

AMENDED IN ASSEMBLY AUGUST 11, 2000

AMENDED IN ASSEMBLY JUNE 20, 2000

AMENDED IN SENATE APRIL 25, 2000

AMENDED IN SENATE APRIL 5, 2000

**SENATE BILL**

**No. 1452**

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**Introduced by Senators Wright and Chesbro**

February 8, 2000

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An act to amend Sections 5851, 5852.5, 5855.5, 5857, 5859, 5860, 5863, 5865, 5866, 5869, and 5880 of, and to add Sections 5856.2 , 5865.1, and 5865.3 to, the Welfare and Institutions Code, relating to child care.

LEGISLATIVE COUNSEL'S DIGEST

SB 1452, as amended, C. Wright. Child welfare: mental health.

Existing law, the Children's Mental Health Services Act, authorizes the State Department of Mental Health to enter into annual performance contracts with participating counties for the delivery of mental health services to a target population defined as "seriously emotionally disturbed children." Existing law states the Legislature's intent that 100% of newly appropriated funds be dedicated to this target population.

Existing law specifies the criteria to be contained in the county program proposal and imposes additional requirements on participating counties after receiving state funds. Under existing law, the program procedures under the

act include the award of funds to counties through a request for proposal bids process.

This bill would specify that eligible children also include, within the defined target population, those children that are referred by collaborating programs and that are within the definition of “seriously emotionally disturbed children.” This bill would state the Legislature’s intent that 100% of newly appropriated funds be dedicated to this expanded target population.

The bill would state the Legislature’s intent that participating counties be required to permit family members of a child receiving services to be involved in the county’s program planning and design as well as the development of individual child treatment plans. This bill would also designate the age groups participating counties would be required to serve, given the available resources.

This bill would revise the program procedures under the act to implement instead a request for applications for funding process, to require the department to negotiate with counties to establish appropriate evaluation measures, and to require the department to audit and monitor use of children’s system of care program funds.

This bill would require additional criteria, such as protocol development and program performance outcome distribution, to be contained in the county proposal. It would require participating counties to consult with family advocacy groups, have a plan to ensure that mental health services are planned to complement and coordinate with existing federal and state services, and meet other requirements within 3 years after receiving state funds. It would also revise program performance goals, require additional information to be included in annual performance contracts, and would require a county system of care serving defined age groups of children to make specified services available, to the extent possible, and, if not available, to identify a timeline for the development of these services.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.



*The people of the State of California do enact as follows:*

1 SECTION 1. Section 5851 of the Welfare and  
2 Institutions Code is amended to read:

3 5851. (a) The Legislature finds and declares that  
4 there is no comprehensive county interagency system  
5 throughout California for the delivery of mental health  
6 services to seriously emotionally and behaviorally  
7 disturbed children and their families. Specific problems  
8 to be addressed include the following:

9 (1) The population of children which should receive  
10 highest priority for services has not been defined.

11 (2) Clear and objective client outcome goals for  
12 children receiving services have not been specified.

13 (3) Although seriously emotionally and behaviorally  
14 disturbed children usually have multiple disabilities, the  
15 many different state and county agencies, particularly  
16 education, social services, juvenile justice, health, and  
17 mental health agencies, with shared responsibility for  
18 these individuals, do not always collaborate to develop  
19 and deliver integrated and cost-effective programs.

20 (4) A range of community-based treatment, case  
21 management, and interagency system components  
22 required by children with serious emotional disturbances  
23 has not been identified and implemented.

24 (5) Service delivery standards that ensure culturally  
25 competent care in the most appropriate, least restrictive  
26 environment have not been specified and required.

27 (6) The mental health system lacks accountability and  
28 methods to measure progress towards client outcome  
29 goals and cost-effectiveness. There are also no  
30 requirements for other state and county agencies to  
31 collect or share relevant data necessary for the mental  
32 health system to conduct this evaluation.

33 (b) The Legislature further finds and declares that the  
34 model developed in Ventura County beginning in the  
35 1984–85 fiscal year through the implementation of  
36 Chapter 1474 of the Statutes of 1984 and expanded to the  
37 Counties of Santa Cruz, San Mateo, and Riverside in the  
38 1989–90 fiscal year pursuant to Chapter 1361 of the



1 Statutes of 1987, provides a comprehensive, interagency  
2 system of care for seriously emotionally and behaviorally  
3 disturbed children and their families and has successfully  
4 met the performance outcomes required by the  
5 Legislature. The Legislature finds that this accountability  
6 for outcome is a defining characteristic of a system of care  
7 as developed under this part. It finds that the system  
8 established in these four counties can be expanded  
9 statewide to provide greater benefit to children with  
10 serious emotional and behavioral disturbances at a lower  
11 cost to the taxpayers. It finds further that substantial  
12 savings to the state and these four counties accrue  
13 annually, as documented by the independent evaluator  
14 provided under this part. Of the amount continuing to be  
15 saved by the state in its share of out-of-home placement  
16 costs and special education costs for those counties and  
17 others currently funded by this part, a portion is hereby  
18 reinvested to expand and maintain statewide the system  
19 of care for children with serious emotional and behavioral  
20 disturbances.

21 (c) Therefore, using the Ventura County model  
22 guidelines, it is the intent of the Legislature to accomplish  
23 the following:

24 (1) To phase in the system of care for children with  
25 serious emotional and behavioral problems developed  
26 under this part to all counties within the state.

27 (2) To require that 100 percent of the new funds  
28 appropriated under this part be dedicated to the targeted  
29 population as defined in Sections 5856 and 5856.2. To this  
30 end, it is the intent of the Legislature that families of  
31 eligible children be involved in county program planning  
32 and design and, in all cases, be involved in the  
33 development of individual child treatment plans.

34 (3) To expand interagency collaboration and shared  
35 responsibility for seriously emotionally and behaviorally  
36 disturbed children in order to do the following:

37 (A) Enable children to remain at home with their  
38 families whenever possible.

39 (B) Enable children placed in foster care for their  
40 protection to remain with a foster family in their



1 community as long as separation from their natural family  
2 is determined necessary by the juvenile court.

3 (C) Enable special education pupils to attend public  
4 school and make academic progress.

5 (D) Enable juvenile offenders to decrease delinquent  
6 behavior.

7 (E) Enable children requiring out-of-home  
8 placement in licensed residential group homes or  
9 psychiatric hospitals to receive that care in as close  
10 proximity as possible to the child's usual residence.

11 (F) Separately identify and categorize funding for  
12 these services.

13 (4) To increase accountability by expanding the  
14 number of counties with a performance contract that  
15 requires measures of client outcome and cost avoidance.

16 (d) It is the intent of the Legislature that the outcomes  
17 prescribed by this section shall be achieved regardless of  
18 the cultural or ethnic origin of the seriously emotionally  
19 and behaviorally disturbed children and their families.

20 SEC. 2. Section 5852.5 of the Welfare and Institutions  
21 Code is amended to read:

22 5852.5. The department shall review those counties  
23 that have been awarded funds to implement a  
24 comprehensive system for the delivery of mental health  
25 services to children with serious emotional disturbance  
26 and to their families or foster families to determine  
27 compliance with either of the following:

28 (a) The total estimated cost avoidance in all of the  
29 following categories shall equal or exceed the applications  
30 for funding award moneys:

31 (1) Group home costs paid by Aid to Families with  
32 Dependent Children-Foster Care (AFDC-FC) program.

33 (2) Children and adolescent state hospital and acute  
34 inpatient programs.

35 (3) Nonpublic school residential placement costs.

36 (4) Juvenile justice reincarcerations.

37 (5) Other short- and long-term savings in public funds  
38 resulting from the applications for funding award  
39 moneys.



1 (b) If the department determines that the total cost  
2 avoidance listed in subdivision (a) does not equal or  
3 exceed applications for funding award amounts, the  
4 department shall determine that the county that has been  
5 awarded funding shall achieve substantial compliance  
6 with all of the following goals:

7 (1) Total cost avoidance in the categories listed in  
8 subdivision (a) to exceed 50 percent of the applications  
9 for funding award moneys.

10 (2) A 20-percent reduction in out-of-county ordered  
11 placements of juvenile justice wards and social service  
12 dependents.

13 (3) A statistically significant reduction in the rate of  
14 recidivism by juvenile offenders.

15 (4) A 25-percent reduction in the rate of state  
16 hospitalization of minors from placements of special  
17 education pupils.

18 (5) A 10-percent reduction in out-of-county nonpublic  
19 school residential placements of special education pupils.

20 (6) Allow at least 50 percent of children at risk of  
21 imminent placement served by the intensive in-home  
22 crisis treatment programs, which are wholly or partially  
23 funded by applications for funding award moneys, to  
24 remain at home at least six months.

25 (7) Statistically significant improvement in school  
26 attendance and academic performance of seriously  
27 emotionally disturbed special education pupils treated in  
28 day treatment programs which are wholly or partially  
29 funded by applications for funding award moneys.

30 (8) Statistically significant increases in services  
31 provided in nonclinic settings among agencies.

32 (9) Increase in ethnic minority and gender access to  
33 services proportionate to the percentage of these groups  
34 in the county's school-age population.

35 SEC. 3. Section 5855.5 of the Welfare and Institutions  
36 Code is amended to read:

37 5855.5. (a) Projects funded pursuant to Part 4  
38 (commencing with Section 5850) of Division 5, as added  
39 by Chapter 89 of the Statutes of 1991, shall continue under  
40 the terms of this part.



1 (b) The department shall negotiate with each  
2 participating county to establish appropriate evaluation  
3 measures for the county's children's system of care  
4 program after the initial three-year implementation  
5 funding period as established in Section 5854. The  
6 department shall, on an annual basis, negotiate a  
7 performance contract with each county electing to  
8 continue its children's system of care program. The  
9 annual performance contract shall be consistent county  
10 to county, and shall include, but not be limited to, a scope  
11 of work plan consistent with the provisions of this part and  
12 shall contain a budget that has sufficient detail to meet  
13 the requirements of the department.

14 SEC. 4. Section 5856.2 is added to the Welfare and  
15 Institutions Code, to read:

16 5856.2. (a) Eligible children shall include seriously  
17 disturbed children who meet the requirements of Section  
18 5856 and who are referred by collaborating programs,  
19 including wrap-around programs (Chapter 4  
20 (commencing with Section 18250) of Part 6 of Division 9),  
21 Family Preservation programs (Part 4.4 (commencing  
22 with Section 16600) of Division 9), Juvenile Crime  
23 Enforcement and Accountability Challenge Grant  
24 programs (Article 18.7 (commencing with Section 749.2)  
25 of Chapter 2 of Part 1 of Division 1), programs serving  
26 children with dual diagnosis including substance abuse or  
27 whose emotional disturbance is related to family  
28 substance abuse, and children whose families are enrolled  
29 in CalWORKs (Chapter 2 (commencing with Section  
30 11200.5) of Part 3 of Division 9).

31 (b) Counties shall ensure, within available resources,  
32 that programs are designed to serve young children from  
33 zero to five years of age, inclusive, their families, and  
34 adolescents in transition from 15 to 21 years of age,  
35 inclusive.

36 SEC. 5. Section 5857 of the Welfare and Institutions  
37 Code is amended to read:

38 5857. (a) The State Department of Mental Health  
39 shall issue a request for applications for funding for new  
40 children's system of care programs to nonparticipating



1 counties in each year that additional funds are provided  
2 for statewide expansion pursuant to this part.

3 (b) Applications shall be submitted to the department  
4 by a county mental health department with joint  
5 approval of collaborating local agencies including, but not  
6 limited to, special education, juvenile court, probation,  
7 child protective services agencies, the board of  
8 supervisors, and the mental health advisory board.

9 (c) Program staff from the department shall review all  
10 applications for funding for compliance with all  
11 requirements of law and the application guidelines  
12 established by the department.

13 (d) The department may accept letters of intent from  
14 a county in lieu of an application if moneys are not  
15 available to the county, to affirm commitment by the  
16 county to participate in the request for applications for  
17 funding process when moneys become available. Upon  
18 approval of an application by the director, a county shall  
19 be funded for an initial three-year contract period as  
20 described in Section 5854 and annually thereafter,  
21 consistent with the provisions of this part. If a county is  
22 complying with the provisions of this part, the  
23 department shall assure that the county receives an  
24 annual allocation consistent with departmental  
25 guidelines for full funding, as resources are made  
26 available.

27 SEC. 6. Section 5859 of the Welfare and Institutions  
28 Code is amended to read:

29 5859. If applications are deficient and not ready for  
30 approval, department program staff shall provide specific  
31 written descriptions of areas of deficiency to counties and  
32 provide, to the extent feasible, any requested training,  
33 consultation, and technical assistance to assist the  
34 applicant county to achieve necessary compliance and  
35 department approval.

36 SEC. 7. Section 5860 of the Welfare and Institutions  
37 Code is amended to read:

38 5860. (a) Final selection of county proposals shall be  
39 subject to the amount of funding approved for expansion  
40 of services under this part.



1 (b) Counties shall use funds distributed under this part  
2 only in support of a mental health system serving  
3 seriously emotionally disturbed children in accordance  
4 with the principles and program requirements associated  
5 with the system of care model described in this part. The  
6 State Department of Mental Health shall audit and  
7 monitor the use of these funds to ensure that the funds are  
8 used solely in support of the children's system of care  
9 program and in accordance with the performance  
10 contract described in subdivision (c). If county programs  
11 receiving children's system of care funding do not comply  
12 with program and audit requirements determined by the  
13 department, funds shall be redistributed to other  
14 counties to implement, expand, or model children's  
15 system of care programs.

16 (c) The department shall enter into annual  
17 performance contracts with the selected counties and  
18 enter into training and consultation contracts as  
19 necessary to fulfill its obligations under this part. These  
20 annual performance contracts shall be in addition to the  
21 county mental health services performance contracts  
22 submitted to the department under Section 5650. Any  
23 changes in the staffing patterns or protocols, or both,  
24 approved in the original program proposal shall be  
25 identified and justified in these annual performance  
26 contracts. Annual performance contracts filed by  
27 counties operating the program as of January 1, 2001,  
28 shall, if approved by the department, serve as the baseline  
29 contract for purposes of this subdivision. The contracts  
30 shall be exempt from the requirements of the Public  
31 Contract Code and the State Administrative Manual and  
32 shall be exempt from approval by the Department of  
33 General Services.

34 SEC. 8. Section 5863 of the Welfare and Institutions  
35 Code is amended to read:

36 5863. In addition to the requirements of Section 5862,  
37 each county program proposal shall contain all of the  
38 following:

39 (a) Methods and protocols for the county mental  
40 health department to identify and screen the eligible



1 target population children. These protocols shall be  
2 developed with collaborative partners and shall ensure  
3 that eligible children can be referred from all  
4 collaborating agencies.

5 (b) Measurable system performance goals for client  
6 outcome and cost avoidance. Outcomes shall be made  
7 available to collaborating partners and used for program  
8 improvement.

9 (c) Methods to achieve interagency collaboration by  
10 all publicly funded agencies serving children  
11 experiencing emotional disturbances.

12 (d) Appropriate written interagency protocols and  
13 agreements with all other programs in the county that  
14 serve similar populations of children. Agreements shall  
15 exist with wrap-around programs (Chapter 4  
16 (commencing with Section 18250) of Part 6 of Division 9),  
17 Family Preservation programs (Part 4.4 (commencing  
18 with Section 16600) of Division 9), Juvenile Crime  
19 Enforcement and Accountability Challenge Grant  
20 programs (Article 18.7 (commencing with Section 749.2)  
21 of Chapter 2 of Part 1 of Division 1), programs serving  
22 children with a dual diagnosis including substance abuse  
23 or whose emotional disturbance is related to family  
24 substance abuse, and programs serving families enrolled  
25 in CalWORKs (Chapter 2 (commencing with Section  
26 11200.5) of Part 3 of Division 9).

27 (e) A description of case management services for the  
28 target population. Each county program proposal shall  
29 include protocols developed in the county for case  
30 management designed to provide assessment, linkage,  
31 case planning, monitoring, and client advocacy to  
32 facilitate the provision of appropriate services for the  
33 child and family in the least restrictive environment as  
34 close to home as possible.

35 (f) Mental health services that enable a child to  
36 remain in his or her usual family setting and that offer an  
37 appropriate alternative to out-of-home placement.

38 (g) Methods to conduct joint interagency placement  
39 screening of target population children prior to  
40 out-of-home placement.



1 (h) Identification of the number and level of county  
2 evaluation staff and the resources necessary to meet  
3 requirements established by the State Department of  
4 Mental Health to measure client and cost outcome and  
5 other system performance measures.

6 (i) A budget specifying all new and currently funded  
7 mental health expenditures provided as part of the  
8 proposed system of care. The department shall establish  
9 reporting requirements for direct and indirect  
10 administrative overhead, to be included in the request for  
11 proposals. Weight shall be given to counties with lower  
12 administrative overhead costs. In no case shall  
13 administrative costs exceed those of existing county  
14 mental health programs and services. Expenditures for  
15 evaluation staff and resources shall not be considered  
16 administrative costs for this purpose.

17 (j) Any requirements for interagency collaboration,  
18 agreements, or protocols contained in this section shall  
19 not diminish requirements for the confidentiality of  
20 medical information or information maintained by a  
21 county agency or department.

22 SEC. 9. Section 5865 of the Welfare and Institutions  
23 Code is amended to read:

24 5865. Each county shall have in place, with qualified  
25 mental health personnel, all of the following within three  
26 years of funding by the state:

27 (a) A comprehensive, interagency system of care that  
28 serves the target population as defined in Section 5856.

29 (b) A method to screen and identify children in the  
30 target population. County mental health staff shall  
31 consult with the representatives from special education,  
32 social services, and juvenile justice agencies, the mental  
33 health advisory board, family advocacy groups, and  
34 others as necessary to help identify all of the persons in  
35 the target populations, including persons from ethnic  
36 minority cultures which may require outreach for  
37 identification.

38 (c) A defined mental health case management system  
39 designed to facilitate the outcome goals for children in  
40 the target population.



1 (d) A defined range of mental health services and  
2 program standards that involve interagency  
3 collaboration and ensure appropriate service delivery in  
4 the least restrictive environment with community-based  
5 alternatives to out-of-home placement.

6 (e) A defined mechanism to ensure that services are  
7 culturally competent.

8 (f) A defined mechanism to ensure that services are  
9 child-centered and family-focused, with parent  
10 participation in planning and delivery of services.

11 (g) A method to show measurable improvement in  
12 individual and family functional status for children  
13 enrolled in the system of care.

14 (h) A method to measure and report cost avoidance  
15 and client outcomes for the target population which  
16 includes, but is not limited to, state hospital utilization,  
17 group home utilization, nonpublic school residential  
18 placement, school attendance and performance, and  
19 recidivism in the juvenile justice system.

20 (i) A plan to ensure that system of care services are  
21 planned to complement and coordinate with services  
22 provided under the federal Early and Periodic Screening,  
23 Diagnosis and Treatment services (Section  
24 1396d(a)(4)(B) of Title 42 of the United States Code),  
25 including foster children served under Section 5867.5,  
26 where those services are medically necessary but  
27 children do not meet the requirements of Section 5600.3.

28 (j) A plan to ensure that system of care services are  
29 planned to complement and coordinate with services  
30 provided to CalWORKs (Chapter 2 (commencing with  
31 Section 11200.5) of Part 3 of Division 9) recipients whose  
32 families receive mental health treatment services.

33 (k) A defined partnership between the children's  
34 system of care program and family members of children  
35 who have been or are currently being served in the  
36 county mental health system. This partnership shall  
37 include family member involvement in ongoing  
38 discussions and decisions regarding policy development,  
39 program administration, service development, and  
40 service delivery.



1 SEC. 10. Section 5865.1 is added to the Welfare and  
2 Institutions Code, to read:

3 5865.1. When a county system of care serves children  
4 15 to 21 years of age, the following structures and services  
5 shall, to the extent possible, be available, and if not  
6 available, the county plan shall identify a timeline for the  
7 development of these services:

8 (a) Collaborative agreements with schools,  
9 community colleges, independent living programs, child  
10 welfare services, job training agencies, CalWORKs  
11 providers, regional center services, and transportation  
12 and recreation services as needed.

13 (b) Collaborative teams involving the youth and two  
14 or more agencies to develop a transition plan that  
15 identifies needs and resources required to successfully  
16 transition to independent living as an adult.

17 (c) Service plans that identify the needs of the youth  
18 in the areas of employment, job training, health care,  
19 education, counseling, socialization, housing, and  
20 independent living skills, to be provided by any of the  
21 collaborative agencies and access points for the youth  
22 identified.

23 (d) Assistance with identifying the means for health  
24 insurance and educational linkages when the young  
25 person is more than 18 years of age.

26 (e) Specific plans for the young adult to identify  
27 individuals and community services that can provide  
28 support during the transition to 21 years of age.

29 (f) Assurances that goals for young adults are  
30 individual, identified by the youth, and developmentally  
31 appropriate.

32 (g) Any requirements for interagency collaboration,  
33 agreements, or protocols contained in this section shall  
34 not diminish requirements for the confidentiality of  
35 medical information or information maintained by a  
36 county agency or department.

37 SEC. 11. Section 5865.3 is added to the Welfare and  
38 Institutions Code, to read:

39 5865.3. When a county system of care services  
40 children, zero to five years of age, the following structures



1 and services shall be available, and when not available,  
2 the county plan shall identify a timeline for the  
3 development of these services:

4 (a) Collaborative agreements with public health  
5 systems, regional center services, child care programs,  
6 CalWORKs providers, drug and alcohol treatment  
7 programs, child welfare services, and other agencies that  
8 may identify children and families at risk of mental health  
9 problems that affect young children.

10 (b) Outreach protocols that can assist parents to  
11 identify child behaviors that may be addressed early to  
12 prevent mental or emotional disorders and assure normal  
13 child development.

14 (c) Identification of trained specialists that can assist  
15 the parents of very young children at risk for emotional,  
16 social, or developmental problems with treatment.

17 (d) Performance measures that ensure that services to  
18 families of very young children are individual, identified  
19 by the family, and developmentally appropriate.

20 SEC. 12. Section 5866 of the Welfare and Institutions  
21 Code is amended to read:

22 5866. (a) Counties shall develop a method to  
23 encourage interagency collaboration with shared  
24 responsibility for services and the client and cost outcome  
25 goals.

26 (b) The local mental health director shall form or  
27 facilitate the formation of a county interagency policy  
28 and planning committee. The members of the council  
29 shall include, but not be limited to, family members of  
30 children who have been or are currently being served in  
31 the county mental health system and the leaders of  
32 participating local government agencies, to include a  
33 member of the board of supervisors, a juvenile court  
34 judge, the district attorney, the public defender, the  
35 county counsel, the superintendent of county schools, the  
36 public social services director, the chief probation officer,  
37 and the mental health director.

38 (c) The duties of the committee shall include, but not  
39 be limited to, all of the following:



1 (1) Identifying those agencies that have a significant  
2 joint responsibility for the target population and ensuring  
3 collaboration on countywide planning and policy.

4 (2) Identifying gaps in services to members of the  
5 target population, developing policies to ensure service  
6 effectiveness and continuity, and setting priorities for  
7 interagency services.

8 (3) Implementing public and private collaborative  
9 programs whenever possible to better serve the target  
10 population.

11 (d) The local mental health director shall form or  
12 facilitate the formation of a countywide interagency case  
13 management council whose function shall be to  
14 coordinate resources to specific target population  
15 children who are using the services of more than one  
16 agency concurrently. The members of this council shall  
17 include, but not be limited to, representatives from the  
18 local special education, juvenile probation, children's  
19 social services, and mental health services agencies, with  
20 necessary authority to commit resources from their  
21 agency to an interagency service plan for a child and  
22 family. The roles, responsibilities, and operation of these  
23 councils shall be specified in written interagency  
24 agreements or memoranda of understanding, or both.

25 (e) The local mental health director shall develop  
26 written interagency agreements or memoranda of  
27 understanding with the agencies listed in this subdivision,  
28 as necessary. Written interagency agreements or  
29 memoranda shall specify jointly provided or integrated  
30 services, staff tasks and responsibilities, facility and supply  
31 commitments, budget considerations, and linkage and  
32 referral services. The agreements shall be reviewed and  
33 updated annually.

34 (f) The agreements required by subdivision (e) may  
35 be established with any of the following:

- 36 (1) Special education local planning area consortiums.
- 37 (2) The court juvenile probation department.
- 38 (3) The county child protective services agency.
- 39 (4) The county public health department.



1 (5) The county department of drug and alcohol  
2 services.

3 (6) Other local public or private agencies serving  
4 children.

5 SEC. 13. Section 5869 of the Welfare and Institutions  
6 Code is amended to read:

7 5869. The department shall provide participating  
8 counties with all of the following:

9 (a) Applications for funding guidelines and format,  
10 and coordination and oversight of the selection process as  
11 described in Article 4 (commencing with Section 5857).

12 (b) Contracts with each state funded county  
13 specifying the approved budget, performance outcomes,  
14 and a scope of work plan for each year of participation in  
15 the children’s system of care program.

16 (c) A contract with an independent evaluator for the  
17 purpose of measuring performance outcomes and  
18 providing technical assistance to the state and counties  
19 related to system evaluation.

20 (d) Training, consultation, and technical assistance for  
21 county applicants and participants, either directly or  
22 through contract.

23 SEC. 14. Section 5880 of the Welfare and Institutions  
24 Code is amended to read:

25 5880. For each selected county the department shall  
26 define and establish client and cost outcome and other  
27 system performance goals, and negotiate the expected  
28 levels of attainment for each year of participation.  
29 Expected levels of attainment shall include a breakdown  
30 by ethnic origin and shall be identified by a county in its  
31 proposal. These goals shall include, but not be limited to,  
32 both of the following:

33 (a) Client improvement and cost avoidance outcome  
34 measures, as follows:

35 (1) To reduce the number of child months in group  
36 homes, residential placements pursuant to Chapter 26.5  
37 (commencing with Section 7570) of Division 7 of Title 1  
38 of the Government Code, and state hospital placements.

39 (2) To reduce the cost of AFDC-FC group home care,  
40 residential placements as described in paragraph (1), and



1 state hospital utilization, by an amount which equals at  
2 least 50 percent of the third year project cost. Cost  
3 avoidance shall be based on data comparisons of  
4 statewide average expenditure and population.

5 (3) To increase school attendance for pupils in  
6 targeted programs.

7 (4) To increase the grade level equivalent of pupils in  
8 targeted programs from admission to discharge.

9 (5) To reduce the rate of recidivism incurred for wards  
10 in targeted juvenile justice programs.

11 (6) To show measurable improvement in individual  
12 and family functional status for a representative sample  
13 of children enrolled in the system of care.

14 (7) To achieve statistically significant increases in  
15 services provided in nonclinic settings among agencies.

16 (8) To increase ethnic minority and gender access to  
17 services proportionate to the percentage of these groups  
18 in the county's school-age population.

19 (b) System development and operation measures, as  
20 follows:

21 (1) To provide an integrated system of care that  
22 includes multiagency programs and joint case planning,  
23 to children who are seriously emotionally and  
24 behaviorally disturbed as defined in Section 5856.

25 (2) To identify and assess children who comprise the  
26 target population in the county evidenced by a roster  
27 which contains all children receiving mental health case  
28 management and treatment services. This roster shall  
29 include necessary standardized and uniform identifying  
30 information and demographics about the children  
31 served.

32 (3) To develop and maintain individualized service  
33 plans that will facilitate interagency service delivery in  
34 the least restrictive environment.

35 (4) To develop or provide access to a range of  
36 intensive services that will meet individualized service  
37 plan needs. These services shall include, but not be  
38 limited to, case management, expanded treatment  
39 services at schoolsites, local juvenile corrections facilities,  
40 and local foster homes, and flexible services.



1 (5) To ensure the development and operation of the  
2 interagency policy council and the interagency case  
3 management council.

4 (6) To provide culturally competent programs that  
5 recognize and address the unique needs of ethnic  
6 populations in relation to equal access, program design  
7 and operation, and program evaluation.

8 (7) To develop parent education and support groups,  
9 and linkages with parents to ensure their involvement in  
10 the planning process and the delivery of services.

11 (8) To provide a system of evaluation that develops  
12 outcome criteria and which will measure performance,  
13 including client outcome and cost avoidance.

14 (9) To gather, manage, and report data in accordance  
15 with the requirements of the state funded outcome  
16 evaluation.

17 *SEC. 15. This act shall be known, and may be cited, as*  
18 *the Cathie Wright Children's Mental Health Services Act.*

