



Partnerships for  
Permanency in  
Sacramento  
County

JANUARY 2017

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*“It’s not that every case was resolved, but in many of them, “family members who were lost were re-identified and people were reconnected. ... Every month, all four of my supervisors were having a concentrated dialogue with their program manager and at least a couple of their workers, along with our permanency liaison from Casey about what it will take to get their kids to permanency.”*

— Program Manager, Child Protective Services, Sacramento County, CA

## Introduction

On a sunny December day in 2016 in Sacramento, California, four people gathered around a large, neat desk: a program manager, supervisor, and social worker from Sacramento County’s Child Protective Services (CPS) permanency division, and a permanency liaison from Casey Family Programs, a national operating foundation. These four professionals were participating in a permanency case review (PCR), a structured, in-depth conversation about a 13-year-old boy’s future. The goal for him — as it is for every child in Sacramento County’s CPS system — is legal permanency. A stack of files and court reports about this child’s long journey through the system lay on the table for quick reference.

Facilitating the meeting, the program manager got right to the point, asking the caseworker and supervisor: On a scale of 1 to 10, what is the risk to this young teen if he does not achieve permanency? The program manager asked about the youth’s strengths and what was working well in his life. Who does *he* want to live with, and is that possible? What concerns and challenges might interfere with finding a permanent family for him?

For almost two hours, the PCR team explored permanency options for this youth, who had experienced multiple placements in his young life. What were his current and past relationships with family members? Why did a recent guardianship fail? Who among his siblings does he see? Who is important to him in school? Why did he get into a fight at school? Where did he spend Thanksgiving? Who are his friends? Are there relatives he may not even know or remember who might become connections? Does he like sports? What does he watch on TV? The PCR team looked at the whole of this vulnerable young teenager.

During the meeting, the professionals identified a web of connections to explore. There were questions the worker and supervisor could not answer or that were not addressed in the files. But there was no blame in this conversation. The discussion was comfortable and supportive, focused on revisiting past opportunities and finding new ones. No issue seemed too small to help this young teen find a permanent, loving, and stable family.

At the end of the meeting, a strategy with individual assignments was fleshed out on paper and copied for everyone present. Each left with a to-do list. The CPS program manager set a date in January 2017 to meet and report back on progress.

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Over the course of two days in December, this program manager and the Casey permanency liaison participated in four PCR: different youths' cases, different workers and supervisors. Each youth had been in the system for more than two years. The format and questions at the meetings were the same, but each family's story was unique and complex. Each youth had the potential to thrive if permanency and stability were introduced into his or her young life. If long-term placement was proposed as a solution, participants gently reminded each other that permanency means a family, and that means forever. Long-term placement without permanency is no longer intended to be part of the picture in Sacramento.

Case reviews like these in Sacramento are a "sacred time," as a Casey permanency liaison put it, a time out from daily crises to slow down and explore in detail new ideas for family or reintroduce connections that had been lost. PCRs are an in-depth, focused version of teaming. A CPS supervisor noted: "There are more heads focused on the child. We all bring different things to the meeting, and it's a reminder that it's never too late for permanency."

It is unusual for busy social workers and supervisors to spend so much time staffing an individual case, but permanency, especially for youth who have spent years in the system, does not come easy or fast. In Sacramento County, PCRs take place regularly now. Sacramento CPS is partnering with Casey Family Programs to develop and refine an approach to permanency through PCRs. The initiative began in the summer of 2015; the goal was to hold five reviews a month in each of the four geographical regional units in CPS.<sup>1</sup> By the end of December 2016, nearly 275 youth had benefited from this level of attention.

Still a work in progress, with only 18 months of experience and data to learn from, the PCR project is a story of shared leadership and improving practice. This report chronicles the story of the Casey-Sacramento partnership as leaders worked to change the conversation and practice around permanency.

## Getting started: Developing permanency case reviews in Sacramento

Sacramento County ranks above the national average when it comes to achieving permanency within 12 months for all children entering the system. (The national average is 40 percent; Sacramento's is 45 percent.) But even being above the national average is too low for Sacramento when it comes to permanent families for their children. CPS leaders and staff found far too many of their children were stuck in long-term placement.

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<sup>1</sup>The original intent was to hold PCRs in the adoption unit as well, but there were challenges identifying appropriate cases for review, and only a few PCRs were held there. Children in the adoption unit will be part of the PCR process going forward in 2017.

These are the cases that needed special attention and became the focus of the PCR project.

A CPS program manager helped spark the initiative with a 2013 data report outlining the characteristics of children in care three years or longer. “There is no question,” he wrote, that “youth impacted by delayed permanency are affected by long-term trauma for being in care for extended periods of time.” He added: “The longer a child remains in our care, the less likely they will find permanency, ever.”

He examined the status of 416 children and youth in care for three or more years. His findings included:

- More than half (56 percent) entered the system between the ages of 6 and 11.
- African American children were disproportionately represented (46 percent), compared to the next largest group, whites (17 percent).
- Nearly 80 percent were removed for caretaker absence or incapacity or general neglect.

Digging deeper in a subsequent report, a newly formed “delayed permanency workgroup” that included CPS and community partners found that 82 youth had been in a stable placement for three years or more, yet still had no permanent family to call their own. More than 60 percent of those in care three or more years had “long-term foster care with a non-relative or relative” as their case plan. This was not OK.

### Words matter: Defining the urgency of permanency

Permanency is a mantra among child welfare leaders throughout the country. They speak of, and believe in, ensuring a safe, loving, and permanent family for all children in the system. They know a government agency is not a family and that placement is intended to be only a temporary safe haven for abused or neglected children. They believe older youth deserve permanent and stable connections as much as young children. And they are fully aware of research showing that long-term foster care can lead to long-term problems, including dropping out of school, homelessness, unemployment, sexual exploitation, and criminal activities. The challenge — in Sacramento and across the country — is in bringing this mantra to life for each child in the system.

A more precise definition of permanency in Sacramento was thus a part of the PCR path. At first, CPS staff referred to “long stayers,” but they quickly sensed that this term blamed youth, as if they chose to stay in care. Leaders changed the focus to talk about the system’s responsibility to intervene in delayed permanency and change the direction. With input from staff and top leadership, they came up with the following definition: “Legal permanency is reunification, adoption or guardianship.” Acknowledging the complexities of the lives of families in the system, they added: “Permanency can also include a safe, stable, and secure placement with a relative or NREFM [non-related, extended family member] with continued work toward legal permanency.” This is often referred to as “relational” permanency, which is an important step on the way to legal permanency.



## Partnership with Casey Family Programs

Strategic consultants from Casey's Systems Improvement (SI) division had partnered with Sacramento County in the past on a number of issues around systemic reform. These consultants introduced Sacramento to permanency roundtables, which include a structured professional case consultation to enhance permanency. Sacramento leaders embraced the goals, but opted to develop a customized model that fit their own needs and capacity.

With collaboration from Casey, formal planning for what became permanency case reviews began in 2014. In August of that year, the deputy director in charge of CPS sent a memo to all staff about the initiative. She stated that "safe and improved permanency for children must be a priority and not an option, and everyone in this organization has a role in achieving this goal." The focus, she said, "will not end for any child until permanency has been achieved." Sacramento mirrored Casey leaders' language and intent: an "urgent and relentless" effort to find permanency for every child and to change the system in order to make it possible.

During the year of planning, Casey and Sacramento held a series of high-level workgroup meetings to iron out roles and responsibilities of each participant in the case reviews. Three of Casey's work units — Strategic Consulting, Child and Family Services, and Technical Assistance — participated, along with Sacramento division managers and program managers. They developed a case review tool and a process for implementation. CPS decided to expand the pool of cases to include children in care two years or more, a group that totaled more than 600 children.

There was considerable discussion about who should facilitate the PCRs. CPS program managers got the honor. "Having program managers kick it off was probably one of the best decisions we made in this process," said a division manager. It enhanced "the transfer of learning and the visibility and expansion of the knowledge base. It shows staff that we're in it together."

Another critical decision was bringing in social workers from Casey's Child and Family Services staff to be permanency liaisons. They brought deep experience in family finding and engagement and traveled to Sacramento on a monthly basis, each assigned to one of the four regional program managers.

Permanency case reviews began in June 2015.

## Permanency case reviews in action

Permanency is now front and center in Sacramento, and leaders and workers share ideas, success stories, and challenges that arose from PCRs. Even the most complex of cases are making concrete steps toward permanency. Here are a few examples:

- A youth repeatedly ran away from his placement and headed home to his biological family. Older youth often stay in touch with their parents without telling CPS, especially when the agency considers parents out of the picture as

- permanency options. In this case, however, the father called CPS whenever his son came home. This parent wasn't a fan of CPS, explained a Sacramento division manager, but his calls led CPS to explore what is called "second-chance reunification." This youth is now living at home. The alternative for him might well have been living on the streets, a high-risk option. A division manager noted that some supervisors never knew second-chance reunification was possible, but it comes up regularly now in PCR discussions as an option to explore.
- CPS placed a young woman vulnerable to commercial sexual exploitation in an out-of-state group home. In her PCR, a former foster mother was mentioned as a possible connection. The worker talked to her and found that she was interested in re-establishing contact if the child's behavior had changed. The agency flew the former foster mother to visit the teenager, and the result was positive. The youth is now back in California, still in a group home for the moment, but the youth and the foster mother are visiting and receiving counseling and wraparound services. The goal is guardianship.
  - A supervisor told the story of a girl who had been hospitalized for eight years. The worker found a home for her with foster parents who are both nurses. It's easy to give up on cases like this that have been around for so long, said the supervisor. PCRs help staff think creatively about how to support each child.
  - A PCR often raises as many questions as it answers, which can be good news. In one case, a 17-year-old girl's guardianship had fallen apart. In response to the program manager's question about risk if she did not achieve permanency, the worker noted that she was "beyond vulnerable" for sexual exploitation, especially if she aged out of the system at age 18 without permanency. The program manager and permanency liaison pushed to explore new connections for her immediately. The team developed an extensive list of connections on the spot. They even discussed arranging a visit with a relative in another state over the Christmas holidays. The whole team recognized the need to act quickly for this vulnerable teen.

Case reviews such as these do not point fingers at individual social workers or supervisors for lack of achieving permanency. Rather, they identify the systemic issues that get in the way — the assumption, for example, that if a child is in a safe, but long-term placement, it's acceptable to stay there. Or, as in the first example above, that biological parents who are no longer a formal part of the system cannot be reunified with their child. Throughout the 18 months of the PCR pilot, staff and leaders have discussed the barriers to permanency and developed a range of strategies to overcome them.

## A chain of partnerships

Casey Family Programs is a steadfast partner with child welfare agencies across the country. But this Casey-Sacramento initiative is built on many different layers of partnerships within Casey, within Sacramento, and between Casey and Sacramento. These multiple links brought a set of coordination challenges along with the benefits of so many professionals working together to achieve the same goal.

### Internal Casey partnerships

Casey leaders from three divisions outlined specific roles and responsibilities for providing consultation, technical assistance, and direct support. The jurisdictional lead — Strategic Consulting — would ensure that the work was aligned with the mission and vision of both Casey and Sacramento and that PCRs fit into the ongoing strategic consulting work Casey did in Sacramento. The practice lead — Child and Family Services — focused on sharing expertise in permanency and family engagement and coordinated the work of the permanency liaisons. The Technical Assistance lead provided oversight and review of the development process. Carving out time for planning and meeting across Casey divisions was not always easy, but leaders were on the same page when it came to the importance of the initiative and the goal of helping Sacramento learn from PCRs and change their practice accordingly.

### Internal Sacramento partnerships

Every CPS agency has regular case consultations between supervisors and their workers. But it is unusual to take almost two hours out of a “chopped-up day,” as one supervisor put it, for a two-hour conversation about just one case with their boss — in this case the program manager. Workers, supervisors, and program managers alike questioned the time required, given their heavy workloads.

It helped to know that, above and beyond the impact on each child’s life, the PCR process also strengthens the working relationships within CPS. For example:

- In a PCR meeting, workers and supervisors observe first-hand the commitment of their program manager to permanency. In hierarchical systems like CPS agencies, it matters what your boss does and says. As a division manager pointed out, PCRs helped program managers “model to their supervisors and social workers the urgency of permanency.”
- Everyone who attends a PCR leaves with assignments and a date to report back. This builds in an unqualified expectation that they will do the work before the follow-up meeting. When a worker was asked in December about the value of PCRs, he had a one-word answer: “Accountability.”

### The partnership between Casey and Sacramento

The Sacramento PCR project was built on collaboration between Casey and Sacramento. Casey’s Systems Improvement division had a long-term relationship with CPS, focusing on issues such as leadership, permanency, and other efforts to improve outcomes for children and families. The PCR project was an evolution of their work together over time.

Sacramento leaders are deeply appreciative of Casey’s leadership and support in both planning and implementation. “Casey has been open to hearing our concerns and helping us come to a place where we can find solutions,” said a division manager. “They push us to think at a different level.” She noted that Casey helped “lift up some of the practice and put what we’re thinking into a framework. I don’t think PCRs would have the ‘legs’ that it has today and the potential if we didn’t have the type of partnership we have with Casey.”





Adding the in-person participation of Casey’s permanency liaisons was an important solution at a critical time when program managers worried about the extra demands PCRs put on their staff. Casey leaders thoughtfully and purposefully paired each liaison with a program manager. “We looked for commonalities,” said one Casey leader. The matches worked so well that program managers joke that Casey must have discovered “a social worker eHarmony thing.”

By December 2016, the “outsiders” from Casey didn’t seem like outsiders at all, but simply members of the PCR teams. When a supervisor was asked what she thought of having a non-CPS participant in the reviews, she was baffled at first by the question and asked, “What outsider?” Then she said, “We don’t consider her an outsider anymore.” A program manager said he and his Casey liaison quickly took off the organizational labels. “It was just us working together to help social workers get permanency,” he said. “It was a genuine, organic relationship.” He added: “For me, it was a fresh set of eyes. When you’re used to doing things the same way in the same system, to have somebody from a whole different system come in, it helps to have fresh new thoughts about things.”

## Results: Data and practice change

The overall permanency data for Sacramento County are good news on which the PCR initiative can build. Federal data show that, of children in care two years or more on Oct. 1, 2013, 15.5 percent achieved permanency by September 30, 2014. The trend improved further a year later: 27.5 percent of children in care two years or longer on October 1, 2015, had achieved permanency by September 30, 2016.<sup>2</sup> These data cover far more children than those who received PCRs, but the results show that permanency *is* possible for long-term placement cases, which is right in line with the PCR philosophy and goals.

Data results for the permanency initiative itself are still a work in progress. With only 18 months of PCRs under their belt, it is early to see a major change in exits among those cases that received a review. There are many steps between identifying permanency options and closing a case in court. “We knew we weren’t going to see outcomes immediately,” said a division manager, “but we knew we could have an impact on changing the culture of our staff and their investment in permanency.”

Every change in status on the way to permanency means progress as well as potentially improved well-being for children and families. And the stories behind the data, a number of which are included in this report, show that children’s lives are changing. In Sacramento, step-downs from congregate care to a foster family and visits with newly found relatives are not legal permanency — yet — but are cause for celebration.

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<sup>2</sup>Data from the federal Adoption and Foster Care Analysis and Reporting System (AFCARS).

Step-downs also save money. Sacramento County participates in the federal IV-E waiver project, which means funds not spent on congregate care can be applied elsewhere in the system to support children and families. A CPS program manager believes that every youth who moves one step closer to permanency as a result of a PCR is likely one who, years ago, would have stayed in long-term placement.

Learning from the data is key to progress, and a division manager pointed out that CPS leaders were becoming more data-driven in their decision-making, in part as a result of this PCR initiative. Program managers identified the data elements to track over time, which included the number of PCRs held, number of cases reunified or transferred to adoption or guardianship, number of children placed with a relative or NREFM (non-related, extended family member), number of youth who stepped down to a less restrictive placement, and number of cases closed following legal permanency.

Getting this data, however, proved to be more difficult than anticipated. The first set of data covered the first year and was inconclusive and confusing. When it was presented to the PCR teams, they were “silent,” as one Casey leader reported. They felt they had experienced much more movement than they saw reflected in the data. One program manager said, “Anecdotally, we feel it was a success. For each case we touched, we offered three experienced people to help and make recommendations about permanency.” At the same time, there were 45 PCRs in the summer of 2015, said one Casey leader, and she had hoped more of these would have reached final permanency by the end of 2016.

A second data set that included 18 months of implementation was completed by the first week of January 2017 and shows more progress (Table 1). The four regional program managers each collected their own data, so there are still data limitations, but Sacramento is working on standardizing the data in the future.

In the meantime, Sacramento celebrates success where they see it. One supervisor posts pink butterflies on a wall in her office, each butterfly representing a child who has moved out of the permanency division and is on the way to finalization or whose case is closed. Some of those butterflies represent youth who had a PCR.

**Table 1. PCR outcomes data in four regions (June 2015 – December 2016)**

<b>Total number of PCRs held</b>	<b>274</b>
<b>Total children achieving legal permanency after PCR</b> (including reunification, finalized adoption, finalized guardianship)	<b>10</b>
<b>Total cases transferred to adoptions, pending finalization</b>	<b>13</b>
<b>Total cases transferred to guardianship, pending finalization</b>	<b>1</b>
<b>Total progress toward permanency outcomes after PCR</b> (including children returned home under dependent supervision, children stepping down to a lower-level placement, relative/NREFM placements, referrals to destination families, and new permanent connections)	<b>56</b>

Source: Sacramento County, Child Protective Services

### Model fidelity

There is an ongoing conversation about whether PCRs as implemented in Sacramento represent a “model.” Casey wanted to do some fidelity testing across the regional divisions within CPS, but each program manager has his or her own style of running the meetings and documenting the strategies. One holds meetings at his desk, taking notes on a paper grid; he likes the eye-level contact. Others use a white board to record ideas and next steps. In all four regions, however, the intent — legal permanency — is the same, and the lead questions asked by program managers are the same or similar. As one Casey leader noted, “There were certain things that needed to be uniform and others that didn’t. How you capture the information was one of the things left to individual preference.”

### Practice change: Spreading the message

Permanency flows through the air vents in Casey offices; staff members live and breathe permanency every day. This enthusiasm is catching on in Sacramento, with PCRs leading the way.

Long before data results show up, PCRs help social workers see their children and families with new eyes. This applies to *all* children and families on their caseload and, as a Casey permanency liaison said, “will affect far more than the small cohort of youth who have had PCRs.” A program manager noted that a discussion on the trauma of multiple placements for one child influences workers to look at their overall caseload for others who are struggling, but may be just one year into the system. What can they do now to help this child find permanency and avoid the trauma of multiple placements in the future? A permanency liaison calls this the “trickle-down effect.”

Worker turnover, in many ways a barrier to sustaining change, is widespread in Sacramento. One program manager said his entire caseworker staff had turned over in the last two years. This is a challenge, but if those workers who are leaving have experience with PCRs, they will take a new understanding of permanency to their next position. And new CPS workers and supervisors arrive in a system where permanency reviews are becoming the norm.

Everyday practice has already changed for those involved in PCRs over the past 18 months. A Casey liaison sees this when she “walks the cubicles” in Sacramento, checking in with workers and supervisors about their PCR cases. She finds them eager to talk about newly found family members or visits that have taken place. These informal conversations are also an opportunity for the liaison to offer practical advice on family engagement, which, as she explains, “can be a kind of slippery slope. You’re not sure what to say or do if a relative hangs up on you.” Family engagement after a long separation needs to be carefully managed.

## Lessons learned

Sometimes in the field of child welfare, reform efforts become the “newest, greatest thing,” only to get derailed and bogged down in details and requirements. This did not happen in the early stage of PCRs in Sacramento, and both Casey and Sacramento leaders are determined that it will not in the future. They are mindful of the teachable moments they see every day, many mentioned throughout this report. Leaders and staff interviewed for this chronicle cited the following intertwined lessons as particularly noteworthy.

### Leadership and communication

It takes sustained leadership to change a child welfare system, and it takes a changed workforce to keep it going through day-to-day emergencies and challenges. Several layers of leadership support were, and remain, critical to the success of this project, both at the systemic level and the practice level:

- Internal coordination of Casey’s work across division lines as Casey leaders learned new ways of working with each other while also working with Sacramento leaders and staff.
- Casey’s support of top CPS leaders, which included having ongoing discussions with the director and division managers about lessons learned during implementation and ensuring that PCRs would fit into the overall systemic change Sacramento was seeking.
- Frontline leadership within CPS divisions and regions, where program managers, their supervisors and workers held the PCRs and followed up on the strategies.

For the most part, both Casey and Sacramento leaders were nimble and responsive to needs as they arose. Examples cited in this report include the addition of Casey staff as permanency liaisons and assigning program managers to be the facilitators for the PCRs. However, several of the leaders interviewed for this chronicle expressed concern that the right leaders were not always at the right table when key decisions needed to be made, especially early on. When dissent arose about details of implementation in 2015 or sustainability in 2016, for example, the right people were not always in the decision-making loop.

Casey’s role as a partner reflected a dance between guidance and actively showing how the work can be done. Casey realized from the beginning that Sacramento had to own the reform and was careful not to “tell” agency leaders what to do or how to do it. At the same time, giving Sacramento staff the support they needed to fully understand and implement case reviews sometimes meant being more action-oriented. This is why putting Casey’s permanency liaisons on the ground mattered, showing CPS staff a full range of permanency options and identifying questions to ask in every review. Finding the right balance, and changing it when necessary, became the new norm as the initiative rolled out and Sacramento leaders and staff prepared to take it forward on their own.



### The risk of not achieving permanency

Asking the supervisor and worker what they believe will happen to a youth if he or she does *not* achieve permanency was a turning point in facilitation of PCRs. It came up naturally in one of the early reviews, a query from a permanency liaison, and it just caught on. This question often leads to “aha” moments when the group discusses the prospect of a young teen turning to criminal activity or being lured into sexual exploitation. It is a simple but profound question that enhances the immediacy of the work and motivates the team to keep pushing for the child. This question is now asked in almost all PCRs and can help a “stuck” case get unstuck.

### Addressing safety concerns

Social workers live with the fear that, despite everything they put in place to ensure safety, something terrible might happen to a child on their caseload. In interviews for this report, a few workers mentioned that some of the permanency options that came up in their PCRs seemed “far-fetched” or even risky. How could they consider, for example, reunifying youth with parents who had abused or neglected them and who were no longer in the picture as far as CPS was concerned?

Safety is paramount in any CPS agency and always will be. At the same time, as a division manager said, the PCR process reinforces safety with “collective, shared, collaborative decision-making.” Decisions about permanency are thoroughly considered and vetted. Safety considerations are an integral part of that discussion. Workers and supervisors do not make decisions alone. A PCR brings a deeper layer of questioning about the risk to the child, especially the risk if permanency does *not* take place. In addition, a division manager said, “We as management are going to support the decisions.”

### A focus on youth turning age 18

A number of the youth whose cases are earmarked for a PCR have been in the system for years. Some are approaching 18 and must decide quickly whether to opt out of the system or stay in care until they are 21 and continue receiving benefits. The timing of a permanency discussion with these youth is particularly urgent, as no youth should age out of foster care without a permanent home. Leaders at both Sacramento and Casey were quick to point out that 18-year-olds need permanent, adult connections as much as younger children. The information that a case review yields can speed up permanency and help the worker talk to those on the cusp of turning 18 about their options.

### Adoption

Adoption is often the first option for legal permanency when reunification with biological parents is not a possibility. Although PCRs within the CPS adoption unit itself will not be fully implemented at CPS until 2017, some children and youth who received a case review had adoption as a goal. In the past, workers focused mainly on a search for adoptive families outside the web of biological connections. Questions and discussions at the case reviews brought families and relatives back into the picture as important adoption possibilities.

## Addressing the systemic barriers to change

Practice change in child welfare usually has its share of skeptics. Some staff sit tight and do as little as possible in hopes that the reform will simply go away. In Sacramento, they applauded permanency as a goal, but program managers, supervisors, and workers interviewed for this report were initially anxious about how to wrap time-consuming reviews into their daily responsibilities. Time was an all-encompassing barrier.

To the extent that time is dictated by the size of the caseloads, the news in Sacramento was good even before the PCR initiative began. The average caseload several years ago was 40 children. Now it is approximately 30 children or fewer.

One supervisor said that when she first heard about the case reviews, her question was, “It sounds good in theory, but where’s the time going to come from?” More importantly, she added, “Will the outcome be a greater benefit than the loss of time to do the other tasks?”

Experience is beginning to show that the benefit *is* greater than the time required, and support for the case reviews is solidifying. Workers realize that quicker permanency in one case means more time for others. Ideas identified in one PCR can lead to similar ideas for other cases. PCRs start a cycle of permanency possibilities. Program managers reinforce these lessons. For example, if a worker complains about the time needed to attend an Individual Education Plan (IEP) meeting at school, the manager points out that if more family members were formally engaged in the child’s life, the worker wouldn’t have to be the one who goes to the IEP meeting.

## Looking ahead

Almost all CPS agencies across the country deal with multiple system reforms at the same time, each introduced in hopes of better serving children and families. Sacramento County is no exception to this fact of life. Permanency case reviews were introduced just as CPS completed an organizational shift to geographic regions, which brought a number of staff changes and transitions. At Casey, the Child and Family Services division adopted a new practice model. At the state level, California is mandating a major Continuum of Care reform, which goes into effect in 2017. The many elements of this reform are right in sync with the goals of permanency. Related to this, Sacramento will integrate its adoption unit with the permanency division. The PCR initiative itself may seem small in the midst of all this change, but its impact can be huge, especially once it fits seamlessly into the whole.

The juggling capacity of leaders at both Sacramento and Casey and their attention to the details of implementing PCRs become even more admirable in this context, as does their enthusiasm. One program manager is interested in introducing elements of PCRs into his unit’s regular case consultations, particularly the required meetings held prior to a child’s regular six-month court date. A supervisor likes the idea of “mini-PCRs” for *all* cases, saving the longer reviews for those that are “stuck.” At Casey, leaders are beginning to think about replication. Los Angeles County began introducing PCRs in the

last quarter of 2016 and has already held follow-up meetings on cases. Alameda County is in discussions about adding PCRs in 2017. Leaders in each county will use the lessons learned in Sacramento as a guide.

Embedding the PCR approach into day-to-day practice in Sacramento will require constant attention and a robust sustainability plan, which is currently being developed. The plan will include a focus on case selection, data-tracking and reporting, training, roles and responsibilities of CPS staff, and integrating adoption and extended foster care cases into the PCR process. Casey permanency liaisons will be phased out as monthly onsite participants in PCRs, but will likely play a role in development of the sustainability plan.

If anything attests to Sacramento's commitment to the future of the PCR process, it is that the reviews are to be integrated into the county's required training for new social workers. A division manager pointed out that this applies to *all* workers — emergency response, court services, as well as permanency — “wherever they are in the continuum of the work we do.” Given the amount of turnover at CPS, this training will be critical to keeping the focus alive.

CPS leaders never lost sight of the importance of their partnership with Casey, even when the permanency liaisons were bowing out of their regular on-site participation. In discussing plans for 2017, a CPS division manager noted with appreciation that Casey's permanency liaisons were not an indefinite gift from Casey. It was time for Sacramento leaders and staff to take it forward on their own.

In the meantime, it is important to repeat that all of the people interviewed for this report, even the early skeptics, are proud of their work so far and believe it is helping children find permanent families. “I look at PCRs as being given the opportunity to do real good grassroots social work,” said a supervisor. With PCRs, creative searches for permanent connections will become everyday business, not an “add-on” to a busy day. By participating in PCRs from the start of their tenure at CPS, new workers and supervisors will not only be infused with the *goal* of permanency, but will have practical ideas to get there. This approach will then apply to *all* of their cases. A division manager reiterates this point, noting that successful permanency efforts involve “the whole continuum, from the very first phone call that comes into our hotline.”

In Sacramento, multiple partners, including youth and families, worked at multiple levels and held the vision through the challenges of planning, early implementation, and concerns about time. A Casey leader pointed out that this PCR pilot is helping to make permanency as important a concern as daily emergencies. This new approach is, she said, what helps an agency-centric organization become a family- and child-centric organization.

Looking back at the young teen profiled in the opening of this report, we see the power of a family- and child-centric agency in action, even in complex cases with no quick answers. Three months after his initial PCR, this vulnerable adolescent remains in foster care. A relative placement he wanted has not yet taken place. The adolescent began to exhibit some old and troubling behaviors. But the attention from CPS staff on his

permanency did not lag. Since December 2016, the child's mother has re-entered the picture. The social worker has found new relatives to introduce as connections. His current foster parent has not rejected the child, holding open the possibility of a permanent connection in the future.

The PCR team continues to work on many fronts to find permanency for this youth. Giving up on him — letting him languish in foster care without permanency — is not in their worldview, even when family dynamics are difficult, which they almost always are. This is why integrating PCRs into day-to-day business is so important. Ultimately, this is why an initiative as targeted as the Sacramento-Casey PCR partnership — once fully part of the system — can have such a profound impact on outcomes for all children and families at CPS.



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