WHERE ARE ORANGE COUNTY’S FOSTER CHILDREN?

SUMMARY
One in four of Orange County’s foster children do not live in Orange County (OC), while OC’s group homes for foster kids are shutting their doors due to empty beds. This leads to a complicated system of delivering social services to children outside OC, in spite of the fact that OC group homes integrate therapeutic programs into placement.

Nationally, the focus of Child Welfare has shifted from congregate care to support for permanent placement in terms of reunification, kinship care, foster care, or adoption. The philosophy of Children and Family Services is that “even mediocre foster care is better than the best congregate care.”

With reunification as the ultimate best-case scenario, as well as the end result for the majority of dependency cases nationally, it is complicated when the children are placed outside the county. A contract with a non-profit vendor provides transportation to and from OC for parents and children to address the reunification issues, but at a cost that seems high given the hours of travel time involved.

The good news is that OC has fewer children in dependency and the statistics appear positive. The bad news is that OC seems to be exporting its children to neighboring counties instead of looking for solutions within the county.

REASON FOR INVESTIGATION
As of February 22, 2007, 26% or 722 of Orange County’s 2792 foster children in out-of-home placement were residing in other counties (see Table 1). This situation places a burden on the children, parents and Social Workers whose caseloads are not reduced while they spend hours on freeways. According to the U.S. Department of Health and Human Services Administration for Children and Families Child Welfare Information Gateway, family engagement is fundamental to successful reunification, along with the relationship between the caseworker and family, and the involvement of foster parents. How is this being accomplished and at what cost?

Table 1 - OC Child Placement as of February 22, 2007
(Provided by OC Social Services Agency (SSA))

<table>
<thead>
<tr>
<th></th>
<th>Orange County</th>
<th>Riverside</th>
<th>San Bernardino</th>
<th>Los Angeles</th>
<th>San Diego</th>
<th>Other Areas</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relative/Guardian</td>
<td>1,117</td>
<td>138</td>
<td>58</td>
<td>127</td>
<td>25</td>
<td>100</td>
<td>1,565</td>
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<tr>
<td>Foster Family Home</td>
<td>291</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>291</td>
</tr>
<tr>
<td>Foster Family Agency</td>
<td>368</td>
<td>91</td>
<td>69</td>
<td>54</td>
<td>17</td>
<td>5</td>
<td>604</td>
</tr>
<tr>
<td>Group Home</td>
<td>180</td>
<td>2</td>
<td>13</td>
<td>6</td>
<td>1</td>
<td>9</td>
<td>211</td>
</tr>
<tr>
<td>OCH</td>
<td>85</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>85</td>
</tr>
<tr>
<td>Other Placement</td>
<td>29</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>4</td>
<td>36</td>
</tr>
<tr>
<td>Total</td>
<td>2070</td>
<td>232</td>
<td>140</td>
<td>189</td>
<td>43</td>
<td>118</td>
<td>2,792</td>
</tr>
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</table>
OC spends more than $1 million each year in transporting parents and children for both monitored and unmonitored visitation and another half million dollars in mileage paid to social workers, according to information provided by OC SSA Children and Family Services (CFS). Additionally, mileage is paid to kinship care providers and foster parents for monitored and unmonitored visits, as well as meetings with SSA.

At this time, the temptation is great for OC group homes to sell their facilities at a profitable price and buy in neighboring counties paying less for larger homes, especially since many OC group homes, in order to keep their doors open, are filled with children from Los Angeles (LA) County.

METHOD OF INVESTIGATION

- Interviews with CFS personnel; group home providers, congregate care providers, Foster Family Agencies (FFAs), foster parents.
- Research legislation and Federal and State statutes and codes.
- Tours of group homes, congregate care facilities, Dependency Court, Juvenile Court, Juvenile Justice Commission, Child Abuse Registry (CAR), Child Abuse Services Team (CAST), SSA Ride-along, Probation facilities.

BACKGROUND

Federal and state laws, with outcome-driven mandates, have impacted how the SSA CFS provides for foster children. In a statistics driven environment, the number of placement moves a foster child goes through is one of the indicators the federal government uses to measure the effectiveness of programs. OC has problems, as has the state, in meeting those federal standards. Since OC has a children’s emergency shelter, Orangewood Children’s Home (OCH), OC is able to provide a safe, secure place for traumatized at-risk children. From a practical standpoint, OCH is a valuable resource, but because it is considered “congregate care,” any stay over 24 hours is considered a “placement.” During the first 23 hours that a child is under the purview of CFS, every effort is made to find a relative or person known to the child who is willing and able to care for the child. CFS social workers conduct “livescans” for background checks. Anyone who can possibly take the child and support the parent is invited to attend an emergency Team Decision Meeting (TDM) where placement options are determined.

In 1997, Congress passed the Adoption and Safe Families Act, Public Law 105-89 (ASFA), which mandated that all states meet prescribed goals. In the first three-year review cycle, not one state was able to meet all standards of compliance. In 2000, California’s legislature created a statewide Child Welfare Stakeholders Group to review the system and make recommendations for improvement and change. The result was AB 636, the Child Welfare System Improvement and Accountability Act, which holds counties and the state agencies accountable for the outcomes achieved. The implementation of the Act’s provisions created what is formally known as the California Child and Family Review System (C-CFRS), implemented in January, 2004. It operates on the philosophy of continuous improvement, interagency partnerships, community involvement and public reporting of outcomes. The key components are:
• Quantitative Data: Quarterly Reports
  o Each quarter the state provides county child welfare agencies with specific data on outcome measures related to safety, permanency and well-being that is county specific.

• Quantitative Data: Peer Quality Case Reviews
  o Social Workers from different counties examine a group of cases and review whether there was family involvement in case planning and whether families received the services needed. The case reviews reflect best practices as well as those that need improvement.

• Self-Assessment
  o On a three-year basis, counties submit a comprehensive analysis of how they are performing based on Quarterly Reports and the Peer Quality Case Reviews.

• System Improvement Plan
  o Each county submits a system improvement plan to the California Department of Social Services (CDSS) to achieve outcome improvements within a certain time frame and this plan is updated annually.

The C-CFRS evaluation system uses 14 performance indicators, including measuring the number of children who are in foster care, the rate of recurrence of maltreatment while in foster care, the number of placements, length of time to reunification with birth parents and rate of adoption. For the states and counties, the stakes are high -- if California's Program Improvement Plan, based on the federal review in 2002, fails to substantially comply with federal standards, a penalty up to $25.8 million could be imposed as of 2006. This data is from the Legislative Analyst's Office, analysis of the 2007-2008 budget bill.

The Child Welfare System is constantly adapting to meet the needs of an ever changing demographic. Also, the profile of the child in placement changes, as does our society, and is a bellwether indicator of society's ills.

OC has embraced the Annie E. Casey Foundation’s Family to Family model, and the statistics indicate that it has been successful. The number of OC children in placement is half that of San Diego County’s, even though both counties have about the same population.

The goals from the Annie E. Casey Foundation's Family to Family Initiative include:

- Developing a network of family foster homes that are neighborhood based, culturally sensitive, and located primarily in the communities where the children live;
- Increasing the number of foster families;
- Involving the parents, foster parents and kinship families in decision making;
- Reducing the length of time in out-of-home care; and
- Providing support services to the caregivers.

States participating in the Family to Family Initiative are asked to commit themselves to achieving the following outcomes:

1. “A reduction in the number of children served in institutional and congregate care.
2. Shifts of resources from congregate and institutional care to family foster care and family-centered services across all child and family-serving systems.
3. A decrease in the lengths of stay in out-of-home placement.
4. An increase in the number of planned reunifications.
5. A decrease in the number of re-entries into care.
6. A reduction in the number of placement moves experienced by children in care.
7. An increase in the number of siblings placed together.
8. A reduction in the total number of children served away from their own families.
9. A reduction in any disparities associated with race/ethnicity, gender, or age in each of these outcomes.”

Family Reunification
Reunification is the most common goal as well as outcome in dependency cases, according to preliminary estimates from the Adoption and Foster Care Analysis & Reporting System (AFCARS). This is the federal data as reported with outcome measures.

Children leaving foster care who are able to achieve reunification have common characteristics:

• Engagement between the caseworker and family, more parent-child visitation, and more involvement of foster parents;
• Assessment and case planning, with individualized needs assessment and clear goals that are mutually established; and
• Service delivery with cognitive-behavioral, multi-systemic, skills-focused elements in the plan and delivery, as well as post-reunification services.

The successful cases have more frequent caseworker contact with the establishment of open, honest communication with the parents. The caseworker provides instruction and reinforcement to the parent and child in the performance and completion of mutually agreed upon activities. Family participation and feedback is programmed into the planning process. Effective visitation incorporates the opportunity to build parental skills and improve parent-child interaction with a therapeutic focus.

Involvement of foster parents facilitates family reunification through mentoring of the birth parents and the support of their visitation. The development of a positive relationship may allow children to avoid the stress of divided loyalties.

In order to address the underlying causes of child maltreatment, an accurate differential assessment is essential. This involves developing an individualized, family-centered understanding of a child and family’s circumstances, environment, and potential in order to identify each of the family’s unique needs. First and foremost, the assessment must determine the extent of risk to the child. Standardized tools to aid assessment offer promise. OC utilizes Structured Decision Making (SDM), which is a system that addresses all areas of child welfare:

• Screening criteria
• Response priority
• Safety assessment
• Risk assessment
• Child strengths and needs assessment
• Family strengths and needs assessment
• Case planning and service standards
• Case reassessment

Services
Social services offered to foster children and their families must be reasonable and comprehensive, addressing all aspects of family life. A safe environment must be created for the child that can be maintained in home, school and community. Concrete services may include food, transportation, housing, and utilities, following child welfare best practice.

Substance abuse treatment must include:
• intensive case management;
• tailoring programs for women with children; and
• strong social support.

Home-based services must include:
• intensive casework services;
• parenting and life skills education; and
• family focused treatment with assistance from community resources.

Post-reunification services include:
• services that enhance parenting skills;
• provide social support;
• connect families to basic resources; and
• address children’s behavioral and emotional needs.

Concurrently with the case management and services provided to the family, a permanency plan is put in place for each child.

Kinship care is preferable in keeping foster children within a nurturing, non-stranger environment when their parents are unable to care for them because of drug addiction, domestic violence, incarceration, abandonment, or illness. This is the prevailing philosophy in child welfare. California recently passed legislation to establish a workgroup to review all caregiver licensing statutes, regulations, and policies to make them more children focused and appropriate. An emergency bill passed in September, 2006, streamlined the licensing and approval process for relative caregivers. Another authorized foster parents and relative caregivers to attend all review hearings relating to the adoption or legal guardianship. Three bills that addressed recruitment, retention and support for foster caregivers, including kinship care, and adoptive families did not become law. While many states across the country have enacted legislation to ease the burden of fostering grandchildren, nieces and nephews, the level of support varies widely. According to federal statistics, in 2004 California had 389,631 children living in households headed by grandparents or other relatives without either parent present. Nationally, the figure is 2.5 million children. Placing large sibling sets with relatives is preferable, but is extremely difficult. In the past there was a “revolving door” at OCH because the foster families were not being given enough funds and support
to effectively handle their foster children. Today, according to CFS, OC has had fewer children returned to OCH because CFS is providing more services and support to kinship caregivers.

County licensed Foster Family homes are homes that can be licensed for up to six children. These foster parents deal directly with the county and are in short supply. They are the preferred providers for out-of-home placements.

Foster Family Agencies (FFAs) are licensed by the state and operate as non-profit agencies. They recruit, certify and train foster parents who will take in children requiring more intensive care as an alternative to group home placement. There are two types of FFA programs, “treatment foster care or therapeutic foster care” and “non-treatment foster care.” A non-treatment FFA certifies a home for placement of a child pending the adoption or reunification of the child.

All FFAs provide professional support to the foster parents. According to CFS, the foster homes must receive from the FFA a minimum of 40% of the funds per child for room, board and incidentals. The FFA can use only 15% for administrative costs that include social worker case managers who interact with the children on a more frequent level than county social workers, who must have a face-to-face visit once per month. The remaining funds are used to provide goods and services for the child, such as a musical instrument for band or a cheerleading uniform. In order for a FFA to break even, it must have about 40 children in its certified foster homes.

Group homes have been a placement option in terms of having services, including mental health services, delivered on premises to children. Group homes provide the most restrictive environment for children in foster care with very significant emotional or behavioral problems. They are categorized by Rate Classification Levels (RCLs) on a point basis from 1 to 14. The higher the RCL number, the higher the service level, with 14 requiring a psychiatrist’s recommendation for placement; otherwise, the needs of the child are determined at the TDM to specify the level of care and services, using the least restrictive care possible, by the team of people involved with the child.

Some group homes provide an intense therapeutic setting such as a “residential treatment center” that may target a specific population of children with issues such as substance abuse, fire setting, sexual offenders, minor-parent, mental health, emancipation and reunification.

Data is not available to determine how many children who fall under the auspices of CFS exit because they have committed a crime and become adjudicated under the Juvenile Court and Probation. Conversely, some juveniles complete their sentences with Probation and reenter the system because reunification is impossible and the children are minors with no place to go. With certain children, Probation finds placement in specific group homes that target their needs in a therapeutic setting.

Congregate care in a large institutional setting is the least desirable placement for foster youth under the current philosophy; however, San Diego has a model program at the San Pasqual Academy. All the children from 12 to 18 years of age are selected through a referral and interview process. They live in cottages with parent models and attend an alternative
school on-grounds staffed by San Diego County Department of Education. Through the collaboration of San Diego County and the community, the Academy has a very high success rate for these children going on to college. Private industry has provided state-of-the-art equipment for the media center. When asked about the Academy, residents call it “home.” When those youths who attend four-year universities have vacation time, they go back to the Academy. There is a complete program to address emancipated youth and it also incorporates elderly people from the community into the program as volunteers. The Academy itself is operated by a non-profit FFA.

CONCLUSION
SSA and CFS are addressing the ever-changing landscape of Child Welfare in OC. Most of the observed employees appear to be hard working and very dedicated to the children they serve. Nationally, there is movement to address high caseloads. A 2006 survey conducted by the U.S. Government Accounting Office (GAO) addresses high caseloads, recruitment and retention of employees in child welfare. OC’s caseload is based on a 2000 study, and there may be changes in best practice in the near future.

There are not enough foster homes in OC to accommodate the number of children requiring out of home placement. CFS is reluctant to place children in OC group homes and therefore is outsourcing OC’s children to foster homes, group homes, and FFAs outside of OC. Traffic congestion is an everyday issue in Southern California. Transporting people to L.A., Riverside, and San Bernardino counties is an expensive arrangement that contributes to congestion and pollution.

Even though a social worker can schedule several children for visits out of county, the distance and time involved could have a negative impact on the social workers. Furthermore, trying to reunify the family and child over a distance is difficult. Recently, legislation to restrict Group Homes from exclusively housing out of county residents was proposed in the State Assembly.

FINDINGS
In accordance with California Penal Code sections 933 and 933.05, each finding will be responded to by the government entity to which it is addressed. The responses are to be submitted to the Presiding Judge of the Superior Court. The 2006-2007 Orange County Grand Jury has arrived at the following findings:

F-1. SSA has not lowered caseloads for those social workers serving out of county child placements.

F-2. The lengthy travel time to clients outside of OC by Social Workers may reduce time available for actual social work.

F-3. Group homes in Orange County are underutilized by OC CFS.

F-4. More than $1.5 million dollars is being spent for transportation to OC foster children yearly, not including mileage paid to caretakers.
F-5. There exists interest and support in the OC community for the San Pasqual model program.

Responses to Findings F-1 through F-5 are requested from Orange County Social Services Agency.

RECOMMENDATIONS
In accordance with California Penal Code sections 933 and 933.05, each recommendation will be responded to by the government entity to which it is addressed. The responses are to be submitted to the Presiding Judge of the Superior Court. Based on the findings of this report, the 2006-2007 Orange County Grand Jury makes the following recommendations:

R-1. Caseloads of social workers should be adjusted to factor in out of county placements.

R-2. In order to reduce travel time for caseworkers, families and children, SSA should encourage placement of children in FFAs and Group Homes within OC.

R-3. SSA should engage in collaborative discussions with OC group homes to improve their relationships and reduce outsourcing of OC foster children to neighboring counties.

R-4. Money saved in transportation costs could be considered as the financial incentive to promote more OC foster care and group home providers.

R-5. SSA should consider the San Pasqual model program for a similar facility in OC.

Responses to Recommendations R-1 through R-5 are requested from the Orange County Social Services Agency.

RESPONSE REQUIREMENTS
The California Penal Code specifies the required permissible responses to the findings and recommendations contained in this report. The specific sections are quoted below:

§933.05(a) For purposes of subdivision (b) of Section 933, as to each grand jury finding, the responding person or entity shall indicate one of the following:
(1) The respondent agrees with the finding.
(2) The respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons therefore.

(b) For purposes of subdivision (b) of Section 933, as to each grand jury recommendation, the responding person or entity shall report one of the following actions:
(1) The recommendation has been implemented, with a summary regarding the implemented action.
(2) The recommendation has not yet been implemented, but will be implemented in the future, with a timeframe for implementation.
(3) The recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a timeframe for the matter to
be prepared for discussion by the officer or head of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This timeframe shall not exceed six months from the date of publication of the grand jury report.

(4) The recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation therefore.