

BY Feb 26 2013  
*Cyndi Lee*  
CLERK OF THE BOARD

For the Agenda of:  
February 26, 2013

To: Board of Supervisors  
From: Department of Health and Human Services  
Subject: Child Protective Services Progress Report  
Supervisorial District: All  
Contact: Sherri Z. Heller, Director, Health and Human Services, 875-0831  
Michelle Callejas, Deputy Director, Child Protective Services, 875-0123

**Overview**

The attached report highlights Child Protective Services' (CPS) recent successes and challenges and provides updates on action items related to the Oversight Committee's 2012 recommendations.

**Recommendations**

Receive and file the attached Progress Report. Any recommendation that is considered for implementation by the Board should be directed to Countywide Services to help guide policy development and determine how the recommendations fit within the countywide priority of needs.

**Measures/Evaluation**

Successful implementation of the recommendations will contribute to the County Strategic Objective to protect families from violence.

**Fiscal Impact**

There is no fiscal impact to the County general fund.

**BACKGROUND**

In the fall of 2008, as a result of an increase in child deaths during the same year, Sacramento County commissioned MGT of America to conduct a review of CPS. This review began in September 2008 and concluded with a report to the Board of Supervisors, on March 31, 2009, outlining findings and recommendations. Concurrently, the Sacramento County Grand Jury conducted an investigation of CPS to determine the causes of the increase in child deaths. The final Grand Jury report, issued in April of 2009, identified issues within CPS and contained several recommendations for systemic improvement.

**DISCUSSION**

As reflected in the Progress Report presented on August 7, 2012, the Division has completed all action items related to the MGT and Grand Jury Recommendations and will therefore not be

reporting on those items any longer. Instead, Child Protective Services (CPS) has adopted a new report format which includes the following sections:

1. Highlights – presenting a summary of successes and challenges encountered by CPS as well as new projects and developments.
2. Spotlight on Practice – describing a specific practice successfully implemented by the Division, including relevant data.
3. Progress Towards Goals - providing updates on action items related to the Oversight Committee’s 2012 recommendations.
4. Conclusion – summarizing the state of the Division and any expected changes.

**MEASURES/EVALUATION**

Successful implementation of improvement strategies should result in fewer preventable child deaths due to maltreatment. Additional measures include the Federal Outcome Measures related to safety, permanency and well being for children coming in contact with Sacramento County CPS.

**FINANCIAL ANALYSIS**

There is no fiscal impact to the County General Fund.

Respectfully submitted,

APPROVED:  
BRADLEY J. HUDSON  
County Executive

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SHERRI Z. HELLER, Director  
Department of Health and Human Services

By: \_\_\_\_\_  
ANN EDWARDS  
Chief Deputy County Executive

Attachment: A - CPS Progress Report

## Child Protective Services Progress Report

### INTRODUCTION

As reflected in the Progress Report presented on August 7, 2012, the Division has completed all action items related to the MGT and Grand Jury Recommendations (see tables 1 & 2 below) and will therefore not be reporting on those items any longer. Instead, Child Protective Services (CPS) has adopted a new report format which includes the following sections:

1. Highlights – presenting a summary of successes and challenges encountered by CPS as well as new projects and developments.
2. Spotlight on Practice – describing a specific practice successfully implemented by the Division, including relevant data.
3. Progress Towards Goals - providing updates on action items related to the Oversight Committee’s 2012 recommendations.
4. Conclusion – summarizing the state of the Division and any expected changes.

<i>Table 1</i>	<i>MGT Recommendations</i>	<i>Grand Jury Recommendations</i>	<i>Total</i>
<i>Prioritized</i>	53	41	94
<i>Not Selected for Implementation</i>	2	8	10
<i>Total</i>	55	49	104

<i>Table 2</i>	<i>Action Items*</i>	<i>Percentage</i>
<i>Completed</i>	76	100%
<i>In Progress</i>	0	
<i>TOTAL</i>	76	100%

\*The number of action items does not match the number of recommendations above because, in most cases, one or more action items address multiple recommendations.

**HIGHLIGHTS**

The data below reflect the Division’s performance on key outcomes. Outcomes data used by the Division come from two sources: UC Berkley’s Center for Social Services Research website; and SafeMeasures. Both of them extract data directly from CWS/CMS and track performance on Child and Family Services Review (CFSR) measures. However, because Berkeley and SafeMeasures use different extract dates, there may be minor discrepancies in the data when comparing one with the other. In addition to the CFSR measures, SafeMeasures also provides data on completion of Structured Decision Making (SDM) tools and other process measures. The Division compiles Berkeley and SafeMeasures data into a quarterly data book which is reviewed and used by management to monitor progress on performance indicators. This report provides Berkeley data as of the first quarter of FY 2012-2013.

**Successes:**

1. C1.1 Reunification With Family Within 12 Months of Entering CPS Care (Exit Cohort)

Sacramento is moving towards the national goal of 75.2%, reversing the trend of the prior 3 years. Performance on this measure as of June 2012 is 71.8% which is better than the Statewide average (63.4%) and the baseline established in 2004 (70.4%). Of the 660 children reunified during the year (June 2011 through June 2012), 474 (71.8%) children were reunified within 12 months. Reunifying an additional 22 children would have placed Sacramento at the national goal of 75.2%.

<i>Table 3</i>	<i>June 2011*</i>	<i>June 2012*</i>
<i>Sacramento</i>	<i>62.9%</i>	<i>71.8%</i>
<i>California</i>	<i>64.4%</i>	<i>63.4%</i>
<i>National Goal</i>	<i>75.2%</i>	<i>75.2%</i>

*\* Berkeley Data*

2. C1.4 Reentry to CPS Care Following Family Reunification

The national goal for this measure is 9.9%. Reentry rates above the standard are not optimal. Sacramento’s reentry rate remained about the same in the most recent time periods, higher than both the national goal and the Statewide average. To have met the national goal, we should have readmitted 79 children instead of 115 children. While reentry is still high, the current rate (14.9%) represents substantial improvement over the 2004 baseline (19.2%). It is remarkable that the reentry rate remained virtually unchanged in light of the increase in reunification. This means children are safely reunifying with their families.

The Division is committed to continued improvement on this measure and is focusing on gaining a better understanding of the factors affecting current reentry rates. For this reason, a quality assurance review of reentries will be a high priority for this year to

inform the development of effective improvement strategies. Concurrently, the Division will also focus on strengthening after-care plans, which provide families with linkages to community-based services and other resources to keep children safe and families stable after reunification.

<i>Table 4</i>	<i>June 2011*</i>	<i>June 2012*</i>
<i>Sacramento</i>	<i>14.8%</i>	<b><i>14.9%</i></b>
<i>California</i>	<i>11.8%</i>	<i>11.8%</i>
<i>National Goal</i>	<i>9.9%</i>	<i>9.9%</i>

*\*Berkeley Data*

3. Timeliness of Adoptions:

Sacramento is performing well above the national goal on a composite of five indicators related to adoption timeliness (Adoption Within 24 Months, Median Time to Adoption, Adoption Within 12 Months, Legally Free Within 6 Months and Adoption Within 12 Months/Legally Free). The national goal for this composite is 106.4 and Sacramento's performance is 122.1 according to the latest Berkeley data (October 2012). Current performance represents a dramatic improvement over the baseline of 104.9 established in 2004 and is well above the California average of 111.9.

<i>Table 5</i>	<i>Q2 2011*</i>	<i>Q2 2012*</i>
<i>Sacramento</i>	<i>110.1</i>	<b><i>122.1</i></b>
<i>California</i>	<i>109.8</i>	<i>111.9</i>
<i>National Goal</i>	<i>106.4</i>	<i>106.4</i>

*\*Berkeley Data*

4. 2B Timely Response to Immediate Referrals

By definition, response to immediate referrals should occur within 24 hours. While timely response decreased slightly, Sacramento is still performing well above the California goal. Sacramento has been performing above the State goal on this measure since the fourth quarter of 2008. The Division is also performing well above the baseline of 85.4% established in 2004.

<i>Table 6</i>	<i>June 2011*</i>	<i>June 2012*</i>
<i>Sacramento</i>	<i>98.2%</i>	<b><i>96.6%</i></b>
<i>California</i>	<i>98.1%</i>	<i>97.6%</i>
<i>State Goal</i>	<i>90%</i>	<i>90%</i>

*\*Berkeley Data*

**Challenges**

1. 2B Timely Response to 10-Day Referrals

Sacramento continues to experience challenges in responding to referrals designated for response within 10 days. Performance on this measure as of June 2012 is 88.1% which is below the State goal of 90% and the Statewide average of 92.9%. However, current performance still represents a substantial improvement from the 2004 baseline of 83.6%.

<i>Table 7</i>	<i>June 2011*</i>	<i>June 2012*</i>
<i>Sacramento</i>	<i>93.5%</i>	<b><i>88.1%</i></b>
<i>California</i>	<i>94.5%</i>	<i>92.9%</i>
<i>State Goal</i>	<i>90%</i>	<i>90%</i>

*\*Berkeley Data*

One factor affecting timeliness of response is timeliness of assignment. Challenges with timely assignment often resulted in the Emergency Response (ER) social worker receiving the referral on the seventh or eighth day of the ten-day response window. To expedite assignments, the ER program implemented a new assignment process whereby a 10-day assignment supervisor assigns referrals directly to ER social workers and supervisors. This new process, tested in August and adopted in September 2012, allows for referrals to be assigned timely and directly from Intake to the field social worker. Preliminary results are encouraging. The data in Table 8 shows that during March 2012, prior to the implementation of the new process, only 14.5% of 10-day referrals were assigned on the same or next day. In August, however, that number increased to 68.5%. The table also shows the assignment rate for California for comparison purposes.

Table 8

<b>Assignment Day</b>	<b><u>CPS</u> March</b>	<b><u>California</u> March</b>	<b><u>CPS</u> August</b>	<b><u>California</u> August</b>
Same	5%	23.4%	27.7%	25.7%
Next	9.5%	32.7%	40.8%	37%
Two-Three	34.4%	24.5%	22.9%	24%
Four-Five	36.9%	15.4%	5.1%	10.5%
Six-Ten	14.2%	3.9%	3.6%	2.7%
Over 10	0	0	0	0

2. C3.3 In Care Three (3) Years or Longer

This indicator looks at the number of children in foster care who emancipated or turned 18 while in care and reports the percentage who had been in foster care for three years or longer. The national goal for this measure is 37.5% and optimal performance therefore

would be at or below this percentage. Both Sacramento (67.2%) and California (56.3%) are not performing well on this measure, being far above the national goal. While Sacramento made improvements from 2007 to 2010, the most current data show performance moving in the wrong direction. The Division is committed to improving performance on this indicator. To that end, Sacramento will be reviewing strategies implemented by other jurisdictions where meaningful improvement has been delivered as well as looking closely at the target population to identify service gaps.

<i>Table 9</i>	<i>June 2011*</i>	<i>June 2012*</i>
<i>Sacramento</i>	<i>60%</i>	<i>67.2%</i>
<i>California</i>	<i>59.2%</i>	<i>56.3%</i>
<i>National Goal</i>	<i>37.5%</i>	<i>37.5%</i>

*\*Berkeley Data*

### 3. S1.1 No Recurrence of Maltreatment

This measure looks at the number of children who did not experience another maltreatment episode within six (6) months of a substantiated allegation. The national goal is 94.6% at six (6) months. Sacramento is just below the goal at 94.3%, but is doing better than California. Sacramento has improved considerably from the baseline of 87.1% established in 2004. Eighty-four children had a recurrence within six (6) months in the most recent time period. Although Sacramento is statistically doing well on this measure, the Division is committed to further reducing the number of children who experience recurrence of abuse, including a review of risk assessments and/or case plans, aimed at a proactive pursuit of individualized risk reduction strategies to avoid reliance on generic services.

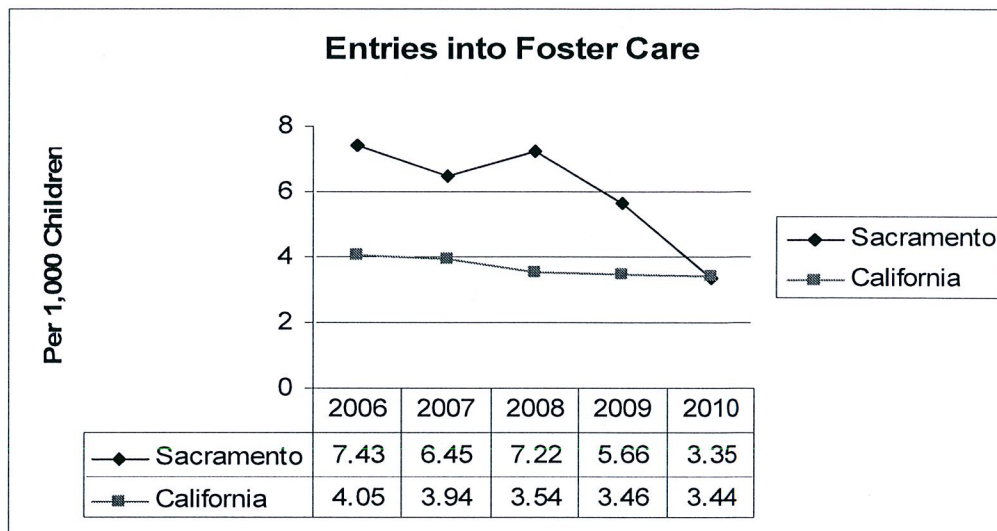
<i>Table 10</i>	<i>Q2 2011*</i>	<i>Q2 2012*</i>
<i>Sacramento</i>	<i>95.1%</i>	<i>94.3%</i>
<i>California</i>	<i>93%</i>	<i>93.3%</i>
<i>National Goal</i>	<i>94.6%</i>	<i>94.6%</i>

*\*Berkeley Data*

### SPOTLIGHT ON PRACTICE

Historically, Sacramento County's entry rates into foster care have been significantly higher than the State's, with a baseline of 7.1% established in 2004. However, between 2006 and 2010, Sacramento's entry rates have decreased sharply, coming closer to the Statewide average. Graph 1 below shows the decreasing trend in entry rates in Sacramento.

Graph 1



In collaboration with Casey Family Programs, the Division has embarked on the development of a paper tentatively titled: *Taking a Closer Look at Children in Sacramento County in the Reduction of Entry Rates with an Emphasis on African-American Children and Youth*. While the reduction of all child entries is a focal point, the paper looks closely at the issues that continue to challenge local jurisdictions in terms of disproportionality. Entry rates for African-American children in Sacramento County have decreased by 53% between 2006 and 2010. Statewide, the decrease has been 5% during the same time period. This dramatic reduction occurred concurrently with the implementation of practices and policies aimed at improving services for all children and families. After analyzing the data and considering the timing of the practice improvements, there is strong evidence that those practice and policy improvements have been drivers in reducing the number of African-American children entering foster care in Sacramento County. Some of the practice improvements implemented include the Medical Neglect Review Team, Early Intervention Family Drug Court, Protective Custody Warrants, Differential Response, Kinnections, Signs of Safety and Centralized Placement Support Unit.

The Division has been committed to exploring issues regarding disproportionality of African-American children coming into care. While entry rates for all children, particularly African-American children, have decreased, Sacramento still has a disproportionate number of African-American children coming into care. The Division will continue to focus on disproportionality as an area for further improvement.

Currently, the Division is actively participating on the Blue Ribbon Commission, Practices/Data subcommittee. The subcommittee's goal is to utilize data to identify strategies that can strengthen and sustain the work being done by child-serving systems (including CPS and other County and community-based agencies serving at risk-families and families already in care) to reduce the number of disproportionate child deaths within



the African-American Community. The Division is encouraged by the vision of shared responsibility and accountability that is emerging from the work being done by the Commission.

**PROGRESS TOWARDS IMPLEMENTING THE OVERSIGHT COMMITTEE'S  
2012 RECOMMENDATIONS**

The Oversight Committee's 2012 Annual Report included a number of recommended improvements related to the Division's Emergency Response program. Table 11 lists those recommendations and the actions the Division is taking to address them.

Table 11

Recommendations	Action
1. Authorize an external consultant to work with CPS Management and staff at all levels to create a professional, strength-based working environment in which social workers are motivated to work, conduct quality investigations, participate in continuous quality improvement, and take pride in their important role in the protection and well-being of Sacramento County's children.	The Division receives ongoing technical assistance from Casey Family Programs and the Northern California Training Academy. The Division believes that actions taken to address other recommendations below will address this one as well.
2. Prioritize the completion, dissemination and training of meaningful and useful Policies, Process and Procedures (P/P/P) as they are the foundation of standardizes operations.	The Division is working with UC Davis and Casey Family Programs to identify formats that maximize accessibility and clarity and that also allow for posting on the Department's intranet. Further, Casey Family Programs is facilitating Business Process Mapping (BPM) sessions with ER which will help inform ER P/P/Ps. Two BPM sessions have been held to date, with the final session to be completed in March 2013.
3. Evaluate staff in a meaningful way that leads to improved performance, accountability, and better protection of children.	The Division implemented a meaningful performance evaluation program in 2010 and continues to prioritize annual performance evaluations. As of January 4, 2013, the Division completed 99% of all evaluations due in 2010 and 91% of those due in 2011. While the completion rate for 2012 was poor (54%), active steps are being taken to improve that rate.
4. Create a learning culture with a proactive annual training plan that is linked to daily practice for each position through supervision and accountability.	The Division provides extensive program-specific, practice-related training as well as core training to staff members. It develops a yearly training plan which is required by and submitted to the State. Each program has a program-specific training plan. In addition, the Continuous Quality Improvement process the Division is developing may include

**ATTACHMENT A**

**Agenda Date: February 26, 2013**

	training and/or feedback directly related to daily practice.
<p>5. Conduct thorough investigations of every referral and all of its unique circumstances within a minimum standard of operation based on best practice.</p>	<p>The Division is committed to and continues to monitor the quality of investigations. It has developed written protocols outlining the requirements of an ER investigation. The Division’s consistent use of SDM Safety and Risk Assessment tools demonstrates its commitment to quality and investigative rigor. In order to strengthen family engagement and critical thinking skills, the Division is conducting extensive, ongoing training on Signs of Safety (SOS). This training is being provided with the help of expert consultants and includes the use of coaches who go out in the field with social workers to help them apply SOS concepts while working with families.</p>
<p>6. Develop Policies, Process and Procedures (P/P/P) and training to support staff in making sound dispositions based on quality investigations.</p>	<p>The Division has a P/P/P that specifies the requirements of an investigation and continues to monitor and provide training regarding dispositional findings. CPS is utilizing a number of strategies to bring more clarity and specificity to both the training on dispositions and the ER P/P/P. These strategies include: monthly quality assurance reports; technical assistance provided by the Northern California Training Academy and Sacramento County Counsel; and the ER Business Process Mapping.</p>
<p>7. Strengthen partnerships with and utilization of community service providers in the investigation and delivery of services to families.</p>	<p>One of the Division’s core values is to work closely with community partners in the delivery of services to families and as a result CPS has and continues to work diligently to strengthen those partnerships. This is evidenced by the fact that between October 2011 and October 2012, 1,484 service providers and parent/youth advocates participated in Team Decision Making Meetings. In addition, the Division continues to work closely with Birth &amp; Beyond Family Resource Centers to provide Differential Response to families who need supports but whose circumstances do not rise to the level of CPS intervention. The Division also collaborates with CAPC via a community resource specialist co-located at the CPS Intake Hotline to refer families to community services providers. From July – September 2012, the community resource specialist made 101 referrals. These examples represent only two of multiple strategies used by CPS to partner with community agencies to enhance the depth and breadth of services offered</p>

	<p>to families.</p> <p>The Division continues to experience challenges with documentation of collaterals. This is a barrier to accurately reflecting the work that is being done by social workers during the investigation. To address this challenge, the Division conducted specific training on collateral contacts that utilized lessons learned from Critical Incident cases.</p>
<p>8. Create opportunities for Continual Quality Improvement within a Quality Assurance Framework</p>	<p>The Division is working with Casey Family programs to create a continuous quality improvement framework that includes a number of areas: reevaluating the membership, structure and process of the Quality Council; shifting resources to increase capacity for quality assurance efforts; and creating quality assurance reviews and processes for Dependency services.</p>

### CONCLUSION

CPS continues to monitor practices and improve processes to increase safety, improve permanency, enhance well-being and demonstrate greater accountability. These efforts are generating positive trends on outcome measures related to entry into foster care, reunification and adoption. It is particularly encouraging to see lower entry rates for all children accompanied by a decline in the number of African-American children who entered foster care. While these reductions are a reflection of the Division's work over the past few years, there is still work to be done to bring entry rates in line with Statewide numbers and fully address the disproportionality of African-American children in foster care. To this end, the Division has been participating on the Blue Ribbon Commission by serving as a member of the Practices/Data Subcommittee. The committee focuses on utilizing data to identify strategies directed toward reducing the number of disproportionate deaths of African-American children. CPS has provided both practice and data information and has been a part of strategic planning recommendations that will move forth to the Board. The opportunity to participate as a member of the Commission has benefited the Department in that there is investment in shared responsibility and accountability as a collective whole of child and family-serving agencies.

The Division is working on a number of initiatives to strengthen current practices and improve efficiency. Some of these include the Emergency Response Business Mapping Process, Signs of Safety Fidelity of Implementation and SDM and TDM workgroups, all with technical assistance from Casey Family Programs and the Northern California Training Academy. These efforts and corresponding results will be highlighted in future reports.

CPS is also partnering with the Division of Behavioral Health Services to implement trauma-focused mental health services to children/youth in the child welfare system as required by the Katie A. lawsuit. In July 2002, a class-action lawsuit (Katie A., et. al vs.

the State of California) was filed against the State of California and the County of Los Angeles on behalf of children and youth in foster care as well as those at risk of entering foster care. The plaintiffs in this legal action requested that the State and the County make improvements to their delivery of mental health services. This settlement requires the State and local jurisdictions to dramatically change the child welfare and mental health systems providing minimal funds to do so. The State is expected to release the Core Practice Model manual to counties in 2013.