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Child Welfare Practice: Creating a Successful Climate for Change

*Findings and considerations
from an Institutional Analysis*

Center
for the
Study
of
Social
Policy



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Incorporated in this report is a description of Los Angeles County's action plan moving forward. Primary contact for Los Angeles County regarding the action plan is Angel Rodriguez.

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I. Introduction

In 2010, the state of California became one of six federally supported initiatives seeking to develop and test approaches for improving the well-being of foster children and youth. As a part of this federal effort, the state began the California Partners for Permanency (CAPP) project which specifically focuses on finding and/or supporting legally permanent and loving homes for African American and Native American children who are overrepresented in the child welfare system and stay in foster care for extended periods of time. The centerpiece of the initiative is a strength-based, collaboratively-designed Child and Family Practice Model. This model is grounded in research and supported by a diverse array of partners, including parents, adolescents and caregivers who have experienced child welfare system interventions. Further, this model is intended to reduce disparate outcomes for children and families and enhance pathways to permanency for all who enter California foster care.

Los Angeles is one of the four pilot counties for the CAPP project. Participating jurisdictions assess problematic policies and practices that may impact the implementation of the CAPP model. In Los Angeles, part of the assessment was completed through application of an Institutional Analysis methodology, the findings of which are presented in this report.

This report is organized into the following sections:

- The **Introduction** provides an overview of the California Partners for Permanency (CAPP) Project, the Institutional Analysis in Los Angeles County, and the purpose of the report.
- **Building Blocks for Change** highlights selected institutional strengths—practices and activities – that help position the change effort in Los Angeles County to be successful.
- **Findings and Institutional Contributors** describes how African American families and children experience the Los Angeles County child welfare system as revealed by the Institutional Analysis and how institutional features and conditions converge to produce these experiences.
- **Considerations for Improvement** provides suggestions for actions and strategies that would make the child welfare system work better for African American families and children and create a climate for successful implementation of CAPP.
- **Los Angeles County Action** plan outlines the activities the County has already embarked on and additional ones planned.
- The **Appendices** provides more detailed information about CAPP and the Institutional Analysis methodology.

The California Partners for Permanency (CAPP) Project

The California Department of Social Services (CDSS) is one of six Presidential grantees tasked with improving the well-being of foster children and youth. Following the reduction of state child welfare populations,¹ the federal government has placed new emphasis on well-being, including timely placement of children and youth in safe, permanent families.² As part of this new focus, CDSS was awarded a five year, \$14.5 million federal grant. Its project, California Partners for Permanency (CAPP) “focuses on African American and Native American children who are overrepresented in the state’s child welfare system and for whom it has been most challenging to find legally permanent and loving homes.”³ After learning from the pilot implementation, the vision is to expand CAPP’s Child and Family Practice Model to 10 California counties and, eventually, incorporate the model into statewide practice.

Los Angeles is one of four pilot counties for the CAPP project (see Appendice A for more information.) As part of the CAPP project, participating jurisdictions assess problematic policies and practices that may impact the implementation of the CAPP model. In Los Angeles, part of this assessment was completed through application of an Institutional Analysis methodology.

The Institutional Analysis in Los Angeles County

After conducting an Institutional Analysis (IA) with the Fresno County Department of Social Services in 2009,⁴ the Center for the Study of Social Policy (CSSP) was enlisted by the state of California to conduct Institutional Analyses in the CAPP planning phase. Los Angeles County agreed

to be the next county to follow Fresno County in using the IA to inform their planning and implementation for CAPP.

Conceptualized and first implemented by Dr. Ellen Pence, the Institutional Analysis (IA) seeks to uncover, synthesize and ultimately resolve organizational and structural dynamics that produce poor outcomes for particular populations of children and families served by social service agencies and community partners. The IA process is grounded in institutional ethnography,⁵ a form of sociology which produces “accounts of institutional practices that can explain how workers are organized and coordinated to talk about and act on cases.”⁶ Through quantitative and qualitative data collection and analysis, similar to the methodologies employed for organizational assessments, case studies and managerial audits, IAs examine how institutions process people as cases, focusing on disconnects between what families need to facilitate safety, permanency and well-being, and what child welfare systems and their partners are organized to provide.⁷

The focus of the IA is not on shortcomings or failures of individual caseworkers, supervisors, administrators, clinical providers, judges, lawyers or community partners. Instead, the IA identifies and examines problematic institutional assumptions, policies and protocols that organize or drive practitioner action, empowering institutions with the information to engage in constructive reform. Through ethnographic data collection and analysis, this IA explored how the Los Angeles County Department of Children and Family Services (DCFS), as it is institutionally organized, contributes to poor outcomes for African American families. The focus is specifically on the managerial organizing logic: what roles, duties or responsibilities is the worker held accountable to; what policies, tools, resources guide the practice and so forth. Specifically the lens of inquiry is on what might be contributing to the observed racial disparity and the institutional remedies that can be crafted. Appendice B provides a more detailed explanation of the Institutional Analysis methodology.

¹ Nationally, the number of children in the custody of state child welfare systems has decreased markedly over the past decade. The total number of children in foster care on September 30, 2000 was 525,000; by September 30, 2010, this number was 408,425. Nevertheless, the proportion of children who remain in foster care for two years or more has remained relatively stable: AFCARS data: 2000 data (final): http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report12.htm; 2010 data (preliminary): http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report18.htm

² See statutory goals (p.1-2): http://www.acf.hhs.gov/programs/cb/programs_fund/waiver_proposal_checklist.pdf

³ California Partners for Permanency Reducing Long-Term Foster Care, *Project Overview*, March 8, 2011.

⁴ Center for the Study of Social Policy, *Positive Outcomes for All: Using an Institutional Analysis to Identify and Address African American Children’s Low Reunification Rates and Long-Term Stays in Fresno County’s Foster Care System*, October 2010. <http://www.cssp.org/publications/child-welfare/institutional-analysis/positive-outcomes-for-all-fresno-county-institutional-analysis.pdf>

⁵ The field of institutional ethnography is often attributed to the thinking and work of Dorothy Smith. See Smith, D.E. (2005). *Institutional Ethnography: Sociology for people* (Toronto: AltaMira Press).

⁶ Pence, Ellen, Ph.D. and Smith, Dorothy, Ph.D. (forthcoming). *The Institutional Analysis: Matching what institutions do with what people need.*

⁷ Further, as a case study, the IA is valuable in pointing to possible new directions for research and hypothesis testing the field at large.

The focus of the Los Angeles County Institutional Analysis

After extensive county and statewide data review, the CAPP project determined that being African American or Native American was the primary characteristic associated with longer foster care stays; alternative factors such as age at first placement or type of out-of-home placement did not prove dispositive.⁸ Accordingly, Los Angeles County, CAPP and IA leaders developed the following organizing questions for the Los Angeles Institutional Analysis:

- *How does it come about that many African American children do not reunify with their parents or find alternative, timely permanency?*
- *What about the ways in which the child protection system and its partners are organized, through policies and practices, contribute to this poor outcome?*

The Los Angeles County IA focused data collection on three offices: Pomona, Torrance and Wateridge. A review team was formed and trained in March 2011⁹ and the Torrance and Pomona IA data collection occurred simultaneously the week of April 11-15, 2011.¹⁰ The review team was reconvened and augmented with additional participants for training in April 2012 and the IA data collection occurred in the Wateridge office the week of May 7-11, 2012.¹¹ A summary of the data collection completed in Los Angeles County is included in Appendice B.

This report is intended to fulfill two objectives. First, it provides the California Partners for Permanency (CAPP) with additional detailed information to consider in the design and implementation of the practice model which is at the core of the system change proposed for the CAPP. Second, it identifies for Los Angeles County specific problematic practices resulting from the way the work is currently organized in the Pomona, Torrance and Wateridge offices and, to some extent, across the county. CAPP provides an opportunity for Los Angeles County to build on its previous work to reduce racial disproportionality and disparity.

⁸ Daniel Webster, *Permanency Innovations Initiative, Draft Target Population template*, February 2011.

⁹ The review team attended intensive two day training. Team membership consisted of child welfare agency staff from Santa Clara, Humboldt, and Los Angeles County; staff from Casey Family Programs; and community partners from non-profit and academic organizations.

¹⁰ Although the teams worked in separate offices, some interviews, particularly with the courts and county leadership occurred with both teams

¹¹ Wateridge office was added as a CAPP pilot office after Torrance and Pomona. Due to resource limitations and preparation time needed, the Institutional Analysis in Wateridge occurred a year after the first two offices.

II. Building Blocks for Change

The Institutional Analysis (IA) examines system functioning from the perspective and experiences of families and identifies areas for system improvement so that families achieve better outcomes. As such, the IA focuses on the problematic features of institutions, rather than strengths of institutions. However, during data collection, the IA does identify positive practices with families and opportunities that systems can leverage to enhance services and supports to families.

Los Angeles County DCFS and Juvenile Court have demonstrated a commitment to improving child welfare system outcomes by engaging in innovative projects such as the federal IV-E Waiver program,¹² Point of Engagement,¹³ Youth Self-Sufficiency Program,¹⁴ National Council of Juvenile and Family Court Judges' (NCJFCJ) Model Courts,¹⁵ The Prevention Initiative Demonstration Project¹⁶ and more recently the California Partners for Permanency (CAPP) project. In addition, Los Angeles is also enhancing child welfare practice through its response to the *Katie*

A. settlement agreement. The *Katie A.* settlement focuses on better serving a subset of children and youth through mental health-child welfare partnerships.

These and other efforts found across all three offices, provide the County with significant support for making the improvements necessary to address the problematic practices identified in the Institutional Analyses. Additional building blocks of note include:

- **Leadership's commitment to decreasing racial disproportionality and disparities.** Los Angeles County participated in the California Disproportionality Project and, with the support of Casey Family Programs, a task force chaired by Judge Nash continues to work county-wide on improving practice, policy and outcomes related to racial disparity. Pomona is developing culturally specific resources for both professionals and families. In addition, the Pomona office established new promising initiatives¹⁷ in an effort to decrease disproportionality and disparity

¹² Los Angeles County is engaged in a multi-year federal Title IV-E Waiver demonstration program to: improve safety, increase permanence, reduce reliance on out-of-home care and focus on child and family well-being. For more information about the Los Angeles IV-E Waiver: http://lacdcfs.org/TitleIVE/documents/TitleIV-EWaiver_6_8_11.pdf.

¹³ *Point of Engagement: Reducing Disproportionality and Improving Child and Family Outcomes*: http://www.chhs.ca.gov/initiatives/CACChildWelfareCouncil/Documents/SHIELDS%20Compton%20Project%20POE%20rev_Final1.doc

¹⁴ *Foster Youth Demonstration Project: Los Angeles California Project Profile* (2008): http://www.casey.org/Resources/Publications/EMPLOY/pdf/DOL_SiteReport_LA.pdf

¹⁵ NCJFCJ: Dependency Model Court List: <http://ncjfcj.org/our-work/dependency-model-court-list>

¹⁶ Casey Family Programs wrote a series of reports on child welfare reform efforts in Los Angeles, California. *Stories of Prevention in Los Angeles county: DCFS and Community Agencies Join Hands to Support Families and Children* (July 2009) focuses on The Prevention Initiative Demonstration Project: <http://www.casey.org/Resources/Publications/pdf/StoriesOfPreventionLA.pdf>. *Stories of Practice Change in Los Angeles County: Building Community Partnerships in Pomona and Lancaster* (Fall 2011) highlighted Los Angeles' use of a Title IV-E Waiver to foster partnerships to improve service delivery and outcomes: http://www.casey.org/Resources/Publications/pdf/Stories_CommunityPartnerships.pdf.

¹⁷ Examples include Family to Family, Team Decision Making meetings and specialized permanency units.

and improve outcomes for all. Torrance leadership is increasing engagement of community providers and of youth, internally grappling with racial disproportionality and disparity, identifying informal advocates to support families navigating the system and taking steps to keep families together safely. The Wateridge office leadership has a strong relationship with the Black Community Task Force, a community-based advocacy group.

- **Efforts to improve communication and partnership with the Courts.** With the alignment of DCFS offices with court departments, all three offices are cultivating relationships with the judges, commissioners and referees with responsibility for the families that they serve.
- **Efforts to engage families and community partners.** All three offices have implemented Team Decision Making (TDM) to bring families and their supports together to make decisions about children. Pomona has also established the Parents in Partnership program, which includes a parent advocate and cultural broker, to support parents as they navigate the child welfare system. Torrance’s foster youth find support through participation in a Teen Club and community partners express that they are “reengaged” by Torrance’s new leadership. The Black Community Task Force, His Sheltering Arms and Tessie Cleveland are long-standing committed community organizations that work with the Wateridge office and serve people living in South Los Angeles. In fact, The Black Community Task Force extends its advocacy for families county-wide.
- **Focus on early intervention, permanency and well-being.** Pomona’s current efforts have decreased dis-

proportionality. Efforts include staff and community partnership trainings, work to include community partners at TDM meetings, and the implementation of a Youth Permanency Unit and Permanency Partners Program, focused on finding permanent homes for older youth. Recent Torrance data shows that the office is keeping more children safely in their homes. Torrance’s community partners and court staff understand their mission as keeping families together and reunifying separated families.¹⁸

- **Quality Assurance (QA) efforts established as part of Katie A.**¹⁹ Los Angeles, as part of the *Katie A.* federal lawsuit settlement, is required to regularly assess the quality of practice with all children and families in all local offices. The assessment effort involves employing a process referred to as Quality Service Reviews (QSRs).²⁰ This process has been used in many jurisdictions around the country to improve frontline practice. The QSR intentionally gathers information and perspectives from families, youth, caregivers and professionals serving the families and youth as part of assessing quality. All three local offices had participated in a first round of these quality reviews.
- **Implementation of data-driven management.** In the last year, LA DCFS leadership has begun holding monthly meetings for mid- to upper-level managers to monitor priority outcomes for the Department via a Data Dashboard. The data-driven management process includes collecting, disseminating and analyzing quantitative and qualitative information on priority outcome measures to understand what is working well and what needs to be improved, and engaging in ongoing learning at all levels of the organization to craft, implement and refine strategies based on relevant and timely information.

¹⁸ Historically, Wateridge made significant efforts to support families at the front door through voluntary family services and Point of Engagement, however high caseloads have impeded this offices ability to robustly maintain these efforts.

¹⁹ *Katie A. v. Bontá* is a class action lawsuit against the California Departments of Health Services (DHS) and Social Services (CDSS) and the Los Angeles Department of Children and Family Services (DCFS) for their collective failure to provide medically necessary and legally required mental health services to applicable foster children or children deemed at risk of removal from their families.

²⁰ For a description of the QSR approach, see The Annie E. Casey Foundation and the Center for the Study of Social Policy (2011). *Counting is Not Enough: Investing in Qualitative Case Reviews for Practice Improvement in Child Welfare.*

III. Findings and Institutional Contributors

As noted in the introduction, the Institutional Analyses in Los Angeles County focused on two questions:

- *How does it come about that many that African American children do not reunify with their parents or find alternative, timely permanency?*
- *What about the ways in which the child protective system and its partners are organized, through policies and practices, contribute to this poor outcome?*

In response to these questions, the IA found that the county offices lacked a consistent, persistent focus on permanency for children, particularly for older youth. Furthermore, across the three offices, African American families and youth experienced a child welfare institution that:

- **Lacks effective engagement.** The child welfare institution has not organized or equipped its practitioners—social workers, lawyers, judges—to effectively engage children, youth, parents and their extended family systems. Hampered by high caseloads and heavy workloads, practitioners have little time to know or listen to families. There is an absence of authentic family and youth voices in decision-making despite the implementation of the Team Decision Making strategy in all offices.
- **Inadequately matches services to needs.** Because practitioners are not organized to effectively engage

children, youth, parents and extended family systems, the product of service planning is not necessarily what works for families but rather a list of services required to be completed. Parents are required to secure and pay for their own services, an insurmountable task for many because there are insufficient approved, affordable and accessible services. The mismatch can produce delays in children achieving permanency and can interfere with parents' and children's healing and recovery.

- **Pays insufficient attention to the trauma, particularly grief and loss, experienced by families.** The inattention to underlying needs and feelings is symptomatic of the lack of engagement, timely assessments, knowledge of human development and healing strategies. Children and youth in the foster care system have experienced traumatic events ranging from physical and sexual abuse to loss, neglect and removal from their homes. Parents often have their own histories of trauma that affect their caregiving capacities.²¹ However, services are put into place that do not address these needs and subsequent behaviors of parents and youth are therefore misunderstood and mischaracterized as “hostile”, “psychotic”, or “non-compliant.” Further, by not attending to this trauma, relative caregivers and other adults who were options for permanency do not have the support they need to care for the youth.

²¹ New Jersey Child Advocate, *Protecting and Promoting Meaningful Connections: The Importance of quality family time in parent-child visitation* (January 2010). See also The National Child Traumatic Stress Network factsheet series on Birth Parents with Trauma Histories and the Child Welfare System, retrieved from www.nctsn.org/resources/topics/child-welfare-system.

- **Is not organized to work with families in a coherent way.** Multiple practitioners, organized by different missions and job functions, regulations and administrative procedures intervene in the lives of youth and families, sequentially and simultaneously but often with little coordination or teaming. Observers described parents' confusion regarding the number of different workers and "inside language." It is unclear who the client is and if reunification is a priority.
- **Undermines family connections.** Interventions do not account for family systems—how they are organized and their strengths and tensions. As a result, family systems may be undermined rather than effectively included as part of the planning team. Family connections are difficult to maintain and nurture because children are often placed at great distances from their parents. The time required to travel for parent-child visits conflicts with time needed to complete court-ordered services. Further, Los Angeles County's rules and regulations regarding placement can hinder children's placement with safe, loving family members.
- **Provides limited advocacy.** The structure for parent representation often leaves parents unaware of their rights and results in relevant information omitted to court officers and progress toward permanency slowed. Attorneys for parents have very high caseloads, ranging between 200-300 cases with most attorneys interviewed having caseloads around 250-260. Attorneys acknowledged that high caseloads prevent them from being effective on many of their cases. Attorney reimbursement arrangements further offer little time or incentive to engage in activities outside of court appearances (e.g., writing motions or attending critical meetings). The high volume of cases in court requires an efficient system, but an unintended consequence of the drive for efficiency is that most cases are heard and matters decided during a very short hearing at the cost of meaningful decisionmaking.
- **Privileges system functioning and needs over the functioning and needs of families.** While it is important for agencies to identify efficiencies in order to function smoothly, the IA found a strong preference for focusing on institutional needs to relay information or accomplish particular tasks over a family's need to have time to understand the process, express emotions or make thoughtful decisions. The lack of privacy experienced by families, distances between offices and the community, and the need to comply with "institutional time" (time periods that work for the institution but not necessarily for individuals) are examples of how the institution privileges its own functioning over the needs of families.

While the IA found variations of the above themes in all three offices, there was an additional finding unique to the Wateridge office:

- **The complex challenges faced by many African American families served by the Wateridge office reflect the effects of disinvestment in their community.** Many families living in South Los Angeles face significant challenges as a result of larger disinvestment in their community—many struggle to find adequate housing and jobs, healthy and affordable food, safe and academically challenging schools, and clean, secure parks and neighborhoods. In addition to the larger infrastructure issues faced by many in South Los Angeles, interviewees reported that South Los Angeles has poor services, particularly prevention services. The overwhelming needs in SPA 6 and, in particular the community served by the Wateridge office, leaves advocates to regularly ask, "*Why wouldn't you want to put [the] best services and highest level of resources in the poorest community?*" Yet the families and children that the Wateridge office serves are disadvantaged because of where the office is located, the high caseloads of workers, the high level of worker turnover and high numbers of new, inexperienced workers. Unlike in either Pomona or Torrance, the main Wateridge office is located seven to ten miles from the community it serves and in an office complex that only has paid parking immediately adjacent to the building.²² Workers' caseloads are not supposed to exceed 38 cases, higher than either the caseload averages in the Pomona or Torrance office. Wateridge is considered a training ground for all new workers, many of whom move on after a year. The impact of transfers and constant caseload juggling means there is little relief for staff and service to clients is continually disrupted.

Institutional Conditions and Features Contributing to the Outcomes Experienced by African American Families and Youth

The findings about what African American families' experience, described above, are not the result of individual practice idiosyncrasies of case workers, supervisors, departmental leadership, attorneys or judicial officers. Rather, multiple circumstances contribute to the current situation. Figure 1 enumerates the contributors discussed on the next several pages.

²² Parking is reimbursed by the department for appointments before 5:00 p.m., however, the Wateridge office's budget must account for parking for all its employees and visitors.

FIGURE 1. Summary of Institutional Conditions and Features Contributing to the Outcomes Experienced by African American Families and Youth

Overarching institutional conditions that contribute to the experience of African American Families

- High caseloads preventing effective work with families
- Culture of fear inhibiting workers
- Rules and regulations deterring relative placement
- Lack of meaningful infrastructure to support DCFS in providing parents with 'reasonable efforts' to reunify

Specific institutional features that are problematic for African American families



Mission, purpose and various job functions

- A gap exists between DCFS' mission and actions.
- Contract providers are not aligned with DCFS' mission.
- Team Decision Making meetings are not a valued function.



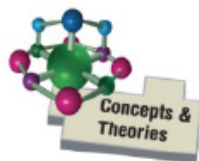
Rules and Regulations

- Rules regarding provision of family preservation services are unclear.
- Contracts negatively affect service availability, continuity, and provider collaboration.
- Policies hamper linkages with out-of-county services.
- Worker transfer policies undermine continuity of services to families.



Administrative Practices

- Tools are insufficient to guide workers in effectively meeting the needs of families and youth.
- Delayed transfer of cases to continuing services workers affects timely permanency.
- Timing of court hearings and other appointments have implications for other obligations of parents and youth.
- Parents experience multiple attorneys over the course of their case.
- Relative caregivers do not receive timely required financial support.



Concepts and Theories

- Parents must prove they love their children.
- Responsibility for change is on the individual, not the intervention.
- There is a limited view of who constitutes the "client family."

Specific institutional features that are problematic for African American families



Resources

- Large docket of cases requires courts to move quickly.
- Limited placement options and convenient visiting options affect family connections.
- Concrete supports needed by families are insufficient.
- Therapeutic services that are a good fit to what works for families are insufficient.
- Parent advocacy resources are limited.
- Utilization of some resources is unknown.
- There is inadequate technology/support for effectively helping parents find resources.
- Court logistics are unwelcoming to families.



Linkages

- Problems sharing information among providers can result in needs of families being overlooked/unaddressed.
- Judicial officers are not consistently informed by those who can best share knowledge of the family.
- Court-ordered case plans are not always consistent with case plans provided to parents by the case worker.
- Late court reports impede effective legal representation of parents.



Accountability

- There are weak mechanisms for obtaining and using family/youth feedback on the quality of services.
- DCFS contracted services are not held accountable for services they provide to families.
- DCFS lacks sufficient policies, protocols and supervisory practices to ensure respectful and consistent practice.



Education and Training

- Attorneys lack relevant training.
- Children's Social Workers, caregivers and some providers have insufficient knowledge and skills to address the trauma and mental health needs of clients.
- Inadequate knowledge of adolescents and effective engagement skills hinders permanency work with youth.
- Training to work with people of different races, ethnicity and cultures appears insufficient.
- Social workers lack knowledge about community resources and risks.

As is noted in the figure, there are four overarching institutional conditions and several other features that also contribute to what families' experience. The following discussion is aligned with the figure and begins with further detail about the four, overarching conditions.

Overarching institutional conditions that contribute to the experience of African American Families.

The most pervasive institutional conditions found by this IA are: 1) the high caseloads and workloads of caseworkers and attorneys that prevent them from having the time and capacity to effectively work with families; 2) the overt culture of fear that influences practitioner decision-making and negatively impacts families; 3) interpretation of the Adoption and Safe Families Act that impedes placement of children in safe homes with relatives; and 4) the lack of meaningful reasonable efforts to support parents in reunifying with their children.

- **High DCFS and attorney caseloads limited the ability of professionals and others to do their jobs thoroughly.** Among the three offices studied, Wateridge has exceptionally high caseloads at 38 children or more per continuing services workers. However, workers in Pomona and Torrance also experienced caseloads of over 20 unless they were in special units. Across the three offices, parents' attorneys have very high caseloads, ranging between 200-300 cases. Most attorneys interviewed reported caseloads around 250-260.

High caseloads with extensive work requirements are not helpful to anyone—families or workers. Informants commented, “When you have too many cases, you must operate on crisis mode. CSWs²³ do not have the capacity to work on cases that are not in crisis... They don't have time to pay attention to the cases.” When asked to describe the day-to-day activities, a supervisor in Wateridge replied, “crisis, child safety, the telephone...my day is driven by crisis.”

- **Worker turnover (especially in Wateridge) and workers absence due to medical leave contribute to high caseloads.** The Wateridge office is seen as a training ground for workers. As one informant noted, “When you graduate from us and you go to another office, guess what, there's nothing new because you've seen it all through your experiences at Wateridge.” It is common knowledge that Wateridge has a lot of new staff and high turnover. Generally, new workers are recent college graduates working with very challenging families. These workers often request transfers and are attractive to other offices as they have been trained in reportedly one of the toughest of-

fices. Additionally, the stress of this job results in many workers taking medical leave. As perceived by one informant, “workers get really frustrated and tired because of the caseloads, so they call their doctor and get a note, and then go on medical leave.” A vicious cycle is created as vacant positions due to transfers or medical leave cause all the rest of the staff to constantly juggle reassigned cases and families and children to experience multiple workers.

- **Workers carrying cases of children in guardianship with dependency also contribute to high caseloads.** Further, some cases remain open (with monthly worker visits and court review) in an attempt to provide the families with whom they have been “permanently” placed a framework for support. Eligibility rules require children to be under court supervision for extended periods of time to enable caregivers to receive maximum financial support (Guardianship with Dependency) although there are no safety or risk concerns.
- **In addition, to high caseloads, social workers experience high workloads, specifically the amount of paperwork required of social workers prevents active work with families.** An informant noted, “Workers do not have the time to do social work, they only have time to do paper work.” Even in Pomona and Torrance, where the caseloads are considerably lower than in Wateridge, caseworkers described being bogged down by paperwork at the expense of time getting to know and work with families. “It [paperwork] defines us now. We are chained to the computer.” And, “Paperwork gets in the way, humanity is missing.” Workers report not having the time to take mandatory trainings. Caseworkers and supervisors also report that the workload is more intense in part due to insufficient clerical support, equipment (faxes, lap tops, cell phones) and too few Human Service Aides.

Attorneys representing children and parents also admit that high caseloads prevent them from being effective on all their cases. “You never have time to do real work. You pick and choose which cases you are going to give time to.” Some attorneys report their assessment of the merits of a case drives their decision whether to inform a parent about their right to a trial: “Parents are not usually

²³ Children's Social Worker.

told[of their right to trial]. Generally if I don't see a basis for a trial I won't tell them [of their right].” They also admit, due to their resource limitations, that the majority of information presented to court comes from the Department and very little independent information is provided to the court on behalf of parents.

- **In Los Angeles County, media focus on child fatalities associated with DCFS and the subsequent responses of the County Board of Supervisors and DCFS have created a culture of fear within the workforce.** Workers, supervisors and leaders described incidences of workers being fired or assigned to desk duty as a result of a child death and that families who may otherwise have been considered voluntary cases or diverted to in-home services receive more severe interventions. While the death of a child is always tragic and DCFS introspection is certainly understandable and necessary, the institutional response shapes how social workers intervene with families, lowers social workers' morale, discourages workers learning from mistakes and negatively affects relationships with community partners.
- **Cases are opened or kept open because staff is afraid to seek alternative actions with families or they are afraid to close cases.** For the front-end emergency response (ER) social workers, the work changed dramatically as the amount of referrals significantly increased. Workers began to detain based on fear of “*becoming the next LA Times story.*” In another interview, a worker commented, “*our hospitals are calling in every, and anything. You might have a family and they take a child to the hospital because he broke his arm. He was playing Spiderman with his brother. They assume there may be an issue with lack of supervision but they are boys. They see clearly it is an accident but they say it is general neglect. They are boys. Where can they play? They live in a neighborhood that is dangerous.*” Concern about child deaths makes the entire system worried about keeping children in or returning them to their home. For example, a worker believed a four year old boy was ready to return home after a year in foster care placement. By her assessment the boy was safe and at low risk of future harm, however she did not return him home because this was his second episode in foster care and she and the supervisor wanted the court to order him home. The court however was waiting to make that order after the boy had been placed by DCFS in his home. As one worker noted, “*Some kids died when we left*

them at home, so now it's detain, detain, detain.” Advocacy suffers as a result, “*CSWs are not going to go out on a limb for the parents or jeopardize their jobs; they want the courts to make the decision to release the children back to the parents.*”

- **Poverty, not safety or risk issues, is indicated as driving decision-making around opening a cases.** As one informant noted, “*Poverty is being confused with neglect.*” Workers believe the Department is “*receiving calls regarding school clothing, cold showering, homelessness, need to eat...all things that are caused by poverty.*” Another commented, “*Child protection is our number one priority, but the reality is that the majority of families protected are just poor.*”
- **The creation of new policies to address concerns related to child fatalities has resulted in an overwhelmed and anxious workforce.** The Department was referred to as a “*policy making machine*”. One interviewer stated, “*at one point, there were 4-5 new policies each week. The policies generated more paperwork. When another article came out in the media, another policy would get developed. It escalated to the point of becoming unreal.*” As another informant noted, “*This dynamic, 'the fear factor', is a big driver—there are big, public investigations pretty regularly trying to determine who is the guilty person or worker.*”
- **Practitioners report a “stricter, less supportive” stance with service providing agencies in certain communities** due to deaths/media. Fewer referrals are made to agencies who were involved in the case of a child death rather than working with them on corrective actions and, in some incidences, agencies and community members fear repercussions of working with DCFS. For example, Wateridge workers report finding it more difficult to find placements for babies because “*people don't want to be involved due to the LA Times and media*” representations of the risks. “*Ever since the Viola case where the child died in foster care and it ended [with] imprisonment for some of the people involved, now everyone is afraid of babies. There was a time when it was easy to place babies. Now they want a child over the age of six.*”
- **California and Los Angeles County's interpretation of ASFA regulations governing the qualifications of caregivers and living arrangements limit the ability of extended family networks to provide children the support and connections they need.** DCFS must ensure that children removed from their homes are

subsequently placed in safe homes. While there has been much effort and emphasis on placing children with their extended family, DCFS workers regularly reported that the rules and regulations under the Adoptions and Safe Families Act (as interpreted by Los Angeles) create barriers for many of these placements.

- **Relatives interested in being the placement resource for children face challenges obtaining necessary criminal background clearances.** In Los Angeles County, if an individual has a criminal arrest or a criminal conviction in his/her past or if the space where the child will be living does not meet certain standards, a waiver application must be submitted. Children have to go into a foster home or group home until the waiver is approved. Workers report that the thought of going through an extensive criminal background check “weeds out” many otherwise interested and perhaps qualified family members. The burden is on the interested individual to produce all records, which can cost a significant amount of money and time to obtain. In Los Angeles County there are over 70 different arresting agencies and all maintain records in different ways. To assist with this process, offices have a list of law enforcement websites for potential caregivers to access, if the caregivers have access to computers and the internet. The process may be even more daunting if records from other jurisdictions are needed. Informants gave examples of potential caregivers who could not get waivers, including:
 - someone with a conviction for “driving under the influence” 30 years ago;
 - the case of an individual who is now a pastor and was arrested years ago for “*a sit-in or something*”.
 - an extended family member who has a minor conviction in 1950 for which she had to pay a \$20 fine in Arkansas. She was unable to obtain the records because the offense was so long ago, so she could not obtain the criminal waiver.
- The regulations can continue to present obstacles to family networks once a particular relative is cleared as a placement resource and a child is placed in the relative’s home. Under what is called the “prudent parent standard”, caregivers

are allowed to arrange for occasional, short term babysitting of their foster children without requiring the babysitter to undergo a criminal record background check and other requirements of full-time caregivers.²⁴ However the requirements for clearing people who have “significant contact” with a foster child may provide contradictory guidance to workers and families. The support circle available to parents and relative caregivers may be limited because family members not directly involved in care giving often do not want to be finger printed and put through a criminal background check. There is a lack of clarity as to what point the relative caregiver has the ability to use their prudent decision-making as a parent rather than having someone be fingerprinted and cleared before they can be in their home.

- In addition to the criminal background clearance requirements, potential placements must meet space requirements as required by specific regulations. If there is an issue with the structure of the home, like bars on the windows or lack of beds, money is available to correct some issues. However, a CSW noted you “*ask procurement to fix it but it takes months.*” Some families must consider moving if they are going to be a resource or be denied the opportunity.²⁵ In one case reviewed, a relative interested in being the placement resource for a youth was living in a one bedroom apartment. She was told she would have to give up her bedroom, for licensing reasons, to have him placed with her. It was noted in the file that she was “*unwilling to give up her bedroom*” so the youth could not be placed with her. There was no documentation in the case file of support provided to find an alternative living arrangement for the relative and youth or seek a waiver. Two years later, the relative still regularly visits with the youth who remains in placement without any identified permanency options. Case file notes indicate that the youth now has decided he wants to stay in group care until he ages out of foster care.

The “Reasonable Efforts” requirement is not met by DCFS as parents are responsible for finding, enrolling in and paying for their own services. Parents, workers and providers all report accessing affordable and relevant services is challenging. A parent’s attorney commented,

²⁴ California Welfare and Institutions Code Section 362.05.

²⁵ Duplex homes fall under particular scrutiny and may be hard for a family to receive clearance if certain space is shared with another family. In that situation, both families must undergo the clearance process.

“Reasonable efforts finding is not made on fact. It is pro forma.” And a court officer noted, “Many social workers think their responsibility is just to give the referrals to the family, that this is a reasonable effort. Social Workers are responsible for the follow-up too. A lot of social workers don’t think this is part of their job”.

- **Services are not routinely accessible, available and affordable.** First, parents and their attorneys routinely reported that the list of service providers given to parents by workers is not up-to-date, with many providers no longer in business. Those still in operation are likely to cost more than parents have the ability to pay or have very long wait lists. A parent in describing her court-ordered parenting and anger management classes said “I started those and practically finished but because my financial assistance wasn’t up to par I couldn’t pay for the classes. I’m not sure if I am terminated from the program. I don’t know if the classes will set me back [for reunification].” In addition, eligibility rules preclude services to some families. For example, funding available for mental health services for children through the Katie. A. settlement may pay for family therapy but not individual therapy for a caregiver or parent. Finally, many services are only available at times that interfere with parent’s ability to work. In one example, a parent said that “I had to switch to graveyards at the hotel where I work so I can go to classes and TDMs and visits. I can see where someone would give up.”
- **There are insufficient therapeutic services that are a good fit to what works for families.** There are waiting lists for numerous services and family preservation agencies sometimes run out of funds to serve the community. Service provider restrictions may also force parents into difficult decisions as in the example of a mother of four children who was going to enter a treatment program but the treatment program only allowed her to bring two of her four children. The mother had to quickly make a decision so as not to lose her place in the program. At the TDM where this decision was discussed, the mother cried and said she could not make such choice. There are reportedly no or few African American service providers in some of the communities where African American parents live. There is also geographic disparity among resources within Los Angeles County and in perimeter counties. Within South Los Angeles, some informants believe there is a “problem in the amount and qual-

ity of services... There are waiting lists, the staff are not trained well and you see more interns providing services there.” Services in perimeter counties are more limited than in Los Angeles, making it difficult for Pomona staff to make referrals.

- **Available service resources may not meet Department or Court qualifications for approval thereby preventing parents from using the most accessible or affordable service.** Parents must participate in services that are considered to be approved services. Program staff must be licensed. A mother questioned whether she could take a parenting class at her school and was informed that it must be a qualified parenting program approved by the Department; the mother was advised to seek approval from her next CSW. This delayed her enrollment in services and required her to travel a significant distance to an approved provider. In another example shared during the IA, a parent received counseling in her substance abuse treatment program, but the counseling was not with a licensed counselor as the court order required. This parent had to participate in separate counseling through a licensed counselor as well as continuing in counseling through her substance abuse treatment provider. She was delayed in her reunification because of this misunderstanding about approved counseling services. According to one informant, “Frequently parents will go to their church pastor or some crazy place that’s not court approved. Some social workers will say don’t go there but some don’t and they [parents] come back to court 6 months later and it’s not court approved.”

Specific institutional features that are problematic for African American families:

The previous discussion highlights four pervasive institutional conditions that will hinder successful practice improvements. However, the IA uncovered several more institutional features that contribute to the experience of African American families. These additional problematic features are summarized in Figure 1 and described in detail in the following discussion.

1. *Agency Mission, Purpose and Job Function are not aligned with supporting reunification and timely, permanent homes for children.*

Agency missions, job descriptions and assigned tasks inform workers of expected roles, duties and parameters

for action on a case. When these elements are not clearly defined or actual practice diverges from the stated or intended, worker efforts can be less effective. In Los Angeles County, the IA found:

- **There is a gap between DCFS' mission and actions.** The articulated mission of DCFS is keeping children safe by strengthening families. Social workers are supposed to have a dichotomous role of both supporting parents in reunifying with their children and planning for alternative legally permanent homes for children. Yet job descriptions emphasize adoption work over reunification, such as the Children's Social Worker II job posting²⁶ which did not refer to supporting parents with reunification but rather heavily references adoption tasks. In interviews, workers described their job as "making sure court orders are complied with" and "servicing cases." They did not view their job as working with families to create a plan and tailor actions and services to meeting their needs. As such, DCFS has ceded its authority for case planning to the courts and the courts have taken up this responsibility. As a result of this active court role, DCFS staff and families reported significant complications in understanding to which plans parents are held accountable. Engagement with family is framed and limited by this job description. Moreover, there is a lack of a clearly defined responsibility for tending to the emotions, stresses and trauma experienced in the court room.
- **The role of contract providers does not always align with supporting DCFS in its mission of keeping families together.** It is unclear to what extent it is the role of MAT assessment and Upfront Assessors to look at trauma and for workers to incorporate an assessment of trauma into case plans. Some FFA providers are focused on and contracted to care for youth while in out-of-home care, but they are not organized, nor is it their mission, to promote timely and safe permanency for children and youth.
- **Team Decision Making meetings are not considered a valuable function for social workers or families.** TDMs are used to ensure the "contractual obligations established by the courts" are fulfilled—that court ordered services are followed. The needs addressed are often limited to those identified in Court or the MAT assessment.²⁷ Families and youth are

often not actively engaged in the meetings. Community representatives are not always invited to participate, and when they are, they are unclear as to their roles—are they just observers or active participants as community resource experts for staff, or advocates and system navigators for parents?

2. *Rules and Regulations can work to undermine permanency.*

Case actions are frequently dictated by policies in the form of laws, rules, regulations and manuals. These rules and regulations provide the parameters in which workers function. In Los Angeles County, the IA found:

- **The rules about providing family preservation services are not always clear to providers and available to families in the process of reunification.** Family preservation services are often offered to families to avoid removing children and placing them in foster homes. These services are provided by private agencies. Family preservation services are automatically discontinued if the children are removed. However, family preservation services are also available to families receiving family reunification when reunification is "about to take place." This policy that first allows, then discontinues, then allows family preservation services is confusing to providers. There is a belief that the family preservation services cannot resume for six months after removal even if the entry TDM creates a safety plan and the children can be returned home. As one provider noted, "But, they [DCFS] say, well we put them in placement so we're not going to discuss things until 6 months later and see where things are. Policy says that they could go back in a week [after returning the children] and reassess—but practice is they have to wait 6 months."
- **Contractual arrangements affect service availability, continuity and provider collaboration.** For example, therapists and wrap service providers terminate their work with families when children are moved out of their service area. Therapists are also paid by the minute for the services provided and are only allowed 180 minutes of meeting time not in the presence of the child. This contractual arrangement deters them from attending important events, such as Team Decision Making meetings. Further, the lack of contracted services also affects services for parents.

²⁶ This job posting was reviewed by the IA team in April 2011.

²⁷ Multi-Disciplinary Assessment Team (MAT) evaluations holistically consider a child's needs as she/he enters foster care to ensure that the child is connected with helpful services/ supports and placed in the most appropriate setting and to expedite family reunification whenever possible. MAT assessments are conducted by DCFS but represent a collaboration between DCFS, the Department of Mental Health and community providers. For more information: <http://dcfs.co.la.ca.us/katieA/MAT/index.html>

For example, DCFS has a contract for drug testing, which many parents are required to participate in. However, DCFS does not have a contract for drug counseling, meaning that parents do not have to pay for random drug tests, but they do have to find and pay for help to address their underlying needs and begin their recovery process.

- **Policies hamper linkages with out-of-county services.** In addition to the ASFA requirements, restrictions on out-of-county placement can interfere with placing children with people they know and with whom they have a bond. Approval for out of county placement is cumbersome and not realistic given Pomona's geography. Requests have to go through the Out-of-Home Care Division and then to headquarters for approval. For families served by Pomona, placement of children in San Bernardino is often better than in Los Angeles County given the size of the county. In addition, trying to link youth/ families to out of county services is difficult. When youth are moved to another county, it is difficult to get services in place.
- **Current social worker transfer policy works against providing continuity to children and families served by the Wateridge office.** Labor management agreements allow workers to transfer offices after one year, allowing for continuous churning of staff. In addition, labor management negotiations around changing the transfer policy is affecting Wateridge's ability to be fully staffed. While negotiations are underway, there have been no classes of newly recruited social workers in the training academy.

3. *Administrative Practices direct workers in ways that do not align with the Core Practice Model and good child welfare practice.*

Making decisions and recording information and interactions day-to-day involves multiple forms, computer screens and drop down menus, screening tools, report writing formats and assessments. All of these elements influence what information is requested, documented and shared. These forms are used by the caseworker to create the picture of the family that lives in the case file and to make decisions about family progress. In Los Angeles County, the IA found:

- **The multiple tools available to social workers are not sufficiently meaningful to provide direction**

for meeting the needs of families and youth. The following were found to be problematic:

- Initial assessment and planning forms such as the Safety Plan are cited as being ineffective because it only delineates "Who, What, When." It does not address details related to safety. The Structured Decision Making (SDM) forms are also cited as not being effective in the assessment of safety and risk in families that have been monitored by "authority" agencies for multiple generations as families receive a negative score, even though they might very well be a safe, appropriate placement for children.²⁸
- Upfront Assessment and TDMs do not apply to all family circumstances as they may be deemed unnecessary, as when a mother consents to protective custody placement.
- Case plans are not tailored to individual needs, in part because assessments are incomplete or late. They may also provide contradictory pictures of families, by commenting on a parent's lack of parent-child bonding or involvement but also noting "Good parent/child bonding". Some case plan components are referred to as "a blanket," meaning they are included in all cases, regardless of case content, e.g. parenting classes and counseling.
- In initial assessment tools, court reports and caseworker notes, little documentation of inquiry or assessment of trauma/grief/loss/attending to healing exists. The relevancy of these tools for practice is also questionable when the actions documented in the files do not appear to be the result of the assessments. The IA saw examples of completed family strength test/tools but no evidence of any action taken as a result of the conclusions from the tools.
- In case files and interviews, the IA did not see regular or organized efforts to implement concurrent planning. Interviews suggested that concurrent planning efforts varied depending on the worker, which suggests then a lack of institutionalized protocols and practices to support concurrent planning.
- The Health and Education Passport may be incomplete, hindering critical information about a child from being effectively passed along to those who need the information.

²⁸ SDM tools should be recalibrated frequently to ensure their accuracy. It was reported, but not verified, in this review that these tools had not been recalibrated for many years.

- The multi-folder Master File organization creates a fragmented picture of families. While color coded for organization, the organization segments a child's life, making it difficult to piece together and pass along a coherent family/child/youth story.
 - **Delayed assignment of continuing services workers (also referred to as “backend” workers) can affect timeliness of permanency.** The IA found instances where the continuing services worker was still not assigned for 60 days after a child had entered foster care. Parents are on a tight time frame for reunification and this delay cuts into the first six months parents have to get approved services and achieve reunification.
 - **Appointments are scheduled for institutional convenience and can have significant implications for obligations of parents, caregivers and children.** In one court case observed, the mother travelled an hour and 45 minutes to get to court for an 8:30 a.m. hearing. She arrived before court opened and her case was not called by the time of the approaching court lunch break at noon. In another case, a caregiver noted, *“We have to be there [court] at 8:30 and court will be at 10:00 a.m. so we need to sit there all that time to accommodate them.”* From practitioners, the IA heard several examples similar to this: *“workers will tell clients, ‘I will be there on Thursday sometime between 9-5’. This is a problem because sometimes the client has a lot of different groups and classes they need to attend for their treatment. A client cannot wait around all day to meet with their social worker. They have to go to their services.”* In another example, a father who was being considered a placement resource for his children was given an 800 number to call into about drug testing. At the testing site, certain letters go on certain days so there is no room for being individually reassigned based on your schedule or location and the father attempted to make the case that if he had to drop everything and go test, that there was a place to test close to his job as he needed to maintain his job in order to be considered a placement option. The social worker explained there was nothing she could do about the testing location or schedule.
 - **Parents can experience multiple attorneys over the course of their case, which can impact the degree of advocacy they receive.** The rotation of attorneys among courtrooms results in parents having multiple attorneys. Attorneys are assigned to work a particular court room and stay there until they are reassigned. When they are reassigned, parents have to start all over again with a new lawyer. Parents report infrequent contact with attorneys and that attorneys do not know their cases well.
 - **Relative caregivers do not receive timely required financial support.** The IA found several instances of caregivers not getting assistance for 2-3 months and not being reimbursed retroactively. Caseworkers and caregivers did not understand the reasons for these delays, just that something administratively is not working. There is also limited financial support for relatives actively caring for children while waiting to be formally approved by the ASFA unit as a placement resource.
- 4. Dominant Concepts and Theories negatively shape practitioners’ view of families.**
- Policies and practices are connected to broader assumptions, theories, values and concepts that may or may not resonate with the practitioner required to implement them. These assumptions are embedded in the language that is used to describe families and activities. In Los Angeles County, the Institutional Analyses revealed that actions are often driven by several concepts and theories about the parents and families who become clients of the child welfare system, including:
- **Parents must prove they love their children** by complying with case plans; seeking, participating in and potentially paying for approved services if they are not eligible for the available funding; separating from their partners despite other responsibilities they may share; enduring travel hardships; and juggling responsibilities. As one informant noted, *“The attitude here: ‘if you can’t make it, well that’s your loss. The justification is, ‘well if that was my kids, I would find a way to drive.’ That’s not a fair statement.”* Parents felt, and workers agreed, that services are to take precedence even at risk of losing jobs. Parent motivation demonstrates their worthiness to parent. Motivation is characterized by parents contacting the Department, responding promptly to DCFS requests and complying with mandated services. Furthermore, self advocacy that challenges decisions made by professionals is viewed negatively. Parents who challenge worker decisions and court proceedings are labeled as *“crazy”* or *“difficult to work with”*.
 - **Responsibility for change is on the individual, not the case plans or service interventions,** yet the intervention must be valid, as represented by credentialing or licensing. It is the parent’s anger that makes them difficult to engage, not how they have been approached. It is the responsibility of adults

and youth to change behaviors, not the responsibility of the intervention to be effective. In a case note, a CSW wrote that she will “sign youth up for the ‘Impact Program’ which will teach her discipline, respecting others, not lying and taking responsibility for her actions.” In another case record, the narrative read, “CSW added that if her [youth’s] behavior did not improve then she could be placed in [another] foster home or the court and DCFS might push for her to be placed with her father[youth had repeatedly said she did not want to be placed with father].” Some youth in DCFS custody are considered “unadoptable.” Workers defined these youth as “too old” or “won’t take their meds.” This concept ascribes the lack of permanent homes for these youth to the youth themselves, not to ineffective case work or treatment providers’ inattention to grief and loss children and youth may be experiencing.

- **There is a limited view of who constitutes the “client family”** and extended family dynamics are ignored. Significant others and extended family are often not valued or taken into account in decision-making. The predominant idea is that CSWs and providers work with/support a parent or one caregiver who has the child in their home rather than the entire family constellation who interact with the child. There appears to be little/ no effort to engage caretakers that are not directly involved in the child protection case.
- **Drug use is viewed as an automatic safety concern requiring removal** without risk being thoroughly assessed and there is little advocacy to counter this concept. Parents have had their children removed because they test positive for drugs, without evidence that the children are unsafe or being neglected. The dominant concept is that children are not safe in homes where parents test positive for illegal drugs and parents do not always receive advocacy to counter that concept. Several community providers described cases where a client tested positive for marijuana and had his/her children placed into foster care without other evidence of child abuse/neglect.

5. *The current configuration of services and access to resources inadequately supports families in reunifying.*

Resources in terms of professional time, placement options, needed services, supports to professionals and economic support to families play a significant role in successfully helping children and youth obtain timely permanency. Los Angeles County has a number of resource challenges.

- **The large docket of cases (25-40 hearings in a day) requires court to move quickly.** In order to move the docket, hearings take place very quickly. The court’s efforts to “keep the calendar moving” is at odds with effective child/youth/family representation, inclusiveness of family support, and attending to the trauma of family and youth. Due to the volume of cases on court dockets, individual hearings last five minutes with little debate. Working at this pace, it appears that the details of family’s cases are not well known. For example, attorneys were observed digging through reams of paper to answer questions about whether a child or parent was in therapy. One parent noted: “If you’re trying to reunify, don’t you ask ‘how’s it going?’ She [judicial officer] was mean and just said see you in another six months. She didn’t acknowledge any of my work, or the classes I attended.”
- **Limited placement options and convenient visiting options affect family connections.** Siblings are separated because DCFS cannot find an appropriate placement to keep them together. One young girl talked about being separated from her twin brother for years. She identified him as being the only person to whom she feels close and connected. She talked about attending court (even though she “hates” it) just so she could see him. Out-of-home placements are based on available beds, not on proximity to a particular child’s family, community or siblings. Reportedly, there are insufficient foster homes in the South Los Angeles neighborhoods served by the Wateridge office, with especially limited specialty foster homes for children with significant mental health needs.

The lack of convenient visiting centers also hinders continued siblings and parent-child bonds. More community-based visiting programs are needed to accommodate complex schedules. In a case where the youth was upset about sibling separation, a case note dated from April 2009 reads “CSW informed mother that monthly sibling visits would have to take place on Friday at the visitation center from 4-5pm because Saturdays are booked until August 2009.”

Court orders and case plans do not account for Los Angeles’ insufficient public transportation and significant distances between substance abuse services and families. Some parents, clients of a treatment program located in South Los Angeles, have had to take public transportation to Palmdale and Lancaster to spend time with their children, requiring them to leave at 5:30 a.m. and not return until 8:00 p.m. Although parent-child visitation is critical, treatment

providers also describe difficulty in engaging parents who are unable to visit with their children because of the distance and/or the interference of visits with the treatment program requirements.

- **Concrete supports needed by families are insufficient.** Parents and providers reported severe limitation in available housing. Many parents live in temporary motels. Parents spend many hours on buses to get to visits and services. There is concern about the cost of gas and how that affects parents who rely on their car to get to services, visits and work. Affordable child care is also lacking. Families need basic household goods and CSWs talked of donating items and furniture to the families they serve. Too few DPSS²⁹ linkage staff are available to the families served by DCFS.
- **Parent advocacy resources are limited.** The Pomona office has one parent advocate in their office and one housed with a provider, and one part-time cultural broker. Families in South Los Angeles find their way, frequently through word of mouth, to the Black Community Task Force and other community-based programs that help them navigate the child welfare system. Torrance does not have these supports for families.
- **The utilization of some resources is unknown resulting in possibly underused services.** There is no information about penetration into eligible population by ethnicity/race of the Permanency Partners Program (P3), a program which focused on finding permanent homes and lifelong connections for older youth. Likewise, the referral rate for family preservation services for families reunifying is unknown by ethnicity/race. Reportedly there are more trauma-focused Cognitive Behavioral Therapy (CBT) slots in the community than are filled. Furthermore, resources may be distributed equally, but not equitably given the higher workload in Wateridge. Certain positions are equally divided among all DCFS offices, but not all offices have equal need.
- **Inadequate technology/ support for effectively helping parents to navigate to appropriate resources.** Supervisors and CSWs do not have a list or computer system that will tell them where to direct parents to find specific classes/programs

that are viable and provide the right services the court has asked the parents to complete. The list of resources for workers to distribute to parents is not kept up-to-date, as a result families are referred to services that no longer exist. A parent attorney described the following: “Client came in and said ‘I called every number’ so I sat with the client and there was not one single number, one program available.” The current placement resource search engine is cumbersome and considered impossible to keep up-to-date. There is also a sense that the technology to assist with kinship searches is lacking because one informant commented, “Relatives are found by ‘word of mouth.’” However, the Youth Permanency unit in Pomona has a mechanism for relative searches that is available but not used by other units.

- **Court logistics are unwelcoming to families.** While parents do attend many proceedings, most were concerned about the logistics of getting to court (understanding bus routes, finding rides, paying the \$5 fee to park near the courthouse). In addition, once at court, space layout sends message as to who has priority. In the courtroom, the seating area for family is small. The clerical staff has more room. Attorneys appearing in the courtroom did not have a place to put their files except in the seating area. Further, parents had no private meeting space with their attorneys and their personal history and consultation with attorneys could be overheard by others.
6. *Weak Linkages exist among practitioners resulting in families experiencing delayed services and inadequate supports.*

Families are served by multiple service providers. How these practitioners are connected—the effectiveness of the linkages that are in place—can influence a family’s success. In Los Angeles County, the IA found:

- **The needs of children and families can be overlooked/ unaddressed or response delayed because of problems in sharing information.** In addition to previously noted problems with delayed MAT assessments and incomplete forms, the IA saw examples of:
 - Reliance on second or third-hand written descriptions of families and children rather than

²⁹ The Los Angeles County Department of Public Social Services (DPSS) connects eligible families and individuals to needed supports, including cash assistance, child care subsidies, toy loans, job programs, subsidized health care, disability benefits and food/ nutrition resources. Non-Custodial Parent (NCP) allows parents whose children do not reside with them to establish a link with their children’s benefits. For more information: NCP: http://dpss.lacounty.gov/dpss/grow/non-custodial_parent.cfm; and DPSS more generally: <http://dpss.lacounty.gov/default.cfm>.

first-hand information from families and foster parents.

- Sibling cases may not be linked together and the activities for each sibling may not be shared across social workers.
- Children are not timely enrolled in financial assistance programs. In one example, a teenage boy entering care after a release from a psychiatric facility was unable to obtain medication until enrolled in the appropriate financial program. As a result, the social worker and the boy had to return to the hospital each day for 4 days to get another day's worth of his psychotropic medication.
- Practitioners do not return phone calls from other practitioners. Social workers described calling providers to obtain information about and getting no or delayed responses; providers described experiencing the same dynamic with social workers.
- Lack of updates to practitioners about changing case responsibilities, changing workers, changes in children's placements, etc.
- Lack of team work with providers who have the capacity to help identify needs. One provider interviewed discussed receiving referrals from DCFS, *"When we get the referral, it'll have the kinds of services the SW thinks the family needs. There's a block of all the services the SW thinks the family should have. The SW checks off the boxes. Our contract clearly states that the clinician is responsible for developing and implementing the plan. But, what we run into is the SW has already decided what the family should receive. So, if you don't agree, then we run into problems. If they require me to have a clinical supervisor, their license is on the line. What's the point of me having a clinical supervisor if they can't determine the most appropriate services for the family?"*
- **Judicial officers are not consistently informed by practitioners who can best share knowledge about the family.** Court reports are used in lieu of in-person reports by social workers, and the quality of these reports are considered by judicial officers as *"haphazard."* For example, in a court report reviewed by the IA team, there was a page of information about the mother and her progress on the case plan, but only a single sentence about the father (who is involved in the child's life). Incomplete and inaccurate information is subsequently carried forward, sometimes informing case planning throughout the life of the case. An example from a case record indicated that the Court ruled that the mother did not engage in abuse

or neglect her children. However, all subsequent court reports indicated that she did, thus compounding inaccuracies about the case and creating difficulty for future case planning efforts.

- **The court ordered case plans are not always consistent with case plans provided to parents by the case worker.** After court, parents receive a minute order detailing all court orders. However, parents described confusion in understanding minute orders and reconciling these orders with case plans their workers told them to follow. Court orders are not always identical to what DCFS provides to parents. For example, a DCFS case plan ordered a parent to a drug program when the judicial officer had not ordered it; or in another case, a parent was court ordered to attend counseling with a licensed therapist but was following the DCFS case plan that allowed her to receive therapy with the unlicensed provider at her drug treatment program. As one commissioner noted the DCFS *"service case plan doesn't matter. The rest of the case flows from this [my orders]."*
- **Attorneys are not adequately prepared for court because court reports are not always available 10 days before the court hearing.** Parents and their attorneys reported receiving reports the day of the hearing and reading these reports minutes before they were to appear in court. Confronted with this new information the day of court, a parent's attorney has no ability to prepare evidence rebutting or confirming this new information, particularly because attorneys have limited time to speak with their clients before court. In addition, delays in receiving court reports was noted to result in cases being continued, thus adding to the court's docket.

7. *Accountability systems inadequately focus on results for families and children*

Accountability systems ultimately define what is most important to the institution as is illustrated in the old saying, "What gets measured, gets done". The questions asked are "to whom is the institution accountable and for what does it hold itself accountable?" Examples include supervisory case plan approval, integrity and implementation of case documents, family involvement in case planning and legal representation in court procedures and court review of placements. Therefore, accountability systems include accountability to clients, to the goals of intervention, practitioners and intervening agencies and to the intent of policies and directives. In Los Angeles County, the IA found:

- **There are few mechanisms for obtaining and using family/youth feedback on the timeliness, relevance**

or quality of services. Challenges in enrolling in services or false starts as parents search for programs that best suit their needs can delay reunification with their children. As previously noted, many times these services are difficult to access or have a long waiting list. CSWs discussed feeling blamed for this, but ultimately the responsibility falls on the parents to enroll in the service and no other party is formally accountable for barriers encountered by families. Court reports and other documentation does not consistently describe these types of barriers.

However, the agency does not hold itself to the same standards as parents are held to when it comes to findings appropriate services for children and youth. In one example, a youth regularly ran away from her placements in group homes. As a result, the youth has been in four different high schools and now has completely dropped out of school. Her mother reports feeling frustrated with the system because of her daughter's lack of school attendance. She does not understand why the system is not held to the same level of accountability as she was in ensuring her child attended school. She feels her concerns are not taken seriously or being addressed. In an example from another case record, a foster parent advocated for a child to be assessed for an Individual Education Program, but delays in transferring the Holder of the Educational Rights, worker turnover, and placement changes appear to have kept the youth from receiving this assessment.

Court observations and interviews found cases proceeding without attorneys talking to clients or continuances granted because attorneys had not had contact with their client and are not held accountable for the lack of contact. Parents, however, often do not know how they can request another attorney if they feel they are receiving poor legal representation. All of these instances described above are handled at the individual case level as no formal mechanisms exist to quantify these experiences and create strategies to address them.

Quality Service Reviews (QSR) currently are the primary system wide mechanism to obtain useful information from families about their experiences with the child welfare system and their access and quality of the services they receive. However, this process appears to still be in its infancy and the avenue for incorporating the QSR results is not well defined.

- **Contracted services are not held accountable for timely and quality services because of weak or missing accountability mechanisms.** For example,

as previously noted, MAT assessments are often late and there is no assurance that judges, attorneys, and parents receive the MAT assessment results. Reportedly, they often lack parent participation. However, there is no mechanism for consistently evaluating MAT assessors and meetings or tracking parent participation in MAT meetings or ensuring parents receive, understand, and are able to engage in the MAT recommendations.

Service monitoring is limited and not results-based. There is a perception that the County “*just keep[s] extending*” contracts. There are no mechanisms for using worker experience in evaluating quality of service providers. Caseworkers are not always aware of quality of services and when they are, they do not have a formal mechanism for providing feedback and letting other workers or leadership receive the feedback and know about the providers. As one worker said: “*I just keep a mental list of who are the bad providers.*” Likewise, mechanisms for service providers to provide feedback on issues between staff and social workers are not in place. Feedback is handled on a case by case basis.

- **DCFS lacks sufficient policies, protocols and supervisory practices to ensure respectful and consistent practice across the agency.** People and their homes are viewed through the lens of individual workers which can involve bias around issues like race and class. As a result, what is deemed to be an inappropriate home around space or cleanliness is handled inconsistently. Negative assumptions of African American families are evident and impact worker-client interactions. For example, in a TDM observation, a mother sat in the meeting room with six professionals, none of whom (except for the TDM facilitator) were observed to engage with her before the TDM began or during a break. This mother had been characterized as “belligerent” by her social worker. During the IA, parents and youth said their ability to engage and work with their social workers varied and that “*it [working relationships] depends on which social worker you get.*”

8. *Practitioners do not have the Education and Training they need to provide families and youth with quality services.*

Practitioners are guided by the knowledge and training received and the degree of skill they possess. When families are not successful, it may be because the workers, supervisors, lawyers and judicial officials do not have the education and training necessary to effectively assist families. In Los Angeles County, the IA found:

- **Attorneys lack training relevant to the needs of the clients whom they represent and as a result are unable to effectively engage with some of their clients.** Specifically, attorneys require (and are open to) training on engaging with African American families, including skill building in the following:
 - how to talk to youth about accepting/participating in services
 - how to effectively interview clients without causing psychological harm to them (e.g., “*Sometimes kids disclose being raped...we don’t have training to assist with not retraumatizing kids.*”)
 - engaging in ways that are culturally humble and demonstrate interest and sincerity (community-based advocates reported that some attorneys seemed afraid of African American parents, especially fathers).
- **Children’s Social Workers, caregivers and some providers have insufficient knowledge and intervention skills to adequately address trauma and mental health needs.** Social workers are not trained to recognize, understand, or respond to trauma, grief, and loss. For example, a note on a health-related report dated a month after youth’s mother died stated youth’s depression, anger and rage were “*out of proportion to event,*” with no additional details to support such a statement.

Case records reviewed in the IA revealed examples of African American boys, in particular, suffering from extensive grief and loss but that their accompanying behaviors are not recognized as by workers as related to trauma and loss. Case file notes describe these boys as “*psychotic*”, “*oppositional defiant*”, “*mood disordered*” and “*needs to be center of attention.*” In one example, a boy’s father died soon after his mother was incarcerated. He experienced four placements in 1.5 years due to his acting out and/or hospitalizations. He had a strong desire to see his mother and after his first visit (a year after his mother was incarcerated), he became distraught and threatened to hurt himself. “*I just wanted to stop the pain and didn’t want to feel anything anymore.*” He says it is hard to “*see his mother behind the glass, not be able to hug or talk to her face to face.*” There is no documentation indicating the boy was provided support either before or after the visit. He was subsequently hospitalized and put on antipsychotic medication. A potential relative caregiver was not assisted in understanding his behaviors or how to work with him. Three years later, he remains in foster care, and appears to be on the same combination of psychotropic medication.

Foster parents and relative care givers lack training as well regarding child development and behaviors that are symptoms of grief and loss, such as anger. One informant believed that children are moved among placement settings because caregivers are not equipped to deal with the trauma and accompanying behaviors and emotional struggles of children and youth placed with them. Another suggested, “*Parents [and relative caregivers taking on parenting responsibilities] need to understand symptomatology, medication, the need to avoid power struggles and set boundaries/structure and intervene early so things do not escalate. Family members may not take child to counseling. They may think he needs to stop it; he’s just being bad.*”

- **Insufficient knowledge of adolescents and engagement skills hinders permanency work with youth.** Youth and providers discussed the need for training on how to talk respectfully and engagingly with adolescents. (Specific areas were training is needed include: adolescent identity formation, recognizing and overcoming defensiveness and how to have conversations about permanent families). An example from a case file reveals a CSW talking to a youth about “*going to live with a stranger through adoption.*” The youth’s affect was noted as flat during the conversation. He said he was not interested in being adopted by a stranger and “*didn’t want to talk about adoption anymore.*”
- **Training to work with people of different races, ethnicity, and cultures may be insufficient.** The reliance on “on the job training” or “learning over time” can limit CSW’s ability to effectively engage, understand and respond to families, children and youth. One informant suggested that African American families come across to new workers as angry and hostile which impacts their ability to engage families and there is limited ongoing training to help workers interpret and engage these families.
- **Social workers are not always aware of community resources and risks for clients.** In an interview with a community resource, the informant noted, “*they [social workers] will get housing for a families in a high substance abusing area, not realizing that they are putting the families in a high risk area. If we are included in the decisions, we can say “that’s not a good place for this family with this issue.”*”

IV. Considerations for Improvement

Making the child welfare system work better for African American families and children in Los Angeles County requires county, state and even federal advocacy; additional resources; and major shifts in practitioners' job duties, daily case processing routines and locally and externally produced policy. As described in the previous section, multiple circumstances contribute to the current situation.

It is important to note that not all change must happen at once. DCFS and its partners need to determine what change can occur quickly and easily and what will require enlisting other partners within the county and state. Los Angeles County, with its participation in the CAPP project and implementation of its many practice improvement strategies including the Core Practice Model and Quality Service Reviews, has an opportunity to make some significant local changes and to influence state and federal thinking.

The considerations for improvement offered here are divided into two parts. The first part offers suggestions for addressing the most pervasive contributors. The second part provides more detail on other elements of the institution that should and could be changed to serve children and families better.

1. Meeting the Most Significant Challenges Head-On

The same bold thinking reflected in the CAPP and Los Angeles Core Practice Models needs to be applied to design-

ing the proper infrastructure to provide staff and families with the time and quality services necessary for children to successfully reunify with their parents or timely find other permanent homes. This redesign should:

- **Lower caseloads/workloads so that workers and attorneys have the time and resources to do “best practices.”**
 - **Establish county-wide caseload standards for child welfare social workers.** Caseload standards should be set at a level that will support the successful implementation of CAPP and Core Practice model; reducing the caseload sizes/workload especially in the Wateridge office is an urgent priority. DCFS should determine appropriate caseload sizes based on known needs of the population served and resources available in each community.³⁰
 - **Work with the union to establish new requirements for transferring staff so that caseloads are not so dramatically affected and workforce stability is promoted.** The current policy of allowing a new social worker to transfer offices after one-year essentially treats the first office assignment as a training exercise. It does not benefit the office that has invested in the worker nor does constant turnover serve the community well. Additionally, worker continuity has been demonstrated to affect the timeliness of permanency.³¹

³⁰ For recommended caseload size see Child Welfare League of America, <http://www.cwla.org/newsevents/news030304cwlacasead.htm>

³¹ Potter, C.C., and Klein-Rothchild, S (2002) Getting home on time: Predicting timely permanence for young children. Child Welfare, LXXXI(2), 123-150.

- **Reduce caseloads of attorneys representing parents and children, promote high quality standards of legal representation and consider multidisciplinary model.** High caseloads are widely recognized as a barrier to quality legal representation. The American Bar Association has recommended caseloads of no more than 50-100 cases depending on attorney experience and skill level. Multidisciplinary parent legal representation programs that include attorneys, social workers and parent partners provide families with comprehensive services to families prior to entering and throughout involvement with the child welfare system.³²
- **Pilot a neighborhood office concept in the community served by the Wateridge office.** South Los Angeles is perceived to be the most challenging area to work in with regard to the difficulties the families face. Testing a whole new approach as it implements CAPP, Wateridge may become an area where caseloads are capped at an appropriate level, people want to work and funders want to invest. Wateridge would have the potential of becoming the model office, not the system’s “boot camp.” This new design would mean moving staff out of the office that is currently outside the community and could mean co-locating staff in provider agency facilities. In these new locations, consider having a new configuration of workers and supervisors, e.g. two supervisors to teams of workers; institutionalizing a team approach and regular meeting/sharing. Work assignments should be aligned with schools/hospitals in the community to facilitate stronger teaming, functional partnerships and overall collaboration with the community. The operational design of a newly restructured community office should be done in collaboration with community partners.
- **Reassign county resources to DCFS offices to be more in line with the office workload.** Some resources are provided to each office on an equal basis rather than an equitable basis, that is, each office regardless of size receives the same number of specialty staff, without accounting for the service volume as demonstrated by the needs of the population being served. Data from and about the community, historical service trends, upfront assessments and MAT

assessments can be used to better identify the mental health and economic linkage resources needed in a given office, rather than a “one to one” distribution

- **Examine the requirements for supporting children in guardianships to determine how families can receive the necessary support without keeping them under court supervision.** The current practice of “guardianship with dependency” provides some support to families and children. However, the IA examined cases where there were no safety or risk issues. Keeping cases open for the purpose of providing support to families where there is no safety or risk concerns adds to caseloads, does not necessarily establish permanent homes for children and keeps families under unnecessary surveillance. The State, as part of CAPP, should examine alternative means to provide this level of support to families.
- **Move DCFS from a culture of fear to a culture of learning**
 - **DCFS needs to authentically engage the communities it serves in order to create and sustain trust, decision-making transparency and partnerships needed to help families.** The Annie E. Casey Foundation learned from its Family to Family initiative that “*Strong relationships with the community will help sustain changes and can help the agency in the face of various kinds of pressure—for example, from the media or the courts.*”³³ The current atmosphere in Los Angeles County is due, in part, to community members and leadership not being familiar with the difficult work or decisions of DCFS and the challenges families face are abstract to them. Lack of knowledge hinders trust and can leave the agency standing alone when challenged—this in turn affects the families served. There are many ways DCFS can become more transparent, the community engaged, and more learning encouraged beginning with two efforts that are already in place: Team Decision Making (TDM) meetings and Quality Service Reviews (QSRs). Opening TDM meetings to intentional, regular community participation can help make the Department’s decision-making more transparent. It also helps the larger community learn

³² American Bar Association (2006). *The Standards of Practice for Attorneys Representing Parents in Abuse and Neglect Cases*.

³³ Annie E. Casey Foundation, *Family to Family Tools for Rebuilding Foster Care Lessons Learned*, July 2001, Baltimore, MD. page 18.

and understand the resources that are necessary for families to be preserved, or when children must be removed, to be successfully reunified. Likewise, it helps DCFS staff learn what the community has to offer and who can provide support. In another way, QSRs provide opportunities for building trust and offering transparency. Through QSR community results sharing meetings community leadership learns more about the work of DCFS and the needs of families. Furthermore, like TDMs, QSRs can offer individuals from the community and leadership first-hand observations of DCFS practice and family needs. Many jurisdictions have invited legislators, civic leaders and other community members to “shadow” a QSR reviewer and to meet with the social workers and supervisors working with families as well as the families themselves. The experience has helped build bridges of understanding between the child welfare departments and the community leadership in these jurisdictions. Finally, the CAPP project implementation can also be leveraged to build strong community partnerships. The CAPP Case Practice elements of Teaming and Well-being Partnerships provide the framework for clearly defining the functions, definitions and procedures for including families, communities and Tribes.

- **Revise and/or establish a death review/critical incidence protocol that includes assessing and providing support to staff and families who have been involved.** Across the country, unfortunately, children die who are, or were, known to the child welfare system. Usually, a combination of individual, family, community and system factors contribute to these deaths. The police, child welfare, mental health, behavioral health, the schools and other public serving systems cannot completely prevent these tragedies. However, a thoughtful and intentional death review/critical incidence protocol is necessary to hold individuals and systems accountable for egregious mistakes and to continuously improve the child welfare system’s ability to realize its mission of ensuring children are safe and supporting families. Too often the way in which states and local governments respond to these situations is reactionary and results in a culture that directly conflicts with the stated mission of the agency. The County Board of Supervisors and DCFS need to review their respective processes for child death reviews in

partnership with key stakeholders in order to ensure that the culture of the county and the organization aligns with the overarching mission and goals of the agency. The protocol should emphasize learning to ensure that continued practice improvement occurs and that staff feels supported in their work rather than demonized. The exception that all staff should understand is that when an egregious performance issue has resulted in a child death, they will be held accountable. However, in most cases, larger system failures can be identified and addressed in order to build a stronger child welfare system. The new practice reforms under CAPP and *Katie A.* will only succeed within a culture that acknowledges the complex environment that exists and the unfortunate reality of child deaths and critical incidents that can occur even under well functioning child welfare systems.

- **Examine Los Angeles County’s interpretation and implementation of ASFA in order alleviate barriers to otherwise suitable relative placement**
 - While the county has initiated some effort to improve understanding of ASFA requirements and timeliness of response to families seeking to be placement resources, more is needed. The examination suggested here should determine where federal requirements end and California state and/or Los Angeles County requirements begin. Los Angeles County appears to have more stringent requirements for potential caregivers than federal law requires. This affects family members and others who wish to be considered placement resources for children in their community. The reexamination of the rules should determine what is absolutely essential for child safety and what rules can be relaxed in order to promote safe family placements.
- **Work with parents, parent advocates, DCFS staff, community providers and court officers to create a rational means for ensuring that parents are receiving meaningful, relevant services**
 - As the system currently operates, the federally established ‘reasonable efforts’ standard to support parents in reunifying with their children is not meaningful. Creating a more supportive approach to parents means seeking ways to provide them with greater assistance in finding appropriate service providers and in providing financial services to pay for these services. A more supportive approach also requires estab-

lishing a clear set of criteria for service providers to meet and allowing DCFS to apply the criteria without court permission. The criteria should be based on practice based evidence with different populations, not solely on professional credentials or location.

2. *Changing the institutional features of DCFS and its partners to create a climate for successful child welfare practice*

■ **Ensure Agency Missions and Job Functions Are Aligned with Practice Vision**

- **DCFS should review its mission statement and functional descriptions of the various units.** The purpose of the review is to assess whether the agency's guiding statements and documents accurately reflect the values and principles of the agency today and where the agency wants to head. The mission articulated by leadership and staff is different from the mission in the Los Angeles case practice model, thus it is important to create overall clarity and joint understanding about the mission and values of DCFS. Specifically examine call intake: descriptions, response and resolutions to determine how differential response efforts could be strengthened. The review should encompass questions such as:

- Is the agency solely focused on child safety?
- What kind of emphasis is given to child and family well being and child permanency in the mission statement?
- Is this emphasis consistent with more recent practice direction?
- Is family and youth engagement an intentional responsibility in job descriptions?
- How can job functions, job descriptions and unit purposes more consistently reflect permanency and well being in addition to safety? Do workers, regardless of what unit they are in, have job descriptions aligned with DCFS mission?
- How could the Mission and functions more effectively create expectation to provide services and supports in ways that are truly equitable and culturally humble?

- **Redefine the role of social workers to explicitly include supporting parents in reunifying with their children.** The IA found that work-

ers, described as Children's Social Workers, are primarily tasked with monitoring parents' compliance with case plans/court orders rather than working collaboratively with them to reunify with their children. Job descriptions could be rewritten to emphasize priorities and realign expectations.

■ **Ensure agency rules, policies and practices are aligned with practice vision and specifically emphasize the safe and timely permanency of children, with their own families if possible**

- **Examine all current forms and procedures used for assessment and case planning for their relevance to family-centered case practice and how they help inform or hinder the work (with contradictory guidance to case managers).** The Department has several forms that are used as the foundation for gathering knowledge about families and children, assessing safety and risk, and making decisions. These forms should be assessed to determine if they are designed to accomplish or support desired practice.
- **Strengthen TDM process with facilitators and all staff to make this a meaningful process for families and staff alike.** Giving TDM facilitators the time to meet with youth/family before TDM meetings will allow the facilitators to learn about the family and prepare youth and families for TDM participation. Revising DCFS 174 to separate community representation from family's informal support will clarify that inviting community representation is a requirement, not an option.
- **Review and amend contracts with service providers,** as necessary, to support the work toward permanency by better enabling provider participation in TDMs, continued service to a child/youth no matter where child is placed, family preservation services to be offered earlier to families who have the goal of reunification and evaluation and accountability for promoting permanency for children and youth.

■ **Ensure community-based, high quality services**

- **DCFS should expand service options, availability, accessibility and affordability.** The IA revealed multiple challenges in Los Angeles County with regard to the availability of affordable and approved services to match the needs of African American families and youth. As a result,

more services need to be community based – in the communities in which the families and children call “home.” This includes developing appropriate mental health services for children and adults alike and placement options for youth. In particular there is a need for neighborhood foster homes that have the skills to work with challenging children and youth to help them heal. Additionally, DCFS, working with its partners, should:

- Develop a payment mechanism to support parent co-pay for services.
 - Encourage, through RFPs the development of resources within the geographic boundaries of the community served by Wateridge.
 - Consider redistributing Family Preservation funding to better meet the needs of the population.
 - Encourage expansion of concrete services through RFPs, partnering with faith community.
 - Review public transportation routes in South Los Angeles in relationship to where services are and people live and work with advocates and community providers to ensure youth and parents can realistically access services; and
 - Offer incentives for creative resolutions to making services more accessible (e.g., vans for clients).
- **Consider establishing community-based satellite juvenile courts** to make court proceedings more accessible to families and youth served particularly in communities facing similar distance and transportation challenges as the South Los Angeles community served by the Wateridge office. As with the previous proposal to pilot neighborhood offices, the design and location of the satellite courts should be a collaborative effort with the communities.
 - **Evaluate policy changes that allow communities on the county perimeter to have more direct access/linkage with resources in bordering counties.** The IA found placement and service barriers to families and children in the jurisdiction of Los Angeles County but living in perimeter counties. Consider streamlining the approval process for out-of-county placements or give offices like Pomona the authority to place children in a neighboring county. Work with the state to resolve barriers so that children and youth who are moved to another county can continue to access services in Los Angeles County.
- **Encourage and support providers in meeting DCFS and court criteria by offering training scholarships to providers to get the necessary certification or waive required fees for licensure.** Service providers who are accessible and affordable for parents should be considered and encouraged to meet the requirements of the Department and/or the Court by having opportunities to receive the necessary training or establish the infrastructure required for licensure at a free or reduced cost.
- **Continue development and refinement of data agenda and quality assurance mechanisms that provide useful feedback to all practitioners and improve outcomes for families**
 - **Ensure effective utilization and performance tracking mechanisms are in place for key practice elements and resources** such as TDMs, Independent Living Services, court mediation services, family preservation services and neighborhood-based placement resources. These tracking systems should be able to collect data on use and performance by race and ethnicity. Data should be shared with workers and supervisors regularly. Data should also drive resource allocation/development in the areas of greatest need to minimize burdens on families and disruptions to family connections. Leadership within the offices and across the county should use this data to inform the need for and distribution of quality resources.
 - **Continue supporting the QSR to ensure a mechanism for systematically obtaining and using family and youth feedback.** The QSR is a standard process, used across the nation, for obtaining feedback from children, youth and families about the services they receive. Collecting information from a QSR process is not enough. The real value is a meaningful process for results to be effectively shared with staff and leadership as well as used by offices and leadership to understand, support and adjust practice. Countywide, the aggregate QSR results should be used to look deeper into the institutional features that hinder offices from improving practice performance in a given system area.
 - **Develop a supervisory “reflective practice” tool based on the QSR.** Reflective practice has been defined as “the capacity to reflect on action

so as to engage in a process of continuous learning.³⁴ The QSR is a tool to support system-wide reflection on practice – what is working and what are the areas of improvement. Offices and supervisors, however, do not need to wait for periodic externally conducted QSRs to regularly engage in reflective practice with staff. The information sought in a QSR could be routinely collected by supervisors in regular case consultations with staff. Asking questions similar to the QSR about family and youth well-being and permanency emphasizes what is important in practice and holds supervisors and staff accountable for results as well as offering a learning opportunity. In addition, supervisors and office leadership can explore with staff and family teams the effectiveness of the process being used to encourage “voice and choice” and tracking and making adjustments to family plans and interventions.³⁵

- **Build additional mechanisms for obtaining feedback from children and families on the quality of services so that case plans and practice can be adjusted.** Beyond QSRs, other standard processes are needed to obtain feedback from children, youth and family members about the quality of services they receive (whether successful or not). In fact, the current CAPP practice reforms encourage workers to have continuous dialogue with families about how services are working for them.³⁶ Such timely feedback from families would support an enhanced quality assurance function, as well as allow for necessary and timely troubleshooting when services are not meeting the expected goal for a client. In addition to obtaining timely feedback from families in team meetings, worker visits, phone calls, etc., the county should consider models such as customer satisfaction surveys, focus groups or community cafes to gather additional region-specific concerns about child welfare practice and services offered.³⁷ Finally, all feedback obtained from families should be widely shared with supervisors, Assistant Regional Administrators, Regional Administrators,

and other leaders so they can work with community partners to ensure better quality services are routinely available for families.

- **Ensure Practitioners Have the Education and Professional Development they Need to Provide Families and Youth with Quality Services and Caregivers Have Opportunities for Knowledge and Skill Building**
 - **Implement and evaluate the CAPP cultural humility curriculum.** It is an opportunity for staff to learn methods of inquiry that enhances engagement.
 - **In partnership with the union, Los Angeles County should develop a work plan process for ensuring that training results in skill building and improved practice.** Each person’s work plan should provide the opportunity to assess the skills needed for implementation of key elements of the CAPP and county core case practice model and develop action steps for professional development as needed. Work plans should be developed for workers, supervisors and ARAs to ensure that leadership is moving in a practical and substantiated way to build and sustain skills needed. As part of the training work plans, there should be a review of supervisor training needs. This review should be conducted by the training division with participation of the union.
 - **Develop child development knowledge building and support opportunities for relative and nonrelatives caregivers alike.** The IA found that caregivers need more information about child development and coaching and skill building on how to respond to child behaviors. This is particularly true for children who have experienced trauma.
 - **Attorney training should include many of the same topics offered to social workers and families:** cultural humility, child and adolescent development and parent and child dynamics. Consider conducting joint trainings with social workers so that different perspectives can be heard.

³⁴ Schon, D. (1983) *The Reflective Practitioner, How Professionals Think in Action*. Basic Books

³⁵ See Los Angeles County’s Quality Service Review for a Child and Family protocol, Version 2.2, October 2010, developed by Human Services Outcomes, Inc.

³⁶ See CAPP practice behavior 22.

³⁷ The Community Cafe concept, part of the Strengthening Families Protective Factors Framework, uses the World Café technique to engage parents as leaders and provide an opportunity for dialogue and knowledge-sharing. Parent leaders host a series of guided conversations attended by parents and community partners, including systems/ agencies relevant to the discussion. For more information: http://www.ctfalliance.org/initiative_parents-2.htm. For general information on Strengthening Families: <http://www.cssp.org/reform/strengthening-families>.

V. Los Angeles County Action Plan



Los Angeles County Department of Children and Family Services Eliminating Racial Disparity and Disproportionality Action Plan



The Los Angeles County Department of Children and Family Services (DCFS) vision is that children thrive in safe families and supportive communities. Through the work of a thoughtful strategic planning effort, we have developed a mission, identified key values and set goals to achieve excellence for the children and families of our county. Staff, community partners and stakeholders have contributed to the development of our plan and will be

critical in identifying action steps and moving the work forward. It will take the committed and sustained efforts of DCFS along with numerous partners in the sustenance of child safety: other county agencies, local school districts, neighborhoods, law enforcement, hospitals, and service providers. We remain committed to fostering regular communication and collaboration in order to best serve and support children and families in our county.

Vision:

Children thrive in safe families and supportive communities.

Mission:

By 2015, DCFS will practice a uniform service delivery model that measurably improves: Child Safety, Permanency, and Access to effective and caring services.

Values:

Cultural Sensitivity, Leadership, Accountability, Integrity and Responsiveness.

Goals:

Improve Child Safety, Decrease Timelines to Permanence, Reduce reliance on out-of-home care, Self-Sufficiency, Increased child and family well-being, and Enhanced organizational excellence.

Katie A, a federal lawsuit, was settled in December 2011 by the parties with the help of a negotiation group of key stakeholders overseen by Judge Matz and Special Master Rick Saletta. The settlement involves the delivery of mental health and other integrated services to class members that include thousands of children in or at risk of foster care. The primary focus of the case is on Medicaid-eligible youth. Services will be delivered using a core practice model that is individualized to needs, values voice and choice of the youth and family, builds on strengths, and is family-focused while improving stability and moving towards permanency. Efforts are being made to include integration with other key initiatives such as the California Partners for Permanency (CAPP), Congregate Care Reform, MTFC/ITFC, and Residentially-Based Services Reform, Out of County Mental Health and California's Wraparound programs.

Our shared Core Practice Model (CPM) in partnership with the Department of Mental Health (DMH) delineates our values in five key practice domains: Engaging, Teaming, Assessing, Planning & Implementing, and Tracking & Adapting. Our vision for shared practice is that children will remain safe and the services and supports put in place are in the families' communities and will build on their strengths. It is built on four elements from a system of care approach: Family Strengths/Child Needs-Based Approach, Multi-Agency Collaboration in the Community, Teaming and Cultural Responsiveness. Additionally, we want to ensure that family voice and choice and identifying underlying needs remain high priorities as we work with children and their families throughout the life of the case. We have developed a crosswalk document that clearly demonstrates how the practice strategies line up with the practice behaviors identified in CAPP. The focus of implementing a cohesive model is on outcomes in the areas of safety, permanence and well-being.

A Changing Agency

California Partners for Permanency (CAPP) is a grant effort that is led by the California Department of Social Services (CDSS) in close partnership with four early implementing counties that includes agency leadership, youth, parents, caregivers, communities and tribes. This work is being funded out of a \$100 million federal Permanency Innovations Initiative (PII), a multi-site demonstration project. The goal of the CAPP grant is to address the permanency issues facing African-American and American Indian youth and families in the child protection system. The

mechanism by which CDSS is going to achieve this goal is through the deliberate use of a child and family practice model that is culturally affirming, empowering, employs the use of networks, and uses culturally-based healing practices and practice adaptations.

Los Angeles County DCFS is one of four early implementing counties in the CAPP effort with a primary focus on African American youth and families. The decision to focus on African American families came as a result of a data analysis of those children and youth that experience the longest stays in care. Consequently, three offices were selected to participate in the initial implementation effort: Pomona, Torrance and Wateridge. This effort comes at a time where it can be fully supported through the identification of a strategic plan and the implementation of best practices using the shared core practice model between DCFS and DMH. The underlying themes are congruent and there is much energy around improving outcomes in Los Angeles County.

The Institutional Analysis (IA) process was undertaken in the Pomona and Torrance offices in April 2011. The emerging themes were common in both offices:

- Lack of effective engagement
- Inadequate matching of services to needs
- Inattention to trauma experienced by families
- The system not being organized to work with families in a coherent way.
- Workers are not organized to maximize opportunities for safe and timely permanency.
- The system privileging itself over the needs of the families.

Subsequently, an IA took place in the Wateridge office in May 2012. Not surprisingly, many of the same themes emerged with the addition of the caseloads in Wateridge being nearly double that of Pomona and Torrance. There is much energy around the results of the entire IA process for all three CAPP offices from both departmental personnel, the courts and community partners. This energy will fuel the work that is tied to addressing the themes and achieving better outcomes over time. Part of the work includes working closely with the DCFS Compton office and sharing CAPP resources whenever possible to support their change efforts that began as a result of the CPM development. They have shared their successes and challenges with the CAPP offices and are benefitting from the work being done in the CAPP counties.

³⁸ Permanency Innovations Initiative Grantee Profile April 2012.

Action Planning

The preliminary findings of the first IA from April 2011 were presented to Los Angeles County DCFS in June 2011 at a meeting with the Presiding Judge of the Juvenile and Delinquency courts, as well as community partners and members of the workgroup addressing racial inequities. Since that time, a concerted effort has been expended by executive leadership and regional office leadership to address the critical areas of practice. These identified needs were included in the development of the Child and Family Practice Model for CAPP that was developed for use by all four CAPP counties. The practice behaviors were carefully crafted with agency and community input across the state over several months to ensure that the model truly speaks to the needs of children and families across the state. The following report is a summary of the actions taken to date organized by the common themes of the findings.

■ Lack of effective engagement

- The Pomona, Torrance and Wateridge offices are working on fully implementing the shared core practice model by strengthening their use of engagement strategies within the office and with families. All three offices have begun using Child and Family Teams (CFTs) as a way to improve the opportunity that exists in helping families plan, coordinate and make decisions about their own lives. Workers and supervisors are experiencing great success with these early CFTs and report wanting to use the approach more often.
- Pomona has really made concerted efforts to create an environment that supports learning and unlearning as it relates to improving social work practice. The administrative team has changed some key meetings to now include CAPP units so that administration has time to hear the successes and challenges associated with changing practice behavior.
- Pomona has provided in-depth coaching three full days per week for the social workers and supervisors in the implementing units. At the suggestion of social work staff, the administrative team has also begun utilizing the coaches at their level to support the office's shift in engagement.
- Pomona and Torrance have both worked on searching more extensively for relatives at the beginning of a child's experience with DCFS. They have done this by utilizing a Family Finder that works very closely with the social worker and the family to locate persons that

might be able to serve as a resource to the child.

- Torrance and Wateridge provided refresher training to their social work staff on engaging with families and they have utilized the practice behaviors to give the staff tangible methods of changing their engagement strategies to be more effective.
- Torrance also renewed their process of teaming with families, agency partners and community partners to provide immediate connections to families to several local resources that will support and enhance the reunification process.
- Torrance also increased their engagement with community groups and faith-based organizations to expand the use of prevention services so that families will not have to become part of the DCFS system.
- Wateridge has begun implementing best practices in September 2012 and has two coaches that spend three days per week in the office with social workers and supervisors to support the practice change.

■ Inadequate matching of services to needs

- In Pomona and Torrance, they are attentively working toward providing services that are in line with what families need.
- Pomona implemented a Family Maintenance GAIN Unit in order to provide services to families that are intact in the DCFS system and need additional support with respect to funding.
- Torrance has instituted a process of utilizing Neighborhood Action Councils and Community Resource Connections (CRC) where social workers present families' needs directly to a panel of community providers in order to make an expeditious connection to services for the family.
- Torrance has improved the time it takes to link parents to services in their community through a partnership with UCLA to develop a needs portal which will have the capability of measuring the time it takes to link families to services. UCLA interns will be involved in reviewing cases to establish a baseline for time it took to link a family to services prior to the needs portal being utilized.

- Torrance has also done some local outreach to school districts to assist youth in improving their educational outcomes. They have also created a homework club based in the community so that youth can have a place to go and get assistance.
 - Wateridge has intentionally focused the work of two social workers on group home placements for youth in the 0-12 year old category to ensure that these children are not unnecessarily placed in a high level of care. They work closely with group home providers to transition youth into lower levels of care as expeditiously as possible.
 - Wateridge has assigned two social workers to work exclusively with minor mothers and their young children. They provide focused attention on these
- **Inattention to trauma experienced by families**
 - Trauma experienced by families that come into contact with the system is a theme that emerged in the analyses. DCFS is working on developing some additional training modules in connection with a local resource in order to provide more support to staff in this area.
 - Pomona has expanded their parent advocacy program through the Parents in Partnership (PIP) model. They have brought in more PIPs to their office to engage parents when they come into the lobby and provide information on supportive services that exist.
 - Pomona is also expanding their Cultural Broker program by hiring new brokers to work in the office with staff and liaise with parents, families, and community partners. This is done in an effort to build better relationships between the agency and the community.
 - Torrance has implemented the Parents in Partnership (PIP) program as a result of the IA and is using them to connect with parents experiencing the DCFS system.
 - **The system not being organized to work with families in a coherent way**
 - Reorganization has been happening at various levels and speeds in the county. All three offices have made very strong partnerships with Department of Mental Health (DMH) staff that are co-located in DCFS offices. They are heavily involved in the coaching and mentoring efforts
- at both Pomona and Torrance. The Wateridge office has just begun their coaching efforts and is already seeing positive results. DMH observes coaching experiences and provide feedback to the team. There is a genuine excitement that exists as a result of their direct involvement.
- All three offices are working closely with their assigned hearing officers from the Juvenile Court to address major challenges and brainstorm about possible solutions that better serve children and families.
 - Pomona has reorganized some of their administrative meetings so that they have more time to spend with the implementing units and supervisors. This allows them to be heavily involved and invested in how the CAPP work is proceeding in the office. They assist in troubleshooting any issues that arise and follow up with staff to ensure they are doing well.
 - Pomona staff attended a two-day workshop sponsored by Casey Family Programs entitled “Knowing Who You Are” in December 2011 to increase workers’ skills in cultural competency by first understanding their own biases, strengths and areas of growth. Torrance staff attended in August 2012 and will be attending in October of 2012.
 - Torrance has reorganized some of their meetings and their administrative structure to better support staff in working with families. There have been a few changes that have taken place that allow for frequent meetings with the Implementation Team there so that they feel supported in their ability to work.
 - Torrance has also taken the time to train their office receptionist in the tenets of practice change so that clients will experience the shift in the office from the moment they enter the building.
 - Torrance is in the process of solidifying their relationship with local law enforcement agencies to out station a social worker there to improve and increase communication and collaboration.
 - Torrance has out stationed four social workers in a local school district to work toward better connections between the department and the children and youth that attend those schools.

- Wateridge has assigned two social workers to a few schools in the Los Angeles Unified School District to provide a presence and a resource to the school community.
- **Workers are not organized to maximize opportunities for safe and timely permanency.**
 - High caseloads have contributed to a lack of organization around maximizing permanency across the county. In particular, caseloads at the Wateridge office far exceed the caseloads of the three CAPP offices. However, with the use of the practice model efforts, workers are able to unlearn old practices and safely try new approaches with families with system supports built in. The general consensus thus far is that the new approaches are helpful in the work they are doing.
 - Pomona has established a faith-based partnership to plan for the recruitment and support of local care providers to help children taken into care stay connected to their family and community and increase timely reunification and permanency.
 - Torrance is also renewing their work with local community agencies that can provide immediate connections to families in support of the reunification process.
 - The Wateridge Task Force has maintained a CAPP item on their agenda to stay in touch with the disproportionality work being done in the Wateridge office. Their intent is to support the work and provide resources to families when possible.
 - Wateridge has also been utilizing a team member from the Department of Public Social Services (DPSS) on a weekly basis to connect emancipated youth to benefits and services they may need.
- **The system privileges itself over the needs of families.**
 - The system privileging itself over needs of the families is an issue that requires specific attention to past practices and potential changes for the future. DCFS has been undergoing many changes in the last several months in an effort to better support the daily work that must be done to attend to families' needs.
 - The Executive Team has moved the CAPP work from a services bureau to a centralized bureau (Strategic Management) to offer a more solid support from which to engage in the work.
- DCFS is finalizing the shared CPM that integrates in a very deliberate manner the CAPP elements and practice behaviors so that there is only one model with which to practice and assess.
- The CAPP project manager has been included in several workgroups that will inform larger system changes so that families can receive more integrated services on a consistent basis.
- Meetings that were once held separately have been merged with other meetings based on the topic. For example, the Coaching workgroup was merged with the CAPP Implementation workgroup to form an integrated team that meets on a monthly basis.
- DCFS is utilizing the Quality Service Review (QSR) to help inform practice shifts in the regional offices that are in line with the shared CPM and the CAPP model.
- The Presiding Judge of Juvenile and Delinquency court, The Honorable Michael Nash, drafted an anonymous survey that was distributed widely in the court house to gather data on how parents and family members were treated. A small sampling was reviewed and more surveys are likely to be administered so that more work can be done in identifying and serving family needs versus system needs.

The Critical Work Continues...

Despite the progress made, there is more work to be done in the coming months and years. In the next several months, DCFS will continue to engage local and statewide community partners to advance the work of improving the system for children and families. Some of the possible ways of making continued progress will involve critically examining our departmental policies and procedures and making recommendations for how to streamline those documents in a way that is most supportive to the work being done. Focused attention on reducing the high caseloads in the Wateridge office will be a critical component of supporting practice change for that community. Additionally, an advisory body will be established as part of the change effort underway that will support the shared Core Practice Model in the county and make recommendations

for how to support the agency and the families in the communities. DCFS is also creating curricula that will provide ongoing support for social workers, supervisors and managers to address the secondary trauma that occurs as a result of the challenging work. We are establishing support groups for coaches in an effort to meet the compassion fatigue associated with this type of work. This topic is being addressed in coaching sessions that are taking place, however more work needs to be done. Part of this includes partnering with some of the local universities and agencies that have expertise and can provide a meaningful experience for staff. Another aspect of the work includes connecting with the Deans and Program Directors of the schools of social work in Los Angeles County to ensure that the curriculum being offered prepares students to enter the child welfare field with a solid foundation in best practices.

Los Angeles County hopes that the course we are on will provide a positive example for other child protection agencies across the state and the country. Keeping children connected to their communities in ways that offer protection and support is a priority. Those of us that have the privilege to engage in this work in Los Angeles County will remain committed to addressing the inequities in our system and identifying solutions that will ultimately strengthen all of our communities.

APPENDIX A



California Partners for Permanency
Reducing Long-Term Foster Care

LOS ANGELES COUNTY OVERVIEW

CAPP Overview:

- Federally funded 5-year \$100 million Permanency Innovations Initiative (PII).
- California is one of six grantees.
- CAPP project includes a diverse group of California agencies, organizations, communities and tribes collaborating to achieve sustainable improvements for children and families.
- Goal is to reduce long-term foster care for all children, with an immediate focus on children who are in care the longest and experience the worst outcomes.
- Project is “not business as usual”—includes includes strong technical assistance and support from federal government and reliance on community voice and partnership.

County Overview:

- Los Angeles is one of four counties participating in CAPP and will be early implementers of a new Child and Family Practice Model that will be used by social workers in their day-to-day work with vulnerable children and families and that partners with communities, families and tribes.
- The CAPP practice model will guide culturally-sensitive engagement, teaming and healing practices and practice adaptations so that the Child Welfare System is responsive to the needs of African American children, youth and families in Los Angeles County.

- Three Department of Children and Family Services offices are participating: Pomona, Torrance and Wateridge.
- Each office is at a different stage in the project—Pomona will implement the practice model first.
- Efforts are being coordinated and aligned with a related Shared Core Practice Model that is being implemented through a partnership with the Department of Mental Health and as a result of the *Katie A.* lawsuit and settlement.

Target Population:

- Data analysis identified African American children and youth as the population in Los Angeles with the longest stays in foster care.

Partnership is Distinctive Feature of Project:

- Community engagement is foundation of CAPP’s work.
- Local advisory and leadership committees guide the development of all phases of the project. Los Angeles has created a Steering Committee that meets to discuss and provide insight to the needs of the community and input on the various phases of the project.
- Coordinating with and building on other local work is a critical element of CAPP’s work. In Los Angeles, there is a concerted effort to leverage and incorporate the values, principles and practices that have resulted from settlement of the *Katie A.* lawsuit.

Key Project Components and Activities:

- Each office is participating in an Institutional Analysis (IA)—a review of system and organizational barriers to permanency. Pomona and Torrance completed their IAs in April 2011; Wateridge is conducting its system review in May 2012. The information from the IAs are informing the development and implementation of the CAPP Child and Family Practice Model.
- With guidance and participation of community—and in alignment with the *Katie A.* legal settlement—CAPP’s practice model will be implemented in Los Angeles County. The local Steering Committee works to provide guidance and input to ensure the practice model addresses the unique needs of the community.
- A rigorous evaluation will be conducted to ensure that implementation of the practice model produces the desired outcome of reducing long term foster care. Technical assistance and support from the Federal Government (through the Permanency Innovations Initiative Team) will ensure the evaluation process and results are based on sound practice.

Timeline:

- Five-year project from October 2011 through September 2016.
- First year was a planning phase; Los Angeles and community were involved in planning and development activities.
- Second year efforts focus on testing of the practice model. Each office is at a different stage in the process: Pomona begins testing in May, Wateridge in June and Torrance in August.
- Years 3 through 5 will see continued implementation and refinement of the practice model and evaluation.

To learn more about CAPP and its work in Los Angeles County, contact Angel Y. Rodriguez, CAPP Project Manager for Los Angeles County (626) 691-1474 or rodang@dcfs.lacounty.gov.



This project is a service of the Children's Bureau of the U.S. Department of Health and Human Services.

APPENDIX B

Purpose of the Institutional Analysis and Methodology

Conceptualized and first implemented by Dr. Ellen Pence, the Institutional Analysis (IA) seeks to uncover, synthesize and ultimately resolve organizational and structural dynamics that produce poor outcomes for particular populations of children and families served by social service agencies and community partners. The IA process is grounded in institutional ethnography³⁹, a form of Sociology which produces “accounts of institutional practices that can explain how workers are organized and coordinated to talk about and act on cases.”⁴⁰

Through quantitative and qualitative data collection and analysis, similar to the methodologies employed for organizational assessments, case studies and managerial audits, IAs examine how institutions process people as cases, focusing on disconnects between what families need to facilitate safety, permanency and well-being, and what child welfare systems and their partners are organized to provide.⁴¹

The focus of the IA is not on shortcomings or failures of individual caseworkers, supervisors, administrators, clinical providers, judges, lawyers or community partners. Instead, the IA identifies and examines problematic institutional assumptions, policies and protocols that organize or drive practitioner action, empowering institutions with the information to engage in constructive reform. Through ethnographic data collection and analysis, this IA explores how the Los Angeles Department of Children and Family Services (DCFS), as it is institutionally organized, contributes to poor outcomes for African American families.

Guiding Assumptions

The Institutional Analysis, as applied to racial disproportionality and disparities in child welfare, is grounded in several key assumptions:⁴²

- **Institutional changes can improve outcomes for youth and families.** A focus on institutions, rather than individual workers or specific practices, is a productive vehicle for change. Multiple disciplines, such as management and financial auditing, program evaluation and organizational development, have demonstrated that analyses of institutional and organizational features can identify opportunities for practical structural changes that improve system performance and enable better outcomes. As described by a Quality Auditing expert,⁴³ “The management audit... focuses on results, evaluating the effectiveness and suitability of controls by challenging underlying rules, procedures and methods... [Such analyses] are potentially the most useful of the evaluation methods, because they result in change.”⁴⁴
- **Institutions are designed to ensure consistency among staff and limit the influence of idiosyncratic worker behavior.** Institutions coordinate, organize and standardize worker actions to produce institutionally authorized results that are not swayed by individual worker ideologies. Workers are confined by institutional forms, philosophies, policies, practices and procedures. Therefore, when interventions yield consistently poor results for an identified group of children and parents, part of the problem (and therefore also part of the solution) must stem from the way workers are organized to process or manage cases.⁴⁵

³⁹ The field of institutional ethnography is often attributed to the thinking and work of Dorothy Smith. See Smith, D.E. (2005). *Institutional Ethnography: Sociology for people* (Toronto: AltaMira Press).

⁴⁰ Pence, Ellen, Ph.D. and Smith, Dorothy, Ph.D. (forthcoming). *The Institutional Analysis: Matching what institutions do with what people need*.

⁴¹ Further, as a case study, the IA is valuable in pointing to possible new directions for research and hypothesis testing the field at large.

⁴² CSSP is developing a bibliography that cites research supporting these assumptions. We provide some examples from the bibliography in this section.

⁴³ Bio of Dennis R. Arter: <http://www.qualitygurus.com/gurus/list-of-gurus/dennis-r-arter/>

⁴⁴ Arter, Dennis R. *Management Auditing*. Retrieved from <http://www.qualitydiagest.com/april00/html/managment.html>; see also the work of Charles Glisson and his colleagues at the University of Tennessee for their studies of organizational factors that influence direct practice with families and children (<http://www.csw.utk.edu/faculty/pages/glisson/index.htm>).

⁴⁵ Knight, J. (1992). *Institutions and Social Conflict*. (Cambridge: Cambridge University Press). Pence, E. and Sadusky, J. (2005). *Safety and Accountability Audit*. Praxis International, Inc. and Pence, E. (2009). (In)visible Workings. Praxis International, Inc.

- **The institutional view of clients can be biased and thus contribute to disproportionate and disparate outcomes.** The same institutional rules, policies, forms and manuals designed to mandate consistency and neutralize individual worker biases can still facilitate biased processing of clients. Public institutions serve communities with different identities and histories. The institutional practice of denying differences in an effort to be consistent, unbiased and “color blind” is misguided and disadvantages families of color. As individual information—strengths, needs, fears, aspirations—is filtered through practice standardizing mechanisms, the unique aspects of individuals disappear. Well intentioned interventions that do not consider the unique circumstances of each family might not be optimally suited to address families’ needs.⁴⁶ The IA is designed to capture and consider the interaction of families with public systems by striving to understand the context of their lives and communities.
- **Population-specific studies produce valid insights for institutional reform.** Analyzing the experiences of a specific subgroup of the population served by child welfare rather than a comparative assessment across one or more subgroups is valid and informative. As an ethnographic study, the IA examines and contrasts the needs of, and system response to, a particular population, however, findings may also be applicable to other populations or to the child welfare community writ large.⁴⁷ Population specific studies are commonly accepted in the field of Public Health,⁴⁸ where it is acknowledged that different portions of the population experience different health outcomes. Qualitative case studies of small, non-randomly selected populations can also lead to new hypotheses for exploration.⁴⁹
- **As a group, African Americans have been systematically denied opportunities for social advancement and experience institutional racism, including structural employment, education, housing and health discrimination.** The IA framework assumes subtle, embedded patterns of racism, both in institutional practice and within the United States society at large. These patterns are often not visible or

obvious and may be unintentional. The Institutional Analysis scrutinizes child welfare systems and their partners for effects on African American families, illuminating problematic policies and practices at the agency, local, state and federal levels.⁵⁰

The Institutional Analysis Framework: Core Standardizing Methods of Institutions™

The body of work supporting the Institutional Analysis suggests that there are at least eight core standardizing methods employed by child welfare institutions to direct worker engagement of families.⁵¹ Any one or combination of these features can interfere with equitable achievement of the desired child welfare outcomes—safety, permanency and well-being. Alternatively, the core standardizing methods represent opportunities for positive institutional change. Core standardizing methods analyzed as part of the IA include:

The core standardizing methods explored in an Institutional Analysis are as follows:

1. **Mission, purpose and job function**—Agency missions translate into case management practices and worker job descriptions. The IA examines how mission statements, worker’s job descriptions, tasks address and defined job functions match the reality of what will work for those being processed as a case.
2. **Rules and regulations**—The IA examines both the externally established laws, regulations and other governmental requirements and local policy that drives workers practices. The IA looks to see how regulations act to enhance or limit the worker’s ability and capacity to effectively intervene with families.
3. **Administrative practices**—These practices include internal administrative policies, protocols and procedures such as Team Decision Making meeting protocols, assessment tools, decision-making panels, formats for case plans and court reports, and case recording. Administrative practices coordinate the relationship between the institution (represented by the worker) and the client; as such, they can enhance the worker-client relationship or impede it.

⁴⁶ Campbell, Marie and Gregor, Frances. (2002). *Mapping the social: A primer in doing institutional ethnography*. Aurora, On: Garamond Press, p 37-39; Knight, J. (1992). Institutions and Social Conflict.

⁴⁷ This methodology can be adapted for use in understanding the experiences of other populations.

⁴⁸ Agency for Healthcare Research and Quality Policy on the Inclusion of Priority Populations in Research (2003, February). Retrieved from <http://grants.nih.gov/grants/guide/notice-files/NOT-HS-03-010.html>

⁴⁹ Mayes, Nicholas and Pope, Katherine (1995). *Observational methods in health care settings*, BMJ 311:182-184 (15 July).

⁵⁰ This framework can be, and has been, applied to other racial/ethnic groups and other populations such as victims of domestic violence. The selection of the population is determined based on quantitative data and the desired outcomes of the jurisdiction.

⁵¹ Pence, E and Sandusky, J. (2005) *The Praxis Safety and Accountability Audit Tool Kit*, Praxis International, Inc.

4. **Concepts and theories**—Policies, administrative practices, resource allocation, job duties are all connected to institutional assumptions, theories, values and concepts regardless of the individual workers beliefs. IA reviewers are trained to look for the operative theories at any point of intervention. They are built into administrative tools and policies.
5. **Education and training**—The IA examines how education, training and skill development for workers and supervisors, educational requirements, mentoring opportunities and participation in local, state and/or national forums shape how workers conceptualize a case which is then reflected in how they come to talk about and act on cases.
6. **Resources**—The IA explores how management allocates resources to both workers and clients. Resources include everything necessary for workers to carry out their job responsibilities and for child and families to receive effective services and supports that enhance children’s safety, permanency and well being. Resources are not limited to budget dollars, but also include such things as interventions to improve parenting, visits from workers, health care, home assistance, tutoring, emergency funds, child care, substance abuse evaluation and treatment and staff time (caseloads).
7. **Linkages**—Organized linkages connect a worker operating at a given point of intervention to other practitioners with prior or subsequent involvement in the case. It also links workers to family members. The IA examines how successfully management has built procedures and communication for linkages (passing along critical information about families) among service providers.
8. **Accountability**—The IA looks at who and what holds workers accountable for their actions. Within this

examination the IA asks how workers at each point of case processing are being held accountable to the well being and success of their clients. Additionally, the IA looks for accountability to other interveners and practitioners and to the overall intervention goals.

9. **Other factors** may influence organizational behavior in a specific location. In Los Angeles County, the IA found that as a result of numerous, tragic child deaths, subsequent media coverage, and the impact of this on agency leadership and workers, DCFS workers’ behavior was driven by culture of fear. That is, the IA found based on multiple interviews with a wide variety of professionals that DCFS workers felt compelled to remove children or were hesitant to return children to their families not because the children were unsafe or at high risk of maltreatment, but because they feared liability should something happen to that child as a result of their actions or inactions.⁵²

An IA examines the effects of these core standardizing methods to produce a clear, detailed description of how sequential managerial processes organize and coordinate worker actions and produce child and family outcomes. The focus of the IA is on illuminating institutional features that can be transformed to yield improved results for children and families. Unlike other evaluative approaches that seek to identify and explore program or practice strengths, the Institutional Analysis intentionally seeks to identify the problematic—what about the system is not working for families and children as the prevalence of a poor outcome (e.g., long-term foster care stays for African American children and youth), as supported by data, clearly indicates that there is a problem. The IA seeks to uncover contributing institutional factors and identify opportunities for change.

⁵² For a more thorough description of all of these core standardizing methods, see the forthcoming Ellen Pence and Dorothy Smith, *The Institutional Analysis: Matching what institutions do with what people need*. Praxis International, Inc.

FIGURE 1: The Institutional Analysis Framework

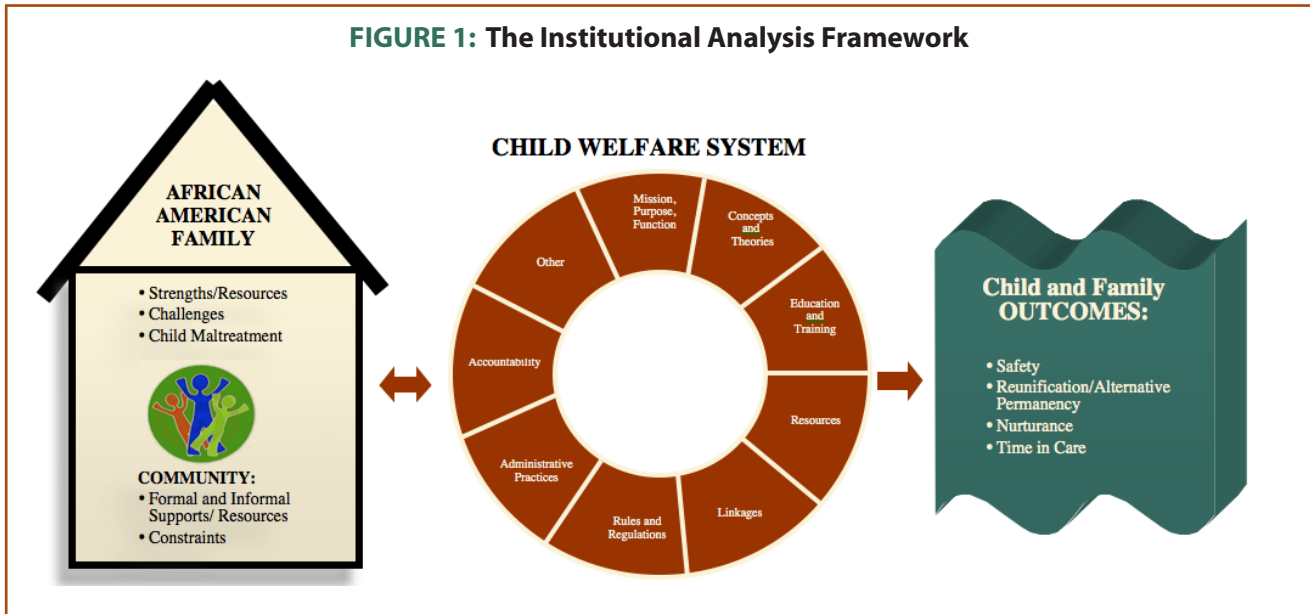


Table 1: Data Collection Activities for Pomona Office April 2011

Activity	Purpose
Big Picture Interviews With 11 Individuals	Interviews with Department leadership, Community Partners, Technical Assistance Providers and foundation leadership gave a better understanding of issues such as funding streams, local political structure, court and DCFS structure, local data, missions and directives of the child protection agency and its partners.
Interviews with 47 agency social work staff, private providers, community partners	The interviews were designed to understand the everyday case processing and managing routines of child welfare practitioners and their partners. Interview participants were selected to gain perspectives from the provider community, clients (parents and youth), system partners (court officers, attorneys, child advocates), agency practice initiatives and staff who were currently processing cases as frontline workers and who were considered by the agency to be competent workers.
10 Observations of: juvenile court, parenting classes, Team Decision Making meetings, and frontline workers	Observations provided the opportunity to see practitioners of different experience and skill level performing the tasks and duties and responsibilities discussed in the work practice interviews. Observations served to flesh out the interviews by identifying when and why practitioners may deviate from stated work practices and to provide a better understanding of the work conditions, time pressures, interactions among interveners (i.e. judges, family members, workers, attorneys, etc.) and availability of resources to get the job done.
8 Group Interviews with CASA workers, County Counsel, attorneys for children, frontline workers and supervisors, foster parents	These groups were composed of individuals who perform the same function or are involved in the same process and were designed to obtain their reflections and observations of their work and to prompt exchanges about the intent of the process, the institutional organization of the process, the relationship of various players in managing a case through that specific part of an overall process and the eight core standardizing methods (regulations; resource allocation; administrative tools; lines of accountability; training; linkages to each other and others; institutional assumptions, concepts and operating theories, etc.)
Guided Review of 7 Paper Case Files	Data collection from case files was intended to learn how the case workers come to know the family, what forms are used, how interaction with families and service providers are documented and what knowledge is gained about the family.

Note: Parents and youth interviewed were African American (or had children who identified as African American). All case files involved African American families.

**Table 2: Data Collection Activities for Torrance Office
April 2011**

Activity	Purpose
Big Picture Interviews With 11 Individuals	Interviews with Department leadership, Community Partners, Technical Assistance Providers and foundation leadership gave a better understanding of issues such as funding streams, local political structure, court and DCFS structure, local data, missions and directives of the child protection agency and its partners.
Interviews with 45 agency social work staff, private providers, community partners	The interviews were designed to understand the everyday case processing and managing routines of child welfare practitioners and their partners. Interview participants were selected to gain perspectives from the provider community, clients (parents and youth), system partners (court officers, attorneys, child advocates), agency practice initiatives and staff who were currently processing cases as frontline workers and who were considered by the agency to be competent workers.
13 Observations of: juvenile court, parenting classes, Team Decision Making meetings, and frontline workers	Observations provided the opportunity to see practitioners of different experience and skill level performing the tasks and duties and responsibilities discussed in the work practice interviews. Observations served to flesh out the interviews by identifying when and why practitioners may deviate from stated work practices and to provide a better understanding of the work conditions, time pressures, interactions among interveners (i.e. judges, family members, workers, attorneys, etc.) and availability of resources to get the job done.
1 Group Interview with youth	This group session was designed to seek a range of perspectives on how the system worked for “clients” and to gain understanding about what was happening in their lives as they proceeded through various points of case processing.
9 Group Interviews with CASA workers, County Counsel, attorneys for children, frontline workers and supervisors, community partners	These groups were composed of individuals who perform the same function or are involved in the same process and were designed to obtain their reflections and observations of their work and to prompt exchanges about the intent of the process, the institutional organization of the process, the relationship of various players in managing a case through that specific part of an overall process and the eight core standardizing methods (regulations; resource allocation; administrative tools; lines of accountability; training; linkages to each other and others; institutional assumptions, concepts and operating theories, etc.)
Guided Review of 6 Paper Case Files	Data collection from case files was intended to learn how the case workers come to know the family, what forms are used, how interaction with families and service providers are documented and what knowledge is gained about the family.

Note: Parents and youth interviewed were African American (or had children who identified as African American). All case files involved African American families.

**Table 3: Data Collection Activities for Wateridge Office
May 2012**

Activity	Purpose
Big Picture Interviews With 30 individuals	Interviews with Department leadership, Community Partners, Technical Assistance Providers and foundation leadership gave a better understanding of issues such as funding streams, local political structure, court and DCFS structure, local data, missions and directives of the child protection agency and its partners.
Interviews with 12 agency social work staff, private providers, community partners and individuals from the court	The interviews were designed to understand the everyday case processing and managing routines of child welfare practitioners and their partners. Interview participants were selected to gain perspectives from the provider community, clients (parents and youth), system partners (court officers, attorneys, child advocates), agency practice initiatives and staff who were currently processing cases as frontline workers and who were considered by the agency to be competent workers.
17 Observations of: juvenile court, parenting classes, Team Decision Making meetings and frontline workers	Observations provided the opportunity to see practitioners of different experience and skill level performing the tasks and duties and responsibilities discussed in the work practice interviews. Observations served to flesh out the interviews by identifying when and why practitioners may deviate from stated work practices and to provide a better understanding of the work conditions, time pressures, interactions among interveners (i.e. judges, family members, workers, attorneys, etc.) and availability of resources to get the job done.
6 Group and/or Individual Interviews with youth, parents and caregivers	These groups were composed of individuals who perform the same function or are involved in the same process and were designed to obtain their reflections and observations of their work and to prompt exchanges about the intent of the process, the institutional organization of the process, the relationship of various players in managing a case through that specific part of an overall process and the eight core standardizing methods (regulations; resource allocation; administrative tools; lines of accountability; training; linkages to each other and others; institutional assumptions, concepts and operating theories, etc.)
10 Group Interviews with attorneys for children and parents, agency frontline workers and supervisors and private providers	These groups were composed of individuals who perform the same function or are involved in the same process and were designed to obtain their reflections and observations of their work and to prompt exchanges about the intent of the process, the institutional organization of the process, the relationship of various players in managing a case through that specific part of an overall process and the eight core standardizing methods (regulations; resource allocation; administrative tools; lines of accountability; training; linkages to each other and others; institutional assumptions, concepts and operating theories, etc.)
Guided Review of 19 Paper Case Files	Data collection from case files was intended to learn how the case workers come to know the family, what forms are used, how interaction with families and service providers are documented and what knowledge is gained about the family.

Note: Parents and youth interviewed were African American (or had children who identified as African American). All case files involved African American families.

Data Analysis and Safeguards to Prevent Bias

Data analysis occurred concurrent with data collection, the latter being informed and directed by the former, starting with quantitative analysis of Torrance, Pomona and Wateridge foster care data disaggregated by race. For example, repeated mention of Los Angeles' rigid kin placement regulations provoked further examination of the county's interpretation of relevant provisions of the federal Adoption and Safe Families Act (ASFA) and interviews with local ASFA leadership. On-site data collection occurred in each of three Los Angeles offices—Torrance, Pomona and Wateridge—for one week each. The on-site data collection teams shared pertinent information at the end of each day to consider some of the daily findings as a group and enable newly gathered information to guide subsequent data collection and analysis. A more comprehensive debrief occurred at each IA week's conclusion.

Collaboration with the County: To ensure opportunities for feedback, clarification and collaboration, Los Angeles County leadership were invited to the daily debriefs and to a presentation of preliminary findings that occurred at the conclusion of each site's respective data collection weeks. A draft of the report was shared with Los Angeles to obtain further feedback.

The Multiple Source Test: Each finding that is included in this report is supported by multiple data sources. Observations that did not meet this rigorous standard were rejected. Although specific case examples are used to illustrate particular findings, the data presented are common occurrences, not rare events.

Limitations of the IA

First, CSSP and CAPP recognize that other racial and ethnic groups experience disparate treatment and outcomes. Yet, in accordance with the scope of CAPP and data analysis findings, the Los Angeles County IA focused on the experiences of African American families. Institutional features identified in these studies may affect other populations or even all children and families served by DCFS. Secondly, findings are based on the experience of a limited number of families. Thirdly, the IA is intended to serve as an impetus to tangible change and therefore focuses on problematic features that the agency has the power to amend. This study should be considered a launching point for continuing analysis, not an exhaustive or conclusive investigation.

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