

TEHAMA COUNTY
CALIFORNIA CHILD AND FAMILY SERVICES REVIEW



PEER QUALITY CASE REVIEW
CONDUCTED FOR

CHILD WELFARE AND JUVENILE PROBATION SERVICES

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CHILD WELFARE SERVICES AND PROBATION PEER QUALITY CASE REVIEW

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INTRODUCTION

Pursuant to State Law (Assembly Bill 636, Steinberg, Ch. 678, Statutes of 2001), effective January 2004, a new Child Welfare Services Outcome and Accountability System began operation in California, referred to as the California Child and Family Services Review (C-CFSR). This system was developed in accordance with the provisions of WIC §10601.2 and requires that outcome-based reviews include, at the minimum, a core set of outcomes tied to the fundamental responsibility of Child Welfare Services (CWS) to drive its system. The outcomes are defined in terms of safety, permanency and well-being, as are the outcomes used in the C-CFSR. In addition to the outcomes measured by the federal government in its review of California's child welfare system, there is a comprehensive list of enhanced outcomes to measure the performance of each county's Child Welfare Department.

All counties are mandated to undertake a complete review, including Peer Quality Case Review (PQCR), every three years. The underlying purpose of the Review (PQCR) is to provide a rich and deep understanding of actual practices in the field by bringing in outside expertise to help shed light on the strengths and challenges for county Child Welfare Services (CWS) delivery systems and social work practices. For Probation (PO), the goal of the PQCR is to identify key patterns of agency strengths and concerns for the services for youth in out-of-home care. Both agencies benefit by using peer reviewers that can offer objectivity to the process and serve as an immediate training resource.

The PQCR process is an extension of the county's Self-Assessment (SA) process. Both the PQCR and SA are integral for a complete review of county practices which inform the county's System Improvement Plan (SIP).

The intent of AB 636 is to encourage a unique State/County oversight partnership to identify and replicate best practices as the catalyst for improving outcomes for children and families. This is to ensure the unique and critical needs of foster care children and their families are met, as well as to strengthen the accountability system used in California to monitor and assess the quality of services provided on behalf of maltreated children. Additionally, the PQCR process relies on intra-county collaboration as peer social workers and probation officers serve on the interview panels. This collaboration allows for peers to share best practice approaches pertinent to the selected PQCR focus area and cross pollinate best practices between counties. It is anticipated that in combination with the Peer Quality Case Reviews, the outcome-based accountability system will create changes in service delivery and caseworker practice needed to achieve steady improvement in the safety, permanency and well-being measures for California.

Tehama conducted their inaugural PQCR May 22-24, 2006. CWS focused on foster care re-entry while Probation focused on parent contact/family

engagement. Tehama completed its County Self Assessment in March, 2007, and submitted the most current updated three-year System Improvement Plan January 10, 2008, also focusing on Re-entry after Reunification.

For CWS, findings from the 2006 PQCR highlighted the importance of meaningful participation of the parent(s) in the creation of the case plan, a solid and supportive relationship with the social worker, available services and preventing delays in accessing such, training for new workers and caseload size and complexity. Suggestions included developing more aftercare and in-home services, a consistent standard for assessing when to reunify, increased involvement of the family in the development of the case plan, smoother case transfer process, improved training for new workers and greater knowledge and use of the Family-to-Family model and tools.

For Probation, findings illuminated the importance of engaging parents in the case plan, cross-training within the department, staff reduction and time constraints/legal mandates and the lack of local resources. Suggestions included hiring of probation aids, better cross-training within the department, exploring partnerships and funding opportunities, determining the possibility of court orders requiring parent participation, greater consideration of the financial concerns of families with youth placed out of county, improved collaboration with the family and the development of local resources.

Introduction to Tehama County

Tehama County is located along the I-5 corridor, midway between Sacramento County and the Oregon border. The county is comprised of 2,950.99 square miles and boasts a population of 61,686 residents. Combined, the three small cities of Corning, Red Bluff and Tehama comprise the majority of Tehama County's population. This county consists of the snowy Sierras to the east, continues onto rolling foothills and flat-topped buttes to the Sacramento River Valley.

Tehama County CWS has implemented several changes within the past year. To meet increasing needs in the southern reaches of Tehama County, CWS opened a satellite office in the town of Corning. The Corning office currently staffs four social workers, one social service aide and one Social Worker Supervisor. Red Bluff staffs 13 case carrying social workers, seven non-case carrying social work assistants and staff, two parent partners and three Supervisors. Additionally, Dependency Drug Court has been initiated in Tehama County which has been very well received.

The most notable change, however, has been the restructuring of the CWS units in Red Bluff to that of a vertical social work system. The office has been modified with the intent to reduce the number of social workers each child has and to enhance partnerships/teaming among social workers. By the end of 2008, the

CWS office (in Red Bluff only, the Corning office will not be affected) will consist of three units each of which will maintain an Immediate Response, Court and Ongoing social worker. Ultimately, each unit will carry separate cases for the entire life of that specific case (although separate social workers will perform separate functions).

Child Welfare Focus Area

Measure C4.1,2,3 Placement stability

Following a review of Safe Measure and quarterly CMS data reports, Tehama County CWS, in collaboration with a CDSS state consultant, selected Measure C 4.1,2,3: Placement Stability as the Child Welfare PQCR Focus Area. The definition of Measure C 4.1,2 and 3 is as follows:

Of all children who served in foster care during the year who were in foster care for (1) at least eight days but less than 12 months (Measure C4.1), (2) at least 12 months but less than 24 months (Measure C4.2) or (3) at least 24 months (Measure C4.3) what percent had two or fewer placement settings?

Per U.C. Berkeley's Federal/State Outcome Measure Report for Jan 1, 2007, to Dec 31, 2007, Tehama County's rate for Measure C4.1 was 81.3%, for C4.2, 52.5% and for C4.3, 31.5%. The National standard/goal for Measure C4.1 is 86.0; C4.2, 65.4 and C4.3, 48.7.

Probation Focus Area

Measure C4.1,2,3 Placement stability

Probation selected the same focus area as did CWS (for definition see above) after a review of their practices and consultations with their CDSS consultant.

IMPORTANCE OF PLACEMENT STABILITY

Why is placement stability an important issue for child welfare services and probation?

The federal definition of placement stability is defined as "all children who have lived in foster care less than twelve months from the time of the latest removal." The intention of this federal measure is to ensure that children who enter foster care receive a stable permanent family home as quickly as possible.

Children who are in the Child Welfare Services system and experience multiple moves are at an increased risk for poor outcomes in academic achievement, socio-emotional health, developing insecure attachment relationships with their primary caregivers, and can experience significant distress due to the instability

and uncertainty that comes with not having a stable family environment (Gauthier, Fortin, & Jeliu, 2004). For young children, research finds that experiencing placement instability can result in significant stress that can adversely affect physiological changes in the brain (Fisher et al., 2006).

One way of lessening the occurrence of children's displacements is the use of permanency planning. The purpose of permanency planning is to develop and implement methods that increase the likelihood that children move out of substitute care into permanent family homes as quickly as possible. In the United States, permanency planning became part of legislation in 1980 with the Adoption Assistance and Child Welfare Act. While there is no single universally accepted definition for permanency planning, it has been defined as, "a philosophy highlighting the value of rearing children in a family setting, preferably their biological families, [and] a theoretical framework stressing the stability and continuity of relationships to promote children's growth and functioning" (Fein et al., 1983).

Typically, research finds that factors associated with placement stability fall under client factors (child/family), service factors (e.g., type of placement, foster family support), organizational factors (e.g., social worker changes), and community level factors, with unmet behavioral health needs being the greatest reason for experiencing multiple placement moves (Bradley, 2004; Lindhiem & Dozier, 2007). Some foster parent characteristics associated with number of placements is the "goodness of fit" between the characteristics of foster parents and the temperament of the child and how much knowledge and strategies caregivers have for working with children who have behavioral issues (Gibbs, 2005). Kinship care has also been linked to greater placement stability (Webster et al., 2000) and this occurs even when a child is exhibiting behavior problems (Chamberlain et al., 2006).

Drawing on the above literature, this report sought to assess and examine the practices and policies that were being implemented in Tehama County to impact placement stability and existing permanency planning activities. The goal of the focus groups and interviews to elicit information related to placement stability fell into the following categories:

- 1) Type of placement (Relative/NREFM placement)
- 2) Foster parent training/support
- 3) Foster family characteristics
- 4) Child behavioral issues/concerns
- 5) Educational changes/moves
- 6) Disruptions in the neighborhood
- 7) Contact with family (immediate and extended)
- 8) Type of child assessments conducted
- 9) Type of services provided
- 10) Social worker changes

- 11) Use of concurrent case planning
- 12) Use of participatory case planning activities (such as TDM)
- 13) Use of strength/needs assessments (such as SDM)
- 14) Involving family and youth in these case planning activities

All of the listed factors have been found to be importantly related to permanency planning activities and placement stability. Thus, the current PQCR drew from these factors and characteristics related to placement stability and permanency planning in constructing questions for the interviews and focus groups.

METHODOLOGY

In order to meet the county objectives, the PQCR was structured to allow multiple avenues for data gathering:

1. Focus area case review
2. Case specific interviews of social workers/probation officer assigned to respective cases (cases were the same as those under the focus area topic case review)
3. Focus groups of key stakeholders in the child welfare system.

Tehama County CWS and PO conducted a concurrent PQCR during the week of September 23, 2008.

A committee of six CWS staff, three PO staff, and one CDSS consultant, with support from the Northern California Training Academy, coordinated the development and process of Tehama County's PQCR. Representatives from both child welfare and probation participated in all aspects of the PQCR process including planning, implementation and preparation of the final PQCR report.

Sample Selection

CWS Case Reviews (cases were used for both the focus area case review and the interviews with the appropriate CWS social worker)

Using reports generated from SafeMeasures, the PQCR team selected representative cases of both stable (cases that had three or less placements) and unstable placements (cases with greater than four placements). While the CWS Measure C4.3 stipulates that placement stability is an individual having two or fewer placements, Tehama County specified stability as having three or fewer placements to account for those cases in which an individual is placed in a receiving home. Being placed in a receiving home is not viewed as a placement for this PQCR.

Other criteria included an effort to prevent the same social worker from being interviewed more than once, cases where the main social worker

was available for the PQCR interview, both boys and girls, and all three components of the placement composite measure (at least two cases from each composite measure). Furthermore, cases were selected from the time period specified for the review--7/1/07-6/30/08.

A total of 14 cases were reviewed for the Case Review portion of the PQCR. Seven of these cases were successful in placement stability (cases with 3 or less placements) and seven of these cases were unsuccessful with regard to placement stability (cases with 4 or more placements).

During the case review selection process, the PQCR team noted the distinct and apparent trend that cases that had multiple placements were also cases that had multiple social workers. Thus multiple placements were associated with having multiple social workers.

Probation

Probation also selected four cases for review; one officer was interviewed for these four cases. One (25%) of which was successful (two or fewer placements) and three (75%) of which were unsuccessful (three or more placements).

Focus Groups

Child Welfare conducted a total of seven focus groups. Focus groups were held for both professionals who work with Child Welfare clients and for clients receiving Child Welfare services (both biological parents and youth). These groups were held to elicit feedback and insight from a variety of sources.

Probation conducted one focus group with parents of youth who have been or who are currently residing in probation out of home placements. Probation parents were asked for their feedback and experiences with the PO system.

UC Davis staff facilitated all focus groups. Focus group notes were analyzed to elicit common themes and patterns addressed by participants.

Recruitment for focus group participants varied accordingly:

- *Youth*: CWS invited all youth currently participating in the Tehama County ILP program.
- *CWS Supervisors*: All CWS Supervisors were invited to attend this focus group.

- *Foster parents:* Specific caregivers were recruited that had been identified as caregivers for the cases under the case review and interview process. These caregivers had the placement at a critical point and/or had the child the longest and/or more than once and were reachable/findable.
- *Probation parents:* All parents of current PO youth were invited to attend this focus group.
- *CWS Bio Parents:* All parents associated with the selected cases were recruited.
- *Children First FFA Social Workers:* All agency social workers and the administrator were invited to attend (focus group conducted at their office).
- *Court:* Judges and attorneys associated with juvenile dependency/delinquency were recruited.
- *Foster Youth Services Educators Foster & Homeless Youth Services Coordinator:* Both staff were invited to attend.

Procedure

Case Review

Social workers and probation officers were notified of their scheduled interview time two weeks in advance of the PQCR week. The program manager and probation supervisor discussed the PQCR process with their respective staff during scheduled staff meetings to ensure they understood the PQCR process, focus area, question development and case selection process.

Peer interview teams were trained in proper interview techniques on September 22, 2008, during a four-hour orientation. Teams were led through a process by which they delegated tasks to each member (note-taker, greeter, time-keeper), understood the intent of the Interview and Focus Area Case Review tools and practiced both tools, which were computerized in an electronic format. Furthermore, teams were coached to spend 20 minutes following each interview to thoroughly review notes taken to ensure complete data was collected.

Two peer teams conducted four interviews, while the remaining two interview teams conducted a total of five interviews. Interview teams provided every Tehama staff interviewed with a “Goody Bag” to ease tension and as a token of appreciation for their time.

Interviews were conducted for two full days following the initial training. Both days, UC Davis facilitated a debrief session during which time the teams discussed interview tools and the PQCR process as well as the findings from the Case Reviews and Interviews. A final debrief session was conducted by UC Davis on September 25, 2008, to identify the top strengths and challenges discovered throughout the interview process along with recommendations for strategies to improve the specified outcomes of placement stability.

Focus Groups

Focus groups were facilitated by a UC Davis staff. Additionally, UC Davis provided a note-taker as focus groups were not tape recorded.

Final Day exchange

During the final day of the PQCR process, UC Davis facilitated a *Final Day Exchange* between the interview teams and Tehama County child welfare and probation staff. Prior to the Exchange, interview teams presented key findings, both strengths and challenges, to the PQCR planning team and Tehama County administration. Following this exchange of information, all Tehama County staff was invited to participate in the Final Day Exchange during which Tehama staff questioned peer interview teams regarding practice in their respective counties and best practices. Both probation and child welfare discussed recommendations and strategies to positively impact both focus areas.

Tool Development

Case Reviews

The PQCR team developed the Case Review and Interview tools (Appendix A-C), following a thorough review of literature on research regarding causes and leading factors in placement stability and characteristics related to permanency planning. The tools were developed to complement each other so that the Case Review information would provide more complete information on the same topics as the Interview tools and vice versa. Because the research regarding placement stability is applicable to both CWS and PO, the same tools were used for each department. In total, two tools were created: (1) CWS Social Worker and Probation Officer Focus Area Case Review, (2) CWS Social Worker and Probation Officer Interview tool.

Tools were developed over a two month period of time during which both social work and probation staff were consulted for feedback. Furthermore, both the CWS social worker and PO tools were tested prior to the PQCR week in mock interviews to ensure readability and comprehension. Based on this testing, the tools were then refined. CWS and PO staff were provided with final copies of the interview tools so as to prepare for the PQCR case reviews.

Focus Groups

Focus Group tools were developed by the PQCR team (Appendix D-I).

Data Analysis

Analysis includes insights and recommendations from the peer interview teams as well as a more in-depth review of interviews and case reviews.

Validity of the Data

As the cases selected for the PQCR do not represent a statistically valid random sample, we are unable to perform tests of statistical significance on the findings and cannot assume the results can be generalized or would be applicable to similar cases. In addition, the information obtained is only as reliable as the data entered into CWS/CMS. Despite these problems, the information obtained from the interview and case file review tools offers a starting point for determining the factors and/or practices that may be related to placement stability and factors related to permanency.

SUMMARY OF DATA

STAFF PARTICIPANT DEMOGRAPHICS

The peer reviewers conducted 14 interviews with Child Welfare Workers who had degrees in social work, counseling or psychology with some having a LCSW or MFT license. One Probation Officer was interviewed who had a current caseload of 24 cases and 8 years experience with child welfare.

Child Welfare Workers:

Caseload size: CWS, M = 24.58 (range 3-35);

Child Welfare Experience: CWS, M = 12.54 years (range 1-20)

Children and Youth Demographics

At any given time in the past year, there was an average of 215 children in child welfare supervised foster care in Tehama County. As noted above, a sample of 18 children's cases was selected for the PQCR.

The Tehama PQCR sample (Child Welfare and Probation combined) included 8 female and 9 male children and youth (1 case did not specify the child's gender). The age range was from 1 to 19 years old with an average age of 12.26 years old.

Case Documentation Data - CWS

- Discrepancies between files and interviews: In examining the selected case files and comparing notes in the case files with interviews, there were some discrepancies noted. Specifically, in six interviews, the social worker stated that Team Decision Making (TDM), Concurrent Case Planning or Participatory Case Planning was conducted but no actual documentation was *readily or easily* found in the case review. In one of these cases, during the case file review no documentation was found that indicated a TDM was conducted; however, the assigned social worker stated that “several were done” during the respective case interview. Again, it is important to note that the inability of the team to locate specific information during the case review did *not* lead to the conclusion that the respective activity was not completed (i.e., a compliance issue) but rather that the documents were simply not found (allowing the county to draw conclusions regarding documentation vs. compliance).
- Education Passports were incomplete in CWS/CMS: Passport data was missing from CWS/CMS.
- There were no indications that Child Welfare staff was using CWS/CMS inaccurately.
- Concurrent Planning documentation was incomplete in CWS/CMS.

Case Documentation Data – PROBATION

- As was found with the CWS Focus Area Case Review, there were some discrepancies between what was reported in the files and in the interviews. However, this finding was only noted for 1 out of the 4 case files selected for review. When comparing the notes in the 3 other case files selected for review, no discrepancies were noted.

SUMMARY OF PRACTICE- CHILD WELFARE

This section describes the themes discovered by interview teams and focus groups during the PQCR as promising practices and practices needing improvement.

Peer Interview Teams

Child Welfare Strengths and Promising Practices

- Placement Stability (legal and physical) Strengths
 - *Best efforts are made to place children with the most appropriate caregiver.*
 - Younger children (under age 10) tend to experience greater placement stability and have a greater

tendency to be placed with a relative, thus are more likely to establish emotional permanency.

- Permanency Planning Strengths
 - *Best efforts are made to keep children in stable placements*
 - Placement workers begin looking for alternate placements prior to placement disruptions.
 - *Collaborative efforts made to involve all important parties*
 - While it can be difficult to involve family members (due to events such as incarceration), great attempts are made to involve important community partners such as mental health providers and CASA workers.

- Educational Permanency Strengths
 - *Efforts made to honor the right of the child to stay in the same school*
 - Local placements when possible are given priority so children can stay in the same community and school. For example, one child received transportation to an out of county school so that the child remained in the same school after being removed.

- Emotional Permanency Strengths
 - *Desire and efforts to learn more effective ways to maintain a life-long connection*
 - CWS who had clients who are of adolescent age wanted to learn strategies for working with youth in establishing a permanent connection with a caregiver and keep youth from running away from placements.

- Family and Community Permanency Strengths
 - *Relative/NREFM Placements*
 - Obtaining and maintaining relative placements was viewed as a priority. Immediate resources are provided to Relative/Non-Related Extended Family Members such as transportation and in-home supports.
 - *Contact with siblings*
 - When possible, great efforts were made to keep siblings within the same home. However, 2 social workers reported siblings taking out aggression on

each other and needing to be separated for their own safety.

Child Welfare Challenges

- Placement Stability (legal and physical) Challenges
 - *Foster parent retention*
 - Lack of caregiver experience, or inadequately trained caregivers, results in high risk foster placements. Caregivers are often unprepared for the behavioral challenges foster children have. This is despite efforts to inform caregivers of what to expect or to provide respite, training or other support to maintain the placements. Thus, some children and youth are moved into a new placement or experience a “yo-yo” back and forth from old placement to new placement.
 - *Timely reunification*
 - In some cases it was difficult to attain timely reunification because of multiple case transfers. This was noted as problematic because multiple transfers disrupts the flow of services provided to the family and was noted as delaying successful progress with the family completing all tasks in the case.
 - *Goodness of Fit Issues*
 - Decision for placements made on the basis of the availability of a bed rather than “goodness of fit” between child/youth and family was a concern. In these same cases when children were placed in a home due to the availability of a bed, they were soon removed to a new placement because of behavioral issues that the home could not effectively handle.
- Permanency Planning Challenges
 - *Lack of useful and effective strategies to engage parents and child/youth*
 - Lack of effective strategies being used (commonly stated the use of phone contact or talking)--no mention of other strategies were mentioned to explicitly involve either youth or their parents in case planning.
- Educational Permanency Challenges
 - *Youth and children with behavior problems experience more school moves*

- More services are needed to assist social workers in finding advocates for children who have behavioral issues, and more local placements are needed for youth so that they do not have to move to a new school.
- *Educational history not up to date or non existent in case file*
 - In using the case review files to examine educational permanency, there were some files that contained limited or no documentation related to the child's educational history. While the interviews provided this detailed information in most cases, the information was not explicitly documented in the case review file.
- Emotional Permanency Strengths
 - *Loss of belongings/lack of a consistent method*
 - There was no consistent practice for tracking children's belongings. Some children were given a bag or a bin, and one social worker encouraged foster parents to refrain from giving the children too much because it was difficult to ensure that their belongings would be safe and transferred if a child were moved.

SUMMARY OF PRACTICE – PROBATION

Peer Interview Teams

Probation Strengths and Promising Practices

- Permanency Planning Strengths
 - *Youth commonly involved in case planning*
 - Youth were commonly involved in placement decisions and asked for their thoughts and opinions.
- Emotional Permanency Strengths
 - *Probation Officers openness and positive attitude*
 - The Probation Officer attempted to maintain openness, support, and a positive attitude toward change with all of the minors and their families who were case reviewed. This made the PO feel more connected to youth and felt that the youth reached out to her to attain more support.
 - *Desire and efforts to learn more effective ways to maintain a life-long connection*

- As was similar to CWS reports, the PO wanted to learn strategies for working with youth in establishing a permanent connection with a caregiver and keep youth from running away from placements.

Probation Challenges

- Permanency Planning Challenges
 - *Difficult to involve youth's family in case planning*
 - Some parents were cited as being "resistant" to participating in the case planning. However, neither the case review files nor the interviews addressed why there was resistance.
- Emotional Permanency Challenges
 - *Difficult to maintain life-long connections, a place to belong for youth*
 - When youth were placed into the CWS system during their teen years, they were commonly placed in group homes where some reported they were victimized by peers or girls would run away to be with boyfriends.
 - Most of the youth PO cases resulted in aging out of the system and not having attained "a place to belong." While the PO made great strides in getting to the youth and advocating on his/her behalf, life-long placements are difficult to locate for youth.
- Family and Community Permanency Challenges:
 - *Transportation for family visits when children are placed out of county*
 - Family members must drive between 3-10 hours to visit their children when placed out of county. Such distance and time required to make these visits hampers the ability of family members to visit their children on a regular basis. This becomes especially problematic for youth when placed in group homes that are far away from their family members which causes visits to decrease dramatically or become non-existent (this was the case for two out of the four cases reviewed). Of the four cases reviewed, three contained issues surrounding the lack of monthly face-to-face parental contact with the PO. The impact of parent

motivation on the case outcome was significant wherein motivated and engaged parents were more likely to assist their youth in finding a stable placement and youth were less likely to be described as “acting out” or “challenging.”

SUMMARY OF PRACTICE – FOCUS GROUPS

Foster Parents Focus Group

Demographics: 7 female foster parents with an average of 2 foster children (range 0-7) residing in current foster placement. Meeting held at Head Start.

Strengths and Promising Practices

- *Permanency planning/Case planning:* All of the foster parents were familiar with the term “concurrent case planning” and Team Decision Making. While few participated in these types of meetings, those foster parents who did attend felt it was a beneficial, worthwhile, very informative and helpful.
- *Training are useful and informative concerning permanency/placement stability concerns/issues:* All foster parents felt that there were many training opportunities offered in their county, and their social workers did a good job of keeping them informed of these training.
- *Newly hired social workers supportive:* Most of the foster parents felt that social workers, despite having limited resources, tried their best to provide the most supportive environment for the children placed in their care. The “new” social workers appeared more enthusiastic about consistently communicating and supporting the foster parents.

Challenges

- *Demographic factors related to placement stability:* Placement stability was observed to be more difficult for adolescent girls and infants. One foster parent reported that the infant in his/her care had been placed in 4 different homes and had two different social workers. There was a consensus that infants commonly experienced multiple transfers and social workers that led to a break down in transferring important information about the child.
- *Goals of placement stability are not being met:* All of the foster parents reported that the children in their care had experienced more than 2 placements, and they felt that having children in 2 or

fewer placements was an unrealistic goal. They also stated that most children who come into their care are re-entering the system.

- *Breakdown in communication interferes with placement stability:* Some foster parents stated that they did not receive information pertaining to the child's/youth mental and/or behavioral health issues and not receiving this information led to them not being able to understand the child and provide a consistent home for the child. For some this led to the child being moved into another foster care placement.
- *Children/youth not adequately diagnosed:* Foster parents of teen foster youth stated that they felt it was a common issue for children to be placed on medications too soon (often as a result of the teen "acting out" behaviorally). They felt that ADD/ADHD is over diagnosed and that social workers and mental health providers need to consider other factors such as environmental changes and issues (e.g., PTSD).
- *Child Mental Health/Behavioral Health Assessments:* Children are often not referred by their social worker for assessments. Receiving home foster parents felt that they often advocate for assessments if they determine one to be necessary.

Training/Resource Suggestions

- *Increase implementation and use of TDM's to preserve placements/provide conflict mediation.* There was a consensus among the foster parents that they receive some form of conflict mediation support when children/youth request to leave because of "typical" conflict in the home. For example, one foster parent related that she wanted the youth in her care to help with some of the housework and that the youth could not be out with her boyfriend late at night. The youth did not like these rules and asked the social worker to move her to a new placement.

Probation Parent Focus Group

Demographics: interview consisted of 1 parent with a youth involved with probation.

Strengths and Promising Practices:

- *Supportive PO:* The youth's probation officer was viewed as being very helpful and sustained good communication throughout the time that the mother's child was moved and had run away from one of her placements.

- Group Home Counselors Good: The group home counselors were noted as being helpful and good for the youth.

Challenges

- Emotional Permanency: Parent had limited visits with her child, and when her child misbehaved, he/she was punished by not getting visits with her parent.
- Lack of relationship-based resources interventions: Parent stated that she sought support when her child was reunified in how to appropriately deal with her child's emotional and behavioral issues, but she did not feel supported and did not receive any referrals from probation or the police. Parent felt left in the dark concerning her child's challenges and any progress.
- Lack of consistency and difficulties sustaining educational permanency: When youth was placed out of county, her transcripts were not sent and youth did not regularly attend school.
- Placement too far way: Youth was placed in a group home that was far away and this kept the parent from visiting her child more frequently.

Birth Parent Focus Group

Demographics: consisted of a total of 11 parents, 4 of whom were couples, 6 females, 5 males. Children had been placed in foster care for an average of 5.5 months and most of these children were 5 years of age and younger. On average, birth parents had a total of 3 different social workers in the life of the current CWS case.

Strengths and Promising Practices

- Permanency planning/Case planning: Six of the parents had participated in a Team Decision Making meeting. They liked having the support of relatives and other agencies/community partners present at the TDM.
- Useful services meet permanency/placement stability goals: Three parents stated that receiving one-on-one parenting education during their supervised visits was the most helpful in learning about child development and effective parenting skills. They also felt that they learned how to better communicate and

connect with their children and found this service more useful and beneficial to their family than the parent classes.

Challenges

- Barriers/challenges to providing placement stability/permanency
 - Permanency Planning: Reunification was more successful when the family was actively involved in the case-planning process and when they felt they could voice their opinions concerning the appropriateness of services. Many times birth parents stated that they felt that the case-plan was not appropriate, and they were required to use services that were not applicable to their situation or they had duplicate services. Two parents stated that they had duplicate services which caused them to miss work and created more stress for them. Six parents stated that they attended 2 or more parenting classes that often gave them conflicting information and caused them to feel confused.
 - Case planning: Though the parents felt the TDMs were supportive, it was difficult to trust the process because the outcome of the meetings felt misleading or unclear. Two parents reported how they had a TDM, thought they understood what “needed to happen” to have their children come home, but the final report stated something different. None of the parents knew what “concurrent planning” was, but 6 stated that they knew their children could be placed for adoption if they did not successfully complete their case plan.

Court Focus Group

Demographics: consisted of a Judge and two attorneys who represented biological parents and children.

Strengths and Promising Practices

- Placement stability: Social workers are recognized for trying to keep siblings within the same home. The court/attorney’s beliefs are that placement changes are done in the best interest of the child.
- Providing services in efforts to maintain permanency: Social workers are recognized for attempting to provide families with the needed services to enable family reunification.

Challenges

- Placement Stability: Children seem to be moved because foster parents are not receiving appropriate supports to know how to effectively handle the children in their care who often have significant behavioral and mental health needs.
- Permanency Planning: There is concern that infants are commonly placed in pre-adoptive homes and rarely considers NREFM placements. This type of thinking is viewed as not supporting reunification efforts.
- Case planning/TDMs: At this time, the attorneys and court are not asked to participate in case planning or TDMs and/or they do not receive the final TDM reports. The attorneys think that it would be helpful for them to be included in case planning efforts and TDMs as they can be another support for the parents. Also, in some instances, biological parents were told that what was stated at a TDM would not be placed in their court report but then the information was included. The attorneys think that the biological parents should have legal counsel available at these meetings.

Supervisor Focus Group

Demographics: consisted of four supervisors. Supervisors ranged in the frequency of their meetings with staff from everyday, weekly, to twice a month.

Strengths and Promising Practices

- Placement stability: There are many new changes and Tehama is piloting many new strategies (e.g., Family to Family, TDMs); the CWS agency is working to improve services to families in order to improve placement stability and permanency.
- Collaboration between providers: Currently, there has been a shift to looking at relatives for initial placements rather than placing in receiving homes. They are also having IR and Court workers work together in finding placements, taking a team approach.
- Case planning: Though not used by all social workers, family strength and needs assessments are being implemented to assist with case planning, especially by the On-Going unit.

Challenges:

- Difficulty with establishing relative placements: While the CWS agency recognizes and identifies relative placements as important, such as implementing Family Finding, there is lack of sufficient finances to fund family searches.
- Implementing participatory case planning is a struggle: While participatory case planning is beginning to be adopted as a common practice, there is still uncertainty around how these case plans should be written, and some social workers feel its another task to complete that is not helping with the case. More training is needed for how to successfully implement participatory case planning strategies.
- Challenges with using SDM: While the SDM seem useful in theory, supervisors stated that the SDM is complicated. Some of the social workers are not trained to adequately use it or see the utility of using it, and some social workers view it as daunting and labor intensive.
- High case-loads: The stress level for child social workers is acknowledged as being high. Some social workers are also being given a high number of cases due to demands. One worker received 38 cases.

Foster Family Agency

Demographics: consisted of five social workers and the director. This FFA provides monthly training, and the Child Welfare workers provide supervision for all of the foster parents and children. A total of six different training are provided throughout the year to meet state regulations.

Strengths and Promising Practices

- Trying to attain a good match between social workers, foster parent, and child: FFA attempts to employ a “goodness-of-fit” approach to ensure that the social worker matches the needs and personalities of the foster family.
- Making easier transitions when social workers change: When transitions take place between an old and new social worker, the two social workers try to go to the child/youth’s home together and meet with the family. Introducing the new social worker this way was seen as helping with the transition.

Challenges

- Challenges with using Team Decision Making meetings: The FFA social workers are disappointed in the recent changes made to the TDM structure. When TDM was first implemented, they were a vehicle to introduce new foster parents to the foster child. Currently, TDMs are used before a decision has been made about placements, and there is clearly confusion as to the intent of the process. While the TDMs were recognized as being useful for bringing about effective brain storming, they often did not result in effective solutions. Also, there is rarely follow-up with these TDMs to ensure that tasks were completed or being re-evaluated
- Concerns with Non-Relative Extended Family Members (NREFM): Concerns with the lack of support for NREFM placements was stated as contributing to children experiencing multiple placements and being “put back into the system.” It was recommended to provide NREFM placements with support for at least the first 3-4 months.
- Need for every child/youth to receive a mental health assessment: Most children were viewed as not having received an assessment when they came to FFA for services. Children need mental health services for more than receiving diagnoses. They should also be referred for counseling for other issues such as attaining support for handling the grief process of leaving a family.
- Characteristics of the foster home: Some foster children were placed with similarly aged youth, and conflicts would arise around space, belongings and perceived favoritism by the foster parents. Additionally, at times, placement breakdowns resulted when a foster parent had a biological young child (under age of 3) and a high need foster child or when an adolescent was placed in a home with 5 or more other adolescents.

Educator Focus Group

Demographics: consisted of one educator who works with foster and homeless youth programs and the supervisor of Foster Youth Services, both of whom work for the Tehama County Office of Education.

Strengths and Promising Practices

- Good working relationship between PO and Department of Education: The Probation Office keeps the County Department

of Education well informed of placement changes and events/changes in the youth's life. The Drug and Alcohol counselor calls with updates that keep communication on-going, and all providers on the same page.

Challenges

- Issues with establishing educational permanency: Many youth in the county experience instability in schools, transferring to different schools, which leads to getting behind in credits and encountering difficulties in passing the exit exam.
- Lack of involvement with case planning: Educators would like to participate in case planning and be a part of the process of best meeting the child's needs. This is also believed to help in the area of communication were there is lack of consistent information relayed or the information is not very specific or informative.
- Difficulty with educational passports: The focus group participants discussed the challenge they have in acquiring access to a CWS/CMS computer in the Child Welfare Services office to assist in the process of maintaining education permanency for children and youth. **There has been miscommunication regarding this policy between CWS and the education partners. A clear and well-monitored system for getting educational information input into CWS/CMS is necessary and is currently being pursued.*

CROSS-GROUP COMPARISON ANALYSES CHILD WELFARE (INTERVIEWS AND FOCUS GROUPS)

Strengths and Promising Practices

- Educational Permanency Strengths
 - *Efforts made to honor the right of the child to stay in the same school*
 - Local placements when possible are given priority so children can stay in the same community and school. While not always possible, there was acknowledgement that keeping children, especially youth, in the same school was extremely important for educational stability.
- Permanency planning/Case planning: A reoccurring theme across the groups of participants was the noted benefit of using

participatory case planning practices, such as Team Decision Making. While greater improvement is needed in the implementation of these participatory case planning practices, those who did participate felt they were worthwhile, very informative and helpful.

Challenges

- **Barriers**

- A few groups stated that infants are placed in pre-adoptive homes and are rarely considered for NREFM placements. This can act as a barrier to supporting reunification efforts with biologically related caregivers.
- Foster parents, attorneys and educators related that they would like to be involved in participatory case planning approaches, such as TDMs, so that they can better serve and support their clients. Involving all the aforementioned groups, as deemed appropriate, may contribute to more effective stream-lined communication, thereby improving the services provided to the families.

- **Resource Issues**

- Across groups (e.g., child welfare, foster and biological caregivers, education providers) transportation was a noted service needed for the children/youth.
- Mental and behavioral health services was commonly related as a need in Tehama County. Across groups (not all) there was discussion regarding how children/youth receive medications, but there are few if any training for how to effectively work with these children/youth (e.g., lack of available relationship-based interventions).
- Addressing the characteristics of the foster home and effectively implementing “goodness of fit” practices in these placements is a needed resource.

- **Systemic/Policy Changes**

- Ensure that when cases are transferred, the existing social worker introduces the incoming social worker to child/youth, foster family, education personnel (as relevant)

- **Training Needs**
 - How to implement and use TDMs and SDMs appropriately and effectively. These practices appear to be recently implemented, and there are many questions as how to make them useful and meaningful and not another overwhelming task. This would make these practices more beneficial and relevant to foster caregivers and biological caregivers.
 - Not finding or having children/youth placed with relatives was commonly noted as an issue. One contributing factor mentioned in a few focus groups was the need for training to effectively implement Family Finding and the need to know how to fund family searches.
 - Concurrent planning development and implementation.
- **Areas Needing State Technical Assistance**
 - Educational Passports
 - TDM expansion and refinement of practices
 - Concurrent planning strategic development and training

CROSS-GROUP COMPARISON ANALYSES PROBATION (INTERVIEWS AND FOCUS GROUPS)

Strengths and Promising Practices

- *Good Support and Communication*: Probation officers were mentioned as being supportive of the youth in their case plans and for maintaining open communication. This consistent and open communication was viewed as contributing to better support for youth.

Challenges

- **Barriers**
 - *Difficulty to involve families in case planning*: Both the parent who had a youth involved in probation and the probation officer mentioned that the parent and/or youth was not involved in the case planning. It appears that more support and assistance is needed for involving parents and

youth in the case planning process in order to contribute to placement stability.

- **Resource Issues**
 - *Lack of transportation*: Consistent and reliable transportation is needed to better support biological caregivers in visiting youth, especially youth those commonly mentioned as being moved far away into group homes.
- **Systemic/Policy Changes**
 - No across-group themes emerged.
- **Training Needs**
 - Placement engagement and support for adolescent girls.
- **Areas Needing State Technical Assistance**
 - Across groups, there were no stated areas needing state technical assistance.

Overall Recommendations for Child Welfare (see Table I)

- **Overall Recommendations**
 - Visit youth more often to assist in developing adequate relationships. Additionally, avoid visits at the school because visits at this type of locations can be embarrassing for youth.
 - When cases are transferred, have the social worker and/or probation worker meet the family with previous worker so that families do not feel that they are being passed around and to enhance more information sharing between workers (the previous and the new).
 - If child is residing in a receiving home, have foster family come meet the child and engage in an enjoyable activity.
 - Provide parents/family with transportation assistance to visit youth in juvenile hall or group homes.
 - Offer conflict mediation services to foster parents and the youth in their care so that when there is an argument, youth will not call their social worker and asked to be moved.
 - Implement concurrent case planning.
 - Clarify the purpose and procedures of the Team Decision Making process with all child welfare partners; including both the primary goals of the process and strategies for follow-through on identified activities.

- Revisit the participants who are included in the Team Decision Making process, including those who receive information regarding TDM goals and/or outcomes.
- Standardize assessment protocol and tool(s) for all children/youth who enter the foster care system.

- **Identified Training Needs**

- Some social workers stated that they did not know how to accurately conduct TDM or SDM. It appears that more formal training is needed to better inform these practices.
- Ways to effectively involve parents: provide training that provide more of a “hands-on” approach allowing social workers to help parents overcome resistance and non-compliance with case plan activities.
- Provide training for making effective case transfers between social workers and other important service providers so that case management activities are not delayed.
- Offer Family Search and Engagement workshops to appropriately train social workers in easily implementing strategies to locate family members.
- Provide social workers with information and training on evidence based substance abuse treatment models.

Overall Recommendations for Probation (see Table I)

- **Overall Recommendations**

- Youth who return home also need “post-reunification” family services. More resources and support are needed for youth and families transitioning home.
- Most of the youth PO cases resulted in aging out of the system and not having attained “a place to belong.” While the PO made great strides in getting to the youth and advocating on his/her behalf, life-long placements are difficult to locate for youth. More resources to assist probation in finding long term placements are needed.

- **Identified Training Needs**

- Learning strategies for working with adolescent girls with the goal of reducing AWOLs (absent without leave or permission/run aways).

TABLE I.

TEHAMA COUNTY PLACEMENT STABILITY AND PERMANENCY PLANNING OVERALL SUMMARY OF THE PQCR (SEPTEMBER 2008) (NOTE: ALL ACTION PLANS ARE LISTED IN THE FUTURE DIRECTIONS AND NEXT STEPS SECTION)		
General Areas Related to Placement Stability	Specific Factors Related to Placement Stability/Permanency Planning	Outcome Data Emerging from Focus Groups and Interviews
Child/Family Characteristics		
	Demographics	<i>Findings:</i> For both PO and CWS, adolescents were more likely to experience multiple moves and moves out of county. Additionally, review of CWS revealed that Infants were identified as being quickly moved into adoption placements with some parties stating that more time was needed for birth parents to work on getting their children back into their care.
	Children's Behavioral Issues and Concerns	<i>Findings:</i> Foster parents, social workers and probation related that receiving helpful information to work with children's behavioral issues was a needed resource. As was common in the literature, not knowing effective strategies or support for managing behavioral issues was commonly cited as a reason for children being moved to another placement. <ul style="list-style-type: none"> ❖ <i>Action Plan:</i> Search for and provide training for how to effectively work with these children/youth (e.g., lack of available relationship-based interventions) A common issue related by Probation was the difficulty in keeping youth from going AWOL. <ul style="list-style-type: none"> ❖ <i>Action Plan:</i> Learning strategies for working with adolescent girls with the goal of reducing AWOLs (absent without leave or permission/run aways).

	Child/Youth's History of Abuse and Neglect	<i>Findings:</i> For both PO and CWS, in examining the case files, neglect was cited as the most common reason for children/youth's re-entering the foster care system.
Service Factors (Quantity, Quality and Type of Services)		
	Type of Placement (Relative/NREFM Placements)	<i>Findings:</i> For both PO and CWS, placements were commonly made on the basis of a bed rather than the "goodness-of-fit" between characteristics in the home and the temperament of the child/youth. This lack of fit often resulted in placement moves. For CWS, efforts to use Family Finding and use NREFM placements were difficult. Thus, placing children/youth in NREFM was not a commonly cited practice. ❖ <i>Action Plan:</i> Offer Family Search and Engagement workshops to appropriately train social workers in easily implementing strategies to locate family members.
	Foster Parent Training/Supports	<i>Findings:</i> A common reason for children being moved was due to their behavioral issues. Foster parents related that they need to learn more effective strategies and ways to work with these children, especially due to issues of PTSD and emotional trauma. ❖ <i>Action Plan:</i> Offer conflict mediation services to foster parents and the youth in their care so that when there is an argument, youth will not call their social worker and asked to be moved.
	Education Stability	<i>Findings:</i> CWS works to ensure that children and youth do not move schools. The Education Passport information was not being updated, and there was a break down in communication between educators and CWS. There was good communication between POs and educators. For the PO. it was difficult to keep youth within the same school due to having to be moved out of county into an available group home. <i>Action Plan:</i> Receive technical training for updating Education Passports.
	Contact with	<i>Findings:</i> CWS worked to ensure that visitation with siblings and placement with

	Siblings/Extended Family Members	<p>siblings were maintained. Difficulties arose when siblings were hurting another sibling and then had to be separated. For the PO, it was difficult to maintain consistent contact with siblings and extended family members.</p> <p>❖ <i>Action Plan:</i> More support is needed.</p>
	Contact/Maintaining Connections with Biological Parents	<p><i>Findings:</i> For CWS, maintaining visits with birth parents was a priority as well as trying to maintain consistency for the child. Probation related that for youth it was difficult to maintain consistent visitation between biological family and youth, and often this was due to youth being placed in homes far away.</p> <p>❖ <i>Action Plan:</i> Find ways to provide families with transportation assistance to maintain visits.</p>
	Children’s Belongings	<p><i>Findings:</i> For both PO and CWS there was no identified consistent practice to ensure that children’s belongings were secure and transferred with the child if moved.</p> <p>❖ <i>Action Plan:</i> To identify and implement practices that ensure the safety of children’s belongings.</p>
	Conducting Child Assessments and Implementing Services	<p><i>Findings:</i> While CWS is having child assessments conducted, it was not common practice. There is not a standard or formal process for assessing children/youth. Some social workers completed intakes and considered this an assessment. More advocates, on the part of CWS, are needed who can appropriately refer children for <i>formal</i> child mental health/behavioral health assessments. Also environmental considerations need to be included in attaining services for children and their families.</p>
Agency Factors/Practices		
	Case Documentation	<p><i>Findings:</i> The PQCR revealed for both CWS and PO that there were some discrepancies between information provided in the case files and information given during the interviews. Additionally, for CWS, the education passport was incomplete in CMS/CWS.</p> <p>❖ <i>Action Plan:</i> Implement an updated protocol to ensure that education formats</p>

		are updated. The Placement Social Worker will be in charge of updating this educational information
	Social Work Changes	<p><i>Findings:</i> In reviewing the case files, it was common for children/youth to experience a case worker change which resulted in the information in the case files not getting transferred and/or updated. Additionally, a practice of introducing a new social worker to a family was commonly implemented.</p> <ul style="list-style-type: none"> ❖ <i>Action Plan:</i> Provide training for making effective case transfers between social workers and other important service providers so that case management activities are not delayed. Additionally, when cases are transferred, the social worker will meet the family with previous worker so that families do not feel that they are being passed around and to enhance more information sharing between workers (the previous and the new).
	Concurrent Case Planning Activities	<p><i>Findings:</i> CWS was not using concurrent planning practices.</p> <ul style="list-style-type: none"> ❖ <i>Action Plan:</i> To implement concurrent case planning and provide concurrent planning strategic development and training.
	Use of Participatory Case Planning/TDMs	<p><i>Findings:</i> TDMs were stated as becoming a common practice and useful for placement decisions and case planning. More efforts are needed to involve families (birth parents, extended family and children/youth) in the process. Also, when appropriate, other parties such as attorneys would like to be involved.</p> <ul style="list-style-type: none"> ❖ <i>Action Plan:</i> Some social workers stated that they did not know how to accurately conduct TDM or SDM. It appears that more formal training is needed to better inform these practices. Additionally, ways to effectively involve parents will be a focus by engaging in training that provides more of a “hands-on” approach allowing social workers to help parents overcome resistance and non-compliance with case plan activities.

	<p>Use of Risks/Strengths Assessments (SDM)</p>	<p><i>Findings:</i> As was similar to the use of TDMs, family strength and needs assessments (SDMs) were being implemented to assist with case planning, especially by the On-Going unit. However, some of the social workers did not feel trained to adequately use SDMs or see the utility of using it, and some social workers view it as daunting and labor intensive.</p> <p>❖ <i>Action Plan:</i> To engage in formal training to better inform the practice for using SDMs and facilitate the ease of attaining and using the information.</p>
	<p>Case Planning with family/youth</p>	<p><i>Findings:</i> For both PO and CWS, it was difficult to involve birth parents in the process of case planning.</p> <p>❖ <i>Action Plan:</i> Ways to effectively involve parents: provide training that provides more of a “hands-on” approach allowing social workers to help parents overcome resistance and non-compliance with case plan activities.</p>

NEXT STEPS AND FUTURE DIRECTIONS

Child Welfare

Tehama County's PQCR results suggest several key strategies for CWS to prioritize:

- 1) Begin to implement concurrent case planning practices.
- 2) Provide enhanced training and support to foster parent and NREFM caregivers in Tehama County. Training in the area of providing support and effective strategies for managing behavioral issues was commonly cited as a needed resource in the community. Providing such relationship-based training may result in placement stability for children as this was the most commonly cited reason for children being moved into another placement.
- 3) Provide training in using case planning strategies such as TDM and SDM to child social workers so that they are implemented effectively and are viewed as helpful in attaining permanency and placement stability for children and youth.
- 4) Work with the Department of Education and PO in ensuring that a child/youth establishes educational permanency. Involve all parties and collaborate to find the best and most effective services in meeting the child's needs.
- 5) Write a protocol for policies and procedures to monitor effective participatory case planning practices.
- 6) Implement an updated protocol to ensure that education passports/information is updated.
- 7) Improve and facilitate more consistent information with the Department of Education.
- 8) Receive training for how to effectively engage children/youth in participatory case planning activities and ILPs.
- 9) Work to ensure that there is "goodness-of-fit" with all placements. This is in reference to the "fit" between foster parents and the child (e.g., temperament and personality, training or years of experience of the foster parent) and the age ranges of the children living in the home.
- 10) Improve and receive training for how to better document information in the case files. This involves ways to code and facilitating the ease in updating the case files.
- 11) Learn effective methods for ensuring that children's belongings are secured and transferred if children are moved.

- 12) Ensure that the foster parent liaison checks in with foster parents one week after the initial placement.

Probation

PQCR results also provide direction for the probation unit:

- 1) Find transportation for youth's parents so that they can maintain consistency in visitations and maintain the youth's sense of being "wanted."
- 2) Provide more resources and support for youth and families transitioning home. Youth who return home also need "post-reunification" family services.
- 3) Learn strategies for working with adolescent girls with the goal of reducing AWOLs (absent without leave or permission/runaways).

FINAL THOUGHTS: THE PQCR PROCESS

Tehama County Social Workers, Supervisors and Program Managers found this PQCR to be a valuable experience. The PQCR week was well-organized and consisted of great follow-through by UC Davis and CDSS. The week included a group orientation meeting which involved all CWS staff and some partners in the PQCR experience. It also included a wrap-up session on the last day, which also included all CWS staff and some partners. This helpful collaboration and organization helped in providing staff with a greater understanding of the process, plus it fostered some buy-in, which collectively contributed to greater commitment in implementing suggested improvements and changes following the final report. Additionally, all staff felt that they benefited and learned from receiving up to date information on Placement Stability. This provided staff with a baseline of information about practices and factors that impact placement stability.

The case reviews and interviews were well-organized and all identified social workers participated fully in their interviews. The case reviews were valuable as they added depth to the interviews and provided useful information related to case management, and about how to re-organize and clean up files. The Department of Social Services in Tehama County cooperated by clearing all meeting rooms in the Department for the PQCR, which facilitated smooth transition for case reviews and interviews

The interview panels were made up of participants from other counties and other agencies, which provided a rich experience in terms of inter-county sharing. This information, procedures and forms enriched both the county and those who assisted in the process.

Lessons learned mostly came from the focus groups. It was learned that, particularly for birth parents and youth, greater planning, preparation, and recruitment, is needed.

Overall, this PQCR was a useful and beneficial process.

Appendix A – Case Review Form

Name of Reviewer _____

Date: _____

PLACEMENT STABILITY

Child Face Sheet – Placement Timeline

Date of Review	
Child's Name	
Case Number	
Date of Birth	
Gender	
Primary Language	
Race/Ethnicity	
Date of Current Placement	
Caretaker	
Placement Address	
Parents' Residence Address	
Date of Initial Placement	
Type of Removal	
Current Legal Status	
Dispositional Hearing Date	
Review Hearing Dates	
Permanency Hearing Date	
Initial Permanency Goal	
Current Permanency Goal	

Tehama County PQCR Child Welfare and Probation Case Review Form

Concurrent Plan and date set	
Case Plan Dates	
Last Face-to-Face contact	
School location	

PLACEMENT STABILITY

1. At the time of initial removal, which of the following were completed?
 - a) _____ Safety assessment
 - b) _____ Risk assessment
 - c) _____ Family Strengths and Needs Assessment (FSNA)

If yes, how did the FSNA inform the placement decision?

If no, what were the barriers to completing a safety and risk assessment including a FSNA?

Is a Family Strengths and Needs Assessment being completed throughout the life of the case? YES___ NO___

2. How soon after initial removal, was a family meeting held? (These may include Team Decision Making, Family Group Conferencing or other types of family decision meetings.)

If no meeting, what were the barriers to scheduling/holding a meeting?

- a) What was the placement decision?

- b) Was the child/youth involved in the family meeting?
Yes_____ No_____

- c) Was the child/youth placed with relatives? Siblings?
Yes_____ No _____

Tehama County PQCR Child Welfare and Probation Case Review Form

- d) What strategies were used to engage the family in the case planning process?

To engage the child/youth?

- e) What specific follow-up has occurred related to the family team meeting decision?

- f) As part of the family meeting, were the children's needs discussed as related to making a supportive placement?

PLACEMENT HISTORY

1. No. of placements _____

Type of Placement	Begin	End date	Reason for placement termination

2. Were subsequent family meetings held to address placement disruptions/changes? YES___ NO___ NA___

If yes, what was the outcome?

If no, what were the barriers to scheduling/holding a meeting?

3. At the time of initial removal, which of the following were assessed?

	Formal Assessment	Completed by	How informed placement	Assessment Barriers
Education				
Medical				
Behavioral/Mental Health				

When was a concurrent permanent plan in place for the child/youth? _____

- a) Was the child/youth involved in this concurrent planning process? YES___
NO___

If yes, how did his or her involvement affect the placement success?

- b) Was the family involved in the concurrent planning process?
YES___ NO___

If yes, how did their involvement affect the child/youth's placement success?

If no, what were the barriers to involving the child/youth and family?

5. Were specific placement services identified and offered to the caregiver to support the placement? These services may include transportation, respite care and foster-family counseling. YES___ NO___

If yes, what services were offered?

If no, what were the barriers to either identifying or offering these services?

- b) Was specific training and support given to the caregiver(s) to help them understand and handle the behavior problems of the child/youth in their care?
YES___ NO___ NA___

If yes:

- What specific training/support was provided?

- How was the support beneficial in maintaining the placement?

If no, what were the barriers to providing this support/training?

6. Were efforts made to maintain the child/youth's important connections (neighborhood, community, extended family/NREF, faith, language, siblings, tribe, school, etc.)?

- ___ Were siblings placed together or visits arranged?
___ Were children placed in close proximity to parent(s) to maintain visits?
___ If appropriate, was the tribe notified timely and supported?

___ Did the child/youth remain in same school?
 ___ Other: _____

If not, what were the barriers to maintaining these connections?

7. Education: Please indicate the number of schools the child has attended and reason for change on following page.

School	Dates attended	Reason for change

a) Is there an IEP? YES ___ NO___

If yes, when was the last update

Are identified needs currently being met? YES ___ NO ___
 If No, explain:

b) If no IEP, are educational needs identified in Question 3 being met?

YES ___ NO___

4. What family finding efforts were made?

a) When did family finding occur?

b) Are efforts ongoing? YES___ NO___

5. How many primary social workers have been assigned to this child/youth's case since the date of initial referral? _____

6. Are case worker visits with the mother, father and child/youth focused on case planning, service delivery and goal attainment?

	Case Planning	Service Delivery	Goal Attainment
Child/Youth			
Mother			

Tehama County PQCR Child Welfare and Probation Case Review Form

Father			
--------	--	--	--

a) Was a visitation plan developed with

Mother YES ___ NO ___

Father YES ___ NO ___

Siblings YES ___ NO ___

Other YES ___ NO ___ (Who?: _____)

7. Was the case plan goal

Developed with the family? YES ___ NO ___

Implemented? YES ___ NO ___

Achieved? YES ___ NO ___

Updated with the family? YES ___ NO ___

DATES: _____

Appendix B – Social Worker Interview Tool

OUTCOMES & ACCOUNTABILITY SYSTEM
PEER QUALITY CASE REVIEW
Tehama
Social Worker interview Tool

INTRODUCTIONS

- ❖ Briefly identify team members and their title/affiliation. Explain each interviewer's role (time keeper, recorder and lead facilitator).

Purpose

- ❖ Explain general process
 - ✓ No right or wrong responses

EXPERIENCE AND BACKGROUND

How long have you been a social worker? What area do you work in (IR, Court/ongoing). What area did you work in at the time you carried the case, what area now; is it the same?

How many cases are on your current case load?

How long have you been assigned to this case? (If not still assigned to this case, how long were you assigned to this case?)

CURRENT PRACTICES RELATED TO PLACEMENT STABILITY

1. *Who was involved in the initial placement decision in this case?*
2. *How did you include the child and family when making placement decisions? How often did you include them and at what points throughout the case?*

RELATIVE PLACEMENT

3. *At what point, and how often, in the case, were relatives or non-related extended family members considered for the child's placement? (Please add who was considered, their relationship to child and your search process)*
 - a. *If no, why not?*
4. *Were there any barriers that impeded early placement, in this case, with relatives/NREFM? (Policies, practices, location, supervisors, etc)*
5. *If early relative/NREFM placement did occur, what were the contributing factors?*
6. *How did you learn of the relative/ NREFM's willingness for placement?*
7. *Were there any difficulties in connecting or maintaining contact with the relative/NREFM?*

FOSTER FAMILY

8. *What criteria did you use to determine the most appropriate placement setting for this child? How do you match kids to foster families?*
9. *Tell us a little about the composition of the foster family(s) this child has had.*
 - a. *Were there other foster children in the home – tell us about them (ages, gender, etc)?*
 - b. *Did the parents have birth children of their own, especially those that live at home?*

IF YES, to either A or B,

- c. Were you aware of any conflicts between the foster child and any other children (foster or bio and please distinguish)?*

- d. What was/is the quality of the relationships between the foster children in the home?*

- e. How do you/did you work with both the foster child and his/her foster family on issues that occurred between foster children?*

- f. If the foster child is a girl, did she engage in or was targeted by any relational aggression (bullying), and how did you respond?*

- g. If the foster child is a boy, did he engage in or was targeted by any bullying on their part, and how did you respond?*

10. What support do/did you provide in ensuring this child's belongings remain intact, especially during placement changes?

11. Did this child ever leave a placement without permission? Do you have any clarification as to why this happened?

12. How was/is the foster child's behavior while living in the foster homes?

- a. Has it changed for different foster parents? If so, why and how have you worked with foster parents differently?*

- b. What is/was your role in working with the child's behavior?*

- c. *How do/did you support either the foster child or the foster parent in these situations? (this situation)*

CHILD ASSESSMENT AND SERVICES

13. *How did you assess and then treat either mental or behavioral health issues for children?*

- a. *What do you do to prepare foster parents for a child if you know them to have either behavioral or mental health issues?*
- b. *What support do you provide to foster parents for such cases?*
- c. *How did you intervene with the foster child/family when they had behavioral/mental health issues that needed support?*

14. *As a result of being in foster care, did this child suffer other disruptions:*

- a. *Change in neighborhood*
- b. *Separation from siblings*
- c. *Contact with birth parents*
- d. *Change in school*
 - i. *Did the child have an existing IEP? Talk about the delivery of appropriate services.*
 - ii. *How do you advocate for this child's educational needs?*
 - iii. *Who has assisted with the advocacy of this child's educational need, such as the foster care liaison/advocate?*

FOSTER PARENT TRAINING

15. *How does the agency prepare, train and support foster parents?*

- a. *What kind of support do/did you provide (in this case)? And how often?*
- b. *Did you provide transportation assistance?*
- c. *Respite care?*
- d. *Foster family counseling?*

SOCIAL WORKERS

16. *How many social workers has this child had?*

- a. *How did you transition into becoming this child's case worker?*
- b. *How were you and the child introduced? Who introduced you?*
- c. *How have you formed a relationship with the child?*
- d. *How often do/or did you see the child?*
- e. *Where do/or did you conduct most of your in-person visits with the child (their home, school etc)?*
- f. *What kinds of things do/or did you talk about with the child?*
- g. *How did you maintain contact with service providers and assess the quality of services provided, such as monitoring services to assess if they continue to meet the child's needs.*
- h. *How did the services help to support the child's placement?*

CONCURRENT CASE PLANNING

17. *When did you start concurrent planning in this case?*

- a. *How did it work?*
- b. *How did you accomplish it?*
- c. *When was the first concurrent placement you made with this child?*

TDMs

18. *Did you conduct a TDM in this case? If no, why not?*

- a. *How did you prepare for the TDM in this case?*
- b. *How did you prepare families/children for the TDM?*
- c. *How did the children participate in the TDM?*
- d. *Where (did) the TDM occur?*
- e. *How were decisions made during the TDM documented and what kind of follow-up was there?*

SDM

19. *How and when did you assess family risk and safety in this case? What are the critical decision points, and when did you use them?*

CONNECTIONS WITH PARENTS

20. *How have you preserved (or how did you, if you no longer are on this case or if case is closed) connections between the child and his/her parents? Extended family?*

- a. *How often does/did this child visit his/her parents?*

CLOSING

21. *Do you have any questions for us?*

22. *Anything else you would like to share?*

Appendix C – Probation Officer Interview Tool

OUTCOMES & ACCOUNTABILITY SYSTEM
PEER QUALITY CASE REVIEW
Tehama
Probation Officer interview Tool

INTRODUCTIONS

- ❖ Briefly identify team members and their title/affiliation. Explain each interviewer's role (time keeper, recorder and lead facilitator).

Purpose

- ❖ Explain general process
 - ✓ No right or wrong responses

EXPERIENCE AND BACKGROUND

How long have you been a probation officer?

How many cases are on your current case load?

How long have you been assigned to this case? (If not still assigned to this case, how long were you assigned to this case?)

CURRENT PRACTICES RELATED TO PLACEMENT STABILITY

- 1. Who was involved in the initial placement decision in this case?*
- 2. How did you include the child and family when making placement decisions?
How often did you include them and at points throughout the case?*

RELATIVE PLACEMENT

- 3. At what point, and how often, in the case, were relatives or non-related extended family members considered for the child's placement? (Please add who was considered, their relationship to child and your search process)*
 - a. If no, why not?*

4. *Were there any barriers that impeded early placement, in this case, with relatives/NREFM? (Policies, practices, location, supervisors, etc)*
5. *If early relative/NREFM placement did occur, what were the contributing factors?*
6. *How did you learn of the relative/ NREFM's willingness for placement?*
7. *Were there any difficulties in connecting or maintaining contact with the relative/NREFM?*
8. *Was this youth placed out of state? And if so, how did you utilize ICPC regulations?*
9. *How did the out-of-state placement affect the services this child/family was able to receive?*

PLACEMENT

10. *What criteria did you use to determine the most appropriate placement setting for this child?*
11. *How do you match kids to group homes?*
12. *Tell us a little about the composition of the group homes/foster family(s) this child has had:*
 - a. *How many other youth were in the home – tell us about them (ages, gender etc)?*
 - b. *Were you aware of any conflicts between this youth and any other youth in the group home?*
 - c. *How do you work with both the youth and the group home on issues that occurred between group home youth?*
 - d. *If the youth is a girl, did she engage in or was targeted by any relational aggression (bullying), and how did you respond?*

- e. *If the youth is a boy, did he engage in or was targeted by any bullying on their part and how did you respond?*

13. *What support do you provide in ensuring this child's belongings remain intact, especially during placement changes?*

14. *Did this child ever leave a placement without permission?
If yes: do you have any clarification as to why this happened?*

15. *How was/is the youth's behavior while living in the group homes?*

- a. *Has it varied for different group homes? If so, why and how have you worked with group homes differently?*
- b. *What is your role in working with the child's behavior?*
- c. *How do you support either the youth or the group home in these situations?*

CHILD ASSESSMENT AND SERVICES

16. *How do you assess and then treat either mental or behavioral health issues for youth?*

- a. *What do you do to prepare group homes for a child if you know them to have either behavioral or mental health issues?*
- b. *What support do you provide to group homes/foster homes for such cases?*
- c. *How did you intervene with the youth when they had behavioral/mental health issues that needed support?*

17. *After coming into placement,*

- a. *Did the child have an existing IEP? Talk about the delivery of appropriate services.*

- i. *How do you advocate for this child's educational needs?*

ii. Who has assisted with the advocacy of this child's educational needs. such as the foster care liaison/advocate?

b. What contact did the youth have with his/her siblings:

c. What contact did the youth have with his/her birth parents:

PROBATION OFFICERS

18. How many probation officers has this child had?

a. How did you transition into becoming this child's PO?

b. How were you and the youth introduced? Who introduced you?

c. How have you formed a relationship with the child?

d. How often do you see the child?

e. What kinds of things do you talk about with the child?

CONCURRENT CASE PLANNING

19. When did you start concurrent planning in this case?

a. How did it work?

b. How did you accomplish it?

c. When was the first concurrent placement you made with this child?

CASE PLANNING

20. How did you involve the youth and his/her family in case planning decisions? How often and when?

ASSESSMENT

21. How did you assess family risk and safety in this case? How and When?

CONNECTIONS WITH PARENTS

*22. How do you preserve connections between the child and his/her parents?
Extended family?*

a. How often does this child visit his/her parents?

CLOSING

23. Do you have any questions for us? Anything else you would like to share?
Click here to enter text.

Appendix D – Court Focus Group Questions

**CALIFORNIA CHILD WELFARE
OUTCOMES & ACCOUNTABILITY SYSTEM
PEER QUALITY CASE REVIEW
TEHAMA COUNTY
September 29, 2008
Placement Stability**

COURT FOCUS GROUP

Date:

Facilitator:

- ❖ Briefly explain purpose of the interview (PQCR)
 - ✓ Anonymity
 - ✓ There are **No** right or wrong responses
 - ✓ Qualitative information about practice
 - ✓ Concentrate responses on the focus topic: **Placement Stability**
- ❖ Introduction of focus group participants

1. What is Tehama CWS doing well in caring for the children of our community?
2. In what areas could CWS improve?
3. Specifically regarding placement stability, do you detect any inherent problems or see any pattern in our systems of care for children in Tehama that might be contributing to instability? (Family demographics, CPS services, community service provision, the Court system, other public service agencies such as schools, mental health, public health, etc.)
4. Can you identify anything CWS could do to increase stability in placements?
6. How do you see the court system affecting, both positively and negatively, placement stability?
7. What is the court's role in supporting placements with relative or non-extended family members? How does the court support placements with siblings?
8. Please explain the role of the courts in Team Decision Making?
9. What is the court's role in supporting concurrent placements in Tehama County?
10. What is feedback from the courts perspective on the literature review research and how Tehama is aligning to the research and areas for improvement?

Appendix E – Youth Focus Group Questions

**CALIFORNIA CHILD WELFARE
OUTCOMES & ACCOUNTABILITY SYSTEM
PEER QUALITY CASE REVIEW
TEHAMA COUNTY
September 29, 2008
Placement Stability**

YOUTH FOCUS GROUP

We're here to talk about placements you've had while you've been in foster care.

1. Introductions, names and how long you've been in foster care.
2. Explain placement stability and ask how many placements they have had.
3. Let's talk about some of your placements, where have you been placed (with relatives)?
4. Did your foster families have other children in the home?
5. How did you get along with all the members of the family?
6. How did your foster parents deal with the kids when you all fought or got into disagreements?
7. Did you feel like your belongings were safe in your foster home?
8. How did your social worker help you solve conflicts that happened in the foster home?
9. How many social workers have you had?
10. How do you form a relationship with your social workers?
11. Where do your social workers visit you?
12. Do you always see the same social worker? How often do you see them? What makes a good visit?
13. When you change social workers, how do you find out?
14. Since being in foster care, have you had to change your school? Do you live in a different neighborhood? Where are your siblings? How often do you see them?
15. Were you all involved in helping to write your case plan? Have you ever heard of a TDM, and if so, have you been in one?
16. In general, what are some of the things your Social Worker has done that helped you?

Tehama County PQCR CWS Youth Focus Group Tool

17. What would you say are some of the things a Social Worker could do to help kids ?
18. Who are the other people in your life that have helped you other than family (friends, teachers, mentors, other adults)?
19. Do you have contact with your family?
 - ❖ If YES, has this helped you?
 - ❖ If NO, would contact help you ?

Appendix F – Biological Parent (CWS) Focus Group Questions

**CALIFORNIA CHILD WELFARE
OUTCOMES & ACCOUNTABILITY SYSTEM
PEER QUALITY CASE REVIEW
TEHAMA COUNTY
September 29, 2008
Placement Stability**

BIOLOGICAL PARENT FOCUS GROUP

Explain placement stability and ask how many placements they have had. Introductions, names and how long you've had children in foster care.

Placements

1. Let's talk about some of the places where your children were placed (were they with relatives)?
2. How many placements have your children had?
3. Were you able to influence where your children were placed?

Case Planning and Services

4. How has the social worker involved you in case planning? How did s/he identify services for you and your family?
5. What services were you offered as part of your case plan? What kinds of services were you offered and were they helpful?

Visits

6. How were visits arranged between you and your children? Where were the visits? How did you prepare for the visits? Were there expectations about the visit from the social worker? Did the social workers communicate with you about their expectations for visits?
7. Let's talk about your connections with your children. Tell me how you were involved with their lives when they were in foster care? Did the social worker help you maintain a connection with them? How did you know about how well they were doing in school? How were you kept informed of their activities, progress (therapy, school)?

Foster Parent Relationship

8. Did you have a relationship/communication with the foster parents?

9. Were you encouraged or able to provide the foster parent with important information about your children?
10. How were you able to inform their future foster parents about their favorite foods, activities, etc.?

Foster Family Dynamics

11. Did the foster families have other children in the home?
12. How did your children get along with all the members of the family?
13. Were your children's belongings safe in their foster home?
14. How did your social worker help your children solve conflicts that happened in the foster home?

Social Worker Relationships

15. How many social workers have you had? Your children?
16. When you changed social workers, how do you find out?
17. Is there an impact to your case when you change social workers?
18. Since being in foster care, have your children had to change schools? Live in a different neighborhood? Where are their siblings? If they weren't placed together, did they see each other?

TDMs

19. Have you attended any TDMs? Please talk about how you were involved, were you prepared by the social worker for the TDM? What was the outcome of the TDM?
20. Did your child have behavioral issues and if so, did you receive any support/training on how to work with your child's needs?

Concurrent Plan

21. Was there a concurrent plan for your children? How was this communicated to you?

Appendix G – Biological Parent (Probation) Focus Group Tool

**CALIFORNIA CHILD WELFARE
OUTCOMES & ACCOUNTABILITY SYSTEM
PEER QUALITY CASE REVIEW
TEHAMA COUNTY
September 29, 2008
Placement Stability**

BIOLOGICAL PARENT (Probation) FOCUS GROUP

Explain placement stability and ask how many placements they have had.

1. Introductions, names and how long you've had children in probation.
2. Let's talk about some of the placements your children have had – where were they, for how long, etc.?
3. At the beginning, when they entered the system, did you understand the court orders for placement?
4. Were you able to influence where your children were placed?
5. How has the probation officer involved you in case planning?
6. How did the PO identify services for you and your family?
7. What services were you offered as part of your case plan? What kinds of services were you offered and were they helpful?
8. How was your child's behavior while in the group home/placement? How did the probation officer help your child solve conflicts that happened in the foster home?
9. How many probation officers have you had, and how were services affected by these changes? How were you introduced to your new probation officer?
10. Let's talk about your connections with your children. Tell me how you were involved with their lives when they were in placement? Did the PO help you maintain a connection with them? How did you know about how well they were doing in school? How were you kept informed of their activities, progress (therapy, school)?
11. How were visits arranged between you and your children? Where were the visits? How did you prepare for the visits?
12. Does/did your child have behavioral issues, and if so, have you received any support/training about how to work with your child's needs when they return home?

Appendix H – Foster Parents Focus Group Questions

**CALIFORNIA CHILD WELFARE
OUTCOMES & ACCOUNTABILITY SYSTEM
FOSTER PARENT FOCUS GROUP**

Explain placement stability and ask how many placements they have had.

1. Introductions, names and how long you've had foster care children.
2. Let's talk about foster parent training and support here in Tehama County. What kind of training did you have? On-going training? Support? What is the protocol for respite care? Transportation assistance?
3. When children are placed in your home, how are you prepared? What kinds of information are you provided? How are you informed about their favorite foods, activities , etc.?
4. Have you had children with behavioral or mental health issues? If so, how were you prepared? How did the social worker support you or the children in working through issues?
5. Were the children assessed for behavioral or mental health issues? What kinds of services were they provided?
6. How many foster children do you have in the home?
7. Do you have biological children of your own? How old are they?
8. How do all of your foster children/biological get along with all the members of the family?
9. How do you support the children when they argue or when conflicts arise?
10. Where do the children place their belongings in their room? How do you help the foster child keep them safe?
11. How did the social worker help you and the foster children solve conflicts that happened in your foster home?
12. Did you have a relationship/communication with the biological parents?
13. Let's talk about visits between the foster children and their parents. Where were they? Did the social worker help prepare the child for these visits? Help debrief?
14. How were you kept informed of their activities, progress (therapy, school)?
- 15.
16. How were you involved with the child's school progress? Who was the child's educational advocate?

Tehama County PQCR Foster Parents Focus Group Tool

17. Have you attended any TDMs? Please talk about how you were involved; were you prepared by the social worker for the TDM? What was the outcome of the TDM?
18. Was there a concurrent plan for the foster child? How was this communicated to you?

Appendix I – CWS Supervisors Focus Group Questions

**CALIFORNIA CHILD WELFARE
OUTCOMES & ACCOUNTABILITY SYSTEM
PEER QUALITY CASE REVIEW
TEHAMA COUNTY
September 29, 2008
Placement Stability**

SUPERVISORS FOCUS GROUP

All of this is couched under the premise that the role of the supervisor is to support social workers in the following arenas and/or to enforce policies/work with issues of accountability, supervise outcomes, etc.

Relative/NREFM Placement

1. How do you support relative/NREFM placement in Tehama County? What policies exist around relative/NREFM placements or finding such placements? How do you ensure policies are followed? What is the current trend in Tehama in regard to family finding, and what is your role in supporting family finding tools?

Foster Parent Training/Support

2. What kind of training do foster parents receive? What is your role? How do you align training to everyday challenges that you see with social workers? How is the training aligned with the needs of the parents?
3. How do you communicate with FFAs regarding training issues?
4. What is your role in preparing foster parents for new foster children? As a supervisor, how do you impact foster parent training.
5. What kinds of information about the kids are provided? How are they informed about favorite foods, activities, etc.?

Foster Family Characteristics

6. What is your role in matching children with foster families? How do you support social workers in matching children?
7. Let's talk about the composition of foster families – do they have multiple foster children? Biological children? How are these things taken into consideration? What impacts do you see?
8. How do you support children when they have conflicts? Foster parents?
9. Where do the children place their belongings in their room? How do you help the foster child keep them safe?

Use of SDM

10. How is SDM implemented? How is it used to inform case planning and placement decisions (FSN)? How do you assure implementation?

Other Disruptions

11. We know that often kids suffer disruptions in other areas of their life, such as changes in neighborhoods and schools. How does this impact stability and what is your role? How do you support the educational needs of children?

Contact with siblings/extended family

12. What is the policy/culture of maintaining contact with siblings/extended family? What is your role?

Child Assessment and Services

13. How are children assessed for behavioral or mental health issues? What kinds of services are they provided? What is your role in these assessments and follow-through?
14. How are foster parents trained to work with children that have behavioral and mental health issues?

Social Worker Changes

15. How do you see social worker turnover impacting placement stability? How do you support social worker transitions?

Concurrent Case Planning

16. How and when is concurrent case planning implemented, and what is your role in overseeing implementation? How does concurrent case planning affect placement stability?

TDMs

17. In the use of TDM/Participatory Case Planning, what is your role in TDMs? Do you attend, etc.? How do you work with social workers to engage families/youth in TDMs? How do you ensure social workers are utilizing information from TDMs?

Case Planning with Family/Youth

18. How are families/youth engaged in case planning, and what is your role? What is the organizational culture of case planning, and how do you work with social workers to ensure it is happening? What policies have been developed?