

FIRST CALL FOR FAMILIES 2022-23 EVALUATION REPORT

Developed by Applied Survey Research in partnership with the Dependency Advocacy Center





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Executive Summary

The Dependency Advocacy Center (DAC) is a nonprofit organization that provides legal services to

economically disadvantaged parents in Santa Clara County's child welfare system who face the possibility of child removal due to allegations of abuse and neglect. Families often find themselves in this predicament due to experiencing symptoms of poverty, trauma, substance abuse, domestic violence, and mental health. DAC has implemented innovative programs to serve families in a more comprehensive manner by employing in-house social workers and mentor parents, offering legal support to secure their client's legal rights while simultaneously engaging the client to improve their circumstances for family safety and stability.

Dependency Advocacy Center's Mission

Dependency Advocacy Center provides zealous legal representation to indigent clients in the juvenile dependency system to promote timely reunification and preservation of families in a safe, healthy environment. DAC believes that every parent and child entering the dependency system has a right to be treated with dignity, compassion and respect.

First Call for Families is one of the innovative programs operated by DAC. The goal of First Call for Families is to prevent children from being removed from their families by child welfare and help families to avoid formal involvement with the child welfare court system. First Call for Families is made up of three essential components:

Know Your Rights Presentations

to provide critical information to families about their rights and responsibilities during a child welfare investigation.

Warm Line

to provide access to a toll-free phone number for families to receive some advice about how to navigate child welfare involvement and connect families to additional resources.

Individualized Support

to families who require more intensive support services, peer support, case management, and limited scope representation.

The First Call for Families team includes an **attorney** to provide limited legal assistance; a **social worker** to provide clinical support services including risk assessments, safety planning, and support during meetings with child welfare; and **mentor parents** to provide hope and support to families as they have experienced first-hand what is it like to be formally involved with child welfare and successfully reunified with their children.

Since September 2022, the Dependency Advocacy Center's First Call for Families program received funding in collaboration with the Santa Clara County Department of Family and Children Services. This



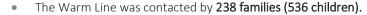
partnership aims to enhance communication and program outreach, addressing feedback from county social workers. The initiative, First Call for Families, assists at-risk parents in informed decision-making to promote family stability, decrease disparities in child welfare involvement, and prevent continued system engagement.

KEY FINDINGS FROM FISCAL YEAR 2022-23

Know your Rights Presentations

- First Call for Families held **13 Know Your Rights presentations reaching a total of 152 participants**. Of the 152 participants 104 were community members and the other 48 were from community-based organizations.
- Among community participants, **95% came from priority zip codes** (95111, 95112, 95122, 95127, 94303, 95070).
- Community members were referred to the Know Your Rights Presentations from Family Resource Centers (28%), community-based organizations (18%), the Warm Line (6%), self (5%), and the Department of Family and Children Services (2%).

Warm Line Support

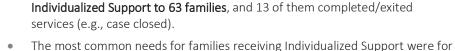


 Referrals to the Warm Line were most often (54%) from our partners at the Department of Family and Children Services.



- About **58% of callers needed help with custody** (including legal guardianship) when calling into the Warm Line.
- Of the 238 callers, 76 received limited counsel legal advice, 54 were referred to Individualized Support, and 48 were referred out either for external resources (26) or no further support was needed (22).

Individualized Support



Throughout the 2022-23 fiscal year, First Call for Families provided



- substance use (16%), housing (16%), and mental health (14%).

 Self-sufficiency was evaluated at intake and case close for 13 clients ¹ Clients
- Self-sufficiency was evaluated at intake and case close for 13 clients. Clients demonstrated increased self-sufficiency in each domain, and the largest increases were demonstrated for legal and housing self-sufficiency.
- There were fourteen outcomes cases identified for a DFCS outcomes lookup.
 Most of the families did not have any new contact with DFCS in the 6 months
 after exiting services (7 families, 17 children). Among the 5 families who
 experienced new contacts with DFCS, 2 of them (5 children) had a
 substantiated allegation and 2 had a filed petition.

¹ Self-sufficiency includes 9 domains: housing, employment, mobility, life skills, family relationships, community involvement, parenting skills, legal, and substance use. Domains are scored to identify families (1) in crisis, (2) vulnerable, (3) safe, (4) building capacity, or (5) thriving/empowered.



KEY PARTNER FEEDBACK

Community partners (CBOs) and DFCS staff provided feedback to First Call for Families to help improve the program as it moves forward. Both DFCS and CBOs were asked to participate in a focus group. However, due to scheduling conflicts CBOs completed a survey instead, while DFCS workers participated in a focus group. Both CBOs and DFCS workers shared similar sentiments about the program:

- Families who are ineligible need assistance too. Assisting families who are ineligible for the First Call services get the resources they need.
- First Call is addressing the needs of eligible families referred to the program. CBOs and DFCS workers believe the program is addressing the needs of families they refer to First Call.
- First Call is effective in **educating families** on their legal rights, **building confidence of those families** to be successful within the system, and **assisting ineligible families** to find another program that could assist them.

Still DFCS staff and CBO partners had additional feedback for First Call to help the program continue to be innovative and effective as it grows in its efforts to help the community. Some key feedback from DFCS staff includes:

- First Call for Families effectively supports families in child welfare: DFCS social workers and supervisors find confidence in the program's support for parents navigating legal aspects of child welfare cases. DFCS found the program to be valuable for first-time-court-impacted families and the program's support for Spanish-speaking families is essential.
- Strengthening First Call for Families and collaboration with DFCS: Suggestions include training for DFCS to clarify eligibility criteria or conflicts of interest, identifying appropriate strategies to assist families who are excluded due to eligibility, extending legal aid to relatives, and ensuring transparent communication channels with DFCS to prioritize child safety.
- Expanding program reach and awareness: Strategies for extending the program's influence include enhancing clarity for DFCS staff and increasing public awareness of the First Call for Families Warm Line.

CBO partners were asked the strengths of the First Call program and asked for any suggestions to improve the program. Organizational feedback included:

- Hold more presentations and include more visual aids (e.g., videos and case examples) and ask more questions of participants to ensure they understand their rights.
- Conduct inclusive presentations that are comprehensive for both fathers and mothers.
- Ensure participants understand the terms being used and present a wider scope of information during presentations.



Introduction

PROJECT BACKGROUND

Starting in September 2022, Dependency Advocacy Center's First Call for Families program was funded in partnership with the Department of Family and Children's Services in Santa Clara County. This partnership will help to address many of the critical pieces of feedback identified by DFCS social workers and supervisors to improve communication and program outreach. Dependency Advocacy Center provides zealous legal representation to indigent clients in the juvenile dependency system to promote timely reunification and preservation of families in a safe, healthy environment. DAC believes that every parent and child entering the dependency system has a right to be treated with dignity, compassion, and respect. Specifically, goals are to:

- Increase awareness and knowledge of legal rights associated with child welfare system involvement
- Increase stabilization and self-sufficiency of families who are at risk of becoming involved in the formal dependency court system.
- Reduce rates of <u>substantiated abuse and neglect referrals</u> for children whose families are receiving <u>individualized support</u> from FIRST CALL, up to 6 months post-services.
- Reduce rates of <u>sustained petitions</u> for children whose families are receiving *individualized* support from FIRST CALL, up to 6 months post-services.

First Call for Families is one of the innovative programs operated by DAC. The goal of First Call for Families is to prevent children from being removed from their families by child welfare and help families to avoid formal involvement with the child welfare court system. First Call for Families is made up of three essential components:

Know Your Rights Presentations

to provide critical information to families about their rights and responsibilities during a child welfare investigation.

Warm Line

to provide access to a toll-free phone number for families to receive some advice about how to navigate child welfare involvement and connect families to additional resources.

Individualized Support

to families who require more intensive support services, peer support, case management, and limited scope representation.

The First Call for Families team includes an **attorney** to provide limited legal assistance; a **social worker** to provide clinical support services including risk assessments, safety planning, and support during meetings



with child welfare; and **mentor parents** to provide hope and support to families as they have experienced first-hand what is it like to be formally involved with child welfare and successfully reunified with their children.

STRATEGIC FRAMEWORK

FIRST CALL will focus on reaching parents in the areas of the county with disproportionate allegation rates of child maltreatment. FIRST CALL has expanded the focus on priority zip codes in the last year and will include families living in zip codes 95111, 95112, 95127, 95116, 95020, 95122 who have been contacted by DFCS within the last 12 months or who are currently receiving informal supervision or voluntary family maintenance services.

The goal is to reduce the rate of petitions among such families by implementing a three-tiered approach:

- Creating a toll-free warm line to offer advice about how to navigate child welfare involvement and limited resource and referral information. Families can call in directly to the Warm Line or may be referred by a DFCS social worker, a Family Resource Center, or a community-based organization.
- 2. Delivering "Know Your Rights" **community presentations** to families to help them learn what rights and responsibilities they have during a DFCS investigation. Families may be referred from the Warm Line to participate in these presentations.
- Providing more intensive targeted case management and representation to parents/caregivers
 who require more individualized support, including ongoing case management, peer mentoring,
 and/or limited scope representation.

The flow chart depicts the typical entry points into the FIRST CALL model. Families may be referred to the **Warm Line**, who then refers them to the **Know Your Rights presentations**, or vice versa. From there, if families need additional support, they will be referred for **Individualized Support**.

Family Resource Center Referral Community-based Organization Referral Self-Referral Know Your Rights Presentations Individualized Support

Referral and Support Services Flow Chart

Dependency Advocacy Center partnered with Applied Survey Research (ASR) to conduct an evaluation of the program in fiscal year 2023. The evaluation team developed data collection tools and **data dashboards to measure implementation and outcomes**. The list below shows the various data collection tools/processes:



DATA COLLECTION TOOLS

| Know Your Rights Activity Log | Populated by First Call for Families staff with aggregate data collected to describe participant demographics. |
|-------------------------------|--|
| Know Your Rights Surveys | Responses collected for two surveys: Know Your Rights Participation Survey for CBOs and Know Your Rights Participation Survey for In-Person General Public |
| Warm Line Call Log | Populated by First Call for Families staff for every call received. Includes information collected at first contact and second contact. Includes eligibility and referral information. |
| Individualized Support Log | Populated by counsel staff supporting First Call for Families. Includes separate records for each engagement. |
| Client Satisfaction Survey | Responses collected from clients who exit Individualized Support. |

In addition, the evaluation team conducted focus groups with collaborative partners from the Department of Family and Children Services to capture details about the success and challenges of the First Call program. Highlighted findings from this evaluation are outlined in the sections below.



Implementation Monitoring

KEY FINDINGS FROM IMPLEMENTATION MONITORING

Dependency Advocacy Center (DAC) has been implementing the program model since June 2021. Throughout implementation, First Call for Families has been recording information about key efforts, outputs, and outcomes. Key findings from the implementation monitoring are detailed below.

- First Call for Families facilitated 13 Know Your Rights presentations, reaching 152 participants (104 community members and 48 staff from community-based organizations). Community members were referred to the Know Your Rights Presentations from Family Resource Centers (28%), community-based organizations (18%), the Warm Line (6%), self (5%), and the Department of Family and Children Services (2%). Community members report that these presentations effectively increased their knowledge and confidence in navigating dependency court systems. Among community members who participated in the Know Your Rights presentations, 95% lived within the priority zip codes (95111, 95112, 95122, 95127, 94303, 95070).
- The Warm Line has been successful in reaching 238 families in the past year, and the majority (54%) were referred by social workers in the Santa Clara County Department of Family and Children Services (DFCS). About half (49%) had an open dependency case, 58% of families needed support with custody, 10% needed support with navigating DFCS investigations, 9% needed support for domestic violence, 3% needed help with housing and mental health services. The Warm Line has provided direct referrals to Individualized Support or other community services depending on the needs and eligibility of the family.
- Individualized Support has been delivered to 63 families in the past year, of which 13 exited services (e.g., case closed). Activities include ongoing communication, case management, preparing legal documents, attending court hearings, participating in Child Family Team meetings with DFCS, developing safety plans, and conducting needs assessments. Participants in Individualized Support demonstrated preliminary outcomes showing improved self-sufficiency, addressing unmet needs, and high levels of satisfaction with the support they received from First Call for Families.

Detailed information about the process and outcome measures are shown below.



KNOW YOUR RIGHTS PRESENTATIONS

First Call for Families has been delivering "Know Your Rights" community presentations to families to help them learn what rights and responsibilities they have during a DFCS investigation. Families can sign-up directly at First 5 Family Resource Centers or may be referred from the warm line to participate in these presentations.

First Call for Families hosted 13 Know Your Rights presentations reaching 152 participants.

The DAC First Call for Families staff hosted 13 presentations, of which nine presentations were directed to community members from the general public with a total of 104 participants and four presentations were for staff located at community-based organizations (CBOs) and other partner organizations with a total of 48 participants.



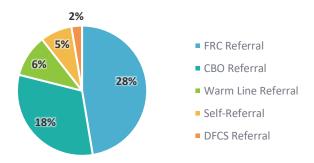
Community members reported increased knowledge and awareness of their legal rights.

Community member attendees were asked to participate in a brief zoom poll and/or paper survey for each Know Your Rights presentation to identify how families found out about the service, whether they were residing in the priority zip codes, and key demographics to ensure that diverse families were supported by this effort. Only 38 community members who attended the Know Your Rights presentations completed the survey (37% completion rate). There were 47% who found out about the Know Your Rights presentation from a local Family Resource Center, 32% found out about the opportunity from another community-based organization (see figure below for additional detail). Among community member attendees who completed the survey, 95% of them were from the priority zip codes (95111, 95112, 95122, 95127, 94303, 95070).

All of the community member attendees (100%) reported that participation in the Know Your Rights presentation increased their knowledge and awareness of legal rights associated with child welfare system involvement. Since there is no variation by topic, it is difficult to identify which subjects were most beneficial to families. The general public attended presentations on what they should do if they get contacted by CPS, dependency laws and the process, informal supervision and voluntary family maintenance, and fathers' rights in dependency cases.



Figure 1. Referral source for community members attending Know Your Rights presentations (N = 38)



Participants also shared their race and ethnicity upon completing the survey. Know Your Rights presentations appear to be most attended by community members who identify as Hispanic, Latino, or Mexican (87%). There were only 5 respondents who identify themselves as Black or African Descent (13%).

Figure 2. Race/ethnicity of community members attending Know Your Rights presentations (N = 38)

| | N | % |
|--------------------------|----|-----|
| Other Hispanic or Latino | 20 | 53% |
| Mexican | 13 | 34% |
| Black/African Descent | 5 | 13% |

Note: None selected Non-Hispanic White, Vietnamese, Filipino, East Asian (e.g., Japanese, Korean, Chinese), South Asian (e.g., Indian, Pakistani), Other Southeast Asian (e.g., Thai, Cambodian), Native Hawaiian/Other Pacific Islander, American Indian/Alaskan Native, or Two or more races.

Fifty percent of the community member survey participants want to learn how domestic violence impacts CPS cases.

The public was asked what topics they would like to learn more about. Fifty percent of respondents stated they would like to learn more about how domestic violence affects a CPS case, 38% stated they would like a topic on child welfare and immigration and 38% want presentations focused on Fathers.

Participants want more focus on ensuring understanding of the presentations, be inclusive of fathers and mothers, and use more visuals and case examples to enhance understanding.

Survey Participants were asked how Know Your Rights presentations could be improved for the future. Overall, they loved the presentations and felt they were clearly presented. Some suggestions included:

- ➤ Hold more presentations and ask more questions of participants to ensure they understand their rights.
- Conduct presentations in a way that is inclusive to both fathers and mothers.
- Ensure participants understand the terms being used and present a wider scope of information during presentations.
- Utilize visual aids like videos and case examples.



Community partners reported increased knowledge and awareness of how families are impacted by child welfare involvement.

Community partners were also asked to report on the impact of the Know Your Rights presentations. Twenty-eight CBO participants completed the survey. Most participants came from either school employees (19) or were from another nonlegal organization (7). All participants said the presentation they attended increased their knowledge and/or awareness of the child welfare system and were at least *Somewhat likely* to recommend the presentation they attended to others. Additionally, 71% said they would like to attend additional trainings.

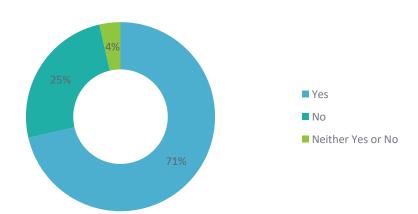


Figure 3. CBO Survey Participants Interested In Additional Trainings (N = 28)

CBO survey participants found learning about the CPS referral process, how clients can be referred to the First Call Program, and information about the Warm Line and legal resources for parents useful.

CBO survey participants were also asked what areas of the presentation were useful. They mentioned the presentations gave valuable information on:

- ✓ What to do when crisis occurs at a school.
- ✓ The CPS referral process and what happens after a report is made including the timeline of what happens when CPS gets involved.
- ✓ How referrals can be made to the First Call program.
- ✓ Information about the Warm Line and legal resources for parents.
- ✓ Hearing personal stories and mentor parent experiences.

"Great to hear there are options for parents BEFORE their kids are taken from them. I'm sure we can refer many parents and possibly prevent CPS reports." -Presentation Participant

WARM LINE

First Call for Families operated a toll-free warm line to offer advice about how to navigate child welfare involvement and limited resource and referral information. Families can call in directly to the Warm Line



or may be referred by a DFCS social worker, a Family Resource Center, or a community-based organization.

There were 238 families that contacted the First Call for Families Warm Line for support in navigating the court system.

There were 238 community members who called the Warm Line to get more information or support services to help them navigate child welfare involvement. These 238 families also represent 536 children (on average 2 children per family and a maximum of 10), of whom 33% (177 children) were five years of age or younger. About 1 in 3 families (31%) were located within the priority zip codes (95122, 95112, 95116, 95127, 95111, 95020) and 71% were living below the federal poverty level (average household income \$2,000). Most of the Warm Line callers were Hispanic/Latino/Chicano or Mexican (62%), nearly one-third spoke Spanish (30%) and 1% spoke either Dari or Arabic. The majority of callers were Female (75%).

Figure 4. Race and ethnicity, Language, and Gender of Warm Line callers (N=238)

| Race/Ethnicity | N | % |
|---|----|-----|
| Hispanic/Latino/Chicano | 75 | 32% |
| Mexican | 71 | 30% |
| Non-Hispanic White | 31 | 13% |
| Two or more races | 24 | 10% |
| Black/African Descent | 18 | 8% |
| South Asian (e.g., Indian, Pakistani) | 6 | 3% |
| East Asian (e.g., Japanese, Korean, Chinese) | 2 | 1% |
| Filipino | 1 | <1% |
| Declined to state | 2 | 1% |
| Native Hawaiian/Other Pacific Islander | 2 | 1% |
| Other Southeast Asian (e.g., Thai, Cambodian) | 1 | <1% |
| American Indian/Alaskan Native | 1 | <1% |

| Language | N | % |
|----------|-----|-----|
| English | 165 | 69% |
| Spanish | 71 | 30% |
| Dari | 1 | <1% |
| Arabic | 1 | <1% |

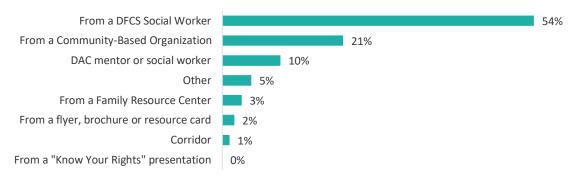
| Gender | N | % |
|--------|-----|-----|
| Female | 179 | 75% |
| Male | 59 | 25% |

Over half (54%) of families were referred to the Warm Line by DFCS, and 49% had a current investigation with a DFCS social worker.

Families were asked to indicate a referral source, or in other words, how they learned about the Warm Line (see figure below). More than half (54%) were referred from a DFCS Social Worker, 21% were referred by other community-based organizations, and about 13% were referred by Corridor or a Family Resource Center. This indicates that the outreach efforts with DFCS and community-based organizations have been a crucial step in supporting families.

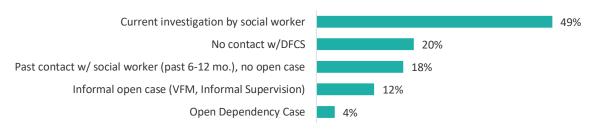


Figure 5. Referral source for Warm Line callers (N=238)



Callers were asked to provide additional information about their current level of involvement with DFCS. Nearly half (49%) of callers indicated that they had a current investigation by a DFCS social worker, 20% did have contact with DFCS, 18% had been contacted by a DFCS social worker in the past six months to a year but had no open dependency case, 12% indicated that they had an informal open case, and 4% had an open dependency case.

Figure 6. Warm Line callers' level of involvement with DFCS (N = 189)



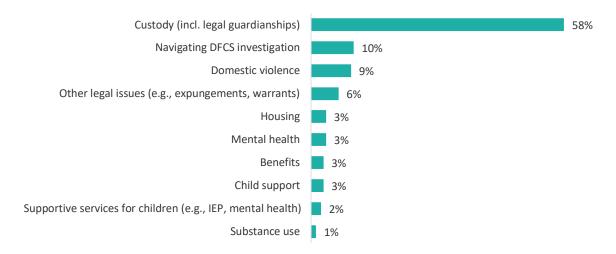
Note: This reflects callers who received a second contact by the Warm Line after checking on eligibility and conflict of interest. There were 49 cases that were excluded due to ineligibility.

Nearly three-fourths (74%) of families calling the Warm Line needed support with custody.

First Call for Families staff documented the most presenting needs of callers to identify support strategies. Nearly three-fourths (74%) of families needed support with custody (including guardianship) and 13% needed help navigating the DFCS investigation. About 12% needed support for domestic violence, 8% needed help with other legal issues (e.g., expungements and warrants), 4% needed help with mental health services, and 4% needed support for stable housing. More information is shown in the figure below.



Figure 7. Presenting needs of families, by type (N = 122)



Note: This reflects callers who received a second contact by the Warm Line after checking on eligibility and conflict of interest. There were 49 cases that were excluded due to ineligibility. An additional 67 cases were blank.

Of the 238 callers, 76 received limited counsel legal advice, 54 callers were referred to additional support in the community, and 56 were referred to Individualized Support.

Of the 238 callers, 76 received limited counsel legal advice, 54 were referred to individualized support, and 26 were referred to external resources. Details about the outcome of calls to the Warm Line are documented in the figure below.

Figure 8. Outcomes of Warm Line calls for support (N = 238)

| Warm Line Caller Outcomes and Referrals | N | % |
|--|----|-----|
| Unknown | 12 | 5% |
| Unable to make second contact | 21 | 9% |
| Ineligible for services | 21 | 9% |
| Conflict of interest | 14 | 67% |
| Does not reside in Santa Clara County | 3 | 14% |
| Current open dependency court case in Santa Clara County | 4 | 19% |
| Limited counsel and advice only | 76 | 32% |
| Referred to external resources, no further assistance needed | 48 | 20% |
| Transfer case to Corridor | 6 | 3% |
| Referring to Individualized Support | 54 | 22% |



INDIVIDUALIZED SUPPORT

Families with more intensive case management and representation needs were referred from the Warm Line to Individualized Support. First Call for Families supported parents/caregivers who required more individualized support, including ongoing case management, peer mentoring, and/or limited scope representation.

There were 63 families who received intensive services through Individualized Support with needs related to custody, mental health, housing, employment, legal support, and family relations.

In fiscal year 2022-23, there were 63 cases active in Individualized Support services. There were 47 families that had an intake and 13 who exited services during this fiscal year. Family needs were documented at Intake to be able to customize support and address unmet needs (see figure below). The most common needs among families receiving Individualized Support were for **mental health**, **custody**, **housing and domestic violence**.

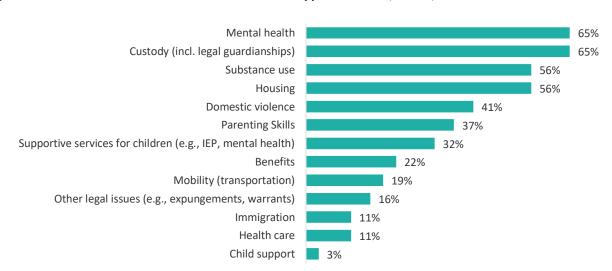
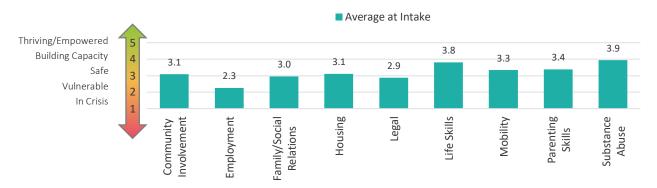


Figure 9. Needs of families served in Individualized Support at Intake (N = 63)

Self-sufficiency was evaluated at intake for all clients. The DAC social workers and mentor parents utilize the Self-Sufficiency Matrix to rate the client's status on nine domains: housing, employment, mobility, life skills, family relationships, community involvement, parenting skills, legal, and substance use. Domains are scored to identify families (1) in crisis, (2) vulnerable, (3) safe, (4) building capacity, or (5) thriving/empowered. Among families with an intake documented during the 2022-23 fiscal year, the areas with the lowest self-sufficiency scores were employment, legal, and family/social relations.



Figure 10. Average Self-Sufficiency Scores at Intake (N = 47)



In response to the identified needs of the family, First Call for Families staff provided ongoing support and case management by meeting with clients and DFCS social workers.

Staff engaged in 47 Intake meetings, 1,310 Interim meetings, and 13 meetings to close-out cases. Interim meeting activities are detailed in the figure below. The most common activities included meeting with clients (or communicating by phone, email, or text), and communicating with DFCS social workers. On occasion, the First Call for Families attorney attended court hearings and participated in Child Family Team meetings with DFCS.

Figure 11. Interim meeting activities (1,310 meetings)

| Interim Meeting Activities | N | % |
|---|-----|-----|
| Communication | 476 | 36% |
| Met with client in person | 246 | 19% |
| Called client | 415 | 32% |
| Texted client | 461 | 35% |
| Sent email / letter to client | 43 | 3% |
| Communicated with family member or other support person | 77 | 6% |
| Communicated with DFCS social worker | 121 | 9% |
| Communicated with other community-based organization | 115 | 9% |
| Case management | 55 | 4% |
| Attended court hearing | 31 | 3% |
| Participated in Child Family Team meetings (DFCS) | 22 | 3% |

Twenty-three cases were closed out by the end of the fiscal year.

Among the 23 cases, 13 completed program services and have documented outcomes. The remaining 10 families exited services when they stopped responding or showing up for meetings with First Call staff. This evaluation report includes a summary of key outcomes for families with a documented case closure (excludes no-shows). Outcomes for this evaluation include the percentage of families who had their needs met by case close, the changes in self-sufficiency from intake to case close, and the placement and stability of families served.

At case close, the First Call staff document the needs for each client that have or have not been addressed at the time the family exits the program. Among 13 families who exited services, 10 of them



report that they needed and received support to meet their needs related to custody, 4 of them needed and received support to improve parenting skills and access public benefits. Some families exited the program without meeting all of their needs, particularly needs related to mental health, substance use, housing, domestic violence, supportive services for children, and immigration. Additional details are shown in the figure below.

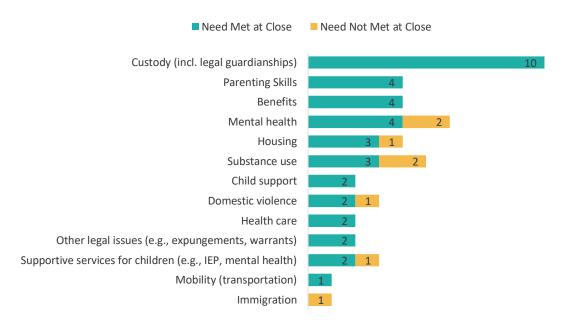


Figure 12. Needs met among families exiting Individualized Support (N = 13)

Self-sufficiency was also re-evaluated when clients exited the program. Clients demonstrated increased self-sufficiency in each domain, and the largest increases were demonstrated for legal and housing self-sufficiency. Employment is an area that maintained relatively low scores from intake to program exit.

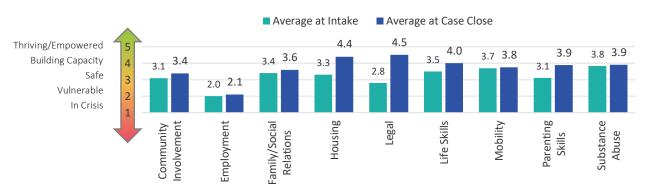


Figure 13. Average Self-Sufficiency Scores for Support Clients with Outcomes (N = 13)

At the time families exit the program, First Call staff also document the placement of children to identify any changes that took place since intake. Placement information was documented for ten of thirteen families, and among them the child's placement remained the same at case close as it was at intake. Eight of the children were in the care of their parent at intake and case close, 1 remained in the care of a relative, and one remained with another caretaker.



Two families had a substantiated allegation and two had a petition filed within 6 months of exiting services.

To assess the long-term outcomes for families and children receiving Individualized Support from the First Call for Families program, ASR collaborated with analysts at the Santa Clara County Department of Family and Children Services (DFCS) to identify outcomes. ASR provided a list of clients served by the program who had received at least 45 days of services and were exited from the program for at least 6 months by the end of the fiscal year (i.e., exited services before January 1, 2023). Out of fourteen cases identified by ASR, 12 of them were identifiable by DFCS to include in this outcomes analysis. Most of the families did not have any new contact with DFCS in the 6 months after exiting services (7 families, 17 children).

- Among the 5 families who experienced new contacts with DFCS, 2 of them (5 children) had a substantiated allegation.
- Only 2 parents had a petition filed for a child after exiting the program.



Survey of Community Partners

Applied Survey Research (ASR) intended to hold a focus group with community partners identified by the First Call for Families attorney to gain insights into referral processes, perceived effectiveness, as well as barriers and opportunities to consistently support all families referred to the Dependency Advocacy Center's (DAC) First Call for Families program. Unfortunately, due to scheduling difficulties likely attributable to availability in the summer and the general workload of partners in the community, ASR was unable to host a focus group. To collect feedback, ASR partnered with DAC to administer a brief survey with open-ended questions. Four partners responded to the survey to share their insights.

Survey respondents felt that First Call for Families has been an effective resource for families.

Three respondents believe First Call for Families has been effective over the last year. Survey participants were also asked to describe the process by which they would decide to refer to First Call for Families. One participant shared that they would refer families to First Call if they were involved with child welfare or at-risk of becoming involved. Another participant shared that they invited families from their organization to attend a Know Your Rights presentation to increase their knowledge. One participant said that they had participated in a Know Your Rights presentation to find out about services and resources through DAC.

"I typically referred families who are involved with Child Protective Services or at risk of becoming involved with Child Protective Services."

"We referred a client that came in with a case from a different county and First Call supported the client with finding another program that would be able to help the client since they were out of the zip codes they could take. The client felt very grateful to have been guided instead of just saying no."

All four survey participants believe that the program is addressing the needs of the families they referred. Participants reported First Call's strengths as a program were, educating families on their legal rights, building confidence to be successful within the system, and assisting ineligible families to find another program that could assist them.

First Call for Families is a reputable resource for families, but collaboration could be improved to close the loop on referrals and identify support strategies for families that are ineligible for services.

Community partners reported minimal challenges working with First Call. One challenge they mentioned was not being fully aware of **how to help families that are ineligible.** One example provided is when a family who really appreciated the support referred another friend/family member who was not eligible.

Respondents were asked to share insights to improve the way First Call collaborates with community workers. They recommended **attending community events** (e.g., back to school nights) and **requested closed loop communication** (e.g., providing updates on the progress of families referred). Overall, community partners report feeling very appreciative of the work First Call is doing in their community.



Focus Group Discussions with DFCS

Applied Survey Research (ASR) held a focus group with social workers and supervisors from the Santa Clara County Department of Family and Children Services (DFCS) to gain insights into referral processes, perceived effectiveness, as well as barriers and opportunities to consistently support all families referred to the Dependency Advocacy Center's (DAC) First Call for Families program.

Questions used to guide the discussion with DFCS participants:

How did you/your staff decide which cases to refer to First Call?

Do you feel that this program is adequately addressing the needs of families?

Are there any ways that you would improve the program model to better serve families?

How do you think the First Call program could better collaborate with social workers like yourselves?

A summary of focus group discussions are documented below.

KEY FINDINGS FROM FOCUS GROUP DISCUSSIONS

Dependency Advocacy Center (DAC) has been contracting with DFCS since September 2022. However, since its inception, DAC has worked alongside DFCS to promote and implement strategies to effectively support families at risk of becoming involved with child welfare. The discussion with DFCS social workers and supervisors revealed the following insights:

- First Call for Families effectively supports families in child welfare: DFCS social workers and supervisors find confidence in the program's support for parents navigating legal aspects of child welfare cases. The program's comprehensive approach, including attorney, social worker, and parent mentor assistance, proves essential in offering diverse perspectives. DFCS noted that the program is particularly valuable for first-time-court-impacted families. Additionally, the program's support for Spanish-speaking families is essential.
- Strengthening First Call for Families and collaboration with DFCS: Suggestions include training for DFCS to clarify eligibility criteria or conflicts of interest, identifying appropriate strategies to assist families who are excluded due to eligibility, extending legal aid to relatives, and ensuring transparent communication channels with DFCS to prioritize child safety.
- Expanding program reach and awareness: Strategies for extending the program's influence include enhancing clarity for DFCS staff and increasing public awareness of the First Call for Families Warm Line. They propose direct communication with families to convey the range of services and support offered by the program.

Specific feedback on each of the discussion questions is outlined in more detail on the following pages.



REFERRALS TO FIRST CALL FOR FAMILIES

DFCS staff followed policy to refer all clients to First Call for Families to ensure that families have sufficient support in navigating the system.

DFCS has a department policy which requires social workers to refer clients to First Call For Families so that they have someone outside of DFCS to support them throughout their case. Referrals to First Call were also made from the Emergency Response team if the family was going to come into contact with the child welfare system. The Emergency Response team shared information with the family about First Call and then made the referral.

✓ DFCS policy requires referrals for families: Department policy requires social workers to refer clients to First Call For Families to ensure families have hands-on support while they navigate the child welfare system.

EFFECTIVENESS OF FIRST CALL FOR FAMILIES

First Call offers a unique service to families in need of support to navigate dependency court systems.

DFCS social workers and supervisors shared that they are confident parents are receiving effective support to navigate the legal aspects of their child welfare cases. They noted that they did not have any information about data or outcomes, but largely felt that the interactions with families reflected program effectiveness.

DFCS staff reflected on the most valuable aspects of the First Call program:

"First Call is flexible and meets families where they are at. Some meetings are needed on a short timeline and/or on emergency basis."

"First Call has been very effective at families entering the system for the first time."

- ✓ Comprehensive and multi-pronged supports for families: First Call offers families the opportunity to connect with an attorney, a social worker, and a parent mentor, all of whom are perceived as essential to help families navigate the system by offering a range of perspectives and support.
- ✓ Advocacy, especially for families experiencing involvement for the first time: The staff acknowledged the value of the program to fill the critical need in helping families navigate the complexities of the family and dependency courts systems. They said that they are great advocates for the parents, especially those who are dealing with the system for the first time.
- ✓ **Support for Spanish-speaking families**: DFCS social workers expressed gratitude and appreciation for the capacity of First Call to provide resources and direct support for families whose primary language is Spanish.

RECOMMENDATIONS TO IMPROVE THE PROGRAM MODEL

DFCS social workers and supervisors provided recommendations to better support families.

While both social workers and supervisors agree that First Call for Families is a great program, they also helped to identify additional ways to support families as the program grows. DFCS social workers and supervisors indicated that many of the challenges can be addressed by increasing an awareness of the program as a resource for families, increasing clarity around the program goals and scope of services, and



ultimately increasing the level of collaboration with DFCS social workers. Looking ahead to FY2024, First Call for Families should consider adopting the following strategies to improve collaboration across systems.

- ✓ Create trainings that describes the criteria for a family being accepted by First Call, describes the rolls and expectations of First Call and DFCS staff, and about the referral process.
- ✓ Establish sharing protocols for data and evaluation and case management between DAC and DFCS. Share with DFCS workers when there is a conflict of interest where First Call cannot help both parents.
- ✓ DFCS staff suggested providing more legal support to relatives to help them understand their options when the parents are not a suitable environment for the child(ren).
- ✓ Incorporate child safety into the program model by developing protocols to be able to better respond for DFCS worker requests for information. DFCS staff shared they have signed consent (by parents) on their end to share and receive confidential information about clients they refer to First Call that are not honored.
- ✓ Ensure families understand who their points of contact are with First Call and their key providers.
- ✓ Provide clear direction for identifying and supporting families who are excluded from support services based on eligibility criteria (e.g., other sources of support, make warm hand-offs, etc.).

EXPANDING PROGRAM REACH

Focus group participants were asked to help identify ways to expand the reach of the program to increase referrals and awareness. Aside from the efforts to increase clarity for DFCS staff, they recommend increasing public awareness about the First Call for Families Warm Line. This can be achieved by sharing information with families directly about the types of services and supports that are available.



Looking Forward

PARTNERSHIP WITH DFCS

Dependency Advocacy Center's First Call for Families program will continue to partner with the Department of Family and Children's Services in Santa Clara County in the year ahead. This partnership will help to address many of the critical pieces of feedback identified by DFCS social workers and supervisors to improve cross-systems collaboration and program outreach. First Call for Families will continue to partner with ASR to refine the evaluation plan and the tools to support data collection and reporting.

DATA CONSIDERATIONS

First Call for Families implementation was documented through a series of Google Forms/Sheets and the program outputs and outcomes were computed and displayed in a Google Data Studio Dashboard for internal review and monitoring. ASR has continued to help build and refine the tools throughout implementation. The data analysis produced by ASR to prepare this summary document revealed new recommendations to improve data collection and monitoring. Moving into the next phase of implementation, First Call for Families and ASR will conduct a thorough review of the data collection processes. Specific findings from this summary report highlight **opportunities to improve data collection** (listed below):

- Data aggregation fixes in the online dashboard: As analysis has been conducted opportunities have arisen to promote higher quality data collection. Ongoing work to improve how data is entered and aggregated into the dashboard is an ongoing process and will continue.
- Updating the evaluation plan: A new partnership with Corridor (works with families who have open dependency cases or cases that are at risk of DFCS involvement for parents in the criminal justice system) has increased the desire of DAC to align their evaluation plans. In the new year ASR will assist in updating the current evaluation plan of First Call to align the two programs. The alignment will seek to continue to improve data quality and reporting needs of both programs.
- Reduce duplicated data: During the process of evaluating this past fiscal year some duplicated data entry points for program staff may be posing a challenge. ASR and DAC will work together to streamline the data entry process for staff by determining what is necessary for evaluation and what is necessary for staff. This should reduce staff workload to focus on the families they are seeking to help.

These data considerations will be reviewed amongst the First Call for Families leadership team, ASR, and DFCS as the program moves into the next phase of implementation. ASR will continue to support First Call for Families in their effort to document program successes and opportunities for improvement.



Appendix – Self Sufficiency Matrix

Adapted Self-Sufficiency Matrix (Completed by Mentor Parent in consultation with client)

PART 1: PAST STATUS

Please circle the number that best indicated client status <u>BEFORE STARTING services with DAC/MPP</u> using the scale from 1 to 5 (from 1=in crisis to 5 = thriving/empowered)

| | Domain | 1 (in crisis) | 2 (vulnerable) | 3 (safe) | 4 (building capacity) | 5 (thriving/ empowered) | Unable to Assess |
|----|------------------------------|------------------|-------------------|-------------|-----------------------------|----------------------------|---------------------|
| 1. | Housing | 1 | 2 | 3 | 4 | 5 | UA |
| 2. | Employment | 1 | 2 | 3 | 4 | 5 | UA |
| 3. | Mobility (transportation) | 1 | 2 | 3 | 4 | 5 | UA |
| 4. | Life Skills | 1 | 2 | 3 | 4 | 5 | UA |
| 5. | Family /Social Relations | 1 | 2 | 3 | 4 | 5 | UA |
| 6. | Community Involvement | 1 | 2 | 3 | 4 | 5 | UA |
| 7. | Parenting Skills | 1 | 2 | 3 | 4 | 5 | UA |
| 8. | Legal | 1 | 2 | 3 | 4 | 5 | UA |
| 9. | Substance Abuse | 1 | 2 | 3 | 4 | 5 | UA |



PART 2: PRESENT STATUS

Please circle the number that best indicates client current status $\underline{\mathsf{AFTER}}$ services with $\underline{\mathsf{DAC/MPP}}$ using the scale from 1 to 5 (from 1=in crisis to 5 = thriving/empowered)

| | Domain | 1 (in crisis) | 2 (vulnerable) | 3 (safe) | 4 (building capacity) | 5 (thriving/ empowered) | Unable to Assess |
|----|------------------------------|------------------|-------------------|-------------|-----------------------------|----------------------------|---------------------|
| 1. | Housing | 1 | 2 | 3 | 4 | 5 | UA |
| 2. | Employment | 1 | 2 | 3 | 4 | 5 | UA |
| 3. | Mobility (transportation) | 1 | 2 | 3 | 4 | 5 | UA |
| 4. | Life Skills | 1 | 2 | 3 | 4 | 5 | UA |
| 5. | Family /Social Relations | 1 | 2 | 3 | 4 | 5 | UA |
| 6. | Community Involvement | 1 | 2 | 3 | 4 | 5 | UA |
| 7. | Parenting Skills | 1 | 2 | 3 | 4 | 5 | UA |
| 8. | Legal | 1 | 2 | 3 | 4 | 5 | UA |
| 9. | Substance Abuse | 1 | 2 | 3 | 4 | 5 | UA |

| Completed by: | _(Mentor Parent name) |
|--|-----------------------|
| Administered at approximately 12 months of services: | |
| Yes No (if no, please note time frame here |) |



REFERENCE SHEET: Definitions for rating self-sufficiency in each domain

| Domain | 1 (in crisis) | 2 (vulnerable) | 3 (safe) | 4 (building capacity) | 5 (thriving/ |
|--------------------------------|---|---|--|---|---|
| Housing | Homeless | In transitional or temporary housing Housing payment is unaffordable | In stable housing that is safe, but is not adequate | In stable subsidized housing that is safe and adequate. | Unsubsidized household is safe and adequate. |
| Employment | No job. | TemporaryPart-timeSeasonalNot enough pay to live | Employed full time Inadequate pay to live Few or no benefits. | Employed full time Enough pay to live Benefits. | Maintains permanent employment. |
| Mobility | No access to transportation, public or private; may have car that is inoperable. | Transportation is available, but unreliable, unpredictable, unaffordable; may have care but no insurance, license, etc. | Transportation is available and reliable, but limited and/or inconvenient; drivers are licensed and minimally insured. | Transportation is generally accessible to meet basic travel needs. | Transportation is readily available and affordable; car is adequately insured |
| Life Skills | Unable to meet basic needs such as: • Hygiene • Food • Every day activities | In need of assistance for some daily living activities | Very minimal assistance to meet daily living activities. | Meets all basic needs of daily living without assistance. | Provides beyond basic needs of daily living for self and family. |
| Family /Social Relations | Lack of support from: • Family • Friends | Limited Support from: Family Friends Family and Friend lack the ability/skills to help | Minimal support from family/friends: • Family/Friends are learning to communicate and support. | Strong support from family or friends. | Has healthy/expanding support and good communication. |
| Community Involvement | Not applicable due to crisis. | Socially isolated No social skills Lacks motivation to become involved. | Willing to be involved in the community, but is lacking skills or not aware of available opportunities. | Some community involvement, but has barriers such as: • Transportation • Childcare | Actively involved in community. |
| Parenting Skills | Safety concerns regarding parenting skills. | Parenting skills are minimal. | Parenting skills are evident, but | Parenting skills are adequate. | Parenting skills are well developed. |



| | | | continuous growth is recommended. | | |
|--------------------|--|--|---|---|--|
| Legal | Current outstanding tickets or warrants. | Criminal current charges Criminal trial pending, noncompliance with probation/parole. | Fully compliant with probation/parole terms. | Successfully completed probation/parole within past 12 months No new charges filed. | No active criminal justice involvement in more than 12 months |
| Substance Abuse | Meets criteria for severe abuse/ dependence; Resulting problems are severe so that require institutional living or hospitalization may be needed. | Meets criteria for dependence: • Preoccupation with use or obtaining drugs/alcohol • Withdrawal • Behaviors demonstrate avoiding withdrawals • Use results in neglect of essential life activities. | Use within last 6 months; evidence of occupational, emotional or physical problems (such as disruptive behavior or housing problems) have persisted for at least one month. | Client has used during last 6 months, but no evidence of recurrent dangerous use. | No drug use/alcohol abuse in last 6 months. |

