

County of Santa Clara
Social Services Agency
Department of Family and Children's Services



CSFC SSA01 060706

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DATE: June 7, 2006

TO: Supervisor James T. Beall, Jr., Chairperson
Supervisor Don Gage, Vice-Chairperson
Children, Seniors & Families Committee

FROM: 
Will Lightbourne
Agency Director, Social Services Agency

SUBJECT: Children's Shelter Reuse Status Update

RECOMMENDED ACTION

Accept this Children's Shelter Reuse Status Update.

FISCAL IMPLICATIONS

There are no fiscal implications associated with the recommended action.

CONTRACT HISTORY

No applicable.

REASONS FOR RECOMMENDATION

The Children, Seniors and Family Committee (CSFC) requested this update on the status of the Mental Health and Educational Pilot Programs that are funded by the County and operate on the grounds of the Children Shelter. CSFC directed staff to prepare a matrix that displays the number of children served and the type of services received at the Children's Shelter before and after the implementation of the Children's Shelter pilot programs.

BACKGROUND

Cottage facilities at the Children's Shelter became available over the past several years as the average daily child population plunged from 107 in CY01 to 30 CY05. After receiving community input about the use of vacant facilities, the Board of Supervisors authorized the Department of Family and Children's Services (DFCS) to launch a Mental Health Pilot Program and an Educational Pilot Program in January 2005. The target population for the Pilot Programs is children ages 6–11 years, newly admitted into protective custody, for whom a DFCS service case is subsequently opened. Most of these children are placed with relatives or in temporary foster care following being taken into temporary custody. Some children involved in the Pilot Programs are released back to parents and receive services in the community or from DFCS.

All children taken into initial protective custody, admitted to the Shelter and continuing to reside at the Shelter receive a core set of basic services that includes a mental health screening assessment to identify crisis issues, crisis counseling (if necessary), a physical health examination, schooling at their home school or the Shelter's school, and substance abuse treatment (if necessary). In calendar year 2004, there were 254 children ages 6–11 years taken into protective custody and admitted to the Shelter as compared with 270 children in calendar year 2005.

Since January 2005, the Pilot Programs have provided additional mental health and educational services. Because these services were not available until the Pilot Programs began, it is not possible to prepare a matrix displaying the number of children receiving these services before implementation of the Pilot Programs.

Between the start of the Pilot Program on January 12, 2005 and through March 31, 2006, a total of 339 children were eligible to participate in the Pilot Programs. An Additional 20 children who were already Dependent Children of the Court and therefore did not meet the Pilot Program criteria, were referred by their social workers and participated in the Educational Program's "Success Camp."

Of the 339 eligible children, 107 were home and received Voluntary Family Maintenance Services and 232 were adjudged Dependent Children and received court-ordered services. (It should be noted that the Mental Health Department is serving more children in Voluntary Family Maintenance Cases than in the past.) Forty-three (43) children or about 13% of eligible children resided in South County.

The Mental Health Pilot Program

The Mental Health Pilot Program is a collaboration between DFCS and the Mental Health Department, Family and Children's Division that is designed to ensure that children receive a mental health status assessment in addition to the basic mental health screening assessment for crisis issues, and referral to community-based mental health service providers if ongoing counseling is deemed necessary. Mental Health staff continue to work with the child until the community provider picks up the case. The Mental Health Department gathers and analyzes performance measurement data related to access to mental health services and satisfaction with services.

The tables in Attachment A provide data about children eligible to participate in the Mental Health Pilot Program over approximately a 14 ½ month period between January 12 2005 and March 31, 2006. Approximately 80% of children received a mental health assessment, and of those children, approximately 91% met the "medical necessity" criteria for continued mental health services. Of those children needing continued mental health services, 99% were referred to mental health services in the community or were pending referral. Approximately 91% of children referred to community-based mental health services entered therapy by March 31, 2006, with a median average time from date of removal to first appointment of 23 days. Approximately 97% of parents and out-of-home placement caregivers responding to the satisfaction survey were satisfied with the mental health services the children received. Approximately 76% of social workers "Strongly Agreed" or "Agreed" that the Mental Health Pilot Project had been beneficial to the child.

Of the 339 eligible children, 262 were members of sibling groups. Siblings of children who were eligible for the Pilot Program were also served by the Mental Health Department in regards to referral for assessment and treatment. Data for these siblings is not included in this report.

The Educational Pilot Program

The Educational Pilot Program is a DFCS–County Office of Education collaboration designed to provide individualized assistance to improved children's academic and social adjustment in school through a 5–day program called "Success Camp." During the first day of Success Camp, teachers prepare by studying the specific needs of each participating child. Over the following three days, children attend a literacy–based program that includes interactive instruction and play. On the 5th day, teachers follow–up on planning with the child, caregiver and the child's teacher in the home school.

Success Camp focuses on building success through resiliency, organization and literacy; and preventing problems through social skill instruction. The research–based curriculum results in instructional procedures and reinforcements that maintain positive behaviors both inside and outside of the classroom, and include: classroom routines and survival skills, and instruction through interactive play to teach skill in making friends, dealing with feelings, alternatives to aggression, conflict resolution and stress management. Performance measures related to resiliency skills and client satisfaction are gathered and analyzed by the County Office of Education.

The tables in Attachment B provide data about children eligible to participate in the Educational Pilot Programs "Success Camp" over approximately a 14 ½ month period between January 12 2005 and March 31, 2006. As of March 31, 2006, 35 children who had recently been taken into temporary custody were in the process of being scheduled for Success Camp. Data about these children are not included in the tables in Attachment B. A total of 155 children completed Success Camp and another 71 were scheduled or will be scheduled to participate in the near future. Another 98 did not participate, with the most prominent reason being that the child moved out of the area (38%). A total of 29 children did not attend because either the parent or out–of–home caregiver declined involving the child (15 children), the child refused to attend (10 children), or the child s social worker determined that participation was inappropriate for the child (4 children).

Children, parents, out-of-home caregivers and social workers were surveyed. The children were visited at their home schools. All 109 children surveyed reported enjoying Success Camp. Ninety-six percent (96%) of these children reported that they had used Success Camp materials (e.g., journal, books, CD, etc.), and 69% said they had used the materials with their parents or caregiver.

Ninety-seven percent (97%) of the 35 parents and caregivers who responded to the survey reported that their child enjoyed Success Camp, and 86% of that number reported that their child talked about experiences at Success Camp. Fifty-seven percent (57%) said that they noted a positive difference in their child following Success Camp.

Of the 49 social workers who responded to the survey, a total of 90% either "strongly agreed" or "agreed" that Success Camp was beneficial to the child.

Next Steps

Experiences over the first 14½ months of the Pilot Programs have identified the following program needs:

- Continued communication among DFCS, Mental Health and the Office of Education is essential to ensure effective services.
- An improved data tracking system is needed. Some data may be lost in the current data tracking system. The system should better track mental health service outcomes at 1-, 3- and 6-month intervals. Ultimately, if possible, measurements should include indicators of Pilot Programs' impact on County System Improvement outcome goals to reduce the number of multiple foster care placements and reduce the rate of re-entry into foster care.
- Engage parents and out-of-home caregivers to improve their participation and support for the Pilot Programs.
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- Treatment consent forms must be promptly obtained and processed by well-trained DFCS social workers to ensure timely Mental Health Services.
- Continue to improve timeliness of involvement of community-based mental health service providers.
- Transportation to get children to Success Camp needs to be continued.
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CONSEQUENCES OF NEGATIVE ACTION

The Children, Seniors and Families Committee would not be informed about the status of the Children's Shelter Reuse.

STEPS FOLLOWING APPROVAL

The Clerk of the Board will follow the usual procedures for a report of this type.

ATTACHMENTS

- Attachment A
- Attachment B

**The Mental Health Pilot Program
Children Ages 6-11 Years
January 12, 2005 through March 31, 2006**

Children Ages 6-11 Years Meeting Criteria for Participation in the Mental Health Pilot Program	Number (Percent) of Children
Received Mental Health Status Assessment	273 (80%)
Receiving Existing Mental Health Services	41 (12%)
Moved Out of the Area before Mental Health Screening and Assessment	10 (3%)
Pending Mental Health Screening and Assessment	9 (3%)
Unavailable for Assessment	6 (2%)
Total Number Meeting Criteria for Participation in Pilot Program	339

Children Assessed by the Mental Health Pilot Program Who Met or Did Not Meet "Medical Necessity" Criteria for Continued Mental Health Services	Number (Percent) of Children
Met Medical Necessity Criteria for Continued Services	248 (91%)
Did Not Meet Medical Necessity Criteria for Continued Services	25 (9%)
Total Number Assessed	273*

Referral Outcomes for Children Assessed by the Mental Health Pilot Program as Meeting Medical Necessity Criteria	Number (Percent) of Children
Referred to Community Based Mental Health Providers	166 (61%)
Referred to Private Mental Health Providers (e.g., funded by Victim Witness)	72 (26%)
Awaiting Placement to Determine Where to Refer Child	6 (2%)
Parent Refused Mental Health Services for Child	4 (1%)
Total Number Assessed	273*

Children Completing First Appointment with Community-Based Mental Health Provider*	Number (Percent) of Children
Completed First Therapy Session with Provider	151 (91%)
Pending First Therapy Session with Provider	15 (9%)
Total Number Referred to Community-Based Mental Health Providers	166

Median Time Elapsed After Temporary Custody for: Mental Health Assessment, Referral to Mental Health Provider, and First Therapy Session	Time Elapsed Jan. 05 – Mar. 06
Median Average Time: Temporary Custody to Beginning Assessment	2 days
Median Average Time: Beginning of Assessment to CBO Referral	17 days
Median Average Time: Referral to Community-Based Provider First Session	23 days

Follow-up Survey: Responses of the 127 Parents and Caregivers Who Responded the Survey	Number (Percent) of Parents/Caregivers Jan. 05 – Mar. 06
Satisfied with Mental Health Services	123 (97%)
Dissatisfied with Mental Health Services	4(3%)

Follow-up Survey: Responses of 49 Social Workers Who Responded to the Survey	Number (Percent) of Social Workers
"Strongly Agreed" Mental Health Pilot Program Beneficial to the Child	19 (39%)
"Agreed" Mental Health Pilot Program Beneficial to the Child	18 (37%)
"Disagreed" Mental Health Pilot Program Beneficial to the Child	6 (12%)
"Strongly Disagreed" Mental Health Pilot Program Beneficial to the Child	1 (2%)
No Response to Question Regarding Benefit to the Child	5 (10%)

The Educational Pilot Program – Success Camp
Children Ages 6-11 Years
January 12, 2005 through March 31, 2006

Children Participating in Success Camp	Number (Percent)
Met Program Criteria and Participated	135 (60%)*
Dependent Children Referred by Social Worker and Participated**	20 (9%)*
Caregiver/Social Worker Requested Participation be Postponed	12 (5%)
Scheduled to Participate	48 (21%)
Parents or Caregivers Requested Summer Success Camp	11 (5%)
Total Participated/Pending Participation	226

* 155 children (69%) completed Success Camp as of March 31, 2006

**These 20 Dependent Children of the Juvenile Court were initially taken into protective custody and had open cases before the beginning of the Educational Pilot Program.

Children Not Participating in Success Camp	Number (Percent)
Moved Out of the Area Prior to Participating	37 (38%)
Parent/Caregiver Refused to Allow Child to Participate	15 (15%)
Child Refused to Participate	10 (10%)
Social Worker Determined Program Inappropriate for Child	4 (4%)
Aged-Out of Program (turned age 12 years)	10 (10%)
Sign Language Interpreter Not Available*	3 (3%)
"Severely Emotionally Disturbed" (SED) Special Needs	6 (6%)
Autism Special Needs	2 (2%)
Participation Counter-Indicated - Previous Negative Experience at the Children Shelter	2 (2%)
DFCS Case Closed Before Attending Success Camp	9 (9%)
Total Number Not Participating in Pilot Program	98

* The Pilot Program is looking into bringing a Sign Language translator into classes

Follow-Up Visits and Surveys	Number (Percent)
Children Visited at Home Schools for Follow-Up Survey	109 (70% of 155 children who completed Success Camp)
Parents and Out-of-Home Caregivers Who Participated in Survey	35 (unavailable)
Social Workers Who Participated in Survey	49 (unavailable)

Children's Response to Follow-Up Visit Survey	Number (Percent)
Reported Enjoying Their Experience at Success Camp	109 (100%)
Reported Using Success Camp Materials (e.g., journal, books, CD, etc.)	105 (96%)
Reported Using Success Camp Materials with Parent-Caregiver	75 (69%)

Follow-up Survey: Responses of the 35 Parents and Caregivers Who Responded the Survey	Number (Percent)
Reported the Child Said They Enjoyed Success Camp	34 (97%)
Reported the Child Talked About Experiences at Success Camp	30 (86%)
Reported Seeing a Positive Difference in the Child since Success Camp	20 (57%)

Follow-up Survey: Responses of 49 Social Workers Who Responded to the Survey	Number (Percent)
"Strongly Agreed" Success Camp Beneficial to the Child	23(47%)
"Agreed" Success Camp Beneficial to the Child	21 (43%)
No Response to Question Regarding Benefit to the Child	5 (10%)