

Katie A 3<sup>rd</sup> Regional Collaborative.....October 2, 2014 San Luis Obispo

Present were RTA staff; CDSS; Dept of Health Care Services; San Luis Obispo MH and CW; Santa Barbara CW and MH; Fresno CW and MH; Community Based Service Providers; CYC; Kern CW; Tulare CW and MH; Madera CW and MH; Mariposa CW; Chadwick Center for Children; Merced MH; Stanislaus CW and MH; CSU Fresno.

We began the meeting with a welcome from Tracy Schiro and Ann Robin from San Luis Obispo County and remarks from John Nibbio of the Family Care Network.

State Report: Caroline Caton and Julia Rojas presented information from the State. The county reports were due yesterday and so the state will be reviewing them. 52 counties have begun implementing/claiming for ICC and IHBS. The state has a draft letter about what will happen after jurisdiction ends in December. There will also be a new letter about CWS/CMS about how to chart screening/assessments. The state has begun contacting 24 counties to discuss barriers/challenges to implementation. The state is reviewing a comprehensive report that came from a joint taskforce about shared government/communication between social services and health care services. The next court hearing is October 16<sup>th</sup> and the state is hoping to see another set of recommendations from the special master. Initially the state has heard that the special master has been pleased with the responses from the first 8 counties who have been contacted. The main focus is on the children and whether more children are getting services. On October 8<sup>th</sup> the TA call will include persons from the CA office of Mental Health Integrity and will focus on HIPPA.

Facilitating Child and Family Team Meeting: Resources and Recommendations presented by Kimberly Mayer, California Institute for Behavioral Health Solutions: Kimberly had a power point presentation and also had a number of handouts for the group. She spoke about the importance of teams and teaming and how successful child and family teams can be operationalized. She spoke about the variety of team meetings already in place in many counties and how counties are trying to tweak practices so that the goals of each meeting are clear. She spoke of promising practices and some challenges that have been shared by others. Elements of successful CFTs include a process of a group of people coming together who are committed to a common purpose; mutual respect between team members and recognizing their value to the team; membership must include child and family, CWS and MH and others identified by the family; meeting schedules and locations are guided by the family's needs and preferences.

The group identified two pressing issues:

1. Out of county placements
2. Managing the number of CFT's

**Challenges of CFT implementation were identified by the group:**

Coordination/scheduling ; billing; pre-orientation for the family/youth; continuous training /adult learning; staff turnover; getting the right people to the table; the number of people involved; RFP process; child welfare case plan vs mental health treatment plan

#### **Solutions to some of the above challenges as identified by the group:**

Education including videos—"The Good, Bad and Ugly"; begin education at the detention hearing; utilized designated schedulers; trainings include engagement; utilize family advocates; prepare youth; Housekeeping done prior to meetings; some have scaled down who attends the meeting and the number of meetings; ICC is seen as a means to link all work done on behalf of child/family

#### **How to prepare persons to participate in CFT's**

Education; utilize parent partners and youth; develop a brochure(there is one from CWDA); CAPP- prepare staff to facilitate a meeting; packet of information developed that is given to the family; Consider language used in printed material to ensure that it is clear and family friendly; KISS-Keep it service simple; model practice behaviors.

#### **County Sharing—after lunch**

**Santa Barbara-** Presented information about the numbers of children/family served. They spoke how involved county leadership has been in their county process. They have provided an orientation to their court, attorneys and CASA. They are focusing on linkages between the CPM and SOP. They are utilizing theT4T training received in Fresno and have done some internal training of clinicians. They plan to include trauma informed care trainings (TIC) in their induction training of new social workers and will weave TIC into their SOP trainings. They are also including TIC in foster parent training. They plan to hold a trauma informed practice symposium in spring 2015 in three separate county sites.

**San Luis Obispo-** has worked through their backlog of referrals and now just working on current referrals/screenings. They have identified 106 in their subclass. They have tweaked their data collection process and now it includes re-assessments. Further, their system tracks 0-5 kids separately. Strength has been the strong interagency collaboration. They also attribute co-location as a key to their success. Challenges include trying to have consistency in procedures; time for training and support; and staff turnover including many retirements. They plan to hold a community forum to seek our family and child input. They have been rolling out Trauma Informed training using material from a consultant/trainer from Colorado and the T4T held in Fresno by Chadwick. They currently have 55 wrap slots with 3 intensive teams.

Fresno- A competitive bid process has finished that was very time consuming to move from county operated (through Youth Link) Mental health services for court ordered MH services to an outside vendor. Two vendors have been selected. They will offer family centered services. They will follow the CPM and their theoretical framework will include same language for wraparound. The last Youth Link assessment was completed on 9/30/14. October 1<sup>st</sup> was the launch of co-located child welfare/mental health team. The state certified this site and so the team will have the capacity to do on the spot

assessments as needed. They are utilizing a 3 tiered approach to completion of assessments- 3 /15/30 days. Working on a data system and working on a means to streamline the paperwork and avoid duplication. As of 9/15/14 all children in Emergency Response are getting screened. They are using a hybrid screening tool that is a mix of MIST/CANS. They receive a court order at the detention hearing that allows for MH assessments. In August all social workers had basic Katie A training that included the screening tool, PM self-care. Later there will be a full module about facilitating a team meeting. Next year they plan to look at the connection between teaming and visitation.

We acknowledged the presence of student interns and CYC youth at the convening. Youth spoke about the need to use language that was clear. They also talked how CYC youth could be active in the process. CSU Fresno spoke of the need to educate students to this work and have them prepared to enter the workforce. John spoke about the statewide difficulty in recruiting foster parents. He mentioned a paper titled "Extraordinary Foster Parents in Los Angeles County: Child Welfare's initiative's implementation of best practices in recruiting and retaining new therapeutic foster parents" published in June 2013 by the Child Welfare Initiative.

#### **NEXT STEPS**

Group decided to return to San Luis Obispo for our next meeting to be scheduled for January 2015.