SIP P5—Placement Stability Workgroup Meeting Minutes

Date: January 31, 2019		Lilliput, 2750 Sutterville Rd., Main Building Conf. Room	
☒ Kelley Donato (CASA))(Co-Chair)	☒ Stephen Wallach (CPS)(Co-Chair)	☒ Ayesha Harris (CPS)	☒ Barbara Ricciuti-Colombo (CPS)
☐ Brenda Dabney (CLC)	☒ Brian Olden (Behavioral Heatlh)	☐ Bryan Jones (CPS)	☐ Carol Ramirez (Lilliput)
☒ Cathi Johnson (CPS)	☒ Cora Hardy (Better Life FFA)	☒ Cynthia Vanzant (CPS)	☐ Dana McKnight (ARC)
☒ Deanna Boys (UCD)	☒ Donna Ibbotson (Lilliput)	☒ Eva Schrage (CPS)	☐ Guy Klopp (CPS)
☒ Inez Whitlow (Chicks in Crisis)	☒ Jen Crosetti (Sierra Forever)	☒ Keeva Pierce (CPS)	☐ Lindsey Forte (UCD)
☒ Mayra Pineda (CPS)	☐ Mike Baldwin (CAPC)	☐ Peter Bell (Wind Youth Svc.)	☒ Susan Timmer (UCD)
☒ Teresa Rodríguez (CPS)	☒ Trish Kennedy (SCOE)	☐ Yuir Kimura (Stanford Youth Solutions)	

Agenda Item/Discussion	**Minutes**
Review of Materials (handouts)--Stakeholder Meeting 1/16/19 Feedback Notes	

1. Welcome & Introductions (Stephen)	Teresa provided overview of P5 workgroup purpose and work thus far.
	
	1. Every 5 years the state mandates that CPS produce a System Improvement Plan (SIP) which is driven by the County Self-Assessment (CSA) which is completed the year prior. The CSA evaluates how we are performing on the outcomes that the state measures. The SIP identifies outcome areas to focus on. The SIP includes strategies for improving in the identified outcome areas. For P5 there were a couple things caregivers (CGs) and partners identified as contributing factors:
	 a. Lack of support from the agency, leading to giving notice
	 b. Little to no information provided when children are placed. Would be great to get a clearer picture of child's needs at the beginning.
	 c. Lack of social worker engagement.
	2. Some solutions identified:
	 a. Resource guide for CGs, modeled after San Diego's guide to be provided to families when a child is placed with them.
	 b. Look at data – what is contributing to placement instability.
	    i. Youth going to CRH – turns out not skewing data. Only 20% of the baseline group looked at went to CRH. Decided to focus on the 80%.
	    ii. Honed in on looking at youth with one to two placement moves in a 12 month period. Out of 400+ cases, decided to focus on cases – randomly selected. Review of case documentation. Focus of review:
	      1. Were children/CGs assessed for needs to ensure stability
	      2. Were services put in place
	      3. Interventions to preserve placement

		iii. Results of case reviews
		    1. Not checking in with CGs to find out what they needed to support placement
		        a. Systemic issue – training SW to ask about the child; asking about CGs is not intuitive.
		    2. No teaming
		        a. Staffing shortages at the time were a contributing factor.
		    3. 10 out of 70 first move was to a relative. 29 went to relative in their second move. A good number of moves are for positive reason.
		  c. Briefly review of SIP action steps (handout)
		3. Are there other things that we can do to improve?
		  a. Discuss other options
		    i. From Behavioral Health –resource program to provide stabilization for CGs in crisis. In the works, ETA March or April. Could impact placement stability but how do we measure that?
		    ii. Engagement specialists who assist with family finding
		4. Looking at data entry errors impacting placement – change of licensure showing up in CWS as a placement move. Data team has been trained to correct this. Stephanie Linka has identified potentially 45 placements impacted by data entry error. SWs also need training on completion of 1173.
		  a. Are we going back to fix the data? Can we hone in on the reporting period Q3 2018 for any that can be fixed?
		  b. Meeting participant reports also happening when change from foster to guardian or foster to fost-adopt.

2.	Review and Approve 11/29/18 Meeting Minutes (Kelley)	Minutes reviewed; comments made:
		• FFAs assistance in gathering data regarding reasons for placement changes. Hope to get to FFA Director's meeting (Stephen or Teresa) to present this as a request of the FFAs.
		  o Lilliput reports outcomes and breaks down data that tells story of efforts to outcome.
		  o Sierra Forever Families also does a lot of good data work
		• Last meeting felt very productive. Lots of conversation around data already collected, and how do we move that into action. Not getting stuck on more data for the sake of more data. Identifying action steps.

3.	SIP Stakeholder (EMT, Permanency Supervisors & Community Partners) Feedback (Teresa)	SIP Progress Report looking at Q3 2018. Measure went up nearly an entire point since the baseline. Meeting looked at what's contributing, are there systemic factors. EMT feedback: • Errors in data • CFTs not fully implemented during that period o MHT already doing CFTs for children receiving specialty MH services

	• Not all eligible children referred to PC-CARE
	Feedback from Permanency Supervisors
	• Lack of accountability on what worker's responsibilities are.
	• Supervisors feel RFA is failing. Thought RFA would provide the same level of support to CGs as FFAs. This is a misconception - still SW's responsibility.
	• Push to get kids out of congregate care and into family like setting. These are good move, but move nonetheless which impacts the measure.
	• Trauma informed training for CGs not enough. Needs to be continuous coaching so CG is educated and learn how to work with the behaviors.
	• Workers lack conflict resolution skills, ability or knowledge of how to implement removal prevention strategies. Lack of engagement to try to prevent placement disruption.
	• CGs no well matched with children they are taking placement of.
	    o CPSU contributes to loss of SW knowledge of the children and the families who can best meet their needs.
	• Delay in MH services and linking children to services in a timely manner.
	    o Lack of information on referral
	    o Lack of communication with CG regarding referral to services
	• Delay in RFA approvals. If home is not 309 approved for emergency placement, can take up to 90 days. Sac Co is actually doing very well in completing approvals compared to other counties.
	• Chronic AWOL youth impact
	• Unrealistic expectations of RFA homes, especially with relative/NREFM homes not equipped to care for acuity kids presenting with; we are not supporting child/CG adequately
	Stakeholder feedback (handout):
	• Lack of engagement from the social worker
	• Power differential during CFTs. Need to equalize playing field.
	• Caregiver readiness and skill to meet child's needs.
	• CFTs not being facilitated in same way. Dependent on facilitator's skill set.
	• Lack of quality in face to face contacts

4. Case Reviews Findings (Stephen, Teresa & Mayra) • How do we use our findings to improve our performance in placement stability?	Mostly covered in introduction. Other comments: • In many cases, reviewer could not even tell a placement move had occurred based on the documentation. o While agency tries not to be prescriptive and give autonomy, reviewers determined that there needs to be a minimum level of guidance for documentation – permanency, supports, services, visitation, etc.

	- o SW need to ask more questions, get more details about how things are going with child and caregivers. Need to know what is happening so they can know how to help them. - Workers need to build relationships with child and caregivers and value the placement. Unintended consequence of CPSU – loss of connection. - FFA (Sierra Forever) has built in process for analysis of placement disruption – 14 data points. Helps drive SW practice and attachment. - o Will share tool with Sacramento County - Note that SWs may have really great practice but may have poor documentation which could be for a lot of reasons – training, poor technology, high caseloads, etc. Be clear we are talking about documentation, not necessarily practice. - o CFSR case reviews support this – reviewers find this upon interviews with social workers – they have a wealth of information about the case that wasn't documented. - o State does not give allowance for lack of documentation. If it isn't documented, "it didn't happen" - Because of SafeMeasures, focus may be on entries, not quality of the entries. - Creative ideas for improving documentation - o Contests - o Random supervisory reviews during one-on-one staffing.
5. Follow Up From 11/29/18 Meeting (Stephen) - Placement Stability Rates for FFAs - Development of survey for caregivers - Resources sent to Ayesha - Review of data related to time it takes to link & for child to receive services	- Placement Stability Rates for FFAs – Stephen or Teresa to attend next FFA directors meeting to see if FFAs can gather data regarding placement stability. - o Lilliput collects kin family data on a quarter basis. 96% stability rate within kin homes a large number do reunify – 58%. Rest stay and go to guardianship or adoption (only 30%). - o **Q – How does this compare when most of your families are not kin?** ▪ Behaviors have a greater impact on non-kin placements. ▪ Characteristics/temperament of CG and youth's behaviors. - o **Q - How does support/resources bolster placement stability?** - Development of survey for caregivers - o Cathi – survey ready specific to some ideas directly in relation to Denise Goodman's feedback, but can include other things in the survey if needed. Planning for in-person meetings/dinners but also doing survey that don't require in-person attendance. ▪ Want to know what CG considers support. ▪ Want to send survey out soon. Any additions should be done soon. Provide feedback to be completed via emails. - o Teresa: focus on families that gave 7 day notice would provide more beneficial information for purpose of placement stability. Should be a phone conversation rather than email/mail survey.

	▪ Don't make it about risk and liability – CGs may not want to respond. ▪ Don't make it about the 7 day notice in particular. Make CG feel safe. - o **Request: Cathi to send survey to see if it answers what workgroup needs. Don't want to duplicate efforts. If needed, can do a follow up contact.** • Resources sent to Ayesha - o Teresa sent resource guide to use as a template. - o Ayesha to follow up with those who need to send resources. ▪ Bryan Jones – WEAVE ▪ Cynthia Vanzant – Medical/Dental ▪ Deanna Boys - UCD - o 41 pages of resources already identified. RFA SWs have been very helpful identifying resources CGs request/need. - o Anyone who has resources (don't require SW referral) can send them directly to Ayesha ▪ Request short description of the resource. Very helpful. • Wrap Referral data – time to services (Brian Olden) - o All referrals come to him. Made adjustments to process to streamline it. Referral form is now fillable PDF and everything is electronic. Conducts Wrap services orientation for CPS workforce, includes service providers. - o Can complete the referral within an hour when form is complete. ▪ Service request entered and sent to Access. ▪ Sends email back to CPS worker and assigned provider confirming that request has been entered. - o Problems encountered which create delays in processing: ▪ Incorrect demographic information on form. ▪ MA big issue. Access will not process when child does not have active medical. • Cynthia Vanzant can assist with MA problems. Teresa is her backup. ▪ SWs indicating on referral "anyone but…." as preferred provider. Reaches out to SW to inquire about problems. Finds that provider is very receptive to feedback. - o ACCESS barriers to initial engagement: Incorrect phone numbers so access can't contact CGs. AWOLS so can't find child. Acute care or YDF also impact time to services. - o Providers not getting paid. - o AAP youth are hardest to get into service. Coordination has been very difficult. - o Average timeframes: ▪ Wrap request to Access authorization – 5.1 days ▪ Wrap referral to fist face to face service – 18.5 days. Counts from when Access sends to provider.

		- Will be doing deeper dive to find out reason for delays. - Hope to have additional data for the next meeting. **Q: Do service providers have minimum level of expectation? What consequences are there if they are not meeting them?** - Things like having wrong phone number should be quickly actionable. Are they contacting the SW, supervisor, PM, etc. to try to get a correct number?
6.	Discussion on P5 Placement Stability Q3 2018 Data (Teresa)	Handout; previously discussed. 289 moves less to meet national standard. Email Teresa if any questions on the data.
7.	Discussion on P5 Placement Stability Data—CSEC & AWOL (Barbara)	AWOL and CSEC are a small population. Time Period – 05/01/17 – 12/31/18 (20 months) - Looked at AWOL only counting if AWOL and went to new placement. 79 AWOLS – either still gone or went back to their same placement. 45 AWOL moves or 5% due to AWOL. **Q: Is data looking at one child one move or duplicative children?** Same child can move repeatedly. Would make more sense to look at each move rather than each child. - Barbara will check. - CSEC – youth may be identified as CSEC after the move happened so data wouldn't capture that. 8% of moves involve a CSEC youth 5% are both CSEC and AWOL. - Both AWOL and CSEC are a small group. Limited impact to placement stability **Q – Will actual numbers be extrapolated and shared with the group?** - Data pulled will not exactly mirror UCB data due to the passage of time and level of access to data, PA cannot perfectly match P5 data, but the methodology should be the same. **Q – Focus CSEC/AWOL data to match Q3 2018 to see how they impact P5.** - Barbara to follow up.
8.	Review of Strategy Action Steps A-I Scheduled for Completion in Year 3 SIP Progress Report (Teresa & All)	Ask group to take handout back for review. At next meeting can look more specifically at the steps. Analyzing data – hope to have more information regarding data reconciliation. Teresa working with Stephanie Linka on this. Barbara can have more update on CSEC/AWOL data.
Next Steps (Stephen/All)		Next meeting: Thursday 3/21/19, 9:30–11:30, Sierra Forever Families, 8928 Volunteer Ln. Suite 100, Sacramento CA 95826 Suggested to invite probation to the meeting. Also suggested to invite social worker and resource parents.