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ABSTRACT

This document, prepared by California Review and Synthesis of Foster Care Studies project reviews and combines the major recommendations of seven recent California studies of foster care. These studies were: (1) Children Waiting, State Dept. of Social Welfare, 1972; (2) Report on Foster Care in California Joint Legislative Audit Committee, 1973; (3) Report on State's Role in Foster Care in California, Joint Legislative Audit Committee, 1974; (4) New Perspectives on Child Welfare Foster Care Services, Staffing, and Delivery System, Madison et al; (6) Adoptions and Foster Care Study Report, State of California, Dept. of Health, 1973; (7) Progress Report #1, Bolton Associates 1970. The consultants who reviewed these studies determined three Systems Recommendations, rated here in order of priority: (1) development of a single Children's Service Unit; (2) limitation of Juvenile Court and Probation jurisdiction to the most serious offenders with assignment to Protective Services of jurisdiction for abused or neglected children; and (3) initiation of a statewide supervising agency designated to monitor probation departments, establish standards, and evaluate program effectiveness. (HMV)

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REVIEW, SYNTHESIS AND RECOMMENDATIONS OF
SEVEN FOSTER CARE STUDIES IN CALIFORNIA
1974

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FOREWORD

Years of effort and countless studies have been devoted to seeking better ways to help California's foster children who reside in twenty-four-hour, out-of-home placement. In theory, the original goal of out-of-home placement to provide "temporary" shelter and care persists; whereas in reality many children remain in the foster care system until the age of eighteen. Theoretical goals and present practices have rarely been farther apart.

Theory to the contrary, the duration of the out-of-home placement can be for an extended period of time. Rising numbers of children in out-of-home placement, whether for brief or extended periods of time, are the result of changing social patterns. Many children who enter the foster care system will never return home. Many children require highly sophisticated, professional treatment services either at intake or during their foster care. Very large numbers can do well in home settings. Out-of-home placement policy should be designed to meet the reality of varying types of care.

Not only are the population characteristics of the children and their needs deserving of attention, but the monetary costs deserve scrutiny to insure the best possible use of the funds to help the children.

"The total 1974 estimated cost to federal, state and local governments for the approximate 55,820 children in California foster care programs...is approximately \$267,000,000 annually."^{1/}

Major newspapers, including the Los Angeles Times and the San Francisco Chronicle, have indicated in editorials and articles that the foster care system needs drastic overhaul to insure that children are well served by the expenditures. The foster care system is a bureaucratic nightmare; it serves children badly, and the taxpayer negligently. Many factors contribute to this situation.

The foster care system is funded by and through a plethora of agencies, bureaus, divisions and departments within the County, State and Federal governmental structures. (See Chart on page IV.) The funding provided through the multi-agencies and delivered

^{1/} "...68% (of the foster children)...remain in the program two or more years...and almost one child in four has been in foster care continuously for five years or more." Legislative Audit Committee Reports 148.2, p. 9. and 148.1, p. 22.

by a myriad of personnel in various family, group and institutional settings, is often jeopardized by lack of proper supervision and clearly defined objectives. It is possible the funding maze may help some children who enter the foster care system, but the odds are against this possibility.

The Children's Research Institute appreciates the support of the Department of Health, Education and Welfare, who through their Grant No. 90-C-93, May 13, 1974, made the Synthesis of the Seven Foster Care studies possible. We are particularly grateful for technical assistance provided by both Sam Miller and Rebecca Shuey, of the San Francisco Regional office, HEW, Office of Child Development.

Our interest as an Institute was to draw upon the expert knowledge and vast experience of retired social welfare and probation administrators to evaluate previous work and make timely recommendations. The consultants have provided a clear statement of foster care priorities.

Respectfully submitted,

Delmer J. Pascoe, M.D.
Delmer J. Pascoe, M.D.
Project Director

December 20, 1974
San Francisco, California

III

INTRODUCTION

It seemed appropriate to review all the recent work concerned with the out-of-home placement of foster children in California. Because of the diverse demographic and geographic characteristics of California, the Children's Research Institute felt that a synthesis and review of recommendations made in many reports, if brought together, would provide a guide to decision makers and interested citizens.

The study has been conducted during a six-month period by twelve consultants, most of whom are retired administrators with careers distinguished by deep concerns for children, high professional standards, and who in many instances were responsible for innovative and respected administrative changes in the welfare and probation systems.

Seven Reports have been reviewed. First, the major recommendations were sorted and extracted from the reports. Second, the recommendations were ranked as to importance and practicability. Third, the comments were brought together into a narrative form. Fourth, the single compelling recommendation for a "Children's Department" was carefully considered. Unanswered questions were listed and appear herein.

Despite the numerous suggestions made for a comprehensive Children's Services Unit, the Consultants who grappled with the manner and level for placement of such a proposed unit within the State Government were able only to formulate a list of a few of the structural considerations. For example:

- 1) Can one consider "children's services" without including the education system? To do so would imply overcoming constitutional prohibitions in California.
- 2) Can one develop an exclusive Children's Services Unit without including the Probation and California Youth Authority youngsters?
- 3) Is it appropriate to include a "protective and nurturing" function with one traditionally corrective and rehabilitative?
- 4) Are there clearly distinguishable characteristics among populations of children who are mentally ill, developmentally disabled or abused and neglected?
- 5) Does one begin with the very young child, as in a separate Department of Child Development?

Because the issue of a Single Children's Services Unit is of such importance to an overall review of foster care, the Children's Research Institute of California urges the Governor and the Legislature to establish a task force to define and to make the legislative and

regulatory changes necessary to establish such a unit during the 1975 Legislative Session.

There should be no illusions about this report. It is not original work. Its intent and its final effort was to utilize the recommendations made by others in earlier reports. The form and structure of this presentation may improve the odds for decision-makers and citizens who wish to bring about change in the present systems to better serve children. It may point to where dollars may best be spent. The recommendations alone, however, do not guarantee effectiveness. If the goal were survival of a system, things could remain as they are. One need never do very much other than make a few suggestions, offer a greater proliferation of reports, and perhaps hold a few hearings. These insure a static, enduring system

It was felt there would be value in bringing into one document the major findings of the Seven Studies, establishing priority among the findings, and if possible, settling on one or two recommendations which would be improvements for foster care delivery.

How would one accomplish this goal? Were there knowledgeable persons who could view the various segments of the foster care system objectively, without

the paralysis of their own professional perspective? A decision was made for heavy use of cross-disciplines, drawn almost exclusively from the ranks of retired persons. The distance by their retirement and the time to be reflective seemed to the Trustees of the Children's Research Institute to be important ingredients for such a review. A reservoir of experience has been drawn upon. The report is submitted with the certain knowledge that outstanding retired administrators in California have considered the subject of what can best help children living twenty-four-hours a day away from their own parents.

Our one disappointment is, that we were unable to agree on the structure of a Children's Service Unit. The report makes suggestions regarding such a unit, but mostly it asks questions. Change alone is not improvement. Henry A. Kissinger in "Strategy and Organization" writes: "In the absence of a generally understood doctrine, our actions will of necessity prove haphazard, conflicting proposals will compete with each other without an effective basis for their resolution. Each problem as it arises, will seem novel and energetic will be absorbed in analyzing its nature rather than in seeking solutions..."^{1/}

^{1/} "Foreign Affairs", No. 3, Vol. 35, (April 1957), p. 394.

"There is no question, the current service system is worthwhile," noted Garry Brewer in describing the entire spectrum of children's delivery systems. He adds: "In fact, portions of it are outstanding. However, there are, in general, many major problems facing the system, and with better organization and support, it could do far better. Many are not receiving services, or they are receiving the wrong or inadequate services; there are serious gaps in services offered, information is insufficient, control is inadequate, and most important, the resources devoted to serve our handicapped children in need are insufficient. To understand the kinds, magnitudes, and inter-relationships of these problems requires that we view the system comprehensively and from the perspective of the basic service needs of children."^{1/}

The need for coordination is clear. Unfortunately, our document, like the reports which were reviewed, stops short of defining a structure for the bringing together of the resources for the children.

Guideposts are provided for decision makers who may wish to "bring the resources together" and to implement the Recommendations for "basic service needs of children."

^{1/} Brewer, Garry D., "Serving Handicapped Children: The Road Ahead", Rand Corporation, Santa Monica, California

THE STUDIES

The California Review and Synthesis of Foster Care Studies project has prepared here a document which reviews and combines the major recommendations of seven recent California studies of Foster Care.

These studies were:

Children Waiting, State Department of Social Welfare, 1972

Report on Foster Care in California
Joint Legislative Audit Committee, 1973
(June), 148.1

Report on State's Role in Foster Care in California
Joint Legislative Audit Committee, 1974
(January), 148.2

An Evaluation of Accountability for Foster Care at the State Level
Joint Legislative Audit Committee, 1974
(July), 148.3

New Perspectives on Child Welfare Foster Care Services, Staffing and Delivery System
Bernice Q. Madison and Michael Shapiro in collaboration with Bernard Kahn, A.D. Kuperstein, and Paul Weinberger, San Francisco, 1973 under Rosenberg and San Francisco Foundation and California State University, San Francisco auspices in cooperation with the San Mateo Department of Public Health and Welfare and San Mateo Probation Department

Adoptions and Foster Care Study Report
State of California, Department of Health,
November 1, 1973

Progress Report #1: Background Information, Summary of the Problem, and General Recommendations
Study conducted for Californians for Juvenile Justice by Arthur Bolton Associates, June, 1970

SYSTEM RECOMMENDATIONS

After a comprehensive review of the seven recent California Foster Care studies, the consultants determined these System Recommendations, rated here by their priorities. Source references for each recommendation will follow.

1. The Health and Welfare Agency should develop a single Children's Service Unit responsible for planning, operation and evaluation, for children requiring out-of-home care.
2. Juvenile Court and Probation jurisdiction should be limited to children classified under Section 602* (California Welfare and Institutions Code), the most serious offenders. Protective Services* should be given jurisdiction for children classified under Section 600*, abused or neglected children. Section 601*, a category reserved for children who are generally out of parental control, should be repealed and an alternative system of community services (public and private; Youth Services Bureau* as model) including family crisis counseling be mandated for all counties.
3. There should be a statewide supervising agency designated to monitor probation departments, establish

* Please see Glossary.

standards, and evaluate program effectiveness.

(The California Youth Authority* would be a possible choice.)

* Please see Glossary.

SOURCE REFERENCES (System Recommendations) ..

1 Joint Legislative Audit Committee, An Evaluation of Accountability for Foster Care at the State Level, 1972 (July), 148.3, p. 17.

2 Study conducted for Californians for Juvenile Justice by Arthur Bolton Associates, Progress Report "I: Background Information, Summary of the Problem, and General Recommendations, June, 1970, p. 44.

3 Ibid., p. 45.

MANAGEMENT RECOMMENDATIONS

After a comprehensive review of the seven recent California Foster Care studies, the consultants determined these Management Recommendations, rated here by their priorities. Source references for each recommendation will follow.

1. The State Department of Social Welfare should instruct counties on how to identify those dependents and wards of the Courts eligible for federal reimbursement.
2. Counties should more closely examine eligibility for Aid to Families with Dependent Children (AFDC).*
3. The Department of Health should develop a statewide foster care caseload standard.
4. The Department of Health should develop a uniform foster family home rate, making allowances for special needs.
5. The Department of Health should develop information systems to collect data necessary to measure program effectiveness.
6. The Department of Health should increase AFDC-BHI (Boarding Homes and Institutions) program staff to no more than 12 (if one foster care system develops - still the same need for sufficient program staff to monitor entire system).

* Please see Glossary

7. Administrative:

- a) Divide foster care into two programs - long-term and short-term
- b) Develop closer ties between foster care and adoptions program
- c) Certify, rather than license, foster homes *
- d) Increase allowance to non-needy relative
- e) Initiate a system of incentive payments*

* This recommendation was later rejected. Please see page 29 for c) and page 31 for e).

SOURCE REFERENCES (Management Recommendations)

¹Joint Legislative Audit Committee, Report on Foster Care in California, 1973 (June), 148.1, p. 17.

²Ibid., p. 34.

³Joint Legislative Audit Committee, Report on State's Role in Foster Care in California, 1974 (January), 148.2, p. 22.

⁴Ibid., p. 25.

⁵Ibid., p. 15.

⁶Ibid., p. 17.

⁷State of California, Department of Health Adoptions and Foster Care Study Report, November 1, 1973, p. 8.

^{7b}Ibid., p. 8.

^{7c}Ibid., p. 20.

^{7d}Ibid., p. 22.

^{7e}Ibid., p. 17.

PROGRAM RECOMMENDATIONS

After a comprehensive review of the seven recent California Foster Care studies, the consultants determined these Program Recommendations, rated here by their priorities. Source references for each recommendation will follow.

1. County Departments of Social Services, upon receiving a request for out-of-home placement, should make an immediate evaluation of the case and the alternatives for handling it. Every reasonable effort should be made to prevent entry of the child into the Foster Care System.
2. Services (24-hour crisis intervention, homemaker, mother's helper, day care, counseling, medical and psychiatric treatment, etc.) should be available and delivered to families in an effort to preclude removal of the child.
3. Services should continue to be delivered to the natural family if the child is removed. They should be a central component of intensive work with the family toward the goal of the return of the child in the near future.
4. The specifics of a careful review of out-of-home placements according to a specified time frame should be developed and enforced. Written short-term and long-term plans which evaluate possibilities of return to home, adoption, long-term

foster care, etc. should be made for the child at every point of review. At a definite time during placement, a permanent plan should be made for the child. If the temporary placement exceeds a certain length of time, the permanent plan should be reviewed, implemented and enforced.

5. The State Department of Health should revise the adoptions caseload standard to allow adoption workers sufficient time to work with foster children and their foster parents toward potential adoptive placements.
- 6a. County adoption departments should be furnished with sufficient legal staff to process cases of freedom of foster children from custody and control of their natural parents.
- 6b. Free legal service should be provided to foster parents wishing to qualify for guardianship of foster child but lacking financial means to meet costs.*
7. Training programs for foster parents should be planned and required.
8. Training needs and programs for child services workers should be reviewed and revised.

* This recommendation was later rejected. Please see pages 42-43.

SOURCE REFERENCES (Program Recommendations)

¹State Department of Social Welfare, Children Waiting, 1972, r 10. State of California, Department of Health, Adoptions and Foster Care Study Report, November 1, 1973, p. 6.

²State Department of Social Welfare, Children Waiting, 1972, r 1. Bernice O. Madison and Michael Shapiro in collaboration with Bernard Kahn, A.D. Kuperstein and Paul Weinberger, New Perspectives on Child Welfare Foster Care Services, Staffing and Delivery System, 1973 under Rosenberg and San Francisco Foundation and California State University, San Francisco auspices in cooperation with the San Mateo Probation Department, ch. 8. Hereafter this report will be referred to simply by its title. State of California, Department of Health, Adoptions and Foster Care Study Report, November 1, 1973, pp. 6-8, pp. 10-11.

³State Department of Social Welfare, Children Waiting, 1972, r 13. New Perspectives on Child Welfare Foster Care Services, Staffing and Delivery System, ch. 8. State of California, Department of Health, Adoptions and Foster Care Study Report, November 1, 1973, p. 12.

⁴State Department of Social Welfare, Children Waiting, 1972, r 10. New Perspectives on Child Welfare Foster Care Services, Staffing and Delivery System, ch. 3, pp. 162-166. State of California, Department of Health, Adoptions and Foster Care Study Report, November 1, 1973, pp. 12-16.

⁵Joint Legislative Audit Committee, Report on State's Role in Foster Care in California, 1974 (January), 143.2, p. 32.

^{6a}State Department of Social Welfare, Children Waiting, 1972, r 16. Joint Legislative Audit Committee, Report on State's Role in Foster Care in California, 1974 (January), 143.2, p. 32.

^{6b}State Department of Social Welfare, Children Waiting, 1972, r 20.

⁷State Department of Social Welfare, Children Waiting, 1972, r 21. State of California, Department of Health, Adoptions and Foster Care Study Report, November 1, 1973, p. 23. Joint Legislative Audit

SOURCE REFERENCES

Committee, Report on States' Role in Foster Care in California, 1974 (January), 148.2, p. 18.

State Department of Social Welfare, Children Waiting, 1972, r 12. New Perspectives on Child Welfare Foster Care Services, Staffing and Delivery Service, chs. 5-7. State of California, Department of Health, Adoptions and Foster Care Study Report, November 1, 1973, p. 23.

SYSTEMS RECOMMENDATIONS

1. Recommendation

The Health and Welfare Agency should develop a single Children's Service Unit responsible for planning, operation and evaluation for children requiring out-of-home care.

Consultants' Comments:

All of the consultants strongly agreed with this recommendation. They felt that this recommendation was crucial if the foster care program was to be a truly effective system of services to children and their families. All Management and Program recommendations can be successfully implemented only if the single unit is created.

Some of the consultants specified some functions of the unit: Caseload standard setting, rate setting, development and maintenance of a reporting system. One consultant described the current fragmentation of services. Another stressed the importance of well-qualified, top-level personnel. The overall concern was the need for accountability.

Source:

(See graph and chart on the following two pages.)

"There are 14 separate organizational units in the State Health and Welfare Agency responsible for the supervision of foster care programs. This diffusion of authority precludes effective supervision and coordination of programs with local agencies and prevents the assignment of responsibility for either program failure or success at the State level."

Report M8.3 July, 1974. p. 5.

"The Health and Welfare Agency is not organized to permit the effective exchange of information regarding the out-of-home placement of children." Ibid., p. 110.

During the present legislative session, over 70 bills relating to children receiving out-of-home care were introduced. There is no single organizational unit to determine the impact of this proposed legislation. Ibid., p. 12.

Estimated Number of Children
In Out-of-Home Care
May 31, 1973 *

	Estimated Number of Children	Percent Of Total Children
Health Protection Systems (County Welfare Departments):		
AFDC-BHI (Children placed with nonrelatives)	27,020	
AFDC-FG (Children placed with relatives)	<u>12,500</u>	70.8%
Health Treatment Systems:		
Developmental disabilities	6,650	
Mental disabilities	<u>710</u>	13.2%
County Probation Departments:		
AFDC-BHIL ^{1/}	2,980	
County-funded only	<u>5,960</u>	<u>16.0%</u>
Total Children	<u>55,820</u>	<u>100.0%</u>

^{1/}These children are supervised by county probation departments, but their care is financed in part by county welfare departments.

^{2/}Excludes 1,330 Department of Youth Authority (CYA) children under 18 years of age.

* Legislative Audit Committee, 148.3, p. 9.

2. Recommendations:

Juvenile Court and Probation jurisdiction should be limited to children classified under Section 602 (California Welfare and Institutions Code), the most serious offenders.

Protective Services should be given jurisdiction for children classified under Section 600, abused or neglected children.

Section 601, a category reserved for children who are generally out of parental control, should be repealed and an alternative system of community services (public and private; Youth Services Bureau as model) including family crisis counseling be mandated for all counties.

Consultants' Comments:

All the consultants agreed to the three recommendations, although a number of concerns were expressed. First, it would be crucial to mandate protective services throughout the State. Second, it was stressed that organizationally, the protective services delivery system has weaknesses equal to those of the probation system. It was suggested, however, that a single State level unit for children would greatly strengthen the role of protective services at the county level. The introduction of the Family Court (while not specified per se in any of the reports) was suggested as a positive move. In relation to repealing Section 601, community alternative programs have not yet proven to be any more successful than the established services. The repeal of 601 would call for a tremendous amount of cooperation among the public agencies and between the public and community based

organizations. One other concern was the reaction of public employee unions if consideration was given to reducing the role of a major county agency such as probation. Finally, some probation departments are already beginning to move away from dealing with 601's.

Source:

"The (juvenile justice) system is required to provide too many disparate services for too many different kinds of people. The result is an inability to perform any of its tasks well." Bolton p. 43.

"We suggest that the jurisdiction of the juvenile court and hence the probation and policing agencies be narrowed to include only those young people who constitute a clear and present danger to society as evidenced by their violation of some established criminal statute." Bolton p. 44.

"The Section 601 child 'who persistently or habitually refuses to obey the reasonable and proper orders or directions of his parents, guardians, custodian or school authorities, or who is beyond the control of such person,...' is by definition a child who is 'in need of proper and effective parental care or control and has no parent or guardian willing to exercise or capable of exercising such care or control,....or has no parent or guardian actually exercising such care or control.' These children fall within the jurisdiction of Section 600 of the Welfare and Institutions Code." Bolton pp. 45, 46.

3. Recommendation:

There should be a statewide supervision agency designated to monitor probation departments, establish standards, and evaluate program effectiveness. (The California Youth Authority would be a possible choice.)

Consultants' Response:

There was strong agreement among the consultants on this recommendation, but equally strong concern was voiced as to whether the California Youth Authority should be the monitoring State level agency. It was suggested that the recommended single State level unit be the monitoring and coordinating agency for probation foster care. One consultant recommended that someone be assigned to investigate this issue in other states.

Source:

"There is no organizational unit within any state agency responsible for coordinating probation department placements. There is no statewide supervision agency to monitor programs administered by county probation departments or to compare program effectiveness. This leads to variations in the treatment of foster children supervised by county probation departments and is evidenced by varying caseload sizes and rate structures among the counties and by the greater use of constitutional placements in some counties."

A. Bolton Report, July, 1974, p. 12.

MANAGEMENT RECOMMENDATIONS

1. Recommendation:

The State Department of Social Welfare of California (now the Department of Benefit Payments) should instruct counties on how to identify those dependants and wards of the court eligible for federal reimbursement.

Consultants' Comments.

Consultants agreed that counties had failed in the past to collect federal money on the children eligible for such funding and that this money should be claimed. Only one consultant did not feel it necessary for instructions to be issued to the counties. In her mind, the inefficiency in collection had resulted from erroneous SDSW instructions in 1973, which had since been corrected.

Source:

"Because of inadequate and, in some cases, inaccurate information supplied by SDSW, approximately 2,600 federally eligible children placed in foster homes after having been judged a ward of the court (Welfare and Institutions Code Sections 601 or 602) have not been claimed for federal reimbursement.

"In addition, we estimate that a minimum of 550 federally eligible children placed in foster homes after being judged a dependant of the court (Welfare and Institutions Code Section 600) also have not been claimed for federal reimbursement.....
.....
.....Since this claiming deficiency has existed since the inception of the federal policy to share in the cost of foster care (January 2, 1967), the loss of federal reimbursements amounts to an estimated \$18 million for the 6-1/2 years ending June 30, 1973."
Legislative Audit Committee, 148.1, pp 4-5.

2. Recommendation:

Counties should more closely examine AFDC eligibility.

Consultants' Comments:

Consultants agreed that both State and County administrations must assist in the identification of children eligible for federal funding.

Source:

(See citation under Recommendation 1)
This recommendation stresses the county's responsibility for claiming federal funds for AFDC children who have been removed from their homes by court order.

3. Recommendation:

The Department of Health should develop a state-wide foster care caseload standard.

Consultants' Comments:

Consultants agreed that caseloads must be standardized. However, many consultants were concerned that these be flexible in line with the following considerations:

- a) special characteristics of county
- b) amount of time required to work with foster parents; e.g., six children in one foster home take less time than one child in each of six foster homes.
- c) separate workers for families which can be reunited vs. children for whom no realistic family ties exist
- d) relationship between caseload standards for foster care and adoption

Source:

"...we can find no justification for the wide variations in caseloads that currently exist. In the counties we visited, the average caseload size ranged from 25 to nearly 68." Legislative Audit Committee 148.2, p. 22.

Average Foster Care Caseloads
For County Welfare and Probation Departments
Six-County Sample
April 1973 *

	<u>Average Number of Cases Per Caseworker</u>		
	<u>County Welfare Department</u>		<u>County Probation Department</u>
	<u>Voluntary</u>	<u>Court-Ordered</u>	
Los Angeles ^{1/}	52	38	38
Monterey	<u>2/</u>	<u>2/</u>	55
Orange	37	<u>3/</u>	51
Riverside	68	68	40
San Diego	25	45	65
San Francisco	33	33	51

1/ Effective May 1, 1973, voluntary and court-ordered (Welfare and Institutions Code Section 600) caseloads were combined.

2/ Not available; each child placement caseworker processes both foster care and protective services cases.

3/ The Orange County Probation Department processes all court-ordered (Welfare and Institutions Code Section 600) cases.

* Legislative Audit Committee, 148.2, p. 19.

4. Recommendation:

The Department of Health should develop a uniform foster family home rate, making allowances for special needs.

Consultants' Comments:

Consultants agreed that there should be a uniform family home rate, with allowances for special needs. The suggested that these rates be flexible and increase as the child grows older. It was also indicated that the state and federal governments should assume more of the cost. One consultant proposed that not only should the county be relieved of cost, but the Board of Supervisors should be relieved of the power to establish rates.

Source:

"The foster family home rates authorized by County Boards of Supervisors range from about \$98 per month...to \$160 per month...The BHI* rate schedule for California's 20 largest populated counties is presented..." (See following page.)
*Legislative Audit Committee, 148.2, p. 22.

* Please see glossary

Boarding Homes and Institutions
Caseloads, Rates and Average Payments
For the Twenty Largest Counties
June 1973*

	<u>BHI^{1/} Caseload</u>	<u>Highest Regular Foster Home Rate^{2/}</u>	<u>Average^{3/} Payment/Child In Foster Home</u>	<u>Average Payment/Child In Institution</u>
Alameda	1,344	\$130	\$128	\$574
Contra Costa	861	130	119	631
Fresno	591	110	102	4/
Kern	692	110	103	426
Los Angeles	13,180	107	122	466
Marin	150	160	133	474
Monterey	219	125	117	4/
Orange	721	148	118	444
Riverside	797	125	106	438
Sacramento	975	125	132	487
San Bernardino	943	120	104	430
San Diego	1,635	127	121	471
San Francisco	2,024	130	150	588
San Joaquin	428	125	122	451
San Mateo	632	130	122	542
Santa Barbara	335	126	123	395
Santa Clara	1,303	98	147	507
Sonoma	427	108	146	456
Stanislaus	434	110	133	474
Ventura	285	115	109	4/

1/ Public Welfare in California, June 1973.

2/ County Boards of Supervisors set the rates in each county; higher rates are usually set for older children. This is the rate for an older child without unusual special needs.

3/ BHI Caseload Movement and Expenditures Report (CA 237), June and July 1973 average.

4/ Insufficient cases to produce a meaningful average.

* Legislative Audit Committee, 148.2, p. 23.

5. Recommendation:

Department of Health should develop information system to collect data necessary to measure program effectiveness.

Consultants' Comments:

Consultants agreed with the recommendation and goals stated above.

Source:

Counties are not regulated by the State to collect pertinent data on foster children. Thus, it is impossible to measure program effectiveness. An information system should be developed:

- 1) To identify the placement best suited to the child
- 2) To plan and control cases
- 3) To prepare reliable and prompt reports for federal, state and county officials
- 4) To develop criteria for county systems
- 5) To identify adoptive children at an early age
- 6) To measure effectiveness of achieving goals

Legislative Audit Committee, 148.2, pp. 14-15.

6. Recommendation:

The Department of Health should increase AFDC-BHI program staff to no more than 12 (if one foster care system develops, the need still exists for sufficient staff to monitor this system).

Consultants' Comments:

The consultants agreed to the need for more staff to monitor the AFDC-BHI program. There was some doubt that twelve staff members was a sufficient number.

Source:

"The state has allocated only three full-time consultants to monitor the \$108 million per year AFDC-BHI program. The third consultant was not hired by the department until October 1973. These consultants have visited only 12 of the 58 counties during the last 24 months." Legislative Audit Committee, 148.2, p. 16.

7a. Recommendation:

Divide foster care into two programs -- long-term and short-term.

Consultants Comments:

Most consultants felt that such a division would be beneficial. However, one consultant felt strongly that the disadvantages outweigh the advantages by this separation of foster care. She felt that a check point system for evaluating placements and reduced caseloads could solve the problem.

Source:

Distinguishing between long-term and short-term foster care is important because the needs of the children in each are different and this division would increase program effectiveness. Department of Health, p. 8.

7b. Recommendation:

Develop closer ties between Foster Care and the Adoptions Program.

Consultants' Comments:

Consultants agreed with this recommendation. As one consultant wrote: "Current compartmentalization is assertedly attributed to administrative convenience. Down with bureaucratic convenience as a rationale! This proposition is logical and should be supported..."

Other consultants noted that in some counties Foster Care and Adoptions Units work closely and effectively. If the Foster Care Systems were given a higher priority within the State Department of Health and there were more than three technical staff for the entire State, the recommendation would possibly be implemented simply through sharing of ideas among the counties.

Source:

Many adoptable children for whom there is no realistic hope of reunification with family never receive a permanent placement through adoption. These programs need to work together more to end the 'limbo' situation for children. Department of Health, p. 8.

7c. Recommendation:

Certify, rather than license, foster homes.

Consultants' Comments:

Consultants agreed that certification of foster homes as implemented in many other states is a policy from which California could benefit. The legal implications of licensing makes it an inflexible process. Well-guided certification could be an important supplement to our current licensing procedure. One suggestion was to test certification in selected counties and then compare results with licensing in the same counties.

7c. Revised Recommendation:

In selected counties, certification should be tested and results compared with licensing results in the same counties.

Source:

"One suggested accomodation to the program is to convert the licensing of family-type foster homes to a certification program. The belief is that certification allows greater flexibility better to serve changing needs in social and administrative circumstances." Department of Health, P. 21.

7d. Recommendation:

Increase allowance to non-needy relative.

Consultants' Comments:

Consultants agreed.

Source:

"Currently, non-needy relatives may accept responsibility to care for a related child for whom they are not legally required to pay support. For this service they are reimbursed through a formula which pays approximately \$50 - \$75 per month per child. Foster care placement usually costs more than double this amount." Department of Health, p. 22.

7e. Recommendation:

Initiate a system of incentive payments.

Consultants' Comments:

Most consultants felt that incentive payments were not necessary. The goal of returning children to their homes or providing permanent placement will be met by better organization, reduced caseloads, etc.

7e. Revised Recommendation:

This recommendation is no longer supported.

Source:

Incentive payments, as encouragement toward goal of returning child home or providing permanent placement, have never been tried seriously in California.
Department of Health, p. 17.

PROGRAM RECOMMENDATIONS

1. Recommendation:

A County Department of Social Services, upon receiving a request for out-of-home placement, should make an immediate evaluation of the case and formulate alternatives for handling it. Every reasonable effort should be made to prevent entry of the child into the Foster Care System.

Consultants' Comments:

Consultants read that every effort must be made to keep the child in the home. However, they stressed that this is only possible if adequate funds for extensive services are provided.

Source:

"When an agency first receives a request for out-of-home placement, a thorough social assessment for diagnosis, prompt case planning, and service or referral can assist families who have serious problems but who do not place the child in jeopardy. Program decisions and service actions based on findings can help families cope with problems before they reach crisis proportions, thus avoid family breakup, abandonment of the child, or placement of the child in such jeopardy that he must be removed from the home."
Department of Health, p. 6.

2. Recommendation:

Services (which would include 24-hour crisis intervention, homemaker, mother's helper, day care, counseling, medical and psychiatric treatment) should be available and delivered to families in an effort to preclude removal of the child.

Consultants' Comments:

Consultants agreed that services should be available and mandated. One consultant writes: "This supports the first recommendation that every effort should be made to prevent entry of the child into the Foster Care System. The full gamut of services should be accessible on a 24-hour basis for appropriate crisis intervention to prevent removal of the child from his home."

Source:

"The removal of a child from his home does not help the family to deal with its problems. The sole criteria for such removal should be the need for protection of the child. The removal of the child under other circumstances only compounds the problems and weakens the family unit, thereby making the return of the child a difficult and often lengthy process. It is essential, therefore, that a full range of services be immediately available to all persons involved in a family crisis to assist them in dealing with their problems and to preclude the need for the removal of the child from the home. Although the services needs of a family may be varied and complex, it is less costly in dollars and certainly in human costs, if their provision helps to strengthen a family unit and to prevent the need for placement of a child in foster care. Many of the needed services are currently available but need to be organized, coordinated and focused on family crisis which have been identified. Generally, the range of services which should be available in a comprehensive family services delivery

system should include at least the following:

Counseling Services

Psychological
Psychiatric
Financial
Crisis intervention
Family

Assistance Services

Day Care
Night care in emergency
situations
Tutorial
Homemakers and volunteers
Home physical therapy services
Medical/health care
Financial assistance to
maintain home

Children Waiting, pp. 21-22.

3. Recommendation:

Services should continue to be delivered to the natural family if the child is removed. They should be a central component of intensive work with the family toward the goal of the return of the child in the near future.

Consultants' Comments:

Consultants agreed that it is absolutely essential to provide services to the family after the child has been removed. In many instances, removal is the only action which is in the best interests of both the child and his family. As one consultant stressed, this separation can be therapeutic only if intensive services are provided to the family. Often the parents suffer from guilt and a sense of failure, even though they know they need and desire the removal of the child. Services must be provided to these parents to help them adjust to and grow in this arrangement and to enable the child's early return to the family.

Other consultants expressed special concerns. These services should be provided by specially trained staff, not the family worker. The family worker should be responsible for securing medical care, housing, financial assistance, etc. Caseload standards should be set. The family worker's judgment as to when the child can safely return home should be decisive.

Source:

"Once a decision has been reached that placement is necessary, intensive work with the family during the first six months of placement is particularly important to help parents stabilize their lives and reclaim their child. Essential services include problem identification, agreement upon a mutually understood goal toward which counseling and support of the parents can be directed, practical advice and guidance, arrangements for medical or psychiatric treatment for the parent or child as needed, work training or employment for the parents, plans for adequate child care or respite help when the child returns home, help in learning about and using other resources in the community, and other specific services directed toward creating an environment which makes it possible for the family to function with reasonable stability thereafter."

Department of Health, p. 12.

4. Recommendation:

The specifics of a careful review of out-of-home placements according to a specified time frame should be developed and enforced. Written short- and long-term plans which evaluate possibilities of return to home, adoption, long term foster care, etc. should be made for the child at every point of review. At a definite time during placement, a permanent plan should be made for the child. If the temporary placement exceeds a certain length of time, the permanent plan should be reviewed, implemented and enforced.

Consultants' Comments:

Consultants agreed with and elaborated on this recommendation. The focus should be on goal-directed services. Dynamic management and managerial control will be necessary. A check-point system will help as might the newly established foster care registry. Timely review of cases should be made at a level above the supervisor of the record-keeping unit. Counties should establish foster care review committees composed of qualified professionals outside the agency. Finally, accountability will be extremely important.

Source:

"Approximately 68 percent of the children in our projected sample remained in the program for two or more years." (See Table on the following page.) Legislative Audit Committee, p. 9. These statistics do not seem to reflect the goals and intent of the foster care program.

"Foster Care should never become a way of life for a child. By its very definition, it is a substitute and temporary solution to meeting his needs." Children Waiting, p. 38.

The Madison and Shapiro study and others recognize that "children who are kept in 'temporary' care for long periods, even though there is no possibility of return to the natural parents, are deprived of their chance for normal development." Madison and Shapiro, p. 32.

Length of Time a Child Remains
In the AFDC-BHI Foster Care Program
Six-County Comparison
Projected Caseload
June 1973 *

	Number of Children		
	<u>Under Two Years</u>	<u>Two Years And Over</u>	<u>Total Caseload</u>
Los Angeles	3,900	9,280	13,180
Monterey	83	131	219
Orange	397	324	721
Riverside	484	313	797
San Diego	642	993	1,635
San Francisco	<u>518</u>	<u>1,506</u>	<u>2,024</u>
Total Number of Children	<u>6,029</u>	<u>12,547</u>	<u>18,576</u>
Percent of Total Children	<u>32.5%</u>	<u>67.5%</u>	<u>100.0%</u>

* Legislative Audit Committee, 148.2, p. 10.

5. Recommendation:

The State Department of Health should revise the adoptions caseload standard to allow adoption workers sufficient time to work with foster children and their foster parents toward potential adoptive placements.

Consultants' Comments:

Consultants generally agreed with this recommendation. One consultant wrote: "Present regulations define pre-adoptive care quite restrictively, resulting in varied interpretations among counties. These regulations are an effort to maximize Federal 75% services funds and conserve State adoption funds -- an admirable objective, perhaps, but not at the high cost of leaving children without permanent homes."

Another consultant expressed concern that this recommendation not be construed as encouragement for workers to pressure foster parents to become adoptive parents. "Many foster parents are not interested in adopting and did not become foster parents with adoption in mind. It is unfair to such families to urge them to adopt."

Source:

"About 4,950 children in the six counties we sampled are not likely to be reunited with their natural parents and are, or were in the recent past, potentially adoptive. This group of children represents 26.6 percent of the foster care caseload. Had effective adoptive services been made available to them in the second year of their placement, they would no longer be receiving foster care payments.

"Our June 1973 foster care report indicated that the average

cost of maintaining a child in foster care including both those living with a non-relative and those living in an institution is \$201 a month. Estimated administrative overhead and services costs amount to an additional \$93 per month. The annual cost savings of placing these children in adoption could amount to as much as \$17 million, and if our six-county sample is representative of the state, then the total number of such children statewide, who are not likely to be reunited with their natural parents, would be 8,200 and the potential savings would be an estimated \$29 million annually." Legislative Audit Committee, 143.2, p. 31.

6a. Recommendation:

County adoption departments should be furnished with sufficient legal staff to process cases of freedom of foster children from custody and control of their natural parents.

Consultants' Comments:

Consultants agreed. One consultant offered the reminder that these costs would be offset by savings in BHI payments. Most consultants indicated that provision of this legal staff must be legislated and that "dependency on local bar associations is completely inadequate."

An additional suggestion for this recommendation was not included in the seven studies. A consultant felt that a legal staff, in and of itself, was not sufficient. She recommended that lawyers and judges receive training to assist them in making decisions which are in the best interests of the child.

Source:

(See citation under Recommendation 5.)
Adequate legal staff is necessary to insure that, when possible, and advisable, the foster child is adopted.

6b. Recommendation:

Free legal service should be provided to foster parents wishing to qualify for guardianship of a foster child but, lacking financial means to meet costs.

Consultants' Comments:

Most consultants did not agree with the recommendation as stated. They were extremely hesitant about making foster parents guardians. As one consultant stated: "My experience with foster parents as guardians has been 100% negative. In almost every instance the foster parent has asked to be relieved of guardianship when the child becomes a teenager.

Another consultant wrote: "Guardianship generally provides little protection for children and may prevent a responsible placement agency from acting in the child's best interests."

One consultant strongly disagreed with this recommendation. Availability of legal services should not be based on one's participation in the Foster Care program. All persons should have access to these services. At any rate, the agency whose policy is in question should not make the determination as to whether or not legal services are available to those who may be questioning this agency.

6b. Revised Recommendation.

This recommendation is no longer supported.

Source:

This recommendation was made by the Children Waiting report (p. 33.). Its intent was to help ameliorate the situation of children in "limbo" and to plan a more stable placement at an early date by helping foster parents assume guardianship.

7. Recommendations

Training programs for foster parents should be planned and required.

Consultants' Comments:

Consultants agreed that a training program for foster parents is necessary. They differed on who should implement such a program. Some suggested the Foster Parents Association. Another consultant stated it should be implemented in conjunction with the Community College District. Most consultants, however, indicated that, whoever does the actual training, the State must lend support.

One consultant in particular felt that this recommendation was extremely important and must be planned very carefully. "Training on a one-shot basis, or even annually, is not sufficient, however, to meet the needs of foster parents if they are to meet the daily needs of foster children. Training must be coupled with adequate, on-going consultation and support service."

Source:

"...of all licensed foster homes in San Francisco in 1970, only 18 percent were active in April 1973.....
.....County foster parent licensing staff have indicated that foster parent turnover is in large part due to the foster parents' inability to cope with the unique problems foster children frequently present. In our judgment, an increase in training

offered foster parents would reduce the turnover of foster parents. The large turnover of foster parents contributes to multiple placements for the individual child. It takes costly time for county welfare staff to recruit new parents, and increases the chances for less qualified foster parents to become licensed."

Legislative Audit Committee, 148.2, p. 18.

8. Recommendation.

Training needs and programs for child services workers should be reviewed and revised.

Consultants' Comments:

Consultants agreed that training programs for child services workers need to be reviewed and revised.

They made several suggestions:

- 1) The Legislative Audit Committee should investigate what California has been doing with Federal training funds;
- 2) Schools should upgrade their academic majors in children's services;
- 3) Agencies must 'hook up' with schools to provide training courses in child care work, child welfare casework, etc.;
- 4) The State must take leadership in this effort.

Source:

Madison and Shapiro provide an extensive evaluation of training programs and needs of child services workers. (Chapters 5 - 7).

The Department of Health report lists the training objectives as: "to reduce admission of children into the foster care system, facilitate the rehabilitation of the home and the restoration of the child to the natural family, reduce the incidence of those children who drift by inadvertence into long-term foster care, and insure development of realistic long-term care plans whether in foster care, institutions or adoptive placement." (p. 23.)

A DESCRIPTION OF A FUNCTIONAL,
SINGLE STATE LEVEL UNIT SERVING CHILDREN
IN NEED OF OUT-OF-HOME PLACEMENT.

From amongst the recommendations evaluated, the consultants established as a priority the need for a single, state level unit serving children in need of out-of-home care. The logical level at which to establish this unit is the systems level within the State of California Department of Health.

The consultants were concerned with inequities in both the accessibility and the quality of foster care services. They were also convinced of the need for accountability in these services. To facilitate the amelioration of these concerns, the consultants recommend that this single unit should have an established line of authority. Placement of a single, children's "systems" unit within the Department of Health would insure a supervisory power over all the present public programs which effect children needing out-of-home care.

An alternative structure at the Health and Welfare Agency or Departmental level was rejected because the foster care system is only a portion of all children and youth services, whether Agency or Departmental. Also,

an Agency or Departmental level unit would create greater distance between the children's service managers and the children and parents who are to be served. Once again, the sharp focus necessary to produce ongoing accountability would be lost. In the event of a future reorganization of the current California Health and Welfare Agency, the above factors should be given paramount consideration in determining at what level a single children's unit should be established.

Objectives of a Children's Services Unit for "Out-of-Home Placement" should include: 1) a comprehensive planning process, 2) a management information system that tracks all children in the system, 3) a coordinated management operations system that would have the authority and the capacity to deal with issues such as standards, rate setting, the utilization of federal funds, 4) an effective accounting and reporting mechanism if the state should elect to play a larger role in the financing of foster care, 5) an evaluation system that would generate accountability on all levels, both to the taxpayer and to the children and parents to be served.

The functions of such a unit would include:

1. Planning

- a) forecasting trends in out-of-home care, funding possibilities, and political and economic conditions;

- b) assisting counties in the planning and development of service systems designed to meet specific local needs.

2. Operation

- a) standard setting
- b) licensing
- c) rate setting (in conjunction with counties)
- d) maintenance of information system
- e) allocation of funds
- f) accounting and reporting
- g) program and management consultation with counties
- h) liaison with impinging Department of Health systems, other Health and Welfare and Department of Education agencies.

3. Evaluation

- a) setting goals
- b) translating goals into measurable, time-related objectives
- c) collection of data (information system, as well as management audits) to determine program success and cost effectiveness
- d) county performance comparisons
- e) service mode comparisons

Several consultants suggested that the existing foster care population categories could be combined into one, overall, out-of-home placement management system. Such a combination would include the present systems for children who are mentally disabled (formerly mentally ill), developmentally disabled (retarded), abused and neglected, and the children and youth who are in trouble with the law. In California these groups are presently under the supervision of Health Treatment Systems, Health Protection Systems, Benefit Payments, the California

Youth Authority, and the County Probation and Welfare placement systems.

One consultant delineated the various present systems which should, in his opinion, be provided by an overall Management and Fiscal Oversight unit for all out-of-home placement as well as other children's services.

Services located in such a unit would include, but not be limited to:

1. Adoptions
2. AFDC-FG (Family Groups-e.g., children placed with relatives) and AFDC-BHI (Boarding Homes and Institutions)
 - a) foster homes
 - b) group homes
 - c) institutions and treatment centers
3. Child Health Services
 - a) Crippled Children's Services
 - b) Child & Maternal Health
 - c) Child Health Screening
4. Developmental Disabilities
 - a) state hospitals
 - b) regional centers
 - c) local programs (residential & day)
5. Mental Disabilities
 - a) state hospitals
 - b) local public & private hospitals
 - c) local programs (residential & day treatment)

6. Probation Placements (AFDC & county maintenance)

- a) foster homes
- b) group homes
- c) institutions and treatment centers
- d) county ranches
- e) county day treatment

7. CYA

- a) state institutions
- b) local programs

Were one to accept the necessity of a single overall authority for all out-of-home placement, addressing the program emphasis of such a supervising unit is mind-boggling. The transfer of authority and funding mechanisms into a single unit provide formidable challenges, even were one to ignore the political ramifications.

It is debatable whether the Youth Authority, Probation and similar "correctional/rehabilitation" oriented programs should be supervised by a foster care unit. Is there more commonality than disparity between the children who comprise the two populations? Should the unit include the State Hospitals and the Developmental Disability facilities which are obviously designed for more prolonged periods of twenty-four-hour care? If hospitals are included under the jurisdiction of an overall supervisory unit, perhaps in funding they should be considered vendors separate from the direct systems

of care providers. On the other hand, it can certainly be argued that, if the State is to provide a "comprehensive" children's services delivery system, all services which affect all children in all places providing out-of-home care should come under the purview of such a system.

Since the above "laundry list" of considerations only scratches the surface of an exceedingly complex issue, and since consideration of a single comprehensive delivery system of children's services (including some services other than out-of-home care) exceeds the scope of this current review, the Children's Research Institute concludes this Report of Seven Major Studies with very similar statements made by the majority of the Seven Studies considered. A Children's Services Unit is recommended. The composition and services for inclusion and exclusion of such a single services unit for children is not delineated.

It is the recommendation that the Governor direct the Health and Welfare Agency to consolidate all services to children to the extent possible, and that the Governor and the Legislature jointly create a Task Force to explore, develop and report by April 30, 1975, concrete and detailed recommendations for establishment of a single Children's Services Unit within State government.

Perhaps the task force would serve the children in the various systems best, if the task force determines that the notion of a single unit is unrealistic and politically not feasible. Or perhaps bringing together all the services which govern the lives of children who reside outside their own home twenty-four hours each day is appropriate and the task force should work to insure the establishment of such a single-services unit for all children who are cared for outside their own home. In either event the interests of children would be served.

CONCLUSIONS AND UNRESOLVED QUESTIONS

THE PRIMARY RECOMMENDATION OF THIS REVIEW AND SYNTHESIS OF SEVEN EARLIER MAJOR FOSTER CARE STUDIES IS THAT THE GOVERNOR AND THE LEGISLATURE SHOULD JOINTLY ESTABLISH A TASK FORCE TO EVALUATE THE PROGRAM COMPOSITION OF A SINGLE CHILDREN'S SERVICES UNIT AT THE STATE LEVEL.

IT IS THE RECOMMENDATION OF THE CHILDREN'S RESEARCH INSTITUTE CONSULTANTS THAT CONSOLIDATION SHOULD BEGIN TO THE EXTENT POSSIBLE ADMINISTRATIVELY, EVEN BEFORE ALL THE ISSUES HAVE BEEN RESOLVED BY THE COMBINED EFFORTS OF THE LEGISLATURE AND THE GOVERNOR.

QUESTIONS WHICH SHOULD BE RESOLVED CONTEMPORANEOUS WITH THE URGENT ADMINISTRATIVE CHANGES ARE:

- 1) Which of the facilities providing 24 hour out-of-home care for children should be included under jurisdiction of a single Children's Services Unit? Among current 24 hour out-of-home care programs are: Foster Homes, Group Homes, Institutions; State Hospitals; Developmental Centers, Youth Authority Facilities; Probation Branches; Camps; County Detention Facilities; Juvenile Halls, and Local, Public and Private Hospitals.
- 2) What sort of "classification" system of children should be developed? How will available services vary

according to the classification system developed? Shall the present category of Welfare and Institutions Code 601 children be dissolved and the children incorporated under the W&I Code Section 600 label? If so, will the services offered to this group of children provide sufficient control to prevent further penetration into delinquency?

3) While it is recognized that the majority of children are best served in traditional home settings in most all instances, it is also recognized that the best interests of a child may from time to time, or for rather substantial lengths of time, be best served by intensive treatment programs in group settings with multi-disciplined professional services. It is also recognized that some portion of the total out-of-home care program must address intensive services which home environments simply cannot provide. Should a Children's Services Unit include all residential treatment and acute treatment programs as well as the more traditional foster care settings?

4) Should the Children's Services Unit supervise all other services necessary for the treatment of the children in out-of-home care? (Medi-Cal/Crippled Children's Services/Rehabilitation Services/Vocational

Education/Educationally Handicapped?)

- 5) Should a Children's Services Unit be primarily concerned with the development of minimum standards or with innovations such as organization of the funding mechanisms around the needs of the child, rather than the agency which cares for him? For example, in Crippled Children's Services, funds are designated for the child, whether he receives the necessary services in his home, in another family's home, or in a hospital.
- 6) Would an appropriate function of a Children's Services Unit be to maintain a depository of records on all children in 24 hour out-of-home care?
- 7) Can a Children's Services Unit include Maternal and Child Health and Children's Health Disability Screening programs? If so, how can the care of the child be separated from the care of the mother?
- 8) How can the Children's Services Unit insure the flexibility necessary to treat all children when some of them require only temporary services? (Services for the deaf and blind? Psychiatric services?) Others require permanent, 24 hour, out-of-home care.

9) How does one achieve small organizational, task-oriented units capable of delivering multiple services with realistic caseloads? Every professional "sees a different part of the elephant" -- how does one overcome this in the interests of the child's needs?

10) Is it possible to revise the decision-making process in planning for the child who is to be placed in foster care in order to insure (A) good input from the medical profession around neurology and other medical decisions; (B) diagnosis of learning disorders and remediation prescriptions by education consultants; and (C) the rights of children and their parents being protected by the legal profession? Is it possible to bring these resources together to help what is currently burdening the one lone (perhaps untrained) social worker who has a caseload of 70 in making nearly all determinations which affect the foster child?

GLOSSARY

- "600" Refers to particular Section of Welfare and Institutions code. See Page 59.
- "601" Ibid., p. 59.
- "602" Ibid., p. 59.
- AFDC-RHI Aid to Families with Dependent Children/ Boarding Homes and Institutions. Federal funding of AFDC children provides that children who enter foster care system from such a caseload origin, permits the County to be reimbursed at level differing from the non-AFDC child.
- AFDC-FG Aid to Families with Dependent Children/ Family Group. See above.
- Youth Services Bureau In California community programs which are state funded and designated to serve delinquent and pre-delinquent youth, authorized under Senate Bill 2100/1974.
- California Youth Authority State Agency for delinquency treatment and prevention programs in California
- System Throughout this report, refers to various related administrative functions within State Government
- Management Throughout this report, refers to supervisory functions
- Program Refers to quality of care for children served. Practices of all persons involved in the care of the child are referred throughout by term "program."

CALIFORNIA WELFARE AND INSTITUTIONS CODE SECTIONS

600. Persons subject to jurisdiction

Any person whose home is an unfit place for him by reason of neglect, cruelty, depravity, or physical abuse of either of his parents, or of his guardian or other person in whose custody or care he is.

601.

Any person under the age of 18 years who persistently or habitually refuses to obey the reasonable and proper orders or directions of his parents, guardian or custodian, or who is beyond the control of such person or who from any cause is in danger of leading an idle, dissolute, lewd, or immoral life, is within the jurisdiction of the juvenile court which may adjudge such person to be a ward of the court.

601.1

a) Any person under the age of 18 years who persistently or habitually refuses to obey the reasonable and proper orders or directions of school authorities, and is thus beyond the control of such authorities or who is a habitual truant from school within the meaning of any law of this state, shall, prior to any referral to the juvenile court of the county, be referred to a school attendance review board pursuant to Section 12404 of the Education Code.

b) If the school attendance review board determines that the available public and private services are insufficient or inappropriate to correct the insubordination or habitual truancy of the minor, or if the minor fails to respond to directives of the school attendance review board or to services provided, the minor is then within the jurisdiction of the juvenile court which may adjudge such person to be a ward of the court.

601.2

In the event that a parent or guardian or person in charge of a minor described in Section 601.1 fails to respond to directives of the school attendance review board or to services offered on behalf of the minor, the school attendance review board shall direct

that the minor be referred to the probation department or to the county welfare department under Section 600, and the school attendance review board may require the school district to file a complaint against the parent, guardian, or other person in charge of such minor as provided in Section 12452 or Section 12756 of the Education Code.

602. Minors violating laws defining crime; minors failing to obey court order

Any person who is under the age of 18 years when he violates any law of this state of the United States or any ordinance of any city or county of this state defining crime or who, after having been found by the juvenile court to be a person described by Section 601, fails to obey any lawful order of the juvenile court, is within the jurisdiction of the juvenile court, which may adjudge such person to be a ward of the court.

FOSTER CARE PROGRAMS
ORGANIZATIONAL STRUCTURE

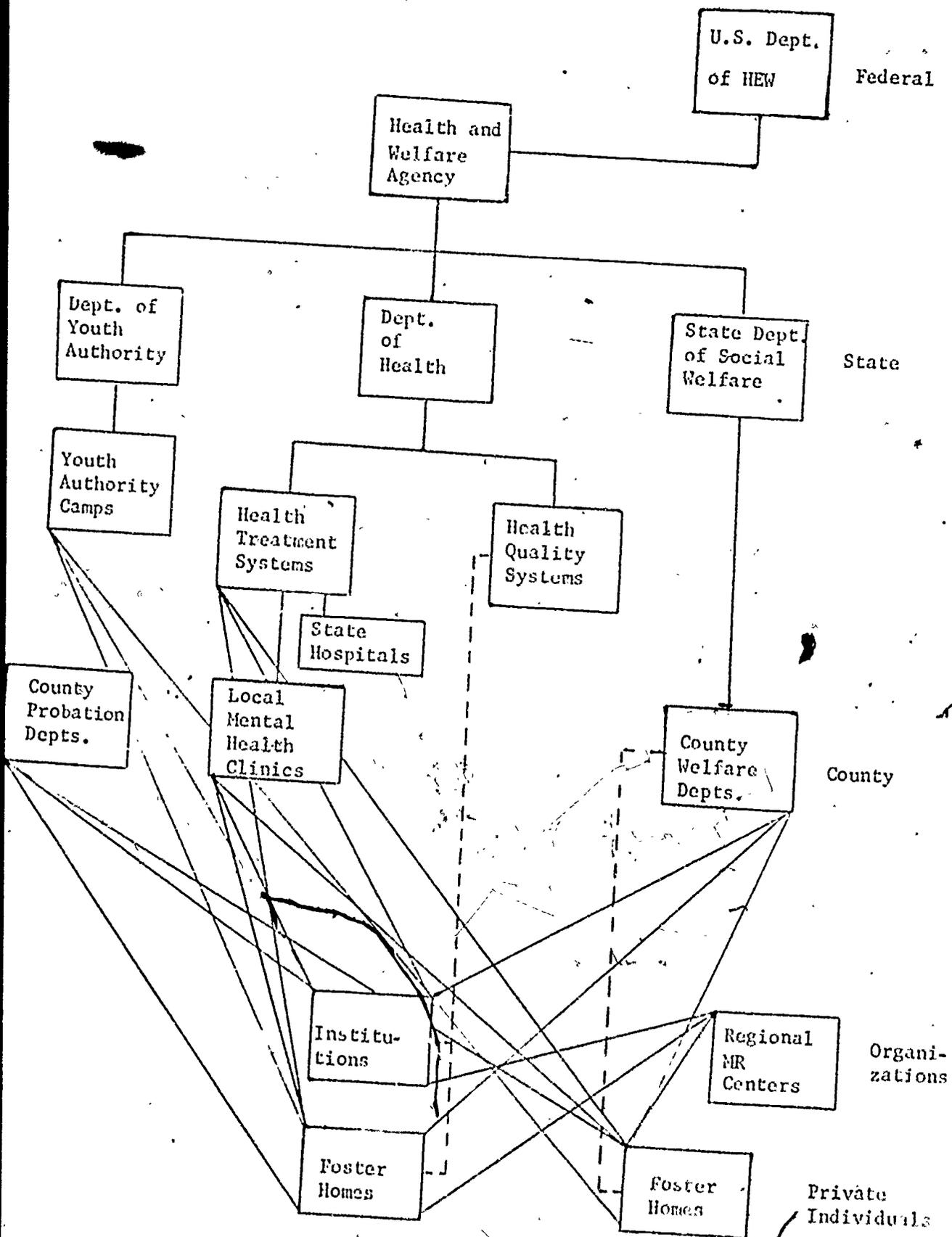


Chart by Auditor General's Office,
Report on Foster Care
No. 148.1 6-73 in California