

**TRINITY COUNTY GRAND JURY  
2009-2010**

**Health and Human Services Committee  
HHR2009/2010-003  
Final Report**

**Trinity County  
Youth Services and Family Services Review**

**Approved June 1, 2010**

**Ronald D. Ward**

**2009-2010 Trinity County Grand Jury**  
**Health and Human Services Committee**  
**Youth Services and Family Services Review**

**Summary**

All counties under the State of California Child Welfare System and Accountability Act (AB 636) are mandated to assist children and families with their safety, permanency, and well-being. The Trinity County Grand Jury elected to review how Trinity County Health and Human Services (TCHHS) carries out this mandate, with the marked increase in need for emergency intervention services. The Health and Human Services Committee found that TCHHS offers an expanded response, focuses on families' individual needs, and involves the families in the decision-making process through collaboration with its valued community partners.

**Background**

**Federal and State Mandates for Improving the Child Welfare System**

In 1997 Congress passed the Adoption and Safe Families Act, Public Law 105-89 (AFSA). This Act emphasized children's health and safety first and established a new set of outcomes for safety permanency goals that state child welfare systems had to meet within three years. No state was able to meet these goals within the three years allotted. In 2001 the California State Legislature enacted the AB 636 Act. This Act offers three primary strategies to satisfy state and federal requirements for improving a child's safety, permanence, and well-being. These strategies are Differential Response (DR), Standardized Safety Assessment (SSA), and Permanence.

The first strategy is Differential Response, which provides prevention/intervention services to at-risk families through three pathways:

Path (1) A community partner responds for children with no-or-low risk of abuse or neglect who do not meet the statutory definition for intervention and response.

Path (2) A community partner and social worker respond for children with low-or-moderate risk who do not meet the statutory definition for intervention and response, but are willing to work with a community responder and social worker

on the family's problems. Should the situation deteriorate, the social worker intervenes as needed.

Path (3) A social service agency responds for children with moderate-to-high risk who do meet the legal definition for intervention and response (the child is not safe). The social worker takes action with or without the family's consent, a court order may be involved, and criminal charges filed. This path is the most similar to child welfare system's traditional response.

The second strategy is the Standardized Safety Assessment, which established the standards, tools and protocols used to assess a family's strengths and needs, as well as safety throughout the life of a case. Most California counties employ the Structured Decision Making (SDM) tool that consists of several assessments for safety, risk, and family risks, as well as needs, contact guidelines, reassessment risk and reunification evaluation. At key decision points, this tool helps the social service agency make critical case determinations.

The third strategy is Permanence, which strives to ensure that youth remain with their family, friends, schools, and communities and to support the critical transition of youth who leave foster care at age eighteen.

#### Federal and State Mandates for System Accountability

Act AB 636 also provides a system of continuous improvement whose purposes are to ensure that county welfare agencies improve outcomes for children and families. This system measures, tracks, and monitors counties on an ongoing basis and aligns the state's oversight system with the federal system. Under AB 636 the key components of the accountability system are:

Quarterly Reports – Each quarter the state provides county child welfare agencies with specific data on outcome measures related to safety, permanency, and well-being. These quarterly reports provide counties through Child Welfare Service/ Case Management System (CWS/CMS) with quantitative data and serve as a management tool to track performance over time.

Peer Quality Case Reviews – Social workers from other counties and the state review with county staff selected cases pertaining to the areas under review. They also interview social workers and supervisors to determine the county's best practices as well as those that need improvement.

Self-Assessment – Triannually counties submit to the state a comprehensive analysis of how they are performing based on information gathered through the Quarterly Data Reports and Peer Quality Case Reviews. This Self Assessment is updated annually.

System Improvement Plan – The System Improvement Plan is an agreement between the county and the state on how the county will improve its child welfare system. Counties must describe milestones, timeframes, measurable goals for

outcomes and systemic factors that need improvement. The Plan must be approved by the Board of Supervisors and updated annually.

### Evaluative Studies

In 2004, as part of the California Department of Social Services Eleven-County Pilot Project, TCHHS implemented three strategies (Differential Response, Standardized Safety Assessment, and Permanency and Youth Transition) to determine their effectiveness for achieving the outcomes of Safety, Permanency, Well-Being, and System Improvement. Trinity County and the other counties served as “case studies.” In the early implementation TCHHS worked to increase the use of SDM tools, trained staff on SDM, introduced community partners to SSA and SDM, established AmeriCorps staff in nine schools to provide services for DR Path (1) Emergency Response and to partner with CWS on Path (2) Emergency Response. The teaming with AmeriCorps workers and stationing them at schools vastly improved community partnerships. Due to a lack of funding, the Americorp program has been discontinued.

In another study conducted during the same years, the UCLA/Office of Child Abuse Prevention (OCAP) Evaluation Project Small County Initiative-11 (Eleven County Project), reported that Trinity County had at least a structure for a DR system to provide front-end child abuse prevention/intervention. The OCAP study noted considerable variation in DR structure among the counties, including Trinity County. Home visiting and parent education were two of the main services provided. Further, the OCAP study found that in small counties DR strengthened community networks and facilitated outreach to isolated populations in the counties. As to the project’s sustainability of the DR strategy, efforts geared toward sustainability have been undertaken in most counties, but resource adequacy for comprehensive DR and prevention systems remains a challenge.

The Trinity County Peer Quality Case Review Final Report stated that from June 2006 to June 2009 Child Protective Services (CPS) has faced Child Welfare Services (CWS) worker turnover, differences in leadership style, and a supervisor turnover that resulted in a CWS supervisor position being vacant for a year. In light of these events, the Trinity County Grand Jury chose to examine how well CPS has maintained services under AB 636 to the children and families throughout the county.

### Method of Investigation

The Trinity County Grand Jury Health and Human Services Committee conducted interviews with CPS management and staff, as well as community partners. The Committee also reviewed multiple documents as noted in the Bibliography.

### Discussion

When TCHHS experienced a changeover in CWS/CPS leadership and personnel, it began reexamining how it was delivering traditional state mandated social services to the children and families of Trinity County. As a result, the direction and practice has shifted to a more individualized and holistic approach, which emphasizes family engagement.

TCHHS is in the early stages of implementing Participatory Case Planning and Family Group Meeting approaches to enable social workers to address family strengths and needs in solving family problems. This discussion describes, in part, how TCHHS social workers, community partners and stakeholders currently support and aid county families and children.

### Traditional Social Services Delivery

Emergency Response (ER) provides a 24-hour hot line, seven days a week, for reporting child abuse or neglect. A qualified social worker aide or social worker on-call screens the calls to determine the level of risk through a standard safety assessment. This screening determines whether or not an in-person response is required immediately or within ten days. A supervisor reviews the assessment. TCHHS is in the process of updating their intake policies.

If there is no or low-level risk, CPS may refer the child and family to a number of community partners such as Human Response Network (HRN) for housing assistance, to the Trinity County Office of Education for help with learning problems, or to churches with food banks. CPS under DR has expanded its services to meet the very individual needs of county families. This early intervention, with a greater variety of services, reduces the number of children entering child welfare services and the need for higher-end services.

Family Maintenance (FM) provides protective services to children and families in the home when the risk is low to moderate, while services, such as counseling, parent education, and substance abuse treatment are provided. This service with a “case plan” may be a voluntary agreement with parents or could have court intervention. These families require a greater amount of assistance and supervision. The assistance usually revolves around transporting clients to doctor, dental, or court appointments. CPS has, on occasion, transported clients to UC Davis and Stanford University for medical care.

Family Reunification (FR) provides up to eighteen months of services to children and their families when children have been removed from their households. The “case plan” may include treatment for alcohol and drug abuse, and mental health concerns. The plan may also address housing and employment issues. It should also have a concurrent plan that “shall describe the services to be provided to assist in reunification and the services to be provided concurrently to achieve legal permanency if efforts to reunify fail” as required by Welfare and Institutions Code WIC 16501.1(10).

Permanent Placement (PP) seeks to ensure that children can grow up in a permanent, safe, and secure living arrangement. Reunification with the family is the most preferred option. However, if this is not possible, they have the options of adoption, legal guardianship or long-term foster care.

During the fiscal year 2007-2008, Trinity County provided support to ten in-county, licensed foster and foster-adoption homes. Currently, there are no in-county foster homes available. When a child needs a foster home and none are available, CPS looks first for a kinship placement within the county. Failing that, the agency must place the child in a

foster home in another county. The out-of-county placement causes great hardship on the child for he or she must change school district and friends. The extended travel for visitation with family and for court hearings just adds more burdens. Mental health services may be delayed or limited. The number of kinship placements is up 50 percent and has filled some of the void. The agency has worked hard to retain and recruit foster care families, but in this economic downturn, coupled with high unemployment, families are unwilling to take on another child.

Because TCHHS embraces the philosophy that all children are adoptable, it promotes adoption as a permanent placement option. TCHHS finalized six adoptions in 2009 and eight in 2008, an increase over previous years. TCHHS attributed this increase to the practice of the Adoptions Worker and the County social worker collaborating to identify adoptive placements for all youth.

Throughout all these levels of Service Delivery, a Foster Care Nurse provides medical services. For instance, the Foster Care Nurse may assist a new-to-the area young, pregnant single female, who has other school-aged children, with prenatal care, arrange transportation to Redding for OB services, aid with the MediCal application process, give her referrals to food banks, and assistance in enrolling the other children in Head Start or school. The Public Health Nurse also enters health information into CWS/CMS

### Transitioning to Adulthood

Independent Living Program (ILP) serves qualified foster/probation youth who need the necessary skills to become more self-sufficient as they transition to adulthood. ILP uses a one-on-one approach tailored to the youth's individual needs. ILP provides assistance for entering a post-secondary institution, for obtaining employment, for purchasing household goods, or for developing a budget.

In a partnership between ILP and the Trinity County Office of Education, youth who are working toward or are enrolled in college and actively participate in the ILP have the opportunity to attend a local computer camp. At computer camp they receive twenty hours of instruction, a laptop computer, printer, software, a carrying case, and instructional textbooks. This homegrown program replaced a costly, out-of-county program that entailed additional expenses for hotels and food. Trinity County will offer this program for under \$1,000. Most importantly, Computer Camp offers the necessary training, equipment and incentive to attend college.

CPS and Probation plan to participate in "The Ropes Course", a two-day event where both staff and ILP youth work together to build a youth's self worth to prepare for the many transitions in life.

### Transitional Housing Placement Program (THPP)

TCHHS contracts with HRN to provide two years of support for Trinity County foster youth (18 through 24 years of age) who are leaving foster care or who have left foster care. They help foster youths with finances. The youths receive monies for monthly expenses, such as rent and utilities. Some funds are set aside in a savings account that

they receive after they successfully leave the program. Services provided include help with rental applications, credit checks, deposits, and leases or rental agreements. The housing for the youths is scattered throughout the County. However, in one case a Trinity County youth is living outside the County and HRN subcontracts with a manager from that county to provide service to the youth. As part of its evidenced-based practice with contractors, TCHHS receives written monthly reports on the youths.

### Determining the Directions for the Journey from Childhood to Adulthood

Participatory Case Planning (PCP) is a strength-based approach to working with families and individuals who have multiple needs. This approach may be used with the removal of children and placement changes. If these individuals are supported with collaborative relationships, they will successfully attain safety, permanency and well-being. When the family has a voice in the decision-making, they are more willing to buy into the process. Further, there needs to be an effective sharing of information across agencies and the relevant community partners important for providing support to the family. For example, when a child is removed from the family due to issues of domestic violence, it is important to have a strong relationship with domestic violence professionals to ensure the safety of the victim.

Team Decision Making Approach – TCHHS Self-Assessment states, “The Child Welfare System’s complexity can be daunting to families”, and when the system makes a decision, families feel they have no control, leaving them frustrated and angry. During the Eleven County Pilot Project, TCHHS used the Team Decision-Making (TDM) approach to make decisions regarding a child’s placement. The elements of TDM are utilized for placement decisions. Meetings are mandatory and must be held before any placement. The agency retains responsibility if consensus cannot be reached. Due to logistics and lack of staffing TCHHS finds this approach does not offer the family the opportunity to engage fully in the decision-making process. This model is more appropriate for a county with a well-staffed CPS which can assign a special unit to manage these meetings.

Family Group Meeting Approach – In an effort to give families a voice in the decision making process, TCHHS has implemented the Family Group Meeting (FGM), a voluntary decision-making approach in which parents/caregivers are joined by family, friends, and providers of community resources to decide what is best for the children and their families. The agency and the family work together in a supportive relationship, rather than an adversarial one. TCHHS is using this approach for placement decisions, monitoring and discussing family progress. CPS is developing policies and procedures for conducting and documenting the meetings.

### Data Reporting and Accountability

TCHHS utilizes the statewide CWS/CMS as the primary system to track referrals, cases, placements, court activity, and clients. This is made available on-line to the public.

The program "SafeMeasures", an on-line management tool, provides managers, supervisors and social workers with up-to-date information on performance outcomes,

such as face-to-face child contact, face-to-face parent contact, and case completion. SafeMeasures social workers are trained on the “My Caseload” feature that allows them to view their cases and plan their workload accordingly to insure they meet state regulated guidelines.

### Community and Agency Collaborators

Human Response Network is a private non-profit organization that provides an array of programs. Programs consist of customized home-based family services, two youth drop-in centers, the Friday Night Live program, childcare resources, a children’s lending library, Car Seat Program, and a teen violence program.

Child Abuse Prevention Council of Trinity County offers child abuse prevention education by providing speakers at community meetings and by promoting public awareness at fairs and other events.

Trinity County First Five program provides health, education, and family support services for children, prenatal through age five, and their families. They served approximately 2,480 children and family members during 2008-2009. The program funds come from California’s Proposition 10 passed in 1998 that placed taxes on tobacco products. These funds were distributed to various county organizations through grant awards. Some of the recipients were: Human Response Network for Home Visiting/Welcome-Improved Family functioning, Weaverville Parent Nursery School for Character Counts, Trinity Youth Soccer League for improved health, and fitness for those under six, and many others.

Foster Youth Services Liaison is an interagency collaboration between TCHHS and the Trinity County Office of Education. They have provided a full-time Education Liaison who is located in the CPS office. This position provides support services to social workers and clients with regard to educational rights, advocacy, and other support services. This liaison works directly with staff and clients to ensure service delivery and to remove barriers to education and health related services.

### **Findings/Recommendations**

#### Finding 1:

TCHHS remains at the forefront of social work practices through active participation in state projects, such as the Eleven County Project.

#### Recommendation 1:

TCHHS is to be commended for their efforts.



Finding 2:

The loss of the AmeriCorps workers has reduced frontline support for families who are at risk for abuse and neglect.

Recommendation 2:

TCHHS should partner with another community agency or collaborator to provide frontline support for families who are at risk for abuse and neglect.

Finding 3:

TCHHS has no written intake procedure delineating specific procedures for Differential Response assignment and follow-up.

Recommendation 3:

TCHHS should develop a guide for referrals that are evaluated and referred to community partners, and referrals that present moderate risk to the child.

Finding 4:

TCHHS does not track the number of families served through the DR pathways.

Recommendation 4:

TCHHS should track the number of families served through DR pathways.

Finding 5:

TCHHS has engineered strong, close relationships with county agencies and community partners.

Recommendation 5:

They are to be commended for their efforts.

Finding 6:

TCHHS is shifting from a Team Decision Making approach to a Family Group Meeting approach for placement, monitoring, and discussing family progress.

Recommendation 6:

In implementing the Family Group Meeting approach, TCHHS should develop written tools for meeting documentation as well as written policies and procedures, and evaluate their effectiveness on an ongoing basis.

Finding 7:

There is a desperate need for in-county foster homes. The current out-of-county placements put undue hardships on the children and their families.

Recommendation 7:

TCHHS should continue its efforts to obtain local foster homes.

Finding 8:

TCHHS community agencies and partners, as well as community members, participate in the Peer Quality Case Reviews and the County Self Assessment.

Recommendation 8:

They are to be commended for their participation.

**Responses Required**

In accordance with California Penal Code 933.05 a response is required as indicated below:

<u>Respondent</u>	<u>Findings/Recommendations</u>	<u>Due date</u>
Board of Supervisors	1,2,3,4,5,6,7,8	90 days
Director of TCHHS	1,2,3,4,5,6,7,8	60 days
CAO	1,2,3,4,5,6,7,8	60 days

The governing bodies indicated above should be aware that comment or response of the governing body must be conducted subject to the notice, agenda and open meeting requirements of the Brown Act.

**Bibliography**

California Child Welfare Services Eleven-County Pilot Project Evaluation Report, 2008.

Peer Quality Case Review Conducted for Child Welfare and Juvenile Probation Services, Final Report, August 2009.

Trinity County Health and Human Services County Self Assessment for the Period 2006-2009.

Trinity County Health and Human Services, Child Protective Services GUIDELINES AND PROCEDURES: Team Decision Making (TDM), Independent Living Program.

University of California at Los Angeles/Office of Child Abuse and Prevention Small County Initiative-11 Evaluation: Final Report, undated.

Participatory Case Planning and Child Welfare Services, Northern Training Academy, University of California, Davis. 2008, page 8



# TRINITY COUNTY

## Office of the County Administrator

DERO B. FORSLUND

County Administrative Officer

P.O. BOX 1613, WEAVERVILLE, CALIFORNIA 96093-1613

PHONE (530) 623-1382 FAX (530) 623-8365

**RECEIVED**

**SEP 15 2010**

**TRINITY COUNTY  
SUPERIOR COURT**

*Reviewed  
for  
9/13/10*

TO: The Honorable Anthony Edwards,  
Presiding Judge of the Superior Court

FROM: Dero B. Forslund, CAO

SUBJECT: Response to Recommendations of 2009-10  
Grand Jury Health and Human Services Committee Final Report

Re Youth Services and Family Services Review

DATE: July 19, 2010

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The Grand Jury Health and Human Services Committee has requested a written response to their final report on the Youth Services and Family Services. In my capacity as County Administrative Officer, my response is as follows:

Finding 1:

TCHHS remains at the forefront of social work practices through active participation in state projects, such as the Eleven County Project.

Response: We concur

Recommendation 1:

TCHHS is to be commended for their efforts.

Response: We concur

Finding 2:

The loss of the AmeriCorps workers has reduced frontline support for families who are at risk for abuse and neglect.

Response: We concur

Recommendation 2:

TCHHS should partner with another community agency or collaborator to provide frontline support for families who are at risk for abuse and neglect.

Response: We Concur- a review of possible collaborators will be completed this fiscal year.

Finding 3:

TCHHS has no written intake procedure delineating specific procedures for Differential Response assignment and follow-up.

Response: We concur

Recommendation 3:

TCHHS should develop a guide for referrals that are evaluated and referred to community partners, and referrals that present moderate risk to the child.

Response: Contracts are in place with HRN to accomplish the recommendation for fiscal year 2010-2011

Finding 4:

TCHHS does not track the number of families served through the DR pathways.

Response: We Concur

Recommendation 4:

TCHHS should track the number of families served through DR pathways.

Response: Tracking systems are now available to implement the recommendation

Finding 5:

TCHHS has engineered strong, close relationships with county agencies and community partners.

Response: We Concur

Recommendation 5:

They are to be commended for their efforts

Response: .We Concur

Finding 6:

TCHHS is shifting from a Team Decision Making approach to a Family Group Meeting approach for placement, monitoring, and discussing family progress

Response: We concur

Recommendation 6:

In implementing the Family Group Meeting approach, TCHHS should develop written tools for meeting documentation as well as written policies and procedures, and evaluate their effectiveness on an ongoing basis.

Response: Implementation will be included in the Family Group Meeting Approach in the next 3 years as documented in the Trinity County SIP.

Finding 7:

There is a desperate need for in-county foster homes. The current out-of-county placements put undue hardships on the children and their families

Response:. We Concur

Recommendation 7:

TCHHS should continue its efforts to obtain local foster homes.

Response: We concur

Finding 8:

TCHHS community agencies and partners, as well as community members, participate in the Peer Quality Case Reviews and the County Self Assessment.

Response: We concur

Recommendation 8:

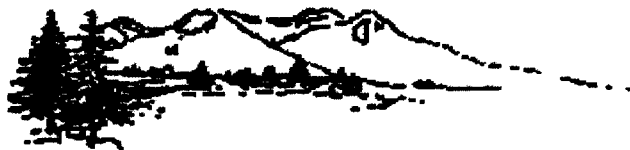
They are to be commended for their participation.

Response: We concur

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JUL 28 2010

TRINITY COUNTY  
SUPERIOR COURT



*Reviewed  
ML  
8/5/10*

Linda Wright, Director  
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Weaverville, CA 96093-1470

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Fax: (530)-623-1425

**Trinity County Health and Human Services Department**

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TO: The Honorable James P. Woodward,  
Presiding Judge of the Superior Court

CC: Wendy Tyler, Deputy CAO/Clerk of the Board

FROM: *Linda Wright*  
Linda Wright, Director

SUBJECT: Response to Recommendations of 2009-10  
Grand Jury Committee Final Report  
Re: "Youth Services and Family Services Review"

DATE: July 27, 2010

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The Grand Jury Health and Human Services Committee has requested a written response to their final report on the Youth and Family Services Review. In my capacity as Director of Trinity County Health and Human Services, my response is as follows:

**Finding #1:** TCHHS remains at the forefront of social work practices through active participation in state projects, such as the Eleven County Project.

**Response:** I agree.

**Recommendation #1:** TCHHS is to be commended for their efforts.

**Response:** The recommendation will be implemented at the next full staff meeting on August 12, 2010.

**Finding #2:** The loss of the AmeriCorps workers has reduced frontline support for families who are at risk for abuse and neglect.

**Response:** I disagree. When CPS lost AmeriCorp volunteers, other strategies were implemented to ensure that front line support for families was provided. CPS utilized the services of a grant funded Substance Abuse Counselor, a public health nurse, and a foster youth liaison (all have workstations in the unit) to provide additional support for families with specialized needs in these areas.



**Recommendation #2:** TCHHS should partner with another community agency or collaborator to provide frontline support for families who are at risk for abuse and neglect.

**Response:** CPS will continue to partner with and/or fund the above positions to continue to provide services to children and their families in our community that are at risk of abuse or neglect. Additionally, CPS and HRN have entered into a contract to provide additional support to families at the point of referral. The contract with HRN is for the 2010-2011 fiscal year.

**Finding #3:** TCHHS has no written intake procedure delineating specific procedures for Differential Response assignment and follow-up.

**Response:** I agree. CPS did not have a working policy and procedure for Differential Response at the time of the grand jury investigation.

**Recommendation #3:** TCHHS should develop a guide for referrals that are evaluated and referred to community partners, and referrals that present moderate risk to the child.

**Response:** CPS has contracted with HRN for the 2010-2011 fiscal year to provide Differential Response services in our community. DR training will begin for HRN staff on 08/12/2010. Draft referral forms and tracking sheets have already been created and will be utilized so the Department can determine what services are provided.

**Finding #4:** TCHHS does not track the number of families served through the DR pathways.

**Response:** I agree.

**Recommendation #4:** TCHHS should track the number of families served through the DR pathways.

**Response:** CPS did not track the number of families served through DR, however, the documentation was available through the CWS/CMS system. CPS has completed draft referral forms and tracking sheets to determine the number of families served and what services they were offered and which ones they participated in.

**Finding #5:** TCHHS has engineered strong, close relationships with county agencies and community partners.

**Response:** I agree.

**Recommendation #5:** They are to be commended for their efforts.

**Response:** The recommendation will be implemented at the next full staff meeting on August 12, 2010.

**Finding #6:** TCHHS is shifting from a Team Decision Making approach to a Family Group Meeting approach for placement, monitoring, and discussing family progress.

**Response:** I agree.

**Recommendation #6:** In implementing the Family Group Meeting approach, TCHHS should develop written tools for meeting documentation as well as written policies and procedures, and evaluate their effectiveness on an ongoing basis.

**Response:** CPS does intend to shift from the Team Decision Making approach to a Family Group Meeting Approach in the next 3 years as documented in our SIP. CPS will work to develop policies and procedures for the implementation of Family Group Meetings. CPS will also contract with UC Davis for training and evidenced based research related to FGM's in an effort to formalize the process and implement it effectively within the next 3 years as referenced in our SIP.

**Finding #7:** There is a desperate need for in-county foster homes. The current out-of-county placements put undue hardships on the children and their families

**Response:** I agree.

**Recommendation #7:** TCHHS should continue its efforts to obtain local foster homes.

**Response:** There will always be a need for quality in-county foster placements for the children in our community. CPS is actively working with two foster family agencies and State Adoptions to increase awareness of the need for foster homes in this county. CPS also met with the principals of each school in the county to provide information about how this issue affects them and have been asked to provide more localized informational meetings regarding the need for foster homes at their schools sites. It is the hope of CPS that some new placements will come from these meetings. CPS also continues to advertise the need for foster homes in our county through advertising at the local cinema. CPS has acquired more creative, thought provoking designs for the 2010-2011 fiscal year that will created in the coming months.

**Finding #8:** TCHHS community agencies and partners, as well as community members, participate in the Peer Quality Case Reviews and the County Self Assessment.

**Response:** I agree.

**Recommendation #8:** They are to be commended for their participation.

**Response:** The recommendation will be implemented at the next full staff meeting on August 12, 2010.

RECEIVED

OCT 16 2010

TRINITY COUNTY  
SUPERIOR COURT



## TRINITY COUNTY

Board of Supervisors

P.O. BOX 1613, WEAVERVILLE, CALIFORNIA 96093

PHONE (530) 623-1217 FAX (530) 623-8365

TO: The Honorable James Woodward,  
Presiding Judge of the Superior Court

FROM: Trinity County Board of Supervisors

SUBJECT: Response to 2009-10 Trinity County Grand Jury  
Health and Human Services Committee Final Report  
Youth Services and Family Services Review

DATE: October 5, 2010

The Grand Jury Health and Human Services Committee has requested a written response to their final report on the Youth Services and Family Services Review. The Board of Supervisors' response is as follows:

**Finding #1:** TCHHS remains at the forefront of social work practices through active participation in state projects, such as the Eleven County Project.

**Response:** Agree

**Recommendation #1:** TCHHS is to be commended for their efforts.

**Response:** Has been implemented. TCHHS Director Linda Wright commended TCHHS personnel at the departments full staff meeting held on August 12, 2010.

**Finding #2:** The loss of the AmeriCorps workers has reduced frontline support for families who are at risk for abuse and neglect.

**Response:** Disagree entire finding. New strategies implement have allowed quality frontline support to continue.

**Recommendation #2:** TCHHS should partner with another community agency or collaborator to provide frontline support for families who are at risk for abuse and neglect.

**Response:** Requires further analysis. Although having AmeriCorp volunteers as frontline support benefited the department and the families served. Upon losing their services, TCHHS developed other strategies to ensure that front line support for families is provided. Partnering with other community agencies for these services will require further analysis.

JUDY PFLUEGER  
DISTRICT 1

JUDY MORRIS  
DISTRICT 2

ROGER JAEGL  
DISTRICT 3

HOWARD FREEMAN  
DISTRICT 4

WENDY OTTO  
DISTRICT 5

**Finding #3:** TCHHS has no written intake procedure delineating specific procedures for Differential Response assignment and follow-up.

**Response:** Agree

**Recommendation 3:**

TCHHS should develop a guide for referrals that are evaluated and referred to community partners, and referrals that present moderate risk to the child.

**Response:** Has been implemented. TCHHS has contracted with Human Response Network for the 2010-11 fiscal year to provide Differential Response (DR) services to our communities. DR training has begun for HRN staff. Draft referral forms and tracking sheets have been created and will be utilized so that the Department can determine what services are being provided

**Finding 4:**

TCHHS does not track the number of families served through the DR pathways.

**Response:** Agree

**Recommendation 4:**

TCHHS should track the number of families served through DR pathways.

**Response:** Has been implemented. TCHHS has completed draft referral forms and tracking sheets to determine the number of families served and what services they were offered and which services they participated in.

**Finding 5:**

TCHHS has engineered strong, close relationships with county agencies and community partners.

**Response:** Agree

**Recommendation 5:**

They are to be commended for their efforts.

**Response:** Has been implemented. TCHHS Director Linda Wright commended TCHHS personnel at the departments full staff meeting held on August 12, 2010.

**Finding 6:**

TCHHS is shifting from a Team Decision Making approach to a Family Group Meeting approach for placement, monitoring, and discussing family progress.

**Response:** Agree

**Recommendation 6:**

In implementing the Family Group Meeting approach, TCHHS should develop written tools for meeting documentation as well as written policies and procedures, and evaluate their effectiveness on an ongoing basis.

**Response:** Will be implemented. Implementation will be included in the Family Group Meeting Approach in the next 3 years as documented in the Trinity County SIP.

**Finding 7:**

There is a desperate need for in-county foster homes. The current out-of-county placements put undue hardships on the children and their families.

**Response:** Agree

**Recommendation 7:**

TCHHS should continue its efforts to obtain local foster homes.

**Response:** Has been implemented. TCHHS is continually providing outreach and support for the recruitment of foster families.

**Finding 8:**

TCHHS community agencies and partners, as well as community members, participate in the Peer Quality Case Reviews and the County Self Assessment.

**Response:** Agree

**Recommendation 8:**

They are to be commended for their participation.

**Response:** Has been implemented. TCHHS Director Linda Wright commended TCHHS personnel at the departments full staff meeting held on August 12, 2010.