July 13, 2011

Dave McDowell, Bureau Chief
Outcomes & Accountability Bureau
Children & Family Services Division
California Department of Social Services
744 P Street, MS 8-12-91
Sacramento, CA 95814

Mr. McDowell,

Enclosed please find the 2011 PQCR report for the County of San Diego, Child Welfare Services and Probation.

If you have any questions, please contact me: (858) 514-6601.

Sincerely,

[Signature]
Roseann Myers, J.D., R.N., Assistant Deputy Director
Policy and Program Support
Child Welfare Services
4990 Viewridge Ave, 1st floor
San Diego, CA 92123

Enc. 2011 PQCR Report, San Diego County
California Child and Family Services Review
Peer Quality Case Review
County of San Diego

2011

Debra Zanders-Willis, Child Welfare Services Director
Mack Jenkins, Chief Probation Officer

CWS & Probation Focus Areas
Least Restrictive Placement – Point-in-Time - Relative Placement
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### California's Child and Family Services Review

**County Quality Case Review**

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<th>San Diego</th>
</tr>
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<td><strong>Responsible County Child Welfare Agency:</strong></td>
<td>Health and Human Services Agency: Child Welfare Services</td>
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<td>May 9 - 13, 2011</td>
</tr>
<tr>
<td><strong>PQCR Final Debriefing:</strong></td>
<td>May 13, 2011</td>
</tr>
<tr>
<td><strong>Date Submitted:</strong></td>
<td>July 13, 2011</td>
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### County Contact Person for the Peer Quality Case Review

<table>
<thead>
<tr>
<th><strong>Name:</strong></th>
<th>Roseann Myers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Title:</strong></td>
<td>Assistant Deputy Director</td>
</tr>
<tr>
<td><strong>Address:</strong></td>
<td>4990 Viewridge Avenue, San Diego, CA 92123</td>
</tr>
<tr>
<td><strong>Phone/Email:</strong></td>
<td>858-514-6601, <a href="mailto:roseann.myers@sdcounty.ca.gov">roseann.myers@sdcounty.ca.gov</a></td>
</tr>
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</table>

Submitted by each agency for the children under its care

<table>
<thead>
<tr>
<th><strong>Submitted by:</strong></th>
<th>County Child Welfare Agency Director (Lead Agency)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name:</strong></td>
<td>Debra Zanders-Wills</td>
</tr>
<tr>
<td><strong>Signature:</strong></td>
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</table>

<table>
<thead>
<tr>
<th><strong>Submitted by:</strong></th>
<th>County Chief Probation Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name:</strong></td>
<td>Mack Jenkins</td>
</tr>
<tr>
<td><strong>Signature:</strong></td>
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</table>
Acknowledgements
The County of San Diego Child Welfare Services (CWS) and Probation extends sincere appreciation to the following people for their time, hard work and compassion for children and families. Each of the individuals listed below made significant contributions to this PQCR. Their work and ideas are reflected in this report.

Peer Review Team Members from Other California Jurisdictions
Sarah Wales - Alameda County CWS
Lorena Estrada - Kern County Probation
Annette Thomas - Los Angeles County CWS
Claudia Bustillos - Los Angeles County CWS
Karen Werno - Orange County CWS
Isabell Gutierrez - Orange County Probation
Judy Casillas - Orange County Probation
Pamela Connie - San Francisco County CWS
Marie Canete - Santa Clara County CWS

Community Partners
Danielle Davis - YMCA
Melissa Brooks - YMCA
Myriam Sanchez - YMCA
Maura Gordon - Casey Family Programs

Public Child Welfare Training Academy (PCWTA)
Jennifer Tucker-Tatlow
Anita Aldrich

California Department of Social Services
Julie Cockerton
Kelly Winston

San Diego County - Child Welfare & Probation
Leesa Rosenberg
Antonia Torres
Pablo Carrillo
Leah van Lingen
Becky Kennedy
Richele Swagler
Elizabeth Edwards
Luis Fernandez
Erica Grobler

PQCR Consultant - Outcome Innovations
Karen Martin
Executive Summary

General Purpose of the Peer Quality Case Review (PQCR)
The purpose of the PQCR is to learn how to improve outcomes for children and families in California. The PQCR provides a focused examination of a selected area of practice to better understand the child welfare system and youth placed in out-of-home care in the probation system.

Selection of the PQCR Focus Areas
Both Child Welfare and Probation chose State Measure 4B: Least Restrictive Point-in-Time: Relative Placement. These agencies agreed that they wanted to increase the number of children safely placed in relative or kinship homes, also referred to as Non-Related Extended Family Member (NREFM) homes. (The terms “relative” and “NREFM” will be used interchangeably throughout this report). Once this measure was selected, CWS and Probation agreed to look closely at the placement approval process and stability of children placed in these homes.

Summary of Recommendations

Child Welfare
The following is a condensed list of recommendations that came from social workers, relatives and youth interviewed during the PQCR process. The complete list can be found in the body of the report.

Placement Approval Process

Exemption Process
• Placement supervisors should have direct access to FBI, DOJ and CACI clearances so they can retrieve the results from livescans right away.
• All policies should be followed uniformly across all regions.

Family Finding
• Genograms and ecomaps should be used by all placement social workers to locate relatives when children first come into protective custody.
• There should be a uniform place to document family finding efforts in the CWS/CMS application.

Assessments
• Simplify the process. There should be fewer forms used for the home evaluation.
• Assessment questions need to be more in-depth, and should address how to make a placement work.

Team Decision Making Meetings (TDMs)
• TDMs should be held before initial placements and before changes of placement.
• Placement workers and other relevant people should attend TDMs to ensure that relative caregivers are prepared to take the child into their home.
Preparation
• The focus in the home evaluation should shift to evaluate the needed resources, rather than making the caregiver feel scrutinized and investigated.
• Caregivers should be provided front-loaded services where they can get all of the information (such as an explanation of the placement process, the history of the child, behavior of the child, and available support services) before, or as soon as, the child is placed in their home.

Policy Challenges
• Emergency placement policies should be clarified and implemented uniformly among all regions.
• The program guide needs to be updated and simplified. The sections on placement should be reduced from 18 files to two files: Placement Approval Process and Support/Placement Stability. Minimizing the number of forms would allow placement workers to focus more on the actual assessment than on the paperwork associated with making a relative placement.

Placement Unit Challenges
• Placement Units should be fully staffed, with all staff associated with placement in one unit, working for a supervisor who is very knowledgeable about the policies and procedures of placement.
• The roles and expectations of all members of the Placement Unit should be clear.

Interstate Compact on the Placement of Children (ICPC)/ Inter-County Transfer (ICT)
• Inter-County Transfer and ICPC policies need to be revisited to ensure that relative caregivers get approved, served and funded in a timely and consistent manner.

Support/Placement Stability

Funding Issues
• Relative placement rates should be commensurate with foster care rates.
• Payment to the relative caregiver should start from date of placement, even if the home is not approved.

Support/Community Resources/Tangible Help
• A Relative Support Association should be created, with hired staff, facilitation, a budget, training capacity, and peer support services. This would allow relative caregivers to receive support and resources equal to what foster care providers receive.
• Partnerships should be developed with childcare centers in San Diego County to place relative caregivers higher on lists for discounted childcare. Funds should be established to augment the relative’s ability to pay for child care.
Family Engagement
- Caregivers want to feel more support, trust and respect from social workers and the court. They request that the child welfare system focus on building trust between social workers and relatives. They want to be treated with a sense of gratitude. They want to feel they are a part of a team. They want to have their anxiety reduced by a positive working relationship with the social worker.

Case Practice
- Monthly home visits should reduce stress rather than create stress for the family.
- Social workers, or other designees, should supervise visits between parents and children.

Probation
The following recommendations came specifically from probation officers interviewed during the PQCR process.

Placement Approval Process

Exemption Process
- The “traveling road show” to educate other probation officers about how to make referrals for home evaluations should be repeated.
- Intake probation officers should be trained in the home evaluation process so that relative placement is considered in more cases.

Preparation
- Up-front orientation training for all new relative placements should be provided.
- Probation officers outside of the Placement Unit should receive training about relative placements.
- An in-person meeting with the relative and the youth at the very beginning of the placement to discuss the rules of the home and the court orders should be reviewed.

ICPC/ICT
- State technical assistance should be sought to improve the quality of documentation on inter-county transfer cases that involve relative placements.

Support/Placement Stability

Funding Issues
- An emergency fund should be created to purchase essential items for new relative placements. Consideration could be given to partnering with community non-profits to apply for grant funding to meet this need. Contracts could be amended to include tangible items, such as beds and dressers, for probation youth placed with relatives and NREFMs.
- Policies and laws that hold relative caregivers responsible for a probation youth’s fines or restitution should be revisited.
Support/Community Resources/Tangible Help

- More transportation assistance for relative caregivers is needed.
Introduction

General Purpose of the Peer Quality Case Review
In January 2004, Assembly Bill 636 was passed in California. The intent of this Bill was to establish outcome measures and accountability in Child Welfare Services. The three primary outcomes that are measured are: safety, permanency and wellbeing. Four components drive this process:

- Continuous Quality Improvement
- Interagency Partnerships
- Community Involvement
- Public Reporting of Program Outcomes

This process is referred to as the California Outcomes and Accountability System, or the California Child and Family Services Review (C-CFSR). There are three primary components of the C-CFSR:

- A Peer Quality Case Review (PQCR)
- A County Self-Assessment (CSA)
- A System Improvement Plan (SIP)

The C-CFSR is undertaken every three years, starting with a PQCR.

The purpose of the PQCR is to learn how to improve outcomes for children and families in California. The PQCR provides a focused examination of a selected area of practice to better understand the child welfare system and youth placed in out-of-home care in the probation system. The completion of a literature review, highlighting existing research related to the focus area, provides a framework to guide the inquiry into practice. The PQCR recognizes that line and supervisory social workers and probation staff have hands-on knowledge of the system and the families that they serve. They can offer tangible suggestions about how to improve practice and outcomes for children and families. The alignment of the findings with the research in the focus area provides a guide for practice improvement that may lead to specific strategies for the County to consider in the subsequent SIP.

The goals of the PQCR are to:

- Perform a research guided analysis of practice as it relates to a specific group of cases pertinent to the focus area.
- Identify key patterns of agency strengths and challenges, and arrive at a consensus among interview team members.
- Report interview team findings and recommendations on improving practice in the area of focus for the host county.

The PQCR provides a rich and deep understanding of actual practices in the field. The PQCR brings in outside expertise, such as the California Department of Social Services
(CDSS), child welfare and probation peers from other counties, and community stakeholders, to assess the strengths and needs of County probation and child welfare services delivery and practice. The PQCR, along with the CSA, informs the development and revision of the SIP. The PQCR is not intended to be an audit of case practice, but rather an opportunity for every county to benefit from an additional source of information.¹

San Diego County is currently in its third triennial cycle. The PQCR was conducted the week of May 9 - 13, 2011. The CSA event will follow in Fall 2011, with the report due 1/15/12. The final SIP report is due 5/15/12.

**General Demographics of San Diego County/Unique County Issues**

San Diego County is the second most populous county in California, with 3,095,313 people. Los Angeles is first with 9,818,605 and Orange is third with 3,010,232 people.²

San Diego County shares an 80-mile border with Mexico and has 70 miles of coastline. The County covers 4,261 square miles.³

The chart below describes the ethnic breakdown of San Diego County’s citizens:

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>2010</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>991,348</td>
<td>32%</td>
</tr>
<tr>
<td>Non-Hispanic</td>
<td>2,103,965</td>
<td>68%</td>
</tr>
<tr>
<td>• White</td>
<td>1,500,047</td>
<td>48%</td>
</tr>
<tr>
<td>• Black</td>
<td>146,600</td>
<td>5%</td>
</tr>
<tr>
<td>• American Indian</td>
<td>14,098</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>• Asian</td>
<td>328,058</td>
<td>11%</td>
</tr>
<tr>
<td>• Hawaiian &amp; Pacific Islander</td>
<td>13,504</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>• Other</td>
<td>6,715</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>• Two or More Races</td>
<td>94,943</td>
<td>3%</td>
</tr>
<tr>
<td><strong>All Ethnic Groups</strong></td>
<td><strong>3,095,313</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

The median household income is $62,771.
http://www.sandag.org/resources/demographics and other data/demographics/fastfacts/regi.htm
San Diego County is home to a large military population. Military installations cover nearly 6% of the County. Although less than 1% of the entire U.S. population lives in
San Diego County, the region is home to more than 8% of Active Duty U. S. military personnel. Nearly 17% of all Active Duty Navy personnel and nearly 30% of all Active Duty Marine Corps personnel are stationed in San Diego County. An estimated 56,096 of San Diego’s Active Duty personnel have families, with a total of 118,296 family members. iv

In Fiscal Year 2009/2010 there was an average of 4,438 children placed in out-of-home care each month through Child Welfare Services. Of those children, 32.6% were placed in relative/kin care. See Appendix D, County of San Diego CWS Statistics, for exact breakdowns by category. The Probation Department supervises approximately 4,300 juveniles in San Diego County. Approximately 115 Probation youth are in foster care.

- 97 Probation youth are in Residential Treatment Facilities
- 16 Probation youth are placed with a relative or non-relative
- 2 Probation youth are placed in foster placement

The County of San Diego delivers its child welfare services through a regionally-based model, housed under the larger umbrella of the Health and Human Services Agency. The County is divided into six geographically based regions. The organizational chart below describes this method of service delivery:

The Deputy Director in Child Welfare Services is responsible for centralized services as well as regionalized operations, including:
- Child Abuse Hotline
- Foster Care Licensing
- Adoptions
- Residential and Adolescent Services
- Medically Fragile & Deaf Services
- Polinsky Children’s Center
• San Pasqual Academy  
• Policy and Program Support  
• Budget  
• Ombudsman  
• North Central Region Operations (Emergency Response, Court Intervention, Voluntary, Placement Services, and Continuing Services)

Each of the three regional Deputy Directors is responsible for the delivery of Public Health Services, Family Resource Center Services and Child Welfare operational services. This includes Emergency Response, Court Intervention, Voluntary Services and Placement Services. It also includes Continuing Services, which provides Family Maintenance, Family Reunification and Permanency Planning services. Therefore, the Deputy Director in Child Welfare Services must work through her counterparts in the regions to address operational service delivery in Child Welfare.

There are a total of nine placement units in Child Welfare Services in San Diego County. Each follows the policies and procedures set forth from Centralized Child Welfare Policy and Program Support, but they are independently supervised and managed under regional operations. The chart below shows the placement units in San Diego County.

<table>
<thead>
<tr>
<th>Placement Unit</th>
<th>Region</th>
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<tr>
<td>North Coastal &amp; North Inland (One Unit)</td>
<td>North Region</td>
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<tr>
<td>North Central</td>
<td>Centralized Child Welfare Services</td>
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<td>Residential Services</td>
<td>Centralized Child Welfare Services</td>
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<td>Adoptions</td>
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<tr>
<td>Polinsky Children’s Center</td>
<td>Centralized Child Welfare Services</td>
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<tr>
<td>Mid-City</td>
<td>Central Region</td>
</tr>
<tr>
<td>Mills</td>
<td>Central Region</td>
</tr>
<tr>
<td>South</td>
<td>South Region</td>
</tr>
<tr>
<td>East</td>
<td>East Region</td>
</tr>
</tbody>
</table>

The Probation Department is led by Chief Probation Officer Mack Jenkins. There are four services within the Probation Department:

• Juvenile Field Services  
• Adult Field Services  
• Institutional Services  
• Probation Management Services
Juvenile Field Services are delivered through four divisions:

- Juvenile Supervision
- Juvenile Intake/Investigations
- Breaking Cycles
- Special Operations

A supervising probation officer leads the Placement Unit and they operate under the Juvenile Supervision division. The unit consists of 11 Probation Officers, two Probation Aides and one Public Health Nurse to serve 115 youth in the Placement Unit.

Selection of the PQCR Focus Areas
After reviewing data trends for the last six years, both Child Welfare and Probation staff selected measure 4B: Least Restrictive Point-in-Time: Relative Placement as their focus area for the 2011 PQCR. Both wanted to increase the number of children safely placed in relative or kinship homes, also referred to as Non-Related Extended Family Member (NREFM) homes. *(The terms “relative” and “NREFM” will be used interchangeably throughout this report).* Once this measure was selected, CWS and Probation agreed to look more closely at the placement approval process and placement stability.

Probation chose to focus on least restrictive Point-in-Time: Relative Placement because they realized that they have been completing a large number of home evaluations but their data is showing that youth are remaining in relative homes for a short period of time (less than six months) and they are having multiple placements. Probation hoped that by selecting this measure, they could identify practices that would enhance the probation officer’s ability to better identify relatives and provide stability for youth in placement.

I. Methodology

How the Focus Area Was Identified
Child Welfare identified the focus area by reviewing the 27 outcome areas on a report from UC Berkley, data extracted 8/26/10. Then they identified those areas where the most recent data was not meeting targets. Next, they selected three of those areas to look at trend data. A trend report was completed on the three measures: Least Restrictive Point-in-Time: Relative Placement; Reunification within 12 Months; and Adoptions within 24 Months. The reports were presented to the executive team and to the management team for discussion. Child Welfare was already working on Reunification within 12 Months and Adoption within 24 Months on their System Improvement Plan, so they selected Least Restrictive Point-in-Time: Relative Placement for the PQCR.
### Children in Kin placements

**Agency Type=Child Welfare**

<table>
<thead>
<tr>
<th>County</th>
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<th>1-Jul-08</th>
<th>1-Jul-09</th>
<th>1-Jul-10</th>
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<tr>
<td>California</td>
<td>34.7%</td>
<td>35.2%</td>
<td>34.2%</td>
<td>32.6%</td>
<td>32.6%</td>
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<tr>
<td>Inyo</td>
<td>64.3%</td>
<td>37.5%</td>
<td>36.4%</td>
<td>33.3%</td>
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<tr>
<td>Glenn</td>
<td>29.8%</td>
<td>33.3%</td>
<td>36.5%</td>
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<tr>
<td>San Benito</td>
<td>26.8%</td>
<td>33.8%</td>
<td>32.2%</td>
<td>47.7%</td>
<td>49.1%</td>
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<tr>
<td>Santa Cruz</td>
<td>46.3%</td>
<td>48.6%</td>
<td>50.8%</td>
<td>49.2%</td>
<td>47.1%</td>
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<tr>
<td>San Francisco</td>
<td>50.7%</td>
<td>50.8%</td>
<td>50.6%</td>
<td>51.4%</td>
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<td>San Luis Obispo</td>
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<td>45.1%</td>
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<td>Santa Clara</td>
<td>42.2%</td>
<td>46.3%</td>
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<td>25.0%</td>
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<tr>
<td>Los Angeles</td>
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<td>37.1%</td>
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<tr>
<td>Placer</td>
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<td>36.2%</td>
<td>30.7%</td>
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<td>36.0%</td>
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<td>33.9%</td>
<td>38.0%</td>
<td>35.4%</td>
</tr>
<tr>
<td>Mariposa</td>
<td>14.3%</td>
<td>13.7%</td>
<td>34.1%</td>
<td>30.4%</td>
<td>34.8%</td>
</tr>
<tr>
<td>Kings</td>
<td>51.0%</td>
<td>54.6%</td>
<td>40.1%</td>
<td>34.9%</td>
<td>34.7%</td>
</tr>
<tr>
<td>Monterey</td>
<td>47.9%</td>
<td>44.8%</td>
<td>41.2%</td>
<td>35.8%</td>
<td>34.1%</td>
</tr>
<tr>
<td>Santa Barbara</td>
<td>40.7%</td>
<td>41.1%</td>
<td>38.4%</td>
<td>40.1%</td>
<td>34.0%</td>
</tr>
<tr>
<td>San Diego</td>
<td>37.5%</td>
<td>36.9%</td>
<td>35.2%</td>
<td>32.6%</td>
<td>33.7%</td>
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</table>

<table>
<thead>
<tr>
<th></th>
<th>Total placements on 1-Jul-10</th>
<th>Child pop 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>California</td>
<td>58,012</td>
<td>11,880,695</td>
</tr>
<tr>
<td>Inyo</td>
<td>7</td>
<td>4,723</td>
</tr>
<tr>
<td>Glenn</td>
<td>77</td>
<td>9,870</td>
</tr>
<tr>
<td>San Benito</td>
<td>73</td>
<td>21,065</td>
</tr>
<tr>
<td>Santa Cruz</td>
<td>210</td>
<td>70,493</td>
</tr>
<tr>
<td>San Francisco</td>
<td>1,220</td>
<td>137,509</td>
</tr>
<tr>
<td>San Luis Obispo</td>
<td>287</td>
<td>71,067</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>1,359</td>
<td>523,325</td>
</tr>
<tr>
<td>Orange</td>
<td>2,506</td>
<td>945,886</td>
</tr>
<tr>
<td>Mono</td>
<td>6</td>
<td>3,673</td>
</tr>
<tr>
<td>Alameda</td>
<td>2,352</td>
<td>422,872</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>18,972</td>
<td>3,241,644</td>
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<tr>
<td>Placer</td>
<td>255</td>
<td>101,837</td>
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<tr>
<td>Humboldt</td>
<td>218</td>
<td>34,326</td>
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<tr>
<td>Mariposa</td>
<td>41</td>
<td>3,765</td>
</tr>
<tr>
<td>Kings</td>
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<tr>
<td>Monterey</td>
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</tr>
<tr>
<td>San Diego</td>
<td>3,953</td>
<td>958,419</td>
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</table>


The chart above shows that San Diego County has a relative/NREFM point in time placement percentage of 33.7% in July 2010, down from 37.5% in July 2006. It also shows that five counties of similar or larger size are performing better on this measure.

The chart below shows that for the most recent reporting period, 11% of the probation youth in out-of-home-care were placed with relatives/NREFMs. This is down from a high of 18% in July 2006.
The Probation Department agreed with selecting this measure because they were trending down from 18% to 11%, and they were concerned about the lack of placement stability in relative and NREFM care.

**Literature Review**

A total of eight research articles and seven other publications were reviewed that pertained to relative placements in Child Welfare Services. None of the reviewed articles focused solely on probation placements. The following themes emerged:

**PLACEMENT APPROVAL PROCESS**

*Children report a preference for kinship placements:*

- Recent evidence from children living in kinship care suggests that some of its greatest strengths are the reduced stigma compared with foster care, the reduced trauma associated with separation from parents, and the broad sense of familial relationships (Messing, 2006).
- According to the 11 county pilot study conducted in 2009, three of the eight recommendations had to do with quickly and safely placing children with relatives or NREFMs:
• Conduct imminent risk and emergency placement Team Decision Making meetings.
• Apply up front TDMs in tandem with other strategies.
• Conduct Family Finding as frequently and as early as possible.\textsuperscript{vi}

SUPPORT/PLACEMENT STABILITY:

There is an increase of placement stability when kids are placed with kin:
• Child welfare researchers have generally found that children in kinship foster care experience fewer moves than children in non-kinship care.\textsuperscript{vii}
• It is not known whether the better behavior of the children in kinship care is a cause or a result of their living with relatives, or of some background differences.\textsuperscript{viii}

Time before the child is placed with a relative matters:
• Placement stability over the first 18 months was significantly related to all permanency outcomes, demonstrating that placement stability over the first 18 months is highly predictive of future stability and permanency.\textsuperscript{ix}
• One study suggested that a first option is to use 23-hour receiving centers that permit child welfare workers to provide a clean, safe, and entertaining place for a child to be brought by a first responder and then allow for a rapid assessment of the child and some time for the child welfare worker to locate relatives and get fingerprint clearances.\textsuperscript{x}

Baseline behavior problems influence outcomes:
• Children in foster care have more problems than children in kinship care. Those in group home care have far and away the most behavior problems and the worst outcomes.\textsuperscript{xii}

Caregivers have low levels of education:
• Generally, both kinship and non-kinship foster parents have limited educational achievement, with 55% of kinship caregivers and 58% of non-kinship caregivers having a high school education or less.\textsuperscript{xiii}
• The fact that 25% of kinship caregivers have less than a high school education and only 42% of non-kinship foster parents have educational attainment beyond high school indicates that the growing concerns about educational underachievement of foster children may require substantial educational support in their homes, which are not, otherwise, educationally enriched.\textsuperscript{xiv}

Caregivers have low levels of income:
• There is a need to examine the reasons why such a large proportion of kinship and non-kinship homes (more than one in five) is below the poverty level.\textsuperscript{xiv}

Children don't tend to get the mental health, developmental services, and/or educational assistance that they need once in care:
• Even when children have behavior problems, educational problems, and a need for mental health services, they do not routinely get them.\textsuperscript{xv}

• Children who have been placed into out-of-home care are entering the child welfare system with substantially lower cognitive and academic abilities, fewer skills, more problem behaviors, and even poorer physical health than their counterparts in the general population. According to Felitti, \textit{et al.} (1998), “a confluence of measured developmental risks, compounded by the high rates of exposure to poverty and violence, explains why the population of maltreated children is at such a lifetime risk of health, mental health and legal problems.”\textsuperscript{xvi}

• Placement instability is a salient predictor of developmental outcomes, possibly one of the key active ingredients in the creation of better outcomes for the children in kinship care. \textsuperscript{xvii}

\textit{There is evidence of punitive behavior by caregivers:}

• Rates of “psychological violence” did not differ for kin and non-kin foster parents. A review of the National Survey of Child and Adolescent Wellbeing (NSCAW) found that in both kinship and non-kinship homes, the rate of punitive behavior was about 30% in both settings.\textsuperscript{xviii}

• As many as one in five caregivers can be considered from the home environment observation to be punitive and to have low responsiveness to the children.\textsuperscript{xix}

\textit{There are lower incidents of child abuse reports when children are placed with kin:}

• Analysis of the NSCAW found that about 3% of children in kinship care at baseline had a substantiated report of maltreatment compared to 10.6% of children living in foster care.\textsuperscript{x}

\textit{More support services are needed for kinship care:}

• Few training resources are available to help these well-intentioned families achieve their objectives.\textsuperscript{xx}

• There is a need to expand the resources given to kinship providers with a national kinship guardianship program and to endeavor to notify kin and place children into kinship care more expeditiously. These are low-cost strategies that deserve implementation given the evidence that children prefer to be placed with relatives and that the care of relatives may support better behavioral outcomes.\textsuperscript{xxi}

• The Children’s Research Center developed a tool to evaluate the needs of relative and foster care homes so that supportive services could be applied in a targeted way.\textsuperscript{xxii}

\textit{Children who spend a long time in kinship care have worse outcomes:}

• Children raised in out-of-home care who spent more time in kinship care had more problems in functioning than children raised with more time in non-kinship care. The kids raised in kinship care had worse outcomes in terms of delinquency, sexual behaviors, substance abuse, total risk behaviors, tickets and arrests, and grades.\textsuperscript{xxiii}

• There is no conclusive evidence that kinship care is a better placement option than foster care. The research literature is limited by small samples, methodological
problems and a lack of baseline measures from which progress comparisons can be drawn (Connolly, 2003).\textsuperscript{xxv}

**How the PQCR Planning and Peer Teams Were Selected**
The County of San Diego followed the recommendation of the Peer Quality Case Review Process Guide, Version 2.0, of 2009, when it selected the members of the Planning Team.

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>PQCR Co-Chair</td>
<td>Leesa Rosenberg, Child Welfare Services Manager</td>
<td>County of San Diego Child Welfare Services</td>
</tr>
<tr>
<td>PQCR Co-Chair</td>
<td>Pablo Carrillo, Supervising Probation Officer</td>
<td>County of San Diego Probation Department</td>
</tr>
<tr>
<td>PQCR Co-Chair</td>
<td>Julie Cockerton, Program Consultant</td>
<td>California Department of Social Services</td>
</tr>
<tr>
<td>PQCR Coordinator</td>
<td>Antonia Torres, CWS Policy Analyst</td>
<td>County of San Diego Child Welfare Services</td>
</tr>
<tr>
<td>PQCR Focus Group Contract Coordinator</td>
<td>Richele Swagler, Administrative Analyst</td>
<td>County of San Diego Child Welfare Services</td>
</tr>
<tr>
<td>PQCR Coordinator</td>
<td>Leah van Lingen, CWS Policy Analyst</td>
<td>County of San Diego Child Welfare Services</td>
</tr>
<tr>
<td>Regional Training Academy</td>
<td>Anita Aldrich, Training Specialist</td>
<td>Public Child Welfare Training Academy (PCWTA)</td>
</tr>
<tr>
<td>CWS Placement Partner</td>
<td>Elizabeth Edwards, Protective Services Supervisor</td>
<td>County of San Diego Child Welfare Services</td>
</tr>
<tr>
<td>Community Partner</td>
<td>Danielle Davis, Director of Kinship Programs</td>
<td>YMCA</td>
</tr>
<tr>
<td>Facilitator/Consultant</td>
<td>Karen Martin, Outcome Innovations</td>
<td>Public Child Welfare Training Academy (PCWTA)</td>
</tr>
<tr>
<td>Intern</td>
<td>Erica Grobler</td>
<td>San Diego State University, School of Social Work</td>
</tr>
</tbody>
</table>

The Planning Committee met weekly during the months of January, February, March, April and May, with the exception of three times when there were scheduling conflicts. CDSS co-chair, Julie Cockerton, participated in person for two meetings and she joined by conference call for the rest.

The Peer Team was selected by scanning the UC Berkeley data for similar sized or larger counties which were doing better than San Diego County in the area of 4B: Least
Restrictive, Point-in-Time: Relative Placement. Child Welfare sent request letters to the following counties:

- Alameda County
- Los Angeles County
- Orange County
- San Francisco County
- Santa Clara County
- Santa Cruz County

All but Santa Cruz County approved the requests. Alameda County sent a Program Manager from their Placement Unit. Orange County sent a social worker from their Placement Unit. Los Angeles County sent a manager and a supervisor from their Placement Unit. San Francisco County sent a supervisor from their Placement Unit. Santa Clara County sent a social worker from their Placement Unit.

In addition to the peers from Child Welfare Services visiting counties, the planning team wanted to have community representation on the peer team. The YMCA sent two social workers from their Kinship Navigator Program and the Casey Family Programs sent one social worker from their Kinship Care Program.

The Probation Department sent request letters to the following counties:

- Orange County
- Kern County
- Humboldt County

Ultimately, Orange County sent two probation officers and Kern County sent one probation officer. Humboldt County determined they were not able to spare an officer for the entire week.

Method Used to Select the Cases
Child Welfare Services ran a data report of all relative placements beginning January 2010. Then the list was sorted between those who had a child stay in placement for a year and those who had not. Next, a random number sorter was used to select cases from both lists. Finally, both lists were reviewed to make sure all regions were evenly represented and that no social worker was being interviewed more than once. Thirty cases were selected to review during the PQCR week. Of those, two cases were kept as back up and one was dropped due to social worker unavailability. In total, twenty-seven cases in Child Welfare were selected.

The Probation Department took a random sample of youth who were currently in relative placement and of those who had exited relative care between January and December, 2010. A total of twenty cases were pulled. From that cohort, nine cases were selected for review, with three alternate cases, during the PQCR week. The criterion used to reduce the list from twenty down to nine was to determine if the Probation Officer supervising the case had had the case for the bulk of the time that the
youth was in care. The goal was to select cases where the Probation Officer would be more familiar with the specifics of the case.

How the Review Tools Were Developed
The Planning Team developed two types of review tools: One was a Case Summary Tool and the other was an Interview Tool. Both tools were customized to meet the needs of CWS cases and Probation cases, so there were a total of four tools created. The Planning Team gathered examples of Case Summary Tools and Interview Tools from other counties that had done PQCRs on similar topics. The consultant went through each of those tools and compiled them into four sample tools for San Diego’s PQCR. Planning meetings were used to refine the questions and topic areas on each of the four tools.

It was determined that the Case Summary Tool would be primarily used to gather logistical and case history information for the interview teams. Thought was initially given to running statistical reports from the Case Summary Tool to identify trends. That idea was shelved in light of the short time frames associated with this PQCR planning process and the small sample size.

The Consultant conducted two mock interviews with case-carrying social workers not involved in the PQCR process to test the CWS Interview Tool before PQCR week. The mock interviews helped to further refine the questions and ensured that the Interview Tool was not too lengthy. The PQCR Coordinator and intern also mocked the Interview Tool.

See Appendix A for samples of the Case Summary Tools and Appendix B for samples of the Interview Tools.

How Case Summaries Were Completed
In Child Welfare, Policy and Program Support divided the twenty-seven cases among three policy analysts, three statisticians and one intern to complete the Case Summary Tool.

The Probation Department had the two senior officers complete the case reviews. Their case review primarily gathered background information about the case and how it got to its present state.

How Focus Groups Were Selected and Conducted
Child Welfare Services ran a data report of all relative placements beginning in January 2010. They sorted the list between those who had stayed in placement for a year and those who had not. This list was sent to the YMCA Kinship Navigator Program Director, Danielle Davis. The YMCA was contracted to conduct five focus groups with relative/NFREM caregivers and one focus group with youth. Probation ran a similar list and also gave the results to the YMCA Kinship Navigator Program.

The chart below describes the focus groups that were scheduled by the YMCA:
<table>
<thead>
<tr>
<th>Group</th>
<th>Region</th>
<th>Date</th>
<th>Time</th>
<th># Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spanish Speaking Caregivers</td>
<td>South Region</td>
<td>Tuesday, April 26, 2011</td>
<td>12:00 - 2:00 pm</td>
<td>2</td>
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<tr>
<td>Caregivers</td>
<td>North Coastal Region</td>
<td>Thursday, April 28, 2011</td>
<td>5:30 - 7:30 pm</td>
<td>6</td>
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<tr>
<td>Caregivers</td>
<td>Central</td>
<td>Saturday, April 30</td>
<td>12:00 - 2:00 pm</td>
<td>7</td>
</tr>
<tr>
<td>Youth</td>
<td>Central</td>
<td>Wednesday, May 4</td>
<td>5:00 - 8:00 pm</td>
<td>3</td>
</tr>
<tr>
<td>Caregivers</td>
<td>North Inland Region</td>
<td>Thursday, May 5</td>
<td>5:30 - 7:30 pm</td>
<td>10</td>
</tr>
<tr>
<td>Caregivers</td>
<td>East</td>
<td>Saturday, May 7</td>
<td>12:00 - 2:00 pm</td>
<td>2</td>
</tr>
</tbody>
</table>

At each group, food and childcare were provided. The YMCA sent flyers advertising the groups and called each person on the list to invite them to the groups. Reminder calls were made a day before each focus group.

The YMCA facilitated the Youth and Spanish-Speaking focus groups. The PQCR consultant facilitated the other four focus groups. CDSS observed the North Coastal and Youth focus groups. The YMCA and CDSS took notes during focus groups. The YMCA, CDSS and the PQCR consultant debriefed all the focus groups.

In addition to the focus groups of caregivers and youth, three additional focus groups were conducted. On April 27, a focus group for child welfare social workers and probation officers who work in placement units was held. Later that day a focus group for child welfare and probation supervisors of placement units was held. The PQCR consultant facilitated both these groups. CDSS observed both groups, took notes, and debriefed both groups with the PQCR consultant. On Monday May 2, a focus group was held at Juvenile Court. All judges, County Counsel, parent and children's attorneys were invited to attend. The PQCR consultant facilitated this group and the YMCA partner took notes. Only three individuals attended this focus group.

The Child Welfare managers were surveyed via Survey Monkey (see questions in Appendix C) to gather their thoughts about the placement approval process and placement stability. Their feedback was gathered and the PQCR consultant held a debrief session with the managers to further gather and discuss their feedback about relative and NREFM approval process and placement stability.

The questions used for each focus group are attached in Appendix C. Ken Miller's book, *The Change Agent's Guide to Radical Improvement* xxvi was used as a guide to create the focus group questions. Miller suggests that when conducting focus groups pertaining to government services, the first step is to determine what the *product* is. In
this case, the product was split into two groups: the components of the Relative Approval Process and the components of Placement Support Services. Two lists were compiled for each product area and were shown to focus group participants. Each group was asked four questions about each of these two areas:

1. What would you change?
2. What worked well?
3. What is your desired result from this product?
4. What is NOT your desired result from this product?

For the caregivers, a final question was asked at the end of each focus group, “As a relative/NREFM caregiver, what are you most proud of?”

Each of these questions generated much discussion, and in some cases, even tears. Nearly all of the caregivers stated that the focus group allowed them to feel listened to and supported.

It should be noted that the Probation Department was represented at the two placement focus groups only. Even though relatives caring for probation youth and probation youth were invited to focus groups, none attended. Additionally the court focus group was only attended by judiciary staff that deal with CWS cases.

How the Interviews Were Conducted
Interviews took place over three days of the PQCR week. There were four interview teams comprised of three people. Each team conducted three interviews per day. The teams had one hour for the interview and one half-hour to debrief the interview. At the end of the day, all four teams gathered in one room to do a large group debrief around nine areas of inquiry: promising practices; barriers and challenges; system/policy change; training; resource issues; documentation issues; state technical assistance; other unique ideas; and recommendations.

The PQCR co-chairs from the County assigned the 27 social workers and nine probation officers from the selected cases to each of the teams in a random fashion. The Planning Team decided against having mixed interview teams. Instead, Child Welfare peers interviewed Child Welfare staff and Probation peers interviewed probation officers. Mixed interview teams were considered but decided against by the County co-chairs due to past experience with the PQCR and differences between the child welfare and probation population.

Prior to the PQCR week, the 27 social workers and nine probation officers were invited to a two-hour orientation about the PQCR process. The PQCR consultant, PQCR co-chairs from CWS, Probation and CDSS facilitated this meeting. The attendees were shown the interview schedule, told of the importance of attending and arriving on time, and the case selection method was explained. The Interview Tool was provided so they could prepare their answers beforehand. Great care was taken to put the social workers and probation officers at ease, by letting them know that this was a confidential
and qualitative peer driven review, not an audit. As a result of this preparatory session, 26 of the 27 social workers arrived for their PQCR interview, and all but three arrived on time. These same three social workers had not attended the orientation session. All nine of the selected probation officers arrived for their PQCR interview on time.

II. Summary of Practice

The peer interviews and focus groups all provided valuable information about CWS and Probation practices regarding relative placements. CWS and Probation staff have reviewed and analyzed the information that was gathered. The following sections highlight important information and trends that emerged from the PQCR process.

CHILD WELFARE SERVICES - PQCR WEEK INTERVIEWS, PLACEMENT FOCUS GROUPS, COURT FOCUS GROUP, and CWS MANAGER SURVEY

Strengths and Promising Practices

Placement Approval Process

The following are promising practices associated with a timely and safe placement approval process:

1. Exemption Process
   • The Adoption Program has the ability to complete local criminal clearances with a fast turn-around time.
   • In some cases it works best when tasks are done concurrently, such as turning in background check paper work, completing forms and securing needed supplies. In other situations, it makes more sense to complete the process sequentially, to ensure that a relative will clear before extra work is completed.
   • Placement workers talked about the value of using a “checklist” to make sure that all steps are completed when making a placement.

2. Assessment
   • Ownership of the assessment is important - either by the placement social worker or the case-carrying worker. The ownership can shift on a case by case basis, but someone must take ultimate responsibility for making the assessment and recommendation to place a child in a home. One placement unit supervisor said, “This is not a box ticking exercise.”
   • Carefully assessing the relative’s motive for wanting to care for the child is important.
   • Using genograms and family finding techniques to identify as many relatives as possible immediately when the child first comes into protective custody helps social workers to make an assessment as to who is the best relative or NREFM to care for the child.
• Including the child’s voice in their assessment of a relative placement works well. One social worker involves biological parents, children and caregivers in every step of the process; asking the children where they want to live.

3. Team Decision Making Meetings (TDM)
• It's important to get the right people around the table. This is a good forum to get the family's input on the placement and to prepare the family to meet the individual needs of the children. It's ideal when a placement social worker can attend the meeting to answer specific questions about the placement process.

4. Preparation
• Preparing relatives up front is critical to making a successful, stable and safe placement. Preparing caregivers for the child's behaviors is of utmost importance.
• Social workers spoke of being as transparent as possible - focusing on the strengths of the family as well as acknowledging the family history and challenges.
• Discussion of concurrent placement options up front helps prepare caregivers for all possibilities and determine their level of commitment.
• Gradual transition processes, including lunches and then overnights, before the actual placement is made, have also proven to be an effective practice.

5. Placement Unit Challenges
• Relationships between the Placement Unit and case-carrying social workers are important. Relationships form most quickly when the Placement Unit is located within close proximity to units that make the most placements, such as Emergency Response, or Court Intervention units.
• Joint decisions between placement workers and case-carrying workers about relative placements work best. There is a sense of teamwork among all the involved social workers. One Placement Unit looks at itself as the “Shepherd” of the placement process, but they see it as a joint effort with the case-carrying worker.
• Prioritizing home evaluation requests allows placement units to work quickly and thoroughly on the most urgent placements and not get spread too thinly or miss important deadlines.
• Fully staffed placement units with home evaluators, TDM facilitators, registrars and social workers who provide support to caregivers appear to be the most productive and efficient. Fully staffed placement units also allow for the development of expertise in a complex area of practice. The work is completed faster, with fewer errors. Finally, a placement unit that operates with flexible hours, such as evenings and weekends, is ideal.

Support/Placement Stability

The following are examples of how support services are working best to stabilize relative/NREFM placements:
1. **Funding Issues**
   - Use of funds such as the Kinship Fund, Specialized Care Incentive Assistance Program (SCIAP) and a non-profit fund to support relative placements have provided immediate, hands on resources to families, such as beds and dressers.

2. **Support/Community Resources/Tangible Help**
   - Placement social workers in one Placement Unit offer a cell phone number that they will answer 24/7 in order to troubleshoot problems or answer questions. Units that do this find that they don't get many calls after hours, but the act of giving the relative a contact number puts them at ease and builds trust with the Agency.
   - A general "hand holding" approach, where placement workers do their best to engage families by working collaboratively with them, works well.
   - There is a Structured Decision Making (SDM) tool that helps determine the level of support the relative home will need that helps placement workers get the right services for relative caregivers up front.
   - Timely support to relatives is critical. Getting consents signed up front so services can start immediately, especially for out of state placements, was noted as a promising practice. A social worker said, "The difference between responding right away instead of waiting until the next day is the difference between taking ten minutes of my time to solve a problem or an entire day solving an even bigger problem."
   - The County of San Diego's Kinship Book is handed out to relatives when they get a child placed in their home and it provides valuable information.
   - Knowledge of available community resources for caregivers is critical in placement units.
   - The Comprehensive Assessment and Stabilization Service (CASS) program and Casey Family Programs are said to be helpful programs that support relative caregivers and stabilize placements.
   - Social workers' use of the internet to set up services in other states was noted as an effective practice to maintain placement stability on Interstate Compact on the Placement of Children (ICPC) and Inter-County Transfer (ICT) cases.

3. **Family Engagement**
   - Investing time in communicating with caregivers, ICPC social workers, Court Appointed Special Advocates (CASAs), and therapists is a key strategy to preserve placements. Caregivers of siblings not placed together also spend time communicating in order to best meet the children's needs in placement and stabilize placements.
   - Reviewing case notes and reports to get to know the family dynamics allows social workers to provide more support to the family and the relative caregiver, and preserve placements.
   - A "make it happen" attitude by social workers is a key factor in providing necessary supports to caregivers and preserving placements. One social worker improved the family dynamics by utilizing the therapist and other providers to...
keep the child connected to extended family members and addressing issues to repair damaged relationships.

- Paying attention to literacy issues with relatives ensures that children's ongoing needs are met. One social worker discovered that the relative caregiver couldn't read, so she made sure that she read all documents and forms to the caregiver. She also attended the child's Individual Education Plan (IEP) with that caregiver.
- Tailoring support and services to the family and relative caregiver's specific needs and avoiding a cookie cutter approach was a promising practice.

One member of the Peer Review Team stated, "We heard over and over again that the social worker had maintained a positive relationship with the parents and kept them tied in. So if the kid went AWOL, the parent would call the social worker and tell them where the kid was. Or when the kid had to take meds, the social worker found the parent and the parent told the kid it was okay to take the meds."

4. Case Practice
- Ongoing use of genograms to ensure that all family members have been identified ensures familiar placements for children and permanency. One social worker goes to the child's baseball games, and when she meets a new relative, she adds them to the genogram. Another social worker always has a Plan B relative or NREFM ready for all her kids, even if they are in a stable relative/NREFM placement.

Barriers and Challenges

Placement Approval Process

The following are barriers and challenges that affect a timely and safe placement approval process:

1. Exemption Process
   - Delays of up to a month for Livescan results to be returned to the regional placement workers. Background clearance delays cause delay of both placement and payment.
   - Fingerprints of elderly people tend to be rejected because their fingerprint ridges smooth out over time.
   - If a caregiver moves, it can delay payment or put the placement in jeopardy if the new home does not pass the exemption requirements.
   - Many caregivers feel they have to meet more requirements than the parents do.

2. Assessment
   - There is a need to better assess the ability of the caregiver versus their willingness to care for the child. Their ability to care for the child includes their ability to meet the child's education, behavioral and child care needs; their ability to financially provide for the child; and most importantly, their ability to protect the child from the parent they were removed from.
3. Communication
- Social workers and the courts struggle to communicate about the placement approval process. In some cases, social workers purposely won’t have a relative’s home evaluated because they realize they would not pass the background check or be a safe placement for the child. Then, the court mandates that the child be placed in that home. At the same time, court staff complains that just because a home is approved, it doesn’t mean that it’s the best placement for a child. One court official said that social workers don’t understand the relative preference law to the degree that they need to.
- In-person Relative Home Approval meetings for placement workers and supervisors in all regions are only happening every six months now.

4. Team Decision Making Meetings (TDM)
- TDMs are not being held consistently before a child changes placement. Three interview teams reported that in one day, they heard five cases where there was a change of placement and only one TDM took place before the placement change.
- Low attendance at TDMs, with just the social worker, caregiver and child, is not effective. There were reports of children feeling “on the spot” and then having to go home with the caregiver, where the unsatisfactory situation was intensified as a result of a poorly attended TDM.

5. Preparation
- Most relatives struggle with the surprise factor involved with assuming full-time care of the child. They didn’t intend to become full-time caregivers, and because of that, most are not prepared financially, emotionally or with adequate supplies for the child.
- Relatives are held to the standards of foster parents, but they don’t always understand this. They see themselves as doing a good deed, and are surprised to be met with demands and high expectations from social workers.
- Relatives are not always told up front how the process works or what will be expected of them on an ongoing basis. If they are told, it’s not always in an organized fashion or in a way that “sticks”.

6. Policy Challenges
- Emergency placement polices are unclear and practice appears to vary among regions. The courts worry that with unclear protocols, social worker bias could drive decision-making.
- The criteria used by the Adoptions Program to approve a placement are higher than the criteria used by regions. This can cause placement disruptions at a later point in the case.
• ICPC policies are unclear and do not appear to be uniformly applied in practice.
• Policies that guide relative home approval grievances are applied unevenly among regions.
• The 58 counties in California appear to have different processes to evaluate relative homes. When a placement worker in San Diego County needs a courtesy home evaluation, it is a challenge for them to get the information they need to make a placement decision.
• It’s not easy to find answers to placement questions in the program guide. For example: should the CACI fax date be used for the date of placement or the date of payment? Are waivers required for evaluated out and unfound referrals?
• Assessment forms used by placement workers are extensive and time-consuming and they don’t yield the information that the social worker actually needs. These forms are used differently in regions. Some placement workers complete the forms in-person with the families. Others complete the forms over the phone.
• The requirements to pass State audits are unclear and the technical assistance provided by the State is not clear to the placement social workers and supervisors.
• If a caregiver moves, a placement worker has to evaluate their new home within one to two days of their move. Their homes are almost never ready to be evaluated this quickly, which causes the placement worker to have to make two trips to evaluate the home.

7. Placement Unit Challenges
• There are questions about who is responsible for what - the placement worker or the case-carrying social worker? The quality of the assessment could be getting lost in the meantime.
• Some placement units have supervisors and/or managers who don’t know the rules of placement. High turnover in the “non-case-carrying” role of placement can diminish expertise in a challenging area of practice.
• There is confusion about the role of ICPC workers in other states and case-carrying workers in San Diego County in terms of who is responsible for what in making and supporting out-of-state placements.

Support/Placement Stability

The following are identified barriers and challenges to ensuring placement stability:

1. Financial Issues
• Relatives are not consistently paid from the date of placement. Any delays in the placement process or the background check cause them to be paid from the date that their home clears, not the date that the child was placed in their home. County Treasury Funds have been used to close this gap, but this is an expensive option. Payment delays can impact placement stability.
• Inter-county transfers and ICPC placements are another source of major delays of payment to relative and NREFM caregivers.
• Caregivers either receive CalWORKS or Title IV-E federal foster care rates. The difference between CalWORKS rates and federal foster care rates is vast, and most relatives only qualify for the CalWORKS rate.
• Relatives don’t typically understand the rules that guide their financial reimbursement for caring for the child, or when the funds will arrive. They don’t typically understand how the funding will change if they take guardianship or adopt the child. This lack of understanding negatively impacts placement stability and permanency.
• Most social workers don’t clearly understand the funding eligibility for relatives.
• As children grow older, the requirements for room sharing become more stringent, and some relative caregivers are forced to move to larger homes to meet regulations. When a family is already poor, this puts the placement at risk.

2. Support/Community Resources/Tangible Help
• Affordable, accessible childcare for relative caregivers is lacking.
• Medi-Cal coverage is frequently delayed when a child is removed from their home and placed with a relative, or when the case is transferred among counties or out of state.
• Sometimes too many services are arranged for caregivers and they can’t keep track of them all. They also may not perceive them as helpful.

3. Family Engagement
• Social workers report that it takes a lot of time to work with and build trust with relative caregivers.
• Relatives are often treated as if they have done something wrong. A social worker who was interviewed during PQCR week commented that we tell relatives what to do, but we don’t show them what to do.
• One attorney stated, “If a social worker is biased or unqualified, it doesn’t become support anymore. It becomes a witch-hunt.”
• There is a general lack of cultural competence when dealing with relatives, especially around socioeconomic issues.
• Several relatives report feeling “bullied” or “threatened” to adopt the child in order for the child to achieve the highest level of permanence.
• Relatives are concerned that their family roles change dramatically when they start caring for a child in their family. Aunts become mothers, and cousins become siblings. This causes a lot of confusion and emotion in families, and there was a sense that social workers needed to be better at engaging families as they worked through these issues.
• Some social workers reported that when they place a child with a relative, they don’t need to spend as much time with that case because the child is now with family.
• Some social workers reported that placing children with relatives causes them more work, so they try to avoid making relative placements.
• There is a lack of father engagement and assessing paternal relatives.
4. **Case Practice**
   - Frequent case transfers are problematic because details about family dynamics and how best to support relative caregivers are lost over time.
   - A “silo” approach to casework can leave the family and child feeling left out of the equation. Adoption workers stated during interviews that they were more concerned with getting the child adopted than attending to the details of the family relationships.

**Policy and Systemic Issues**

The following policy and systemic issues were identified as consistent themes:

**Placement Approval Process**

1. **Exemption Process**
   - Non-violent crimes that are a decade or more in the past are holding up emergency and general relative placements. There are inconsistencies among managers in how they waive criminal history.
   - There are also inconsistencies among managers on how much time it takes to approve a home. Some managers prefer that all the documents are received about the placement before they will consider signing a waiver. Other managers allow the placement while certain documents are still pending.

2. **Family Finding**
   - There is not enough family finding. The lack of resources for family finding up front prevents the selection of the first best placement of the child with a familiar person.

3. **ICPC/ICT Issues**
   - There is role confusion among the ICPC liaison, case-carrying social workers, and the social workers in other states. It is unclear who is supposed to be providing the services.
   - Judicial officers are confused by unclear policies that guide out-of-county and out-of-state placements. They see these policies applied inconsistently. Standards of minimum care appear to vary from state to state.

**Support/Placement Stability**

1. **Family Engagement/Confidentiality**
   - Policies pertaining to confidentiality can prevent the social worker from properly supporting the relative caregiver and therefore the stability of the placement. In one case, a mother had a confidential medical issue that the caregivers did not know about and they misinterpreted some of her behaviors as a result. When the relatives eventually found out about the mother’s condition, they felt that the social worker had been “withholding” information from them.
2. **Permanency Policies**
   - Relatives report feeling pushed into adoption, and some social workers reported that adoption is not always the best option for all families. They would prefer that the level of permanency be decided on a case-by-case basis, instead of being a policy-driven decision.

**Resource Issues**

The social workers during PQCR week identified the following gaps in resources:

**Placement Approval Process**

1. **Preparation**
   - Orientation materials should also be in booklet form, not just manual form. The manual can be overwhelming, especially for relative caregivers who have literacy challenges.

**Support/Placement Stability**

1. **Funding Issues**
   - Some caregivers need to be helped through the process of applying for CalWORKS.

2. **Support/Community Resource/Tangible Help**
   - Caregivers want more tangible resources, such as childcare, immediate medical and dental coverage, tutoring, and simple tools such as behavioral and developmental charts to help caregivers track the child’s development.
   - Most resources are strictly for foster parents. For instance, foster parents receive newsletters and training class announcements. Relative caregivers don’t get these. Foster parents can get reimbursement for transport to visitation. Relatives don’t typically get such reimbursements.
   - More long-term support resources are needed, after a relative takes guardianship or adopts the child. Once they get permanency, it seems that most resources dry up.

**Training Needs**

Training needs were identified in three primary areas:

1. **Orientation/Preparation Training for Relative/NREFM Caregivers**
   - This training would be similar to PRIDE, and would be provided right up front to help relatives/NREFM’s understand how the system works, how to navigate the system, how the court process works, and what would be expected of them. Relatives would be told up front that this placement could turn into a permanent placement, so if reunification fails, they wouldn’t be surprised. At this training, the relatives would be taught information about childhood trauma, common behavior problems and how to respond,
the importance of documentation, and how to supervise visits. Childcare would need to be provided at trainings so the caregiver would be able to attend.

There was also a suggestion that orientation training should be offered on an ongoing basis. Relative/NREFM caregivers get so much information up front and it doesn't always sink in.

2. Training for Social Workers about Relative/NREFM Caregivers
This training would cover the benefits of relative placements; funding sources; a day in the life of a relative caregiver; discipline issues for new relative caregivers; how to talk about permanency and concurrent planning and the adoption process with caregivers; how to connect caregivers to community resources; how to connect undocumented caregivers to community resources; and how a kinship placement affects the family dynamics in the relative’s home and in the larger family system.

3. Ongoing Issue Training for Social Workers & Relative/NREFM Caregivers
Topics could include family finding; how trauma impacts kids; attachment and bonding; how to deal with angry parents; issues related to elder caregivers caring for grandchildren; disproportionality issues; LGBT issues; working with undocumented families; how to link caregivers with community resources; military issues, ICWA issues, and ICPC issues.

Documentation

Placement Approval Process

1. Family Finding
   • There is a lack of documentation related to family finding efforts and extended family information.
   • There does not appear to be a field in CWS/CMS to capture information that specifically pertains to relatives and NREFMs. Therefore, there were questions on several of the reviewed cases as to whether or not other relatives had been explored, or how a particular relative was selected. It was also unclear how long search efforts were underway for relatives, and whether or not that caused the child to have more initial placements.
   • There was a lack of genograms or ecomaps present in the selected cases. When they were present, there were inconsistencies among regions.
   • A general lack of documentation of fathers and paternal relatives was noted.

2. ICPC/ICT
   • There are concerns that home studies are not as thorough as they could be.
   • Social workers can’t access important information in the CWS/CMS system when work was completed in another county.
   • Transfer documents are not thorough and come in at stages. One social worker said, “The left hand doesn’t know what the right hand is doing.”
State Technical Assistance

State Technical Assistance is needed in the following areas:

Placement Approval Process

1. Financial Issues
   • Relative placements need to be prioritized by financially supporting these placements at an equal or higher rate than foster placements.

2. Family Finding
   • Instruction is needed on how to perform a thorough and accurate "search" in CWS/CMS.

3. ICPC/ICT
   • Assistance is needed to unify documentation, funding processes, Medi-Cal applications.

Support/Placement Stability

4. Support/Community Resources/Tangible Help
   • Counties should be encouraged to create specialty units to deal specifically with relative care providers.
   • Assistance is needed to complete KinGAP applications, and to simplify the appeal process when there are problems with initiating KinGAP.

CHILD WELFARE SERVICES - CAREGIVER FOCUS GROUPS

This section consists of information gathered during the five relative caregiver focus groups.

Strengths and Promising Practices

Placement Approval Process

1. Exemption Process
   • Caregivers appreciate a home approval process that is expeditious and allows the children to be placed in their home either the same day they come into protective custody, or shortly thereafter. The relatives noted that this put the child at ease after the trauma of being removed from their parent’s home.
   • Caregivers appreciate that the background check was thorough. It made them feel that all safety measures were taken for the good of the child. One relative said, “I liked that they did check my home. I think it’s good that they are making sure the home is safe for the child and they are checking the home and people.”
Support/Placement Stability

1. Support/Community Resources/Tangible Help
   • Initial help with bunk beds and dressers for the children were helpful and much appreciated.
   • Relatives appreciate when social workers get their child into sports, provide assistance for their child at school, and provide gift cards for Christmas.
   • Support groups for kinship caregivers provide valuable peer support and connection to resources.
   • YMCA Kinship Services, CASS, Casey Family Programs, Community Services for Families, Straight from the Heart, Women’s Resource Center, respite and day care, and the Discovery School were the most helpful resources.
   • Bus passes and help applying for Food Stamps were also appreciated.
   • Several caregivers used Google to find resources on their own.

2. Case Practice
   • Caregivers prefer to not supervise visits between the children and their biological parents.
   • Caregivers appreciate it when the social worker sets limits with the biological parents, and put those limits in writing.
   • Caregivers appreciate it when their adoption workers give them information about the adoptions process.
   • Most caregivers felt they got more support from their continuing services case workers, and they didn’t get as much support up front.

3. Relationships
   • All the caregivers shared how proud they are of the children, and they described in detail how far they have come since they came to live with them.
   • All of the relatives said they were committed to caring for the children for the long run. Many had moved back to San Diego from other states and countries to care for the children.
   • When the relatives talked about how much the children had changed and improved in their care, they felt the numerous sacrifices they made along the way were well worth it.

Barriers and Challenges

Placement Approval Process

1. Exemption Process
   • Most caregivers felt that the background process took too long, up to 120 days.
   • Caregivers complained that when they moved, they received no financial assistance until their home was re-approved.
   • In some cases the background check divided family because the maternal and paternal sides of the family both wanted the children.
• The interview questions asked during the exemption process felt invasive to some caregivers.
• There was concern about inconsistency during approval process, depending on the social worker. One caregiver said, “You get different information based on which social worker you talk to.”
• There does not seem to be a consistent process for locating relatives. One caregiver said the only reason she got her nieces and nephews placed with her was because her 15-year-old nephew asked the social worker why he couldn’t stay with his aunt and uncle.
• Inter County Transfer cases had delays in payment and services. Relatives felt that no one took ownership – the counties pitched her grandson’s case back and forth and provided no help or support in the meantime.

2. Preparation
• Most caregivers reported that they had no initial support with clothing, supplies, or diapers.
• Several relatives reported that they began caring for the children when the kids showed up on their doorstep and they had to scramble for resources.
• Caregivers struggled with a lack of information. The approval process was quick, but then they were left hanging. “I was given no preparation, I had no idea what resources there were.”
• Caregivers reported that in most cases, the social worker didn’t ask if the relative needed anything. The caregivers said they had never done this before and it would help if the worker could tell them what they might need in the near future, instead of the relative having to ask the social worker.
• Most caregivers said they felt unprepared to deal with the children’s behaviors. They would have appreciated some up front help, rather than receiving help after the crisis.
• Most caregivers were under the impression that they would only be caring for the children temporarily, maybe 2 - 3 weeks. They had no idea that their care of the child could become permanent.

Support/Placement Stability

1. Funding Issues
• Caregivers do not consistently receive same rates as foster parents.
• It takes too long to get payment, in some cases up to six to eight months.
• Caregiver’s have difficulty qualifying for food stamps. In one case the biological parent was still getting aid while the relative was caring for the child without any compensation or assistance.

2. Support/Community Resources/Tangible Help
• A consistent challenge was obtaining necessary services. It was difficult to determine which services were available, and it varied among regions. One region would claim they assisted with supports and the region they moved to said they did not.
• It was difficult to qualify for some services. One relative said, "I have to prove how poor I am."
• Affordable childcare and respite care are the most difficult services to obtain.
• Once the caregiver became the guardian of the child, KinGAP took over and they lost their supports, such as bus passes and counseling.

3. Family Engagement
• There was a strong theme of a lack of trust and a feeling of disrespect. One grandmother said, “I don't think it’s fair that the social worker takes the opinion of the biological parent, the person that abused the child, over the opinion of the caregiver.” Most caregivers report that they have no trust in CPS, “the system” or the social workers.
• Most caregivers reported having to be careful about what they did and said, for fear that the child they dearly love might be removed from their home.
• Nearly all caregivers described feelings of being judged and scrutinized. Yet the parents are allowed to continually “mess up” and even get financial assistance from the system.
• Caregivers report that they feel like they have to watch the youth constantly. They can’t let them go to sleepovers or even play outside. They fear that something will happen and CPS will be called. They feel that they are continuously “being investigated by CPS”.
• Caregivers universally stated that they do not feel listened to or heard by the social worker. Their calls are not returned, their opinions are not asked for when social workers are making recommendations about returning the children home to their parents, and they are not allowed to speak in court. One aunt tried to speak at a court hearing, and the judge told her she could not speak and that, “You are JUST the caregiver”. Yet they are the people who provide all of the care to the children, and who know the ins and outs of their family dynamics.
• Some grandparents wondered if there was a stigma that if they raised the parent, they must have done something wrong, so the social workers might not be sure they could trust the grandparent to care for their grandchild.
• Caregivers don’t feel like they are an equal party in the case. They rarely get a history about what happened to the child.
• Caregivers report that they feel that CPS just wants them to say yes they will take the youth and then they can “wash their hands” of the case. Their calls are not returned. A social worker told a grandmother, “I have caller ID. I saw that you have been calling.” Caregivers said that they feel like tattle-tales when they are forced to call the supervisor for help because the social workers won’t return calls. Caregivers felt that their calls were mainly returned when the social worker needed something from them.
• There was a sense of broken promises. When they agreed to take the child, they were told they would receive mileage, special care rates and services. But then they didn’t hear back or get resources or get calls returned.
• A grandmother said, “I survived in spite of the agency that is there to help me.”
4. **Case Practice**
   - Monthly visits from social workers were a concern. Either the social worker did not visit the child at all, or the visits felt meaningless and the caregivers wondered about the purpose of the visits. Others expressed concern that they visit the social worker each month at their office. One asked, "Who is checking on kids in their placements?"
   - Supervising visits between the parents and children pushed many caregivers over the edge. Caregivers reported feeling caught in the middle when they had to supervise visits. Many reported feeling threatened by the parents, or receiving dirty looks from the parents in front of the children, which caused a great deal of tension that lasted even after the visit ended. They felt that they were expected to give up their lives with no notice, scramble to get resources on their own to care for the kids, then adjust their busy schedules to ensure the parent visited the child, and then be made to feel uncomfortable or even unsafe during visits.

5. **Permanency Policies**
   - Adoption paperwork was described as "overwhelming".
   - One grandmother was concerned about the pressure she felt to adopt her three-year-old granddaughter, when she felt a guardianship was a much better option for the child and the dynamics in her family. An adoptions worker told her, "If you don't adopt your granddaughter, (who had been in this grandmother's care for nearly two years) we will take her out of your home and put her in a home where she will be adopted. There is a very long list of families waiting to adopt three-year-old little girls."

**CHILD WELFARE SERVICES - YOUTH FOCUS GROUP**

Since there was only one youth focus group, the responses from this group did not fall into the theme patterns noticed in the relative caregiver focus groups. The highlights from the youth group are as follows:

- The youth said they would prefer to live with a family member over a foster family or a group home, but that it depended on the family member. They all said that they had had a bad experience in a previous foster home.
- All three youth were very satisfied with their placements, they were happy where they were, and they felt like it was home.
- The youth were most concerned about how many placements they had to go through before they ended up with their relative. Two young people were placed in several foster homes, then returned to their parents, and then re-removed before they were placed into their current stable placements. One said, "It was fine that you had to take me out of my mom's home, but you didn't have to put me in a foster home. You could have put me with my sister in the first place."
- The youth said they appreciated the rules and structure that their relatives provided for them.
- Two of the youth said that they feel prepared for adulthood because of the help their relatives have given them.
• All three young people keep in touch with their current siblings and relatives.
• When asked what the downside was of living with their relatives, the youth spoke of an issue of role confusion. They said that the caregiver they were staying with had previously been their confidant, or the person who had supported them and they could turn to. But now that person was their full-time caregiver, and more of their parent. So it took some adjusting to.
• Another youth said, “My biggest downside is the void that was left. Two years ago I told my aunt that I know my parents are inconsistent but I want to talk with them. I know I was on a roller coaster ride with them, but I’d prefer to talk with them than just watch the roller coaster pass me by. But my aunt asked me to think that through. So my biggest downside is the void that my parents left.”
• All three youth said that they are yelled at a lot by their relatives and they don’t like it.
• Two had concerns about the financial stability of their relatives.
• None of the youth felt that their county social worker was reliable or particularly helpful. One youth said that he now just gives her one-word answers. When he had opened up to her in the past, it shut down the process of his adoption and hurt him more in the long run. The youth felt that their social workers were just going through the motions. All complained that their plans were frequently disrupted, or that their house has to be cleaned, in order to prepare for a social worker’s visit that they didn’t feel is particularly helpful.
• One of the young people described a very positive experience with her social worker from the Casey Family Programs and her ILS worker. In both cases, the relationships with the social workers had spanned years and trust had been built.
• None felt that counseling was beneficial.

PROBATION - PQCR WEEK INTERVIEWS AND PLACEMENT FOCUS GROUPS

Strengths and Promising Practices

Placement Approval Process

1. The Exemption Process
• The Placement Unit in Probation cannot initiate the placement process until the Juvenile Court issues a court order. In the past, probation officers had been asking the court to make an order to initiate the placement process on homes that would never pass the criminal background check. So the Placement Unit in Probation did a traveling road show. Now probation officers better understand the placement process and only make a referral to request a court order if they know there is a chance the relative will pass the background. This saves a lot of time.
• Probation is able to get livescan results in only one to two days. This allows them to quickly determine if a relative would be a candidate for placement or not.
2. **Preparation**
   - The Placement Unit probation officers make a point to meet with the relative and the youth when they are first placed in the relative home. They discuss the rules in the home with the youth, and in some cases they have the relative and youth sign a contract.
   - Probation officers do their best to have the caregivers involved in the decisions from the beginning.
   - Placement Unit probation officers have a good understanding of what the relatives are going through; how they have to miss a lot of work, use their sick leave, and have to take the youth to appointments, such as drug testing and court.

3. **Case Practice**
   - There is a “make it happen” culture in the Placement Unit and the probation officers do all they can to place a child with a relative.
   - There is “good chemistry” in the Placement Unit and the probation officers are described as being “on top of their work”.

**Support/Placement Stability**

1. **Support/Community Resources/Tangible Help**
   - WRAP around services, the youth-oriented substance abuse program called SAS, and court schools where teachers are more hands-on were described as helpful services.
   - There was a general sense that if a probation officer was told by a caregiver that a resource was needed, the probation officer found the resource for the caregiver.

2. **Case Practice**
   - Probation officers see the youth twice per month, at least one of those times in the youth’s placement.
   - Cases in this unit are well documented.
   - There have been instances of good collaborative work between POs and CWS social workers to obtain the necessary background information to better support a youth’s placement.

**Barriers and Challenges**

**Placement Approval Process**

1. **Exemption Process**
   - A court order is needed before a probation officer can evaluate a relative or NREFM’s home. This can cause delays in relative placement of as much as three weeks to three months.
   - If a probation officer outside of placement requests a court-order for a home evaluation without doing some preliminary background checking of the potential
caregiver, the Placement Unit probation officers will have to complete an
evaluation because it is court ordered, even if they realize right away that the
relative won’t pass the criminal background check.
• There are strict policies that describe an acceptable placement. Probation
officers regularly feel that they are having to “finagle” the spirit of the policy in
order to do what is in the best interest of the youth. This consumes a lot of time
for the probation officers and their supervisors.
• Rigid home evaluation policies sometimes force probation officers to place a
youth with a relative who meets the criteria, but they are not the best fit, or the
most qualified, to care for the youth. Probation officers sometimes have to work
with court ordered relative placements that they intuitively know are not in the
child’s best interest or won’t be successful.
• A clearer definition of a Non-Related Extended Family Member is needed.
Probation officers would like more clarification about what “significant contact”
means. They would like more clarification about what constitutes a mentoring
relationship.

2. Preparation
• Caregivers typically need beds, dressers and other items to properly care for the
youth. The Probation Department does not have an emergency fund or access
to funds to purchase these items. This can delay or prevent a placement with a
relative/kin caregiver.

Support/Placement Stability

1. Support/Community Resources/Tangible Help
• It takes a long time to get Medi-Cal cards to new caregivers, especially in cases
involving inter-county transfers. The process can take 30 days, and in one case,
up to one year.
• Many caregivers struggle to ensure that the youth follows court orders - either
because they don’t understand that there are court orders to follow, or they don’t
know how to get the youth to change their behavior.
• There is general role confusion. In one case, the youth’s mother was caring for
her baby daughter, and the young child related to her grandmother as if she were
her mother. The probation youth was resentful of her mom for taking over as
“mom” to the youth’s daughter. At the same time, this youth abdicated her own
parental responsibilities.
• During the “honeymoon phase”, many caregivers don’t feel that they need
comprehensive support and they deny this service until there is a crisis.
• There is a lack of available translators.
• There is a lack of transportation to help relative caregivers get youth to and from
appointments and court-mandated services.
Policy and Systemic Issues

Placement Approval Process

1. Family Finding
   • Improvement is needed when it comes to finding the “first best placement” for probation youth. Youth have been placed with less qualified caregivers when a more qualified relative could have been selected.

2. Preparation
   • Relatives and NREFMs need to take classes up front to prepare them to care for a youth on probation.

Support/Placement Stability

1. Funding Issues
   • Caregivers of probation youth have had to take on the restitution fees and financial responsibility associated with the youth being on probation.
   • Many relatives and NREFMs don’t qualify for federal foster care rates, and have to care for the youth at the much lower CalWORKS rate.

2. Family Engagement/Confidentiality
   • Probation officers expressed concern that they can’t share more detail about a youth’s crime with the caregiver in order to ensure they can protect and monitor the youth and those around them.

Resource Issues

Placement Approval Process

1. Funding Issues
   • Probation lacks a fund to purchase beds, dressers and other essential items for a new placement, other than the court ordered use of limited County Treasury Funds.

Training Needs

Probation officers interviewed in focus groups and during PQCR week indicated a need for a three-pronged training process:

1. Orientation Training for Probation Officers about Relative Care
   This training would cover areas such as family finding; the requirements of the assessment process; how to make community referrals to assist relative caregivers; how to navigate funding sources such as CalWORKS; and how to help the family set up a budget to care for the youth.
2. Orientation Training for Relative/NREFM Caregivers
   This training would be offered in the very beginning stages of the placement process and it would orient the caregivers about how the Probation Department operates and what would be expected of the caregiver. There would be special instruction given to the issue of elders caring for youth on probation and how to deal with intergenerational issues.

3. Issue Specific Trainings for Probation Officers and Relative Caregivers
   Key training topics would focus on helping elders to manage teens on probation, family finding, and gang awareness.

Support/Placement Stability

1. ICPC/ICT Issues
   • There are recurring issues with lack of documentation when a youth is transferred to San Diego County from another county.
   • Cases received from other counties have a short form, with generally unclear information and sparse information on the family history.

III. Summary of Observations and Recommendations

SUMMARY OF MAJOR DISCOVERIES

Child Welfare

Placement Approval Process

There were eight general themes that emerged pertaining to the placement approval process in Child Welfare Services. In each theme area, there was a range between examples of promising practices and concerns. Each of these findings resonated with discoveries made in the literature review.

1. The Exemption Process
   • Relatives appreciated it when their home was approved within a day or two, and they appreciated a thorough background check because it made them feel that the child they were caring for would be safe.
   • The challenges are delays in obtaining criminal histories; inconsistencies among regions regarding which relatives are approved and which are not; inconsistencies among regions about the length of time a clearance takes; and relatives feeling that they have more requirements than the biological parents.

2. Family Finding
   • When genograms and ecomaps are used, it increases choices for the “first best placement” and for concurrent planning.
• There was a general lack of family finding noted, which limited choices for initial placements and concurrent planning. There were concerns about a consistent place to document family finding efforts in the CWS/CMS.

3. Assessments
• Assessments of relative and NREFM homes were most accurate when the person making the assessment took ownership of the process and did not feel that they were performing siloed tasks for another social worker to make the ultimate decision. Assessments also worked best when the social worker included the family in the decision-making process.
• It was discovered that there was a lack of consistency among workers and among regions in the quality of assessments and time that it took to place children in relative and NREFM homes.

4. Team Decision-Making Meetings
• TDMs work best when they happen before initial placements and before a change of placement; when the right people are at the table; when the caregiver is prepared during the meeting to take the child; and when placement workers attend to answer questions.
• TDMs don’t work as well when they are held after initial placements and after changes of placement. They don’t work as well when there are few people in attendance and the child feels “on the spot” discussing sensitive issues in front of the caregiver.

5. Preparation
• Preparing relative and NREFM caregivers works best when they are provided with a concise overview of the placement process; they are told about the child’s behaviors and how they can manage those behaviors; when concurrent planning is discussed; and when possible, they can transition the child slowly into their home.
• Preparation challenges occur when the caregiver feels lost, overwhelmed and financially strapped. Placement stability can be in jeopardy when the caregiver is not prepared to deal with the child’s behavior or when they think the placement will be temporary and it is discovered that the child needs a long-term placement. These issues were repeatedly discovered in the literature review.

6. Policy Challenges
• The following policies appear to be unclear, and are therefore not always practiced consistently among workers and regions: Emergency Placement; ICPC; Inter-County Transfers; and Relative Grievances. The program guide is not as clear as it could be regarding these policies.

7. Placement Unit Challenges
• Placement Units appear to work best when placement social workers forge relationships with case-carrying social workers and they take a teamwork approach. When placement units are situated near regional units, such as
Emergency Response and Court Intervention, the channels of communication and teamwork increase. Fully staffed placement units, where all aspects of the placement process are conducted, and where expertise can deepen, are ideal.

- The biggest challenges arise when there is role confusion among placement and case-carrying social workers. Lack of quality assessments and unstable placements can result from this role confusion.

8. ICPC/ICT Challenges

- There are challenges with role confusion with ICPCs and ICTs because, similar to the challenges faced by placement units and case-carrying social workers, there are two social workers involved, and it's not always clear who is supposed to be responsible for which task. Another challenge is that case-carrying social workers don't have ready access to information and work completed by social workers in other counties or other states.

Support/Placement Stability

There were four general themes that emerged that pertained to placement stability in Child Welfare Services. In each theme area, there was a range between examples of promising practices and concerns. Each of these findings resonated with discoveries made in the literature review.

1. Funding Issues

- Promising practices were noted when social workers accessed the Kinship Fund, and SCAP funds, to assist caregivers and children in having their immediate needs met. In one region, a non-profit organization established a fund that provides immediate financial support to relative caregivers to purchase beds, dressers, school uniforms and the first month of childcare.

- The challenges are that relatives are not paid from the first date of placement if any part of the exemption process is not completed before the child enters their home. Additionally, many relative and NREFM caregivers only qualify for CalWORKS, which is lower than foster care rates. The eligibility requirements that determine the rate a relative will be paid are complex and are not easily understood by caregivers or social workers.

2. Support/Community Resources/Tangible Help

- Promising practices, such as providing relative caregivers with a cell phone number to call when they first get a child in their home, and providing immediate support and a “hand-holding” approach, work well. Caregivers reported appreciating social workers who were knowledgeable about resources, getting bunk beds and dressers, and getting their children immediately into activities. They also spoke of getting a lot of help from kinship support groups, the CASS program, the YMCA Kinship Navigator, and the Casey Family Programs.

- The lack of available and affordable childcare is the biggest challenge for relative and kinship caregivers. There is concern that there are many more supports available for foster parents than there are for relative caregivers. There are
concerns that the limited services relatives receive are terminated once they take guardianship or adopt the child.

3. Family Engagement
   - Family engagement works best when there is constant communication between the social worker and the caregiver; there is a "make it happen" attitude on the part of the social worker; the social worker knows the case and the complexities of the family; and support services are tailored to meet the caregiver's needs.
   - Family engagement breaks down when the relative feels disrespected and not listened to; when the relative feels as if they are being scrutinized as if they have done something wrong; when the caregiver feels more anxious because of the social worker's intervention and they fear that the child could be taken from their home if they say or do the wrong thing; when the caregiver feels that the social worker has made broken promises and is not there to support them; and when they feel pressured into adopting the child, rather than keeping the child in their care under another permanency arrangement.

4. Case Practice
   - Promising case practices included social workers arranging for supervised visitation between the child and their biological parent so that the relative did not have to supervise the visits. Relatives also talked about feeling more supported by the Continuing Services workers than they did from the initial social workers.
   - Challenging issues arose when cases were transferred frequently and the social worker was not as familiar with the case and the family dynamics. When workers approached their work as a "silo" rather than as a team, problems were noted. There were also challenges noted in the monthly home visits - either they were not happening consistently or the children and caregivers did not perceive them as particularly helpful.

**Probation**

**Placement Approval Process**

There were two general themes that emerged pertaining to the placement approval process in the Probation Department. In each theme area, there was a range between examples of promising practices and concerns.

1. Exemption Policies
   - The Placement Unit did a traveling road show to better educate other probation officers about the requirements needed for a relative or NREFM to pass a home evaluation. This reduced the number of non-passable evaluations they were ordered to do by the court.
   - Policies relating to Home Evaluations appear to be either too constricting or unclear. For example, a court order is needed before a home evaluation can be started. This delays the process and forces probation officers to evaluate some homes that would never pass a criminal background check, thus wasting
valuable time. Criteria for relative placements are sometimes unrealistically stringent, forcing probation officers to place youth in homes that "look good on paper" but are not actually the best placements for youth. Other relatives, with less perfect homes or backgrounds might actually be better suited caregivers for that particular youth. Additionally, there appears to be a general lack of awareness about the ins and outs of relative placement among supervising probation officers. They do not seem to be aware of the idiosyncrasies of the population of relative/NREFM caregivers and the policies and procedures that dictate relative placements.

2. Assessments
   • Probation officers in the Placement Unit have developed a practice of sitting down with the relative caregiver and the youth when the placement is first made and having them sign a contract about the rules of the home and following the orders of the court.
   • Relative caregivers are not consistently given all the information up front and on an ongoing basis to prepare them for the task of caring for a youth on probation. This is especially true for elderly caregivers.

Support/Placement Stability

There was one general theme that emerged that pertained to placement stability in the Probation Department.

1. Funding Issues
   • There is a lack of funding for relative/NREFM caregivers. They often only qualify for CalWORKS and not foster care rates. There is no available funding to buy relative caregivers necessary items to prepare for the youth, such as beds and dressers. Caregivers are frequently responsible for the youth’s fines and restitution.

FINAL OBSERVATIONS AND RECOMMENDATIONS

Child Welfare

The following recommendations came specifically from social workers, relatives and youth interviewed during the PQCR process.

Placement Approval Process

Exemption Process
   • Placement supervisors should have access to FBI, DOJ and CACI clearances so they can retrieve the results from livescans right away.
   • Obtain higher levels of clearances up front so regional operations are consistent with adoption level clearances.
• Efforts should be made to streamline the home approval process so there are not long waits for background clearances and then a rush to approve the home.
• All exemption policies should be followed uniformly among all the regions.

Family Finding
• Genograms and ecomaps should be used by all placement social workers to locate relatives when children first come into protective custody. An individual at the court focus group suggested, "Kids should be placed with relatives up front, not after they have bonded with a foster family for 11 months, or bounced around to various foster homes."
• Uniform criteria for searches on the CWS/CMS should be used to improve family finding.
• There should be a uniform place to document family finding efforts in the CWS/CMS application.
• There should be more efforts to locate fathers and paternal relatives.

Assessments
• Simplify the process. There should be fewer forms used for the home evaluation. There is a suggestion to use a grid that was developed in one of the regions that incorporates the SDM placement tool, with some additional edits.
• Assessment questions need to be more in-depth, and address how to make a placement work.
  1. Questions should be designed to uncover any potential barriers to the placement so they can be resolved.
  2. One of the foster youth from the focus groups suggested, "Find out a way to find out where the person’s heart is before you place a child with them. Make sure they aren’t just doing it for the money."
  3. Assessments should include a component to differentiate between the potential caregiver’s willingness to care for the child versus their ability to care for the child.
• Staff needs to take ownership of the placement process and the assessments they make.

Team Decision Making (TDMs)
• Family finding efforts such as genograms and ecomaps should be used to make sure that there are more relatives at TDMs.
• TDMs should be held before initial placements and before changes of placement.
• Placement workers and other relevant people should attend TDMs to ensure that relative caregivers are prepared to take the child into their home.
• Family Group Conferences should be held at regular intervals during the process of the case to discuss how things are progressing.

Preparation
A member of the court focus group suggested that relative caregivers need to be better understood. "There is a distinction between a family placement - a family that steps forward - and a foster family. A foster family has thought about this and they are
prepared to comply with all the rules and they are ready to do this. A relative is hit on
the side of the head by all of this and they have to get adjusted. And there is a real
qualitative difference between the two groups."

- The focus on the home evaluation should shift to evaluate the needed resources,
rather than making the caregiver feel scrutinized and investigated. The social
worker could use a checklist of commonly needed items to care for a child.
- Relatives should receive preparation and assistance immediately and not several
months after the kids have been in their home. Caregivers should be provided front-
loaded services where they can get all of the information (such as an explanation of
the placement process, the history of child, behavior of the child, and available
support services) before or immediately when the child is placed in their home.
- Prepare the relative for the possibility that this placement may become long-term,
even if they don’t plan for it to be.
- Preparation training should be provided for relative caregivers. Ongoing issue based
training should be offered to relatives and social workers on a regular basis.

Policy Challenges
- Emergency placement policies should be clarified and implemented uniformly
among all regions.
- The program guide needs to be updated and simplified. The sections on placement
should be reduced from 18 files to two files: Placement Approval Process and
Support/Placement Stability. Reducing the number of forms to the essentials would
allow placement workers to focus more on the actual assessment than on the
paperwork associated with making a relative placement.
- Existing policies and laws, such as the Prudent Parent policy and the law, Welfare
and Institutions Code § 361.3 California Relative Placement for Foster Care and
Guardianship should be followed. This law states that, “preferential consideration
shall be given to a request by a relative of the child for placement of the child with
the relative. If the child is removed from home, the social worker shall conduct,
within 30 days, an investigation in order to identify and locate all grandparents, adult
siblings, and other adult relatives of the child, including any other adult relatives
suggested by the parents.” xxvii

Consideration should be given to centralizing the placement function in the County of
San Diego’s regional child welfare services model. Placement is a complex process,
driven by a myriad of policies and procedures. To the child who is being removed from
their parent’s home because they were abused or neglected, where they are placed is
of utmost importance. Children in this predicament are at heightened risk of
experiencing secondary trauma, when, on the heels of being removed from their family,
they have to adjust to a new and unfamiliar family. Getting kids in safe, familiar
placements as quickly as possible is one of the most important functions of the child
welfare services system. Creating a specialized team that uniformly follows policies and
procedures, and that has developed expertise with the placement process, and that has
expertise working with relative caregivers and NREFMS would produce the best
placement outcomes for children.
Placement Unit Challenges

- Placement Units should be fully staffed with all personnel associated with placement in one unit, working for a supervisor who is very knowledgeable about the policies and procedures of placement. There should be stability in staffing these units so expertise can be developed.
- The roles and expectations of all members of the placement unit should be clear.
- The Placement Unit should operate on weekends and evenings so that children can be placed immediately.

Interstate Compact on the Placement of Children/ Inter-County Transfer (ICPC/ICT)

- Inter-County Transfer policies need to be revisited to ensure that relative caregivers get approved, served and funded in a timely and consistent manner.
- The latest technology should be integrated with policies and practices associated with ICPCs and ICTs. A protected network should be created where staff could email and scan documents to one location, and where funding and services would only have to be applied for one time. This would save time, speed up placements, and preserve placement stability.

Support/Placement Stability

Funding Issues

- Relative placement rates should be equal with foster care rates. The federally established age brackets that dictate placement rates should be re-evaluated, so that more money would be paid for caring for kids under five. This would help to solve the challenge of paying for childcare.
- Payment to the relative caregiver should start from date of placement, even if the home is not approved. Payments should be streamlined so there aren’t interruptions, such as when a relative moves.
- More funding is needed for childcare, respite care hours, and for alternative enrichment activities such as music lessons, art classes and taekwondo.
- A web-based calculator should be created where the placement worker could add in the ages of the children and their various needs so monthly calculations could be projected showing how much that child’s care would cost, versus how much the relative will receive for caring for the child and how much income they currently have.

Public/private partnerships and legislative change should be explored. Public/private partnerships could result in discretionary funds to meet the immediate needs for relative placements, and legislative changes could provide a more reasonable ongoing reimbursement rate for care providers. The use of marketing tools, such as social media, public service announcements, and consistent messaging through logos and tag lines, should also be considered to increase community awareness about the importance of familiar caregivers for abused and neglected children. Increased community awareness could increase funds donated to tax-exempt non-profit agencies that could assist relative care providers.
Support/Community Resources/Tangible Help
- A Relative Support Association should be created, with hired staff, facilitation, a budget, training capacity, and peer support services. This would allow relative caregivers to receive equal support and resources that foster care providers receive.
- Partnerships should be developed with childcare centers in San Diego County to place relative caregivers higher on lists for discounted childcare. Funds should be established to augment the relative’s ability to pay for childcare.
- Services to meet specific needs should be selected so caregivers are not overwhelmed with too many services. The SDM placement tool has been effective in making this determination.
- Services such as the YMCA Kinship Navigator, CASS, Casey Family Programs and respite care should continue.

Family Engagement
The County of San Diego Child Welfare Services is taking steps to create a trauma-informed child welfare system. They are also investing in the Signs of Safety approach to case practice, which values family engagement and safety for children. Placing children immediately into safe, familiar homes is integral to both initiatives. Relative/NREFM caregivers are critical players in this process. A cultural shift is needed in the agency to view these caregivers as valuable members of the team.

- Assisting caregivers as they adjust to changing roles in their families
- Discussing various permanency options rather than pushing them into adoption, which might not be the best option for the child and that family
- Improving cultural competence, especially as it pertains to socio-economic issues.
- Problem solving with caregivers in a way that relatives don’t fear that the child could be removed from their home at any point
- Following the prudent parent policies so relatives feel more freedom to let the child in their care have overnights and enjoy other activities with their friends and relatives
- Returning phone calls and keeping promises.

A placement supervisor summarized the importance of family engagement this way, “We need to put the child’s world back together and reduce their trauma. We need to place the child where they want to be placed, and where they will thrive and feel comfortable. We want the children to feel they are a part of something. We don’t want our County processes to get in the way of that.”

Case Practice
- Social workers or other designees should supervise visits between parents and children.
- Monthly home visits should ensure that the child is doing well in the placement and that the caregivers have what they need.
- Monthly home visits should reduce stress rather than create stress for the family. The schedules of the caregiver and child should be taken into account when the social worker sets up the monthly visit.
• The needs of the child should be given priority over the needs of the parent. There should be more accountability and consequences for the biological parents when they continue to do things that upset the children or disrupt their placement. Limits should be put in writing for the relatives and caregivers.

Thought should be given to creating a “Relative Caregiver Road Show Training” that could be presented to social workers through the County of San Diego’s child welfare system. The training could be two to three hours long and be presented in regional offices. Ideally the training would consist of a panel of relative caregivers, youth who have been placed in relative homes, and social workers who have demonstrated success working with relative caregivers. This training would help to improve sensitivities working with relative caregivers, it could increase relative placements, and ultimately it could improve placement stability.

**Probation**

The following recommendations came specifically from probation officers interviewed during the PQCR process.

**Placement Approval Process**

**Exemption Process**

- The “traveling road show” to educate other probation officers about how to make referrals for home evaluations should be repeated.
- Intake probation officers should be trained in the home evaluation process so that relative placement is considered in more cases.

It should be determined if it is a discretionary policy or a statutory function that a court order is needed to start the home evaluation process. Policies guiding home approvals should be revisited to determine if the procedures involved with launching a home evaluation could be simplified. This could allow the probation officer to spend more time on family finding efforts, preparing potential caregivers for placing the youth in their home, and supporting the youth once in placement.

**Preparation**

- Up-front orientation training for all new relative placements should be provided.
- Probation officers outside of the Placement Unit should receive training about relative placements.
- Ongoing “issue” training to probation officers and relative caregivers about issues such as gang awareness, or elders caring for probation youth should be provided.
- In-person meetings with the relative and the youth to discuss the rules of the home and the court orders should be held at the very beginning of the placement and be continued.

**ICPC/ICT**

- State technical assistance should be sought to improve the quality of documentation on inter-county transfer cases.
Support/Placement Stability

Support/Community Resources/Tangible Help
• More transportation assistance for relative caregivers is needed.

Funding Issues
• An emergency fund should be created to purchase essential items for new relative placements. Consideration could be given to partnering with community non-profits to apply for grant funding to meet this need. Or contracts could be amended to include tangible items, such as beds and dressers, for probation youth placed with relatives and NREFMs.
• Policies and laws that hold relative caregivers responsible for a probation youth’s fines or restitution should be revisited.

Consideration should be given to partnering with a non-profit organization in the community to establish a discretionary fund that could be easily accessed to purchase needed items a youth would need to move into a caregiver’s home, such as a bed and dressers. Similar to child welfare services, legislative change should also be explored to raise the ongoing rates for relative caregivers so they would be commensurate with existing foster care rates.

PROPOSED CHANGES TO THE SIP, NEXT STEPS

Child Welfare

Based on information gathered from the PQCR, there appears to be a need for targeted work regarding relative placements. The PQCR outcomes will be utilized by Child Welfare to help structure the focus areas in the County Self Assessment. The PQCR findings and ongoing analysis will be used to shape the next SIP, commencing in 2013. Areas that will be considered from the PQCR are establishing more consistency among regions and within existing policy; improving training for both social workers and kinship caregivers; establishing improved support systems for kinship caregivers such as support groups or peer mentors; developing more child care resources and advocating with the State for financial equity with foster parents.

Probation

Based on information gathered from the PQCR, there appears to be a need for targeted work regarding relative placements. The PQCR outcomes will be utilized by Probation to help structure the focus areas in the County Self Assessment. The PQCR findings and ongoing analysis will be used to shape the next SIP, commencing in 2013. Areas that will be considered from the PQCR are improving training for both probation officers and kinship caregivers; establishing improved support systems for kinship caregivers such as support groups or peer mentors; developing more child care resources and advocating with the State for financial equity with foster parents.
End Notes

2 Source: http://www.dof.ca.gov California Department of Finance, April 1, 2010.
3 Source: SANDAG San Diego Association of Governments, 2007
4 Military Families in San Diego, Needs Assessment, October 2010, Conceived and Commissioned by Promises 2 Kids
5 Paxman, Marina, "An Issues Paper: Outcomes for Children and Young People in Kinship Care", Centre for Parenting and Research, NSW Department of Community Research, December 2006.
8 Barth, Richard P., "Kinship Care and Lessened Child Behavior Problems: Possible Meanings and Implications", Arch Pediatric Adolescent Medicine, Volume 162, No. 6, June 2008 p. 586.
10 Barth, Richard P., "Kinship Care and Lessened Child Behavior Problems: Possible Meanings and Implications", Arch Pediatric Adolescent Medicine, Volume 162, No. 6, June 2008 p. 586.
17 Barth, Richard P., "Kinship Care and Lessened Child Behavior Problems: Possible Meanings and Implications", Arch Pediatric Adolescent Medicine, Volume 162, No. 6, June 2008 p. 586.
21 Barth, Richard P., "Kinship Care and Lessened Child Behavior Problems: Possible Meanings and Implications", Arch Pediatric Adolescent Medicine, Volume 162, No. 6, June 2008 p. 586.
22 Johnson, Kristen, "A Retrospective Support Assessment Study of Foster and Relative Care Providers", Children's Research Center, September, 2005.
24 Paxman, Marina, "An Issues Paper: Outcomes for Children and Young People in Kinship Care", Centre for Parenting and Research, NSW Department of Community Research, December 2006.
Appendix A
CALIFORNIA CHILD WELFARE SERVICES
OUTCOMES AND ACCOUNTABILITY SYSTEM
COUNTY OF SAN DIEGO
2011 PEER QUALITY CASE REVIEW
CWS CASE SUMMARY TOOL

FACE SHEET

<table>
<thead>
<tr>
<th>Current CWS Region: Region</th>
<th>Date of Interview:</th>
<th>Assigned to Team:</th>
<th>Initials of reviewer:</th>
</tr>
</thead>
</table>

Current Social Worker:

Reason for Removal:  
- [ ] Neglect  
- [ ] Physical Abuse  
- [ ] Sexual Abuse  
- [ ] Emotional Abuse  
- [ ] Severe Neglect  
- [ ] Substantial Risk  
- [ ] Sibling at Risk  
- [ ] Caretaker Absence  
- [ ] Other

Case Opened Date:  
Case Closed Date:

Service Component:  
- [ ] select one

Case Number (CWS/CMS#):

Child's Name (Last, First, Middle)  
Gender  
DOB  
Ethnicity  
Primary Language  
- [ ] select one  
- [ ] select one

Relative/NFRM Caregiver  
Relationship to Child

Does this child have other siblings involved with CWS?  
If yes, are the siblings placed in the same placement?  
What is the next court hearing type and date?

PLACEMENT INFORMATION

Date of Initial Placement:  
Placement End Date:

Placement Address:  
Telephone:

Was the child able to remain in school of origin at the time of removal?  
Special Education/IEP?  
- [ ] select one

Permanency/Concurrent Case Plan Goal?  
- [ ] select one

Did the social worker have monthly Face to Face or attempted contact with the child during this placement?  
- [ ] select one

How many placements has this child had prior to being placed with this relative/NFREM? (print out placement history)  
How long was the child in care before they were placed with this relative/NFREM?

Was there a TDM before the child was placed with this relative/NFREM?  
- [ ] select one

Have there been TDMs held for the child since placed with this relative/NFREM?  
- [ ] select one  
If so, date(s)

Have there been hotline referrals on this relative since the child was placed?  
- [ ] select one
If so, how many?  
(Describe referral and investigative summary in the note section)

How many social workers have been assigned to the child's case?
## SECTION II: Relative Placement Process

### A. Placement process

1. Was there Criminal History-Exemption made for this placement? (See SOC Form 815) <select one>

<table>
<thead>
<tr>
<th>Was there a CWS History-Waiver Assessment? &lt;select one&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Which type of CWS History?</td>
</tr>
<tr>
<td>Physical Abuse</td>
</tr>
<tr>
<td>Sexual Abuse</td>
</tr>
<tr>
<td>Emotional Abuse</td>
</tr>
<tr>
<td>Neglect</td>
</tr>
</tbody>
</table>

2. Was this placement an Emergency Relative Approval placement? <select one>

3. What was the final placement assessment date?

4. Was there a Physical Plant-Documented Alternative Plan required for this placement? <select one>
   If so, explain what it was:

<table>
<thead>
<tr>
<th>Was there a corrective action plan for this placement? &lt;select one&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>If so, explain what it was:</td>
</tr>
</tbody>
</table>

### B. Services

1. Did the child receive DSEP or KidStart services? <select one>

2. Did the child receive TERM services? <select one>

3. Did the child reunify with his or her parent? <select one>

4. Was the child adopted or go into a guardianship? <select one>

5. Were services offered to the relative/NFREM family following the placement of the child? <select one>

6. If "yes", which services were offered to the relative/NFREM?
   - Housing/clothing allowance
   - Mental Health referrals
   - Kinship Support Services
   - Clothing allowance
   - Comprehensive Assessment Stabilization Services (CASS)
   - Wrap services
   - Respite Care
   - Other
<table>
<thead>
<tr>
<th>A. Comments/Notes</th>
</tr>
</thead>
</table>
Case Review Questions for Probation

Overview Info

- Date of review:
- Child's name:
- Case number:
- Date of birth:
- Gender:
- Primary language:
- Race/Ethnicity:
- Date of current placement:
- Type of caregiver:
- Caretaker name:
- Placement address:
- Parent's address:
- School address:
- Date of initial placement:
- Current legal status:
- Next hearing type and date:
- Last face to face contact with PO:
- # of Probation Officers assigned to the case:

Relative Placement Process

- How long was the child in care before they were placed with this relative?

Placement Stability

- How many placements has this youth had?

- How long did the relative placement last?

- What services did the youth receive?

- What actual services did this relative care provider receive?
Outcomes

- While in the relative’s home, did the youth re-offend?

- Did the youth stay in their same school?

- Did the youth receive mental health treatment, if they needed mental health treatment?

- Did the youth successfully complete probation? If yes, how long did it take?

- Did the youth return to their parents?

- Any other pertinent information?
Appendix B
**INTERVIEW INFORMATION**

<table>
<thead>
<tr>
<th>County Name: San Diego</th>
<th>Team:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Interview:</td>
<td>Interview Time:</td>
</tr>
</tbody>
</table>

**INTRODUCTIONS & BACKGROUND**

**Introductions**

- Interviewer Team: Will briefly share which county they are from and number of years working in child welfare.
- Explain each interviewer's role (time keeper, recorder, and lead interviewer).
- Briefly explain purpose of the PQCR interview.
  - Anonymity
  - No right or wrong responses
  - Not an audit or case consultation
  - Looks at descriptive information about practice in the focus area – Least Restrictive Placement; Relative/NFRM Care and Placement Stability.
  - If the question asked is general, it's okay to generalize from other cases

**Social Worker Background**

At the time you were assigned to this case:

- How long had you been a social worker in public child welfare?
- What is your job classification (Job Title SW, PSW, Sr. PSW)?
- Length of time in current unit/program (CS, CI, Adoptions, Residential, etc)?
<table>
<thead>
<tr>
<th>INTERVIEW QUESTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Relative Placement Process</strong></td>
</tr>
<tr>
<td>1. The Review Team has been briefed on the history of the case. Please briefly give us a synopsis of the case and your involvement with the case?</td>
</tr>
<tr>
<td>2. How was the relative/NREFM found? Was a genograms or eco-map completed for this family? Explain how these tools were helpful and what barriers were experienced in completing or using the tool.</td>
</tr>
<tr>
<td>3. At what points in the case were relatives/NREFMs considered for the child's placement? Who was considered and what was their relationship to the child?</td>
</tr>
<tr>
<td>4. How did we learn of the relative/NREFM's willingness for placement?</td>
</tr>
<tr>
<td>5. When making placement decisions for this child, how was his or her family included? How often and at what points in the life of the case?</td>
</tr>
<tr>
<td>6. How was the child included in the placement decision process? Was this child asked where they wanted to be placed? Was this option explored? If so, how?</td>
</tr>
<tr>
<td>7. Was the parent in favor of this placement? Why or why not? (Address each parent; mother &amp; father)</td>
</tr>
<tr>
<td>8. Did the child, relative/NREFM or parent say anything about how quickly or how long it took for this placement to happen?</td>
</tr>
<tr>
<td>9. Were there any difficulties in connecting or maintaining contact with the relative/NREFM? If yes, tell us about them.</td>
</tr>
<tr>
<td>10. What are your recommendations to improve the relative/NREFM placement process?</td>
</tr>
<tr>
<td>Placement Stability</td>
</tr>
<tr>
<td>---------------------</td>
</tr>
<tr>
<td>11. What were the <strong>immediate needs</strong> of the relative/NREFM caregivers? Were these needs met? Why or why not? How were they met?</td>
</tr>
<tr>
<td>12. What were some factors that helped the child remain in their relative/NREFM placement?</td>
</tr>
<tr>
<td>13. What were some factors that contributed to any placement disruptions with the relative//NREFM?</td>
</tr>
<tr>
<td>14. What were the <strong>ongoing needs</strong> of the relative/NREFM caregivers? Were these needs met? Why or why not? How were they met?</td>
</tr>
<tr>
<td>15. What kind of support was provided to the caretakers to help maintain the child’s placement?</td>
</tr>
<tr>
<td>16. What were the gaps in services for the relative/NREFM caregivers? How were they addressed?</td>
</tr>
<tr>
<td>17. How did you work with the relative/NREFM to manage or resolve behaviors or other issues presented by the child?</td>
</tr>
<tr>
<td>18. Describe the frequency and nature of your contacts with the relative/NREFM caregiver.</td>
</tr>
<tr>
<td>19. What would be your recommendation to improve support to relative/NREFM caregivers?</td>
</tr>
</tbody>
</table>
Outcomes

20. How did the relative/NREFM caregiver support (or not) parent/child visitation? Did this relative/NREFM caregiver supervise visits? Or did they help get the child to visits (transport)?

21. Were siblings placed together? If yes, how did this affect the placement? If no, were there sibling visits? How did this affect the placement?

22. In your opinion, did the child experience less trauma because they were placed with this relative/NREFM? How can you tell? (e.g. behavior problems, educational problems, etc)

23. Did the child have any behavioral problems, educational or developmental delays before being placed with the relative/NREFM? If so, how did placing the child with a relative help the child with those needs? How did the relative facilitate getting those treatment services?

24. If the child did not stay in their school of origin, can you describe how they were affected by this disruption?

25. Did the relative/NREFM help the child with their academic performance? Please explain.

26. Did the relative/NREFM make sure the child received the developmental services they needed, if applicable? Were there any barriers to receiving these services?

27. Did the relative/NREFM make sure the child received mental health treatment, if applicable?

28. How do you think this relative/NREFM caregiver helped this child to achieve permanency?

29. Did the youth’s concurrent plan involve a relative/NREFM? If no, explain why. How was the concurrent plan developed with the child? Caregiver?

30. Did you develop the current case plan with the children and the family? If no, explain.

31. How did you work with the child to develop the case plan?

32. How do you work with the family to develop the case plan?

33. Can you identify any training topics that would help you with relative placements and/or working with relatives/NREFMs?

34. When reflecting on your work with this family what are you most proud of?
**PQCR INTERVIEW TEAM OBSERVATIONS**

*Use this space to prepare for the debriefing session. Answers need to be specific to the focus topic: Relative Placement - Point in Time*

- Identify documentation trends:

- Identify promising practices:

- Identify barriers & challenges:

- Identify training needs:

- Identify systemic/policy changes:

- Identify resource issues:

- Identify areas needing state technical assistance:

- Other:
## INTERVIEW INFORMATION

<table>
<thead>
<tr>
<th>County Name: San Diego</th>
<th>Team:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Interview:</td>
<td>Interview Time:</td>
</tr>
</tbody>
</table>

## INTRODUCTIONS & BACKGROUND

### Introductions

- **Interviewer Team:** Will briefly share which county they are from and number of years working in Probation.
- **Explain each interviewer’s role:** (time keeper, recorder, and lead interviewer).
- **Briefly explain purpose of the PQCR interview.**
  - Anonymity
  - No right or wrong responses
  - Not an audit or case consultation
  - Looks at descriptive information about practice in the focus area – Least Restrictive Placement; Relative/NREFM Care and Placement Stability.
  - If the question asked is general, it’s okay to generalize from other cases

### Probation Officer Background

**At the time you were assigned to this case:**

- **How long have you been a Probation Officer?**
- **How many cases are on your current caseload?** Of those cases, how many are placed with a relative caregiver?
- **How long have you been assigned to this case?** Or how long were you assigned to this case? Did you make the initial placement with the caregiver?
### INTERVIEW QUESTIONS

**Relative Placement Process**

1. Describe how this relative/NREFM was found?

2. Was the parent in favor of this placement? Why or why not?

3. If you made the initial placement, how did you include the youth and family when making placement decisions?

4. How often did you include the family in placement decisions?

5. At what points throughout the case did you include the family?

6. What would your recommendation be to improve the relative placement process?
Placement Stability

7. Describe any prior CWS involvement the youth had before being active to Probation?

8. Do you think this prior CWS involvement impacted the stability of the placement, to either make the placement less stable or more stable?

9. If there were changes of placement, do you think they were more related to delinquency issues or dependency issues, or a combination of the two?

10. What were the contributing factors to the successful part of this placement?

11. What were the barriers to the success or stability of this placement?

12. If the placement didn't last, what were the reasons?

13. Did the youth ever run away from placement? If so how many times? How long was the youth gone? Where was the youth located? Could that have been an acceptable placement?

14. What were the immediate needs of the relative/NREFM caregivers? Were they met? Why or why not?

15. What were the ongoing needs of the relative/NREFM caregivers? Were they met? Why or why not?

16. What actual services did this relative/NREFM caregiver receive?

17. What type of services were needed for the relative/NREFM caregiver, but not provided?

18. Please explain why the services were not provided.

19. What was the quality of the relationships between the child and the other youth in the relative/NREFM home? Were there any conflicts? How were they resolved? Did the conflicts contribute to any changes of placement?

20. Did the relative/NREFM receive assistance with transportation or respite? If not, why not?

21. Tell us, in your experience, what do you think helped this youth stay in placement?

22. What would your recommendation be to improve placement stability for relatives?
23. In your opinion, was this relative/NREFM able to enforce the court orders? Why or why not?

24. While in the relative's/NREFMs home, did the youth re-offend? Please describe.

25. While in the relative's/NREFMs home, did the youth abuse drugs or alcohol? Please describe.

26. While in the relative's/NREFMs home, did the youth have any gang involvement? Please describe.

27. In your opinion, did the relative/NREFM do a good job of managing the youth's behavior? Why or why not?

28. In your opinion, did the youth have less trauma because they were placed with this relative/NREFM? Please explain.

29. How is this youth getting their educational needs met? Did they have an IEP? What type of school are they in?

30. Did the relative/NREFM help the youth with their academic performance?

31. Did the relative/NREFM make sure that the youth received mental health treatment, if they needed mental health treatment? How were the mental health needs of this youth met?

32. Was the youth separated from siblings? How did that effect the youth? Did the youth stay in contact with their siblings or other family members?

33. How did you or do you maintain contact with service providers and assess the quality of services provided?

34. In what ways did or do these services help to support the youth's placement?

35. Did the youth successfully complete probation? If yes, how long did it take?

36. Did the youth return to their parents?

37. Can you identify any training topics that would help you with relative placements and/or working with relatives/NREFMs?

38. When reflecting on your work with this family, what are you most proud of?
Use this space to prepare for the debriefing session. Answers need to be specific to the focus topic: Relative Placement - Point in Time

Identify documentation trends:

Identify promising practices:

Identify barriers & challenges:

Identify training needs:

Identify systemic/policy changes:

Identify resource issues:

Identify areas needing state technical assistance:

Other:
Appendix C
Focus Group Questions

Relative Home Approval Process/Placement

- Background check process
- Home Evaluation - Site Inspection
- Home Evaluation - Interview
- Preparation for receiving the child
- Length of Time of Approval Process

Relative Support Services

- Financial Compensation
- SW/PO Ongoing visits & availability in the beginning
- SW/PO Ongoing visits & availability on an ongoing basis
- General help with child's needs
- General help with the parents
- Service Providers
- Communication & coordination among providers

Questions for Relative Caregivers

1. If you could change one thing about the relative home approval process, what would it be?
2. If you had a magic wand, a satisfying relative home approval process is one that would be _________________.
3. If you had a magic wand, a satisfying relative home approval process is one that would result in _________________.
4. A satisfying relative home approval process is one that does NOT result in _________________.

5. If you could change one thing about the relative support services, what would it be?
6. If you had a magic wand, a satisfying relative support services is one that would be _________________.
7. If you had a magic wand, a satisfying relative support services is one that would result in _________________.
8. A satisfying relative support services is one that does NOT result in _________________.

Questions for Child Welfare Services & Probation Officer Placement Staff

1. If you could change one thing about the relative home approval process, what would it be?
2. An effective relative home approval process is one that is _________________.
3. An effective relative home approval process is one that results in _________________.
4. An effective relative home approval process is one that does NOT result in _________________.

5. If you could change one thing about the relative support service package, what would it be?
6. An effective relative support services is one that is _________________.
7. An effective relative support services is one that results in _________________.
8. An effective relative support services is one that does NOT result in _________________.

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Questions for Youth

Stage Setting
We want to ask you some questions about your experience living with your relative, or family friend. What we mean by relative is anyone that you have a blood relationship with, like an aunt, or an uncle or a grandparent. This could also mean a step parent or step grandparent. By family friend, we mean anyone that your family considers a friend or anyone who is so close to your family that they seem like a relative, but they aren't actually a blood relative. Does anyone have questions about this?

In this meeting, we would like you to answer each of the questions we ask you. If you feel uncomfortable talking out loud in the group, we have put paper at your tables and you could write your answers down if you would rather do that. Or you could answer the questions and also write some of your answers.

Your answers to these questions are very important to us. The State of California is taking a look at how the County of San Diego places children with relatives or family friends, when they can’t live safely at home with their parents. They want to know how that experiences is for the youth, and how they can make it better.

The information you tell us today is confidential. What that means is that we aren’t going to tell anyone what you said. We will write down what you said, but we will not let anyone know that it was you who said these things. The only reasons we would tell your social worker, or someone who takes care of you what you said, would be if you said something about wanting to hurt yourself or another person, or that someone has hurt you.

We do ask that after this Focus Group meeting, that you don’t talk about what was said in this room to others. We want to respect the privacy of each of you in here, so we ask that you not tell any of your friends or other people what other youth in this room shared. You can talk about the experience generally about what was discussed, but we don’t want you to say, "John Smith said ______ today at the meeting I just went to."

Does anyone have any questions?

1. What are the first names of the people you live with now? What do you call them (example, my mom, my Tia, my dad, my grandmother, my foster mother)?
2. If you couldn’t live at home with your parents, would you rather live with a relative or family friend, in a foster home, or in a group home?
   a. Why or why not?
3. Did you get to stay at your same school when you went to live with your relative?
   a. Was it more important to you that you live with a relative or stay in the same school?
   b. Why or why not?
4. Did you get to live with the relative/family friend that you wanted to?
   a. Why or why not?
b. If not, how would you rank this on a scale of 1 - 10 where 1 = it bothers me every single day and 10 = it doesn’t bother me at all.

5. How long did it take from the time that you were taken out of your parent’s house until you were placed with your relative/family friend?
   a. On a scale from 1 - 10, 1 = way too long, 10 = very quickly, where would you rank how long it took?
   b. Can you tell us a little bit about your experiences while you were waiting to be placed with your relative/family friend?

6. What is/was the best part of living with your relative/family friend?

7. What is/was the downside of living with your relative/family friend?
   a. If you had a magic wand to fix this, how would you fix it?

8. Do you think you will be living where you are now for a long time (more than 6 more months)?
   a. Why or why not?

Questions for Judges & Attorneys

1. If you could change one thing about the relative home approval process, what would it be?
2. An effective relative home approval process is one that is ____________________.

3. An effective relative home approval process is one that results in ________________.
4. An effective relative home approval process is one that does NOT result in ________________.

5. If you could change one thing about the relative support service package, what would it be?
6. An effective relative support services is one that is ____________________.

7. An effective relative support services is one that results in ________________.
8. An effective relative support services is one that does NOT result in ________________.
Survey Monkey Questions for CWS Managers

Relative Home Approval Process - Placement
1. If you could change one thing about the relative home approval process, what would it be?
2. What do you think is the one thing that is going well with the relative home approval process?
3. If a relative/NRFEM has a criminal or child abuse history, what is your process to get more information about the history? a) manager does file review, b) manager does CWS/CMS review c) briefing from Placement worker/supervisor d) briefing from assigned worker/supervisor e) meeting and/or discussion with the prospective caregivers, f) manager reviews 04-338 waiver. (check all that apply)
4. In your region, if a relative/NREFM has a criminal or child abuse history, how long does it typically take for a child to be placed? a) same day if we can determine it's safe; b) as soon as is safely possible, i.e. we want to see how the TDM goes; c) not until the paper work is back from DOJ and CACI; (check either a, a&b, or c)
5. When you think of all the priorities in your region, where do you rank quickly placing children in safe, familiar placements? 1=not a top priority; 10= the highest priority
6. In your opinion, what works best in your region for making relative/NRFEM placements?
7. In your opinion, what are the biggest barriers to making safe, timely relative/NRFEM placements?
8. If you had a magic wand, what would you change or do differently to increase the number of immediate safe, familiar placements for children in your region?

Relative Support Services
1. If you could change one thing about the relative support services, what would it be?
2. In general, do you think the providers are effective? 1=not effective; 10= very effective
3. Overall in your region, who provides the most support to relative/NREFMs - the Placement Unit or the Case carrying social worker?
4. Overall in your region, how well does the Placement Unit and the case carrying worker/supervisor work together to provide support to relative/NREFEMS? 1=not at all; 10=excellent team work
5. In your opinion, what works the best in your region with the support you have available for relative/NRFEM placements?
6. In your opinion, what are the biggest barriers to providing support for relative/NRFEM placements?
7. If you had a magic wand, what would you change or do differently to improve the support we have for relative/NRFEM placements?
Handouts given at Focus Groups
This is the time period from when the Social Worker first contacted you until the child was placed in your home.

Relative Home Approval Process/Placement

- Background check process

- Home Evaluation - Site Inspection

- Home Evaluation – Interview

- Preparation for receiving the child

- Length of Time of Approval Process
This is the time period after the kinship child was placed in your home.

**Relative Support Services**

- Financial Compensation

- Social Worker or Probation Office- Ongoing visits & availability after the child is placed in your home.

- Social Worker or Probation Officer- Ongoing visits & availability on an ongoing basis after the child is placed in your home 1-3 months.

- General help with child’s needs

- General help with the biological parents

- Service Providers

- Communication & coordination among providers
Focus Group Questions for Relative/Kinship Caregivers

1. If you could change one thing about the relative home approval process, what would it be?

2. If you had a magic wand, a satisfying relative home approval process is one that would be ________________.

3. If you had a magic wand, a satisfying relative home approval process is one that would result in ________________.

4. A satisfying relative home approval process is one that does NOT result in ________________.
5. If you could **change** one thing about the *relative support services*, what would it be?

6. If you had a magic wand, a **satisfying** *relative support services* is one that would be

   ____________________________.

7. If you had a magic wand, a **satisfying** *relative support services* is one that would
   **result in** ____________________.

8. A **satisfying** *relative support services* is one that does **NOT** result in ____________.

9. In regards to the Kinship child/children in your care, what are you most **proud** of?
Focus Group Questions for Kinship Youth

1. What are the first names of the people you live with now? What do you call them (example, my mom, my Tia, my dad, my grandmother, my foster mother)?

2. If you couldn’t live at home with your parents, would you rather live with a relative or family friend, in a foster home, or in a group home?
   a. Why or why not?

3. Did you get to stay at your same school when you went to live with your relative?
   a. Was it more important to you that you live with a relative or stay in the same school?
   b. Why or why not?

4. Did you get to live with the relative/family friend that you wanted to?
   a. Why or why not?
   b. If not, how would you rank this on a scale of 1 - 10 where 1=it bothers me every single day and 10=it doesn’t bother me at all.
5. How long did it take from the time that you were taken out of your parent's house until you were placed with your relative/family friend?
   
a. On a scale from 1 - 10, 1= way too long, 10=very quickly, where would you rank how long it took?
b. Can you tell us a little bit about your experiences while you were waiting to be placed with your relative/family friend?

6. What is/was the best part of living with your relative/family friend?

7. What is/was the downside of living with your relative/family friend?
   
a. If you had a magic wand to fix this, how would you fix it?

8. Do you think you will be living where you are now for a long time (more than 6 more months)?
   
a. Why or why not?
San Diego County Social Services

Health & Human Services Agency (HHSA)
- CalWORKs
- Food Stamps
- MediCal

Child Welfare Services (CWS)
- Child Abuse Hotline
- Social Workers
- Polinsky Children’s Center
- Foster Care

VS

Community Social Services

YMCA Kinship Services
- Private Non-Profit - YMCA of San Diego
- Social Services
- Kinship Navigator/Case Manager
- Support Group
- Respite
Appendix D
Appendix D: County of San Diego CWS Statistics

Breakdowns of out-of-home care by category for FY09/10, monthly average:

An average of 4,438 children were in out of home care each month:
- 2345 (52.8%) were in non-relative care, of those:
  - 964 (21.7%) were in foster family homes
  - 533 (12.0%) were in group homes
  - 458 (10.3%) were in guardian, shelter, and court specified homes
  - 390 (8.8%) were in foster family agency homes
- 4438 (32.6%) were in relative/kin care
- 453 (10.2%) were in another type of placement (e.g. trial visits with parents, emergency placements)
- 194 (4.4%) were in Adoptions pending/finalized

Source: Query of CWS/CMS by Children's Resource Center (CRC), 8/16/10