January 31, 2020

To: Supervisor Kathryn Barger, Chair
   Supervisor Hilda L. Solis
   Supervisor Mark Ridley-Thomas
   Supervisor Sheila Kuehl
   Supervisor Janice Hahn

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 October 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
DPH, the Department of Consumer and Business Affairs (DCBA), First 5 LA, the Center for Strategic Partnerships, and the OCP are collaborating to enhance economic opportunities for Los Angeles County families based on focus-group results gathered from the previous landscape analysis. These opportunities include improving earned income tax credit (EITC) usage; increasing the viability, use, and safety of street vending as a small-business incubation opportunity; improving the usage of County financial-stability supports; and modifying contracting procedures to improve opportunities for local businesses.

The OCP and DPH are co-planning a prevention convening with local network and County leaders for spring 2020. At this convening, partners will map and discuss the alignment, coordination, leveraging, and collective impact of the evolving prevention efforts across County departments and community networks countywide.

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.

In anticipation of the July 1, 2020, P&A funding reduction that will occur when the additional short-term DMH allocation is spent, DCFS announced a 23% reduction in each 2019 provider contract amounts. Gita Cugley & Associates (GC&A) provided forecast models and data to help facilitate communication with DMH and DCFS and identify other potential funding to bridge this gap. Discussions also continue to target best options to absorb the funding reduction with the least impact to the P&A networks.

The data workgroup—consisting of representatives from the P&As, DMH, DCFS, and GC&A—has met bi-monthly to resolve differences in interpretations of what data should be reported and what data is missing. Changes are being implemented and will continue to be monitored. The impact of these changes will not be reflected in reporting until Q3 and Q4. Data-validation efforts for Q1 and Q2 will continue, as will regularly scheduled data workgroup meetings.

Home Visitation Working with DPH, First 5 LA, DMH, DCFS, the Probation Department, the Department of Health Services (DHS), the Department of Public Social Services (DPSS), the Children’s Data Network, the Center for Strategic Partnerships, the Los Angeles Best Babies Network, and the LA County Perinatal and Early Childhood Home Visitation Consortium (Consortium) to support the availability of home-visitation services for vulnerable families.

In October 2019, the Board directed DPH to work with DMH, DHS, DCFS, and First 5 LA, to complete an assessment of unmet needs for home-visiting services, provide recommendations for new home-visiting models to serve high-risk women, identify funding needs, and assess the system’s sustainability capacity. DPH has begun leading this effort.
In November 2019, DPH was awarded an additional $3.6 million in California Home Visiting Program (CHVP) funds for evidence-based home visiting. The term for the award is Fiscal Year (FY) 2019–20 through FY 2021–22.

This month, DPH, DPSS, and their partners have rolled out CalWORKs-funded Healthy Families America (HFA) and Parents as Teachers (PAT) agency home-visiting services to CalWORKs clients through 7 contracted agencies.

In November 2019, DPH launched its new African American Infant and Maternal Mortality (AAIMM) Doula Project in the Service Planning Areas (SPAs) with the highest African-American infant mortality rates (1, 3, 6, and 8). Funded by Whole Person Care, the AAIMM Doula Project connects pregnant African-American women with a team of 12 African-American doulas to reduce stress and medical interventions that put pregnant women at risk of poor outcomes. This launch advances three components of the County’s home-visiting plan: 1) the incorporation of trusted, less-intensive options for maternal support; 2) increased paraprofessional opportunities for community members; and 3) alignment between African-American infant mortality and home-visiting efforts. The project will run through early 2021.

First 5 LA and the Los Angeles Best Babies Network have implemented trainings to ensure that home-visiting staff are trained on cultural competency/humility and implicit bias. To date, nearly 450 people have been trained.

Blue Shield of California’s Promise Health Plan is expanding its home-visiting referral pilot with First 5 LA, under which Promise Health refers pregnant women who access its primary-care clinics to local home-visiting programs. During spring 2020, the geographic reach of the pilot will expand beyond its original Antelope Valley focus to include Long Beach clinics and referrals.

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, the P&A networks, the Los Angeles County Office of Education (LACOE), the Los Angeles Unified School District (LAUSD), and others to create a roadmap for improving access to early care and education programs.

A Comprehensive Fiscal Analysis of the Los Angeles County Early Care and Education System was submitted to the Board on December 4, 2019. Its findings and recommendations were presented—along with several other recent reports about the early childhood education system in our county—to over 200 stakeholders (including local and state leaders) on December 6, 2019, at the Los Angeles County Summit on Early Care and Education. The report was also featured in a KPCC article and featured broadcast story.
Implementation planning for the report recommendations is well underway. The County of Los Angeles Office for the Advancement of Early Care and Education (OAECE) aligned its 2020–2025 strategic plan to the report findings and is developing, in partnership with the County’s Policy Roundtable for Child Care and Development and its Child Care Planning Committee, an implementation plan that will be finalized in June. First 5 LA is also incorporating the report recommendations into its strategic plan implementation plan and is working closely with the OCP, the OAECE, and LACOE to identify County partners to take the lead on each of the report’s recommendations and actions steps.

🔹 Measuring Prevention Working with First 5 LA, DMH, DCFS, the Children’s Data Network, the Chief Executive Office (CEO), the Chief Information Office (CIO), 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

🔹 Currently analyzing 14 data sets from County departments and publicly available state and federal data for the preliminary set of impact and actionable indicators identified for our Countywide Prevention Metrics. The OCP and CIO plan to release this preliminary set of indicators by the spring of 2020.

🔹 Other Prevention Efforts

🔹 Multi-Departmental Information and Referral System Working with the CEO and CIO to explore opportunities to expand capabilities for an electronic information and referral connection system

🔹 Expecting and Parenting Youth (EPY) Working with DCFS, Public Counsel, the University of California Los Angeles (UCLA) Pritzker Center for Strengthening Children and Families, the National Center for Youth Law, and the Alliance for Children’s Rights to identify resources to sustain and grow the availability of specialized EPY conferences that work with youth individually to help connect them to needed services and support.

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 Los Angeles Sheriff’s Department (LASD) 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.**

A revised draft VFM policy has been vetted through DCFS’s stakeholder review process, Policy Review Committee, and two “meet and confer” meetings with Service Employees International Union (SEIU) Local 721. A DCFS workgroup has been formed to develop an implementation plan for the rollout of the new policy, which will be released once the plan is completed.

2) **Improve the skills of staff interviewing children.**

- DHS and DCFS have finalized a training to be delivered by County Medical Hub providers to DCFS staff—open to LASD staff as well—throughout the county 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. This training was implemented countywide in November and December 2019, with 18 trainings delivered by Hub providers. A video recording of the training was also created for future use.

- Dr. Thomas Lyon from the University of Southern California (USC) worked with DCFS and UCLA to develop a training video on different aspects of interviewing skills. The video is undergoing its final review, and, once approved, will be released as an eLearning training requirement for social workers and their supervisors.

3) **Retrain social workers on the proper use of Structured Decision Making® (SDM).**

See “Risk Assessment and System Improvement Recommendation Implementation” on page 7 for a full description.

4) **Increase collaboration between DCFS and law enforcement.**

- The DCFS/LASD pilot to conduct joint investigations of alleged child abuse and neglect in the Antelope Valley is continuing. It will expand to the Santa Clarita office—whose catchment area is served by both LASD’s Santa Clarita Station and by LAPD’s Mission and Foothill stations—beginning joint investigations with LASD in February 2020. Joint investigations between the DCFS Santa Clarita office and LAPD will begin at a later date.

- Work also continues on developing a comprehensive DCFS/law-enforcement protocol. The workgroup has been expanded to include representatives from the District Attorney and the Los Angeles Police Department.

- DCFS partnered with UCLA to develop an updated multi-agency training for the Electronic Suspected Child Abuse Report System (eSCARS). This curriculum development is underway.
5) Improve the Medical Hub system.

See the “County Medical Hubs” section on page 14 for a full description.

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

- The state finalized a new Core Academy training for supervising social workers; rollout is scheduled to begin on February 27, 2020.
- DCFS hired a consultant to conduct a full review of its current training curriculum and processes, which began in December. The consultant will provide a report with findings and recommendations that is anticipated in March 2020.
- DCFS has also expanded its Continuous Quality Improvement support, which now includes a total of 24 staff, of which 20 are co-located across the regional offices to provide teaming and quality improvement opportunities there and throughout various department-wide programs.

7) Improve the capacity to assess needs and progress made throughout the span of the case.

DPH’s Substance Abuse Prevention and Control (DPH-SAPC) unit, DMH, and DCFS have partnered to outstation substance-abuse counselors in DCFS regional offices to provide on-site support and connections to further 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 to offer guidance on how best to handle them.

- Substance-abuse counselors have been outstationed in 15 DCFS regional offices—Lancaster, Palmdale, Van Nuys, Santa Clarita, Chatsworth, Glendora, Pomona, Pasadena, Covina Annex, Metro North, West Los Angeles, Vermont Corridor, Compton East, El Monte, and Torrance. Additionally, counselors are now outstationed at a DPH office in SPA 7 to work with families served by the Belvedere and Santa Fe Springs offices.
  - DPH-SAPC reports that between April 1, 2018, and December 31, 2019, a total of 2,833 parents were referred by DCFS for substance-use screenings as a result of this program.
  - Of this number, 1,901 were screened for substance-use disorders; 1,656 of those had a positive screen and were referred to treatment services within their communities.
  - Funding for the SUD-TIPS (Substance Use Disorder–Trauma Informed Parent Support) program provided by DMH is slated to end on June 30, 2020. With no alternative funding source identified, DPH-SAPC is preparing to close
the program by that date. The OCP and DCFS are exploring options for identifying additional funding to sustain the program.

- DPH’s Domestic Violence (DV) Council is partnering with DCFS to launch a DV-DCFS Committee in February. Work will include developing ideas for providing domestic-violence expertise to DCFS social workers seeking additional support in this area.

8) **Reduce social worker caseloads.**

- After DCFS released bulletins for positions in the Antelope Valley as part of a targeted recruitment plan to increase staffing in its Palmdale and Lancaster offices, the CEO reports that all identified children’s social worker vacancies have been filled. Additionally, a new dedicated deputy director for the Antelope Valley offices has been put in place.

- Data for the DCFS Lancaster and Palmdale offices from August to November 2019 show a decrease in average emergency-response caseloads over those four months from 14.4 to 9.1 in Lancaster and from 16.5 to 10.4 in Palmdale. Average caseloads for continuing-services social workers also dropped during the same time period—in Lancaster from 20.7 to 20.3, and in Palmdale from 21.2 to 19.5.

**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. DCFS is now acting on the series of recommendations made by NCCD in January 2019 involving the use of SDM during the screening, removal, and case-opening decision process.

  - All DCFS regional administrators, assistant regional administrators, and supervisors will attend a one-day “leadership and decision-making” training led by NCCD staff. Its focus will be on sharing results from the recent fidelity review and ensuring that leadership understands both the policy changes that resulted from that review and how to facilitate case consultations with staff that integrate both proper SDM use and key elements of the DCFS core practice model. This training has begun and will be completed by April 2020.

  - All supervisors and children’s social workers will attend a two-day “safety and risk” foundational training focused on best practices in safety assessment, safety planning, and risk assessment. This training will be provided to more than 4,000 DCFS staff throughout 2020.
NCCD completed a review of how SDM is used in family reunification and case closure casework, and this report will be shared with the DCFS SDM core team in February 2020. It contains recommendations for policy changes and training recommendations for DCFS dependency investigations and continuing services. These trainings are targeted to begin in late 2020, after staff complete the safety and risk foundational trainings.

**DCFS Hotline Call-Analysis Project**

Working with DCFS to analyze the types of calls received by the Hotline that do not lead to investigations of child abuse or neglect. Over 200,000 calls are received by the Hotline each year, but only about a quarter of them lead to investigations. The remaining calls are often from people wanting to consult with DCFS on various situations, provide information to a social worker, get a status update on a case, or report an allegation that does not meet the criteria for opening an investigation. The goal of this project is to better understand the nature of these calls and determine a more effective way of triaging them, if possible, so that Hotline staff are available to spend the time needed on calls involving child safety.

**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).

- The CWPHNs are administering the Psychotropic Medication Youth Engagement Worksheet, a tool to assess and increase youths’ understanding of why they are taking medication and help ensure they have the skills and knowledge needed to manage their medications and health before they age out of the child-welfare system. To date, 311 Youth Engagement Worksheets have been initiated by the PHNs with a 42% completion rate; 58% could not be completed for various reasons, such as no response from the youth after three documented attempts, youth AWOLing or not being physically available, or youth refusing to discuss the Worksheet with the PHN.

- DPH held a special recruitment for PHNs in the Antelope Valley area, but the region continues to present a challenge for their hiring and recruitment. Of the 32 PHNs recruited from this and prior hiring fairs to fill existing vacancies within the CWPHN unit, 18 have been hired—12 for children in out-of-home care with medical conditions and 6 for families undergoing DCFS investigations and children receiving services from County Medical Hubs, or to provide care coordination for children with open DCFS cases who are residing with their parents. Eight PHNs declined the hiring offer and 6 are still in the hiring process.

- DPH has partnered with UCLA’s Semel Institute for Neuroscience and Human Behavior, its Department of Psychiatry’s Division of Population Behavioral Health, and the DMH-UCLA Prevention Center of Excellence to develop a series
of trainings and facilitated reflection sessions to help staff deal with issues related to trauma in patients, colleagues, and themselves on a daily basis.

✦ On November 7, 2019, DPH began piloting a daily tracking tool to capture children’s medical conditions and any interventions performed by PHNs both during DCFS investigations as well as for children receiving family maintenance or reunification services from DCFS. DPH expects to implement this tool countywide on February 7, 2020.

Electronic Data-Sharing Efforts

✦ Working with DCFS, the CIO, and County Counsel on a web-based portal to facilitate the electronic sharing of information relevant to investigations of child abuse or neglect across 7 County departments and DCFS, based on a Memorandum of Understanding (MOU) that the OCP finalized with 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 family members' 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 developed by the Internal Services Department, CIO, and DCFS, adding data from other departments and incorporating changes based on user feedback to improve system functioning.

✦ User focus groups and user testing sessions are being held to gather input from emergency-response workers and supervisors on how to improve the system.

✦ Working with the Los Angeles Network for Enhanced Services (LANES), DPH, County Counsel, DCFS, and the CEO to provide access to LANES, a health information exchange system, for PHNs who are helping to coordinate health care for DCFS youth. With this access, PHNs will be able to use the LANES portal to view timely health records for their child-welfare clients, as appropriate, to coordinate care and ensure effective treatment.

✦ This project was recently incorporated into a broader agreement between LANES and DPH, embedding the foster-care-use casework into the larger DPH program.

✦ User acceptance testing has begun, plus an ongoing planning process that explores how best to utilize LANES under current and optimal workflows.

✦ Design discussions have begun regarding the pilot that will mark the first phase of implementation.

✦ LANES is being built into a Memorandum of Understanding being developed between DPH and DCFS.
**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**
- A total of 10 DCFS offices are now involved in the Upfront Family-Finding project, which works to place children with their relatives as soon as they are removed from their homes.

   ✷ On January 21, 2020, the Board approved entry into a contract with the research organization Child Trends to conduct a longitudinal study of the two original Upfront Family-Finding regional offices to evaluate that project’s impact on placement stability, reunification, and more, as well as to study short-term outcomes and outputs on placement stability, reunification, number of relatives identified, and more for six of the newer project offices.

**Permanency and Self-Sufficiency Planning for Transition-Age Youth (TAY)**
- On September 4, 2019, the OCP submitted a report to the Board of Supervisors, *Increasing Stability and Permanency for Transition-Age Youth*, which contained recommendations from the OCP Permanency Workgroup on data, family reunification, Youth Permanency Units, and the Dave Thomas Foundation’s foster-child adoption project, “Wendy’s Wonderful Kids,” plus a draft analysis of programs and benefits available to eligible youth.

   - DCFS is now providing monthly data on dependency-court cases taking longer than 90 days to reach the disposition stage, youth in a plan of Another Planned Permanent Living Arrangement (APPLA), and youth awaiting the completion of their adoptions.

   - An Adoptions Workgroup will meet in March 2020 to begin outlining how and within what timeframes the adoptions process currently functions, and what might be done to streamline and speed up that process. Invited participants include staff from DCFS’s Resource Family Support and Permanency Division, or RFSPD (formerly the Adoption Division), County Counsel, the Juvenile Court, the Children’s Law Center, Public Counsel, and the Alliance for Children’s Rights.

**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), County Counsel, and others—to discuss the multidisciplinary teaming pilot led by DCFS’ Accelerated Placement Team (APT), along with DMH, to stabilize and find permanency for hard-to-place youth (overstays and chronic repeaters) at 10-day Temporary Shelter Care Facilities (TSCFs).
The County’s Commission for Children and Families conducted a high-level review of this program that included its process, data, limited outcomes, and case-coordinator interviews. That report should be finalized in February.

Pre- and post-pilot data on the number of placements for children and youth with the highest number of placements prior to entering the pilot (17 youth total), show that the average number of placements for these youth pre-pilot was 19.0; post-pilot, their average number of placements dropped to 3.4.

The average number of hours youth spent in shelter care pre-pilot was 70,462.66, compared to 37,545.16 post-pilot intervention.

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

Efforts to Improve School Stability

- Continuing to partner with DCFS, Los Angeles County school districts, and LACOE to implement the foster-youth school-stability provisions included in the federal Every Student Succeeds Act (ESSA)

- The Education Coordinating Council (ECC), DCFS, LACOE, LAUSD, and WDACS conducted a transportation pilot to keep foster youth in their schools of origin when that is in their best interest. The two-year pilot, completed on July 30, 2019, served as a “bridge solution” and learning opportunity while long-term transportation agreements between DCFS and the school districts are finalized.

- The ECC, DCFS, and LACOE are reaching out to encourage Los Angeles County school districts to sign the long-term ESSA transportation MOU.
  - To date, 6 of these—Antelope Valley, Compton, Lancaster, Palmdale, Pasadena, and LAUSD (which together serve approximately 40% of the County’s foster youth)—have signed on to the long-term MOU.
  - Of the 72 remaining districts, 19 have also signed the MOU—Alhambra Unified, Beverly Hills Unified, Burbank Unified, Centinela Valley Union High School District, Culver City Unified, Duarte Unified, El Monte Union High School District, El Rancho Unified, Glendale Unified, Monrovia Unified, Montebello Unified, Norwalk-La Mirada Unified, Paramount Unified, Rosemead School District, South Pasadena Unified, South Whittier Unified, Walnut Valley Unified, Westside Union School District, and Whittier Union.

- The 25 districts whose boards have signed the MOU serve approximately 66% of the County’s foster youth; districts with which the ECC is engaging serve an additional 12%. Monthly updates from DCFS to the Board on the progress of districts signing on to the long-term MOU continue.

- The DCFS Education Team has developed a training for social workers around the ESSA school-stability process. To date, 9 regional DCFS offices have received this training, and trainings are being scheduled throughout the rest of the year.

Support for Post-Secondary Educational Attainment

- Working with John Burton Advocates for Youth and relevant County departments to facilitate enhanced support for post-secondary educational attainment for youth in the child-welfare and juvenile-justice systems, and to implement SB 12 provisions

  ✷ DCFS, Probation, and LACOE are participating in 2019–20’s California Foster Youth FAFSA® Challenge (Free Application for Federal Student Aid), designed to increase system-involved youths’ access to financial aid for college by increasing FAFSA completion rates. Last year, Los Angeles County matched general population rates by assisting 61% of eligible system youth to complete FAFSA applications, nearly doubling its 2017–18 rate of 33% and thereby winning a “most improved” jurisdiction designation from the state.

  ✷ Partners prepared recommendations for improving financial-aid application rates among system-involved youth for the 2019–20 academic year and submitted them to the Board on October 1, 2019. Bi-weekly meetings are being held to implement the workplan developed in conjunction with those recommendations.

  ✷ DCFS, Probation, LACOE, WDACS, and John Burton Advocates for Youth conducted two separate series of FAFSA events between October 2019 and January 2020, the first geared toward training a total of 150 professionals on how to support youth with completing the FAFSA. The second was a series of 4 FAFSA workshops focused on directly providing system-involved youth with information on how to successfully access and complete the FAFSA.

  ✷ A web-based FAFSA training seminar was offered locally and throughout the state.

  ✷ As of January 2020, 25% of eligible system-involved youth in Los Angeles County have completed their FAFSA applications.
Probation has worked in the probation camps and juvenile halls to support 174 FAFSA-eligible youth, 10 of whom were identified as youth in foster care. The department has also confirmed over 50 FAFSA applications through its Placement Services Bureau.

DCFS has worked through its Independent Living Program (ILP) to complete 262 FAFSA applications.

- DCFS distributed a flyer about FAFSA via a mailer to over 1,000 DCFS resource families caring for youth 12 and older.
- Partners are currently working with the state to update the Transitional Independent Living Plan (TILP) form to address education planning and account for new SB 12 requirements.
- A new and improved data-sharing protocol was developed between LACOE and the California Student Aid Commission to include in its system Chafee Grant competition data as well as FAFSA/California Dream Act Application information.

School-Based Healing-Informed Arts Education

- Working with the Los Angeles County Department of Arts and Culture and DMH 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.

- Arts and Culture convened a three-day professional development exchange in November 2019 that included a diverse group of 23 artists, administrators, mental health community providers, advocates, and DMH and OCP staff to explore how the arts, the Arts for Incarcerated Youth Network (AIYN) model, the evidence-based Youth Mental Health First Aid program, and healing-informed approaches can strengthen protective factors to support the well-being of youth.

- Arts and Culture is convening a group of DMH and OCP staff, community artists, and mental health providers to develop a curriculum that integrates core concepts from the Youth Mental Health First Aid training and AIYN’s shared theory of practice.

- Beginning in February 2020, professional-development training and healing-informed arts instruction will begin field-testing in the following school districts: Los Angeles Unified, Pasadena Unified, Antelope Valley Union High School, and Pomona Unified. An MOU is being finalized between LAUSD and Arts and Culture to deliver services, and Arts and Culture is securing dates to implement the professional-development and arts-instruction delivery with other participating districts.

- Arts and Culture has contracted with an evaluator, Harder and Company, to develop and implement an evaluation of the arts education pilot. The evaluators are
conducting key interviews, researching outcome instruments, and holding bi-weekly meetings with Arts and Culture to monitor progress and coordinate actions.

**Workforce Development**

- In August, the departments of Workforce Development, Aging and Community Services (WDACS) and Human Resources (DHR) issued their first annual report on the Countywide Youth Bridges Program (CYBP). This program, launched in December 2017, is the County’s first public-sector strategy to establish a direct talent pipeline of next-generation County employees.

  - The program provides youth ages 16 to 24 with 120 hours of work experience. Once these initial hours have been completed, youth who are 18 years or older are encouraged to apply for a 12-month full-time internship within the County.

  - Training in and implementation of the WDACS-developed Automated Referral System (ARS)—designed to coordinate and streamline referrals for foster, probation, and homeless youth to the public workforce system—has begun for all DCFS offices. Once DCFS is connected, the system will expand to include the P&A network agencies, youth development and diversion agencies, and other select community organizations.

**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 (Phase II). To date, 32 of the 43 milestones identified in Phase I of the work plan have been completed, with the remaining 11 in progress. Over the last 18 months, examples of key accomplishments during Phase I include:

1) **Improved Timeliness for IMEs and Forensic Exams**

- DHS has improved the timeliness of 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 chart on page 15 illustrates decreases in the average number of days between detention date and IME-completion date for newly detained children from 2017 Q2 to 2019 Q3. DHS is currently finalizing data reports that will include timeliness measures for the under-3 population.

- Overall, appointment availability has been improved so that forensic exams are available within 24 to 48 hours and IMEs within 24 hours to two weeks.
2) Increased Staffing to Support Hub Core Services

- DHS forensic-exam providers piloted the availability of 24/7 phone availability to DCFS workers and regional medical centers in the Antelope Valley for forensic consultation and referral assistance. DHS is finalizing a process to provide after-hours regional phone consultations to DCFS and regional medical centers throughout the county, utilizing its existing 24-hour hospitals and/or on-call child abuse pediatricians.

- DHS, DMH, DPH, and DCFS, working with the CEO, added 87 net positions through the FY 2019–20 Supplemental Budget process to meet the demand for core services and expanded hours at the 6 DHS Medical Hubs.

  - DHS added 50.0 positions (partially offset by the deletion of 6.0 vacant positions) that include medical providers, nursing staff, and support staff. DCFS added 5.0 social worker and supervisor positions; DMH added 30.0 positions that partially reconciled 21.0 borrow/loan positions it had used to quickly staff the Hubs, including mental health clinicians, supervisors, and support staff. DPH added 8.0 public-health nurse and clerical-staff positions.

  - Recruitment efforts through DHS, DMH, DPH, and DCFS include job postings for new-hires, reviewing existing lists of qualified candidates, and posting transfer-opportunity bulletins. For regions that are harder to recruit for, like the Antelope Valley, DHS is using a recruitment firm and offering incentives. DPH, DMH, and DCFS are working together to clarify co-located staff workflows and address space constraints at some of the Hub clinics.

  - The table on page 16 summarizes the hiring status of the new positions by department and Medical Hub.
<table>
<thead>
<tr>
<th>DHS Medical Hub</th>
<th>DCFS*</th>
<th>DHS</th>
<th>DMH</th>
<th>DPH</th>
</tr>
</thead>
<tbody>
<tr>
<td>MLK</td>
<td>Hired 1 staff for extended hours</td>
<td>Hired 4 medical providers; interviewed for 3 support staff positions</td>
<td>Hired 1 staff; interviewing for 2 positions</td>
<td>PHN identified and hiring in progress; recruiting for ITC position</td>
</tr>
<tr>
<td>LAC+USC</td>
<td>Hired 1 staff for after-hours</td>
<td>Hired 1 Nurse Practitioner (NP); interviewing for other positions</td>
<td>N/A (mental health services provided by contractor)</td>
<td>PHN identified and hiring in progress; recruiting for ITC position</td>
</tr>
<tr>
<td>East San Gabriel Valley (ESGV)</td>
<td>No new positions added</td>
<td>Interviewing for all positions</td>
<td>N/A (mental health services provided by contractor)</td>
<td>Recruiting for ITC position</td>
</tr>
<tr>
<td>Harbor-UCLA Medical Center (HUMC)</td>
<td>No new positions added</td>
<td>Hired all positions</td>
<td>Interviewing for 2 positions</td>
<td>Recruiting for ITC position</td>
</tr>
<tr>
<td>Olive View Medical Center (OVMC)</td>
<td>No new positions added</td>
<td>Hired 1 pediatrician; interviewing for all other staff</td>
<td>Hired all positions</td>
<td>Recruiting for ITC position</td>
</tr>
<tr>
<td>HDRHC</td>
<td>Identified 1 staff for extended hours (start date pending)</td>
<td>Hired 1 NP and interviewing for another NP and physician positions; hired 2 nursing positions and 1 support staff position; interviewing for other support staff positions</td>
<td>Hired 2 staff; interviewing for 1 position; recruiting for 3 positions</td>
<td>ITC identified and hiring in progress; recruiting for ITC position</td>
</tr>
</tbody>
</table>

*DCFS has also hired one supervisor position to supervise staff at multiple Hub sites, and a second supervisor has been identified with a start date pending.

- Once all the additional positions are filled and space logistics have been addressed, the DHS Medical Hubs will expand their clinic hours as shown in the table on page 17.
<table>
<thead>
<tr>
<th>DHS Medical Hub</th>
<th>Current Hours of Operation</th>
<th>Expanded Hours of Operation (Pending Hiring of Additional Staffing)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MLK</td>
<td>8:00 a.m. to 7:30 p.m.</td>
<td>8:00 a.m. to midnight</td>
</tr>
<tr>
<td>LAC+USC</td>
<td>24/7</td>
<td>Continue 24/7</td>
</tr>
<tr>
<td>East San Gabriel Valley (ESGV)</td>
<td>8:00 a.m. to 5:00 p.m.</td>
<td>8:00 a.m. to 8:00 p.m.</td>
</tr>
<tr>
<td>Harbor-UCLA Medical Center (HUMC)</td>
<td>8:00 a.m. to 6:00 PM, with 24/7 urgent operations</td>
<td>Continue 8:00 a.m. to 6:00 p.m., with 24/7 urgent operations <strong>Expanded hours implemented January 6, 2020</strong></td>
</tr>
<tr>
<td>Olive View Medical Center (OVMC)</td>
<td>8:00 a.m. to 4:30 p.m., with 24/7 urgent evaluations</td>
<td>8:00 a.m. to 8:00 a.m., with 24/7 urgent evaluations <strong>Expanded hours implemented January 6, 2020</strong></td>
</tr>
<tr>
<td>HDRHC</td>
<td>8:00 a.m. to 4:30 p.m.</td>
<td>8:00 a.m. to 8:00 p.m., with urgent evaluations available to 10:00 p.m.</td>
</tr>
</tbody>
</table>

3) Improved Policies, Workflows, and Trainings

- Identified workflow improvements, particularly related to optimizing documentation, streamlining current Hub data systems, and improving service integration among co-located staff

- DCFS is working with DHS and DMH to enhance the Medical Hub Referral form to help clarify exam needs for youth being referred and include additional fields that will auto-populate to streamline the overall Hub referral process. The updated form will be finalized by February 28, 2020; DHS and DCFS will then work on next steps to automate the form in their respective data systems.

- Completed 9 cross-trainings in the Antelope Valley between DHS, DCFS, and LASD in 2019 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. This training was implemented countywide in November and December 2019, with 18 trainings delivered by Hub providers. A video recording of the training was created for future use. DHS is also working on a cross-training on sexual abuse.

- Aligned the DCFS policy on forensic exams related to allegations of child sexual abuse with the DHS protocols on forensic exams. DCFS, DHS, and the OCP are also in the process of improving communication and the understanding of forensic medical-exam results between Hub providers and DCFS social workers through cross-trainings, multidisciplinary team meetings, and child-abuse pediatrician peer-review processes.

- Drafting an interagency MOU for the DHS Hub clinics that will include the DHS Medical Hubs’ target population, core services, and roles and responsibilities for
the co-located departments at the hubs; also drafting a working agreement between DCFS, DPH, and CHLA for Hub core services

- Global research/advisory firm Gartner and DHS are collaborating to collect information and prepare a project proposal for the interface between DHS’s electronic health record system—the Online Real-time Centralized Health Information Database, or ORCHID—and the web-based system used by the Medical Hubs, E-mHub. DHS is in the last stages of collecting cost and time information to package for approval through the project governance process. The Security IT Workgroup has also been engaged, and information is being gathered to vet the new Protected Health Information/Personally Identifiable Information (PHI/PII) data flow. Once this project is approved, DHS will move forward with the technical design for the interface and changes required in ORCHID.

- DPH’s Oral Health Program and the UCLA Dental Transformation Initiative implemented oral-health trainings for DHS Medical Hub providers, holding two Primary Care Practice Quality Improvement trainings with 14 medical providers from the East San Gabriel Valley and Olive View Hubs that covered best practices on integrating oral-health preventive services into well-child visits for children younger than 6 years.

- Brokered collaborations between the Hubs and their corresponding P&A networks so that DHS Hub, general pediatric, and emergency department providers will refer families for an array of supportive services to the P&A in their communities, when needed.

- DHS will implement rollout of the Pediatric ACEs and Related Life-Events Screener (PEARLS) tool, which will identify children who have been exposed to adverse childhood experiences, at several DHS clinics and three Medical Hubs—High Desert, East San Gabriel Valley, and Olive View.

4) Obtained Stakeholder Feedback

- DCFS implemented a caregiver survey in February 2019 to assess caregiver experiences at the Medical Hubs. Survey topics included appointment/scheduling processes, quality of care, and barriers to accessing the Medical Hubs (transportation, insurance issues, timeliness, etc.). Surveys were sent to over 360 caregivers and 112 surveys were returned.

- Caregiver convenings were implemented at the ESGV, Harbor-UCLA, MLK Jr., High Desert Regional Health Center Medical, Olive View, and LAC+USC Hubs between July and December 2019. Caregivers were given an overview of the Hubs’ core services and offered feedback on the strengths and areas of improvement/potential growth of the Hubs.

- Met with DCFS regional administrators to obtain feedback on the strengths of and areas of improvement needed in the Hubs, provide an overview of the Hubs’ core
services and key contact information for each Hub, and discuss the process for addressing or clarifying any Hub-related issues or questions through the Hub Directors Workgroup or the Hub Department Leads Workgroup facilitated by OCP.

- Partnered with the Children’s Law Center and the National Center for Youth Law to organize a focus group for 11 transition-age youth who received services across the various Medical Hubs in December 2019.

**County Medical Hubs Next Steps—Phase I Implementation and Phase II Planning**

To date, much progress has been made during Phase I to improve core services at the Medical Hubs countywide. Logistical challenges still exist to effectively implementing Phase I, including space limitations, cost constraints, and ensuring consistency in policy and workflow implementation across the departments and each Hub site. The Hub Department Leads Workgroup has agreed that a Phase 1.5 should be implemented to provide more time to track and adapt to the changes made during Phase I implementation. Logistical challenges must also be addressed before Phase II can be planned and implemented. The Hub Department Leads Workgroup will continue to gather feedback from stakeholders as it develops a plan for Phase II. It is anticipated that the first half of 2020 will focus on Phase 1.5, and a high-level Phase II plan will be forthcoming in fall 2020.

Some potential areas that stakeholders have raised for consideration in Phase II include:

- Medical clearances for all youth within 72 hours
- Expanding the primary care/medical home model at the Hubs
- Adding additional target populations such as juvenile justice/probation youth and at-risk youth/families
- Adding motivational interviewing to help with treatment linkages for youth with substance-abuse issues and integrating the DPH Substance Abuse Prevention and Control (SAPC) program at the Hubs
- Expanding mental health services at the Hubs

**Dental Screenings and Exams**

- Working with DCFS, DPH, DHS, and UCLA to develop a plan for increasing the number of foster youth receiving dental screenings and exams, when needed, within policy timeframes.
- DCFS, DPH’s Oral Health Program, UCLA’s Dental Transformation Initiative, and the OCP implemented oral health trainings at the Edelman Children’s Court and at the Santa Clarita and South County DCFS offices for 56 workers in November and December 2019. These 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. DCFS, DPH, UCLA, and OCP are
working on developing strategies to provide resources to even more social workers, including providing trainings on the More LA Smiles dental initiative (led by UCLA) online platform.

✧ OCP, DCFS, DPH, and UCLA are working with the Los Angeles Foster and Kinship Care Education (FKCE) program to implement a train-the-trainer program so the 19 community colleges that offer resource-parent trainings can provide oral health trainings to potential caregivers who are beginning the Resource Family Approval process. FKCE trainers will be trained on January 31, 2020, and caregiver trainings will be implemented in February and March 2020.

Mental Health Coordination

• Working with DCFS and DMH to implement an independent process evaluation of the Multidisciplinary Assessment Team (MAT) and the overall front-end assessment process to help inform how mental health processes can be streamlined for DCFS-involved youth. DCFS and DMH are jointly funding the evaluation, and the OCP is managing the independent contractor, the California Institute for Behavioral Health Solutions (CIBHS), to implement the evaluation; we anticipate a complete report by mid-2021. Efforts to date include:

✧ Convened subject-matter experts, including DCFS/DMH program and data staff plus representatives from the Children’s Law Center and the Association of Community Human Service Agencies (ACHSA), to help inform an evaluation strategy. The evaluator will continue to engage stakeholders and subject-matter experts (e.g., MAT providers) during the evaluation.

✧ A draft evaluation plan has been completed and is currently being vetted by DCFS and DMH.

✧ Submitted a research petition to the Juvenile Court and are working with DCFS’s and DMH’s data and privacy teams to develop a process for CIBHS to access the DCFS/DMH information needed for the evaluation.

Addressing Psychototropic Medication Use in Child Welfare

• Monthly meetings of the Psychototropic 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.

✧ A quarterly update of psychotropic medication data was received based on a December 31, 2019, snapshot from DCFS and Probation.

✧ DCFS data indicate that 1,424 children are being administered psychotropic medications, which is 7.66% of foster children—a slight uptick from the previous quarter’s 1,363 children, or 7.3%.
313 foster children are being administered anti-psychotic medications, which is 21.98% of foster children on meds—slightly fewer than in the previous quarter.

681 foster children are being administered more than one psychotropic medication, which is 47.82% of foster children on meds—again, a slight decrease from the previous quarter.

Probation data indicate that 48 youth who are suitably placed are being administered psychotropic medications, which is slightly less than 8% of those in suitable placement.

6 youth in suitable placement are being administered anti-psychotic medications, which is slightly more than 1% of suitably placed youth on meds.

17 youth in suitable placement are being administered more than one psychotropic medication, which is 35% of suitably placed youth on meds.

45 of 61 youth at Dorothy Kirby Center are being administered psychotropic medications, which is slightly less than 74% of youth at that location; 23 of those youth are on more than one psychotropic medication.

175 of 549 youth in the juvenile halls are being administered psychotropic medication, which is slightly less than 32% of youth in the halls; 79 youth are on more than one psychotropic medication.

90 of 252 youth in probation camps are being administered psychotropic medication, which is slightly less than 36% of camp youth; 33 are on more than one psychotropic medication.

The Psychotropic Medication Youth Engagement Worksheet has been fully implemented by the DPH child-welfare unit’s public health nurses and by Probation. DCFS has not yet fully implemented the worksheet; full implementation is expected shortly.

DPH and DMH are still developing a process to ensure that all necessary lab tests occur for youth who are being administered psychotropic medications.
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 with monthly meetings of the Dual-Status Youth Workgroup’s two subcommittees—Delinquency Prevention and WIC 241.1 Multidisciplinary Team (MDT).

 The Delinquency Prevention Subcommittee has initiated discussions on cross-over youth who touch both the juvenile-justice and child-welfare systems, but not simultaneously. A comprehensive report and recommendations on delinquency prevention throughout both systems is in the works and expected to be finalized by late spring 2020.

 The WIC 241.1 MDT Subcommittee continues its redrafting of the WIC 241.1 protocol that requires DCFS and Probation to jointly assess any youth who comes within the description of WIC 300 and WIC 602. A complete draft of the protocol was distributed to stakeholders in December 2019 and is currently being vetted.

Additional OCP Activities

• Participate on DPH’s Office of Violence Prevention Leadership Committee

• Participate in the Strengthening Economic Supports Subcommittee for the state’s Essentials for Childhood initiative

• Participate in DCFS’s advisory workgroup on planning for the Families First Prevention Services Act

• Participate on the state’s Comprehensive Risk Aid (CRA) Steering Committee

• Participate on the advisory board for DCFS’s Invest LA initiative

• Participate on the CIO’s Business Management Committee for Countywide data-sharing

• Participate in the steering committee to establish a family treatment court in Los Angeles

• Participate in the Project ABC Governance Board on serving young children and their families
• Participate in the Youth Justice Work Group that is developing recommendations for the most effective structure needed to best serve probation youth

• Developing a response to Board motion on the tragic death of Andrew M.

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, or your staff may contact Carrie Miller at (213) 893-0862 or via email at cmiller@ocp.lacounty.gov.

MN:eih

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