MEMORANDUM OF UNDERSTANDING Siskiyou County, California Family Urgent Response System

This Memorandum of Understanding (MOU) is entered into by and between the following parties, (SYSTEM PARTNERS), Siskiyou County Health and Human Services Agency (SCHHSA), including the Behavioral Health Division (BHD) and the Social Services Division (SSD) and the Siskiyou County Probation Department (Probation). For activities related to the Family Urgent Response System (FURS) program in Siskiyou County. This Memorandum of Understanding is entered into on the date signed by all parties to it.

WITNESSETH:

WHEREAS, the Family Urgent Response System (FURS) was established by Section 107 of Senate Bill 90 (Statutes of 2019) and amended by Assembly Bill 79 (Statutes of 2020); and

WHEREAS, Welfare and Institutions Code 16529 (a) requires county child welfare, probation, and behavioral health agencies to establish a joint county-based mobile response system; and

WHEREAS, the mobile response system must include a mobile response and stabilization team for the purpose of providing supportive services to address situations of instability, preserve the relationship of current and former foster youth and their caregivers, develop healthy conflict resolution and relationship skills, promote healing as a family and stabilize the situation.

NOW, THEREFORE, THE PARTIES MUTUALLY AGREE AS FOLLOWS:

- 1. <u>Term of MOU:</u> The MOU shall commence on July 1, 2023, and shall continue until June 30, 2024.
- 2. <u>Services:</u> In order to implement the Mobile Response System, SYSTEM PARTNERS agree to provide services in accordance with the California Department of Social Services (CDSS) approved county coordinated plan attached hereto as Exhibit "A". Furthermore, SYSTEM PARTNERS agree to the following staffing schedule.

Staffing:

Regular business hours.

The FURS Coordinator will be the Response/Stabilization Team (MRT), the lead team member.

Responding Mobile Response/Stabilization Team (MRT) members will be:

- Any available Child Welfare Services Social Worker; and
- Any available Behavioral Health Services specialist; and
- Any available probation department employee as approved by the Chief Probation Officer. Contact the front desk and ask for the Supervisor.

During regular business hours and upon receipt of a FURS Hotline Call, the FURS Coordinator will contact the CWS ER Supervisor, the BHS Clinical Services Site Supervisor, and the Probation Deputy Chief of the need for an MRT response. The respective Supervisor/Deputy Chief contacted will ensure immediate response of a staff member from their respective agency to the agreed-upon meeting location.

Evening/Weekend/Holiday hours:

Will use an on-call/standby system. As such, while on standby such employee shall remain at his/her home or any nearby location as approved by the department head or the designee and shall be ready and able to respond to duty within fifteen (15) minutes of receiving a call to duty.

On-Call/Standby MRT lead team members will rotate between the SYSTEM PARTNERS. Qualifications for MRT lead team member are:

- SSD: A supervisor or lead worker level employee.
- BHD: A Licensed Practitioner of Healing Arts.
- <u>Probation:</u> A Senior or Supervising Deputy Probation Officer, or other positions deemed appropriate by the department.

3. Compensation:

- A. In consideration for the services to be performed by SYSTEM PARTNERS, SCHHSA SSD agrees to pay BHD and Probation in proportion to services performed in accordance to Exhibit A with either;
 - i. A direct billing method
 - ii. An indirect cost rate proposal (ICRP)

Payment shall not exceed the amount appropriated by the Board of supervisors for such services for the fiscal years.

B. This MOU is valid and enforceable only if sufficient funds are made available to SCHHSA for the administration of this program. In addition, this MOU is subject to any additional restrictions or conditions enacted by Congressional or

Legislative processes, which may affect the provisions, terms, or findings of the MOU in any manner.

4. Billing:

- **A.** In consideration for the services to be performed by BHD and Probation, SCHHSA SSD agrees to pay BHD and Probation by means of a quarterly Inter-Governmental Charge (IGC). The detailed invoice, to be submitted quarterly, shall include dates of service, amounts, and detailed timesheets/FURS Activity Log. SCHHSA SSD shall pay within 30 days of receipt of invoices from BHD and Probation to SCHHSA SSD.
 - i. The invoice for FY quarters 1-3 shall be submitted within 30 days following the quarter ending of services.
 - ii. The invoice for FY quarter 4 will be as follows, April and May shall be submitted no later than June 10th. Billing for June should be submitted by July 15th.
- 5. <u>Audits:</u> It is understood that parties shall be subject to examination and audit of any records associated with the provision of services, claims to obtain funding, and payment records for a period of five (5) years after final payment under this MOU. The examination and audit shall be confined to those matters connected with the performance of this MOU including, but not limited to, the costs of administering this MOU.
- Qualifications: SYSTEM PARTNERS warrant that SYSTEM PARTNERS have the necessary qualifications, licenses, experience, and technical skills to provide services under this MOU.
- 7. Records: SYSTEM PARTNERS shall keep complete and accurate records of the services performed pursuant to this MOU and shall make such records available to SCHHSA upon request. Records shall be kept for a period of at least five (5) years after the termination of the MOU, or until all audits for compliance with terms, conditions, and specifications of the MOU are completed, whichever is later, or for a longer period of time if required by law. SYSTEM PARTNERS shall provide all information necessary for reports required by the Siskiyou County Health and Human Services Agency (SCHHSA), State, or Federal government. SYSTEM PARTNERS shall fully cooperate with SCHHSA in providing any information required by any governmental entity concerning the program or services subject to this MOU. SYSTEM PARTNERS agree to assure the confidentiality of any records that are required by law to be maintained.
- **8.** <u>Confidentiality:</u> SYSTEM PARTNERS agree to comply with and require their officers, employee, agents, volunteers, contractors, and subcontractors to comply with the provisions of Welfare and Institutions Code Section 10850 and the

California Department of Social Services; Manual of Policies and Procedures, Division 19 to assure that:

- **A.** All records concerning any applicant or participant shall be confidential and shall not be open to examination for any purpose not directly connected with the purpose of this MOU. No person shall publish or disclose, or use or permit, or cause to be published, disclosed or used, any confidential information pertaining to any applicant for or recipient of public social services.
- **B.** SYSTEM PARTNERS agree to inform all of their officers, employees, agents volunteers, contractors, and subcontractors of the provisions mandate by Welfare and Institutions Code Section 10850 and the California Department of Social Services' Manual of Policies and Procedures, Division 19, and to further inform them that any person knowingly violating the provisions of said State law is guilty of a misdemeanor.
- 9. <u>Health Insurance Portability and Accountability Act (HIPAA):</u> SYSTEM PARTNERS shall comply with, and assist SCHHSA in complying with, the privacy and security requirements of the Health Insurance Portability and Accountability Act (HIPAA), as follows:
 - A. <u>Use or Disclosure of Protected Health Information:</u> SYSTEM PARTNERS may use or disclose protected health information (PHI) to perform its obligations under the MOU, provided that such use or disclosure does not violate this Agreement, is not prohibited by the Health Insurance Portability and Accountability Act (HIPAA) including, but not limited to the provisions of Title 42, United States Code, Section 1320d et seq. and Title 45, Code of Federal Regulations (C.F.R.), Part 142, 160, 162, and 164, or does not exceed the scope of how SCHHSA could use or disclose the information.

SYSTEM PARTNERS shall not use, disclose or allow the disclosure of PHI except as permitted herein or as required or authorized by law. SYSTEM PARTNERS shall implement appropriate safeguards to prevent the use or disclosure of PHI other than as provided herein. At the request of and in the time or manner designated by SCHHSA, SYSTEM PARTNERS shall provide access to PHI in a designated record set as required by 45 C.F.R. Section 164.524. SYSTEM PARTNERS shall report to SCHHSA any use or disclosure of PHI not provided for herein or HIPAA regulations.

If SYSTEM PARTNERS provide PHI to a third party, including officers, agents, employees, volunteers, contractors, and subcontractors, pursuant to the terms of the MOU, SYSTEM PARTNERS shall ensure that the third party complies with all HIPAA regulations and the terms set forth herein.

- B. Documentation and Accounting of Uses and Disclosures: SYSTEM PARTNERS shall document any disclosures of PHI in a manner that would allow SCHHSA to respond to a request for an accounting of disclosures of PHI in accordance with 45 C.F.R. Section 164.528. SYSTEM PARTNERS shall provide SCHHSA, in a time and manner designated by SCHHSA, all information necessary to respond to a request for an accounting of disclosures of PHI.
- **C.** Amendments to Designate Record Sets: In accordance with 45 C.F.R. Section 164.526, SYSTEM PARTNERS agree to amend PHI in its possession as requested by an individual or as directed by SCHHSA.
- D. Access to Records: SYSTEM PARTNERS shall make available to SCHHSA or the Secretary of the United States Department of Health and Human Services (HHS), in the time and manner designated by SCHHSA or HHS, any records related to the use, disclosure, and privacy protections of PHI for the purpose of investigating or auditing SCHHSA's compliance with HIPAA regulations.
- E. <u>Termination of Agreement:</u> Upon SCHHSA's knowledge of a material breach of these provisions or HIPAA regulations, SCHHSA shall, at its option, either provide SYSTEM PARTNERS with an opportunity to cure the breach or immediately terminate this MOU. If SYSTEM PARTNERS are given an opportunity to cure the breach but fail to do so within the time specified by SCHHSA, SCHHSA may terminate the MOU without further notice.
- F. Destruction of PHI: Upon termination of this MOU, SYSTEM PARTNERS shall return to SCHHSA all PHI required to be retained and return or destroy all other PHI to comply with HIPAA regulations. This provision shall apply to PHI in the possession of System Partner's officers, agents, employees, volunteers, contractors, and subcontractors who shall retain no copies of the PHI. If SYSTEM PARTNERS determines that returning or destroying the PHI is not feasible, SYSTEM PARTNERS shall provide SCHHSA with notice specifying the conditions that make return or destruction not feasible. If SCHHSA agrees that the return of the PHI is not feasible, SYSTEM PARTNERS shall continue to extend the protections of this provision to the PHI for so long as SYSTEM PARTNERS or its officers, agents, employees, volunteers, contractors, or subcontractors maintain such PHI.
- **10.** Nondiscrimination: SYSTEM PARTNERS agree to the terms and conditions set forth in the "Nondiscrimination in State and Federally Assisted Programs" addendum, attached hereto as Exhibit C, and those terms and conditions are hereby incorporated into the MOU by reference.

- 11. Child Abuse and Neglect Reporting: SYSTEM PARTNERS shall comply with all state and federal laws pertaining to the reporting of child abuse and/or neglect. System Partner's officers, employees, agents, and volunteers shall report all known or suspected instances of child abuse and/or neglect to the Child Protective Services agency or other agency as required by Penal Code Section 11164 et seq.
- 12. Changes in Regulations: If SCHHSA notifies SYSTEM PARTNERS of a change in County, SCHHSA, or California Department of Social Services regulations or guidelines affecting MOU activities, SYSTEM PARTNERS shall choose one of the following options and notify the SCHHSA in writing within five (5) days of receipt of the notice as to its choice: (1) Indicate that System Partner's operations are currently in compliance with the change in regulation or guideline; (2) Indicate that SYSTEM PARTNERS are in the process of modifying operations to comply with the change and will complete these modifications and be in compliance within thirty (30) days of notification by County or SCHHSA, or (3) Notify SCHHSA of termination of the MOU or seek a modification of any terms of the MOU materially affect by a regulation or guideline change.
- **13.** <u>Termination of Funding:</u> SCHHSA may terminate this MOU in any fiscal year in that it is determined there is not sufficient funding. California Constitution Article XVI Section 18.
- **14. Notice:** Any notices required to be given pursuant to the terms and provisions herein shall be in writing and shall be sent by First Class mail to:

Social Services Siskiyou County Health and Human Services Agency

Attn: Susan Cervelli, Deputy Director, Social Services

Division

2060 Campus Drive Yreka, CA 96097 Phone: 530-841-2752

Behavioral Health Siskiyou County Health and Human Services Agency

Attn: Tracie Lima LCSW, Clinical Director

2060 Campus Drive Yreka, CA 96097 Phone: 530-841-2230

<u>Probation:</u> Siskiyou County Probation Department

Attn: Mike Coley, Chief Probation Officer

269 Sharps Road Yreka, CA 96097 Phone: 530-841-4155

- **15.** <u>Waiver:</u> No delay or failure to require performance of any provision of this MOU shall constitute a waiver of that provision or any other. Any waiver granted by a party to this MOU shall be in writing.
- **16.** Covenant: This MOU has been executed and delivered in the State of California, and the validity, enforceability, and interpretation of any of the clauses of this MOU shall be determined and governed by the laws of the State of California.
- 17. Negotiated MOU: This MOU has been arrived at through negotiation between SYSTEM PARTNERS. No SYSTEM PARTNER is to be deemed the party which prepared this MOU within the meaning of California Civil Code Section 1654. Each SYSTEM PARTNER hereby represents and warrants that in executing this MOU it does so with full knowledge of the rights and duties it may have with respect to the other. Each SYSTEM PARTNER also represents and warrants that it has received independent legal advice from its attorney with respect to the matters set forth in this MOU and the rights and duties arising out of this MOU, or that such party willingly foregoes any such consultation.
- **18.** Time is of the Essence: Time is of the essence in the performance of this MOU.
- **19.** Materiality: The SYSTEM PARTNERS consider every term, covenant, and provision of this MOU to be material and reasonable.
- **20.** <u>Authority and Capacity:</u> SYSTEM PARTNER signatories each warrant and represent that each has full authority and capacity to enter into this MOU.
- 21. Entire Agreement: This MOU supersedes all previous MOUs, agreements, and negotiations, whether written or oral, and constitutes the entire understanding of the parties hereto. SYSTEM PARTNERS shall be entitled to no benefit other than those specified herein. No changes, amendments, or alterations shall be effective unless in writing and signed by all parties. SYSTEM PARTNERS specifically acknowledge that in entering into and executing this MOU, SYSTEM PARTNERS rely solely upon the provisions contained in this MOU and no others.

IN WITNESS WHEREOF, Siskiyou County Health and Human Services Agency; Social Services Division, Behavioral Health Division, and Siskiyou County Probation Department have executed this agreement on the dates set forth below, each signatory represents that he/she has the authority to execute this agreement and to bind the Party on whose behalf his/her execution is made.

AUTHORIZED REPRESENTATIVE FOR SCHHSA, SSD, BHD, AND PROBATION:

Siskiyou County Health and Human Services Agency (HHSA)

Sarah Collard, Ph.D.	Director		
Name	Title	Signature	Date
HHSA – Behavioral	Health Division		
Tracie Lima, LCSW	Director		
Name	Title	Signature	Date
HHSA – Social Serv	vices Division		
Patricia Barbieri	Director		
Name	Title	Signature	Date
Siskiyou County Pr	obation Department	:	
Michael Coley			
Name	Title	Signature	Date
	(COUNTY OF SISKIYOU	
Date:	_	ED VALENZUELA, CHAIR Board of Supervisors	
		County of Siskiyou State of California	
ATTEST: LAURA BYNUM Clerk, Board of Supervisor	S		
Ву:	_		
Deputy			

ACCOUNTING:

Fund	Organization	Account	Activity Code (if applicable)
2120	501010	795000	8336
2122	401030	595000	8336
1001	203050	595000	8336

Encumbrance number (if applicable):

If not to exceed, include amount not to exceed: 0.01

EXHIBIT A

FURS MOBILE RESPONSE SYSTEM PLAN FRAMEWORK

The Family Urgent Response System (FURS) was established by Section 107 of Senate Bill 80 (Statutes of 2019) and amended by Assembly Bill 79 (Statutes of 2020) and requires counties to develop and implement a Mobile Response System (Welfare Institutions Code (W&IC) 16529(a)) no sooner than January 1, 2021 (W&IC 16529(e)(1)). Counties are required to submit a single, coordinated plan to the California Department of Social Services (CDSS) that describes how the county-based mobile response system shall meet the requirements described in subdivision (c) (W&IC 16529(b)). Counties may implement their plans on a per-county basis or may collaborate with other counties to establish regional, cross-county mobile response systems. For counties implementing their program pursuant to a regional approach, a single plan, signed by all agency representatives, shall be submitted to the department and a lead county shall be identified (W&IC 16529(3)). In anticipation of the implementation of the statewide hotline to occur on March 1, 2021, these plans should be submitted to CDSS by January 15, 2021.

The purpose of this document is to provide counties a framework by which to answer fundamental questions of how they plan to develop and implement their Mobile Response System. This document should be submitted to for the purposes of review and technical assistance to CDSS at FURS@dss.ca.gov.

For the purposes of this document, the definitions set forward in $\frac{\text{W\&IC 16526}}{\text{Mellowing}}$ apply, as well as the following:

- "Urgent" means an immediate, in-person, face-to-face response within one hour, but not to exceed 3 hours in extenuating circumstances. All mobile responses will be considered urgent unless a child, youth, or caregiver requests to schedule a same-day response at a specific time or window of time.
- "Non-urgent" means an in-person, same-day response within 24 hours. When a child, youth, or caregiver requests to schedule a same-day response at a specific time or window of time outside the required 3-hour timeframe, the response would be considered non-urgent.

SISKIYOU COUNTY UPDATED FURS MOBILE RESPONSE: SINGLE-COUNTY COORDINATED PLAN

1. County Member(s) of Mobile Response System: (For counties that take a regional approach, what counties are members and which county will be the lead county? A lead county must be identified in the single, coordinated plan.)

Lead Agency: Siskiyou County Health and Human Services

Core Members of the Siskiyou County Mobile Response System (MRS):

- Siskiyou County Adult and Children's Services-Child Welfare Services (CWS)
- 2. Siskiyou County Behavioral Health Services (BHS)
- 3. Children's System of Care (CSOC) (Under the age of 18)
- 4. Adult System of Care (ASOC) (Youth ages 18 and over)
- 5. Siskiyou County Probation Department

Optional Members of the Siskiyou County Mobile Response System (If applicable to youth in crisis):

- Representatives from Children's First Foster Family Agency (CFFFA)
- 2. Local tribal community representatives (Karuk and Quartz Valley Tribes)
- 3. Peer partners (consisting of current or former foster parents and current or former foster youth.)
- a. For counties that take a regional approach, what will be the governance structure used (Joint Powers Agreement, Memorandum of Understanding, etc.)? (How will decisions be made?)
 N/A

A. COMMUNICATIONS

- a. Modes of Communication:
 - **1.** Phone number for Mobile Response System: 833-939-3877
 - 2. How will the Mobile Response System be made available 24 hours per day and 7 days per week? (Will the Mobile Response System have staff available at a physical location to handle the warm handoff and facilitate entry into mobile

response services? Will an on-call system be utilized?)

Utilizing staff on-call system and schedule, Siskiyou County's MRS will be available and active 24 hours per day/7 days per week, to receive calls from the State hotline and deploy a mobile response team (MRT).

3. What forms of electronic communication will the Mobile Response System support? (*Text, email, direct message/chat, etc.; Provide contact information for applicable methods of additional communication.)*

Text:

✓ E-Mail: siskiyoufurs@co.siskiyou.ca.us

Chat:

Other:

b. Coordinating a Warm Handoff with the Statewide Hotline:

1. Will the Mobile Response System contract with a community-based organization(s) or use county staff to act as the county/region single contact for warm handoff and mobile response and stabilization teams? (If contracting, identify name and contact information for organization.)

Siskiyou County will use county staff for both the county single contact for the warm handoff and to serve as the Mobile Response Team (MRT). Upon future evaluation, the Siskiyou County MRS may explore using other contracted resources in the future

2. What methods will the Mobile Response System employ to maintain a three-way warm handoff between the Statewide Hotline, the caller, and the Mobile Response System? (County mobile response systems should utilize the information provided by the statewide hotline during the warm hand off to determine which mobile response team members should respond inperson.)

Siskiyou County will ensure 24 hour per day/7 day a week staffing for timely receipt of all calls.

Upon receiving the call from the state hotline, the county point of contact "Lead Team Member" (On Call Supervisor/Lead Worker (after hours/weekends) or the FURS coordinator (normal business hours) will gather the information from the state hotline and the caller necessary to deploy the MRT.

3. What will the process be to ensure a team is sent out quickly once the warm handoff is made?

Siskiyou County will have a dedicated team available on standby 24 hours day/7 days per week. While on standby status such employee shall remain at their home, or any nearby location approved by their Department Head or the designee, and those standby workers shall be ready and able to respond within fifteen (15) minutes of receiving a call to duty.

All in-person responses will be made within one hour, with response time not exceeding 3 hours. Any extraordinary circumstances that prevent a response within 3 hours (disasters, weather/road closures, etc.) will be thoroughly documented and reviewed by the MRS to assess and create contingency plans to avoid delays in the future.

4. How will the Mobile Response System utilize the information provided in the warm handoff about the individualized circumstances presented to determine which team members should be sent out?

Urgent Responses: A member from each Core Team Agency (CWS, Probation and BHS) will respond to all calls. Optional Core Team members will be contacted and requested for response based on known involvement with the youth, or need of specific services (i.e. cultural) at time of response.

Non-Urgent Responses: Based on the information received during the warm hand off, and further information gathered by the Lead Team Member, response members will be assigned, taking into consideration: nature of crisis, current services to the youth, and current service provider status.

B. MOBILE RESPONSE TEAM

a. Team Composition Considerations:

1. How many mobile response teams are needed for the local geographic area (county or region) to ensure a team is always available to respond within the required timeframes, including in the event of multiple families needing a mobile response simultaneously?

Siskiyou County will establish one MRT. As a small rural county, we do not anticipate a high volume of calls at one time. In the event there is more than one call requiring response, the CPS social worker on call, an alternate BHS team member and probation team member will serve as back up to respond.

2. Where will these teams be located? (Will mobile response and stabilization team members be available at that same physical location?)

Siskiyou County will be utilizing an on call/stand by system for the MRT. As such, while on standby such employee shall remain at his/her home or any nearby location approved by the department head or the designee and shall be ready and able to respond to duty within fifteen (15) minutes of receiving a call to duty. All MRT members will meet at a designated location and respond together to the youth's location.

*Due to the large geographic area of Siskiyou County, the meeting location will be determined by the location and/or residence of the youth and the home locations of the standby staff after hours. The Lead Team Member will specify a meeting location when activating the MRT members. This will avoid further delays in response times.

During regular business team members will be located at various county offices in Yreka to include:

CWS/BHS staff: 2060 Campus Drive, Yreka, CA
 Probation staff: 805 Juvenile Lane Yreka, CA or 269 Sharps Road, Yreka, CA.

3. What will the qualifications of the lead team member be?

Siskiyou County will ensure:

- Lead team members meet the minimum qualifications established by CDSS;
- Lead team members from CWS will be a supervisor or lead worker level employee All lead team members will meet the requirements for their supervisory or lead worker job description;
- Lead team members from BHS will have an LPHA available training/qualifications consistent and required for their licensure; and
- Lead Team Members from Probation will be a Senior or Supervising Deputy Probation Officer, or higher.
- **4.** How many staff will be on each team?

Siskiyou County will have a minimum of three persons on a <u>responding team</u> and one lead member. The lead member will take the call and dispatch the responding team and will be available to provide support and direction to the team.

- **5.** What team roles need to be filled?
 - a) Lead team member (supervisor/lead worker).
 - b) Mobile Response and Stabilization team members.
 - CWS team members will be Social Worker II, III, or IV, or Social Worker I, Social Worker Assistant as approved by the Program Manager.
 - BHS team members will be BHS Specialist I & II.
 - Probation team members will be any department member approved by the Chief Probation Officer.
 - c) FURS Coordinator
 - Minimum qualifications of Social Worker III or equivalent.
- **6.** What will staffing shifts look like?

Shifts will be scheduled in one week increments for both the lead team member and MRT members.

Regular business hours:

During regular business hours. The FURS Coordinator will be the MRT lead team member.

During regular business hours, responding MRT members will be any available CWS social worker, BHS specialist, and any available sworn probation officer.

During regular business hours, the FURS Coordinator will immediately notify the CWS FURS Supervisor, the BHS CSOC Supervisor and the Probation front desk (ask for the available Supervisor) of the need for a FURS responder. The respective Supervisor/Deputy Chief contacted will ensure immediate response of a staff member from their respective agency to the meeting location.

Evening/Weekend/Holiday hours:

Siskiyou County will utilize an on call/standby system. As such, while on standby such employee shall remain at his/her home or any nearby location approved by the department head or the designee and shall be ready and able to respond to duty within fifteen (15) minutes of receiving a call to duty.

7. How many employees will be on shift at one time?

A minimum of four people will be on shift at one time.

a. How will the Mobile Response System address staffing needs during times of peak activity?

Siskiyou County being a small rural county, we do not

expect to have a high volume of calls at one time. However, if necessary, the CPS social worker on call, available alternate BH specialist, and any available eligible probation department members will provide back up to the MRT.

b. How will the Mobile Response System define peak activity?

Siskiyou County being a small rural county, we do not anticipate a high volume of calls occurring at once therefore, high peak activity would consist of more than one call at a time.

c. Will additional staff be available on-call if additional mobile responses are required?

Siskiyou County being a small rural county, we do not expect to have a high volume of calls at one time. However, if necessary, the CPS social worker on call, available alternate BH specialist, and any available eligible department member for probation will provide back up to the county mobile response team.

8. What will be the minimum education and other background requirements, if any, of members of the teams? How does this differ for different roles? (Will members of the team need to have a certain amount of prior experience working with children and families or with the child welfare population?)

Siskiyou County will ensure team members meet the minimum qualifications established by CDSS.

All team members will meet the minimum educational, training and experience requirements for the position held within their department.

Members will be trained in de-escalation skills and will receive multi-cultural competency training to ensure a culturally appropriate response. Team members will participate in motivational interviewing techniques to help motivate the family toward healing.

- **9.** How will the Mobile Response System incorporate peer partners and those with lived experience in the response team, whenever possible?
 - **a.** What background clearances, education requirements, and other qualifications must peer partners have?

Siskiyou County will engage peer partners during the

required 72-hour follow-up, specifically utilizing the BHS Family Partner Peer Program. Family Partner Peers must meet minimum qualifications to be employed through Siskiyou County's BH Family Partner Peer Program and receive the appropriate fingerprint clearance.

10. How will the Mobile Response System ensure the cultural competency of staff (including peer partners)?

All MRT members will adhere to the training requirements of their respective area and job assignments.

BH Peer Partners follow all cultural competence trainings and are required to complete 4 hours of training per fiscal year.

11. What training will be provided to staff and peer partners? (What will be the qualifications of those developing and conducting trainings? Will trainings be experiential based? How will the Mobile Response System ensure peer partners also receive trainings?)

Siskiyou County will ensure all team members and peer partners adhere to the training requirements established by CDSS. All staff members will adhere to the training requirements of their respective areas.

Peer Partners are required to complete the formal peer training through the Wise University training program.

a. What trainings will the county or region of counties utilize to ensure staff received specialized training in trauma of children and youth and the foster care system?

All training will be provided by U.C. Davis or other CDSS approved providers to provide required CDSS trainings.

The team will receive trauma informed care training through an evidence based online training platform such as Relias Training.

b. How many hours of training will be provided and required of staff (including peer partners) at the start of employment?

Siskiyou County will comply with all CDSS training requirements.

All peers receive 3 weeks of intensive peer training

through the Wise University workforce integrations support and education.

- **c.** What training topics will be covered?
 - i. Trauma Informed services
 - ii. Motivational Interviewing
 - iii. De-escalation techniques
 - iv. Any other topic specified by CDSS for MRT members
- **d.** How many hours of training will be required on a yearly or ongoing basis?

A minimum of 12 hours per year, or as determined by CDSS. Siskiyou County is committed to ensuring all CDSS established training requirements are met.

12. Describe how the Mobile Response and stabilization teams will provide supportive services in the least intrusive and most family friendly manner to avoid triggering further trauma to the child or youth.

The MRT will provide supportive services using the following guidelines to avoid triggering further trauma:

- a) **Strength-based**: Focusing on the strengths of the caregiver and child/youth.
- b) Community based: Providing services in the least restrictive setting possible. Peer support is an important component of this area.
- c) Trauma sensitive: Respond to the crisis through the lens of trauma exposure, emphasizing physical, psychological, and emotional safety for both the caregiver and child/youth. Help to create opportunities for individuals to build a sense of control and empowerment.
- d) **Culturally competent**: Being respectful of the cultural needs of diverse individuals including age, gender, sexual orientation, disability, religion, income level, education and geographical location.
- e) **Coordinated**: Provide supportive linkage services with emphasis on individualized services across providers and systems available.

b. In-Person Response

1. What process will the Mobile Response System use to determine the appropriate response for each call?

Upon receipt of a call from the State hotline, the lead team member will gather all necessary information and deploy the MRT when directed by the State hotline worker.

a. How will it be decided whether the responding team needs to include a clinician?

A clinician will be available via phone if the MRT determines such services are required. The clinician may respond in person when necessary.

b. When will peer partners or non-clinical staff be sent as part of the response team?

All MRT members will be non-clinical staff.

- The CWS team members will be Social Worker II,
 III, or IV, or Social Worker I, Social Worker
 Assistant as approved by the Program Manager.
- ii. BHS team members will be BHS Specialist I or II.
- iii. Probation team members will be any eligible department member.
- iv. Peer partners may be utilized on non-urgent calls.
- **c.** How will it be determined how many staff should respond as part of a team?

The MRT will be comprised of a minimum of three responders for each call requiring an in-person response. Additional team members will be assigned to respond based on needs and risks identified during the warm hand off or other information known about the youth/situation from current providers.

2. How will the Mobile Response System ensure the mobile response and stabilization team(s) are available 24 hours per day and 7 days per week to provide urgent response and respond to non-urgent situations?

Siskiyou County will utilize an on call/stand by system for the mobile response and stabilization team. As such, while on standby such employee shall remain at their home or any nearby location approved by their Department Head or the designee and shall be ready and able to respond to duty within fifteen (15) minutes of receiving a call to duty.

3. At a minimum, how many individuals will go out in-person when in-person support is needed? (Having at least 2 people respond to provide in-person support ensures one team member can meet individually with the caregiver while another team member meets with the child or youth.)

The MRT will be comprised of a minimum three responders for each in-person response.

4. How will the response protocols ensure protections for children and youth to prevent placements into congregate care settings, psychiatric institutions, and hospital settings whenever possible?

The MRT will use evidence-based trauma-informed techniques, motivational interviewing skill building, and conflict resolution to help ensure protections for children and youth to prevent disruption of placement whenever possible.

- **5.** Describe how the Mobile Response System will be able to provide in-home, de-escalation, stabilization, and support services, including all of the following:
 - a. In-person, face-to-face contact.

A multiple agency MRT will respond in person to all calls within the county. All team members will meet in a central location and respond to the youth/location. All COVID precautions and state recommendations for inperson contact will be followed.

b. Identifying underlying causes and precursors that led to instability.

During the warm handoff call, the MRT lead worker will utilize the assessment made by the state hotline worker. The MRT will use trauma-informed and motivational interviewing techniques to assist in determining the underlying causes and precursors that lead the instability, help stabilize the family and develop a temporary action plan. The MRT will utilize any other assessment tools developed by CDSS for FURS response.

c. Identifying the caregiver interventions attempted.

The MRT lead worker will gather information from the state hotline's assessment. Upon arrival, one MRT member will meet with the caregiver to discuss the incident, determine interventions that have been successful/unsuccessful.

d. Observing the child/youth and caregiver interaction.

With three MRT members responding to each call, there will be a team member available to meet with the caregiver, a team member available to meet with the child/youth and a third team member available to observe the interactions of all parties or address any other needs. Each team member will be trained in observation techniques.

e. Defusing the immediate situation.

Team members will use strength based interviewing skills and de-escalation techniques to discuss and help to defuse the immediate situation. Team members will be mindful and respectful of cultural differences presented during the in-person visit.

f. Coaching to maintain the current living situation or to create a healthy transition plan, if necessary.

The MRT will model and coach strength-based communication with the caregiver and child/youth during the in-person visit. Healthy interaction will be utilized to maintain the current placement. If a transition plan is necessary, team members will work to ensure modeling and coaching continues throughout the process.

g. Establishing connections to community-based supports including, but not limited to, linkage to additional traumainformed and culturally and linguistically responsive family supportive services and youth and family wellness resources.

The MRT will inquire with the family which services are currently being used and other types of services that might be needed. A peer partner, the FURS coordinator or another team member designated during the CFT will work with the family to ensure referrals are made to supportive services.

h. Follow up response within 72 hours:

The FURS coordinator will:

- i. Make in-person or telephonic contact with the family.
- ii. Notify the case carrying CWS SW/ PO or current mental health provider.
- iii. Schedule a MRS Action Team meeting, notifying all parties as identified earlier in the plan.
- iv. Schedule a CFT meeting; the family and members of the MRS team will participate in the CFT.

During the 30-45 day follow-up the FURS Coordinator will:

- i. Conduct weekly in-house visits.
- ii. Identify the caregiver interventions attempted.
- iii. Gather information from the state hotline's assessment. FURS Coordinator will meet with the caregiver to discuss the incident, determine interventions that have been successful/unsuccessful.
- iv. Observe the child/youth and caregiver interaction.
- v. Coaching to maintain the current living situation or to create a healthy transition plan, if necessary.
- vi. Establish connections to community-based supports including, but not limited to, linkage to additional responsive family supportive services and youth and family wellness resources.
- i. Identifying additional support needs and making a plan for, or referral to, appropriate youth and family supportive services within the county.

The FURS coordinator will ensure referrals are made to the supportive services identified by caregiver and child/youth.

C. DATA: TRACKING AND REPORTING

1. How will the county or region of counties track and monitor communications?

Siskiyou County will adhere to all CDSS requirements for data tracking. The web version of the FURS Summary Report Survey will be utilized for data tracking purposes. The FURS Coordinator has developed a spreadsheet log of incidents and incident files to capture pertinent data for each call/visit. The incident file will consist of all forms and documents related to the incident. Forms are available for all team members to access with mobile technology.

2. How will the county or region of counties collect and maintain data,

including, at a minimum, data required to be reported to the State for aggregate reporting?

Siskiyou County will develop an intake form for the lead team member to complete during the three-way phone call with the state hotline worker.

This form will collect information regarding:

- a) The parties involved.
- b) Location.
- c) County departments the parties are currently utilizing.
- d) The type of placement.
- e) Any safety concerns for involved parties or responding team members (i.e. dogs).
- f) Call urgency determination.
- g) MRT deployed.
- h) Any other initial data required by CDSS for collection.

The mobile response team responding to a home will complete a MRT report form regarding the visit including notes from interviews with the caregiver and child/youth; supportive services identified by the parties involved, resolutions or temporary solutions reached during the visit.

All data collected will be entered into a county developed spreadsheet or database or a designated system identified by CDSS.

a. What data does the county plan to collect to help monitor the effectiveness of services and supports and outcomes?

Siskiyou County will collect the following information:

- i. The number of caregivers served, placement type and status as either a current or former foster caregiver.
- ii. The number of current or former foster care children/youth served.
- iii. Any county agency type the child/youth may be associated with.
- iv. Status as current or former foster care child
- v. Age.
- vi. Gender.
- vii. Race.
- viii. Who initiated the call; the caregiver or the child/youth.
- ix. The disposition of the call: Urgent or non-urgent.
- x. Placement stability.
- xi. Return to Foster Care.
- xii. Movement from child welfare to juvenile justice.
- xiii. Timeliness to permanency.
- **b.** How will the data be collected and stored?

Data will be collected during intake calls, interviewing and follow up. All data will be stored either in a county developed spreadsheet log and incident file or a CDSS system.

3. How will the Mobile Response System report data back to the Statewide Hotline?

FURS Summary Report Survey.

4. How will the Mobile Response System report data back to the CDSS? FURS Summary Report Survey.

D. Coordination with Existing Providers

1. How will the Mobile Response System communicate with the county of jurisdiction of a child or youth who is a current foster youth regarding the service needs of the child or youth and caregiver?

Siskiyou County will develop a form to be used to provide the current social worker in the county of jurisdiction information regarding a MRS Team visit including identified services or actions necessary. The FURS coordinator will email the completed form to the appropriate social worker or probation officer and will follow up with a call phone.

a. How will the Mobile Response System communicate with the county behavioral health agency regarding the service needs of the child or youth and caregiver?

A MRS Action Team will be established, the team will consist of the FURS coordinator and a minimum of one team member from the CWS, BHS, Probation department, and a Tribal representative (as appropriate). The team will meet the following business day after a MRT response, to share information and determine which department will take the lead on the follow-up. Notes from the MRS Action Team will be sent to:

- i. CWS (Screener, Emergency Response Supervisor and any assigned Social Worker.
- ii. Probation (Deputy Probation Officer and any assigned Deputy Probation Officer)
- iii. BHS (CSOC Supervisor and any assigned mental health provider)
- iv. All responding MRT members.

All follow up activities will be reported to the FURS coordinator regardless of which department takes the lead, for data collection purposes utilizing the MRT Follow Up Report (to be developed)

2. How will the Mobile Response System identify if the child or youth has an existing Child and Family Team?

During the MRS Action Team meeting, services identified or suggested during MRS team response will be shared. All services recommended will be in coordination with CFT and serve as enhancements to any plan currently in place.

a. How will the Mobile Response System coordinate with Child and Family Teams to address instability, and plan for ongoing care to support the relationship in a trusting and healing environment?

During the MRS Action Team meeting this information will be shared. Services identified or suggested will be communicated with treating providers to continue to build on existing relationships. If the child/youth is not a current foster/probation youth, and does not have a current BHS provider, the FURS coordinator will be the consistent contact with the family to build trust and consistency in coordination with the CFT and ensure provision of services.

3. How will the Mobile Response System identify if the child or youth has an existing behavioral health treatment plan or placement preservation strategy?

During the in-person visit, the BHS MRT member will inquire about Behavioral Health services and will obtain consent to share necessary treatment information with the team. This information will be shared during the MRS Action Team meeting. All services offered to caregivers and child/youth will be coordinated to enhance any treatment or placement strategy.

a. How will the Mobile Response System coordinate services consistent with that plan or strategy?

This information will be shared during the MRS Action Team meeting. All services offered to caregivers and the child/youth will be coordinated to enhance any treatment or placement preservation strategy.

The FURS coordinator will collaborate and track all referrals and follow up with treatment providers and CFT members to ensure the placement preservation strategies are carried out.

E. FOLLOW-UP

 Describe how the Mobile Response System will transition child/youth and families from mobile response and stabilization services to ongoing services.

In addition to the required 72-hour follow-up, the CWS Social Worker,

Probation Officer, assigned mental health provider or FURS coordinator will ensure weekly contact for the first 30-45 days with the child/youth.

The FURS coordinator will work with the RFA social worker or the FFA to ensure follow-up is occurring with the caregiver.

The FURS Coordinator will follow up with the youth/family and all providers at the 45- and 60-day mark to ensure continued stability and gather data.

2. What services will the Mobile Response System utilize to support the mobile response efforts and stabilization services?

The MRS team will work closely with our various community partners and service areas to provide supportive services for both caregivers and the child/youth.

These community partners include:

- a) First 5 Siskiyou
- b) Family Resource Centers
- c) Children's First Foster Family Agency
- d) Siskiyou County Office of Education
- e) Siskiyou Domestic Violence
- f) College of the Siskiyous- Kinship Support programs
- g) Siskiyou Parenting Coalition
- h) Big Brother/Big Sister Program
- i) YMCA
- j) Heal Therapy
- k) Siskiyou Child Care Council; and/or
- I) Siskiyou County BHS Substance Use Disorders (SUD) services.

a. Outreach & Advertisement:

- 1. How will the Mobile Response System message information in conjunction with information disseminated about the hotline and FURS broadly to the community and to caregivers, youth, and children?
 - a) The assigned Siskiyou County RFA social worker will ensure all RFA families are provided CDSS designed information during their orientation.
 - b) FFA's will be provided CDSS designed information to distribute to their homes.
 - c) Child and youth will be provided information at their initial intake and with their "Know Your Rights" information.
 - d) CDSS designed information will be provided at appropriate community events.
 - e) FURS information will be posted on agency and department

social media accounts and webpages.

F. Adapting to COVID-19 Impacts

1. Although counties must develop a single, coordinated plan that explains how their Mobile Response Systems will meet the requirements of AB 79, these systems can be temporarily adapted to address circumstances associated with COVID-19, consistent with the Governor's Proclamation of a State of Emergency, issued on March 4, 2020. What temporary adaptations does the Mobile Response System anticipate needing during the COVID state of emergency?

Siskiyou County will follow all State and County public health issued protocols. Additionally, Siskiyou County will follow guidelines established in ACL 20-130 published 11/23/20 and all subsequently released ACL's/ACIN's.

Signature (Lead Representative):

(Date)
(Date)
(Date)