What is CCR?

• A piece of legislation?
  ✓ Senate Bill 1013 (2012) mandated CDSS lead a stakeholder process to achieve “congregate care reform.” → CDSS and CWDA led a broad stakeholder workgroup over 3 years which culminated in the “Continuum of Care Reform” report → AB 403 (2015) and AB 1997 (2016)

• A response to a lawsuit?
  ✓ Katie A v. Bonta → settlement agreement Child and Family Teams for many children, and created specific Medi-Cal mental health services that mirror wrap-around type services to avoid need for congregate care.

• A comprehensive framework to develop “a Continuum of Care?”
  ✓ Established a new vision for congregate care with statewide implementation of key strategies and data driven continuous improvement
CCR Vision

• Each child feels loved by permanent and nurturing families with strong life-long community connections

• Children and families feel heard and supported by system partners

• Caseworkers, agencies, and child-serving partners feel heard and supported by well-developed partnerships

• A continuum of individualized and coordinated services and supports exists that are available wherever the child lives

• Congregate care is short-term, high quality, and intensive—designed to stabilize and transition back home

• Accountability; transparency; continuous quality improvement
Key Strategies

• Child and Family Teams ensure child, youth and family’s experience and preferences are reflected in assessment, placement, and service planning and that members of the team are supported

• Child-specific recruitment of foster homes and intensive family finding

• Using wrap-around principles to build on strengths and proactively address the individualized needs of every child and family

• Transforming congregate care into intensive short-term therapeutic programs focused on the development and implementation of effective stabilization and permanency-oriented transition plans

• Using data and transparency to drive continuous improvement

• Intensive multi-agency collaboration that supports healthy system relationships
Healthy relationship characteristics

- Active Listening
- Empathy
- Vulnerability
- Strength-based thinking
- Assuming best intentions
- Sharing power
- Flexibility in problem solving
- Starting from “how can we” instead of “why we can’t”
- Allowing history to be transcended
- Having the courage to focus on how you can change, rather than the changes we want from the other

Policies and Procedures i.e. “the bureaucracy” must support healthy relationships
Foster Youth By the Numbers

By Responsible Agency

- Probation
  - 2019: 2,508
  - 2017: 3,697

- Child Welfare
  - 2019: 59,152
  - 2017: 60,579

By Ethnicity

- Black: 2.0%
- White: 22.5%
- Latino: 51.0%
- Asian/PI: 2.2%
- Native American: 1.4%
- Other/Missing: 20.9%

Gender & Age

- Male: 50.4%
- Female: 49.6%

- Age
  - 0 - 2: 23.4%
  - 3 - 10: 40.8%
  - 11 - 17: 35.8%

Data Source: CWS/CMS 2018 Quarter 4 Extract.
RFA: By the Numbers

Child Welfare Relative and Non-Relative Homes

- Relatives: 15,216
- Non Relatives: 10,510
- Total: 25,726

Probation Youth Relative and Non-Relative Homes

- Relatives: 62
- Non Relatives: 37
- Total: 99

Data Source: CWS/CMS 2018 Quarter 4 Extract. PIT placements 1/1/19
RFA: Approval Times

Data Source: CWS/CMS 2018 Quarter 4 Extract. PIT placements 1/1/19
WHY CHILD & FAMILY TEAMS?

- Families are their own experts and achieve success if given the supports to do so.
- Practice is changing.
- Improved outcomes for children and families.
- Promotes collaboration, communication and shared decisions.
- Services are most effective when delivered in the context of a single, integrated plan.
STRTPs: Key Components

- Interagency Placement Committees
- Referral and Intake
- Needs and Services Plans
- Core Services
- Trauma-Informed Care
- Aftercare planning
- Family finding and engagement
STRTP Implementation

- New licensing standards (ILS v3) and review tool
- Inter-divisional approval process
- Technical assistance
Round 5 Group Home Extensions - (ACIN) I-36-19

- Attachment A
- County Capacity Plan Update
- Facility Closure Plan
- CCRPerformance@dss.ca.gov
Group Home & STRTP Placements

Data Source: CWS/CMS 2018 Quarter 4 Extract. PIT placements 1/1/19
Data Source: CWS/CMS 2018 Quarter 4 Extract. PIT placements 1/1/19
Mental Health Services

STRTPs with Mental Health Program Approval (MHPA)

- MHPA: 44.1%
- No MHPA: 55.9%

Mental Health Components in STRTPs

- All 3: 63
- Medi-Cal: 78
- MH Contract: 90
- MHAP: 108
- Licensed: 254

Data Source: CCR STRTP Transition Tracker as of June 10, 2019
Looking Ahead

• State-County-Provider Partnerships
• Supporting implementation of STRTP ILS v3
• Future ILS updates
  ➢ FFPSA Coordination
• Child Specific Recruitment
• Intensive Family Finding
• Specialized Permanency Services
• RFA technical assistance and reduction of backlog
• Timely and Effective CFTs
• Trauma-Informed models
• Supports for caregivers
• Addressing Gaps in the Continuum