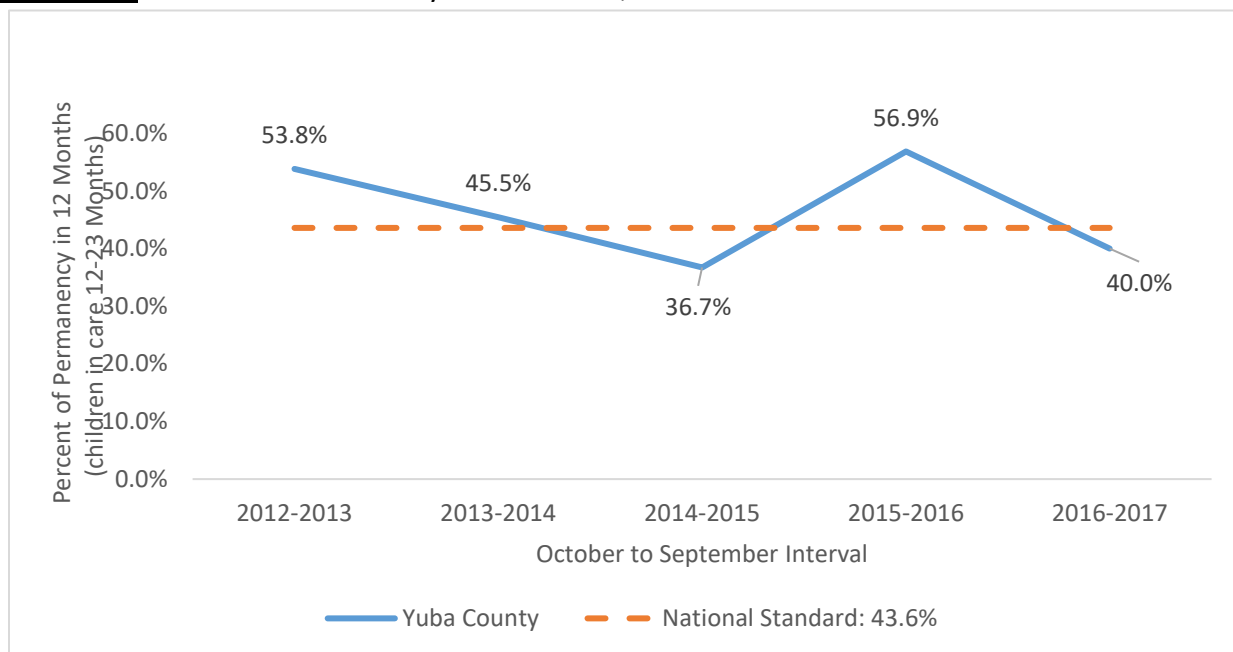
Performance for this measure is numerator divided by denominator and expressed as a percent.

National Standard

The national standard for this measure is performance greater than or equal to equal to 43.6%.

Child Welfare Data & Analysis

Figure 2.6: Percent of Permanency in 12 Months, for Children in care 12-23 months



For those children in care 12 to 23 months, Yuba has achieved the national standard for three of the past five years for the October to September interval. During the last cycle, Yuba fell just 3.6% below the national standard, which would be a difference of less than two children with this small sample size of 35. In all past years, at least some children reunified with their families but Yuba did not have any success in this category which contributed to the slight dip below the national standard. Of the children who did not achieve permanency, there were three sets of three siblings who were attempting, but failed reunification in 2016-2017.

Table 6: Percent of Permanency in 12 Months, for children in care 12-23 months, by Permanency Type

<i>Interval: October to September</i>					
<i>Measure</i>	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Reunified	3	1	8	14	0
Adopted	11	13	6	13	14
Guardianship	0	1	4	2	0
Total Children	26	33	49	51	35
% Permanency	53.8%	45.5%	36.7%	56.9%	40.0%

Probation Data & Analysis

Table 7: Percent of Permanency in 12 Months by Permanency Type

<i>Interval: October to September</i>					
<i>Measure</i>	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Achieved Permanency	0	0	0	0	1
Total Children	1	1	1	1	3
% Permanency	0%	0%	0%	0%	33.3%

Probation has consistently struggled to achieve permanency for their children in placement 12 to 23 months, with only one of seven children achieving permanency in that time during this interval. The average age of children in probation and also in placement is 17. This trend is consistent with state trends in similarly aged populations. Probation has had difficulties with this measure due the specialized treatment programs that probation youth need. The majority of probation youth are adjudicated of a sex offense. Most juvenile sex offender treatment programs exceed 12 months.

CFSR3: PERMANENCY PERFORMANCE AREA 3: PERMANENCY IN 12 MONTHS FOR CHILDREN IN FOSTER CARE 24 MONTHS OR MORE (3-P3) MEASURE

This is a Federal/CWS Outcomes Measure that reports the percent of children discharged to permanency after 24 or more months in care. This measure emphasizes the need for CWS to continue to achieve permanency for children who have been in foster care for 2 or more years.

Methodology

The denominator consists of the number of children in Foster care on the first day of the 12-month period who had been in Foster care (in that episode) more than 24 months. Children age 18 or more on the first day of the 12-month period are excluded. The numerator includes those children with a placement episode termination date that occurred within 12 months of the first day of the 12-month period, and a placement episode termination reason coded as exited to reunification with parents or primary caretakers, exited to guardianship, or exited to adoption. The category, 'Exited to non-permanency', includes those children who exited care before 12 months, but not to one of the permanent exit types that make up the numerator. The category 'Still in Care' reports children and youth who remained in care at the end of 12 months.

Performance

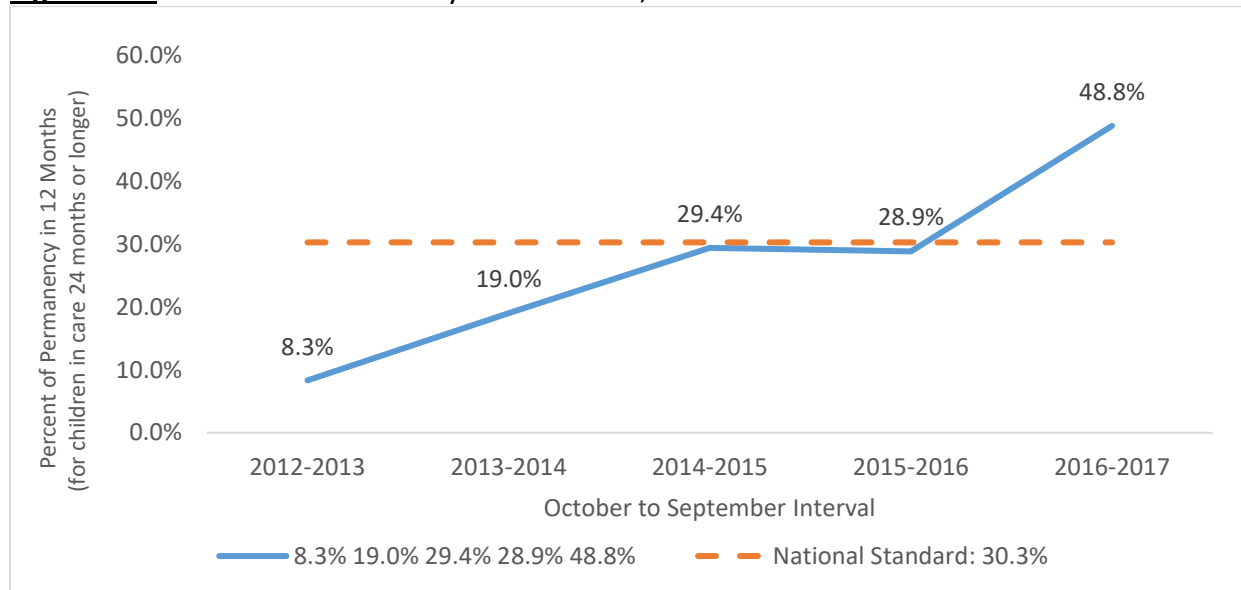
Numerator divided by denominator and expressed as a percentage.

National Standard

The national standard for this measure is performance greater than or equal to 30.3%. For details, please see Risk Adjustment and National Standards.

Child Welfare Data & Analysis

Figure 2.7: Percent of Permanency in 12 Months, for Children in care more than 24 months



The data displayed in the graph above shows that Yuba County is improving in this measure consistently over time (October to September interval). The table below displays counts of the different permanency types over time.

Table 8: Percent of Permanency in 12 Months by Permanency Type

Interval: October to September					
Measure	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Reunified	1	2	0	6	3
Adopted	1	2	10	7	18
Guardianship	0	0	0	0	0
Total Children	24	21	34	45	43
% Permanency	8.3%	19.0%	29.4%	28.9%	48.8%

One potential reason that performance has improved is that Yuba County is having more success with adoptions, which tended to be more a more common permanency type for this measure since adoptions take time. Another potential reason is that Yuba County is working with more sibling sets than in previous years and they may tend to be adopted together. Children are struggling with generational cycles of poverty and trauma which lead to behavioral challenges in permanency. Reunification, adoption and guardianship take longer for

the children with the most significant needs, which tend to be the groups of children in care 24 months or longer. In 15-16, Yuba CAPS had a sibling group of 3 that were adopted. In 2017, there was a sibling group of four and a sibling group of three that were adopted. There was also a sibling group of two. Cases that fall into P3 typically occur due to working with the parents to reunify or due to there being delays in the court system (terminating parental rights, continuances, ICWA, etc.).

Probation Data & Analysis

Table 9: Percent of Permanency in 12 Months by Permanency Type, Probation

<i>Interval: October to September</i>					
<i>Measure</i>	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Achieved Permanency	1	0	0	0	0
Total Children	2	2	3	3	3
% Permanency	50%	0%	0%	0%	0%

Probation has consistently struggled to achieve permanency for their children in placement for 24 months or longer, with only 1 of 13 children achieving permanency in the past five years. The average age of children in probation and also in placement is 17. This trend is consistent with state trends in similarly aged populations. Probation youth have not been able to complete juvenile sex offender treatment program within the 24-month period. Probation youth have generally been victims and must first work through their own trauma before being able to address the present offense. The goal of probation is to ensure that the youth have completed their treatment and rehabilitative goal in order to locate a least restrictive placement.

CFSR3: PERMANENCY PERFORMANCE AREA 4: RE-ENTRY TO FOSTER CARE (3-P4)

Measure

This is a Federal/CWS measure that reports the percent of children who discharge to permanency and then re-enter foster care within a 12-month period. This measure can be used to understand reunification in terms of safety, appropriateness and sufficient

supports in order to prevent subsequent maltreatment and re-entry.

Methodology

The denominator is the number of children who entered foster care and discharged to reunification or guardianship. Children in foster care for less than 8 days or who enter or exit foster care at age 18 or older are excluded.

The numerator is the number of children in the denominator who re-entered foster care within 12 months of their discharge to reunification or guardianship. Only the first re-entry into foster care is selected for children who re-enter multiple times.

Performance

Performance is calculated by numerator divided by denominator and expressed as a percent.

National Standard

The national standard for this measure is performance less than or equal to 8.5%.

Child Welfare Data & Analysis

Figure 2.8: Percentage of Reentries to Care

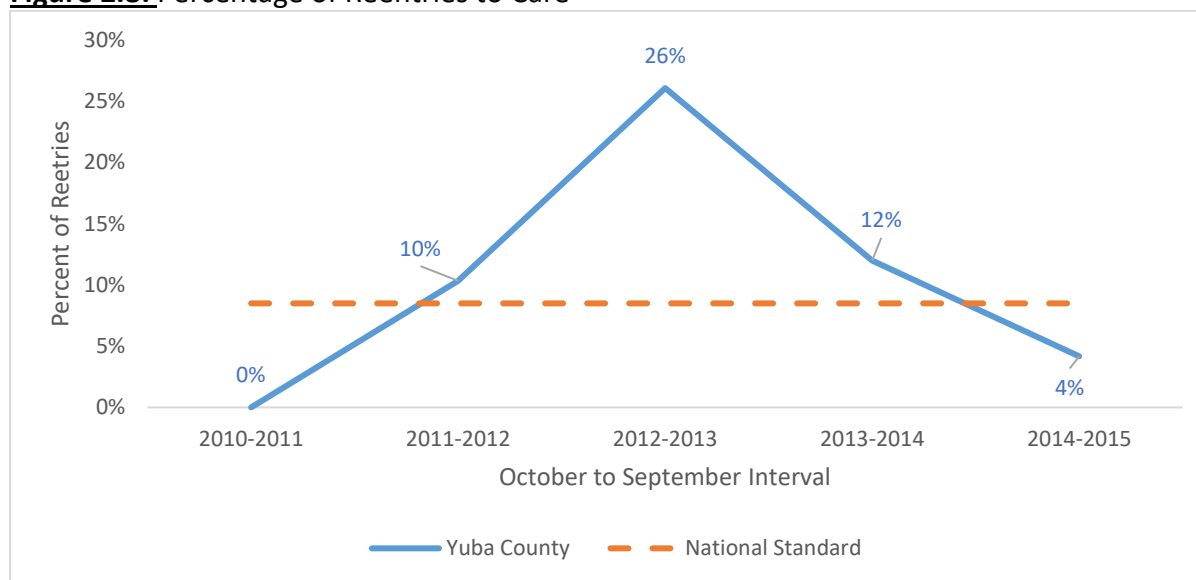


Table 10: Percent of Reentries to Care

<i>Interval: October to September</i>					
<i>Measure</i>	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
Reentries	0	3	6	3	2
Total Children	34	29	23	25	48
% Reentries	0%	10%	26%	12%	4%

Re-entries into foster care are on a downward trend in Yuba County. With the significant jump in the number of cases meeting criteria for 2016-2017 (25 to 48), few re-entered (only 2). Yuba continues to work in a community with pervasive challenges as previously described. Although re-entry rates are low, with the number of children entering care ever increasing and putting potential strain on the system, it is important to monitor future re-entry rates. The hope is that the work being done on the front end supports/services (CFTs, improving community partnerships) will impact the downstream effects of re-entry.

With reference to re-entry, stakeholders indicate there needs to be a more realistic timeframe for children and families to address their issues. There could be more work done to create more intensive transitional plans, follow-up protocols, and stronger support networks in safety plans. Currently there is lack of outcome tracking and evidence-gathering to find root causes of re-entry in the county. More evaluation of successful cases could potentially provide insight into what works well for Yuba County families.

Probation Data & Analysis

Table 11: Count of Reentries to Care

<i>Interval: October to September</i>					
<i>Measure</i>	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
Reentries	No Children Meet Criteria for this measure				0
Total Children					1
% Reentries					0%

There have been no re-entries to care in probation for the past 5 years and only 1 case that has met criteria, which is in the past year. The probation department offers the family

support and sets up family services upon reunification. This has been beneficial for no reentries.

CFSR3: PERMANENCY PERFORMANCE AREA 5: PLACEMENT STABILITY (MOVES PER 1,000 DAYS)

(3-P5) MEASURE

This is the rate of placement moves for all children who enter Foster care within a 12-month period. This measure addresses placement stability as a critical component of permanency and the well-being of children in foster care.

Methodology

The denominator is the total number of days in foster care. Days in foster care for children who enter over the age of 18 and episodes less than 8 days are excluded. Days in care are cumulative across episodes that are reported in the same year. Days in care for children over 18 years are not counted.

The numerator is the total number of placement moves. Removal from the home/initial placement in foster care is not counted as a move, but all subsequent moves are included. Entries to care and exits from care, including exits to trial home visits, runaway episodes, and respite care, are not counted as moves.

Performance

Performance for this measure is the numerator divided by the denominator, expressed as a rate per 1,000 days. The rate is multiplied by 1,000 to produce a whole number to ease in interpretation. A decrease in the rate per 1,000 days indicates an improvement in performance.

National Standard

The national standard for this measure is performance less than or equal to 4.2 per 1,000. For details, please see Risk Adjustment and National Standards.

Child Welfare Data & Analysis

Table 12: Placement Stability

<i>Interval: October to September</i>					
<i>Measure</i>	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Rate of Placement Moves per 1,000 Days	4.86	3.85	4.2	4.24	5.07

Yuba County has struggled to meet the national standard of below 4.2 moves per 1,000 care days for the past three years (October to September interval). Yuba County relies primarily on Foster Family Agency (FFA) homes for placement and the most important factor affecting placement stability is the significant lack of approved homes to meet the moderate to severe needs of Yuba's foster care youth. Particularly, placement with relatives/NFREM placement is underutilized. Yuba CAPS relies heavily on foster homes which is not found to be a best practice.

When there are few homes to use, children may be placed in homes which are not a good fit and have lower chances of success. Cultural sensitivities, medical and or behavioral needs, and other special needs may not be adequately met. Resource families usually fill up quickly and pressure builds, leading to placement instability. Other factors in placement stability are limited access to services and absence of timely services for children in Yuba County which severely limits the success of placements. Individual success improves when counseling and other important services are immediately provided to those in need. When acquiring these services takes too long, placement stability is impacted. Yuba County is committed to being more creative and innovative in the court process and family-finding. This potentially will improve the number of homes available. The county also needs increased efforts and education regarding expectations for foster parents to engage with bio parents during the family reunification process.

Probation Data

Table 13: Placement Stability

<i>Interval: October to September</i>					
<i>Measure</i>	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Rate of Placement Moves per 1,000 Days	0	1.47	0.9	2.07	1.29 (1 move)

Probation consistently achieves the national standard of placement stability within the past five years. The placement officer diligently researches and places youth in the most appropriate placement for their needs. The placement officer's rapport with the group homes and youth has been beneficial in maintaining stability in their placement.

2B PERCENT OF CHILD ABUSE/NEGLECT REFERRALS WITH A TIMELY RESPONSE

Measure

This is a statewide measure that reports the percent of referrals that receive a timely response by a caseworker.

Methodology

These reports provide the percentage of child abuse and neglect referrals that require, and then receive, an in-person investigation within the specified time frame. There are two reports, one for immediate response, and the other for 10-day response. Referrals entered as requiring a 3, 5, or 10-day response are included in the 10-day response type. The denominator is count data and the number of immediate referrals as well as referrals designated 3, 5, or 10-day response type.

10-day response are included in the 10-day response type. The denominator is count data and the number of immediate referrals as well as referrals designated 3, 5, or 10 the performance measure is numerator divided by denominator and expressed as a percentage.

Child Welfare Data & Analysis

Figure 2.9: Timely Response (10-Day Response Type)

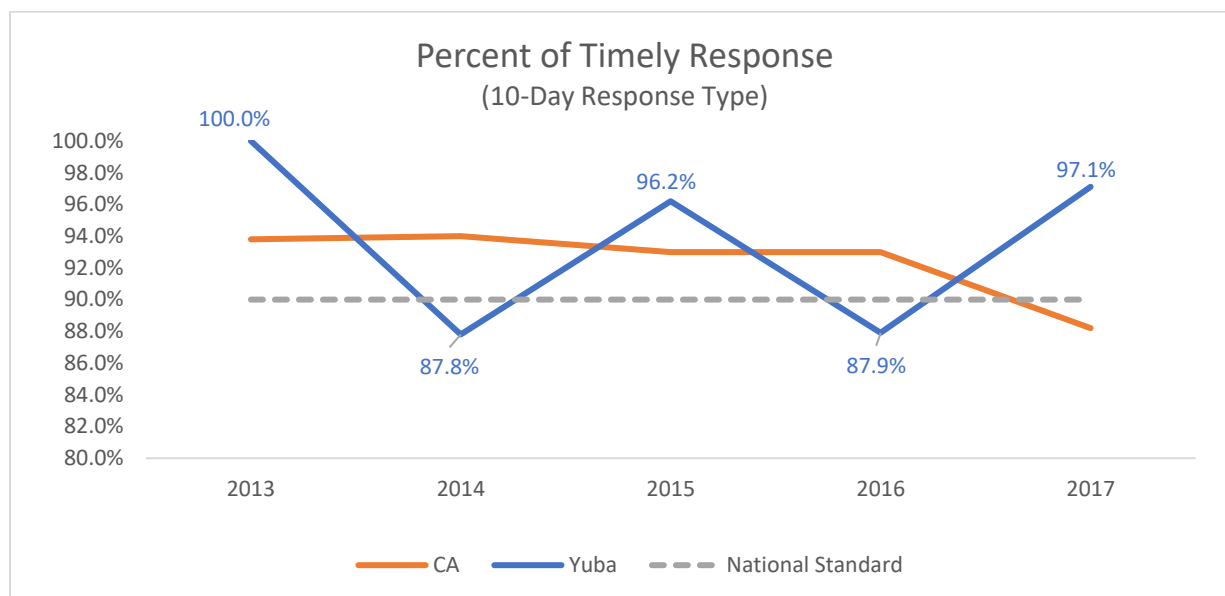
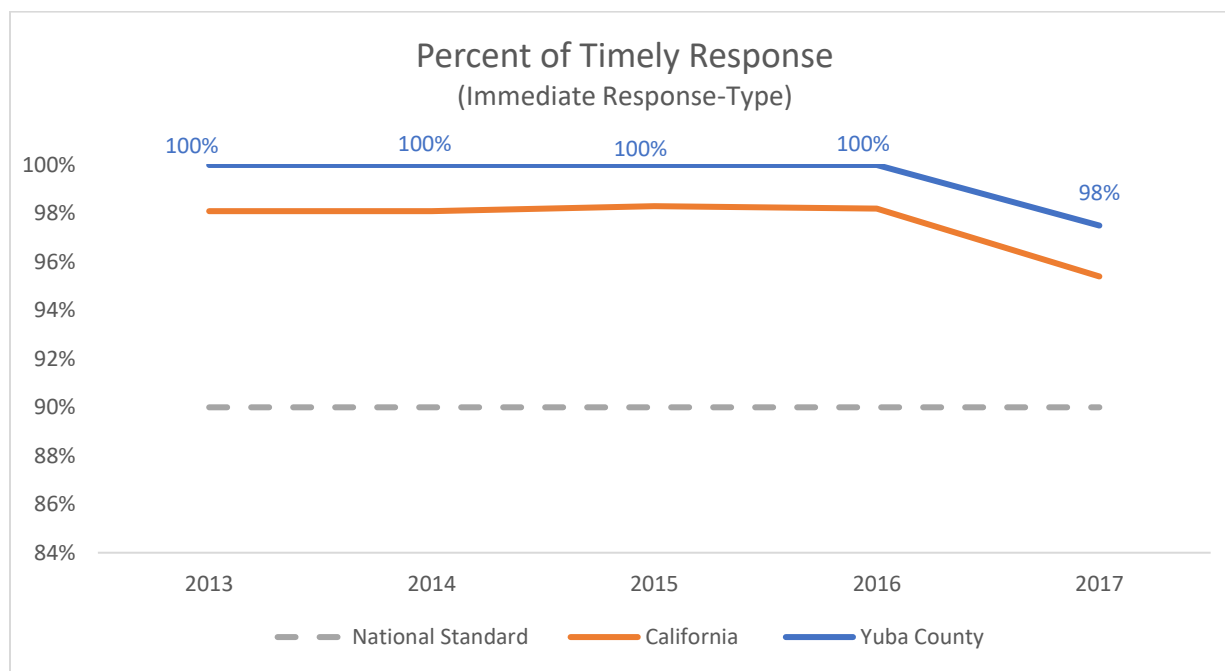


Figure 2.10: Timely Response (Immediate Response Type)



Yuba County has prioritized timely response and has implemented internal processes that helped improve this measure. Systemic use of county cell phones has been implemented and social workers can enter data into CWS/CMS in the field at time of response. In 2016, usage of technology, although available, wasn't being used systemically by most workers. Technology use has increased over time as workers become more familiar with using these

supports in the field. This particular measure has been a department priority. When timely response is low, the county can typically correlate it with data entry issues.

Probation Data

There is no data available for this measure.

2F TIMELY CASEWORKER VISITS WITH CHILDREN

Measure

Of the children in Foster care for an entire specific month, what percentage of children received an in-person visit from a child welfare worker during that month? What percentage of these in-person visits occurred at the child's residence?

Methodology

The first aspect of this measure determines the percentage of children in care who received timely in-person Social worker visits (see Figure 2.11 and Figure 2.12). The second aspect of this measure determines the percent of children received a caseworker visit within their out-of-home placement and residence. To be included in this measure, children must be under the age of eighteen and in care for the entire calendar month. Age is calculated at the beginning of the specified time period. Children who are not court dependents and placed with non-relative legal guardians are not included.

Child Welfare Data & Analysis

Figure 2.11: Timely Visits for Children in Out-of-Home Placement, Yearly Interval (All Visit Types)

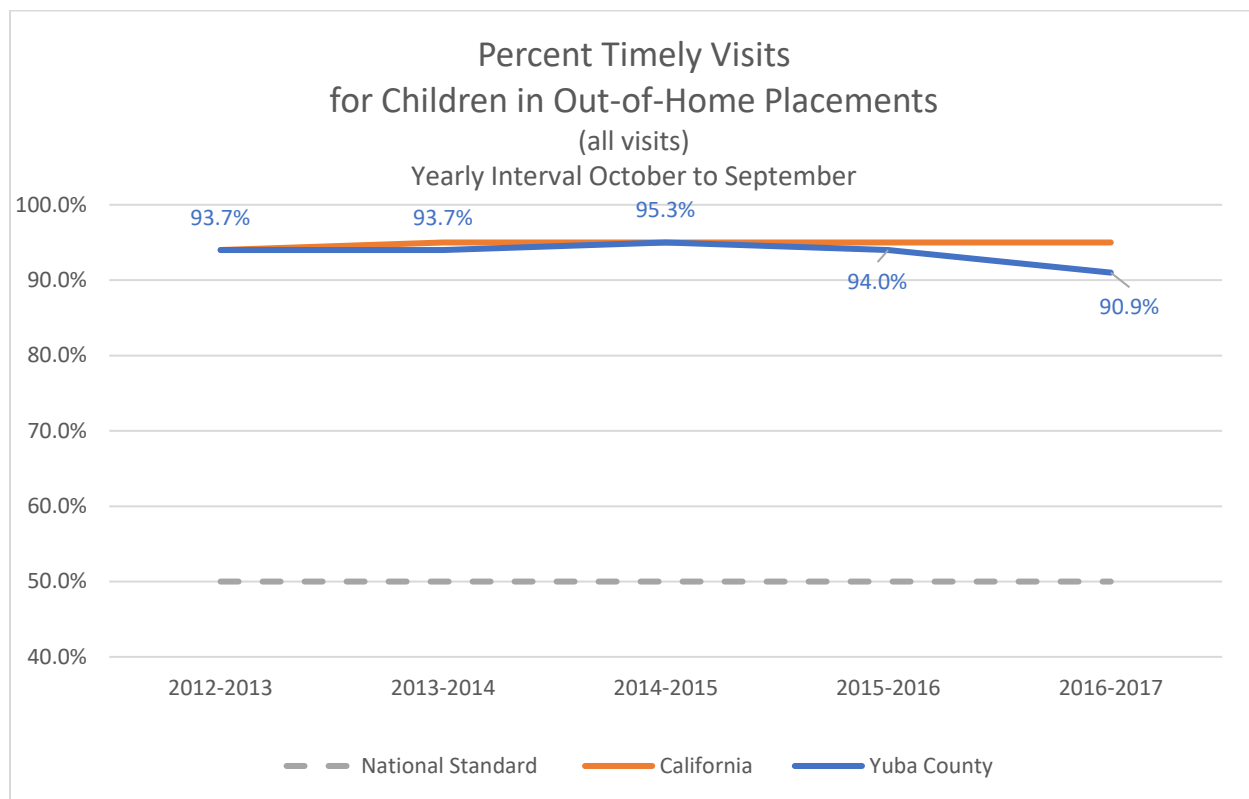
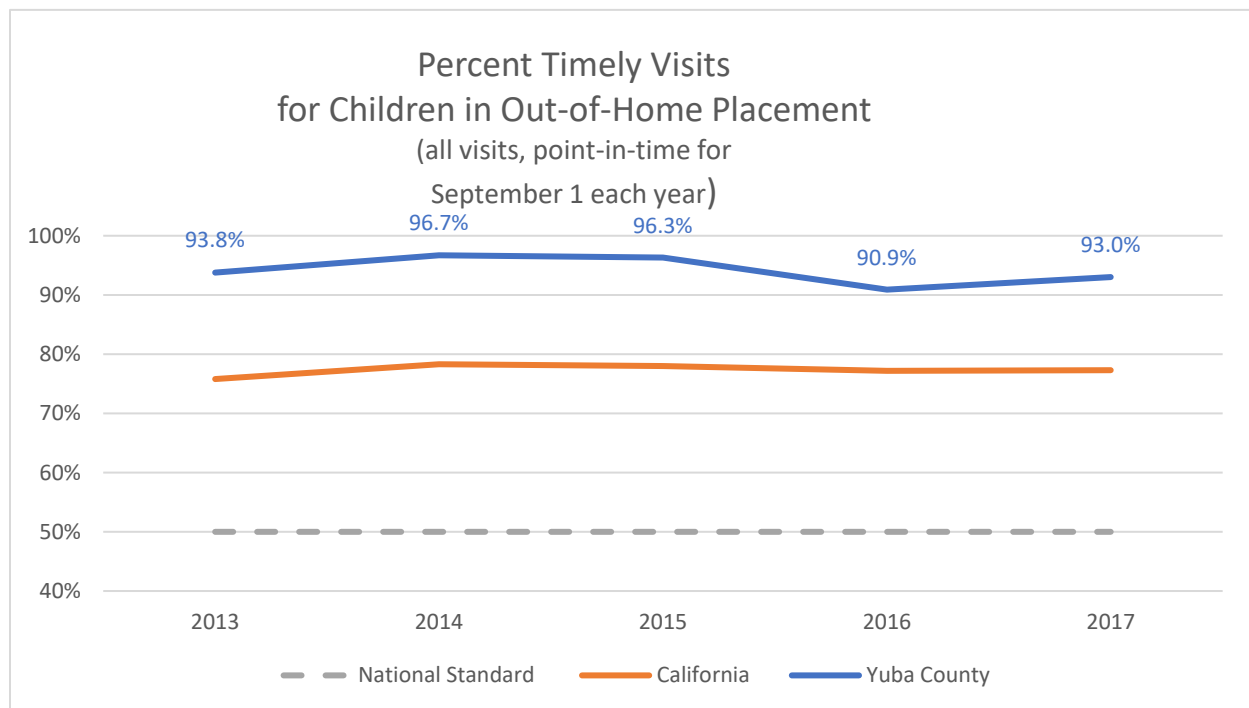


Figure 2.12: Timely Visits for Children in Out-of-Home Placement, Point-in-Time (All Visit Types)



For timely in-person social worker visits (all visits types whether it is in person or not), the county has been close to the established standard of 95% of timely visits documented throughout the last SIP cycle, with Oct-Sept intervals showing between 90-95% performance yearly.

Figure 2.13: Timely Visits for Children in Out-of-Home Placement (Visit in Placement)

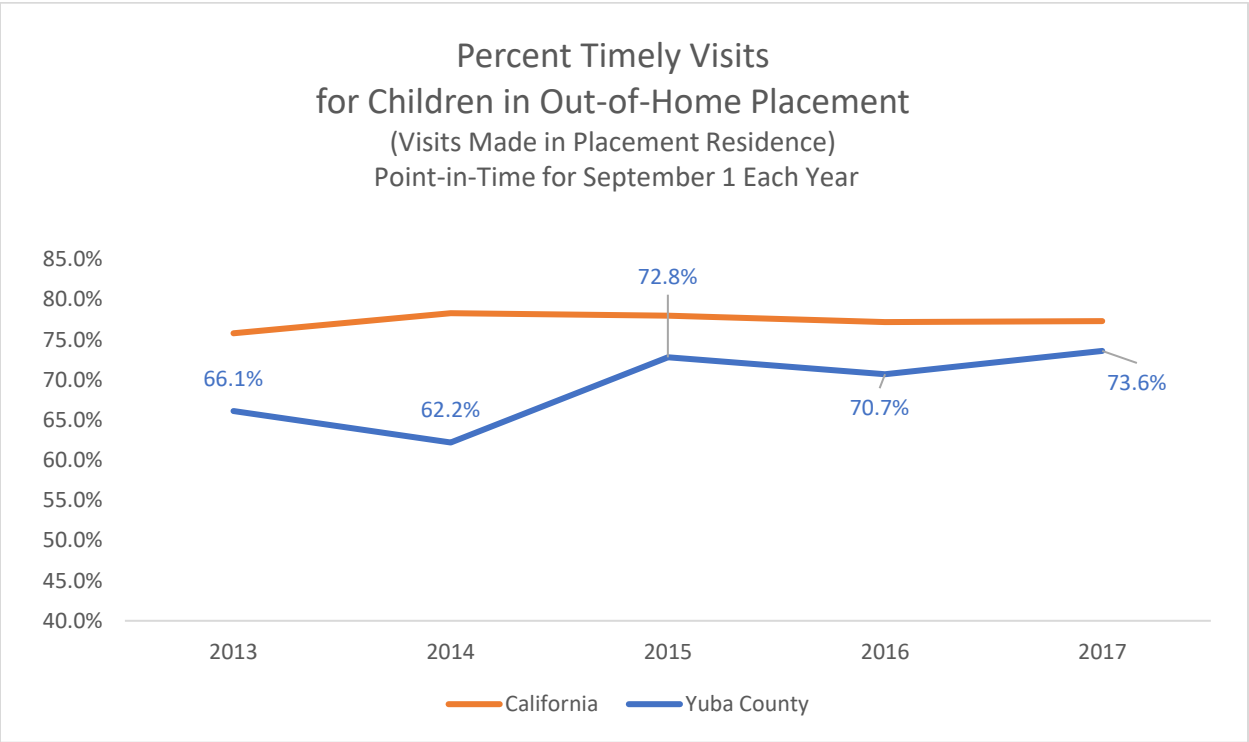
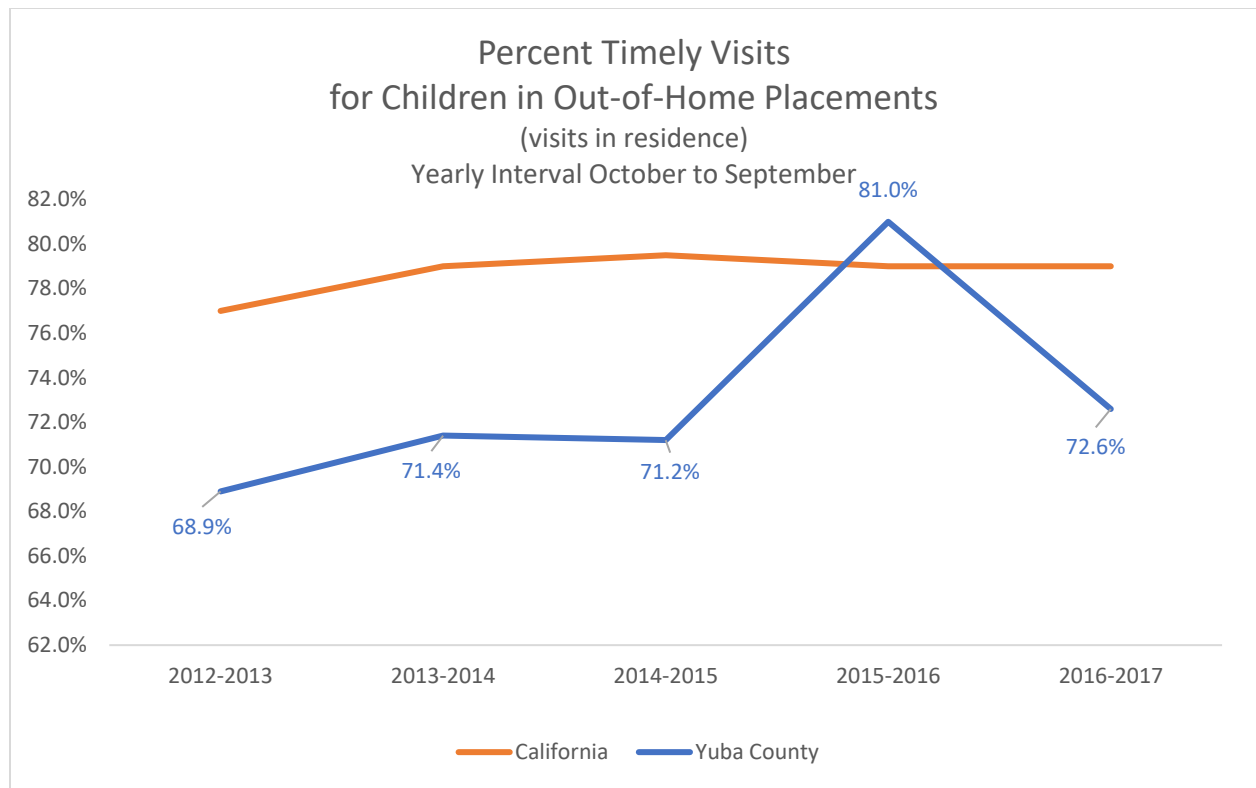


Figure 2.14: Timely Visits for Children in Out-of-Home Placement (Visit in Residence)



Data entry challenges are likely contributing to the percentage. Social workers must consistently check the correct box in the CWS/CMS system (a location area drop-down menu specifying where they met the child). Social workers may be meeting children in places other than their place of residence. Additionally, there has been an increase in turnover, affecting workloads, leading to counting monthly contact anywhere instead of focusing on in-home visits. Social workers anecdotally indicate FFA workers are seeing the child in home weekly, which may affect social workers' conducting visits within the home. In particular, school-age children have a very short window after school and there are competing staff who must visit. The county has a sub-group of children who chronically run away, which is not taken into account in the CWS/CMS system. Concerns with finding children who have run away may also affect this outcome. The county could potentially evaluate strategies to better document this subgroup. Social workers have weekly discussions on the status of runaways and focus on all regulatory compliance measures but chronic runaway youth continue to be a challenge. This is an area of improvement that the county would like to prioritize.

Probation Data

There is no data available for this measure.

2S TIMELY CASEWORKER VISITS WITH CHILDREN RECEIVING IN-HOME SERVICES

Measure

Of the children receiving in-home services, this measure reports that percentage of children who received an in-person visit from a child welfare worker in the child's residence during a given month.

Methodology

This measure considers each month separately but summarizes the data for a 12-month period. There are three numbers to be determined. The first is the number of children receiving in-home services who were required to have an in-person contact. The second is the number and percent of children in the first measure who had at least one in-person contact during the month. The final part of this measure is the number and percent of children who were receiving in-home services, had at least one in-person contact during the month where at least one of the in-person contacts occurred in the child's residence.

Performance

These are count data that are divided by the total and the result is presented as a percent.

Child Welfare Data & Analysis

Figure 2.15: Timely Visits for Children receiving in-home services (Visit in Residence, Yearly interval)

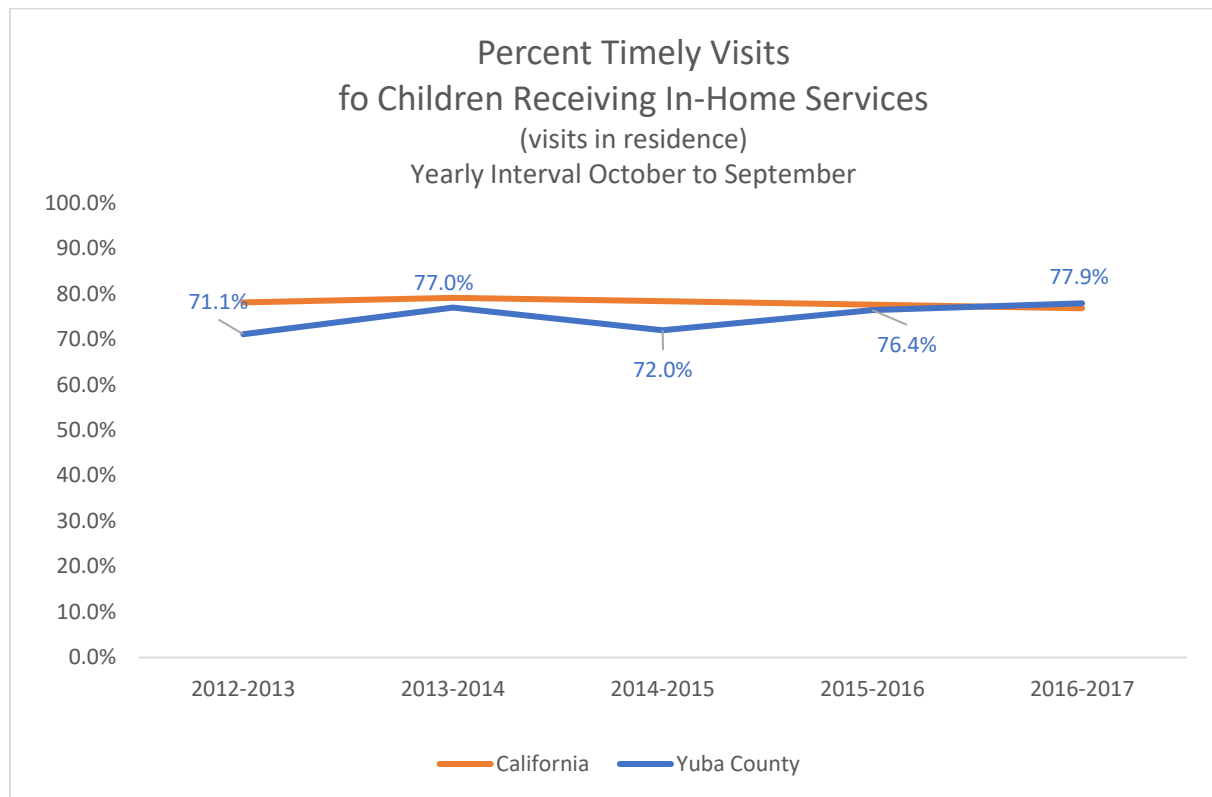
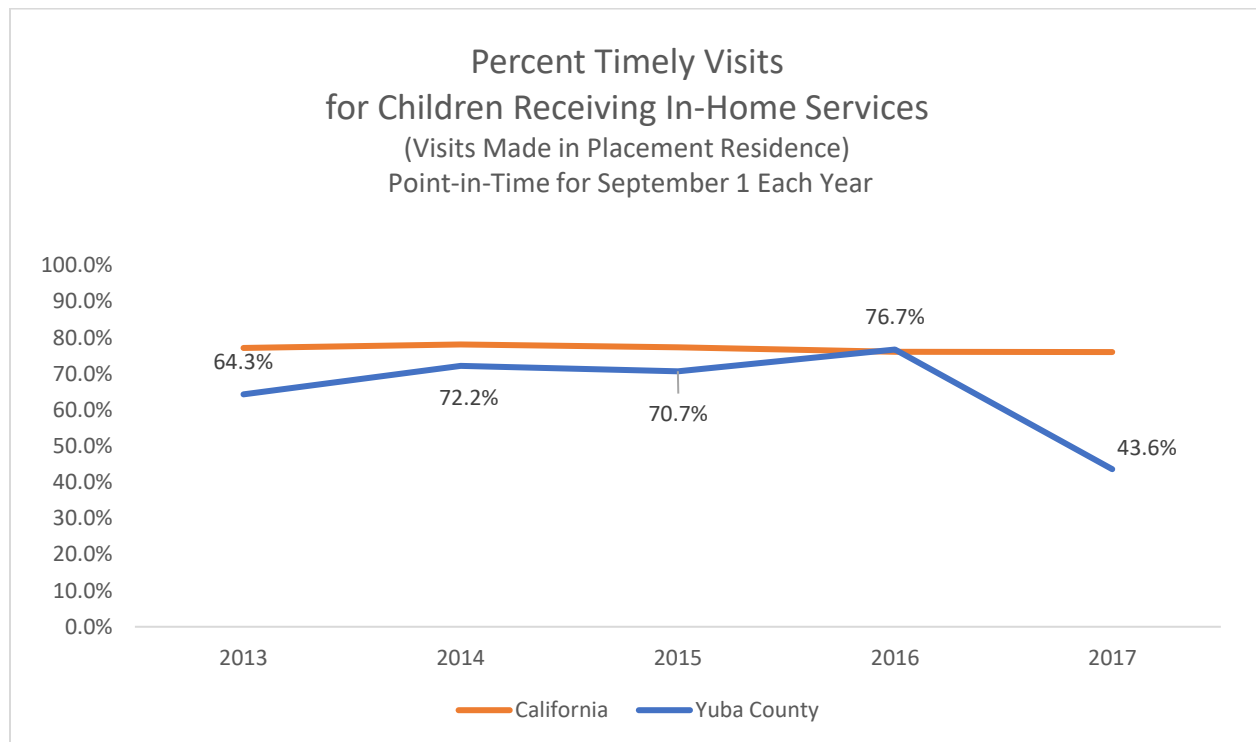


Figure 2.16: Timely Visits for Children receiving in-home services (Visit in Residence, point-in-time)



Yuba County CAPS consistently hovers around the state percentage of this measure year to year. The county has not placed significant effort in improving this measure; however, efforts can be made to improve on data entry best practices that could positively affect this measure. Caseload demands social workers default to seeing children in locations other than in the home. As discussed in one of the focus groups conducted, foster youth talked about not seeing their social worker consistently, either in the home or out of the home.

Probation Data

No data is available for this measure.

4A SIBLINGS PLACED TOGETHER IN FOSTER CARE

Measure

Of the children placed in care, this measure reports the percent of children placed with all of their siblings. This measure is reported from point-in-time data. (There are no federal or state standard at this time for this measure).

Methodology

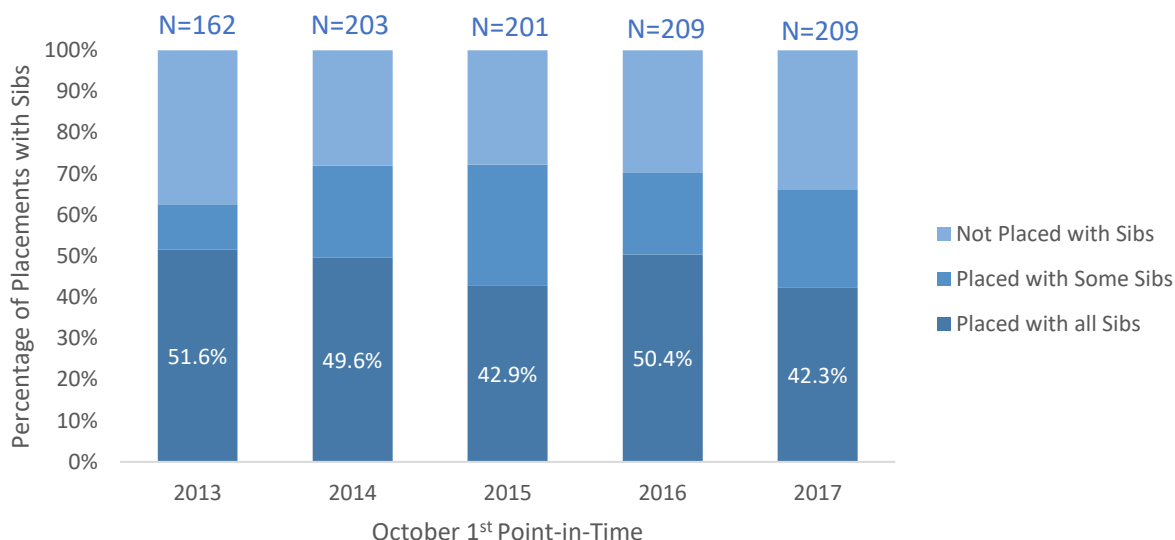
This measure reports on a “point of time” instead of a period of time. Sibling groups are identified at the County level, not the state level. A sibling group with size – 1 signifies a single child with no known siblings. When children are not in an active out of home placement, the last known placement home is used to determine whether siblings were placed together.

Performance

These data are presented strictly as count data. For each year the total number of children in Foster care at the July point-in-time date is 100% and that total is written above the bar. The bar is divided into three groups, children who are not placed with any siblings, children placed with some siblings and children placed with all siblings.

Child Welfare Data & Analysis

Figure 2.17: Siblings Placed Together in Foster Care



Due to the large increase in sibling groups in the past few years, in conjunction with the RFA home pool being limited in general, families tend to not have room or even bed space for siblings to reside together. For sibling sets who are school-age, the county tends to have a harder time placing children within their school of origin. Sometimes children must be separated because of safety concerns where one child needs a higher level of care due to behavioral challenges. Placement homes and even relative homes, consistently have challenges with needing behavioral support and refuse placement of siblings with a higher level of behavioral needs. As discussed during one of the focus groups, resource parents expressed the need for more assistance with children whose behavioral needs far outweigh their capacity to parent them. Resource parents state this is one of the main reasons placements fail. Sometimes the opposite happens where placement families cannot be present for non-school age infants and toddlers therefore, the families accept older siblings who are in school during the day time. Additionally, large sibling groups may include children with different fathers which can result in children being placed with different branches of the paternal relatives.

Probation Data

No data is available for this measure.

4B LEAST RESTRICTIVE PLACEMENT (ENTRIES FIRST PLACEMENT)

Measure

For children making their first entry into foster care, this measure reports the percentage of those children placed in the least restrictive environment. Currently, there is no federal or state standard at this time for this measure.

Methodology

These reports are derived from a longitudinal database and provide information on placements for the time interval identified.

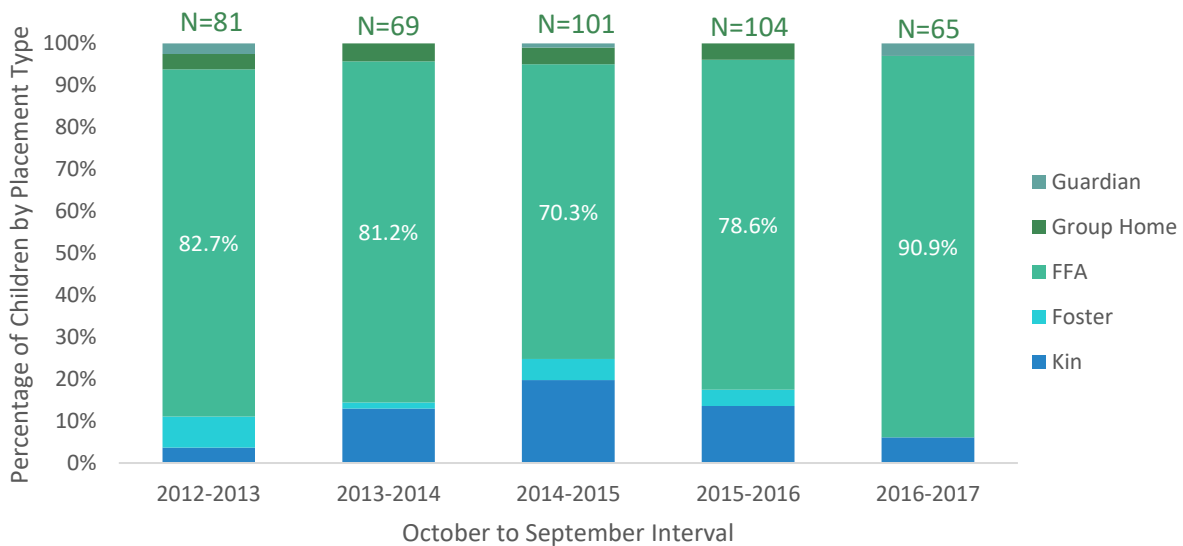
Performance

This measure reports the percent of children placed in the least restrictive environment. This is a point-in-time measure.

This is count data represented as percent of the whole.

Child Welfare Data & Analysis

Figure 2.18: Percentage of Placement Type (at first placement), October to September interval



Within the past five years, the majority of placements in Yuba County have been homes approved by Foster Family Agencies (FFA), with almost all placements (all but six children) placed in an FFA type. There are several reasons this pattern exists in Yuba County.

For emergency placements, relative homes must pass background checks including a criminal background check and any minor past offense will prevent the initial emergency placement with a relative or next of kin. Approval may happen with an exemption process but this takes a period of time. This all places more dependency on the previously approved FFA placements which accounts for most placements in Yuba County. Generational cycles of abuse and neglect also makes the pool of approvable families considerably low in Yuba County.

Probation Data & Analysis

Table 14: Percentage of Placement Type (at first placement), October to September interval

<i>Interval: October to September</i>					
<i>Measure</i>	2012-2013	2013-2014	2014-2015	2015-2016	2016- 2017
Kin	0	1	1	0	0
Foster	1	0	0	0	0
Group Home	3	0	4	2	3
Total	4	1	5	2	3

Most or all of the children in probation have been placed in group homes within the past five years. Most probation youth that are placed in group homes are due to being adjudicated of a sex offense. The youth are in need of specialized juvenile sex offender treatment that requires a higher level of care.

4B LEAST RESTRICTIVE PLACEMENT (POINT-IN-TIME)

Measure

This measure reports the percent of children placed in the least restrictive environment. This is a point-in-time measure.

Methodology

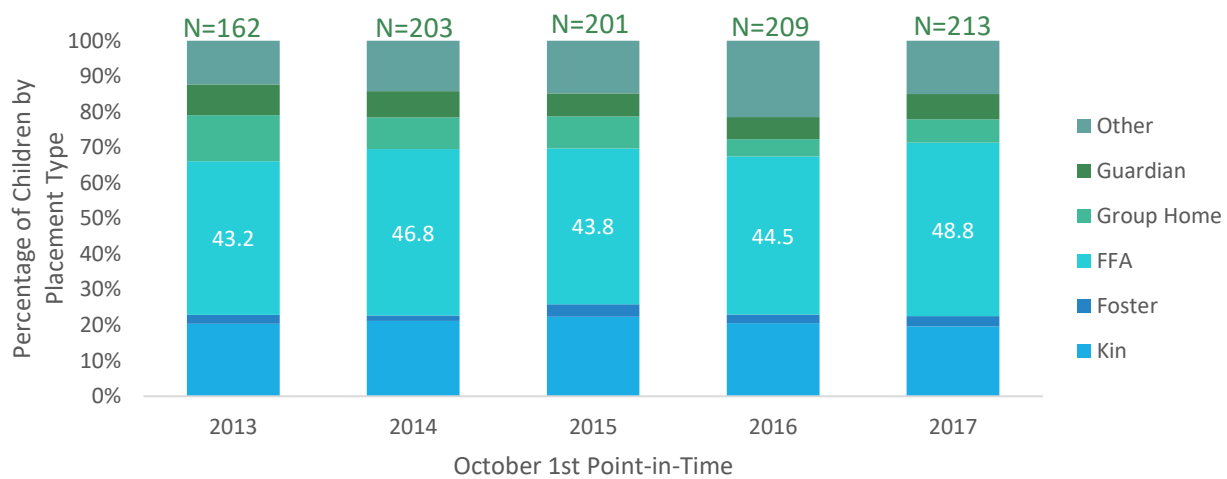
Includes all children who have an open placement episode in the CWS/CMS system (excluding children who have an agency type of “Mental Health,” “Private Adoption,” or “KinGAP” on a user-specified count day (e.g., January 1, April 1, July 1, October 1) and year.

Performance

This is count data represented as percent of the whole.

Child Welfare Data & Analysis

Figure 2.19: Percentage of Placement Type (at first placement), October 1st Point-in-Time



Probation Data & Analysis

Table 15: Placement Type (at first placement), October 1st Point-in-Time

Interval: October to September					
Measure	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Kin	1	3	1	1	0
FFA	1	2	1	0	0
Group Home	3	3	4	8	8
Other	6	4	8	5	4
Total	11	12	14	14	12

Most or all of the children in probation have been placed in group homes within the past five years. Most probation youth that are placed in group homes are due to being adjudicated of a sex offense. The youth are in need of specialized juvenile sex offender treatment that requires a higher level of care.

4E ICWA & MULTI-ETHNIC PLACEMENT STATUS

Measure

This is a federal measure that reports the number of children in foster care who are ICWA eligible who have been placed with relatives, non-relative American Indian substitute care providers (SCP's), non-relative and non-American Indian SCP's, and in group homes. For this measure, data are taken at a point-in-time.

Methodology

These reports examine the point in time placement status of two overlapping groups of children: Indian Child Welfare Act eligible children [4E(1)] and children with primary or secondary (multi) ethnicity of American Indian [4E(2)]. Placement status takes placement type, child relationship to substitute care provider, and substitute care provider ethnicity into account. The resulting placement status categories are placements with relatives; with non-relative, Indian substitute care providers; with non-relative, non-Indian substitute care providers; with non-relative substitute care providers with ethnicity missing in CWS/CMS; in group homes (ethnicity cannot be determined); and in other placements.

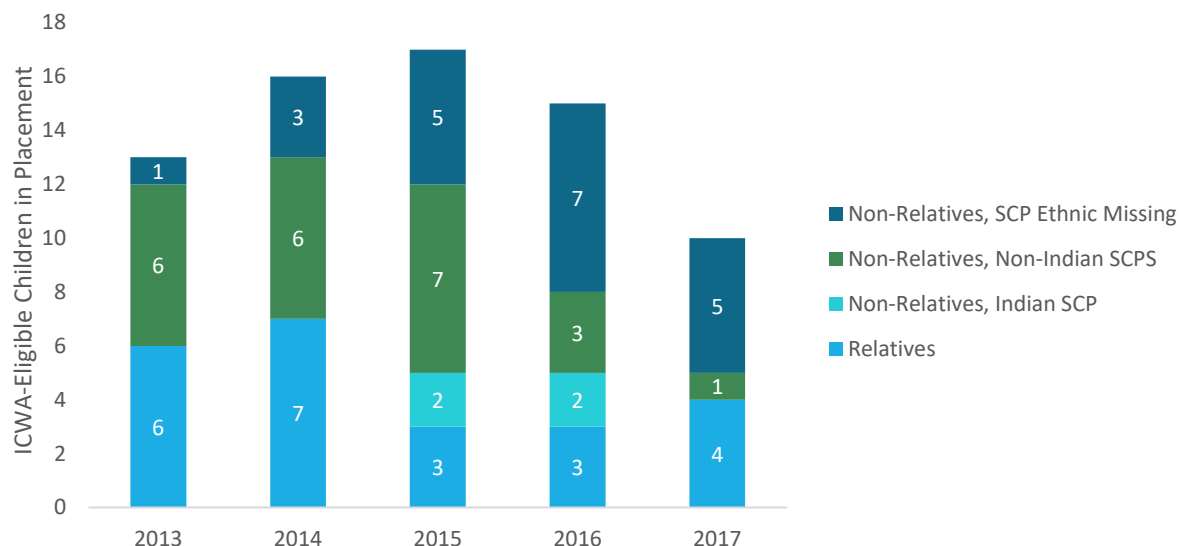
Children with a primary ethnicity of American Indian often have other reported secondary ethnicities. Children with a secondary ethnicity of American Indian always have another reported primary ethnicity and may have other reported secondary ethnicities. The two groups are described as overlapping because many children with a primary or secondary ethnicity of American Indian are not eligible for the Indian Child Welfare Act. Not all children eligible for the Indian Child Welfare Act are reported to have a primary or secondary ethnicity of American Indian.

Performance

These are count data taken at an October point-in-time.

Child Welfare Data & Analysis

Figure 2.20: Count of ICWA Placements by Placement Ethnicity Type



In past years, Yuba consistently placed ICWA eligible children with non-relatives in non-Indian placements (in green); however, that pattern has improved within the past few years as the number has gone down to one on October 1st, 2017. As a reference, California's overall percentage of non-Indian placements is relatively high, standing at 33.5% on October 1st, 2017 (not on graph). Another interesting pattern is the number of placements with the ethnicity code missing as that number has increased in Yuba County (dark blue, top). One reason that may account for this pattern is that Yuba County disproportionately relies on the use of FFA homes which means Yuba does not record the ethnicity of the placement due to not being the vetting agency. There also may be data entry challenges and consistent entry of this field in CWS/CMS which is an area for improvement.

Probation Data

No youth in care meet this criteria

WELL BEING OUTCOME MEASURES

5A (1) USE OF PSYCHOTROPIC MEDICATION AMONG YOUTH IN FOSTER CARE

Measure

Displays the number of children with a Medi-Cal paid claim for psychotropic medication, the number of children in Foster care in the period, and the derived percentage of children in Foster care at some time during a 12-month period with a paid claim for medication and a concurrent placement in Foster care.

Methodology

The denominator for this measure is the count of children in Foster care for 30 days or more, in Child Welfare Department, Probation, State Adoptions, and Indian Child Welfare supervised care. To be counted in the denominator, children must be under the age of 18 years old at the beginning of the reporting period. Excluded from the denominator are children who are placed in California but under the jurisdiction of another state or placed with non-dependent legal guardians or placed in non-Foster care placements.

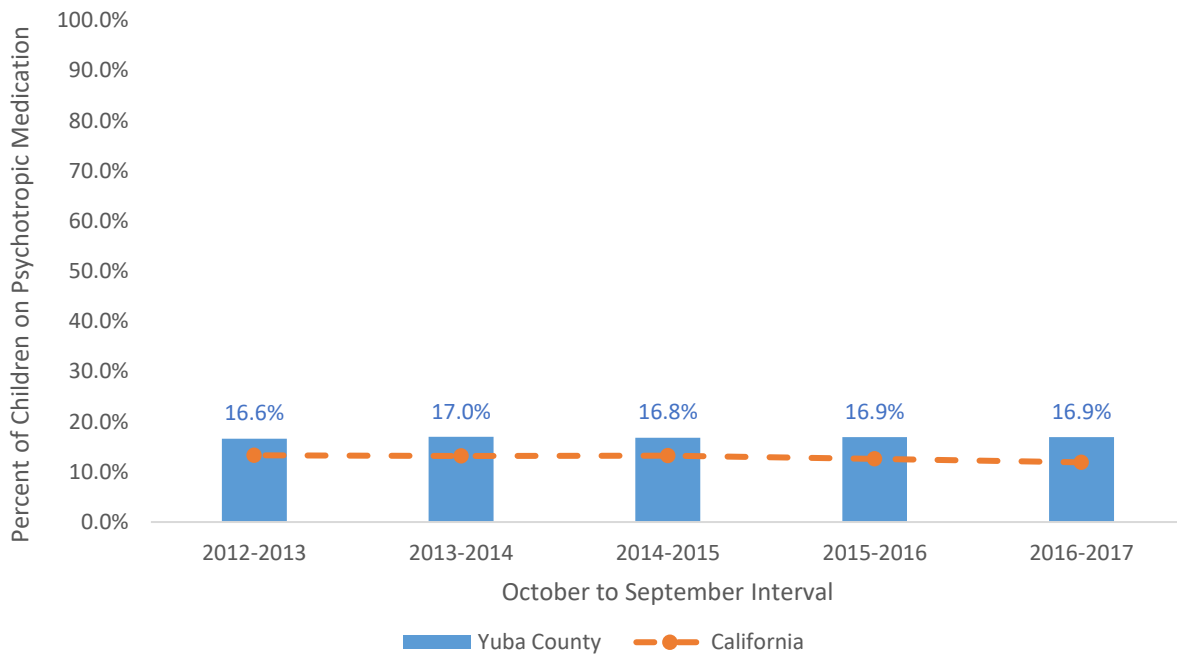
The numerator for this measure the children in the denominator who had one or more claims for a psychotropic medication and a concurrent open foster care episode during the 12-month period of measurement.

Performance

This measure is computed by dividing the numerator by denominator and expressing the result as a percent.

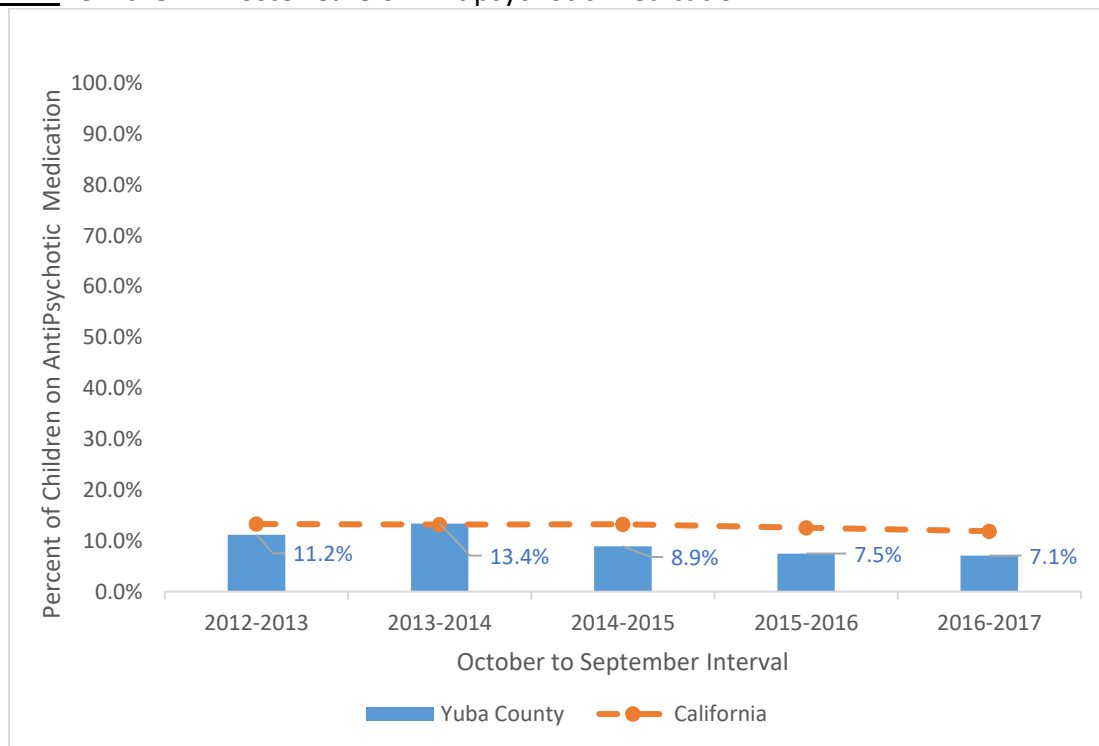
Child Welfare Data & Analysis

Figure 2.21: Children in Foster Care on Psychotropic Medication



Yuba County has a significantly large population of high-level needs children, particularly those in need of mental health services and children who have multi-system involvement (mental health, specialty health services providers, probation). These factors contribute to Yuba being consistently higher than the California rate.

Figure 2.22: Children in Foster Care on Antipsychotic Medication



Probation Data

No data is available for this measure.

5B (1) RATE OF TIMELY HEALTH EXAMS

Measure

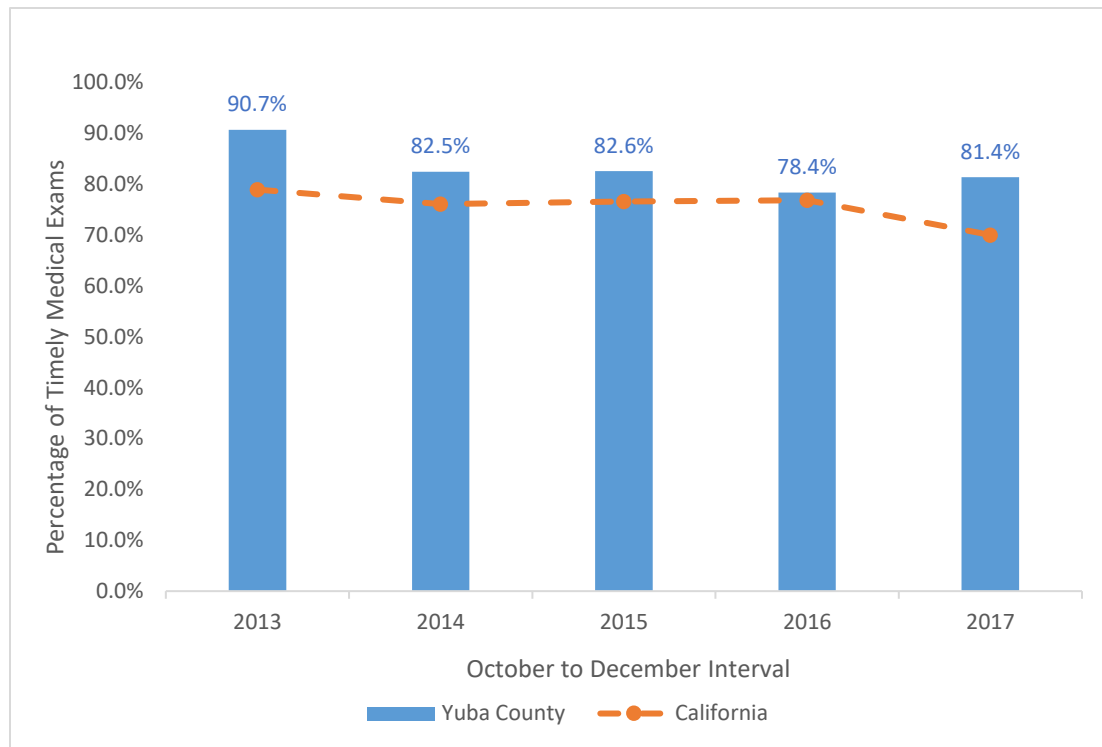
This report provides the percentage of children meeting the schedule for Child Health and Disability Prevention (CHDP) and Division 31 medical and dental exams.

Methodology

Children in open out-of-home placements are counted in this measure. Children that are excluded are children in placement for less than thirty-one days, children residing outside of California and non-child welfare placements.

Child Welfare Data

Figure 2.23: Timely Medical Exams



Yuba County has an in-house public health nurse (PHN) dedicated to monitoring the timeliness of health exams and health overall which has led to higher-than-average performance on this measure.

Probation Data

No data exists for this measure.

5B (2) RATE OF TIMELY DENTAL EXAMS

Measure

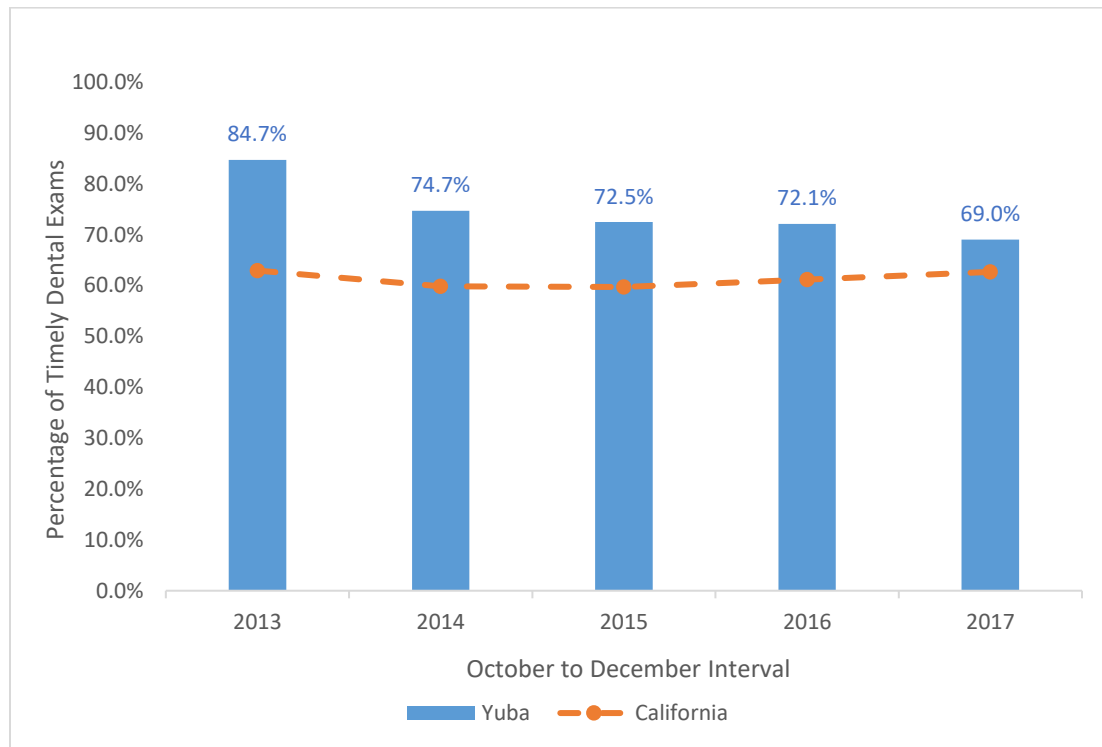
Of the children in Foster care during a specific time period, this measure reports the percentage of children who have received a dental exam.

Methodology

All children in out-of-home placements are counted in this measure. Children that are excluded are children in placement for less than 31 days, children residing outside of California, and non-child welfare placements.

Child Welfare Data & Analysis

Figure 2.24: Timely Dental Exams



Yuba County has an in-house PHN dedicated to monitoring the timeliness of dental exams which has led to higher-than-average performance on this measure.

Probation Data

No data exists for this measure.

5F PSYCHOTROPIC MEDICATIONS

Measure

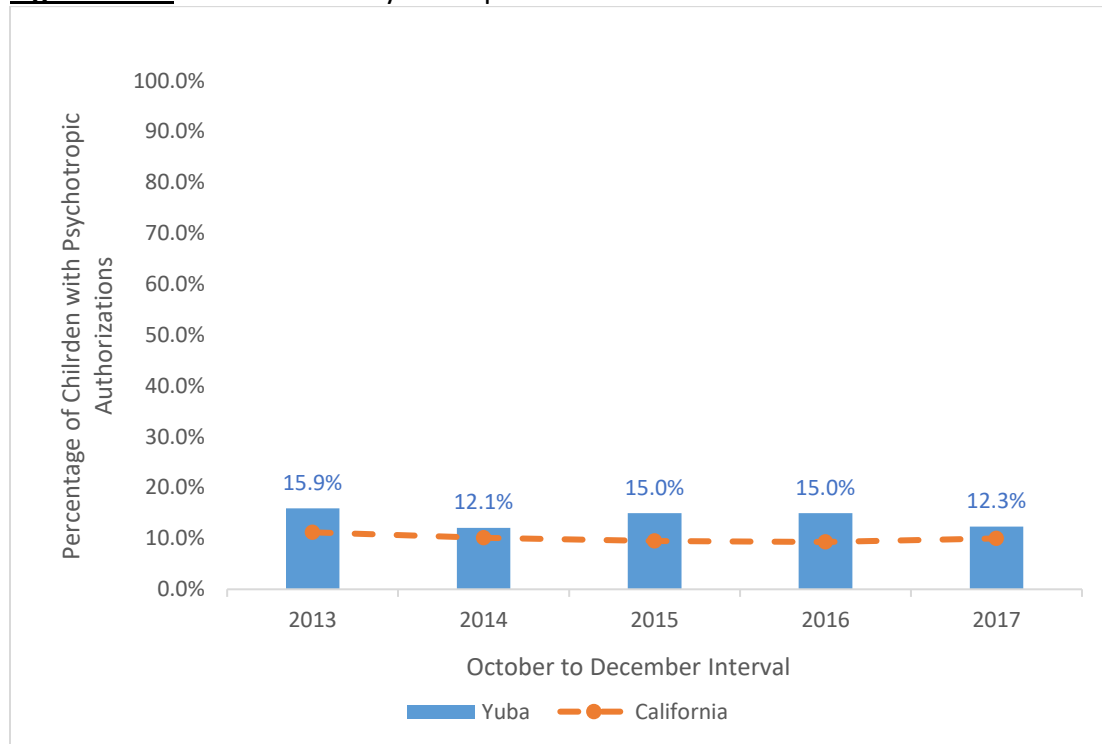
Of the children in foster care during a specific time period, this measure reports the percentage of children who have a court order or parental consent authorized the use of psychotropic medication.

Methodology

All children under age nineteen as of the last day of the quarter are counted in this measure, except for children that are non-child welfare placements, incoming ICPC placements, and non-dependent/legal guardians.

Child Welfare Data & Analysis

Figure 2.25: Children with Psychotropic Medication Authorizations



Yuba County has an in-house public health nurse and other dedicated staff dedicated to reviewing court authorizations which has led to higher-than-average performance on this measure.

Probation Data

There are no youth in care who met this criteria for the past five years.

6B INDIVIDUALIZED EDUCATION PLAN

Measure

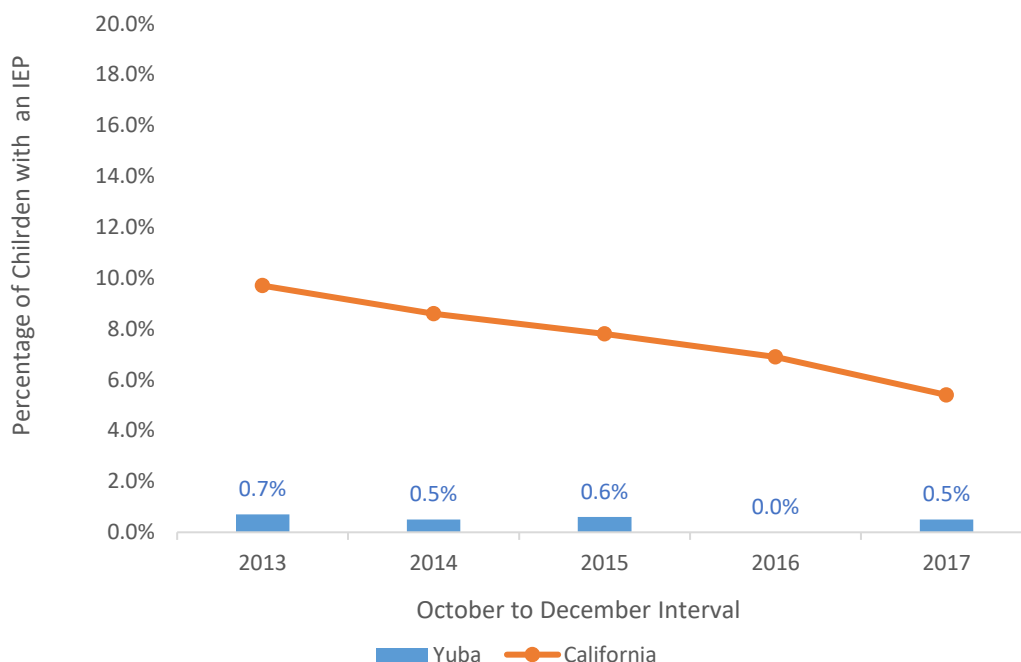
Of the children in Foster care during a specific time period, this measure reports the percentage of children who have ever had an Individualized Education Plan (IEP).

Methodology

This report provides the number of children under age nineteen in out-of-home placements who have ever had an IEP.

Child Welfare Data & Analysis

Figure 2.26: Children with Individualized Education Plan



The data displayed above indicated that Yuba County's IEP rates are extremely low, almost zero in past five years. However, the county believes this is a data entry issue related to the timely completion of entry information. The range of Yuba's children in care for this measure is 145-190. The high percentage of children and youth with special behavioral needs with identified specialty services in place would indicate that this measure should be higher than 1%.

Probation Data

No data exists for this measure.

8A OUTCOMES FOR YOUTH EXITING FOSTER CARE AGE 18 OR OLDER

Child Welfare Data & Analysis

Table 16: Count of Outcomes for Child Welfare Youth in Yuba and California

October to December 2014	Denominator (Those children known during quarter)	Completed High School or Equivalency	Percentage who Completed High School or Equivalency	Obtained Employment	Percentage who Obtained Employment
California	370	274	74.1	138	37.3
Yuba County	0	0	0	0	0

Table 17: Count of Outcomes for Child Welfare Youth in Yuba and California

October - December 2014	Youth with housing arrangements	Percentage of Youth w/Housing Arrangements	Youth Received ILP Services	Percentage of Youth Received ILP Services	Youth with Permanency Connection	Percentage of Youth with Permanency Connection
California	327	88.4	332	89.7	327	88.4
Yuba County	0	0	0	0	0	0

There are no children who meet criteria for these measures. Yuba County CAPS and Probation are aware that this data should show at least a few children. There may be improvements that could be made to processes so accurate data will be present in the future.

Probation Data & Analysis

Table 18: Count of Outcomes for Probation Youth in Yuba and California

October to December 2014	Denominator (Those children known during quarter)	Completed High School or Equivalency	Percentage who Completed High School or Equivalency	Obtained Employment	Percentage who Obtained Employment
California	92	51	55.4	20	21.7
Yuba County	0	0	0	0	0

Table 19: Count of Outcomes for Probation Youth in Yuba and California

October - December 2014	Youth with housing arrangements	Percentage of Youth w/Housing Arrangements	Youth Received ILP Services	Percentage of Youth Received ILP Services	Youth with Permanency Connection	Percentage of Youth with Permanency Connection
California	81.5	81	88.0	85	92.4	81.5
Yuba County	0	0	0	0	0	0

There are no children who meet criteria for these measures. Yuba County CAPS and Probation are aware that this data should show at least a few children. There may be improvements that could be made to processes so accurate data will be present in the future.

Summary of Findings

Although Yuba County CAPS and Probation face significant systemic, geographic and economic challenges within their community, the collective information gathered in the CSA process has revealed the county's strengths. Since the last CSA cycle, Yuba County has successfully transitioned to a new leadership team. The Health and Human Services Department hired a new Director in 2014, a new Deputy Director in 2014 (and 2018) and expanded Child Welfare to include two Program Managers (Operations and Program Development). Within this new oversight, a collective focus on communication and collaboration has been successfully cultivated. Systemic and coordinated efforts are improving under this leadership and, although processes are still not perfect, progress is being made which positively impacts children, youth and families. This is most prevalent in the improvement of all permanency types as well as the downward trend in recurrence for child welfare.

Child and Family Teaming stood out as one of the new strategies that is helping to improve child welfare services on all fronts. The CFT process has improved communication with and engagement of children, families, and natural support networks, as well as a variety of formal supports including educational partners and behavioral health staff. This has led to better collaboration, deeper trust, and active and meaningful planning and participation, ultimately resulting in more ownership from members. A significant paradigm shift from a perceived punitive government agency to a more strength-based and family-centered agency is occurring. CFTs were acknowledged positively in virtually all of the CSA events such as the Peer Review, stakeholder meeting and focus groups with CAPS social workers, supervisors, foster youth and foster families. CAPS has also improved their decision-making at all levels, which has led to improvement in some outcome measures. There are substantially improved connections to schools throughout the county including a partnership with the County Office of Education and having a liaison on site multiple times per week.

Several areas of improvement were identified through the CSA process. There needs to be a significant focus on improving availability of and access to resources in this small

community, including substance abuse treatment, mental health resources, transportation, and domestic violence support. The number of families in need of these specific services outweighs the capacity and can result in delays and access issues to identified services. There are many day-to-day barriers for parents who are trying to accomplish tasks related to their case plans. CAPS also needs to support planning networks and safety by implementing more robust safety planning that validates actual safety. More work can be done to make strides in improving some of the technology challenges Yuba faces, particularly with tech-based infrastructure such as access to iPads and improved data entry processes. There was resounding feedback regarding ongoing challenges related to the amount of time needed to complete documentation, which can take away from time to complete field work. One potential area of focus is adding improved access to technology in remote locations to empower staff to enter data more quickly and accurately while in the field. Yuba County can improve by refreshing and revitalizing SDM and SOP processes by aligning practice with SOP principles, and developing and utilizing a formal RED team process. One challenge that Yuba County has experienced is trying to maintain adherence and focus on rapidly changing and evolving state mandates while maintaining service-delivery standards and utilizing best practices in field work.

Another pattern of challenges identified throughout the CSA process are related to service delivery. There is significant reliance on FFA homes for a variety of reasons, such as the supply-demand imbalance of relative and child-specific homes. However, the more pressing need in the county is the lack of timely access to services and supports that are directly involved in improving placement stability and permanency-driving impact of these homes. Also, the limited support that is available to resource families, children and biological parents, is not well-known or systemically utilized throughout social workers' day-to-day practice.

As previously stated above and throughout this report, there are a limited amount of available services in the local community, including substance abuse treatment, mental health services, parenting education and prevention/early intervention services. Specifically, Yuba County has one residential substance abuse program available to clients and often times, the demand for this service far outweighs the program's capacity. This often times results in a

delay in needed treatment and/or referral(s) to programs outside of the local area. Another issue impacting a client's ability to access treatment is funding. CAPS has a limited budget amount to fund residential drug treatment and ineffective management of available resources can contribute to delays in access to treatment. With regard to mental health services, Yuba and Sutter Counties share a bi-county mental health plan available to both Yuba and Sutter County residents that meet eligibility criteria. Network adequacy and access to mental health services in the local community continues to be a challenge and can result in wait times for assessments and/or services to be initiated. Improvements have been made in this area with arrangements with SYBH to embed therapists in the CAPS office in order to see both children and adults who have open cases with CAPS and have been determined to be in need of behavioral health services. While this is a strength, the issue of the high number of referrals to services at times can still result in delays in accessing and/or beginning treatment.

With regard to prevention and early intervention services, CAPS has consistently funded a Differential Response program, which offers and provides supportive prevention services to families in Yuba County. Yuba County continues to value the services provided through the DR program, however, over the past several years families were not accepting and engaging to the extent expected and needed. One of the challenges identified was that services available through the previous contracted service provider were limited and while efforts were being made, they were unable to consistently engage with families. Yuba County recently selected a new Differential Response provider through an RFP process and CAPS is looking forward to collaborating with the community based organization to develop policies and procedures, response timelines, culturally responsive neighborhood and center-based services, resources and referrals, trained staff, local networking, and community outreach.

CAPS experienced many staffing changes throughout the division which resulted in staff adjusting to their specific role and building their skills. In addition, CAPS created multiple social worker positions over the years to ensure that CAPS continues to meet mandates and further improve services. These additional positions include a placement coordinator social worker, federal case review social worker, RFA social worker and adoptions social worker. These positions have allowed CAPS to begin building partnerships with placement agencies,

identify areas needing improvement within daily practice, streamline licensing process for RFHs, and create a more personalized process for adoptive families. Documentation in the CWS/CMS system continues to be a struggle for social workers, however, CAPS recognizes that the more CAPS focuses on building social worker's skills, the more efficient they will be with their practice, including documentation.

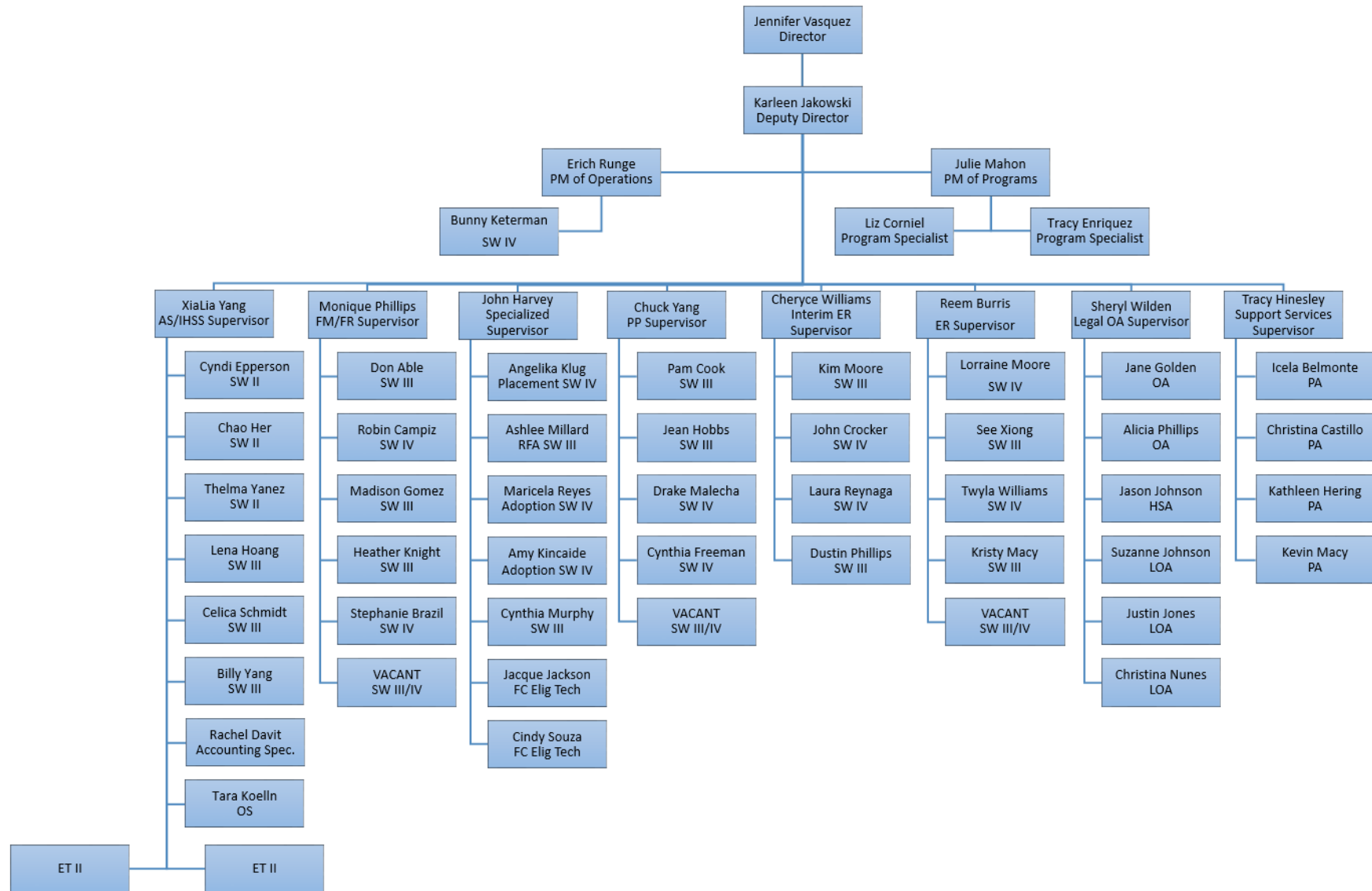
Throughout the previous SIP, CAPS identified that while SOP was being taught during the Core Trainings for child welfare social workers, staff were not utilizing it consistently in their daily practice. Utilizing the UC Davis Northern California Training Academy (NCTA) team, CAPS had a case review completed in August 2017 to identify areas of strengths and weaknesses. The results were clear that CAPS' SOP practice is at an emergent level, meaning the practice is present and additional supports will help standardize and deepen practice across the agency. CAPS recognizes that it will be vital for leadership at all levels and supervisors to model SOP to fully implement the practice.

Placement stability continues to be a struggle for Yuba County. With the last SIP, CAPS was challenged with enforcing QPI practices since many children are placed in FFAs. In addition, the shortage of local resource family homes creates challenges to placing children within the local area. The placement social worker and RFA social worker have been utilized to strengthen partnerships with local RFHs and FFAs. CAPS looks forward to deepening these collaboration efforts in the coming years. Increasing timely access to behavioral health services and supports will positively impact placement stability, giving children, youth and their caregiver the tools and skills needed to promote wellness and improve overall stability.

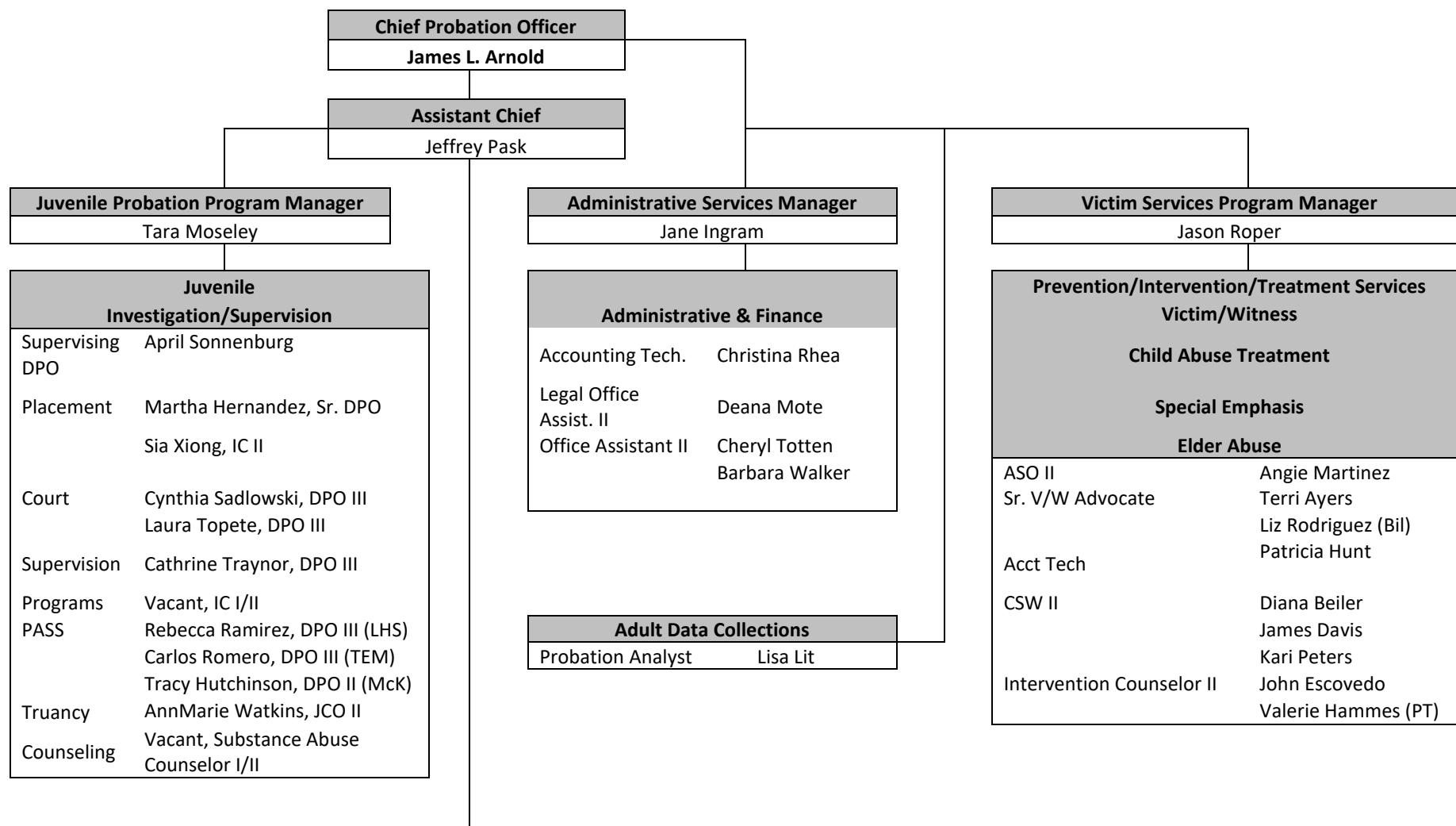
There were many lessons learned during the last System Improvement Plan that have improved Child Welfare practice in Yuba County and have highlighted continued opportunities for improvement. CAPS recognizes that the CSA and SIP should be developed as a handbook of guiding principles for staff and community partners so that focus remains on the primary goal; continuous development of practices to further improve the well-being of children and families in the community.

Appendices

CAPS ORGANIZATION CHART



YUBA COUNTY PROBATION DEPARTMENT ORGANIZATION CHART



YUBA COUNTY PROBATION DEPARTMENT ORGANIZATION CHART

