

Reaching Out

CURRENT ISSUES FOR CHILD WELFARE PRACTICE IN RURAL COMMUNITIES

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What's Inside

From the Director	Cover
Sobering Statistics from across the State	2
Innovative Studies for Economic Distress	3
Privatization of Child Welfare	4
What's Happening in the State Legislature?	6
Tips for Surviving Fiscally Tough Times	7
Successes from a "Super Agency"	8
Surviving Tough Times as a Frontier County	9
Enhancing Local Services through Volunteers	10
Taking Care of Yourself During Stressful Economic Times	12
More County Program Highlights	14
Announcements	Back cover

Surviving these Challenging Times

By Susan Brooks, Director, Northern California Training Academy

What an uncertain time to be providing social services to children and families in California. Every day we are inundated by media informing us of the desperate budget situation in California and we see firsthand during our work experiences how desperate the lives of the families we serve have become. While economic times have become harder for many Californians—including some of you reading this publication—they have become even worse for many of the families and children with whom we work.

These economic challenges affect our work in many ways:

- Economic uncertainty can cause significant stress in families already struggling to make ends meet which can result in an increase in the number of children and families impacted by child abuse and neglect.
- With a 12 percent unemployment rate for California (and much higher in many rural counties), this economic stress can impact the children and families we serve as well as our own families.

- With the potential realignment of social service funding from the state to the counties, there is uncertainty about how the work we do will be funded in the future. Counties may experience both an increase in costs and cuts to social services.
- Economic uncertainty cuts down on the options we may have available for how we do our jobs. It also cuts down on the resources we have available to help the families and children we work with.

However, rural and semi-rural counties like those in Northern California bring a number of unique strengths to this current economic crisis:

- Small, rural counties have always been experts at being flexible. Because of small populations and generally large distances, rural counties have had to be flexible in how they provide services to residents.

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Sobering Statistics from across the State

The following information is based on a survey of 58 county child welfare agencies by the County Welfare Directors Association of California (CWDA) on the impacts of the **\$133 million loss** to child welfare services in the 2009-10 budget year.

Sacramento County has **lost 30 percent of its staff** since May 2009. Nearly 3,000 children remain in foster care longer than in past years as the remaining staff struggle to meet their needs.

San Joaquin County estimates it will have **60 fewer foster families** able to take in children because of cuts in licensing and recruitment.

Budget cuts yield fewer prevention services designed to keep families intact and avoid higher costs in foster care.

Monterey, Riverside, San Bernardino, San Diego, San Francisco, Siskiyou, Tehama and Yolo counties all reduced and/or eliminated early intervention services to families who come to the attention of child welfare agencies, leaving nearly **6,000 families without the support** needed to avoid children being removed from homes.

Sacramento County severely scaled back services, including home visitations, offered through its Birth and Beyond family resource centers, **eliminating services for 8,500 families**.

Butte and San Diego counties were forced to **reduce counseling services** for sexual abuse victims, impacting 35 exploited children in those two counties. San Diego County eliminated a mental health therapy program for troubled teens designed to reduce criminal behavior and prevent youth from being removed from their homes.

~ Excerpted from the "Protect Our Children. Protect Our Future" Coalition Factsheet. 2011.

Continued from cover

- Rural counties have great experience working collaboratively as a way of maximizing resources. The collaborative models for sharing resources that urban counties are just beginning to investigate have long been the norm for rural counties.
- Rural counties look beyond their county border to develop programs. Again, this creative approach to building programs is well developed. Rural counties abandoned the luxury of "turf wars" long ago, and the result has been better services to families and children.
- Finally, rural counties are resilient. They recognize that their major resource is the staff who works there. These staff members, particularly in social services, have had both the personal and professional experience of relying on close-knit communities to get through crises. California human services is currently in a financial crisis that will prove no different.

We hope this issue of *Reaching Out* will both inform and inspire your work with children and families.



Innovative Studies for Economic Distress

In view of the dire predictions regarding the economic future of California and its existing and possible future reduction of funds to social services and child welfare in particular, two recent studies of innovative assessment practices could be helpful in determining future practices.

Cost Calculator for Children's Services

The Center for Child and Family Research at Loughborough University, England, conducted a study described in the October 2010, article "A Strategy for Assessing Costs of Implementing New Practices in the Child Welfare System: Adapting the English Cost Calculator in the United States," (Chamberlain, P., Snowden L., Padgett C., Roles S., Holmes L., Ward H., Soper J., Reid, J., and Landsverk, J.). The authors described the concept of a Cost Calculator for Children's Services as "a method for accurately estimating the costs of core activities routinely performed by child welfare case workers and supervisors and the associated administrative costs that accompany them." The purpose of the Cost Calculator is to determine whether or not adopting evidence-based and innovative practices is cost effective relative to the outcomes as well as whether or not the status-quo is the better option.

In the United Kingdom, the researchers identified eight core processes of social work around which they calculated direct client-related activities as well as indirect activities and overhead costs: 1) deciding if the child needs to be placed and finding the first placement, 2) care planning, including development of the permanency, education and health plan, 3) maintaining the placement (placement costs and all ongoing activities to support the placement), 4) ending the placement, 5) finding a subsequent placement, 6) case reviews, 7) legal processes, and 8) transition to leaving care.

The U.S. and U.K. recently took a step toward a collaboration that will result in adoption of this method for use in the CWS in America. The results led to the conclusion that the structures of the CWS in the U.S. and the U.K. are similar enough that this same method can be applied here. Currently, organizations in two states, California and Oregon, are working with the researchers in the U.K. to begin implementation. Stay tuned because it is possible this tool may be available in your county soon.



Quantifying economic distress

The second study was described in a September 2010, paper written by Christopher Wimer and Emily Ryo titled "Measuring Economic Distress in San Francisco." Wimer and Ryo designed and implemented this study to fill a gap that existed because of the lack of official statistics regarding how much economic hardship and distress is increasing and/or abating.

The study looked through administrative and public data to determine indicators of economic distress in San Francisco (SF). The researchers found the relevant indicators provided in the data from the following sources:

1. CalWORKs enrollment
2. CalWORKs homeless assistance requests
3. Bankruptcies
4. Food stamp applications
5. Food bank pantry visits
6. MediCal medically needy enrollment
7. Healthy San Francisco enrollment (provides health services to all SF residents lacking health insurance whose income falls below 500 percent of the federal poverty level)
8. Foreclosures
9. Unemployment
10. Unemployment insurance recipients
11. CAAP participation (County Adult Assistance Program)

The records provided the data for the indexes that were calculated and subsequently published. The finding was that since December 2007, (first official month of the "great recession"), economic distress in SF has increased a full 100 percent.

For child welfare services and the northern counties, this study might be a model for determining the level of economic stress in a particular county that could be a part of grant proposals, changes in program offerings and other directives that would help make it easier to weather this economic recession.

Privatization of Child Welfare: A Complex Question

By Rose Wentz, Wentz Training

What is privatization?

During times of economic crises the topic of privatization is often debated. Historically, private and religious agencies were responsible for child welfare in the U.S. until the mid 1900s when child maltreatment was formally acknowledged as a public welfare/public health issue, and government took primary responsibility for addressing this societal need. While great strides have been made in the protection of children and the child welfare system, it is still debated who would best deliver services to children and families; and who could do so most cost effectively. Although there is no official definition of privatization, the term has come to represent a continuum of options that moves public child welfare responsibilities to non-government organizations.

Privatization does not eliminate the state's responsibilities to ensure families receive services as mandated in state and federal laws, and Title IV-E and Children and Family Services Reviews must meet the federal standards in order for the state (and thereby ultimately the contractor) to receive federal funding.

What can privatization include?

All states have some level of privatization. According to the National Quality Improvement Center on Child Welfare Privatization, about 13 states are actively using privatization as of 2010. Kansas and Florida were the first states to privatize the majority of their child welfare system. Some states are in the midst of major efforts, such as Nebraska, and others have discontinued or changed what is privatized after experiencing problems.

The privatization continuum includes the following:

- Case management services for in-home and foster care cases (Kansas and Florida)
- Special types of cases: children with high service needs (Missouri); timely permanency (Michigan)
- Differential response (Maine)
- Investigations by law enforcement (some areas of Florida)
- Administrative functions such as SAWIC system
- Support services such as parent education and treatment services for parents
- Specific caseworker services such as forensic interviewing of sexually abused children

In all states, some level of state government oversight of the service contractor still exists. Privatization does not eliminate the state's responsibilities to ensure families receive services as mandated in state and federal laws, and Title IV-E and Children and Family Services Reviews must meet the federal standards in order for the state (and thereby ultimately the contractor) to receive federal funding.



Who Provides Services?

Services are provided by not-for-profit agencies that have traditionally been providing services (e.g., Lutheran Social Services), for-profit agencies such as KVC Health Systems, and new organizations formed specifically to contract for these services.

Most contracts are done with local agencies that already exist though many have to make substantial changes in their practice to take on large-scale privatization. In privatization efforts, contracts usually include a competitive bidding process and/or performance-based contracts.

Many are skeptical about contracting with for-profit businesses. At least one study showed that not-for-profit organizations did not necessarily provide higher quality of services than for-profit organizations. “We find that for-profit firms appear to offer both higher quality outcomes and lower costs. We do, however, confirm that nonprofits demonstrate lower quality of care outcomes in the presence of for-profit firms” (Thornton, J. and Cave, L., 2010).

Does privatization work?

In the research and reports on improving child welfare outcomes, the results are mixed—some show better outcomes and others do not. Even within the same state or contract, the results can be mixed. One of the most common “lessons learned” is to clearly define outcomes and determined measurements before contracting.

It is not clear if privatization will reduce costs. The data shows it is likely that costs will increase during the startup phase. There are costs for both the contracting agency (hiring staff, development of infrastructure, need to have immediate cash flow since typically the public agency pays after the service is provided, etc.) and the public agency (development of plan, RFP and contracting processes, monitoring of the contracts and possible staff costs associated with downsizing the agency).

Since public agencies budget differently from private agencies, it has not been easy to estimate costs and therefore not easy to conduct research to determine which system is more cost effective.

Additionally, privatization has not been able to help the profession avoid tragic child death cases, employee failure to provide required services and other high media situations.



How are rates or fees established?

Historically, the distribution of Title IV-E funds has been restricted to public and nonprofit institutions. However, the Fair Access Foster Care Act of 2005 (Public Law 109-113) removes language restricting federal funding to nonprofit and public entities.

Methods used to establish the rates include:

- Managed care or lump sum payments
- A set amount for each month the child is in care (most common)
- Activity-based costs or fee for services

There have been problems in several states with the public agency and contractor not estimating costs correctly leading to contractors losing money, bankruptcy or terminating their contracts early. This in turn led to negative impacts on the children, foster parents, birth parents and staff of the agencies.

Incentives can be a part of a contract but caution is needed as this may lead to unintended consequences. For example, lump sum pay in which the agency can keep the amount not spent with the goal of returning children home quickly could lead to children going home before safety can be assured.

To learn more: Articles and research

Thornton, J. and Cave, L. “The Effects of Organizational Form in the Mixed Market for Foster Care,” *Annals of Public and Cooperative Economics*, (2010) 81: 211–245.

http://papers.ssrn.com/sol3/papers.cfm?abstract_id=1023657

Federal resources

National Quality Improvement Center on the Privatization of Child Welfare Services funded by Children’s Bureau
<http://www.uky.edu/SocialWork/qicpcw/>

Child Welfare Privatization Initiatives: Assessing their Implications for the Child Welfare Field and for Federal Child Welfare Programs
<http://aspe.hhs.gov/hsp/07/CWPI/>

To receive email updates on national child welfare news (child welfare in the news) and extensive online resources on child welfare <http://www.childwelfare.gov> and <http://www.childwelfare.gov/admin/subscribe/#page=subscriptions>

News articles on Nebraska’s current privatization efforts
<http://www.throughtheeyes.org/articles/category/news/local-news/>

What's Happening in the State Legislature?

By Sarah Jimenez, County Welfare Directors Association of California (CWDA)

“Restoring funds to Child Welfare Services is important to me because I am a parent who went through child welfare with my daughter in 2006, and successfully reunified. I know firsthand how important it is because the system saved my life.”

“This is important to me because I talk to young moms every day who want to be able to care for their children but urgently need more support. It is heartbreaking that the most vulnerable in our community have the least support and hardest time getting ahead. Please make the children in our state a priority.”

These are among the stories child welfare and foster care advocates have worked to share with policymakers at the State Capitol in the last two years to bring awareness to one of the most devastating cuts to children—the \$80 million budget cut to Child Welfare Services two years in a row under the former governor. With the loss of federal matching funds factored in, the total loss rises to \$133 million each year.

As many in the child welfare world know all too well, California's child protection system was under-resourced prior to the cuts. The vetoes exacerbated the situation—it slashed funding for more than 600 frontline social workers; response times for calls to CPS hotlines are slower; and more children are lingering in foster care and bouncing between foster care placements because the children and their families are not receiving needed services in a timely manner. The consequences are evident in child and family outcomes, which were previously improving but are now declining.

Restoration of those funds has been a top priority for child welfare advocates at the Capitol, particularly as the state's chronic budget problem continues to dominate policymakers' attention.

On May 16, Governor Brown released his May Revision to the 2011-12 State Budget. The May Revision projects a reduced, although still significant, deficit of \$9.6 billion. That number has come down from the \$26.6 billion deficit pegged in February due to more than \$11 billion in cuts by the Legislature in March and increased revenues in the last month.

Where does that leave Child Welfare Services now?

Much of the budget discussion on Child Welfare Services is in the context of the governor's proposal to shift public safety programs between the state and counties—known as “realignment.” Child Welfare Services and Foster Care are among the programs broadly defined as public safety. While counties already have a significant amount of responsibility in these programs, the governor's proposal would alter the funding situation. The governor, his administration and stakeholders continue to work on the details of how realignment would be enacted and funded.

The governor's continued push to realign programs has provided a renewed opportunity for child welfare advocates to raise awareness about the \$80 million loss. A broad-based coalition of advocates—known as the *Protect Our Children. Protect Our Future. Coalition*—has been clear that regardless of the outcome of the realignment discussion, children are entitled to equal protection, and the state has an obligation to provide the resources necessary to protect those who are most vulnerable.

Among the activities the coalition has engaged in to make sure abused and neglected children are a priority of the state was the recent hosting of “Take a Foster Youth to the Capitol.” This activity is a day of job shadowing that pairs foster youth with their assembly member or senator. Paring foster youth with legislators reinforces that foster youth are the state's children. On May 11, more than 30 foster youth from across the state traveled to Sacramento to participate in the event, which served two purposes: 1) it provided youth an opportunity to learn about the legislative process, and 2) it brought attention to the \$80 million cut.

The work continues as budget hearings start up and budget deliberations heat up in the coming months. While the governor has signaled that he does not want to make any further cuts that cause pain to children, families and individuals, what type of compromise can be reached with the Legislature remains to be seen. In the meantime, child welfare advocates will continue to tirelessly work to ensure foster children and youth are a priority and encourage others to share why the Child Welfare Services and Foster Care systems are so critical for children and families.

You can send a message at
www.protectourchildrenca.org/dear-governor

10 Tips for Surviving Fiscally–Tough Times

For individual staff

1. Think of the long haul. This is just a temporary situation. If you can stick it through now, things will eventually get better.
2. Keep your sense of humor. While it's important to have a sense of humor to help you through the type of work you do, it's crucial now.
3. Understand that while furloughs and cuts are painful, they are usually imposed in an effort to save as many jobs as possible.
4. Don't engage in rumors or gossip. While this is a good guideline for work in general, it becomes even more important in tough financial times. There are a lot of painful changes happening, and feeding reality with the fires of rumors just heightens everyone's emotions and doesn't help anything.
5. Do your best work. Again, this is a good guideline for work in general, but sometimes people may be tempted to give less than their best when the administration is cutting their pay. The important thing to remember is that this is a temporary situation. Managers will remember who stepped up without complaining and continued to work hard even through financial cuts.
6. Tough times are the most important times to make sure your work/life balance is correct. The benefits of that "life" side—finding the little things to enjoy—become even more important when the work side gets more challenging.
7. Pick your audience when venting about work. Never complain about pay cuts to other staff who may make less than you do. The best suggestion is to keep all venting about any work changes confined to the people to whom you are close, who don't work where you do and can keep your venting to themselves.
8. Use this time to bolster your skills and resumé. If you work for a county that offers different training opportunities, take advantage of this. Community colleges and adult schools also offer fairly inexpensive classes that may allow you to sharpen your work skills.

For managers/administration

In addition to all the items above, remember the following evidence-based guidelines:

9. Research shows that when making cuts, the best strategy is to look for an individual program that is under-performing and cut that rather than reduce spending across the board. You may not have that discretion, but if you do, this choice will prevent all the other programs in your agency from slowly becoming ineffective.
10. One of the most important things during tough financial times is to retain staff. The cost of recruiting and training new staff, plus the cost of having new staff work with ongoing clients, adds to the pains of financial cuts and can ultimately result in poor program performance. Research has shown that the best way to retain staff is to offer them training on work-related subjects. While training is also an expense, it may ultimately save you from the bigger expense of losing experienced staff.



Doing More with Less: Successes from a “Super Agency”

For Humboldt County, the term “super agency” is synonymous with “holistic health.”

By the time Humboldt County Department of Health and Human Services combined the six departments of Behavioral Health, Social Services, Public Health, Employment Training, Public Guardian and Veterans’ Services in 2000, it had already begun engaging in alternative service approaches to better support families.

“As we began to explore the holistic approach, we realized rather than delivering ‘siloe’d’ services, if our limited resources could be integrated and provided across departments and in partnership with communities, we would realize better outcomes,” explained Phillip Crandall, director of Humboldt County DHHS.

Humboldt’s super agency model has paved the way toward successful service integration. In particular, the county merged services that work with children (e.g., Mental Health, CWS and Public Health Nursing), co-located them and increased their presence in the field, homes and resource centers. In addition, efficient claiming, reductions in high-cost services such as group home placements, reductions in CWS caseloads and other efforts such as the establishment of family resource centers that reduce the need for high-end interventions have all helped the county make the best use of limited funding.

“We have, to date, been able to avoid layoffs,” Crandall added, which he attributes to having a sound strategic plan, running an efficient department and providing most services in collaboration with community partners.

Below are two new evidence-based practice programs that are seeing positive results in the county.

Transition Age Youth Collaboration

In assessing critical needs for improved outcomes in Humboldt County’s child welfare and probation systems, one key gap identified was a lack of services and supports for transition-age foster youth. In response, DHHS partnered with local foster youth and California youth advocacy organizations to form a collaboration to better meet the needs of foster youth. The project is a five-year, \$1.5 million investment to improve outcomes for foster youth both during and after their exit from care. Now in its third year, the Humboldt County Transition Age Youth Collaboration (HCTAYC) is creating numerous opportunities for youth to become involved in youth-serving programs, enabling youth engagement in decision making and policy setting and, as a result, developing effective, responsive and youth-informed TAY services.

Nurse-Family Partnership Program

The Nurse-Family Partnership is funded by Humboldt County DHHS with support by grants from First 5 Humboldt and United Healthcare/Pacificare. The program, which began in 2009, provides home visitation services to high-risk, first-time mothers. The home visits begin early in the mother’s pregnancy and continue until the child’s second birthday. Nurses provide support, education and counseling on health, behavioral and self-sufficiency issues.

Humboldt is one of 13 counties in California providing these services. As an evidence-based practice, research has shown that children of the mothers involved in this program have a reduced risk of maltreatment, fewer childhood injuries and improved readiness for kindergarten. To date, Humboldt’s Nurse-Family Partnership has served nearly 150 first-time mothers.

Looking ahead

Despite budget instability, Humboldt County is continually looking for ways to implement new evidence-based practices that support children and families and build linkages with community resources across a person’s lifespan.

“Children live in families. If we support them early and holistically, then the need for high-end and high-cost services decreases as they become adults,” Crandall said.





Surviving Tough Times as a Frontier County

In vast yet sparsely populated counties like Siskiyou, surviving massive budget cuts means going back to basics.

Located in the northernmost region of California, Siskiyou County is the state's fifth largest county by area but has only about 45,000 residents. The large service area, limited economic base and rural, rugged driving conditions that make transportation to services difficult pose significant challenges for public and private agencies alike, explains Connie Lathrop, M.S.W., program manager for Adult and Children's Services, Siskiyou County Human Services Agency.

"But the biggest problem we have in this county is poverty," says Lathrop, who has worked for 21 years in child welfare and adult services. "We have a very high unemployment rate [currently 20 percent], and that causes a lot of stress."

Poverty, geographic isolation and a high incidence of mental illness and substance abuse have left many Siskiyou families vulnerable to child abuse and neglect. At the same time, reduced staff levels and service contracts have made it more difficult to support these families.

One area of cutbacks in the county has been the virtual elimination of contracts for private therapists—losing all but one who specializes in anger management and domestic violence. The county was also forced to end its contract with a provider for Differential Response services.

"As we can, we are trying to bring services in-house and provide them by our own workers and in cooperation with community partners," Lathrop says.

The department is now working closely with the 10 Family/Community Resource Centers scattered throughout the county to provide services. "They are in the small communities where people live, which allows much better access to assistance than our office in Yreka."

In addition to collaborating with the resource centers, the department has implemented evidence-based/promising practices like Structured Decision Making and Signs of Safety as a way to manage costs. Since the implementation of the county's Strategic Plan earlier this year, foster care caseloads have decreased, more children are placed with relatives, children are returning home earlier, and social workers are working much more closely with families.

"It is cost effective to keep kids with their family, and it's better for the family—when it's safe," Lathrop adds. "What we're doing now is really just good old-fashioned social work."



California needs
1,817 additional
social workers
to meet *minimum*
recommended
standards to
serve abused and
neglected children,
and 4,270 more
social workers to
ensure positive
outcomes for
children.

~ Excerpted from the "Protect Our Children.
Protect Our Future Coalition" Factsheet. 2011.

Enhancing Local Services through Volunteers, Interns and Subsidized Employees

By Cori Ashton, Program Manager, Tuolumne County
Child Welfare Services

Citizen engagement in local public service allows a collaborative, informed citizenry and in turn, a more responsive government. This philosophy guides practice in Tuolumne County where community partners are tapped for ideas in prevention strategies and volunteers are brought in to more fully support local service delivery in child protection. This concept is not new nor is it particularly creative, but it is critical in today's economic climate. In Tuolumne County, three specific target areas have been managed through the use of volunteers: Independent Living Skills Program (ILP) support, Foster Parent Retention, and Family Search and Engagement (FSE).

Volunteer ILP life coach

As part of the Tuolumne County System Improvement Plan (SIP) for 2010-13, staff have committed to ensuring every ILP youth, aged 15-21, has a youth-directed, transitional independent living plan in place and an identified adult who will assist the youth as they enter adulthood. We are fortunate to have identified an undergraduate intern through William Jessup University who developed and took on the role of youth life coach. Our youth life coach, Jim, provides our 15-21 year-old youth a mentor who assists them in outlining and achieving their personal emancipation goals. Jim has invested more than 170 hours working with more than 20 youth including those residing at our THP+ transitional home. Jim's time is spent one-on-one with youth, actively pursuing ILP goals and includes time entering all necessary data to maintain compliance with NYTD (National Youth in Transition Database) and ILP requirements. Jim's volunteer commitment has dramatically and positively impacted Tuolumne County's ILP delivery and tracking.

Subsidized intern for FSE work

Another critical area in need of support in Tuolumne County included our mandated rollout of family search and engagement strategies on every CWS case. Considering existing caseload pressures and reduced budgets preventing the recruitment of paid staff, staff have been concerned about the time commitment related to such diligent family finding efforts. The solution: subsidized volunteers. Our FSE intern is placed with CWS through the Welfare to Work subsidized employment program and provides us with 32 hours of work each week which is fully paid through Welfare to Work. The benefit is multiplied in that while she provides a critical function in finding and engaging families, she is developing a unique skill set that meets her personal employment goals that she can apply to future employment in any number of related fields

thereby increasing WtoW program success. She is eligible to continue in this role for six months with opportunity for a six month extension if approved and has already provided more than 500 hours of service. Our FSE intern's volunteer commitment has significantly improved the county's FSE compliance as shown below.

Tuolumne County Family Search and Engagement (FSE) Data

	FSE contacts recorded	% compliance
Q1 2010	20	12.2%
Q2 2010	12	8.5%
Q3 2010	48	31.6%

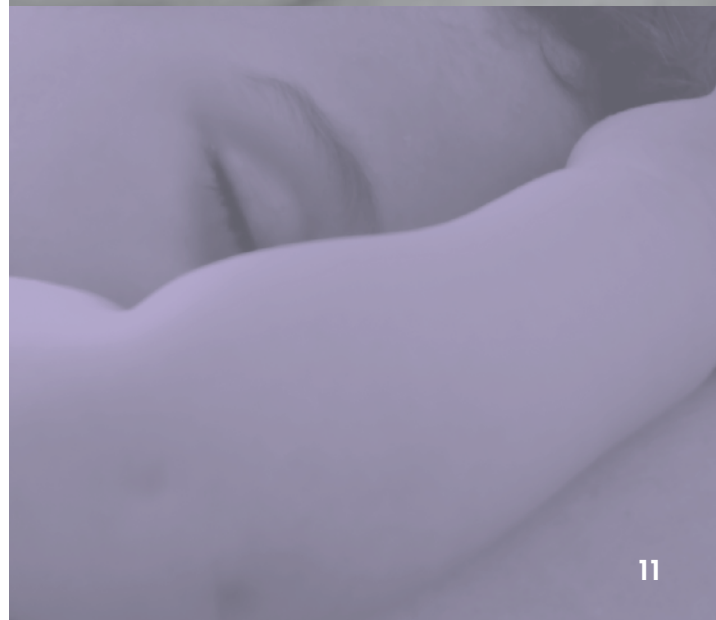
CWS-foster parent liaison

A third area in need of more focused effort is foster parent retention. For this activity, we identified a recently retired community member who provides at least six hours per week of time during which she makes personal contact with each local foster parent to nurture the relationship between the caregiver and the CWS agency. By having a contact person, one who provides a listening ear and place to discuss the challenges and joys of foster parenting, Mary has given new life to the important CWS/foster parent link. Other activities include visiting with youth awaiting placement or visits, data collection and file maintenance.

Plans for continued success

Another opportunity for continued use of volunteers, interns and subsidized employment placements exists for ASQ screening to meet CAPTA requirements for all children ages 0-3 with substantiated abuse or neglect. As we implement our local ASQ Initiative, currently underway, use of volunteers trained in ASQ screening will be available to assist in meeting this mandate.

Compliance in each target area receiving volunteer support has improved in Tuolumne County due to the extraordinary efforts of our volunteers and interns. Though volunteers have not always been easy to find due to the small, rural nature of the community, through community forums aimed at engaging our neighbors in system improvement efforts and nurturing relationships with those engaged in higher education, we hope to continue to draw from the natural talents of those yearning to play a part in serving our most vulnerable families.



Taking Care of Yourself During Stressful Economic Times

People working in the social service field during these trying economic times, particularly in the government and non-profit sectors, are on two different front lines. The first is that they work in programs that are currently being severely cut despite not being fully funded from the beginning. Second, they work with clients who are in crisis. These clients may be suffering from addiction, struggling with anger management, have had their children removed or living with little or no income.

What follows are some excerpts from a web article called, "The Self-Care Starter Kit,"* and originally written to help social work students at the University of Buffalo School of Social Work with the stress caused by graduate school. Its premise is that to have a comprehensive sense of the balance of your life, you need to develop a self-care plan with activities and assessments as part of the plan.

The term "self-care" is widely used to refer to activities and practices that a person engages in on a regular basis to maintain and enhance short- and longer-term health and well-being.

There is no "one size fits all" self-care plan. Each person

has to develop his or her own plan because everyone has his or her own unique life history with distinct demands, stressors and challenges, and each person has individual goals and aspirations. These factors influence the challenges confronted day to day as well as how ably they are managed. Each person also tends to have his or her own "go-to" activities and strategies to manage stress. In some cases, these activities are developed consciously and intentionally, but often they are unexamined habits, some of which may be less than optimal for our long-term health and well-being. It is important to take the time to examine them when developing a self-care plan.

Despite the uniqueness of the individual self-care needs, there is a common set of objectives in almost all such plans: taking care of one's physical health, managing and reducing stress, honoring emotional and spiritual needs, nurturing relationships and finding balance in personal and work life. To reach these objectives, identify what you value and need as part of your day-to-day life and also the strategies you could employ when and if you face a crisis along the way. Your self-care plan includes the activities you have identified and committed to engage in on a regular basis to nurture your body, mind, emotions, spirit, relationships and work.





Steps to putting together a self-care plan

There are some straightforward steps to completing your self-care plan. When you put your self-care plan together, think about your answers to each of these questions in each of the domains of your life (body, mind, emotions, spirit, relationships and work).

1. **How do you cope now?** For example, identify what you do now to manage stress in your life and assess how well suited these strategies are to your long-term health and well-being.
2. **What would you like to do?** Thinking about this can give you some ideas for other things you can do in the future to help, for example, maintain your physical health such as eating more healthily.
3. **Outline your plan.** Write down activities that you already engage in and those you would like to add. Both current and new practices should be included in your self-care plan.
4. **Obstacles to implementation.** Once you have identified practices you want to use, try to identify possible barriers or obstacles that could get in the way of implementing and/or maintaining them. For example, are you suffering from compassion fatigue or burnout?
5. **Make a commitment to yourself.** Preparing a plan is important; it identifies your goals and the strategies to achieve them. However, your success in implementing your plan is ultimately based on the level of genuine commitment you make to your own self-care.
6. **Share your intentions.** Just as having an exercise buddy can help you maintain a regular exercise schedule, it also helps keep you on track with your self-care plan.
7. **Follow your plan.** As obvious as this step may sound, sometimes taking that first step toward improving how you maintain your own health and well-being is the most difficult.

Self-care plans need to be concrete

The topics listed below are just some examples of what you might include in your own plan. These can be used to maintain your physical health, decrease your stress, increase relaxation and manage challenging emotional situations (including work situations).

Healthy Eating. One important way to maintain and enhance your physical health is through healthy eating.

Physical Fitness and Immunity. Getting regular physical exercise and taking steps to protect yourself from contracting colds and flu bugs are fundamental aspects of self-care.

Reducing Stress. There are many ways to begin reducing your stress and some of them only take a few moments.

Time Management. One of the most common complaints associated with feelings of stress is, “There’s no time!!” Get some help to set priorities, schedule your time, set goals and end procrastination.

Relaxation. Learning how to relax is vital for self-care. Fortunately there are a number of well-developed techniques you can use.

Mindfulness. When we feel stressed and overburdened, it can often seem like we’re living on “automatic pilot,” disconnected from the here-and-now and our present experience. One remedy for this is *mindfulness*, which involves direct and nonjudgmental awareness of the present moment.

Avoiding Compassion Fatigue. Compassion fatigue can develop from a combination of burnout (feelings of hopelessness and difficulties at work or in doing your job effectively) and secondary or vicarious traumatization (from exposure to the traumatic life experiences that your clients report).

Assertiveness. Learning to be assertive (rather than unassertive or aggressive) is a tremendously important skill for your emotional well-being—one that can positively impact your life both personally and professionally. Assertiveness enables direct and honest communication and important boundary setting, and it can address some of the situations that add to feelings of stress.

Be Good to Yourself. It is common for people in the helping professions to put themselves at the end of the line. To be a help to others, you need to help yourself first.

So, go ahead, start making your own self-care plan and keep it handy. Use it to help you through tough times at work and to keep your life in better balance!

**Retrieved from www.socialwork.buffalo.edu/students/self-care on May 10, 2011.*

For additional resources on self-care, visit our website at www.humanservices.ucdavis.edu/academy and click on Resource Library then Self-Care Help.

More County Program Highlights

Letter from Mendocino Deputy Director

In Mendocino County we have been using a Family Empowerment Model for many years. This model begins with an Intake Support Group for parents to assist them through the initial anger and denial frequently present in the early stages of the Child Welfare Services process. We have now included a Children's Intake Support Group to help the children and youth understand the process. It is designed for kids to participate in making a snack, creating an art/craft project and in talking with other kids and facilitators. This group gives our kids the opportunity to see they are not the only foster child in the world. It also gives them an opportunity to ask questions and express their fears and concerns.

The best story I have heard from this group came from a child who was talking about the court process. He heard the judge say he would be executing a court order. The child thought the judge was going to execute his father! To me, this is a perfect example of why this group process is so important for our children. They need to have a safe place to talk about anything they feel is important.

Thanks for the opportunity to share what we do,
Becky Wilson, Deputy Director
Child Welfare Services, Mendocino County

Note from Tehama Program Manager

Tehama County would like to highlight the formation of a specified Placement Support Team (PST) whose goal is to enhance placement stability and provide continuous caregiver support. This has only been in place for about eight months, and so while we can't have measured specific outcomes at this time, the program goals we envision are the following:

- Increase relative assessment and placement
- Provide caregiver support and information with dedicated staff
- Increase TDM participation and inclusion of identified family/community members
- Continue ongoing assessment of group home placements and discharge planning to lower level of care
- Provide ongoing assessment of specialized care increments/tie-in to caregiver training for the specific need
- Increase resource library and materials offered to caregivers/offer ongoing training opportunities

The staff consists of the Social Work Supervisor, Placement Specialist Social Worker, Licensing Social Worker, TDM Facilitator, Social Service Aide and Office Assistant II.

Abigale Henderson, Program Manager
Child welfare Services, Tehama County

Spotlight on Yuba's Structured Family Visitation Program

By Tony Roach, Program Manager, Yuba County

Yuba County implemented a visitation program two years ago that we call Structured Family Visitation. The program seeks to enhance the parent's childrearing skills, strengthen the relationship between the child and parent and improve the overall well-being of the child and family. Housed in a 5,000 square-foot center, the environment is homelike with two fully equipped kitchens, living rooms and an outside play area.

Three phases for visits

Phase One: Intensive supervision of family. Much of the work on skill building is done during this phase.

Phase Two: Supervision is reflective and the family is able to move throughout the visitation center. The visitation staff checks in with them to assess the quality of the visit and to help as needed.

Phase Three: Visits occur offsite and are unsupervised. The visitation staff will do periodic check-ins with the family to see how the visits are going and assist if needed.

Movement through these phases is based on the progress made by the parent during the visits as well as the progress made on other services they are participating in as outlined in the family case plan. The decisions for moving from one phase to the next are made by the visitation social worker, the case managing social worker and the parent.

After reunification has occurred, some families need additional assistance with the adjustment of rejoining as a family. This program provides short-term, in-home parenting instruction to assist with this adjustment.

Foster parents are included

Unique to this program is the engagement of foster parents in this process. The foster parent is encouraged to meet the birth parent at the first visit and begin to develop a relationship by exchanging information. At subsequent meetings, the birth parent meets with the foster parent in the lobby and during these times shares information about the child's experience in the foster home.

Outcomes

While no formal research has been completed on this program to date, since its inception one of the most significant outcomes is the relationship building between foster parents and birth parents. In some instances, foster parents who have adopted the children continue to have some contact with the birth parent.

Overall, parents and children are very accepting of the program. Family visits are not isolated to one small room as in the past; rather, visits occur in an open environment, and parents interact more freely with staff in a more relaxed frame of mind. Parents are willing to accept coaching/modeling from the staff and observe good parenting skills. Additionally, parents are given the opportunity to learn to play with their children, many of whom had not done so when the children were in their primary care.

The Structured Family Visitation program has been instrumental in our effort to engage and support families during reunification.

We can't publish this newsletter without you.

We received lots of helpful and interesting feedback on our last issue. Please send your comments and any ideas for future issues to me at sbrooks@ucde.ucdavis.edu



ANNOUNCEMENTS

Visit our new website to see how the Northern Academy can serve your needs

www.humanservices.ucdavis.edu/academy

On the site, you'll find:

- Current information about upcoming Northern California Training Academy courses, core programs, seminar series and webinars
- A resource library with in-depth information on child welfare including training materials, research reports, literature reviews and more
- Current and archived issues of *Reaching Out*
- Web-based learning center

Training from the Northern Academy

Training and seminar schedules for July-December 2011 will be posted on our website by June 30. Please visit this site for many new classes, incorporating technology and in-class training, resources, tool kits and other supports for the field of child welfare practice.

Contributing Authors

Our special thanks to those who contributed articles to this issue:

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In Our Next Issue

Look for more articles, research, success stories and resources in our next issue of *Reaching Out*. The next issue will focus on Signs of Safety and Structured Decision Making.

About the Northern California Training Academy

As part of the Center for Human Services at UC Davis Extension, the Northern California Training Academy provides training, consultation, research and evaluation for 28 Northern California counties. The counties include rural and urban counties with various training challenges for child welfare staff. The focus on integrated training across disciplines is a high priority in the region. This publication is supported by funds from the California Department of Social Services.

About the Center for Human Services

The Center for Human Services at UC Davis Extension began more than 30 years ago as a partnership between the University of California, Davis, and state government to address the needs of rural counties in developing skills for their social workers. Through professional training, consultation and research, the Center has grown to serve human services organizations and professionals throughout California and across the nation.

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104 110