Monterey County Family and Children's Services HHHHS Committee Report

INTRODUCTION

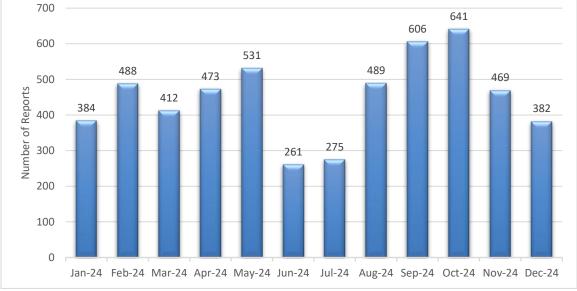
Monterey County Family and Children's Services (FCS) offers child protective services, foster care services, and adoption services to children and youth in Monterey County. The mission of FCS is to prevent the occurrence of child abuse and neglect. Service goals strive to keep children and youth safe and within the protection of a permanent family.

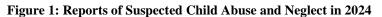
This report provides data from 2024 and a status update on the 2022 Corrective Action Plan with California Department of Social Services (CDSS).

REPORTS OF CHILD ABUSE & NEGLECT

I. Reports to the Hotline

A. In 2024, FCS received 5,411 reports of suspected child abuse or neglect in Monterey County, which is an average of 451 reports a month. Figure 1 shows the reports by month.





B. Since teachers, school counselors, and school personnel make the most calls to the child abuse hotline, FCS typically experiences an increase in reports right before summer and winter breaks and a decrease while children are not in school.

Source: Safe Measures version 5.2.1

II. Response Determination

A. As can be seen in Figure 2, the majority (59%) of reports received by the child abuse hotline in 2024 did not require further investigation (i.e. evaluated out).

Response Priority Rates	Count	%
Immediate	797	14.7%
Within 3 Days	0	0.0%
Within 5 Days	0	0.0%
Within 10 Days	1,333	24.6%
Evaluate Out	3,190	59.0%
N/A Secondary	0	0.0%
Not Determined	91	1.7%
Total	5,411	100%

Figure 2: Intake Response	e Determinations in 2024
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Source: Safe Measures version 5.2.1

B. Even though 59% of the reports received from the community did not require an in-person investigation (either immediate or within 10 days), social workers spend a minimum of 60 minutes taking the report, completing assessments, and documenting all information in the CWS/CMS case management system. This means that staff in the Intake Unit are spending the majority of their time on calls that do not meet the threshold of abuse or neglect, as defined by the California Penal Codes.

III. Allegation Type

A. As can be seen in Figure 3, the majority of referrals investigated are for allegations of neglect.

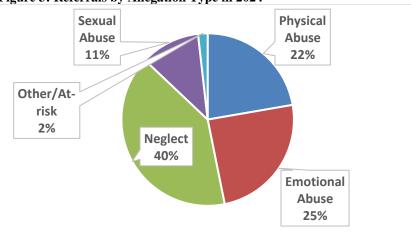


Figure 3: Referrals by Allegation Type in 2024

Source: Safe Measures version 5.2.1

MANDATED REPORTER TRAINING

FCS, in collaboration with the Child Abuse Prevention Council (CAPC), has been hosting in-person Mandated Reporter trainings in Monterey County. Overall, the trainings have been well attended by community partners and has good participation. Registration for upcoming Mandated Reporter trainings as well as additional resources can be found on the CAPC website by clicking on the following link:

Mandated Reporter Training - Monterey County Child Abuse Prevention Council

INTAKE AND EMERGENCY RESPONSE UNITS

I. Training and Support for Intake

On February 20, 2025, FCS mapped out the Intake Unit processes and procedures, and management will be working on updating the Intake Unit manual. Once the Intake manual has been finalized, additional training will be provided to the Intake Unit staff, as needed. This work will be done in collaboration with the local Service Employees International Union (SEIU) chapter, regional training academy, and FCS management team.

II. Time to Investigation - Includes attempts

In 2024, 79.2% of referrals were investigated timely (Figure 4) in Monterey County. This measure includes both attempted contacts with the family and completed contacts. The state goal is 90% compliance.

Investigation Timeliness	Count	%
Investigation Timely	1,686	79.2%
Investigation Not Timely	444	20.8%
Pending Investigation	0	0.0%
Total	2,130	100%

Figure 4: Referrals by Time to Investigation - 2024

Source: Safe Measures version 5.2.1

III. Emergency Response Manual

In 2025, FCS will start mapping the Emergency Response Unit processes and procedures in order to finalize the ER Unit manual. Once the manual is finalized, additional training will be provided to ER staff, as needed. This work will be done in collaboration with the local SEIU chapter, regional training academy, and FCS management team.

PREVENTION EFFORTS

- I. Prevention Efforts
 - A. In 2024, FCS held 193 Pre-Custodial Child and Family Team (CFT) meetings to bring families together and make decisions around keeping children safe without placing them in

foster care. As can be seen in Figure 8, FCS was able to create alternative plans to foster care with families 65.52% of the time.

Meeting type?	Was the meeting cancelled?	Pre-Custodial CFT	Meeting Count	Percentage:
Pre-Custodial	No	Child remains with parent (safety plan)	32	18.39%
Pre-Custodial	No	Court	60	34.48%
Pre-Custodial	No	Legal Guardianship	20	11.49%
Pre-Custodial	No	Other	5	2.87%
Pre-Custodial	No	VFM	56	32.18%
Pre-Custodial	No	VFR	1	0.57%
			174	
			Percentage:	100.00%

Figure 8: Pre-Custodial CFT Meetings - 2024

Source: Social Solutions - Efforts to Outcomes

B. In 2024, there were 112 children who were at risk of entering foster care due to abuse or neglect; however, their parents were offered voluntary services to prevent placement in foster care. As can be seen in Figure 9, 111 children were able to safely remain with their parent(s) while they received time-limited voluntary family maintenance services, and one child was voluntarily placed in out-of-home care while the parent received voluntary family reunification services.

Figure 9.	Family	Stabilization	Cases O	pen, June 2024
rigure 7.	гашпу	Stabilization	Cases U	pen, june 2024

Count	% 0.0%
0	
111	99.1%
1	0.9%
0	0.0%
0	0.0%
112	100%
	0 111 1 0 0

Source: Safe Measures version 5.2.1

CORRECTIVE ACTION PLAN (CAP) UPDATE

In response to a State onsite visit, FCS entered into a CAP with the CDSS in December 2022. FCS worked diligently to complete the tasks outlined in the CAP and implement sustainable practice change. Effective January 21, 2025, the CAP was officially closed by CDSS. The following requirements were completed:

- A. Record Remediation
 - 1. Ensure proper documentation and evaluation of Suspected Child Abuse Reports (SCARs) from the Mandated Reporter inbox.
 - a. Cease the alteration/deletion of records noted in the 2022 On-Site Finding Report. The emails in the Mandated Reporter inbox should

not be deleted until they are accurately and completely documented in CWS/CMS, and only after the program manager has verified that they have been properly documented.

✓ COMPLETE

b. Correct the records that have already been altered or with the incorrect date of receipt of the SCAR

✓ COMPLETE

c. Reviewing and reassessing all the intake inbox SCARs to ensure appropriate responses are determined and then treating those responses as if the immediate or 10-day response were reported the day of the review. In other words, if a SCAR reported in 2021 needed an immediate response, then an ER worker should go out and investigate it immediately now. If it would have warranted a 10-day response, then there must be an in-person contact within ten days of the review/reassessment.

✓ COMPLETE

- B. Record Maintenance and Retention
 - 1. Develop internal retention policy.

✓ COMPLETE

2. Develop processes for social workers to upload/import documents to CWS/CMS.

✓ COMPLETE

C. Intake and Screening

- 1. Better integrate Structured Decision Making (SDM) into FCS policies and procedures.
 - ✓ Revise FCS Policies and Procedures

✓ COMPLETE

✓ Distribute the revised FCS Handbook chapters and accompanying Practice Guide to all social work staff

✓ COMPLETE

2. Development of updated policies and procedures for the Intake units.

✓ COMPLETE

3. Development of a rotation schedule for Hotline staff to ensure that calls that come into the Hotline are answered.

✓ COMPLETE

- 4. Development of regular supervision meetings with all Intake social workers.
 ✓ COMPLETE
- 5. Modify processes of how SCARs are submitted, reviewed, and assigned timely.
 - a. Update FCS website with Mandated Reporter FAQ hyperlink ✓ COMPLETE
 - b. Peer to Peer SCAR Collaboration

✓ COMPLETE

c. Collaborate/build relationships with law enforcement, schools, and county hospitals.

✓ COMPLETE

6. Develop processes for timely closures of intake referrals – evaluate outs.

✓ COMPLETE

D. Emergency Response and Investigations

- 1. Development of updated policies and procedures for the ER units.
 - a. Part I

✓ COMPLETE

- b. Part II
 - ✓ COMPLETE
- 2. Develop processes for timely closures of ER referrals.
 - a. Develop the process

✓ COMPLETE

b. Close out all ER referrals

✓ COMPLETE

- Develop processes for thorough investigations and documentation.
 ✓ COMPLETE
- 4. Modify processes and ensure regular supervision between supervisors and social workers.
 - ✓ COMPLETE
- 5. Develop processes for reassigning/distributing caseloads for social workers on a leave of absence or no longer employed at FCS.

✓ COMPLETE

- E. Practice and Intervention
 - 1. Safety plans

✓ COMPLETE

- 2. The Child and Adolescent Needs and Strengths (CANS) assessment tool.
 ✓ COMPLETE
- F. Indian Child Welfare Act (ICWA)
 - 1. Develop processes for ICWA practices from intake to adoption, consistent with Division 31 regulations and the ICWA Desk Reference Guide.

✓ COMPLETE

- G. Training
 - 1. Training for all staff, including management, on the penal code requirements for SCARs and the CDSS's MPP intake requirements.

✓ COMPLETE

2. Establishing a regular schedule of trainings for all intake and ER staff as refreshers and for any updates to the laws or regulations.

✓ COMPLETE

3. Clarify, train staff, and monitor standards for the evaluating out of referrals such that the decision to evaluate out a referral conforms to the SDM Policy and Procedures Manal (30 days).

✓ COMPLETE

4. Safe Measures training for all staff (director, program managers, supervisors, and social workers).

✓ COMPLETE

SYSTEM IMPROVEMENT PLAN

On February 21, 2025, Monterey County's System Improvement Plan was approved by the CDSS. The overarching program activities we will be focused on over the next five

years if approved will be: Updating our Visitation Structure, Timeliness to Permanency, and Timeliness to respond. In addition, we will be monitoring family finding and engagement, which will include reporting on relative and near-kin placements when children first come into care.