Welcome to the 2024 Northern/Mtn. Valley Regional Meeting

December 3, 2024 9:00 am – 12:00 pm





The CFPIC Linkages Team







Linkages Program Director Danna Fabella

CFPIC Associate Director Melissa Connelly Linkages Program Associate Andrea Lewis

Housekeeping

- Please have your camera ON whenever possible
- Make sure you are MUTED if you are not talking
- Change your screen name to include your first name, last name, and county

Thank You!



Introductions/Ice Breaker

Building Leadership Champions & Creating Staff Buy In: More than Training

Creating the Coordinated Case Plan

AB 135: CalWORKs Family Reunification (Cash Aid)

Closing with Exit/Planning Survey



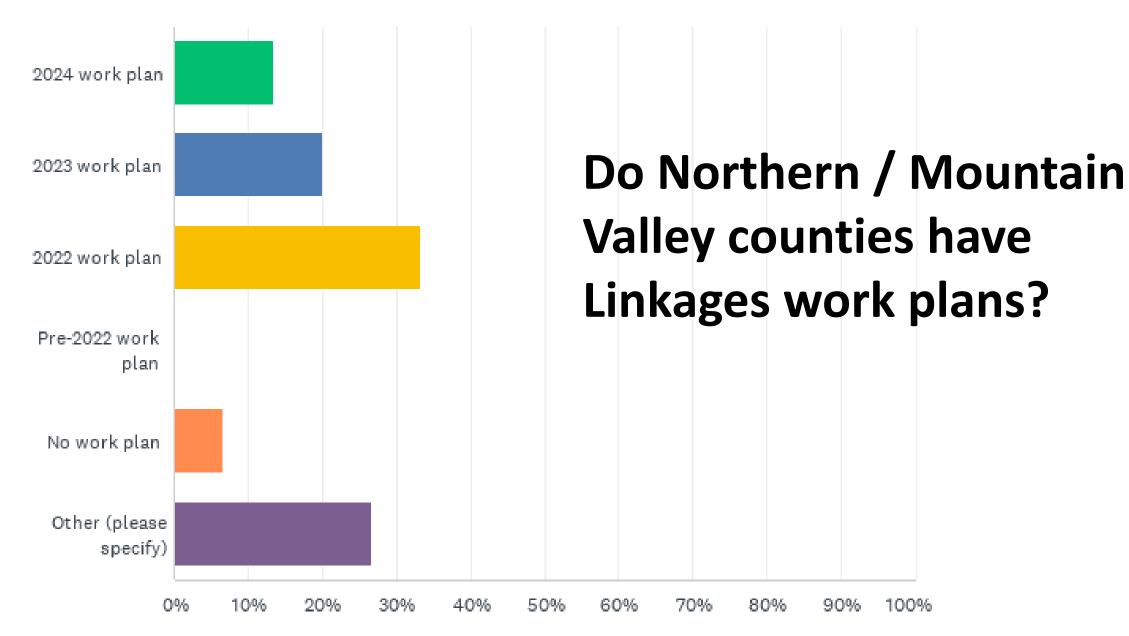
Please share:

- Name
- County
- Program
- Linkages Role
- What's one fun thing you plan to do over the holiday break?



Amador Butte Calaveras Glenn Humboldt Lake Mendocino Merced

Nevada Placer Shasta Siskiyou Tehama Trinity Tuolumne Yolo



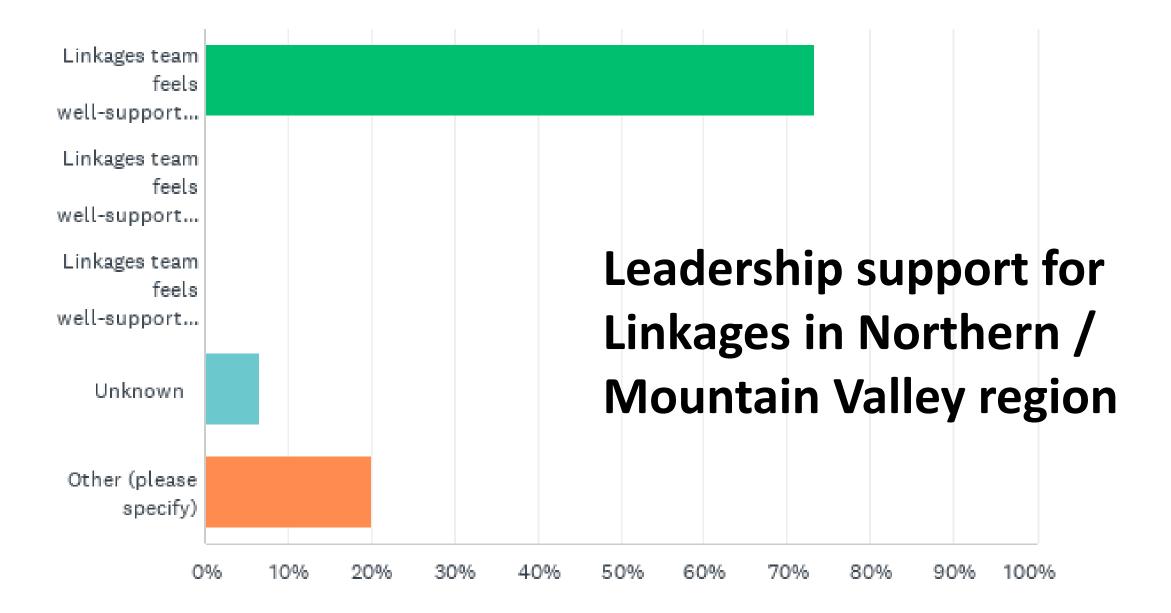
Top Three Challenges Reported by Northern / Mountain Valley Counties

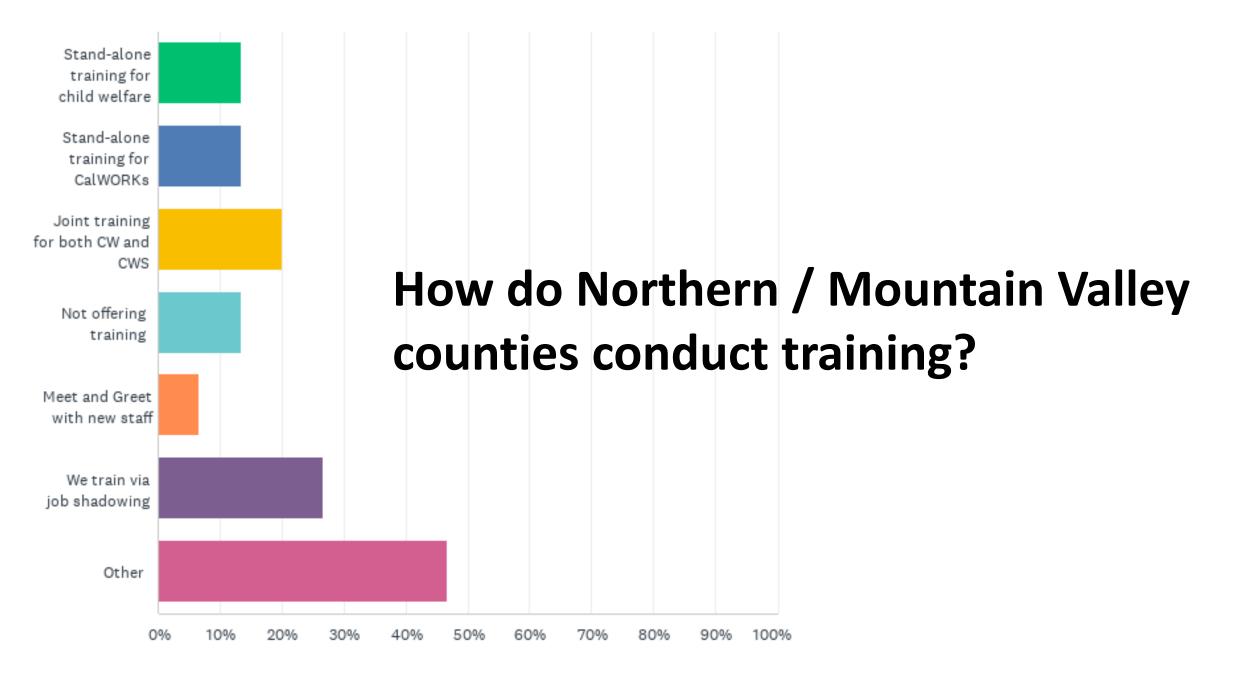
Turnover/Staffing Challenges (66%)

Preparing for AB135 (60%)

Communication (40%)

Building Leadership Champions & Creating Staff Buy In: More than Training





Barriers to Training identified by Northern / Mountain Valley Counties

Staffing and staff turnover Policy and procedure updates needed

Time

Formal training resources needed

Nevada County Training Jennifer Loper (CW) and Faye Hignight (CWS)



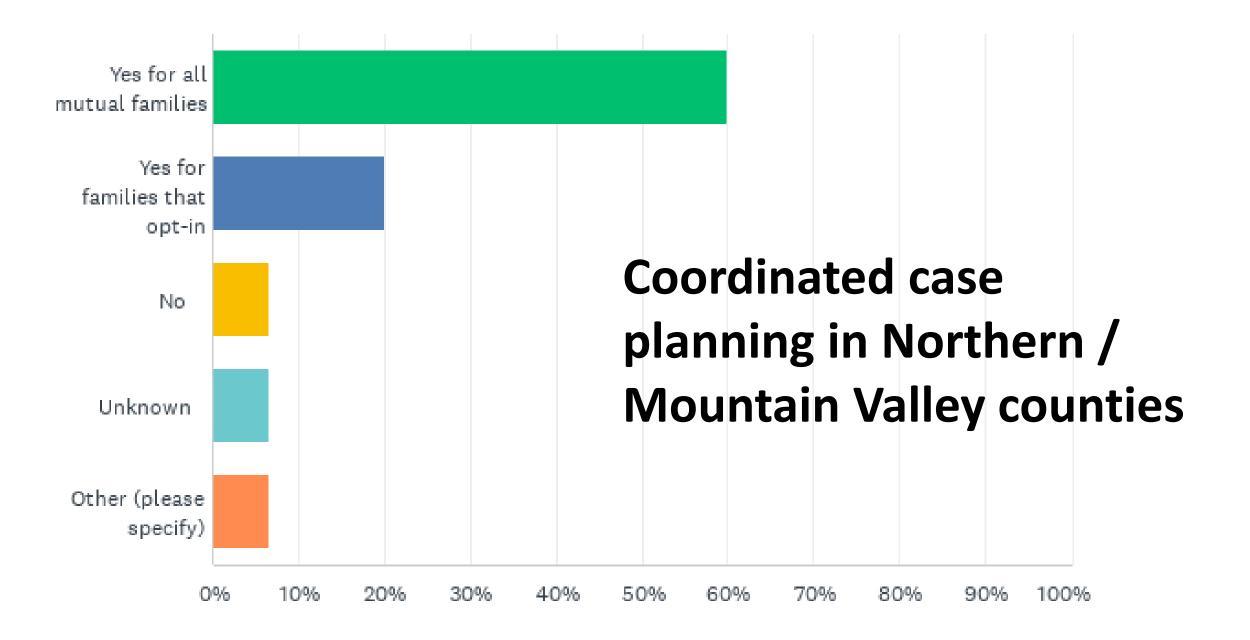


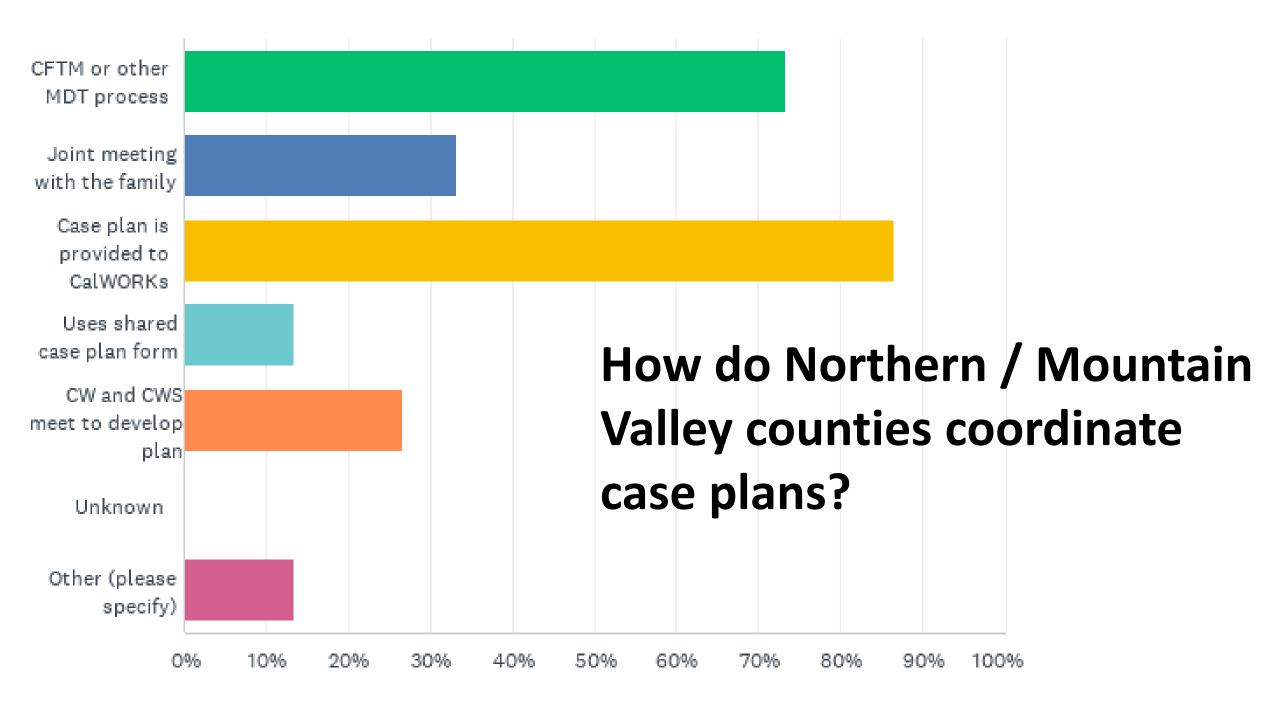
Humboldt Training Colleen Ridlon WTW

Conversation



Creating the Coordinated Case Plan





Humboldt County Creating the Coordinated Case Plan Colleen Ridlon (WTW)

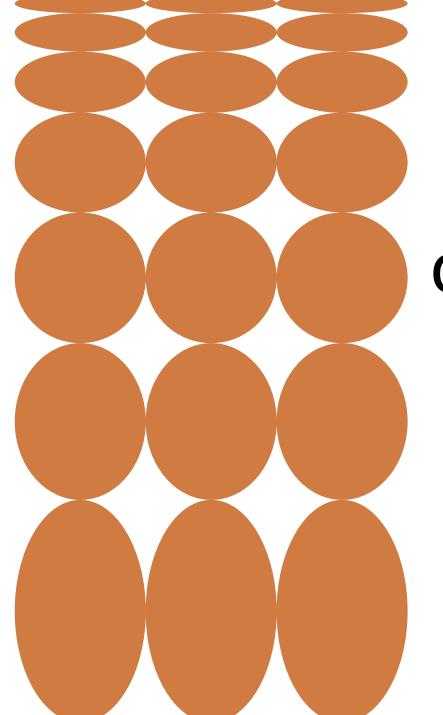
Lake County **Coordinated Case** Plan/WTW plan Aranza Ambriz (WTW)



Linkages referral for eligibility determination form

DATE:							
TO:							
FR: CWS SW							
REGARDING THE	LINKAGES EL						
1) Mother:				SS#:			
2) Father:				SS#:			
2) Father:	Alleged 🗌 /Presu	umed 🗌					
3) Other Adult:				SS#:			
Relationship:							
	(This could	d include another rel	ated/non-r	elated caregiv	er, or lega	l guardian i	n the home
		with significar	nt relations	hip, such as a	n older sib	ling.)	
NAME(S) OF CHIL	D(REN) DETA	INED:					
NAME(S) OF CHIL			DOB:				
Name: Name:			DOB: DOB:				
Name:			DOB: DOB:				
Name: Name: Name: Name:			DOB: DOB: DOB:				
Name: Name: Name: DATE CHILD(REN)	DETAINED:		DOB: DOB: DOB:	Not Detai	ned		
Name: Name: Name: DATE CHILD(REN) Lake County Child \	DETAINED: Welfare Service	es is requesting	DOB: DOB: DOB:	Not Detai	ned		
Name: Name: Name: DATE CHILD(REN)	DETAINED: Welfare Service	es is requesting	DOB: DOB: DOB:	Not Detai	ned		
Name: Name: Name: DATE CHILD(REN) Lake County Child V above-named parer	DETAINED: Welfare Service tt(s) and/or oth	es is requesting er significant ad	DOB: DOB: DOB: a detendults.	Not Detai mination a	ned s to the	Linkage	
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Name: Name: Name: DATE CHILD(REN) Lake County Child V above-named parer Potentially Eligible:	DETAINED: Welfare Service tt(s) and/or oth Mother: Other Adult:	es is requesting er significant ac Yes No Yes No	DOB: DOB: DOB: dob dob dob dob dob dob dob dob dob dob	Not Detai mination a Father:	ned s to the	Linkage	es eligibil

LAKE COUNTY DEPARTMENT OF SOCIAL SERVICES



WTW linkages coordinator reviews eligibility

It is determined that family is eligible

Child Family Team Meeting (CFTM) scheduled by CWS

CWS Linkages Coordinator will coordinate the CFTM and invite the team

Case plan is created

WTW Linkages Coordinator will discuss possible supportive services

Schedule a WTW appt with family and complete a WTW 2

COMPARISON OF PLANS

Lake County Department of Social Services Child Jane Doe, FRFM000 Welfare Services P.O. Box 9000

Lower Lake, California 95457

CHILD WELFARE SERVICES INITIAL CASE PLAN - [COURT]

County: Lake

CASE PLAN PARTICIPANTS

Date Of Birth
07/28/1938Relationship
Caregiver

PARENTS/GUARDIAN

<u>Name</u> Bugs Bunny

CHILD(REN)

<u>Name</u> Al Bunny

$\begin{array}{c|c} \underline{\textbf{Date Of Birth}} & \underline{\textbf{Age}} & \underline{\textbf{Sex}} & \underline{\textbf{Court Number}} \\ \hline M & JV \text{NONCON} \end{array}$

<u>To</u> Al Bunny

	CASE PLAN GOAL		
		Projected	Projected Date For
		Completion	Termination Of
Name	Case Plan Goal	Date	Child Welfare
			Services
Al Bunny	Return Home	6 months	
•		from	
		Disposition	

State of California Health and Human Services Agency California Department of Social Services CWS Case Management System CS-CPSERV REV (01/19) Confidential in accordance with Penal Code Section 11167.5 and/or W&DC Sections 827 and 10850 Page 1 of 5

CASE PLAN SERVICE OBJECTIVES AND CLIENT RESPONSIBILITIES

Bug	gs Bunny SERVICE OBJECTIVES			Projected Completion
2. 3.	Stay free from illegal drugs and drug dependency. Comply with Maintain relationship with your of the visitation plan. Meet your child (ren)'s physical educational needs. Comply with medical or psychol	all requ child by , emotion	ired drug tests. following the conditions nal, medical, and	Date 6 months from Disposition 6 months from Disposition 6 months from Disposition 6 months from Disposition
	CLIENT RESPONSIBILITIES Activity Times	<u>Freq.</u>	<u>Completion</u> <u>Provider</u> <u>Date</u>	<u>Wrap</u> <u>Core</u> <u>Svc</u>
	Counseling/Mental Health Servi	ces		
1.	General Counseling		6 months from Disposition	
	assessment. Mr. Bunny wi health assessment.	ll coopera in indivi	County Behavioral Health fo ate with all the recommendat dual counseling to address h	ions of his mental
	Education Services			
1.	Parenting Education			
	Program			
	Description Mr. Bunny will actively pa		in the Parent Education Serie sight into the emotional and	
	Substance Abuse Services			
1.	Substance Abuse Testing			
	Description Mr. Bunny will cooperate Disorder Services (SUDS) and illicit substances.	with drug staff. Mr	testing at the request of CW Bunny will test <u>negative</u> fo	7S and Substance Use r alcohol, marijuana
2.	Counseling			
	Description			
	plan. Mr. Bunny will foll include residential or outpa	ow the re atient trea	County SUDS for an assess commendations made by the utment, individual and group	SUDS counselor, to
4	outside support groups, an 12-Step Program	a drug te:	sung.	
3.	12-Step Program Description			
	L'UNE PROVE			Page 2 of 5

Continued

Mr. Bunny will attend outside support groups as described/approved in his Substance Use Disorder Services treatment plan.

Al Bunny

	SERVICE OBJECTIVE	s				Projected Com	pletion
1.	Receive age appropriate		riented s	ervices.		<u>Date</u> 08/24/202	20
	CLIENT RESPONSIBIL Activity	LITIES Times	Freq.	Completion	Duovidan	Wrap	Core
	Activity	1 imes	rreq.	Date	Provider	wrap	Sve
	II 1/1 /CIIIDD C						

Health/CHDP Services

 HEP - CHDP Equivalent Physical Exam

Description

The caregiver will ensure that the child receives all recommended/necessary medical care.

VISITATION SCHEDULE

CHILD(REN) - PARENT(S)/GUARDIAN(S) VISITATION

Al Bunny <u>Method</u> <u>Times</u> <u>Frequency</u> <u>Beginning</u> Date

In-Person (Visits Must Be Supervised) 1 Monthly Description

The Department will arrange <u>monthly-supervised</u> visitation between the father, Bugs Bunny and the child, Al Bunny. Mr. Bunny will provide a clean drug test <u>in order to</u> <u>visit with the child on the day of the visit.</u>

Per Court order, anyone who appears to be under the influence of alcohol or any controlled substance will not be allowed to participate in a scheduled visitation with the child. The visitation supervisor may terminate the visit if this order is violated.

AGENCY RESPONSIBILITIES

CASE MANAGEMENT SERVICES

For Whom	<u>Times</u>	Freq.	<u>Beginning</u> Date	<u>Provider</u>	Wrap	<u>Core</u> Svc
Al Bunny	1	Every 6 Months	02/24/2020			

Description

The case carrying social <u>worker</u> will schedule and participate in Child and Family Team Meetings once every six months.

CONTACT SCHEDULE

SOCIAL WORKER – CHILD CONTACTS

Al Bunny

Method In-Person <u>Times</u> <u>Frequency</u> <u>Beginning Date</u> <u>Provider</u>

Monthly XX/XX/XXXX

<u>Description</u> The case carrying social <u>worker</u> will meet in-person with the child a minimum of <u>one</u> <u>time</u> month to ensure that the child's needs are being met.

SOCIAL WORKER - PARENT(S)/GUARDIAN(S) CONTACTS

Bugs Bunny

<u>Method</u> In-Person <u>Times</u> <u>Frequency</u> <u>Beginning Date</u> <u>Provider</u> Monthly 02/24/2020

Description

The case carrying social <u>worker</u> will review the case plan with Mr. Bunny a minimum of one time per month and ensure that all ordered/necessary available services are being offered to him. The social worker will assist Mr. Bunny to overcome any barriers that might prevent him from successfully meeting service objectives.

SOCIAL WORKER - CARE PROVIDER CONTACTS

Method In-Person <u>Times</u> <u>Frequency</u> <u>Beginning Date</u> <u>Provider</u> Monthly 02/24/2020

Description

The case carrying social <u>worker</u> will meet with the child's care provider a minimum of one time per month to help ensure the appropriateness and stability of the minor's placement.

ACKNOWLEDGMENT OF PARENT(S)/GUARDIAN(S)

Provider

ASSIGNMENT AND SERVICES

ACTIVITY, LOCATION, SCHEDULE, AND HOURS

AC.	in the country series	LUULL, AND NOUN			
	Activity: Mental Health with LCBH				
	Begins:	Expected To End:	Schedule:		
1.	01/01/2024	06/01/2024	Monday and Wedne	esday 12PM-1PM	
	Hours Per Week:	Location:		•	
	2	7000-B S Center Dr.	Suite B, Clearlake, C	A 95422	
	Activity: Parenting Classes with C\	NS			
_	Begins:	Expected To End:	Schedule:		
2.	01/01/2024	06/01/2024	Friday 2PM-4PM		
	Hours Per Week:	Location:			
	2	Zoom			
	Activity: SUDS				
3.	Begins:	Expected To End:	Schedule:		
э.	01/01/2024	06/01/2024	Thursday 2PM-4PM	1	
	Hours Per Week:	Location:			
	2 A ativitur	/000-B S Center Dr.	Suite B, Clearlake, C	A 95422	
	Activity:				
4.	Begins:	Expected To End:	Schedule:		
	Hours Per Week:	Location:			
	he country will cond me the	leastion and ashed do	for our	a ativity by	
	he county will send me the	location and schedule	Activity		Date
	will go to	on/by	to get my	·	location and/or
	will go to cheduleLocation	Date	to get my	Activity	
S	chedule.				
	will give my Welfare-to-Wor	k worker a copy of my	,		schedule
			A	ctivity	
b	y I will tell Date	my Welfare-to-Work w	vorker if any changes a	are made and give	e my Welfare-to-
v	Vork worker a copy of the c	hanges if required			
_		2 .	fastan in		
	understand that if I do not g	jo to and/or make sati	stactory progress in	Activit	/
	.a	s required, I may have	to go to different activ		
_	Activity		-		-
P	roof of satisfactory progres	s in these activities to	my Welfare-to-Work w	vorker by the date	(s) listed below.
A	ctivity: <u>Mental Health with I</u>	CBH			
A	ctivity: Parenting Classes w	ith CWS		Date Proof is D	ue: <u>5th of ea. mo</u>
A	ctivity: <u>SUDS</u>			Date Proof is D	ue: <u>5th of ea. mo</u>
A	ctivity:			Date Proof is D	ue:
	dditional Comments:				

Please submit your activity attendance sheet the 5th of every month. Please make sure that an Activity Supervisor. Instructor or Counselor signs each week that you attend.

WTW 2 Completed after CWS case plan

Conversation

AB 135 CalWORKs Family Reunification

Eligibility for CalWORKs Family Reunification (CWFR)

- All CalWORKs-eligible children were removed from the home and temporarily placed in out-of-home care.
- The family was receiving CalWORKs cash aid when the child(ren) was removed.
- CWS or a court has determined that the provision of cash aid, childcare, and/or reunification services is necessary for reunification, and a reunification plan is in development and/or in effect.

Assembly Bill 135 & CWFR Policy Changes

<u>AB 135 (Chapter 85,</u> <u>Statutes of 2021):</u> Amended Welfare and Institutions Code (WIC) Section 11203 Allows reunification parents who were receiving aid when the child was removed to also be eligible to receive cash aid and child care services if the county has determined that they are necessary for reunification

Increases the temporary absence period from up to 180 consecutive days to up to 6 months.

MPP Section 82-812.671:

The CWS *OR* court has determined that the provision of cash aid, childcare, and/or **reunification** services is necessary for reunification and a reunification plan is in effect

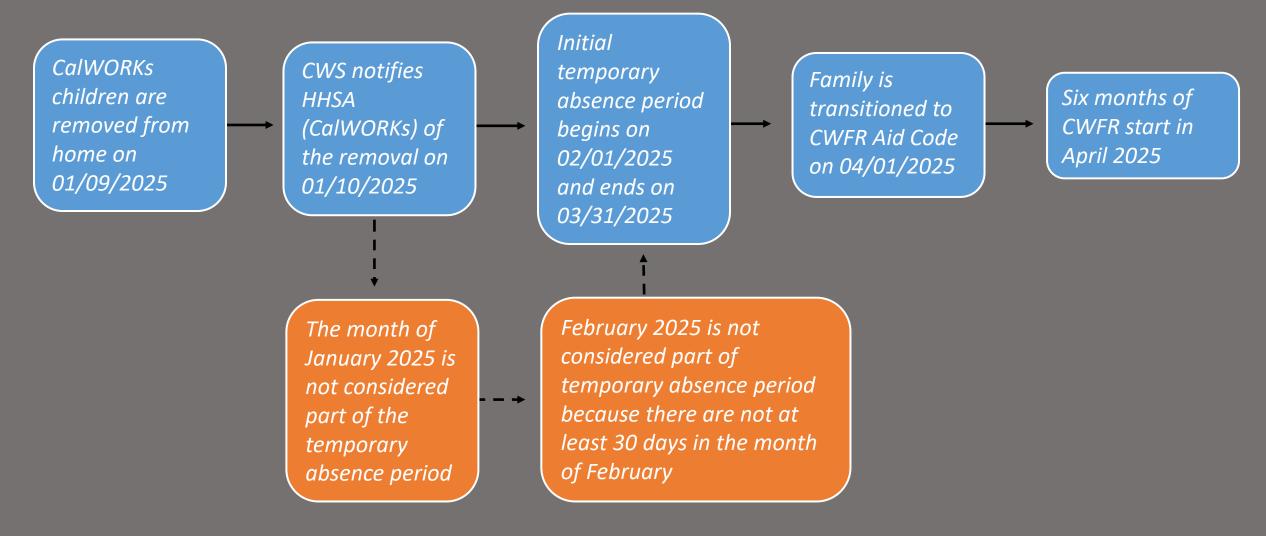
Upon notification that CWS **OR** a court recommends FR and the reunification plan includes a recommendation for the provision of cash aid as necessary to support reunification, the CalWORKs worker must start FR in accordance with the reunification plan and continue the CalWORKs cash grant for a maximum of six months if the family is otherwise eligible. A court order is not necessary to initiate FR. Existing reunification plans that do not already include a recommendation for the provision of cash aid must be amended prior to cash aid approval.

Initial Temporary Absence Period

When all CalWORKs eligible children are removed from the home by the CWS agency:

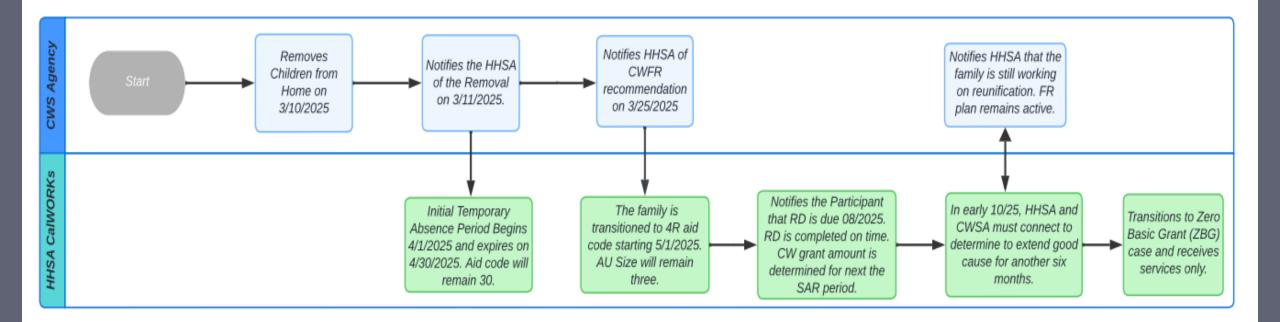
- 1. The children will be considered temporary absent for one full month. The family will not be discontinued.
- 2. The CWS agency should provide a notification to the HHSA on whether CWFR will be recommended before the end of the initial temporary absence period.
- 3. If the family is recommended for CWFR, the HHSA will transition the family to CWFR after temporary absence period has ended.
- 4. If HHSA receives notification that there will not be a recommendation for CWFR or does not receive a notification, then the family is discontinued from CalWORKs.

Initial Temporary Absence Period - Visual



Process Map for CWFR Cash Aid

- CW Family Composition: 3 (1 Parent + 2 Children)
- Current Aid Code: 30
- RD Due: August 2025



CWS FR Case Plan vs. WTW Plan

CWS FR Case Plan

- Families will not be subject to WTW noncompliance rules and risk financial sanctions.
- Minimizes conflicting requirements between WTW, child welfare, and families.
- Recognizes balancing work, training, and responsibilities can be challenging.

WTW Plan

- Must be used when providing additional activities and services not included in the case plan (i.e., education).
- Eases transition to WTW postreunification.

CWS Case Plan Requirements

Welfare and Institutions Code 16501.1

Reasonable services, or active efforts, in the case of an Indian child, for family reunification must be documented unless the juvenile court determines otherwise.

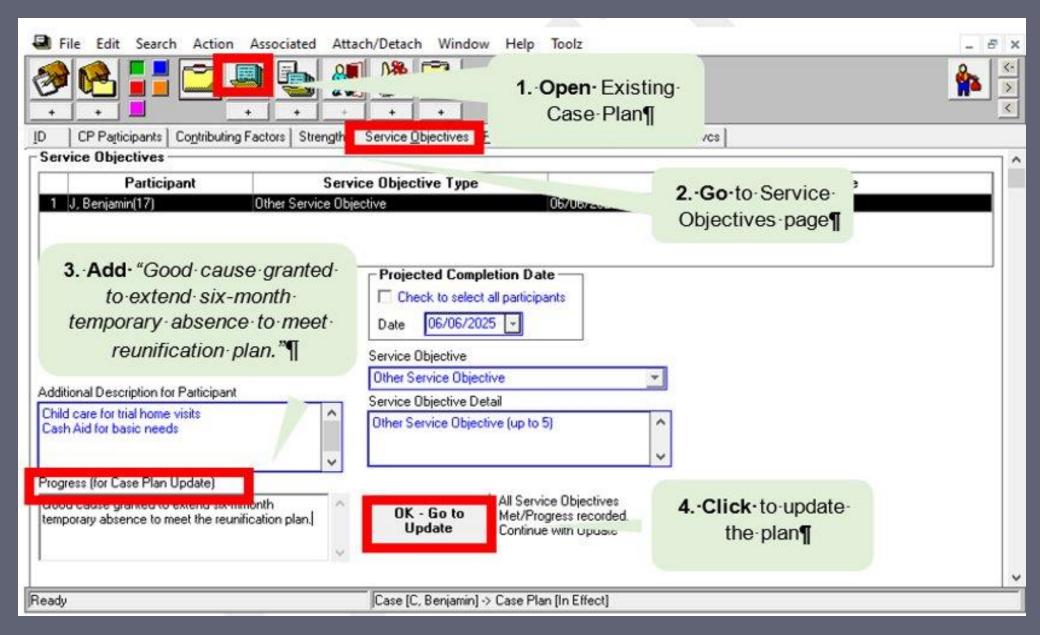
CWS Case Plan Requirements

Per Division 31-206 to 225: • The case plan goal • Any changes in Treatment services Treatment providers Changes in placement A description of the parent/guardian compliance with the written case plan Cooperation in keeping appointments

Create CWS Case Plan CWFR in CWS/CMS

	actors Strengths Service Objectives E	1.·Create·a· new·case¶	<u>**</u>
	Service Objective Type Complete homework Other Service Objective	Projected 06/06/2025 06/06/2025	Completion Date
Participants J, Benjamin(17)	Projected Completio	articipants Go to View by Participant	2.·Select· "Other·service·
dditional Description for Participant Child care for trial home visits Cash Aid for basic needs	Service Objective Detail Other Service Objective ((up to 5)	Objective"¶

Update CWS Case Plan in CWS/CMS



CWFR Best Practices

- Notify the CalWORKs worker as soon as possible to ensure timely transition to cash aid and services
- Assess the family strengths, needs and goals regarding services needed to begin CalWORKs FR.
- Coordinate services and resources with the CalWORKs partners to reduce stress and eliminate contradicting plans and goals.
- Team with the CalWORKs worker to monitor the case plan to achieve reunification and identify any extra barriers.
- Reach out to CDSS with questions using the resource document.
- Partner with CFPIC for implementation resources



Poll.



What's Next?



