

Reports & Updates

March 2, 2005 - Child Welfare / Social Services Committee Meeting

Members Present: Karen Anderson-Gray, KC Culver, Lorraine Cahn, Sylvia Mejia, Nancy Virostko, Bill Manov, Mark Holguin, Francis Krebs, Judy Yokel, Jewel Roberts, Celia Goeckermann, Terry McKinney, Mary Cross.

The purpose of our meeting was to identify gaps in service delivery or areas of concern for children and families who are involved in HRA Child welfare services. We identified four primary topic areas that we wanted to focus on and further explore as priorities for Prop 63 funds or EPSDT leveraging. These four areas are:

- Therapeutic Supervised Visitation;
- Substance Abuse Assessment/Counseling;
- Mental Health Counseling/therapy; and
- Transition-age Youth.

Following is an analysis of what are our current resources in each of these areas and what resources might be needed to either meet the current needs or to expand our services:

Supervised Visitation: Currently Children's Mental Health has seven full time staff dedicated to providing therapeutic supervised visitation. We are seeing 33 families and providing 46 visits. Parents Center has 100 hours (2.5 FTE's) that HRA contracts with them to provide supervised visitation. HRA has one full time staff to provide supervised visitation as families enter the system. Thus, between the 3 agencies we have 10.5 FTE's who have the capacity to serve approximately 6 families each who have 2 to 3 visits per week on average (total of 63 families).

Challenges: Although supervised visits are usually only one hour in duration, it takes between 3 to 5 hours per visit factoring in transportation time, documentation, scheduling, and coordination. Currently HRA has 11 families who are not receiving their court mandated supervised visits. In addition, the current dependency judge is increasing the number of supervised visits from 1 time per week to up to 3 times per week for each family.

Contributing to this problem of lack of enough service providers to supervise visitation is the huge increase in CPS dependencies and referrals to Children's Mental Health. Since January 1, 2005 to February 25, 2005, there were 41 new referrals to Mental Health. This impacts our assessment services, family visitation unit and on-going counseling/therapy services to HRA children and families.

Our estimate is that it would require the addition of 2 to 3 FTE's to meet the need for supervised visitation and 2 to 3 Mental Health Counselors/Therapists.

Substance Abuse Assessment/Counseling: Currently HSA has one full time staff to provide assessment/case management to 50 CPS families with children 0-3 years of age. There are also 1.5 FTE's that provide substance abuse assessment/case management to Cal Works families. We have \$50,000 for treatment through the new Dependency Court grant. There are no substance abuse services currently for parents with children over the age of 3 that are involved with our Child Welfare system.

It was recommended that we expand services to parents with children in out of home placement to those aged 4 and up by adding 1 FTE for assessment/case management and also money for treatment.

Although we identified Counseling/Therapy and Transition -Age youth areas that need additional services, we all agreed that we would focus on therapeutic supervised visitation and Substance abuse at this time. Lorraine Cahn brought a Job development proposal for transition age youth that we thought could be introduced when we discuss "innovative programs" or Transition age youth.

We agreed that we would meet again on March 17th from 9 to 10:30 in room 164 to further brainstorm these ideas, including a Supervised visitation center.

Karen Anderson-Gray, Chairperson