

# California Citizen Review Panel 2022-2023 Annual Report



# California Citizen Review Panel

2022-2023 Annual Report to the California Department of Social Services

SUBMITTED TO THE OFFICE OF CHILD ABUSE PREVENTION, CALIFORNIA DEPARTMENT OF SOCIAL SERVICES, SEPTEMER 30, 2023



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# **Glossary of Terms**

AB	Assembly Bill						
ACES	Adverse Child Experiences						
ACIN	All County Information Notice						
ACL	All County Letter						
CANS	Child and Adolescent Needs and Strengths						
CAPC	Child Abuse Prevention Council						
CASA	Court Appointed Special Advocates						
CBCAP	Community-Based Child Abuse Prevention						
CDPH	California Department of Public Health						
CDRT	Child Death Review Team						
CDSS	California Department of Social Services						
CFPIC	Child and Family Policy Institute of California						
CFS	Children and Family Services						
CFSR	Child and Family Services Review						
CFT	Child and Family Teams						
Cl	Critical Incidents						
СРМ	Child Welfare Core Practice Model						
CRP	Citizen Review Panel						
CSAC	California Student Aid Commission						
CWC	Child Welfare Council						
CWDA	County Welfare Directors Association of California						
DDS	Department of Developmental Services						
DHCS	Department of Health Care Services						
DOJ	Department of Justice						
EBP	Evidence Based Practice						
FE/FI	Father Engagement / Father Involvement						
FFA	Foster Family Agencies						

FFPSA	The Family First Prevention Services Act						
FRC	Family Resource Centers						
ICPM	Integrated Core Practice Model						
ICWA	Indian Child Welfare Act						
I/DD	Intellectual and Developmental Disabilities						
ILP	Independent Living Program						
MOU	Memorandum of Understanding						
OCAP	Office of Child Abuse Prevention						
OVP	Office of Violence Prevention						
PIP	Performance Improvement Plan						
RC	Regional Center						
RDA	RDA Consulting. SPC						
STRTP	Short-Term Residential Treatment Programs						
UBI	Universal Basic Income						



## Introduction

In 2017, three statewide panels were enlisted to focus on different aspects of the child welfare system in California. Prior to 2017, California's Citizen Review Panels (CRP) consisted of two county-level CRPs and one subcommittee of the Child Welfare Council. Moving to the statewide committee structure allowed for broader statewide membership and perspectives, increased access to state government agencies, and strengthened focus on continuous quality improvement in child welfare systems. The three statewide committees are organized on the continuum of child and family well-being and are charged with the following:

**The Prevention of Child Abuse and Neglect CRP** makes recommendations to strengthen child abuse prevention efforts in California.

**The Children and Family Services CRP** makes recommendations to better serve children and families involved in the child welfare system.

**The Critical Incidents CRP** makes recommendations to help reduce the incidence of maltreatment-related child fatalities and near-fatalities.

Each panel has developed its own topic-specific recommendations, which are highlighted in the following sections, with thorough descriptions of the research and thought processes that led to those recommendations. A full list of recommendations is included as Appendix A.

## Facilitation Approach

Since October 2020, the Child and Family Policy Institute of California (CFPIC), under a contract with the California Department of Social Services' Office of Child Abuse Prevention (CDSS/OCAP), has coordinated and facilitated California's three CRPs. For this contract, CFPIC elected to partner with RDA Consulting, SPC (RDA), as the organization has extensive capacity for data collection and analysis to further benefit CRP efforts. CFPIC has built on its well-established relationship with CDSS and its extensive knowledge of California's Human Services System to help the CRPs evaluate programs and develop recommendations that are relevant to their federal mandate. CFPIC's work with the CRPs is guided by the California Child Welfare Core Practice Model (CPM) and Integrated Core Practice Model (ICPM), which are informed by the key elements and behaviors of engagement, inquiry and exploration, teaming, advocacy, and accountability.

Each of the CRPs meets monthly in a virtual session to discuss relevant issues, develop priorities, and formulate recommendations. CRPs also form smaller task groups to meet and conduct other activities (such as background research or literature review) between regular meetings to ensure that the panels make progress in evaluating programs and developing recommendations throughout the year.

The facilitation team hosts an annual All CRP meeting that brings together panelists across all three CRPs along with partners from CDSS and the California Department of Public Health (CDPH) Office of Violence Prevention (OVP) to foster a spirit of collaboration among the entities. The All CRP meeting includes time for panel and department presentations and information sharing, as well as time for reflection and planning for next steps by each of the panels. This year's All CRP meeting, held on April 20, 2023, was planned in partnership with the CDSS Office of Child Abuse Prevention with a focus on the Department's responses to the prior year's CRP recommendations. Representatives from several Bureaus in the Child and Family Services Division attended the meeting and provided insights into the reasoning behind the responses to the recommendations and their plans for implementing specific aspects of the recommendations.

Engaging across panels and with CDSS and other state partners continues to be a cornerstone of the strategy to coordinate the efforts of California's CRPs. More information on each panel's work, findings and recommendations is included in the pages that follow.

## Stronger Relationships: Overview of 2022-2023 Work

California's three CRPs continued their efforts to understand the state's child welfare system and develop recommendations for the improvement of that system (as detailed in each panel's section of the report, below). During the current year, the three CRPs have greatly benefited from efforts by the CDSS Office of Child Abuse Prevention (OCAP) to strengthen the relationship between the Department and the CRPs.

Shortly after the 2021-2022 Annual Report was submitted to the CDSS, OCAP staff reached out to the CRP facilitation team to initiate discussions that would help the Department understand the reasoning behind the recommendations and to explore possible responses. The OCAP staff then engaged representatives from throughout the Children and Family Services Division to help them develop informed responses to the recommendations. As a result of these efforts, panel members reflected that the Department's responses to the CRP recommendations were much more informed and relevant to the panels' intentions than they had been in previous years.

The OCAP staff has also worked closely with the panels to respond to the following overall recommendations from last year's report:

- 1. CDSS and partner agencies formally engage the CRPs as thought partners with lived experience, professional experience, and other informed perspectives who are available to assist CDSS in continuous quality improvement.
- 2. CDSS work with the CRPs to develop an All-County Information Notice that describes the CRP process and encourages counties to mirror the work of the state's CRPs by establishing county-level CRPs, building on currently existing structures in the county when possible.

In response to these recommendations, OCAP staff frequently attended meetings with each panel over the past year to provide updates on Department activities and plans and seek input, advice, and valuable perspectives from panel members. OCAP staff also worked to recruit panelists from each of the three CRPs interested in working on the development of an All County Information Notice (ACIN) for developing county-level CRPs. Planning meetings are currently underway with the goal of developing an ACIN for issuance during the 2023-2024 fiscal year.

In addition to this overall work, CDSS staff (and those from partner state agencies) were invited to, and attended, several panel meetings throughout the year. The participation of state staff contributed significantly to the research of each panel as it worked to understand its chosen topic and to develop realistic recommendations for child welfare system improvement.

## **Timeline of CRP 2022-2023 Activities**

Activity	2022			2023								
	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Coordination												
CRP Monthly Meetings												
All-CRP Meeting												
Recommendations: Research and Development												
Development, refinement of work plans												
Research, Formulation, Tool Development												
Recommendations Development												
CRP Members Review Annual Report												
National CRP Committee Engagement/Activities												
2024 National CRP Conference Planning												



# Prevention of Child Abuse and Neglect Citizen Review Panel

### Overview of This Year's Work

This year, the Prevention CRP had three areas of work. The panel's primary focus was learning more about individuals with intellectual and developmental disabilities (I/DD) and how they are impacted by maltreatment and interaction with the child welfare system. The panel also engaged with two state-level advisory groups: the Peer Partner Backbone Committee and the Mandated Reporting to Community Supporting (MRCS) Task Force.

#### Individuals with Intellectual and Developmental Disabilities

The Prevention CRP spent substantial time this year learning more about a population that is not often mentioned in child welfare discussions of disproportionality and disparate outcomes – individuals with I/DD. Panel members found that the combination of low understanding of this population's challenges and insufficient community-based services and supports needed to help families who are struggling with intellectual and developmental disabilities leads to disproportionate involvement with the child welfare

system (especially for parents with I/DD). The panel learned more about what the data demonstrates about this population in California and how that information could help inform recommendations to strengthen the primary and secondary prevention resources available to serve this community. Additionally, the Prevention CRP developed recommendations to help reduce disparate outcomes for families with I/DD who have child welfare involvement.

To learn more about how to improve outcomes and better support the I/DD population, the panel sought input from those with expertise in this area at the local, state, and national levels. Locally, Family Resource Centers (FRCs) are key in the primary and secondary prevention network of resources and supports for California's communities. The panel has long championed the need for FRCs and other community-based organizations to be accessible in every community and to have adequate funding and resources needed to serve all families seeking their assistance. Panelist Yvette Baptiste is the Executive Director of the Eastern Los Angeles Family Resource Center and is a true champion for the families her organization serves. She has continued to elevate the needs of the I/DD population in her work with the panel – especially for parenting individuals who have intellectual and developmental disabilities. The Eastern Los Angeles FRC is one of 47 FRCs in the Family Resources Centers Network of California that focuses on improving the lives of families and children with disabilities. This network has an FRC that serves each California County – for LA County, there are 10 FRCs. These FRCs receive funding from the California Department of Developmental Services to support disabled children and parents of children in Early Start (prenatal to 3), providing parent-to-parent support, training, and information. Some FRCs in this network have other funding and serve individuals with I/DD across their lifespan.

In California, the Department of Developmental Services (DDS) is the state-level entity responsible for overseeing the coordination and delivery of services to Californians with I/DD. Their vision (from their website): People with intellectual and developmental disabilities experience respect for their culture and language preferences, their choices, beliefs, values, needs, and goals, from a person-centered service system made up of a network of community agencies that provide high quality, outcome-based and equitable services. They work to accomplish their mission through 21 Regional Centers (RCs) across California that conduct assessments to determine eligibility for services and – if determined eligible – case manage and coordinate service plans. RCs are also responsible for developing resources with community providers, monitoring those services, and providing communication and outreach for their regions.

The panel facilitators connected with Christine Bagley, DDS System of Care Specialist and Leslie Morrison, DDS Division Chief for the Office of Quality Assurance and Risk Management, who were able to provide more insight into the data on the I/DD population in California. They shared a wealth of information about the I/DD population served by the statewide RC network in California and the array of services and supports eligible individuals can receive. They provided insight on data regarding the number of children served by both RCs and child welfare but shared that there is no systematic data tracking for I/DD parents with child welfare involvement. Further work is needed to make sure parents with I/DD who are also involved with the child welfare system have access to services and supports available through RC-contracted community providers. Ms. Bagley further shared about ongoing work to advance services and coordination for this shared population through the implementation efforts of AB 2083, including advancing how to address barriers and bridge competencies within and between systems to better serve youth with unmet complex needs. Ms. Morrison provided insight into challenges related to identifying and reporting abuse for people with I/DD and noted there is a higher rate of victimization for this population. She shared her concern that many of these reports are not investigated

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by child welfare services and may also not be addressed by law enforcement; further, first responders are often ill-prepared to work with victims with I/DD. Both experts shared a desire to see systems strengthen collaboration to improve outcomes for individuals with I/DD.

At the national level, the panel reviewed University of Minnesota research on the I/DD population and its intersection with the child welfare system. We were able to meet with Dr. Traci LaLiberte, Senior Executive Director at the Center for Advanced Studies in Child Welfare at the University of Minnesota's School of Social Work, who has spent most of her career conducting research related to the needs of individuals with I/DD and their interactions with systems. Dr. LaLiberte shared studies demonstrating some alarming trends. First, parents with I/DD have disproportionate levels of contact with the child welfare system, often due to bias regarding their ability to effectively parent their children. Additionally, mothers with I/DD are twice as likely to have their children removed and placed in out-of-home care compared to mothers without disabilities, and mothers with I/DD experience a higher rate of termination of parental rights compared to non-disabled parents. She also noted that social workers receive little if any training about I/DD which contributes to bias and leaves social workers ill-equipped to provide appropriate accommodations for people with I/DD. Another challenge is that child welfare workers may not identify parents they are working with as having a disability at all. Parents may not self-identify for fear of what will happen – and that same fear may prevent them from seeking the help they need. Dr. LaLiberte shared her thoughts about ways to improve the outcomes for parents with I/DD, including a better understanding and normalization of the prevalence of I/DD in society, training social workers and other systems staff to better understand the population and better ways to engage and work with them, more expansive community-based services and supports, and engaging with individuals with I/DD with lived experience in the system to ask the question: "what would have been helpful for you?"

#### State-level Advisory Group: Peer Partner Backbone Committee

In the California Department of Social Service (CDSS) response to the 2022 CRP annual report, the panel learned that there are many ongoing advisory groups that the department engages as thought partners in various programs, policies, and initiatives it oversees. The panel expressed interest in learning more about how CDSS works with these groups, especially the groups composed of community members and those with lived expertise. Danielle Mole-Gabri, a manager with the Family Centered Practice Unit in the Children and Family Services Division of CDSS, joined the June 2023 Prevention CRP meeting and presented on the Peer Partner Backbone Committee, a newer effort that allows units within CDSS to connect to individuals with lived expertise in a variety of ways. CDSS engages with the Peer Partner Backbone Committee at their regular meetings; additionally, CDSS can make a "call to action" to solicit feedback and/or connect with a lived expert who is best able to respond to a specific need outside the regular meetings. Ms. Gabri shared with the panel that they are working with UC Davis to ensure that Peer Partner Backbone Committee members feel supported and prepared to participate in these consultative efforts, and they are currently exploring more creative ways to compensate these experts as well as provide training/certification programs that support further skill development.

## State-level Advisory Group: Mandated Reporting to Community Supporting (MRCS) Task Force

The Prevention CRP was very pleased to see its recommendations from last year's report regarding mandated reporting embraced and acted upon over this last year. After the Child Welfare Council adopted a set of recommendations at its March 2023 meeting that included the Prevention CRPs

recommendation to form a state-level workgroup and five associated subcommittees to identify how California can move from mandated reporting to community supporting, work began in earnest to plan, recruit, and select a diverse group of representatives to serve on the MRCS Task Force. MRCS Task Force membership was announced on August 29, 2023. Two members of the Prevention CRP will serve on the MRCS Task Force: Dana Blackwell is a co-chair and Shane Harris will serve as a representative for the Faith-Based Community. As of the writing of this report, membership in the five subcommittees of the MRCS Task Force has yet to be announced.

## Findings from the Panel's Work

Findings on the I/DD population gleaned from data and insights of national, state, and local experts are as follows:

- Of the 407,000 Californians receiving services through RCs, 240,000 are children ages 0-21, with 10,800 of those children identified as also being served by child welfare services.
- Through the System of Care efforts mandated under AB 2083, there is a multi-year plan to increase the capacity of RCs to be able to serve more children in child welfare.
- To be eligible for RC services, a person must have a disability that begins before their 18th birthday that is expected to continue indefinitely and present a substantial disability. Qualifying conditions include intellectual disability, cerebral palsy, epilepsy, autism, and other disabling conditions as defined in the Welfare and Institutions Code. It is recognized that there are many individuals with I/DD who do not meet the eligibility criteria for these services.
- While the 47 FRCs in the Family Resources Centers Network of California have resources to focus on the I/DD population, most FRCs in California do not have funding or programs that specifically focus on supporting people with I/DD.
- Data on the number of California parents with I/DD who have active child welfare system involvement is not available.
- When families have child welfare involvement, there is currently no system for identifying whether they have needs related to I/DD and connecting with local RCs to ensure coordination of services and supports for them.
- National data reveals that people with disabilities are 4-10 times more likely to be abused and/or victimized, and people with cognitive disabilities experience the highest level of risk.
- A challenge for intervention in the maltreatment of people with I/DD is that if the alleged perpetrator is not a family member or caregiver with whom the child resides, child welfare agencies are unable to investigate the abuse and must cross-report to law enforcement.
- California like every other state has NO requirement that child welfare staff receive any training about people with I/DD, their challenges, and effective ways of supporting them, despite their prevalence in the CWS system.

### Recommendations

- 1. Build upon the required Interagency Leadership Teams prescribed under AB2083 by providing clear guidance to emphasize the need for County Prevention Planning teams to forge proactive partnerships with their local Regional Centers and other key resource agencies such as FRCs and other CBOs in service of the I/DD population.
- 2. Add information related to the bias in reporting of parents with intellectual and developmental disabilities to the upcoming updates being made to the current state-level Mandated Reporter

- Training, which provides information to understand bias and disproportionality in reporting of families of color and families in poverty.
- 3. Actively partner with the Department of Developmental Services regarding the 2023-24 Service Access and Equity Grants to learn more about how this demonstration project can inform both AB2083 Systems of Care as well as Families First Prevention Services/Comprehensive Prevention Planning about the I/DD population across California. Encourage a focus on consumers with child welfare involvement and systems issues that increase disparate treatment of individuals with intellectual and developmental disabilities, as well as ways to expand the number of FRCs able to serve this population.
- 4. Conduct a review of the training curriculum provided to child welfare staff to understand if/how they are informed about the I/DD population. Recommend updates to required training to educate child welfare staff on understanding this population and ways they can better identify, engage, assist, and support this population to prevent their entry into the child welfare system whenever possible.
- 5. Explore data collection procedures concerning families confronting I/DD challenges that come under the purview of child welfare services, encompassing both reported cases and investigations. This endeavor should lead to the identification of areas needing improvement. Subsequently, CDSS should offer recommendations for refinements aimed at fostering more accurate and insightful data regarding the interaction between these families and the child welfare system in California.
- 6. Share information with counties (via webinar, trainings, ACINs) regarding state level efforts to engage those with lived expertise, and share best practices and lessons learned from these efforts that could help inform local engagement strategies. Additionally, CDSS should establish measures for successful engagement of lived expertise in Families First Prevention Services planning implementation and evaluation for counties and provide technical assistance and training to meet the goals of these critical prevention efforts.

## Additional Areas of Exploration in 2023-2024

The panel intends to further explore the following topics in the next convening year:

- Follow the work of the 2023-2024 Service Access and Equity Grant recipients and their efforts to design and reinforce strategies that achieve and strengthen community-based services for people with I/DD and their families.
- As the work of the Mandated Reporting to Community Supporting Task Force commences, the CRP will follow its progress and provide feedback to the members of the Task Force (and its subcommittees) as requested.
- Continue to be a thought partner with CDSS on ways to leverage resources at the state and local level to enhance community-level and lived expertise perspectives.
- Focus panel efforts on the services and supports provided to California's vulnerable families through Family Resource Centers and what additional investment in this work might be needed to further strengthen this valuable primary and secondary prevention network.



# Children and Family Services Citizen Review Panel

### Overview of This Year's Work

The CFS CRP met monthly throughout fiscal year 2022-2023. The panel retained most of the members from the previous year and elected to continue with the 13 returning members that included former foster youth, birth parents with experience in the foster system, relative caregivers, current and former resource parents, an adoptive parent, a representative from a Tribe, and professionals serving within the child welfare system.

The panel began by identifying key topics for exploration. The panel selected two new topics and agreed to continue work on the Parent Capacity Building topic that began the previous fiscal year. The topics prioritized for this year were:

- Father Engagement/Father Involvement
- Independent Living Skills Programs
- Parent Capacity Building

Panel members formed subcommittees based on interest and expertise and the three subcommittees were each facilitated and supported by CFPIC and RDA. The subcommittees met regularly in addition to the monthly panel meetings and each monthly panel meeting included breakout time for

subcommittees to meet followed by a large group report out at the end of each meeting; in some meetings, time was held for full group discussion when subcommittees desired input from other panel members.

## Findings from the Panel's Work

Findings will be discussed in the three subcommittee sections below.

#### Father Engagement/Father Involvement (FE/FI) Subcommittee

The members of this subcommittee are: Deutron Kebebew, Dorothy Lewis, Melissa Stamps, Manny Arroyo, Alice Langton-Sloan, and Caitlin Radigan. It was facilitated by Danna Fabella of CFPIC with support from Christy Spees of RDA.

The FE/FI subcommittee convened to address the problem identified in the 2016 California System Improvement Plan and in the lived experience of subcommittee members that fathers are not always engaged by the child welfare social worker and at times are not even aware of child welfare involvement. This results in fathers being left out of key case activities such as child and family teaming and case plan development. Furthermore, when fathers are engaged and referred for services, those services are often not "father friendly" as they are generic or tailored to mothers. This lack of engagement and lack of effective services for fathers reflects a biased perception of fathers held by the child welfare system and it leads to missed opportunities to strengthen not just parental capacity among fathers, but also father/child relationships and relationships with other paternal relatives.

The panel recognizes that CDSS has identified FE/FI activities as a priority area for practice improvement and has supported that with mandatory training, including:

- CDSS requires "Engagement Training" and Father Engagement training qualifies as the annual training mandate for social workers supported by ACL 20-72 Mandatory Continuing Training; ACL 21-129 Special practice training based on ICPM practice behaviors; ACL 23-36 Engagement training required FY 23/24
- Training modules and other supports provided to social workers:
  - How to Engage Fathers
  - o Bias and Barriers for Social Workers
  - o A continuation of the Working with Fathers in Child Welfare course
  - An upcoming Father Engagement Technical Assistance Webinar

Despite this focus on FE/FI Activities in training, implementation of service improvements has been scattered and confusing. Activities are driven by different Bureaus across CDSS without a clear understanding of how the strategies fit together and what CDSS hopes to achieve through the different activities:

- CDSS funded 5 counties to work on FE/FI strategies; however, lessons learned from these grants do not appear to have been made available as a model or best practice for other counties.
- California did not meet the federal standard for FE/FI in the last CFSR and FE/FI was identified as an area needing improvement. According to the 2016 CFSR:

- In 45% of applicable cases, the agency made concerted efforts to assess and address the needs of mothers but made that same effort for fathers in only 37% of applicable cases.
- In 42% of applicable cases, the agency made concerted efforts to have quality caseworker visits with mothers but made that same effort for fathers in only 32% applicable cases.
- There are tools and best practices available to support practice improvement in this area, including programs that specifically focus on strengthening the father's role in parenting, guiding principles for creating a Father Friendly agency, and assessment tools for counties to use to assess their father engagement practice, but these tools are not promoted or widely used.

It is essential that CDSS streamline and focus FE/FI efforts at the state level by creating a comprehensive theory of change and logic model. This will facilitate the alignment of various FE/FI activities and provide a clear understanding of how these efforts contribute to short-term and long-term goals. By establishing a well-defined framework, California can effectively evaluate the impact of its FE/FI initiatives and maintain a clear focus for ongoing work in this area.

The FE/FI subcommittee sees opportunity in the investment already made in 5 counties through Father Engagement Grants and recommends that CDSS extend successful strategies and practices to all counties in the state. Promoting successful approaches will foster consistency and help address the current disparities between counties in terms of FE/FI outcomes.

California counties need tools to assess their successes and areas for growth in FE/FI and promote best practices for improvement at the local level. The FE/FI subcommittee recommends that CDSS provide support for counties to use the **National Fatherhood Initiative's Father Friendly Check Up** Assessment Tool and assistance to create specific county strategies to improve the county's FE/FI outcomes including (but not limited to):

- Technical Assistance and Evaluation Support Allocate resources for technical assistance to support deployment of the FE/FI Assessment Tools and the development of specific strategies at the county level. This investment will ensure that counties receive the necessary guidance and feedback to refine and optimize their FE/FI initiatives.
- FE/FI capacity building among professional staff Invest in capacity building programs (beyond training) to equip social workers, service providers, and relevant stakeholders with the necessary skills and knowledge to effectively engage fathers in various family support services.

  Strengthening the capacity of professionals will improve the quality and impact of FE/FI efforts and improve outcomes for children and youth who are at risk or who are known to the child welfare system.
- Fund Additional Grants to Implement the Fatherhood Program in Additional Counties Expand
  the reach of FE/FI programs and initiatives by funding grants to implement these programs in
  additional counties. Funding will enable counties to establish effective fatherhood programs,
  thus promoting positive outcomes for fathers and families throughout California.

#### FE/FI Subcommittee Recommendations

These recommendations underscore the importance of not only strategic planning and knowledge sharing, but also investing financial resources in multiple tiers of support. These recommended actions will allow California to bolster its commitment to FE/FI, creating a more inclusive and supportive environment for fathers and families statewide.

- 1. Develop a comprehensive FE/FI theory of change and logic model.
- 2. Use lessons learned from the Father Engagement Grants to disseminate best practices to all counties in the state.
- 3. Support counties in the use of the Father Friendly Check Up Assessment Tool and the creation of specific county strategies to improve the county's FE/FI outcomes by investing financially in the following priority areas:
  - 3.1. Technical support and evaluation of FE/FI
  - 3.2. FE/FI capacity building for professional staff
  - 3.3. Funding additional grants to support implementing the Fatherhood program in additional counties

#### **Building Parental Capacity Subcommittee**

The members of this subcommittee are: Lori Clarke, Ann Wrixon, Emily Bahne, Deutron Kebebew, and Marisa Mora. It was facilitated by Andrea Sobrado of CFPIC with support from Christy Spees of RDA.

The Building Parental Capacity Subcommittee identified a need for state-level guidance to help counties create and implement locally relevant strategies to strengthen parental protective factors and thereby build parental capacity to safely parent children and reduce reliance on the child welfare system. CDSS must support county child welfare agencies to improve engagement and identify quality parent training and services that build parental protective factors (particularly social connections, networks, and concrete supports). The work must be informed by feedback from parents, caregivers and others with lived experience and must be built on promising practices that are supported by evidence. The panel can support practice improvement and better outcomes for families by formally engaging with CDSS and partner agencies as thought partners with lived experience, professional experience, and other informed perspectives to assist CDSS in its continuous quality improvement.

The subcommittee found that there is insufficient guidance and support from the state to the counties to identify and implement relevant, evidence-based services that build parental capacity to allow parents to be successful without intervention from the child welfare system. The subcommittee is invested in partnering with the state to support a process of inquiry and technical assistance to identify strategies and provide implementation support. With facilitation from a third party, compensated CFS CRP members can meet with CDSS to advise and assist with gathering information via listening sessions or focus groups to inform practice change. Compensated panel members can work with CDSS and the third party to ensure that the questions are designed to gather ideas from other parents and caregivers about what services, supports, and approaches are working, or are the most helpful, related to building capacity. Evidence-based practices, culturally relevant practices, and expertise from panel members and their networks can ensure that focus group questions are grounded in research and are relevant to current lived experience with the child welfare systems in California counties. Most

importantly, panel member collaborators can also ensure that the panel's hypothesis about the importance of the protective factors (particularly social connections, networks, and concrete supports) is well tested through the questions and conversation prompts that are developed and utilized in the focus groups.

Following information gathering and analysis of findings, CDSS can rely on panel members to inform proposed guidance to be distributed to the counties via All County Information Notice (ACIN). By leveraging the lived expertise of the CRP members, CDSS can engage in equitable processes to identify and implement parental capacity building strategies that support child welfare system transformation. Furthermore, by employing the CRP (or all three CRPs) as a formal advisory body to the Children and Family Services Division (CFSD) CDSS will model effective cross-sector partnership (and co-creation, co-design) at the statewide level and drive improved partnership at the local level.

#### **Building Parental Capacity Subcommittee Recommendations**

- Contract with a third-party partner to conduct listening sessions or focus groups with multiple
  counties next (contract) year to hear directly from parents (who will be compensated for time
  participating in research activities) who have been through the child welfare system about their
  experiences and gather feedback on the support they received in developing positive
  relationships and obtaining the concrete means to safely nurture their children. The CFS CRP
  may serve as a steering committee for this effort.
- 2. Analyze data from listening sessions and report findings to the CFS CRP.
- 3. Develop an ACIN with the guiding principles or recommendations for counties to follow as they develop and oversee their approach to engagement, parental training/support services aimed at building capacity, informed by the caregiver feedback as well as best practices.

#### Independent Living Program (ILP) Subcommittee

The members of this subcommittee are: Simone Hidds-Monroe, Caitlin Radigan, and Yvonne Epps. It was facilitated by Stuart Oppenheim of CFPIC.

The CFS CRP established an ILP Subcommittee to focus on services supporting successful transition to adulthood for youth and young adults in care. Panel members developed a baseline understanding of how ILP services currently function in California and used that information to identify scalable successes at the local level, identify solutions for systemic barriers, and make recommendations for improvement.

The population of youth who have participated in ILS have unmet needs that make it difficult to navigate in adulthood. This assertion is based on the personal experiences of current and former foster youth. Furthermore, the current approach to providing ILP services is generic and not tailored to meet the individual needs of youth and young adults. The panel looked closely at:

- how ILP services are offered,
- engagement strategies programs used to connect with youth,
- the timing of ILP service delivery,
- ease of ILP service access across county lines,
- success of ILP services in helping youth be prepared for adulthood, and
- the outcomes for youth who participate in ILP services.

The panel also explored qualitative aspects of ILP programs, including:

- how youth and young adults are included in ILP design,
- what innovative models are used in ILP service delivery, and
- how youth and young adults with disabilities access programming.

As an initial step, the panel reviewed relevant national data from the comprehensive *Children Now* report published in 2023 "Supporting Successful Transitions into Adulthood for Youth in Foster Care:

Reforming California's Independent Living Program." The report indicates that ILP has not disrupted the pattern of instability and insufficient support for youth and young adults impacted by foster care resulting in the ongoing likelihood of homelessness. The report also indicates:

- ILP services are vastly underutilized and have key barriers to access.
- Youth desire more concrete supports and usable skills and tools.
- Youth need connections to reliable resources and providers after age 21.
- Youth want programming that helps build community connection.
- Youth felt more connected to programs that engaged them in decision-making about content and service delivery modalities.

The subcommittee met with CDSS representatives who provided the following ILP information:

- ILP is a county administered program with guaranteed state funding.
- State support is provided via technical assistance.
- CDSS does not mandate local practices or practice changes and CDSS does not provide outcome data.
- The Annual Report is the required communication tool for documenting the services provided at the county level.
- There is no state requirement for youth participation in program design or evaluation and there is no statewide platform for sharing best practices among county ILP programs.

The CFS CRP met with San Diego County to learn about their ILP. Highlights include:

- Services are provided via contracts with community-based providers.
- Services are put on hold for youth in Juvenile Detention.
- Their goal of improving youth engagement to increase participation.

The San Diego team expressed support for making changes to the Annual Report. They are also interested in exploring partnerships with the CRP to create and pilot an evaluation process looking at the long-term impacts of ILP on youth transitioning to adulthood.

Based on the information gathered, the panel identified some recommendations to improve the ILP service array in California. Of primary concern is the lack of engagement of youth in the available services. Many youth have not heard of ILP services or are not interested in the service. In addition to engagement challenges, access to ILP services can be complicated. Access varies from county to county and there is limited assistance for youth moving across county lines to access ILP or other services. Beyond engagement, the youth and young adults who participate report low levels of satisfaction with the service and believe the services are not relevant to their needs. Youth and young adults are not prepared for adulthood and are not connected to adult serving programs.

Through exploration of the current ILP landscape, the panel identified some promising practices that would improve engagement and satisfaction. Among those are:

- Starting services earlier to support relationship building, engagement, and complexity of service needs
- Including youth in program design and evaluation
- Identifying updated and innovative service delivery models
- Offering services more frequently
- Supporting youth to form meaningful connections with service providers, including people with lived experience
- Developing services that meet evolving needs of youth and that are tailored to meet specific needs

Beyond changes to the service array and service delivery modalities, the panel identified potential improvements related to program evaluation. There is insufficient information available to determine the impact of ILP services on outcomes for young adults exiting foster care. This could be addressed by developing a toolkit for impact analysis, a platform for sharing best practices, and changes to the ILP Annual Report. These tools would allow CDSS and counties to engage in continuous quality improvement of the ILP services they offer to make sure their services contribute to positive outcomes and lifelong positive impacts for youth. Support for measuring several key variables should be included in the toolkit:

- Outputs: Activities (quantitative) such as number of workshops held, number of attendees, number of phone calls, etc.
- Outcomes: The effects of outputs such as number of youth who open a bank account and consistently manage a budget.
- Lasting Impact: Long-Term Changes (qualitative) that youth report such as increased feelings of self-sufficiency, well-being, and life satisfaction.

The CFS CRP values measuring outputs and outcomes in any program evaluation to show the tangible resources ILP provided to youth and what the youth completed during their time in ILP. The panel requests that long term outcomes and lasting impact be added in the Annual Report. This revision will assist counties in confirming and learning (from youth) if their ILP is providing useful and relevant skill building activities that empower foster youth to transition successfully into adulthood and/or if modifications need to be made to meet the needs of the youth they serve. The addition of lasting impact measurements in the Annual Report will be inclusive of the youth experience and evaluation of the ILP services, making it a practice across all counties - to listen and meaningfully engage youth in the creation of ILP implementation and design.

As envisioned by the panel, the Impact Evaluation Toolkit will provide tools counties can use to demonstrate how and to what extent ILP helped young people navigate the world beyond their time in ILP (i.e., level of preparation for adulthood).

The Impact Evaluation Toolkit may include (but are not limited to) measuring the following lasting impacts:

 Youth are empowered in their daily lives – measures to identify how the lives of youth are changed because they believe that they have agency and can make independent decisions and maximize opportunities to do things that they think are important.

- Youth achieve financial stability and security measures of youth financial resiliency through
  concrete actions such as creating specific rainy-day funds in case of an emergency, being
  able to overcome financial challenges as they arise, setting money aside in savings even when
  finances are tight and encouraging their friends and family to do the same.
- Youth obtain meaningful employment opportunities –measures for how capable youth feel to explore, identify, and execute their career aspirations and goals; effectively utilize tools and resources that contribute to personal and professional development; envision themselves successful in their career paths; commit to their personal long-term life satisfaction.

This proposed Impact Evaluation Toolkit can make use of processes and metrics already in use with this population. Just in Time for Foster Youth, a non-profit organization in San Diego that works with current and former foster youth ages 18-26, to help them achieve life satisfaction through increased self-sufficiency and well-being uses lasting impact measures to track youth progress in Confidence, Capability, Connectedness, and Consciousness. These measures are aligned with the impacts the panel would suggest for an ILP Impact Evaluation Toolkit.

#### **ILP Subcommittee Recommendations**

- 1. Update the Annual Report to include additional relevant findings and measurable outcomes and impacts, moving beyond measuring outputs.
- Partner with CRP members, interested counties, and youth and young adults to build and pilot an Impact Evaluation Toolkit that assesses the lasting (lifelong) impact of ILP on youth participants.
- 3. Follow the recommendations of the Children Now report referenced above:
  - 3.1. Expand the age eligibility for ILP so that all counties serve eligible youth ages 14 up to 26.
  - 3.2. Modernize and standardize the services and supports offered by ILP, while still retaining flexibility for county ILPs to meet the needs of the youth they serve.
  - 3.3. Increase ILP funding overall so that counties can provide more robust services and supports, lower staff caseloads and decrease staff turnover, and offer more housing support.
  - 3.4. Consider and address the barriers to transition age youth engaging in ILP.
  - 3.5. Focus on the importance of interdependence, making concerted efforts to help youth build and maintain relationships with trusted adults in their lives as they develop selfsufficiency.
  - 3.6. Prioritize building collaborations and relationships within their communities to maximize the services and connections that are available for youth, particularly in the areas of housing and employment resources, so youth can access services and supports in a more streamlined and centralized way.
  - 3.7. Incorporate youth voice and choice into all ILPs so that the services offered are most relevant to the young people they serve.
  - 3.8. Hire staff with lived experience in the child welfare system or provide other opportunities for young people to connect with individuals with foster care experience so they can benefit from peer mentorship.

### Combined Recommendations from Subcommittees

- 1. Develop a comprehensive Father Engagement/Father Involvement (FE/FI) theory of change and logic model.
- 2. Use lessons learned from the Father Engagement Grants to spread best practices to all counties in the state.
- 3. Support counties in the use of the Father Friendly Check Up Assessment Tool and the creation of specific county strategies to improve the county's FE/FI outcomes by investing financially in the following priority areas:
  - 3.1. Technical support and evaluation of FE/FI
  - 3.2. FE/FI capacity building for professional staff
  - 3.3. Funding additional grants to support implementing the Fatherhood program in additional counties
- 4. Update the Annual Report to include additional relevant findings and measurable outcomes and impacts, moving beyond merely measuring outputs
- 5. Partner with CRP members, interested counties, youth and young adults to build and pilot an Impact Evaluation Toolkit that assesses the lasting (lifelong) impact of ILP on youth participants.
- 6. Follow the recommendations of the 2023 Children Now report on ILP:
  - 6.1. Expand the age eligibility for ILP so that all counties serve eligible youth ages 14 up to 26.
  - 6.2. Modernize and standardize the services and supports offered by ILP, while still retaining flexibility for county ILPs to meet the needs of the youth they serve.
  - 6.3. Increase ILP funding overall so that counties can provide more robust services and supports, lower staff caseloads and decrease staff turnover, and offer more housing support.
  - 6.4. Consider and address the barriers to transition age youth engaging in ILP.
  - 6.5. Focus on the importance of interdependence, making concerted efforts to help youth build and maintain relationships with trusted adults in their lives as they develop self-sufficiency.
  - 6.6. Prioritize building collaborations and relationships within their communities to maximize the services and connections that are available for youth, particularly in the areas of housing and employment resources, so youth can access services and supports in a more streamlined and centralized way.
  - 6.7. Incorporate youth voice and choice into all ILPs so that the services offered are most relevant to the young people they serve.
  - 6.8. Hire staff with lived experience in the child welfare system or provide other opportunities for young people to connect with individuals with foster care experience so they can benefit from peer mentorship.
- 7. Contract with a third-party partner to conduct listening sessions or focus groups with multiple counties to hear directly from parents (who are compensated) who have been through the child welfare system about their experiences and gather feedback on the support they received in developing positive relationships and obtaining the concrete means to safely nurture their children. The CFS CRP may serve as a steering committee for this effort.
- 8. Analyze data from listening sessions and report findings to the CFS CRP.

9. Develop an ACIN with the guiding principles or recommendations for counties to follow as they develop and oversee their approach to engagement, parental training/support services aimed at building capacity, informed by the caregiver feedback as well as best practices.

## Additional Areas of Exploration in 2023-2024

In addition to developing findings and recommendations, two subcommittees identified areas for exploration over the next fiscal year.

#### **Building Parental Capacity Subcommittee**

The Building Parental Capacity Subcommittee proposes a Multi-Year Vision for Building Parental Capacity. The recommendations above are nested within the panel's larger vision for enhancing child welfare service's overall approach to strengthening parental capacity to safely nurture children. The subcommittee's belief is that efforts to strengthen parents' protective factors (specifically increased concrete and social supports) through training and coaching, transfer of learning, or specific practice approaches will increase parental capacity and reduce the need for formal child welfare involvement. The panel's multi-year phased approach is described below, starting with the 2023 recommendations. Each subsequent year's recommendations will be further refined and adapted by the panel each year, guided by what is learned as the work evolves.

#### 2023-2024

- 1. Contract with a third-party partner to conduct listening sessions or focus groups with multiple counties next (contract) year to hear directly from parents (who are compensated) who have been through the child welfare system about their experiences and gather feedback on the support they received in developing positive relationships and obtaining the concrete means to safely nurture their children. The CFS CRP may serve as a steering committee for this effort.
- 2. Analyze data from listening sessions and report findings to the CFS CRP.
- Develop an ACIN with the guiding principles or recommendations for counties to follow as they develop and oversee their approach to engagement, parental training/support services aimed at building capacity, informed by the caregiver feedback as well as best practices.

#### 2024-2025

- 1. Administer a survey to counties and parents with lived experience to gather information about local practice alignment with the strategies outlined in the '23-'24 ACIN.
- 2. Partner with this CRP to conduct ongoing focus groups with parents and caregivers as needed to shape and refine data and understanding.
- 3. Partner with this CRP to summarize findings from the county survey data and to share more conclusive data related to the strategies (practices, training, coaching) that appear to successfully build parental capacity to safely nurture children.

#### 2025-2026

- 1. Issue guidance to counties to prioritize practices that build parental capacity (ACIN or ACL).
- 2. Explore funding for piloting and evaluation of promising strategies linked to building parental capacity to safely nurture children.
- 3. Design an evaluation methodology.

#### **ILP Subcommittee**

- Identify and address barriers for ILP participation for eligible incarcerated youth.
- Develop a platform for counties to share best practices across California.



## Critical Incidents Citizen Review Panel

## Overview of This Year's Work

During the current year, the CI CRP continued to focus on the following primary objectives:

- The creation of a Best Practices Child Death Review Team (CDRT) Toolkit for all county CDRTs.
- Continued advocacy for the establishment of a complete, accurate, reliable, and consistent statewide accounting of child fatalities and near-fatalities resulting from child maltreatment.
- Continued advocacy for the reestablishment of a state Child Death Review (CDR) commission, as required by federal law
- Assessment of Home Visiting programs as a means of reducing child fatalities and near-fatalities

Although three state-level Departments (Social Services, Public Health, and Justice) have responsibilities related to critical incidents, the CI CRP members understand that the primary responsibility for reviewing and documenting child abuse fatalities and near-fatalities begins at the county level with county Child Death Review Teams (CDRTs). A state level Child Death Review Commission could provide beneficial oversight and direction to local CDRTs, in addition to assisting in the collection of complete, accurate, reliable, and consistent data. The CI CRP continues to urge the three state Departments to advocate for the establishment of a state-level CDR Commission. In the

absence of such a body, since 2020 the CI CRP has made its primary goal the improvement of practice at the local level. In addressing local efforts, the panel has focused on supporting local CDRTs in optimizing the identification and evaluation of child fatalities and near fatalities that result from child maltreatment. Panel members believe that, if they provide guidance that will help county CDRTs conduct improved reviews that lead to a better understanding of the circumstances and causes of child fatalities and near-fatalities, local CDRTs will have reliable and comprehensive information and will be better able to drive systems improvements and actions to prevent future maltreatment deaths and serious injuries.

The CI CRP has focused on the development of structured guidance via a Best Practices CDRT Toolkit to support local efforts to understand and prevent maltreatment related child fatalities and near-fatalities. This multi-year undertaking culminated in the completion of the Best Practices CDRT Toolkit that accompanies the submission of this Report.

During the monthly meetings of the CI CRP, the members systematically worked through each section of the proposed Toolkit to provide relevant content based on findings from its survey, key informant interviews, literature reviews, and evaluation of databases and data element definitions. Throughout the year, the Toolkit evolved from a tentative outline to the fully articulated document that is being submitted for approval and distribution by the CDSS and partner agencies.

The Toolkit is intended as an on-line document that will be continuously updated with input from local CDRTs and state Departments, along with information from national resources. The ongoing work of the CI CRP will include solicitation of additional input and materials and the incorporation of new content into the Toolkit.

Panel members believe that the success of their work can only be in partnership with the three state-level Departments (CDSS, CDPH, DOJ) that have responsibilities for California's CDRTs. Panel members met with representatives of all three Departments to align their efforts with the CDRT work of CDSS, DPH, and DOJ, and will continue to assess how the CI CRP can provide constructive recommendations and input to the state-level work of these departments.

An additional aspect of this year's CI CRP work was a follow-up to last year's recommendation that CDSS "work with CDPH (with additional input from the CI CRP) on a coordinated approach to ensuring a universal, data based, targeted, home visiting prevention program, which builds on existing models, aimed specifically at reducing infant fatalities due to abuse or neglect." Representatives of CDSS and CDPH met with the CI CRP to review the various Home Visiting programs under their auspices and the CI CRP learned that each of the programs has a different focus and purpose. As a result of these discussions, it became clear that evaluation of Home Visiting programs across the state will be very challenging. Nonetheless, there is a need for additional exploration of the current landscape of Home Visiting programs and an assessment of the viability of supporting Home Visiting programs as a promising statewide strategy for preventing fatal child abuse incidents.

The CI CRP also discussed with the CDPH the problem that local CDRTs have in accessing child death certificates from other counties when they are reviewing deaths of children who were residents of their county but who died in other counties. There is currently no means of obtaining out of county death certificates. A similar problem regarding out-of-county Child Welfare records was also raised but

clarification of the means of access has been obtained and is incorporated in the Toolkit that accompanies this report.

## Findings from the Panel's Work

#### State-Level Child Death Review Commission

Since its inception, the CI CRP has advocated for the reinstatement of the state-level Child Death Review Commission. The panel members believe that the existence of a state-level CDR Commission would provide oversight and guidance to local CDRTs that would address the inconsistent local understanding of laws, requirements, and best practices in the review of child maltreatment fatalities and near fatalities, and would help improve the lack of complete, accurate, reliable and consistent child fatality data. Despite previous CI CPR recommendations and recent legislative initiatives there still exists no state-level CDR Commission, to the detriment of the children who continue to be victims of fatal and near-fatal maltreatment.

#### **Best Practices CDRT Toolkit**

Over the course of their work during the past several years, the CI CRP has learned that there is inconsistent local understanding of laws, requirements, and best practices in responding to and reviewing child maltreatment fatalities and near-fatalities, which impacts the quality of data collection, CDRT functioning, and ability to identify findings and recommendations for the prevention of child fatalities and near-fatalities.

The CI CRP has undertaken the creation of a Best Practices CDRT Toolkit; a living document that codifies best practices in the review of child maltreatment fatalities and near-fatalities, which is intended to assist counties in the local collection of consistent, reliable, and complete information that will support their efforts to improve coordinated response and prevent future fatalities and near-fatalities.

The CI CRP has benefited from the support of the relevant state Departments (Social Services, Public Health and Justice) in its efforts and requests continued support in the dissemination of and training based on the CDRT Toolkit.

#### **Home Visiting**

In discussions with the state Departments regarding Home Visiting programs, the CI CRP learned that there are three Home Visiting Programs supported by CDPH, one supported by CDSS, and many supported by First 5. Each program has its own funding, target populations, measurements, and data methodologies, making it difficult to assess or manage Home Visiting as a single intervention. It is unclear what criteria are used to enroll families, how many families are served, and how the programs are specifically targeted at preventing child maltreatment related deaths. Because almost 50% of child fatalities due to maltreatment occur to children under one year of age (the identified population served by Home Visiting programs) and early contact with families at risk is an excellent, proactive,

preventive opportunity, the CI CRP continues to advocate for implementation of Home Visiting as a standardized intervention to address maltreatment-related child deaths. Since there has been no overall approach to coordinating the array of Home Visiting programs, there is value in understanding how they might all work together to address the reduction of child fatalities and near-fatalities.

#### Records Access

In developing the Best Practices CDRT Toolkit, the CI CRP members learned of several barriers that local CDRTs face in gathering the information necessary for their reviews of child fatalities. Challenges regarding access to child welfare information from other counties have been resolved but the problematic issue with obtaining death certificates from other counties remains. Because death certificates are the purview of local Public Health Departments the CI CRP recommends that CDSS work with their colleagues at CDPH to enable local CDRTs to obtain death certificates from other jurisdictions. In addition, there are challenges in accessing records, information and data from agencies that respond to fatal or near-fatal maltreatment. Full disclosure from all involved agencies will support thorough CDRT analysis and inform prevention efforts across California.

- 1. Recommendations Work with the Department of Justice and Department of Public Health to establish a state-level Child Death Review Commission.
- 2. Adopt and distribute the CI CRP's Child Death Review Team (CDRT) Toolkit in partnership with the Department of Public Health.
- 3. Form a workgroup with CDPH to study the array of California Home Visiting programs, evaluate their impact on the reduction of child fatalities and near-fatalities, and consider strategies for spreading Home Visiting statewide. Include implementers of existing Home Visiting models (First 5 grantees, county Public Health and Human Services agencies), CI CRP members, and others who can inform this recommendation, in the workgroup.
- 4. Work with CDPH to grant CDRT access to child death certificates from other counties.

## Additional Areas for Further Exploration in 2022/2023

The work of the CI CRP, as described above, has been carried out in accordance with the CI CRP's work plan, and the following activities will be undertaken in the months between now and September 2024:

- Support distribution of and training on the Best Practices CDRT Toolkit in consultation with associated state Departments.
- Evaluate and update the Toolkit by collecting feedback regarding its usefulness and requesting additional input and supporting documents from county CDRTs, and other sources.
- Mobilize existing resources to establish a state Child Death Review Council.
- Develop a regional approach to peer mentoring among local CDRTs.
- Collaborate with state Departments to promote consistent, reliable, and accurate statewide data on child maltreatment fatalities and near-fatalities.
- Collaborate with CDSS, CDPH First 5 and others to assess the state's Home Visiting programs, including research into their viability as a network of child fatality and near-fatality prevention

- programs. This would be accomplished by participating in a state level workgroup if Recommendation 3 is adopted by CDSS.
- Consider the name "Critical Incidents" and identify an alternative name for the CRP charged with addressing child deaths.
- Consider the analysis of first responder tasks and protocols for initial child abuse response, including studying the technological protocols and data collection mechanisms first responders and ER/Hospital use to track fatal and severe child abuse.

# Appendix A: Recommendations for CDSS Action

#### Prevention of Child Abuse and Neglect Citizen Review Panel Recommendations

- 1. Build upon the required Interagency Leadership Teams prescribed under AB2083 by providing clear guidance to emphasize the need for County Prevention Planning teams to forge proactive partnerships with their local Regional Centers and other key resource agencies such as FRCs and other CBOs in service of the I/DD population.
- 2. Include information related to the bias in reporting of parents with intellectual and developmental disabilities in the upcoming updates being made to the current state-level Mandated Reporter Training to understand bias and disproportionality in reporting of families of color and families in poverty.
- 3. Actively partner with the Department of Developmental Services regarding the 2023-24 Service Access and Equity Grants to learn more about how this demonstration project can inform both AB2083 Systems of Care as well as Families First Prevention Services/Comprehensive Prevention Planning with regard to the I/DD population across California. Encourage that there be a focus on areas of consumers with child welfare involvement and systems issues that increase disparate treatment of individuals with intellectual and developmental disabilities, as well as ways to expand the number of FRCs able to serve this population.
- 4. Conduct a review of the training curriculum provided to child welfare staff to understand if/how they are informed about the I/DD population and recommend updates to required training to educate child welfare staff on understanding this population and ways they can better identify, engage, assist, and support this population to prevent their entry into the child welfare system whenever possible.
- 5. Undertake an exploration into the data collection procedures concerning families confronting Intellectual and Developmental Disabilities (I/DD) challenges that come under the purview of child welfare services, encompassing both reported cases and investigations. This endeavor should lead to the identification of areas needing improvement. Subsequently, CDSS should offer recommendations for refinements aimed at fostering more accurate and insightful data regarding the interaction between these families and the child welfare system in California.
- 6. Share information with counties (via webinar, trainings, ACINs) regarding state level efforts to engage those with lived expertise, and share best practices and lessons learned from their efforts that could help inform local engagement strategies. Additionally, CDSS should establish measures for successful engagement of lived expertise in Families First Prevention Services planning implementation and evaluation for counties and provide technical assistance and training to meet the goals of these critical prevention efforts.

#### Children and Family Services Citizen Review Panel Recommendations

- 1. Develop a comprehensive Father Engagement/Father Involvement (FE/FI) theory of change and loaic model.
- 2. Use lessons learned from the Father Engagement Grants to spread best practices to all counties in the state.

- 3. Support counties in the use of the father Friendly Check Up Assessment Tool and the creation of specific county strategies to improve the county's FE/FI outcomes by investing financially in the following priority areas:
  - 3.1. Technical support and evaluation of FE/FI
  - 3.2. FE/FI capacity building for professional staff
  - 3.3. Funding additional grants to support implementing the Fatherhood program in additional counties
- 4. Update the Independent Living Program (ILP) Annual Report to include additional relevant findings and measurable outcomes beyond output and outcomes.
- 5. Partner with CRP members, interested counties, youth and young adults to build and pilot an Impact Evaluation Toolkit that assesses the lasting (lifelong) impact of ILP on youth participants.
- 6. Follow the recommendations of the 2023 Children Now report on ILP:
  - 6.1. Expand the age eligibility for ILP so that all counties serve eligible youth ages 14 up to 26.
  - 6.2. Modernize and standardize the services and supports offered by ILP, while still retaining flexibility for county ILPs to meet the needs of the youth they serve.
  - 6.3. Increase ILP funding overall so that counties can provide more robust services and supports, lower staff caseloads and decrease staff turnover, and offer more housing support.
  - 6.4. Consider and address the barriers to transition age youth engaging in ILP.
  - 6.5. Focus on the importance of interdependence, making concerted efforts to help youth build and maintain relationships with trusted adults in their lives as they develop self-sufficiency.
  - 6.6. Prioritize building collaborations and relationships within their communities to maximize the services and connections that are available for youth, particularly in the areas of housing and employment resources, so youth can access services and supports in a more streamlined and centralized way.
  - 6.7. Incorporate youth voice and choice into all ILPs so that the services offered are most relevant to the young people they serve.
  - 6.8. Hire staff with lived experience in the child welfare system or provide other opportunities for young people to connect with individuals with foster care experience so they can benefit from peer mentorship.
- 7. Contract with a third-party partner to conduct listening sessions or focus groups with multiple counties to hear directly from parents (who are compensated) who have been through the child welfare system about their experiences and gather feedback on the support they received in developing positive relationships and obtaining the concrete means to safely nurture their children. The CFS CRP may serve as a steering committee for this effort.
- 8. Analyze data from listening sessions and report findings to the CFS CRP.
- 9. Develop an ACIN with the guiding principles or recommendations for counties to follow as they develop and oversee their approach to engagement, parental training/support services aimed at building capacity, informed by the caregiver feedback as well as best practices.

#### Critical Incidents Citizen Review Panel Recommendations

- 1. Work with the Department of Justice and Department of Public Health to establish a state-level Child Death Review Commission.
- 2. Adopt and distribute the CI CRP's Child Death Review Team (CDRT) Toolkit in partnership with the Department of Public Health

- 3. Form a workgroup with CDPH to study the array of California Home Visiting programs, evaluate their impact on the reduction of child fatalities and near-fatalities, and consider strategies for spreading Home Visiting statewide. Include implementers of existing Home Visiting models (First 5 grantees, county Public Health and Human Services agencies), CI CRP members and others who can inform this recommendation on the workgroup.
- 4. Work with CDPH to grant CDRT access to child death certificates from other counties.

## **Appendix B: Panel Members**

#### Prevention of Child Abuse and Neglect Citizen Review Panel Members

Forrest Archer Member, Child Abuse Prevention Coordinating Council Humboldt County

Shane Harris Founder & CEO, S. Harris Communications National Civil Rights Activist San Diego County

Katie Albright Senior Advisor / Immediate Past Chief Executive Officer Safe and Sound City and County of San Francisco

Yvette Baptiste

Executive Director, Eastern Los Angeles Family Resource Center, Statewide Representation of FRCs that serve individuals and families who use developmental disability services Los Angeles County

Lori Schumacher Program Director, Center for Human Services Stanislaus County

Patricia Bevelyn Retired Child Welfare Manager San Diego County

Marilyn English African American Wellness Center for Children and Families San Diego County

Aimee Zeitz YMCA Regional Director San Diego County

Dana Blackwell Senior Director California Strategic Consultation Casey Family Programs Los Angeles County

Sheila Boxley
President and CEO
Child Abuse Prevention Center
Sacramento County

Alex Morales Retired CEO of Child's Bureau Southern California Board of Directors at Child Welfare League of America Los Angeles County

Marni Parsons Vice President of Student and Family Services Bright Star Schools Los Angeles County

Jose Ramos Child Care Resource Center Los Angeles County

Antonia Rios Chair, National Parent Leadership Team Parents Anonymous Los Angeles County

Judi Sherman Consultant, Judi Sherman & Associates Santa Cruz County

#### Children and Family Services Citizen Review Panel Members

Jose (Manny) Arroyo Parent with lived experience Ventura County

Caitlin Radigan
Development and Advocacy Manager
Just In Time for Foster Youth
San Diego County

Dorothy Lewis
Parent Partner CFS/CAPC
Contra Costa County

Lori Clarke Director of Social Policy Institute San Diego State University San Diego County

Ann Wrixon Executive Director for Contra Costa CASA Contra Costa County

Simone Hidds-Monroe Associate Director Advocacy & Community Empowerment Just in Time for Foster Youth San Diego County

Deutron Kebebew Former foster youth Executive Director of MENtors, Driving Change for Boys, Men, and Dads Santa Cruz County

Ruth Salady Parent with lived experience Sacramento County

Emily Bahne Resource Parent Pediatric Nurse Practitioner Fresno County

Alice Langton-Sloan Indian Child Welfare Director Cahto Tribe of the Laytonville Rancheria Mendocino County

Yvonne Epps, MSW Wellness System Manager, Social Policy Institute San Diego State University San Diego County

Melissa Stamps, CSW
CAPC/CFS Team Lead
Parent Partner with lived experience
Contra Costa County

Marisa Mora Parent with lived experience Trinity County

#### Critical Incidents Citizen Review Panel Members

Minerva Tico Director, Partner Strategy and Programs at Cisco City and County of San Francisco

Jeoffry Gordon, MD, MPH Retired Family Physician Santa Cruz County

Sheryn Hildebrand Executive Director Court Appointed Special Advocates of Lake and Mendocino County Mendocino County

Cathy Long
Coordinator
CSCC/LCCPC/CDRT
San Joaquin County

Deborah Moriarty School Counselor PPS/Medical Social Worker LCSW Orange County

Justian O'Ryan Supervisor CQI Special Projects San Joaquin County Child Welfare San Joaquin County

Ana Santana Healthy Start Director Lake County Office of Education Lake County

Stephanie Biegler Chief Program Officer Child Abuse Prevention Center Sacramento County

Ruby Guillen

Advisory Board Member, International Youth Conference, under the Civil Society, United Nations Interagency Council on Child Abuse and Neglect (ICAN) Associate Former foster youth Los Angeles County

Faith Simon, FNP, MSN Mendocino Coast Clinics (FQHC) Mendocino County

## **Appendix C: Consultant Team**

#### Child and Family Policy Institute of California (CFPIC)

Stuart Oppenheim, MSW Executive Director

Juliet Cox, MPA Deputy Executive Director

Danna Fabella, MSW Associate Director

Andrea Sobrado, MSW Associate Director

#### **RDA Consulting**

John Cervetto, MSW Chief Operating Officer

Aditi Das, MSW, PhD Senior Consultant

Christy Spees, MPH Consultant

Jamon Franklin, MPH, MCP Consultant





## **Acknowledgments**

We would like to thank all the panel members for their invaluable contributions to this report. We also appreciate CDSS' unwavering support of panel efforts and look forward to our continued partnership with them.