



# COUNTY OF LOS ANGELES OFFICE OF CHILD PROTECTION

KENNETH HAHN HALL OF ADMINISTRATION  
500 WEST TEMPLE STREET, ROOM 383  
LOS ANGELES, CALIFORNIA 90012  
(213) 893-2010

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April 30, 2019

To: Supervisor Janice Hahn, Chair  
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From: Judge Michael Nash (Ret.)   
Executive Director

## PROGRESS UPDATE ON THE WORK OF THE OFFICE OF CHILD PROTECTION

In the final report of the Los Angeles County Blue Ribbon Commission on Child Protection (BRCCP), *The Road to Safety for Our Children*, two key recommendations were to “establish an entity to oversee one unified child protection system,” and for it to create a strategic plan for the work it will focus on. On June 10, 2014, the Board adopted the recommendations contained within that BRCCP final report and took action to establish the Office of Child Protection (OCP) as a separate entity reporting directly to the Board and located within the Executive Office. In October 2016, the OCP submitted to the Board its Countywide Child Protection Strategic Plan, which categorizes the work across five goal areas: prevention, safety, permanency, well-being, and cross-cutting approaches. It has submitted quarterly updates on its progress since August 1, 2016; this is a report on its progress since the last update submitted on January 31, 2019.

**GOAL 1: PREVENTION** *Provide children and families with the upfront supports and services they need to prevent them from entering the child welfare system and/or limit their involvement with the system once they are known to it.*

### Countywide Prevention Plan

- Partnering with First 5 LA, the Department of Public Health (DPH), and the Policy Roundtable for Child Care and Development to lead activities across the six action areas outlined in the plan
  - ◇ Networking the Networks Working with First 5 LA, DPH, the Department of Mental Health (DMH), the Department of Children and Family Services (DCFS), Workforce Development, Aging and Community Services (WDACS), the Prevention and Aftercare networks (P&As), the Children’s Data Network, and the Policy Roundtable for Child Care and Development to identify strategies for enhancing connections and coordination across existing prevention networks

- Facilitated 10 community-input sessions in partnership with local community host agencies, plus one with the Asian/Pacific Islander provider community, one with the American Indian provider community, and one with parent representatives from across the county. These convenings served as forums for vetting draft recommendations on enhancing existing prevention-network coordination with community stakeholders, and for beginning the process of weaving together County prevention networks.
  - The leading priority identified by stakeholders was the need to increase resources and collaboration around family economic well-being. This recommendation was consistent across all geographies and stakeholder groups. Housing, employment, financial literacy, and legal assistance were top resources specifically called out by stakeholders as needed.
  - Additional priority recommendations included increased funding to support community engagement (including both outreach and feedback loops), increased resources to grow services that support family protective factors, improved coordination and use of existing referral technology, and reductions in duplicative meetings.
  - A full data analysis of the input shared from the convenings is anticipated to be available in May.
- ✧ Prevention and Aftercare Network Capacity Working with the P&As to help reach families that could benefit from support as early as possible, and to expand the networks' capacity to serve more families
- DCFS and consultants from Gita Cugley and Associates (GC&A) completed informal technical assistance visits with the P&As. Financial performance was reviewed against 2018 contract amounts and the usage of 2019 funding was discussed. All providers showed significant progress in increasing their program capacity.
  - P&A network outcome data was reviewed by DCFS, DMH, and GC&A in March 2019.
  - GC&A provided technical assistance to DCFS and DMH to streamline the sharing of invoice data across departments, using it to optimize their funding for these contracts. Models were also developed to help the departments improve their ability to forecast the use of these funds in future.
  - GC&A provided several trainings for the P&A staff, including *Workforce Development*, *Long-Term Engagement*, and *Diversity with Dignity*.
- ✧ Home Visitation Working with DPH, First 5 LA, DMH, DCFS, the Probation Department, Department of Health Services (DHS), Department of Public Social Services (DPSS), the Children's Data Network, the Center for Strategic Partnerships (CSP), the Los Angeles Best Babies Network, and the LA County Perinatal

and Early Childhood Home Visitation Consortium (Consortium) on developing a plan for expanding home-visitation services available to vulnerable families

- The Los Angeles County Home Visiting Collaborative Leadership Council launched on February 5, 2019. Led by DPH, this group supports the implementation of the County's home-visiting plan delivered to the Board of Supervisors in July 2018. It also serves as an ongoing leadership group to monitor system efficacy and pursue additional system-reform opportunities. Representation on the group includes First 5 LA, DMH, DCFS, DPSS, DHS/MAMA's Neighborhood Visits, the Los Angeles County Office of Education (LACOE), the OCP, Probation, Los Angeles Best Babies Network, the Women, Infants and Children (WIC) nutrition program, the Children's Data Network, Blue Shield of California, the Partnership for Early Childhood Investment, the Policy Roundtable for Child Care and Development, home-visiting provider agencies, and home-visiting clients.
- DMH and DPH, in partnership with First 5 LA and the Los Angeles Best Babies Network, have made substantial progress in the expansion of home visiting funded with DMH's Mental Health Services Act Prevention and Intervention (MHSA-PEI) dollars. This expansion represents a monumental opening of access to evidence-based home-visiting support for families previously excluded from services because of where they live or the ages of their children.
  - As of March 2019, 47 new home-visitor staff had been hired throughout the county under this new funding stream, creating an expanded capacity to serve up to 1,175 additional families. In May 2019, additional hiring is anticipated that will bring the total number of DMH-funded home-visitor staff system-wide to 135 (for the Healthy Families America and Parents As Teachers programs).
- DPSS and DPH began providing home-visiting services to families in March 2019 under the newly awarded California Work Opportunities and Responsibility to Kids (CalWORKs) home-visiting funds included in the Fiscal Year (FY) 2018-19 Governor's Budget.
  - New triage protocols for connecting CalWORKs clients to home visiting and other supports are now operational in Greater Avenues for Independence (GAIN) offices in San Gabriel Valley, West County, and Pomona. Services for the Southeast County GAIN and East San Fernando Valley GAIN offices are targeted to begin in early May.
  - In April 2019, DPH began enrolling families into the Nurse Family Partnership Program under this new funding stream. DPH anticipates hiring 10 additional public health nurses (PHNs) this summer and expanding Healthy Families America and Parents As Teachers home-visiting staffing by the fall to provide additional capacity for home-visiting support under this program.

- The Consortium launched an eDirectory in April 2019, in partnership with Los Angeles Best Babies Network, the Center for Strategic Partnerships, the OCP, and DPH. This electronic eligibility and referral system improves the ability of P&A network navigators, First 5 LA–funded outreach specialists, DHS teams, DPH nurses, home-visiting agencies, and others to provide timely and accurate referrals to home-visitation providers. Over 250 unique individuals used the eDirectory within the first week of its launch. A link to this eDirectory can be found on the OCP’s website at <http://ocp.lacounty.gov> under “Featured Links.”
- DMH has worked on multiple fronts with its partners to bolster the availability and accessibility of perinatal mental-health capacity in Los Angeles.
  - DMH partnered with the Los Angeles Best Babies Network to provide several trainings to Consortium members, increasing the knowledge base of home visitors in the areas of mental health, mental-health services, maternal mental health, and birth-to-three services.
    - During FY 2018–19, several Mental Health First Aid (MHFA) trainings and service-navigation meet-and-greets were provided for home visitors across the SPAs. Recent trainings occurred in SPAs 2, 3, and 7. Additional MHFA trainings are scheduled in the next couple of months for the remaining SPAs.
  - DMH also rolled out multiple trainings for clinicians, including:
    - Perinatal Well-Being one-day trainings, offered to its directly operated programs in March and April 2019, to give clinical staff the capacity to work with clients suffering from perinatal depression and other perinatal mental-health disorders, both within the clinic and through field-based service delivery. This training is designed to increase participants’ awareness and understanding of perinatal mental-health issues, educating them on factors that place women at an increased risk for developing perinatal mood and anxiety disorders.
    - Perinatal Well-Being five-day trainings increase the capacity of clinical staff to appropriately screen, recognize, respond to, and treat perinatal mood and anxiety disorders. Each session provides in-depth knowledge on perinatal mental health, screening tools, diagnostic considerations, treatment recommendations, and case discussions. Two cohorts of up to 50 mental-health clinicians are participating in five half-day trainings that started this month and will run through September 2019.
    - A Birth to Three webinar series designed to increase clinical staff’s capacity to work with newborns to three-year-olds. This series covers various topics, including the diagnostic process and treatment for the birth-to-three population.

- DHS' MAMA'S Neighborhood program was awarded a Federal Healthy Start grant to build on its current work of reducing racial and ethnic disparities in infant mortality and adverse perinatal outcomes in high-risk areas of the county. This program offers family-centered clinic and home-based intensive care management, individual and group classes, and other strategies to help build resilience within these families.
- First 5 LA has been hosting bi-monthly cross-sector health leadership convenings to share perinatal well-being and health-equity innovations, including home-visiting pilots and connections. Most pregnant women eligible for Medicaid in Los Angeles County are enrolled in a managed care plan, and each area Medi-Cal health plan has a prenatal and postpartum care-management program that may include providing or making a referral to a postpartum home-visit program. Three health plans have launched home-visiting related pilots:
  - Health Net's MemberConnections program provides postpartum home visits to help members schedule their doctor's appointments, screen for postpartum depression, and provide resources in response to member needs. Program representatives receive a minimum of 500 training hours, allowing them to play a key role in supporting higher-risk mothers who need follow-up and additional access to postpartum care.
  - First 5 LA and Blue Shield of California Promise Health Plan are working to leverage resources for expectant members, presenting an opportunity to increase enrollment in home-visiting programs in high-need areas, patient use of effective prevention services, and participation in prenatal health care. Through this partnership, Blue Shield Promise plans to refer pregnant women who access its primary-care clinics in the Antelope Valley to First 5 LA-funded home-visiting programs.
  - The Molina MOM (Moms of Molina) Program provides a home visit to every new Molina mother living in Riverside, San Bernardino, Los Angeles, San Diego, Imperial, and Sacramento counties to bolster postpartum care and ensure that members receive their postpartum assessment visits and any needed supports. The nurse practitioner conducting the visit provides a physical and emotional assessment of the new mother (a postpartum depression screening), health education, and referral to community resources (WIC, Black Infant Health, mental health, etc.).
- ✧ Early Care and Education (ECE) Working with the Policy Roundtable for Child Care and Development, First 5 LA, the Child Care Alliance of Los Angeles, DCFS, DPH, the Los Angeles County Commission for Children and Families, DMH, the Child Care Planning Committee, the Alliance for Children's Rights, the Advancement Project, the Southern California Chapter of the California Association for the Education of Young Children, P&A networks, LACOE, the Los Angeles Unified School District (LAUSD), and others to create a roadmap for improving access to early care and education programs

- Consensus reached among multiple partners/stakeholders on 10 communities to serve as focal points of the fiscal analysis: Antelope Valley, Lennox, Long Beach, Northeast San Fernando Valley, Norwalk, Pasadena, Pomona, Santa Monica, Southeast Los Angeles, and Watts Willowbrook. In addition, several key initiatives will be profiled that are not linked to a specific community or municipality: the Department of Parks and Recreation's Tiny Tots program, DMH's Prevention and Early Intervention funding stream and program support, DCFS' ECE electronic referral system, LAUSD's Health and Wellness Center model and approach to funding ECE services, and a LACOE early intervention program.
- Met with multiple stakeholders across all these communities and programs, as well as advocates, providers, community members, educators, philanthropic representatives, administrators, elected officials, and County departments, to gather information to complete the community and innovation profiling, develop the revenue and expense model, and gather provider data
- Finalized portions of the revenue and expense model that include the quality components that drive cost, the three levels of quality to be costed out in the tool, and the types of programming to be modeled in the tool (i.e., full-day, full-year care; extended-day preschool; and part-day preschool)
- ✧ Measuring Prevention Working with First 5 LA, DMH, DCFS, the Children's Data Network, the Chief Executive Office (CEO), DPH, DHS, LACOE, and other data experts to develop a set of standardized measures of prevention to evaluate the effectiveness of prevention-plan implementation efforts
  - Working with partners to vet an initial set of countywide prevention metrics that measure the County's efforts to support strong children, families, and communities. Department leadership from Probation, DPSS, DHS, WDACS, DMH, DCFS, LACOE, the Office of Diversion and Re-Entry's Youth Diversion and Development unit, DPH, and First 5 LA have reviewed and commented on the draft set of prevention metrics; other critical partners, like school districts, the Department of Parks and Recreation, the Public Library, and the federal WIC nutrition program, will also be consulted. Our goal is to finalize the initial set of countywide prevention metrics and develop a roadmap for the County to consistently measure these prevention outcomes by fall 2019.
- ✧ A Portrait of Los Angeles County Working with various entities—including the CEO, the City of Los Angeles, First 5 LA, DPH, DCFS, WDACS, Public Library, the Department of Parks and Recreation, Probation, DPSS, the Los Angeles Homeless Services Authority (LAHSA), the Children's Data Network, LACOE, CSP, the Policy Roundtable for Child Care and Development, the Child Care Planning Committee, the Healthy Design Workgroup Grants Committee, the Equity Workgroup, Weingart Foundation, Southern California Grantmakers, and the Center for Financial Empowerment—to monitor the overall well-being of communities and to support efforts that implement the *Portrait's* recommendations

- Strategic engagement and outreach activities have continued with groups and agencies having a potential impact on all 10 of the priority investment areas identified in the *Portrait*. The report has been disseminated to almost 3,000 programs and organizations since its release in November 2017. Key activities include:
  - Worked with DMH's prevention/suicide prevention network data workgroup on developing a needs assessment and identifying data sources to guide the creation of its strategic plan for promoting mental health and resilience among youth and preventing self-injury
  - Presented to a regional network of approximately 120 student-support services, foster youth, and homeless youth liaisons on strategies for improving educational outcomes, decreasing disengagement, and increasing resources for vulnerable youth
  - Worked with the Los Angeles County Commission for Women's health committee to develop a concept paper on the "health-wealth gap," exploring the relationship between women's health and risks for economic and housing insecurity across the county
  - Leveraged the Quality and Productivity Commission Productivity Manager's Network to identify strategic uses of *Portrait* data across various County departments, plus key outreach and training opportunities; also presented to the Los Angeles County Economic Development Commission's Data for Social Good meeting on maximizing the value and use of various countywide data sources
  - Participated in the "Open Data Day" event on March 2, 2019, with LA Counts at the California Community Foundation to promote the *Portrait* data's being published on the County's Open Data Portal, <https://data.lacounty.gov/>
  - Convened multiple County departments, the City of Los Angeles, LAHSA, the Policy Roundtable for Child Care and Development, LAUSD, the Community Development Commission, the Children's Data Network, Supervisorial District representatives, and academic and philanthropic partners to discuss how the *Portrait* has been shared with local initiatives working to improve well-being, along with feedback about its uses and impact; participants also discussed how the *Portrait* could be leveraged with local data sources to better measure well-being

**GOAL 2: SAFETY** *Minimize, if not eliminate, the risk that a child known to one or more entities in our system will be harmed.*

### **Implementation of Anthony A. Report Recommendations**

- On August 10, 2018, the OCP, DCFS, Health Agency, DHS, and the Sheriff's Department filed a joint response to the Board's motion to review the case that included the death of 10-year-old Anthony Avalos. The report contained eight recommendations for systems improvements.
- A six-month follow-up report on efforts to implement these recommendations was submitted to the Board on February 14, 2019.
- Implementation efforts to date on the recommendations include:
  - 1) Reevaluate DCFS's Voluntary Family Maintenance (VFM) process.
    - The OCP met with DCFS' regional administrators in February to discuss revising the VFM policy and get their feedback on needed changes.
    - DCFS' policy unit has completed a revised draft VFM policy that is currently being vetted by VFM workgroup members.
  - 2) Improve the skills of staff interviewing children.
    - Dr. Thomas Lyon, Ph.D./J.D. at the University of Southern California Gould School of Law is working with DCFS to develop a training series addressing rapport-building, basic screening questions for assessing abuse and following up on an allegation, and simple, non-leading approaches with children. A second training is being developed on addressing child recantations. Both are anticipated to be fully developed by June, with rollout beginning in July.
    - DHS, DCFS, and the Los Angeles Sheriff's Department (LASD) have completed seven of the nine scheduled cross-trainings in the Antelope Valley and Santa Clarita areas for DCFS and LASD staff on identifying signs of basic abuse (from maltreatment, neglect, or accidents) and when social workers and law-enforcement staff should bring children in for medical exams at the County's Medical Hubs or other hospitals. DCFS and DHS have developed a proposal to implement additional quarterly trainings throughout the county using content experts from the Hubs.
    - DHS and DCFS are also developing a cross-training focused on sexual abuse that will be launched this summer.
  - 3) Retrain social workers on the proper use of Structured Decision Making<sup>®</sup> (SDM).
    - See "Risk Assessment and System Improvement Recommendation Implementation" on page 11 for a full description.



4) Increase collaboration between DCFS and law enforcement.

- DCFS and LASD launched a pilot in the Antelope Valley to jointly investigate allegations of child physical and sexual abuse during daytime shifts. The pilot's goal is to promote cooperation between the agencies to enhance child safety and timely child-abuse investigations, increase information-sharing between the agencies, and improve assessments of appropriate services and supports for the families involved. This pilot started in both Palmdale and Lancaster in February 2019.
  - DCFS and LASD drafted an initial protocol for this pilot.
  - While implementation data are not yet available for the Lancaster office, in March and April, Palmdale office data show an increase in the number of joint investigations occurring.
  - Implementation issues identified include the need for more staff to cover all of the requests for joint responses, and the need for better cell phones and more mobile computers.
  - Promising results suggest that conducting joint interviews reduces trauma to children and families because of, in part, the need for fewer interviews, an improved rapport with the children and families involved, and better overall assessments because of the increase in information-sharing between deputies and social workers.
- DCFS and LASD continue to work on developing a more comprehensive joint-agency protocol on how both agencies can work together more effectively.

5) Improve the Medical Hub system.

- See the "County Medical Hubs" section on page 19 for a full description.

6) Improve the investigation skills of social workers at the front end and beyond.

- DCFS recently completed Phase I of a skills-building training for its regional management and supervisors on identifying practice and systemic issues in fatality vignettes.
- Phase II of this training, for regional management and supervisors, began in March and is focused on deepening assessment skills and family-engagement skills, and understanding how existing protective factors can mitigate risk.
- Phase III of this training, during which managers and supervisors will train the social workers in their units on these skills, is scheduled to start in May.
- In January, DCFS University began piloting a revised curriculum for the state's Supervisor CORE Training provided to all new supervising social workers. The new training includes modules on teaming, engaging families,

coaching, critical thinking, trauma-informed practice, fairness and equity, and cultural humility.

- In addition to this pilot curriculum, new supervisors are also receiving a second version of the Phase II portion of DCFS's skills-building training through DCFS University.
- 7) Improve the capacity to assess needs and progress made throughout the span of the case.
- DPH's Substance Abuse Prevention and Control (SAPC) unit, DMH, and DCFS have partnered to outstation substance-abuse counselors in DCFS regional offices to provide on-site support and connections to substance-abuse supports for those parents or youth who need them. These counselors are also available to consult with social workers on cases involving substance-abuse issues and offer guidance on how best to handle them.
    - Substance-abuse counselors have been outstationed in 14 DCFS regional offices—Lancaster, Palmdale, Van Nuys, Santa Clarita, Chatsworth, Glendora, Pomona, Pasadena, Covina Annex, Metro North, West Los Angeles, Vermont Corridor, Compton East, and El Monte.
    - DPH–SAPC reports that between May 1, 2018, and March 31, 2019, a total of 1,550 parents were referred by DCFS for substance-use screening as a result of this program.
    - Of this number, 1,036 were screened for substance-use disorders; 900 of those had a positive screen and were referred to treatment services within their communities.
  - DMH co-located a clinician at DCFS' Child Protection Hotline in January 2019 to provide consultations to Hotline staff on any reported mental-health concerns and needed connections to appropriate services, to serve as a navigator in researching clients' DMH history, to participate in the Community Prevention Linkages pilot to offer a mental-health perspective on assessing a family's needs and developing an appropriate support plan, and to offer in-service trainings on assessing needs, screening for mental-health concerns, and implementing process improvements.
    - To date, the clinician has been particularly helpful with outreach and linkages to mental-health services on 59 cases referred to the Hotline.
      - Case example: A referral came into the Hotline of a 12-year-old girl who was staying out late at night. The outstationed clinician reviewed the referral and suspected that the child might be the victim of the Commercial Sexual Exploitation of Children (CSEC). She was able to obtain additional information from the caregiver and school counselor that further supported her initial suspicion. As a result, the referral was upgraded to an investigation, and the child was referred to DMH's Full

Service Partnerships so she would be connected to ongoing mental-health services.

- DMH is currently recruiting staff to be co-located at the Emergency Response Command Post (ERCP) and the Lancaster regional office to provide similar consultations. A clinician will be assigned to work evening hours at the ERCP starting in May.

8) Reduce social worker caseloads.

- DCFS is working with the CEO to examine the use of incentives for social workers in the Antelope Valley and other hard-to-staff areas.

### **Risk Assessment and System Improvement Recommendation Implementation**

- Partnering with DCFS to implement the recommendations outlined by the OCP in its report of May 2017
  - ✧ The National Council on Crime & Delinquency (NCCD) is continuing its assessment of the field use of Structured Decision Making® (SDM) here in Los Angeles County and identifying what policy, training, and practice changes are needed to ensure the proper use of the tool.
  - ✧ NCCD issued a report in January 2019 on its review of the use of the SDM Hotline assessment, safety assessment, and risk assessments, and how they help DCFS staff make screening, removal, and case-opening decisions. DCFS is now taking action on the series of recommendations made in that report.
  - ✧ DCFS and NCCD have begun collecting data for the next round of the fidelity review focusing on dependency investigations and continuing services. Of particular interest is whether or not DCFS staff are using the SDM reunification assessment as intended to support their complex decision-making once children are in foster care, and what barriers may be preventing that assessment's proper use.
  - ✧ NCCD is working with the DCFS policy unit on finalizing a new SDM foundational policy (one of the recommendations in its report). Workgroups on how to integrate changes in the risk assessment will be convened this spring and summer.
  - ✧ NCCD is working with the DCFS training unit and the Academy of Professional Excellence (Southern California Training Academy) to map out a comprehensive new training effort for DCFS Hotline and emergency-response staff based on findings from NCCD's report.
    - Training will start with SDM case-consultation coaching with regional management. These sessions will begin in May 2019 and be completed by August 2019.
    - NCCD will also conduct a training-for-trainers and five demonstration trainings this fall, allowing DCFS training staff to re-train CSWs on proper SDM Hotline, safety, and risk assessment use.

- A similar training-for-trainers focused on proper SDM Hotline, safety, and risk use for supervising social workers will occur before the end of the year.
- ✧ Director Bobby Cagle has set this work as a priority for DCFS, and has directed staff to ensure that trainings and policy changes occur as soon as possible. The team meeting for round two of the fidelity review is set for June.

### DCFS Hotline Pilot

- Launched a revised pilot project with DCFS' Hotline and the P&As on July 1, 2018, to serve families referred to the Hotline whose concerns do not warrant a DCFS investigation, but where an identified need exists that could be addressed through community-based prevention supports.
- ✧ In the first nine months of pilot implementation (July 2018—March 2019):
  - The average number of families identified for services per month **doubled** (160 in 2017 to 320 in nine months).
  - **387 more families** accepted services in the first nine months of the pilot than during all of 2017 (225 in 2017 to 612 in nine months).
  - The acceptance rate for services **almost doubled** (11.7% in 2017 to 21.3% in nine months).

	AVERAGE PER MONTH 2017	PILOT STARTS 2018									PILOT AVERAGE PER MONTH
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Number of families referred to the P&As	160	209	245	315	403	355	242	295	425	387	320
Percentage of families accepting services	11.7%	22.5%	22.4%	20.3%	21.6%	22.5%	17.4%	21.7%	17.4%	25.6%	21.3%

- The revised pilot project also streamlined the process for connecting families to services, which resulted in a reduction of excessive wait time from a maximum of 27 business days to a maximum of 14 business days (a 48% time reduction).
  - Families are now connected to services **13 business days faster**

### Use of Public Health Nurses (PHNs) in Child Welfare

- The Child Welfare PHN (CWPHN) Steering Committee continues to meet and address issues resulting from the consolidation of the child-welfare PHNs into DPH, and has begun working to implement some of the recommendations from the OCP's report on the *Best Use of PHNs in Child Welfare* (December 2017).

- ✧ DPH and the DCFS Hotline developed a process for providing immediate CWPHN consultations when warranted for Hotline calls received after hours at the Emergency Response Command Post.
- ✧ The pilot for engaging transition-age youth on their understanding of their psychotropic medications, and providing this information to the court, has expanded from two DCFS regional offices to all 20 offices.
- ✧ DPH has improved its process for entering data on completed initial medical exams (IMEs) into the Child Welfare System/Case Management System (CWS-CMS).
- ✧ DPH's CWPHN Program, DPH's Oral Health Program, and the University of California, Los Angeles (UCLA) Dental Transformation Initiative implemented oral-health trainings for DCFS regional-office and Medical Hub PHNs in March 2019. In total, four trainings were held with 198 nurses from the CWPHN Program, Child Health Disability Prevention program, the Medical Hubs, and the California Children's Services (CCS) program. The trainings covered the basics of oral health, evidence-based practices for improving oral health for children, strategies to effectively communicate about the importance of good oral health for children, and information on community resources and Denti-Cal benefits. The OCP is working with DCFS, DPH, DHS, and UCLA to implement similar trainings for social workers, caregivers, and medical providers at the Hubs.

### **Electronic Data-Sharing Efforts**

- Working with DCFS, the Chief Information Officer (CIO), and County Counsel on the production of an electronic portal to facilitate the electronic sharing of information relevant to an investigation of child abuse or neglect across seven county departments and DCFS, based on a Memorandum of Understanding (MOU) that the OCP finalized with the participating departments, County Counsel, and the CEO
  - ✧ The Emergency Response Investigation Service (ERIS) is now being used by emergency-response workers in all DCFS offices. Data accessible in this initial phase of ERIS includes DCFS history and criminal-background information, which helps streamline DCFS investigations and placing children with relatives when a removal is necessary.
  - ✧ Phase II of ERIS is being designed with the Internal Services Department (ISD), CIO, and DCFS, adding data from additional departments and incorporating changes based on user feedback to improve the system's functioning.
- Working with DCFS and LACOE to access accurate and consistent education data for foster youth
  - ✧ Developed/testing modules in the Education Passport System (EPS) that include the 1399 School Transfer Form and the Single Screen Student Information Summary (giving social workers a single summary screen by which to view student information easily on their mobile device while in the field)

- ✧ As of April 13, 2019, over 1 million document pages were accessible through the EPS system. Additionally, 1,837 users of the system searched for over 2,500 students, and made over 1,200 document requests through the EPS system. Partners will now focus on providing more trainings and getting more district personnel to upload documents into EPS.

**GOAL 3: PERMANENCY** *No child leaves the system without a permanent family or a responsible caring adult in his or her life.*

### **Increasing the Use of Relative Placements**

- Preparations are underway to expand the upfront family-finding project launched in October 2016 to six more DCFS offices—Santa Clarita, West San Fernando Valley, South County, Belvedere, Wateridge North, and Wateridge South. The official launch will take place in May and June.
  - ✧ As previously reported, the original four offices of the pilot—Santa Fe Springs, Glendale, Vermont Corridor, and West L.A.—had 2,444 children subject to detention hearings through December 2018. Of those, 75% were placed with kin, including non-offending parents, other relatives, and non-related extended family members.
  - ✧ Since the beginning of 2019, 490 children have been subject to detention hearings in those offices, and 74% have been placed with kin.
  - ✧ Discussions are currently underway with Child Trends to conduct a longitudinal study of the project to evaluate its impact on placement stability, reunification, other forms of permanency, and perhaps more.

### **Permanency and Self-Sufficiency Planning for Transition-Age Youth (TAY)**

- On December 4, 2018, the Board directed the OCP, in collaboration with the CEO, DCFS, DMH, the Juvenile Court, Probation, legal advocates, and other stakeholders, to develop and implement a comprehensive plan to increase permanency for system-involved youth and report back in 180 days.
- The OCP Permanency Workgroup has been meeting on a monthly basis, primarily focusing on data. The group heard from Dr. Wendy Wiegmann, project director of the California Child Welfare Indicators Project at the University of California, Berkeley, School of Social Welfare. Dr. Wiegmann presented on a variety of measures, including:
  - P1 Permanency within 12 months of entering foster care
  - P2 Permanency within 12 months for children already in care 12 to 23 months
  - P3 Permanency within 12 months for children in care 24-plus months
  - P4 Re-entry to foster care within 12 months of exit

In these categories, Los Angeles County is falling short of the standards set by the U.S. Department of Health and Human Services' Children's Bureau.

- The group is working with DCFS to obtain more accurate department-level data to serve as a basis for a focused plan of action. At the meeting on April 11, 2019, the following was reviewed and discussed:
  - Data snapshots from December 19, 2018, and February 12, 2019
  - Data snapshots from March 6 and March 20, 2019
  - Permanency data indicators

Below are examples of some of the inconsistencies and concerns raised by this data.

✧ The number of children under court jurisdiction:

- December 19, 2018      31,685
- February 2, 2019      31,545
- March 6, 2019      30,404

Subsequent to the meeting, snapshots as of December 31 were provided for 2014 through 2018. The number on December 31, 2014, was 30,974. On December 31, 2018, the number was 31,656.

The biggest increase over these years was in the number of AB 12 youth (non-minor dependents), from 1,506 in 2014 to 1,895 in 2018.

✧ The number of APPLA (Another Planned Permanent Living Arrangement) youth:

- December 19, 2018      556, including 33 under age 16
- February 12, 2019      587, including 37 under age 16
- March 6, 2019      953 age 16 and older who were not placed with relatives or non-related extended-family members (NREFMs)
- March 6, 2019      2,903 under age 16 and not placed with relatives or NREFMs

✧ Cases 90 days old without disposition:

- December 19, 2018      1,188
- February 12, 2019      1,459

✧ Numbers of youth aging out of the system:

- 2017      1,111
- 2018      1,009

About 1,000 youth per year aged out from 2014 through 2018.

✧ Youth age 18 or over in the system:

- December 31, 2017      2,270, including 1,942 per AB 12
- December 31, 2018      2,378, including 2,040 per AB 12

✧ Total reunifications

- 2014      6,371
- 2018      5,706

- ✧ Age youth entered the system
  - In 2018, of 1,387 16-year-olds, 277 entered between 0 and 10 years old.
  - In 2018, of 1,381 17-year-olds, 242 entered between 0 and 10 years old.
  - In 2018, of 973 18-year-olds, 212 entered between 0 and 10 years old.
- What the data reflect are:
  - Inconsistencies, particularly in the number of APPLA youth (DCFS has been asked to check again)
  - High numbers of youth aging out and high numbers of youth over 18 likely to age out
  - A decrease in reunifications
  - Too many cases older than 90 days without disposition (DCFS has been asked to double-check those numbers and to provide a list of those cases broken out by Dependency Court departments)
- Along with the data, a benefits analysis chart has been drafted and is currently being reviewed. The goal is to determine if real and/or perceived barriers to permanency exist because of the variety of benefits available to transition-age youth and/or their caregivers—family and otherwise.

### **Transitional Shelter Care (TSC) Pilot**

- Bi-weekly meetings continue with stakeholders—including DCFS, DMH, Probation, the Juvenile Court, the Children’s Law Center, Court-Appointed Special Advocates (CASA), the Violence Intervention Program (VIP), County Counsel, and others—to discuss the multidisciplinary teaming pilot led by DCFS’ Accelerated Placement Team (APT) to stabilize and find permanency for hard-to-place youth (i.e., overstays and chronic repeaters) at TSC facilities. The group discusses individual cases with regional social workers to identify measures to deal with many of the issues being raised.
  - ✧ Support from the administrations of both DCFS and DMH has been exemplary. Both administrations, in recognition of the outstanding work being done by the DCFS APT pilot, along with DMH’s Intensive Field Capable Clinical Services (IFCCS) teams, have allotted additional staff to both so that more extremely high-need youth can be served in a more comprehensive fashion.
  - ✧ Additionally, in a particularly difficult and troubling case, DCFS Medical Director Dr. Charles Sophy personally became involved when both agencies ran out of options for a young girl—other than sending her to a TSC that would clearly not be able to meet her needs. Dr. Sophy’s intervention resulted in an extension of her hospital stay, which was the best solution for her at that time.
  - ✧ The group has also met with representatives from DCFS’s Resource Family Recruitment and Approval Division, including Nina Powell, to discuss the waiver process for potential caregivers of youth. The result has been a greater under-



standing of the process for the APT workers and a better understanding for waiver personnel about how the process is perceived. In addition, in at least one of the cases discussed, misunderstandings were cleared up, resulting in the approval of a potential caregiver for a high-need youth.

- ✧ Two recent examples of pilot youth and their progress:
  - AR is a 16-year-old youth who experienced multiple failed group-home placements, resulting in several school moves that significantly disrupted her education. While residing at the TSC, AR was suspected of acting as a Commercial Sexual Exploitation of Children (CSEC) recruiter, having gang affiliations, drinking alcohol, and using marijuana. She would frequently run away from placement with other residents and return days later, become verbally aggressive, steal, and refuse any kind of support. Through this pilot, her case coordinator helped her find a well-matched foster home to address her underlying needs, and worked with her to understand ground rules and expectations so that it would be successful. With ongoing support from her case coordinator, AR has remained in this placement for over two months. She has built a strong relationship with her caregiver, significantly reduced her negative behaviors, and has made up enough course credits in high school to be on track to graduate with her class next year.
  - CC is a 20-year-old pregnant youth with an infant child who lost her transitional housing placement. Because she would be aging out of foster care in four months, CC had very limited placement options. Through this pilot, her case coordinator helped her obtain permanent housing, free child care, and other supports as needed, and is continuing to help her set achievable monthly goals. CC is stable in her housing placement, working full-time, and attending high school classes. She is 30 school credits away from graduating.

**GOAL 4: WELL-BEING** *Ensure that system-involved youth achieve the physical, emotional, and social health needed to be successful.*

#### **Efforts to Improve Educational Achievement**

- Continuing to partner with DCFS, Los Angeles County school districts, and LACOE to implement the foster-youth school-stability provisions included in the Every Student Succeeds Act (ESSA)
  - ✧ The Education Coordinating Council (ECC), DCFS, LACOE, LAUSD, and WDACS are conducting a transportation pilot to keep foster youth in their schools of origin. The pilot, in effect through June 30, 2019, is intended to be a “bridge solution” and learning opportunity as long-term transportation agreements between DCFS and the school districts are finalized.
    - To date, the pilot has provided over 45,000 school-of-origin transportation rides to 800 foster youth. Approximately 47% of the foster youth transported

- by the private transportation vendor are LAUSD students, with the remaining 53% of riders being spread out over 64 other school districts.
- The ESSA pilot evaluator has disseminated a process survey for DCFS, LAUSD, and the private transportation vendor to provide feedback on the pilot implementation. Results will be incorporated into the evaluation report due to the Board by July 31, 2019.
  - The ECC and LACOE are conducting outreach to Los Angeles County school districts serving large numbers of foster youth about signing on to long-term ESSA transportation plans.
  - The ECC and DCFS presented at the April 2019 California Foster Youth Education Summit on the ESSA work to date, current data, lessons learned, and potential long-term funding strategies being discussed with school-district liaisons, child-welfare agencies, advocates, county offices of education from across the state, and state officials.
  - The ECC, DCFS, and the CEO's Intergovernmental and External Affairs unit began educating state-level organizations such as the Child Welfare Directors Association, California Department of Social Services, California Department of Education, State Board of Education, and State Assemblymembers about the ESSA efforts that Los Angeles County is making and the need for long-term sustainable funding across the state for this important work.
- Working with the Los Angeles County Arts Commission (LACAC), DMH, and the Arts for Incarcerated Youth Network (AIYN), to implement a healing-informed arts education pilot for middle and high schools with high numbers of foster and probation youth. The program will help youth build protective factors through the arts and will develop local art-focused networks of mental-health clinicians, artists, teachers, and other stakeholders within schools and their surrounding communities.
    - ✧ Partners are meeting with school districts across the county (including LAUSD, Pasadena, Paramount, Antelope Valley High School Union School District, and LACOE's Community Schools Initiative) to educate them about the importance of preventing mental-health issues through healing-informed arts education. The partners will continue to work with potential program school districts and prepare to launch this pilot in the fall.
    - ✧ The Arts Commission has released an RFQ for a pilot evaluator.
  - The ECC worked with the National Center for Youth Law's FosterEd initiative, alongside philanthropy and other partners, to develop and implement a career/college pathway for transition-age youth in the Antelope Valley. At a pilot demonstration site, partners work with the Palmdale School District, Lancaster School District, and Antelope Valley Union High School District to place liaisons in middle and high schools with high concentrations of system-involved youth to implement educational teaming practices and address college preparation. Liaisons also maintain strong collaborative ties with regional DCFS and Probation offices.

- ✧ The ECC helped to establish an Advisory Leadership Team for this effort consisting of high-level service providers, school districts, and County representatives to address systemic issues such as developing a plan to engage education rights holders in school decisions and supporting school stability.

### **Workforce Development**

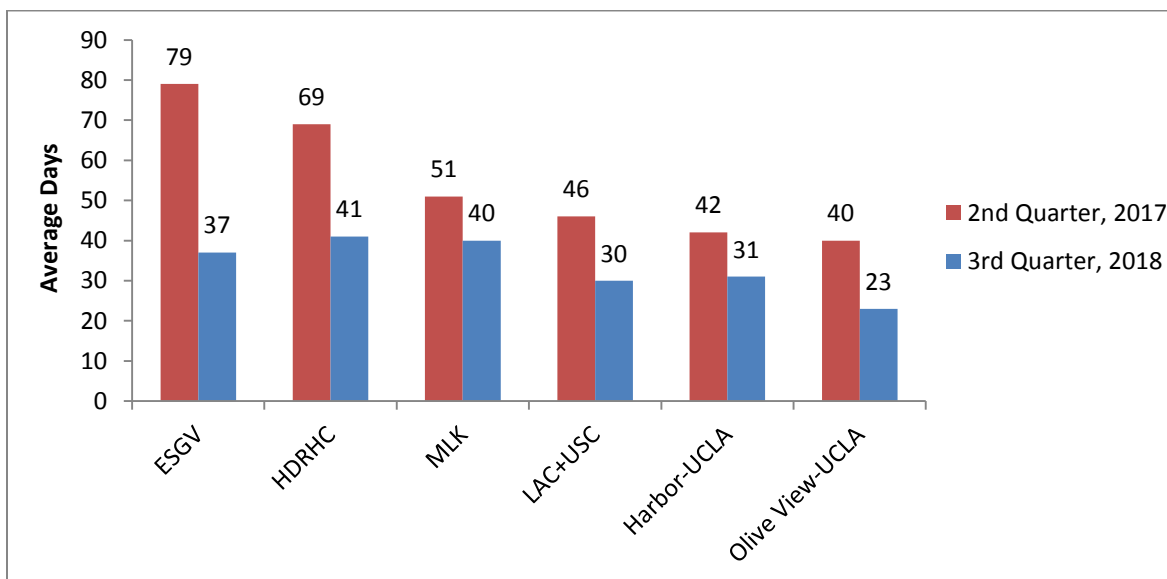
- WDACS' Workforce Development Board (WDB), in conjunction with the City of Los Angeles' WDB, has secured commitments from the other five WDBs—Foothill, Pacific Gateway, Southeast Los Angeles, South Bay, and Verdugo— to:
  - ✧ Prioritize foster and juvenile-justice-involved youth for work experience
  - ✧ Establish a continuum of workforce and education services system for youth and families at risk of becoming involved with child welfare or probation
  - ✧ Dedicating at least 30% of Workforce Innovation and Opportunity Act-Out of School Youth funds to serve in-school foster, probation, and homeless youth, based on the local youth population in each region
- WDACS and the City of Los Angeles are in the process of obtaining signatures on the operation agreement to finalize this commitment.

### **County Medical Hubs**

- Working with DHS, DCFS, DMH, and DPH to implement a detailed work plan to improve the overall Hub system, focusing on timely access to forensic exams and Initial Medical Exams (IMEs) in the short term, and potentially broadening Hub services in the longer term. Examples of recent improvements include:
  - ✧ A Board-Certified Child Abuse Pediatrician started as the new Medical Director of the High Desert Regional Health Center (HDRHC) Hub in the Antelope Valley on March 1, 2019. His immediate priorities are to improve timely access to forensic exams and IMEs, and to collaborate with partners on assessing the needs of the community that the HDRHC Hub serves.
  - ✧ In addition to deploying three clinicians from the Olive View-UCLA Medical Hub to rotate part-time at the HDRHC Medical Hub until two additional clinicians are hired, DMH has recently hired additional staff at the Martin Luther King Jr. (MLK) Medical Hub to provide services until 8:00 p.m. In the last several months, DMH has hired seven staff across the Medical Hubs to increase capacity for mental-health services.
  - ✧ DHS, DMH, DPH, and DCFS have developed a proposed staffing plan for each Medical Hub. Once through departmental and CEO classification and budget review, each department will submit a request to the Board for additional positions to staff expanded hours at the Hubs and increase capacity to deliver timely access to the Hubs' core services.

- ✧ **CORRECTION:** In our February 14, 2019, report, *Coordinated Six-Month Follow-Up to Anthony A. Report Recommendations*, we reported that forensic services had recently been added one day per week to the East San Gabriel Valley (ESGV) Medical Hub. This was incorrect. Because of unforeseen delays in hiring staff and securing equipment, forensic services at the ESGV Hub are actually anticipated to begin in early May 2019.
- ✧ DHS has improved the timeliness of Initial Medical Exams (IMEs) for newly detained children at each Medical Hub. State regulations and DCFS policy state that IMEs should be completed within 10 days for children ages 0–2.99 (and/or high-risk children), and within 30 days for children ages 3 and above. The data in Figure 1, which was measured in the second quarter of 2017 and third quarter of 2018, show the decreases in the average number of days between detention date and IME-completion date for newly detained children. At this time, we do not have a data breakdown by age category, but DHS is developing a data dashboard for the Hub system that will include timeliness measures for all core services.

**Figure 1. Average Days Between DCFS Detention and IME Completion**



- ✧ Gartner Consulting has completed its assessment of E-mHub, the electronic data system used at the Hubs, and recommended building an interface between E-mHub and ORCHID, DHS' data system, to best meet the Hubs' business needs and create efficiencies across the two systems. Initial steps include developing the scope of work needed to build the interface, which may include amending existing contracts with ORCHID and E-mHub vendors. Additional funding and authority from the Board may be needed for this. DHS is currently determining its next steps.
- ✧ DHS and DCFS are finalizing department policies and protocols and coordinating with LASD and other law-enforcement agencies to improve communication and collaboration with respect to forensic exams for children throughout the county.

- ✧ DCFS and OCP updated the DCFS medical examination form used for foster youth at the Hubs and by community medical providers, and are currently vetting the form with DHS and DPH. The updated form will streamline workflows around collecting health and oral-health outcome data, as well as help medical providers, PHNs, and social workers prioritize cases for medical-care coordination.
- ✧ DHS, DCFS, and LASD have completed seven of the nine scheduled cross-trainings in the Antelope Valley and Santa Clarita areas for DCFS and LASD staff on identifying signs of basic abuse (from maltreatment, neglect, or accidents) and when social workers and law-enforcement staff should bring children in for medical exams at the Hubs or other hospitals. One of the upcoming trainings will be video-recorded so that DCFS and LASD can continue to use it in the future, and DCFS and DHS have developed a proposal to implement additional quarterly trainings throughout the county using content experts from the Hubs. DHS and DCFS are also developing a cross-training focused on sexual abuse that will be launched this summer.
- ✧ In addition to holding quarterly countywide convenings of Hub stakeholders, the OCP, DHS, DCFS, DMH, and DPH are planning Hub-specific convenings for community stakeholders that include caregivers, parents, and youth who access Hub services—as well as community partners, advocates, and service providers—to gather input on the specific needs of each community and Medical Hub. The first set of Hub-specific community convenings will start this summer.

### **Addressing Psychotropic Medication Use in Child Welfare**

- Monthly meetings of the Psychotropic Medication Workgroup continue to oversee the implementation of the protocols adopted in April 2017 for approving and monitoring the use of psychotropic medications for youth in out-of-home care.
- ✧ Data Since June 2018, data from DCFS and Probation on the children and youth in their care has been requested.

From DCFS:

- The number of DCFS youth with approved Psychotropic Medication Authorizations (PMAs)
- An age breakdown of those youth
- An ethnicity breakdown of those youth
- The number of those youth receiving more than one medication
- The number of those youth receiving antipsychotic medication
- A breakdown of those youth by placement—foster home, relative care, congregate care

From Probation:

- The number of probation youth receiving psychotropic medications, broken out by those with approved PMAs and those with parental consents on file
- An age breakdown of those youth

- An ethnicity breakdown of those youth
- The number of those youth receiving more than one medication
- The number of those youth receiving antipsychotic medication
- A breakdown of those youth by current location—juvenile hall, probation camp, congregate-care suitable placement

DCFS has already provided a quarter's snapshot of all this information for DCFS children taking psychotropic medication(s), and expects to have a second quarter available in May.

***Despite the request's having been lodged for nearly a year—and recent record-low number of children under the aegis of the delinquency court—the Probation Department has not made information available.***

- ✧ Psychotropic Medication Youth Engagement Worksheet DPH's Child Welfare Public Health Nursing (CWPHN) unit announced that the Psychotropic Medication Youth Engagement Worksheet should be fully implemented across all DCFS regional offices starting May 1. PHNs are being retrained on administering the instrument, and information for social workers is also being distributed.

**Probation has not yet developed a plan to implement the worksheet.**

- ✧ Laboratory Tests In the Judicial Council's January 1, 2018, revision of the psychotropic medication authorization (PMA) forms, the section of 2008's Form JV-220(A) Physician's Statement detailing laboratory tests ordered by the prescribing physician was streamlined to eliminate the checklist of specific tests. Court pediatricians reviewing PMA files in Los Angeles County recently found that test results occasionally contraindicate certain medications, yet results may never be considered and those prescriptions are still ordered. In general, mental-health professionals at the court prefer the earlier form's level of detail.

The OCP is forming a small workgroup—including Judge Akemi Arakaki, Dr. Edward Bloch, and Dr. Gia Crecelius—to design an addendum to JV-220(A) to become a routine part of the PMA paperwork in Los Angeles County. This will ensure that appropriate lab tests occur and results are considered before psychotropic medications are prescribed.

**GOAL 5: CROSS-CUTTING STRATEGIES** *Rethink structures, programs, and processes, on an ongoing basis, that impact multiple entities, to take advantage of new thinking and learning that meaningfully improves our child protection system.*

### **Dual-Status Youth Motion**

- On March 20, 2018, the Board directed the OCP, in collaboration with multiple County stakeholders and others, to report back on a Countywide plan for dual-status youth. The work on this motion continues within the Dual-Status Youth Workgroup's three subcommittees—Delinquency Prevention, Data, and WIC 241.1 Multidisciplinary Team (MDT).

Participants include the OCP (which is facilitating the project), OCP consultant Professor Denise Herz of California State University Los Angeles, and representatives from the juvenile court, Probation, DCFS, DMH, the Youth Development and Diversion (YDD) unit within DHS's Office of Diversion and Re-entry, the CEO's Center for Strategic Partnerships, County Counsel, the District Attorney, Public Defender, Alternate Public Defender, LACOE, the Children's Commission, the Mayor's Office of Gang Reduction and Youth Development (GRYD) from the City of Los Angeles, Children's Law Center, CASA of Los Angeles, Public Counsel, Loyola Law School, the Alliance for Children's Rights, Child Trends, the Children's Data Network, Children Now, the California Conference for Equality and Justice, the Vera Institute, the Association of Community Human Services Agencies (ACHSA), and other interested parties.

- ✧ Most recently, the Delinquency Prevention Subcommittee has focused on developing guidelines for YDD's soon-to-begin diversion program that are designed to ensure that foster youth have the same access to the program as do non-foster youth. These guidelines, when finalized, will be consistent with WIC 241.1(b)(3)(A), which calls for WIC 241.1 protocols to include "nondiscrimination provisions to ensure that dependents are provided with any option that would otherwise be available to a non-dependent minor."

Discussions have focused on the degree of confidentiality of foster-youth involvement, as well as on the role of parents, other caregivers, social workers, and youth's attorneys in the process. We expect guidelines to be completed by the end of May 2019, in time for the rollout of the YDD-sponsored program.

- ✧ The focus of the WIC 241.1 MDT Subcommittee continues to be redrafting the WIC 241.1 protocols that require DCFS and Probation to jointly assess any youth who appears to come within the description of WIC 300 and WIC 602. Thus far, the subcommittee has rewritten the sections on defining when WIC 241.1 applies, plus information triggering the protocol and the timelines for filing the joint assessments.

Two tasks remain within these sections. One is for DCFS to clearly define its process for identifying a WIC 602 youth when that youth becomes the subject of a WIC 300 petition in the Dependency Court. The other task is updating the 2003 Operational Agreement.

- ✧ The Operational Agreement was designed for Probation to provide notice to and receive input from DCFS and the Children's Law Center (CLC) when a WIC 300 youth is about to be detained by Probation. The Agreement allows DCFS and CLC to be heard on the issue of detention and/or to ensure that a youth who is not detained is returned to placement. When updated, the Agreement will mirror the contents of WIC 241.1(b)(3)(A), which provides that the WIC 241.1 protocol may also require immediate notice to DCFS and the youth's dependency attorney upon referral of a dependent youth to Probation, and also outlines procedures for release to and placement by DCFS pending the resolutions pursuant to WIC 241.1.

A small working group has been reviewing the provisions of the Agreement and anticipates its presentation to the subcommittee at the May meeting.

- ✧ The 241.1 MDT Subcommittee and the Data Subcommittee are also working on procedures for the 241.1 joint assessment. This includes defining the roles of the multidisciplinary team (MDT), which consists of representatives from Probation, DCFS, DMH, and an education consultant. Included in that discussion is a reconsideration of the specific roles of DMH and the education consultant in the joint-assessment process. The Data Subcommittee is working on the contents of the joint assessment, which include a consistent process to evaluate the information required by WIC 241.1 and gathered by the MDT. Much of this work should be completed by the OCP's next quarterly update.

### **Additional OCP Activities**

- Met with staff from Congresswoman Karen Bass' office to discuss the sunseting of the federal Title IV-E waiver and its potential impact on prevention services
- Participating in DPH's Office of Violence Prevention Leadership Committee to determine the vision and scope of the office
- Presented to the Children's Commission on Children and Families on the dual-status youth work on March 4, 2019
- Met with the Civil Grand Jury to provide information on child safety efforts on March 7, 2019
- Panelist at the Empowerment Congress' Reconvening of the Blue Ribbon Commission on Child Protection on its report's five-year anniversary on March 13, 2019
- Presented to the First 5 LA Commission on the implementation of the Countywide Prevention Plan on March 14, 2019
- Participated in Casey Family Program's 21st Century Child Welfare Convening in Washington, D.C., on March 20–22, 2019
- Presented to the Child Welfare Funders Collaborative on DCFS' Community Prevention Linkages project on March 28, 2019
- Panelist at the 2019 Social Innovation Summit: Pathways to Opportunity on the implementation of the Countywide Prevention Plan at the University of Southern California on March 29, 2019
- Presented to the Children's Commission on Children and Families on implementing the Medical Hubs work plan on April 1, 2019
- Conducted a workshop on Reasonable Efforts at a Judicial Council Conference on *Updates in Foster Care* in Los Angeles on April 10, 2019



- Per a Board motion, submitted a report to the Board of Supervisors on a review of the Trinity J. case on April 18, 2019
- Plenary panelist at the Community Information Exchange Summit on ERIS for the “This is What Success Looks Like: Insights and Inspiration from Three California Counties” panel in San Diego on April 24, 2019
- Presented at the 21st National Conference on Child Abuse and Neglect on the upfront family-finding pilot in Washington, D.C., on April 25, 2019

In summary, the OCP is working hard to accomplish its goals, as are the relevant County departments and a host of key community partners. We look forward to reporting further progress in our next quarterly update.

If you have any questions or need additional information, please contact me at (213) 893-1152 or via email at [mnash@ocp.lacounty.gov](mailto:mnash@ocp.lacounty.gov), or your staff may contact Carrie Miller at (213) 893-0862 or via email at [cmiller@ocp.lacounty.gov](mailto:cmiller@ocp.lacounty.gov).

MN:eih

c: Chief Executive Office  
Executive Office, Board of Supervisors  
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Child Support Services  
Chief Information Office  
Children and Family Services  
County Counsel  
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Fire  
Health Services  
Mental Health  
Parks and Recreation  
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Public Defender  
Public Health  
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