

SERVICES TO YOUTH AT RISK

A PRIORITY TO CHALLENGE THE PLIGHT OF YOUNG PEOPLE

JUNE 3, 2010

Summary

The 2009-2010 Grand Jury, (GJ), became concerned about the availability of services to at-risk youth in Mendocino County, (County). Most providers of youth services and programs in this County have been dependant on grants from outside sources, usually Federal and State grants. The current financial crisis has resulted in drastic cuts from Federal, State, and County funds, with more cuts on the way.

Despite the economic downturn and families experiencing difficulty, Child Protective Services, (CPS), reported no increase in the number of families requiring services. The number of children requiring foster care has declined; however, the needs of those children are more severe than in previous years.

Youth having problems with drugs and alcohol has accelerated, while the County services to assist them have diminished. Successful programs have been eliminated for lack of funding. Schools and non-profit agencies have attempted to fill in the gaps of needed services.

The GJ commends *First 5* for creating a coalition of funding sources for medical insurance for County children from birth to 19 years. Not all eligible families have applied for this service. Funding for these programs are at risk.

Method

The GJ interviewed County and non-profit agencies' administrative and line staff, reviewed program descriptions and financial documents, visited program sites, and attended community meetings.

Background

The GJ chose to look at non-profit agencies and other community resources for youth at risk. Most providers of youth services and programs in this County have been dependant on grants from outside sources, usually Federal and State. The current financial crisis has resulted in drastic funding cuts.

The GJ looked at agencies providing services for youth in foster care and those aging out of the system, youth in the court, penal systems, and services to those addicted to drugs and alcohol. The GJ noted that, "as a society we do not typically fund treatment and prevention programs at the same level as the

juvenile detention system. The effect of over-reliance on incarceration is to create a "cradle to prison pipeline," virtually guarantees that a young person convicted of a crime at an early age will return, over and over, to the criminal justice system.

This County has problems related to a culture that accepts drug use. There is a lack of social, recreational, and employment opportunities for young people. In addition to these issues are rural isolation, dysfunctional families, and homelessness. As the GJ continued to examine and monitor service providers and programs, the current financial crisis continues to decimate the safety network and services.

Findings

1. Many programs in the County are supported by combinations of funds from several sources including Medi-CAL, Federal and State agencies, and special education fund through Special Education Local Planning Area, (SELPA).
2. Multiple agencies utilize programs, making it difficult to determine who is responsible for management and oversight.
3. Child Protective Services, (CPS), investigates all reported instances of suspected child abuse or neglect. The agency is responsible to monitor the child's welfare until reunification or permanent placement is determined.
4. Children are removed by CPS for parental incarceration and/or neglect, abuse, substance abuse, or mental illness.
5. Placement with a family member or family friend is considered preferable to placement with a foster family, State agency, or group home. Foster care placements tend to be for young people with emotional, developmental disabilities, special needs, and children without a suitable family member for placement.
6. The County no longer licenses foster homes. Licensing is now the responsibility of the State.
7. Most foster homes in this County are supervised by three local non-profit agencies that provide other services to youth and ongoing training to foster parents.
8. The local agencies that serve foster children and youth of all ages are:
 - **True to Life Children's Services (TLC):** Provides a 14 bed Emergency Care shelter for children taken from their homes by CPS. TLC services include an initial 30 day assessment of the children.
 - **Redwood Children's Services (RCS):** In 2009, serving Lake and Mendocino Counties, RCS provided care for 50-70 children, between the ages of 8-12, with challenges that set them at risk of placement in a group home. RCS provides comprehensive mental health treatment, including after-school and summer programs, in-home and community-based support services, and foster family respite care. RCS also provides transitional

services for ages 18-24, as well as an intensive emergency shelter for significant behavioral problems.

- **Tapestry Family Services (TFS):** provides two levels of foster services: treatment foster care and intensive treatment foster care. TFS also provides comprehensive mental health treatment, after-school and summer programs, in-home and respite care.
 - **Mendocino County Children Center, (MC3),** is an emergency shelter with six beds for short term placement for children, aged 7-17, needing assessment or transitioning between foster care and group home placement.
9. Kinship placements are supervised by CPS case managers; as long as the case remains open.
 10. Foster parents receive a basic payment per month, per child. The amount of payment depends on the age of the child and the level of care.
 11. The Children and Family Systems of Care are utilizing AB163 Mental Health Services Act funds to provide “wraparound” for children with severe problems, and are at risk for level 10-14 group home placement.
 12. When foster children are adopted, the adoptive parents may receive payment for special care, without the child or family being monitored.
 13. When children adopted from foster care develop mental or behavioral problems, many are placed in group homes.
 14. Foster parents are currently required to be trained to work with children with emotional needs, developmental disabilities, or other special needs.
 15. The cost of sending children to group homes or special programs out of County is very expensive and all options to keep children close to home are considered first.
 16. Medical screening and care are currently available in the County, from birth to 19 years, through Medi-CAL, Children’s Health and Development Program, (CHDP), Healthy Families Program, and supplemental funds from *First 5* for Healthy Children Mendocino. Not all eligible families have applied for this service. Funding for these programs is at risk. Eligible families must apply immediately for this service or lose the opportunity.
 17. *First 5* is an agency that funds several programs for young children ages 0-5 years. These include improved parenting and child care techniques, programs for diagnosing potential problems and supporting early medical treatment.
 18. School Districts receive substance abuse prevention services from a variety of sources including: the County, non-profit agencies, State and Federal grants, and Asset Forfeiture funds.
 19. Joint educational programs are funded and staffed through agreements between the County Probation Department, Mendocino County Office of Education, (MCOE), and Mental Health.
 20. There are approximately 300 children currently in foster care in the County. Thirty percent funding for foster care programs comes from Aid to Families with Dependent Children, (AFDC). The remaining seventy percent is split

50/50 from State and Federal funding. In 2009, the State reduced its contribution by \$80 million statewide.

21. There has been a decline in numbers of children in foster care due to kinship placement. However, agencies are dealing with children having more severe problems and the focus has changed from basic care to providing support programs for youths requiring intensive treatment.
22. Foster care is terminated at age 18 unless the youth is still in high school and will graduate before age 19. When these youth age out of foster care, limited resources are available to them. Their needs include housing, education, medical care, employment opportunities and skills, and emotional/social support.
23. The following are joint services and agencies that MCOE, County social services and mental health services and non-profit agencies operate as partnerships:
 - **Transitional Housing Programs THP-Plus:** Programs for emancipated foster youth, aged 18-24, offering a two-year opportunity to learn independent living skills, find employment, and support for continuing education. This program is at risk of being defunded by the Governor.
 - **Transitional Housing Placement Program** provides placement in mentor homes for ages 16-18.
 - **TAY Wellness:** A partnership with County mental health services, which provides independent living skills. Their goals are to stabilize housing, increase employability, continue education, and provide access to community resources.
 - **Mendocino House:** An in-County group home created by inter-agency participation for youth with behavioral disorders. When entering the program, an individual transitional plan is developed for each youth. They are expected to graduate from the program within six to nine months.
 - **Arbor on Main Youth Resource Center:** A resource center where young people, aged 15-24, can access free services; including basic health education, medical referrals, sex education, resume writing, clothes for job interviews, computer access, opportunities for socialization and help in finding housing. The Governor is threatening to reduce this funding.
24. Services to teens with drug and alcohol problems were transferred to Mental Health Services, under the Children & Family Systems of Care. Services are limited to Medi-CAL recipients due to difficulty in billing. One counselor was available when the administrative staff was interviewed.
25. The County is required to return large sums of money (millions) to the State due to the 2004-2005 *Audit of Medical Costs Reports* finding errors in billing for mental health services. The County is appealing the audit finding.

26. County youth are particularly vulnerable to problems with drugs and alcohol. Sixty students at Ukiah High School were expelled this year for selling drugs on school premises. School authorities reported freshmen arriving at school under the influence of drugs.
27. Alcohol and drug treatment services are available on the Ukiah High School and Anderson Valley campuses through a contract with the Health and Human Services Agency.
28. “*Teen Peer Court*”, managed by Victim Offender Rehabilitation Program, (VORP), a court supervised program, allows teens to participate in the legal process, judge each other on behaviors, and determine appropriate consequences, is at risk of closing.
29. Services for youth with alcohol and drug problems are augmented by “set asides” from State and Federal grants. County general fund money goes into alcohol and drug programs for adults.
30. “*Juvenile Drug Court*”, a court-supervised program for rehabilitation of young people with drug and alcohol offenses, was suspended for lack of funding for a supervising Probation Officer.
31. The County Probation Department includes the following partnership programs:
 - Probation Alternative Counseling and Education, (PACE),
 - Juvenile Drug Court, (Cancelled),
 - Clean and Sober Classroom,
 - River School,
 - Juvenile Hall.
32. Youth in Juvenile Hall are not eligible for Medi-CAL services while they are incarcerated. The County becomes responsible for their medical care. If they were receiving mental health services from the County under Medi-CAL, the services are discontinued while they are in Juvenile Hall.
33. The *Mendocino County Youth Project* provides mental health, youth crisis intervention, and substance abuse treatment services to troubled youth and families; as well as mental health services at Juvenile Hall. They have received Federal funds to assist youth that have been abused, regardless of family income level.

Recommendations

The GJ recommends that:

1. Mendocino County Health and Human Services Agency continue to maximize programs for children and youth by maintaining partnership programs with County non-profit agencies. (Findings 1-2, 11, 14-19, 22-23, 28-30, 33)
2. given the declining resources available and the diminishing number of children in foster care, the three foster care agencies work collaboratively

- by having quarterly meetings, and to eliminate duplication of administrative services and costs. (Findings 2-3, 5, 7-8, 10, 14-15, 20-23)
3. all possible support be given by Mendocino County Health and Human Services Agency, Children and Family Systems of Care to in-County programs that diagnose and treat young children with mental health issues. It is imperative to continue to provide support for parenting programs that lead to family reunification. (Findings 4-5, 11, 14-16, 19, 22-24, 31)
 4. Mendocino County Health and Human Services Agency continue to pursue funding for alcohol and drug treatment programs for youth, and to contract with non-profits to provide counseling services. (Findings 18-19, 22-24, 26-27, 30-31, 33)
 5. the Probation Department/Courts reinstate Juvenile Drug Court and find funding for Teen Court, (VORP). (Findings 3, 18-19, 24, 26-29, 30-31)
 6. it is critical that County Mental Health Services staff improve record keeping and billing processes for Medi-CAL, to maximize revenues, and to learn how to bill insurance providers other than Medi-CAL. (Findings 1, 25, 32)

Discussion

The GJ was surprised to learn of the connections between County and private agencies serving youth. The web of services, utilized by multiple agencies, makes it difficult to determine the lead agency and who is accountable for problems that may arise. The GJ also noted duplication of services and potential inflated costs by the non-profit agencies. Instead of joining together in applying for limited funds, they often compete with one another.

The GJ is appalled at the continued loss of programs that have proven beneficial to helping young people. Proven programs to assist youth with personal difficulties are essential to improve their chances of living productive lives and staying out of the penal system. Early intervention is cost effective, saves money and resources in the long term.

The GJ is also concerned about the loss of follow-up on families that adopt children. When an adopted child develops mental or behavioral problems, they frequently end up in group homes. If families continue to accept governmental funds for treating children's special needs, they should be entitled to continued support and over-sight.

First 5 is an exemplary agency that minimizes administrative costs and utilizes its funds to provide programs for children, aged 0-5 years, and their parents. *First 5's* programs are utilized by County staff and non-profit agencies. The GJ was

impressed by the agency's long term financial and program planning. Other agencies could learn from their example.

Required Responses

Health and Human Services Agency (Findings 1-5, 9-12, 15-16, 18-25, 27-32; Recommendations 1, 3-6)

Children and Family Systems of Care (Findings 1-18, 20-30; Recommendations 1, 3-6)

Juvenile Probation (Findings 30-33; Recommendations 1, 3-5)

Requested Responses

True to Life Children's Services (Findings 8, 14, 16, 21; Recommendations 1-2)

Redwood Children's Services (Findings 1-2, 8, 13, 16-17, 20, 22-23; Recommendations 1-2)

Tapestry Family Services (Findings 1-2, 8, 10, 12, 14, 15-17, 20-23; Recommendations 1-2)

Mendocino County Office of Education (Findings 1-2, 18-19, 23; Recommendations 1, 3)

Mendocino Youth Project (Findings 1-2, 18-19, 23, 32-33; Recommendations 1, 3-4,)

First 5 (Findings 16-17; Recommendation 1)