# Monterey County Family and Children's Services HHHS Committee Report June 2024 Data

# 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 an update on FCS outcomes and Corrective Action Plan. The data is current as of July 1, 2024.

### **INTAKE**

### I. Data

A. Figure 1 shows the monthly reports of suspected child abuse or neglect received in Monterey County since January 2024. 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.

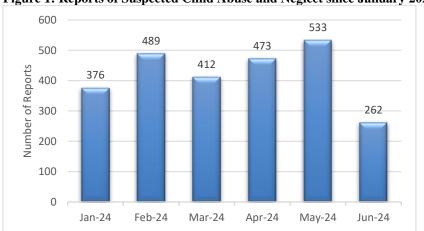


Figure 1: Reports of Suspected Child Abuse and Neglect since January 2024

Source: Safe Measures version 5.2.1

B. In the first six months of 2024, Monterey County received 2,552 reports of suspected child abuse or neglect. This is an average of 424 reports a month. Once any call is made to the hotline, a social worker spends a minimum of 60 minutes taking the report, reviewing information, and inputting the call into the required CWS/CMS system, and even more time is needed to promote the case for further investigation and assessment. Figure 2 displays the response priority for those referrals. The majority of reports received by FCS are allegations of neglect (51%), and the majority of reports received do not meet the threshold for an in-person

investigation (56.6%). Although 1,489 calls did not meet the threshold for in-person investigation or response, each call does require objective screening and computer input. The remaining 1,062 (41.6%) calls into the hotline require an in-person investigation to include collateral contacts, narrative, and assessment tools. This remains a detailed and intense process. Continuous review of the data shows that Intake staff are spending the majority of their time on calls that do not meet threshold for investigation, yet still require significant work and response. These families may need help but are not families who require Child Protective Services (CPS) intervention. FCS and the Child Abuse Prevention Council continue to work collaboratively on educating mandated reporters in Monterey County on child abuse reporting guidelines and when to call. Further, there is a strong identified need to create and educate our mandated reporters on community pathways to services. The outcome of which will get families to connect to what supports they need and in turn, prevent high volumes of general neglect calls that do not meet the threshold of investigation and tie up social worker time on all required tools and documentation of families in need of supports, not a child abuse investigation.

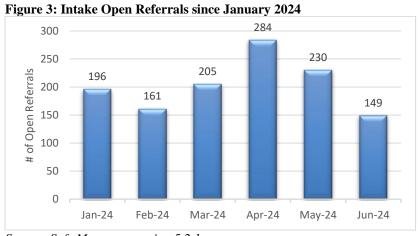
Response Priority Rates Count % Immediate 390 15.3% Within 3 Days 0 0.0% Within 5 Days 0 0.0% Within 10 Days 672 26.3% Evaluate Out 1,444 56.6% N/A Secondary 0 0.0% Not Determined 46 1.8% Total 2,552 100%

Figure 2: Intake Response Determinations since January 2024

Source: Safe Measures version 5.2.1

# II. Open Referrals

As of July 1, 2024, there were 149 open referrals in the Intake Units.



# III. Updates

- A. The majority of the open referrals in the Intake Units are referrals that have been evaluated out (no investigation needed) and are pending closure.
- B. Barriers to closing evaluated out referrals timely include documentation of notes in CWS/CMS and conducting quality assurance for each referral.
- C. FCS receives assistance from two retired social worker supervisors to help close out referrals that have been evaluated out.

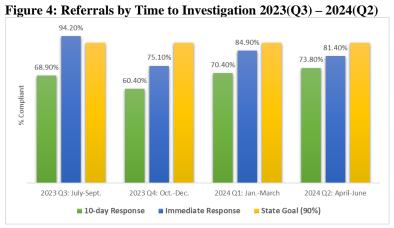
### **EMERGENCY RESPONSE**

### I. Data

A. AB636 Measure 2B: Referrals by Time to Investigation

This is the state measure of timeliness to investigation for referrals that required either an immediate or 10-day response. This means that either an in-person contact was completed or attempted within the required timeframe. Figure 4 shows timeliness to investigation each quarter of the past year. The state goal is 90% compliance. In the past year, Monterey County has averaged 68.38% compliance for 10-day referrals and 83.9% compliance for immediate referrals.

When reviewing the 10-day referrals in the second quarter of 2024 that were not investigated timely, 61 out of 90 referrals (68%) are missing documentation. When reviewing the immediate referrals that were not investigated timely, 36 out of 38 referrals (95%) are missing documentation. This means that FCS could be meeting the state compliance; however, it is unknown when documentation is missing. Missing documentation can have significant impacts on both data accuracy and increased workload in the ER Units. For example, when investigations are not documented timely, and a social worker leaves the agency, this can create a backlog of referrals in the ER Unit that social workers have to re-investigate. Over the years, as ER staff have continuously prioritized responding to allegations of abuse and neglect over documentation, the backlog of referrals has continued to grow. Currently, FCS is making diligent efforts to ensure timely documentation and closure of current referrals while continuing to address the backlog of referrals. Further strategies for addressing timely documentation are provided in section C titled "Updates."



B. State Measure 2D: Time to First Completed Referral Contact (Quarterly) This is the state measure of contacts that were completed timely for immediate or 10day response during the selected quarter. Figure 5 shows that Monterey County averages a 43.7% timely contact rate for referrals received since July 2023. The state goal is 90%.

When reviewing the referrals in the second quarter of 2024 that do not have timely contacts, only 68 out of 305 referrals have documented contacts. When 78% of the referrals are missing documentation, it is not possible to determine if contacts were timely and, furthermore, implement strategies that could improve timely contacts with families. Therefore, FCS is actively providing tools and guidance to staff to ensure timely documentation of all investigations, which are provided in section C titled "Updates."

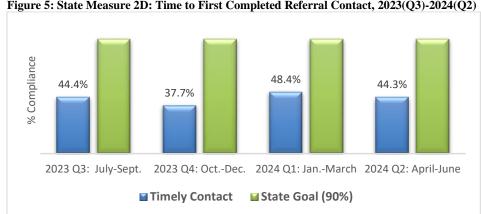


Figure 5: State Measure 2D: Time to First Completed Referral Contact, 2023(Q3)-2024(Q2)

Source: Safe Measures version 5.2.1

# C. Updates

- 1. The data shows that the majority of the non-compliant referrals are missing documentation. This means that even when contacts are made timely, the referral is still not compliant when documentation is missing.
- 2. In an effort to increase timely documentation and timely referral closure, FCS has implemented the following:
  - a. Templates for contact notes are now required effective May 1, 2024.
  - b. Mandatory for staff to input notes within 96 hours of contact with the family.
  - c. Protected time from 8am to 10am every morning to complete documentation.
  - d. Provide minimum of bi-weekly supervision to staff who are unable to close out referrals timely.
  - e. Supervision tool required for consistent supervision and referral tracking.

# II. Caseloads

# A. Assignments

Since January 2024, there have been 1,062 referrals assigned to the ER Units for an in-person investigation, and 390 (37%) of those referrals required an immediate

response. Figure 6 shows referrals assigned to social workers in the ER Units since January 2024.

240 205 195 200 157 151 150 113 100 50 0 Jan-24 Feb-24 May-24 Jun-24 ■ Immediate Response ■ 10-day

Figure 6: ER Referral Assignments since January 2024

Source: Safe Measures version 5.2.1

# B. Open ER Referrals

As of July 1, 2024, there were 883 open referrals that require an in-person investigation, as can be seen in Figure 7. Since December 2023, the number of referrals open longer than 30 days has decreased by 4%. Efforts to address the backlog of referrals are provided in section IV titled "Updates."

Figure 7: Investigation Time for Open Referrals, July 2024

Days Open	Count	%
0 to 7 Days	34	3.9%
8 to 14 Days	27	3.1%
15 to 30 Days	57	6.5%
31 to 45 Days	77	8.7%
46 to 60 Days	90	10.2%
More than 60 Days	598	67.7%
Total	883	100%

Source: Safe Measures version 5.2.1

# C. Open Referrals Over Time

Figure 8 shows the total number of referrals in both Intake and Emergency Response Units on the last day of each month since January 2024. In September 2022, there were 1,968 open referrals in FCS. This means that in less than two years, FCS staff has decreased the number of open referrals by 47%. Efforts to process currently referrals timely while still addressing the backlog of referrals is provided in section IV titled "Updates."



Figure 8: Open Referrals since January 2024

Source: Safe Measures version 5.2.

# IV. Updates

- A. FCS implemented the following strategies to improve timeliness to referral closures in the ER Units:
  - a. Teams that will only take 10-day referrals and teams that will only take immediate response referrals.
  - b. ER Supervisor of the Day is assigned referrals on days when referral assignments are high.
  - c. Standby staff are closing the referrals that they receive during their standby shift.
- B. FCS has implemented the following strategies to close out referrals that have been open longer than the 30-day requirements:
  - a. Social workers in ongoing units are investigating 10-day referrals and closing out referrals that have been open longer than 30 days.
  - b. Supervisors in the ongoing units are helping close referrals.
  - c. Social workers in the Induction/Training Unit are assigned referrals that have been open longer than 30 days, and they receive one-on-one coaching on investigating and closing out referrals.
  - d. Two retired social work supervisors are helping close referrals.
  - e. A social worker in the Resource Family Approval Unit is assisting with closing 10-day referrals.

# **STANDBY**

### I. Data

A. As can be seen in Figure 9, there has been an average of 9 social workers and 8 supervisors who have volunteered to work standby each month since January 2024.

Jan-24 Feb-24 Mar-24 Apr-24 May-24 Jun-24

Social Workers Supervisors

Figure 9: Social Workers and Supervisors on Standby since January 2024

B. In June 2024, standby social workers received 161 calls during non-business hours.

# **FAMILY STABILIZATION**

# I. Data

A. In June 2024, there were 63 cases open in the Family Stabilization Unit. Figure 10 displays the amount of time elapsed since the cases opened.

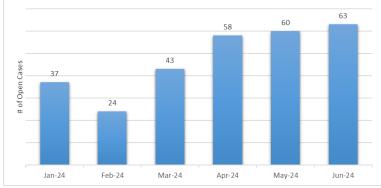
Time Open Count % Under 3 Months 15 23.8% 3 to 6 Months 40 63.5% 6 to 9 Months 12.7% 9 to 12 Months 0.0% 12 to 18 Months 0.0% 18 Months or More 0.0% 63 100%

Figure 10: Family Stabilization Cases Open, June 2024

Source: Safe Measures version 5.2.1

# B. Open Cases

Figure 11: Family Stabilization Cases Open since January 2024



# II. Updates

- A. Cases in the Family Stabilization Unit have been increasing significantly this year in an effort to prevent removal of children from their families.
- B. The Family Stabilization Unit is in the process of implementing Continuous Quality Improvement strategies to address gaps and case closures.

# RESOURCE FAMILY APPROVAL

### I. Data

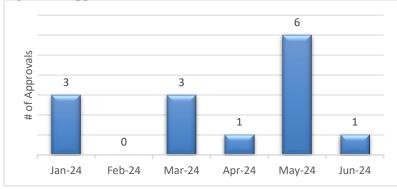
A. In January 2024, FCS approved three new resource family home. FCS has 166 active resource family homes, which are broken down as follows.

Type of Home	#
Community (unmatched)	88
Relatives/Near-kin (matched)	78
<b>Total Active RFA Homes</b>	166

Source: Binti version 55db4f0

B. Figure 12 shows total resource family approvals since January 2024.

Figure 12: Approvals



Source: Binti version 55db4f0

# II. Updates

- A. Staff in the RFA and Placement Units have been attending various events in Monterey County in an effort to inform the community of FCS services and recruit community members to become resource parents or certified respite care providers.
- B. FCS received significant interest from community members at the follow events this year:
  - 1. Community Resource Fair in Seaside
  - 2. Monterey Peninsula Pride

# PLACEMENT UNIT

### I. Data

A. In June 2024, Monterey County had 195 children in out-of-home care. As reflected in Figure 13, 16.9% of children were placed in a relative or near-kin resource family home; however, this includes non-related legal guardianship cases established by probate court and non-minor dependents. When only accounting for the Monterey County children in foster care, 23% are living with relatives.

Since the implementation of Pre-Custodial Child and Family Team meetings, FCS has been able to successfully develop alternative plans with families that prevent children from entering foster care. These plans include relatives providing support to the family, parents choosing legal guardianships with relatives, and safety planning. When family members are engaged at the beginning of a case, many times this can prevent a child from entering foster care. Though this is a huge success, this also mean that children who are entering foster care in Monterey County usually do not have relatives or near-kin who are involved, which means the majority of children who enter foster care placed in RFA homes. In addition, the majority of youth entering foster care are currently teenagers whose relatives have been providing support or alternative care but are no longer willing to continue to provide this support to the family. Furthermore, the data shows that relatives are less likely to accept placement of teenagers in their homes.

In order to address the issue of family engagement at the beginning of a case, FCS implemented 30 Days to Family® in April 2024 to provide intensive family finding for the first 30 days that a child enters foster care. In addition, FCS implemented a Family Finding and Engagement policy to promote a kin-first culture in Monterey County. Relative placement data will continue to be tracked in order to monitor the outcomes from these efforts.

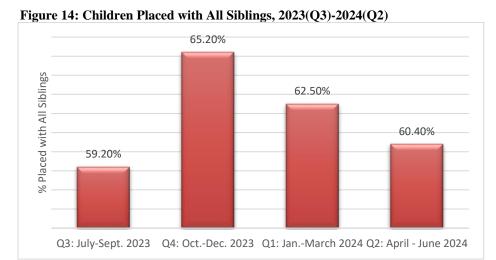
Placement Facility Type Count % Foster Family Home 0.0% Group Home 2.6% RFA - Relative/NRFFM Home 33 16 9% RFA - Resource Home 80 41.0% Foster Family Agency 24 12.3% Supervised Independent Living 14 7.2% Guardian Home - Non-Dependent 35 17.9% Guardian Home - Dependent 0.0% Other 2.1% 195 100% Total

Figure 13: Placements by Facility Type, June 2024

Source: Safe Measures version 5.2.1

# B. AB 636 Measure 4A: Placement with Siblings

This state measure shows the proportion of children who were in a placement setting with all or some siblings. Figure 14 displays data since July 2023 for children who were placed with all of their siblings.



C. In June 2024, 62.5% of foster children with siblings were placed with all of their siblings as can be seen in Figure 15.

Figure 15: Siblings Placed Together, June 2024

Placement Type	Count	%
Placed with All Sibs	60	62.5%
Placed With Some Sibs	8	8.3%
Not Placed With Any Sibs	28	29.2%
Total	96	100%

Source: Safe Measures version 5.2.1

D. In June 2024, 52.5% of foster children in Monterey County had experienced only one placement.

Figure 16: Placement Episodes, June 2024

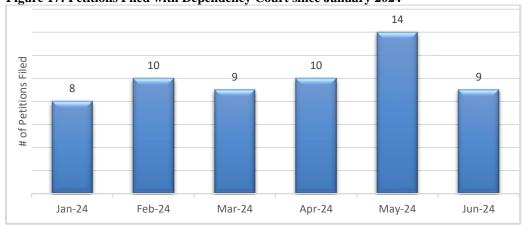
Placement(s) In Episode	Count	%
One Placement	106	52.5%
Two Placements	34	16.8%
Three to Five Placements	31	15.3%
Six or More Placements	24	11.9%
Missing Placement Count	7	3.5%
Total	202	100%

# **COURT**

### I. Data

A. Since January 2024, there have been an average of 10 petitions filed per month with Dependency Court. Figure 17 shows the number of petitions that have been filed each month.

Figure 17: Petitions Filed with Dependency Court since January 2024



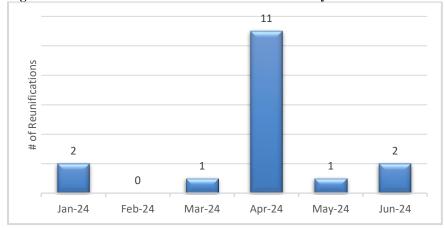
Source: Safe Measures version 5.2.1

# FAMILY REUNIFICATION AND FAMILY MAINTENANCE

### I. Data

A. As can be seen in Figure 18, there have been 17 children who reunified with their parent(s) since January 2024.

Figure 18: Number of Children Reunified since January 2024



Source: Safe Measures version 5.2.1

B. As can be seen in Figure 19, there were 64 open family reunification cases in June 2024.

Figure 19: FR Open Cases, June 2024

Time Open	Count	%
Under 3 Months	8	12.5%
3 to 6 Months	22	34.4%
6 to 9 Months	13	20.3%
9 to 12 Months	6	9.4%
12 to 18 Months	14	21.9%
18 Months or More	1	1.6%
Total	64	100%

C. As can be seen in Figure 20, there were 30 court family maintenance cases open in June 2024.

Figure 20: Court-ordered Family Maintenance Open Cases, June 2024

Time Open	Count	%
Under 3 Months	4	13.3%
3 to 6 Months	0	0.0%
6 to 9 Months	4	13.3%
9 to 12 Months	5	16.7%
12 to 18 Months	2	6.7%
18 Months or More	15	50.0%
Total	30	100%

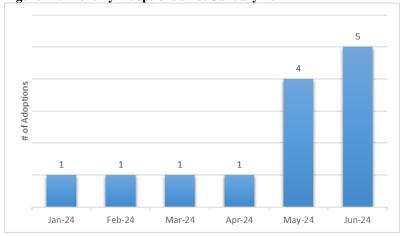
Source: Safe Measures version 5.2.1

# **ADOPTIONS**

# I. Data

A. As can be seen in Figure 21, there have been 13 children adopted since January 2024

Figure 21: Monthly Adoptions since January 2024



- B. Since January 2024, there have been three legal guardianships established by the Dependency Court.
- C. Figure 22 shows that there were 43 open adoptions cases in the Adoption Unit in June 2024.

Figure 22: Open Adoptions Cases, June 2024

Under 3 Months 3 to 6 Months 6 to 9 Months	2 2 2	4.7% 4.7% 4.7%
6 to 9 Months		
	2	4.7%
9 to 12 Months	4	9.3%
12 to 18 Months	6	14.0%
18 Months or More	27	62.8%
Total	43	100%

D. In June 2024, there were 35 open non-related legal guardianship cases as can be seen in Figure 23.

Figure 23: Open Non-Related Legal Guardianship Cases, June 2024

Time Open	Count	%
Under 3 Months	0	0.0%
3 to 6 Months	0	0.0%
6 to 9 Months	0	0.0%
9 to 12 Months	1	2.9%
12 to 18 Months	4	11.4%
18 Months or More	30	85.7%
Total	35	100%

Source: Safe Measures version 5.2.1

# PERMANENCY PLANNING (PP)

- I Data
  - A. In June 2024, there were 29 open foster care cases in the PP Unit, as can be seen in Figure 24.

Figure 24: Open Foster Care Cases in the PP Unit, June 2024

Time Open	Count	%
Under 3 Months	0	0.0%
3 to 6 Months	1	3.4%
6 to 9 Months	0	0.0%
9 to 12 Months	0	0.0%
12 to 18 Months	4	13.8%
18 Months or More	24	82.8%
Total	29	100%

B. In June 2024, there were 29 open extended foster care cases for young adults 18 to 21 years old in the PP unit as can be seen in Figure 25.

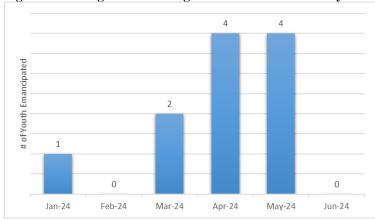
Figure 25: Open Extended Foster Care Cases in the PP Unit, June 2024

Time Open	Count	%
Under 3 Months	0	0.0%
3 to 6 Months	0	0.0%
6 to 9 Months	0	0.0%
9 to 12 Months	2	6.9%
12 to 18 Months	0	0.0%
18 Months or More	27	93.1%
Total	29	100%

Source: Safe Measures version 5.2.1

C. Since January 2024, there have been 11 young adults who have emancipated from foster care, as can be seen in Figure 26. Three emancipations were for young adults who reached the age limit at 21 years old; four emancipations were for young adults who exited extended foster care prior to 21; and four emancipations were youth who did not want to participate after turning 18 years old.

Figure 26: Young Adults Exiting Foster Care since January 2024



# **CFSR MEASURES**

I. **CFSR Measure P1: Permanency in 12 Months for Children Entering Care** is a state measure of all children who entered foster care in the selected 12-month period and calculates the percent who achieved permanency within 12 months of their removal. This measure presented in Figure 27 is for children who entered foster care between July 1, 2022 and June 30, 2023.

51% of the referrals received by FCS are for general neglect, and the majority of these referrals involve one or more parent who has a substance use disorder. As research shows, recovery is a lifelong process that includes periods of relapse and ongoing work that cannot be limited to a 12-month time period. In addition, many of these parents also have co-occurring challenges that may include mental health disorders, domestic violence, childhood trauma, and unstable housing. These are not challenges that can be resolved quickly, but rather take time.

Social workers in the Family Reunification Units understand the time that it takes parents to address their substance abuse disorders and other co-occurring challenges, so they give parents the time they need to achieve a successful reunification. Out of the 48 children who did not achieve permanency within 12 months in Figure 27, family reunification was only terminated for one. This means that FCS social workers are working diligently to provide parents the services they need to reunify despite the national goal. These efforts are proven to be successful as outlined in the re-entry rates in Figure 30.

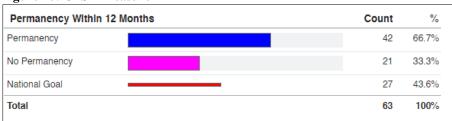
Figure 27: CFSR Measure P1

Permanency Within 12 Months	Count	%
Permanency	9	15.8%
No Permanency	48	84.2%
National Goal	23	40.5%
Total	57	100%

Source: Safe Measures version 5.2.1

II. **CFSR Measure P2: Permanency in 12 Months for Children Entering Care** is a measure of all children who have been in foster care for 12-23 months and achieve permanency. The measure presented in Figure 28 is for children who have been in foster care for 12-23 months since July 1, 2023.

Figure 28: CFSR Measure P2



III. CDSS CFSR Measure P3: Permanency in 12 Months for Children in Foster Care 24 Months or More is a measure of all children who have been in foster care for 24 months or more on the first day of the selected 12-month period and determines what percent were discharged to permanency within 12 months of the start of the period. The measure presented in Figure 29 include children who have bene in foster care for 24 months or more since July 1, 2023.

Figure 29: CFSR Measure P3

Permanency Within 12 Months	Count	%
Permanency	7	25.0%
No Permanency	21	75.0%
National Goal	8	30.3%
Total	28	100%

Source: Safe Measures version 5.2.1

IV. **CFSR Measure P4: Reentry to Foster Care** is a measure that looks at the number of children who entered foster care in the selected 12-month period, were discharged to reunification or guardianship within 12 months, and reentered foster care within 12 months of their discharge date. Figure 30 includes children who entered foster care between July 1, 2021 and June 30, 2022.

Figure 30: CFSR Measure P4

Count	%
9	100.0%
0	0.0%
1	8.3%
9	100%
	0

Source: Safe Measures version 5.2.1

V. **CFSR Measure S2: Recurrence of Maltreatment** measures recurrence of maltreatment within 12 months of substantiations that occurred between July 1, 2022 and June 30, 2023 as shown in Figure 31.

Figure 31: CFSR Measure S2



Source: Safe Measures version 5.2.1

# VI. Updates

- A. FCS is approaching a new California Child and Family Services Review (C-CFSR) cycle and has submitted the County Self-Assessment to the California Department of Social Services (CDSS) for approval.
- B. FCS is currently in the process of developing the 5-year System Improvement Plan (SIP) to improve child welfare outcomes in Monterey County.

### CORRECTIVE ACTION PLAN UPDATE

In response to a State onsite visit, FCS entered into a CAP with the CDSS in December 2022.

- I. The CAP was finalized with the CDSS– Children's Services Operations Bureau and is comprised of 7 sections and the required revisions:
  - 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 manger 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 SW's to upload/import documents to CWS/CMS.

# **✓ COMPLETE**

- C. Intake and Screening
  - 1. Better integrate Structured Decision Making (SDM) into FCS policies and procedures.
    - a. Revise FCS Policies and Procedures

# ✓ COMPLETE

b. 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.
  - a. Due October 31, 2024
- 4. Development of regular supervision meetings with all Intake social workers.

# a. **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.
  - a. Due November 30, 2024
- 6. Develop processes for timely closures of intake referrals evaluate outs.
  - a. Due November 30, 2024
- 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
  - i. Due November 30, 2024
- 3. 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.
  - a. Due November 30, 2024

- F. Indian Child Welfare Act (ICWA)
  - 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).
  - a. Due July 31, 2024

# II. Progress

- A. FCS has completed 21 out of 27 corrective actions.
- B. FCS has also began robust continuous quality improvement (CQI) efforts to ensure continued improvement around both practices and policies.
  - 1. FCS will also be incorporating CQI in the C-CFSR, specifically into the county's five-year SIP. This will ensure these efforts continue once the CAP has ended.
- C. When FCS entered into the CAP in December 2022, the agency had 27 social worker and social work supervisor vacancies. As of July 1, 2024, FCS now has only eight vacancies.

# **STAFFING**

- I. FCS currently has eight social worker and social work supervisor vacancies.
- II. Three Social Service Aide (SSA) positions have been filled in the ER Units. These SSA's play a crucial role in supporting ER social workers by providing administrative support to assist in the timely closure of referrals.
- III. During fiscal year 2023-2024, FCS staff completed 2,861 hours of training.
- IV. Since August 2023, FCS has been offering monthly resiliency groups for social workers and social work supervisors to address and support secondary trauma that many staff experience.