



CDSS

WILL LIGHTBOURNE  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**

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EDMUND G. BROWN JR.  
GOVERNOR

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

April 26, 2013

ALL COUNTY LETTER NO. 13-34

TO: ALL COUNTY WELFARE DIRECTORS  
 ALL COUNTY WELFARE FISCAL OFFICERS  
 ALL CHIEF PROBATION OFFICERS  
 ALL INDEPENDENT LIVING PROGRAM (ILP) MANAGERS  
 ALL (ILP) COORDINATORS  
 COUNTY WELFARE DIRECTORS ASSOCIATION  
 ALL TITLE IV-E AGREEMENT TRIBES

SUBJECT: THE INDEPENDENT LIVING PROGRAM (ILP) ANNUAL NARRATIVE  
 REPORT AND PLAN FOR FEDERAL FISCAL YEAR (FFY) 2012

REFERENCE: ALL COUNTY INFORMATION NOTICE NO. I-38-10

The purpose of this All County Letter (ACL) is to provide the updated ILP Annual Narrative Report and Plan (Report) for FFY 2012 (October 1, 2011 – September 30, 2012) for completion by counties. The information in this report is required by the Department of Health and Human Services, Administration on Children, Youth and Families (ACYF), in accordance with provisions specified in Program Instructions (PI) ACYF-CB-PI-123-04, requesting details associated with your county's ILP and Transitional Housing Programs (THP). The California Department of Social Services (CDSS) has used the PI to compile the questions listed in this ACL. If additional information is needed, CDSS will contact counties to obtain the information requested.

The Report was developed in compliance with the following Welfare and Institutions Code (W&IC) section 10609.4(b) requiring counties to describe their ILP plans and to specify the minimum standards achievable within existing resources that counties must meet in the administration of ILP.

Senate Bill (SB) 1013 (Chapter 34, Statutes of 2012), in part, modified W&IC section 10609.4 (b) and requires "consultation with counties, to develop a process for reporting that satisfies federal law and reporting requirements." The W&IC section 10609.4(c) requires that counties participating in housing programs also provide a description of the services currently available to pregnant or parenting foster youth. In

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addition, W&IC section 10609.1(c) requires counties to report on plans for meeting any unmet transitional housing needs of this population.

To implement the bill, CDSS consulted with county ILP coordinators throughout the state to ensure the ILP Narrative Report provides the information mandated by federal and state law while not duplicating information included in other reports already submitted to CDSS by the counties. The questions contained in the report have been revised to focus on the information required by ACYF. Please answer all questions.

This information will be included in the Federal Annual Progress and Services Report (APSR), which is required under Title IV-B of the Social Security Act. The information collected through the submission of the ILP Narrative report can be found in the Chafee Foster Care Independence Program chapter and the Education and Training Vouchers program sections of the APSR, which is posted annually on CDSS' website. The information collected through the ILP Narrative may be shared with other counties and stakeholders for the purpose of identifying promising practices.

Please complete the FFY 2012 Report and submit **via e-mail** no later than **May 28, 2013**, to: [ILPPolicy@dss.ca.gov](mailto:ILPPolicy@dss.ca.gov).

Signed cover letters may be scanned and e-mailed with the report, or sent by standard mail to the address below, or faxed to: 916-657-4357. Please **do not fax the entire report**.

**California Department of Social Services  
Independent Living Program Policy Unit  
744 P Street, M.S. 8-13-78  
Sacramento, California 95814  
ATTN: Theresa Thurmond**

If you have any questions regarding the Report, please contact the ILP Policy Unit via e-mail at: [ILPPolicy@dss.ca.gov](mailto:ILPPolicy@dss.ca.gov).

Sincerely,

***Original Document Signed By:***

GREGORY E. ROSE  
Deputy Director  
Children and Family Services Division

Attachment

## Independent Living Program (ILP) Annual Report and Plan Federal Fiscal Year (FFY) 2012

### REPORT INFORMATION

Name of County:

Name of Agency:

**Name of: Person(s) completing the Narrative:**

Name:	Title:
Mailing Address:	Email:
Fax Number: ( )	Phone: ( ) ext.

**ILP Manager/Administrator:**

Name:	Title:
Mailing Address:	E-mail:
Fax Number: ( )	Phone: ( ) ext.

**ILP Coordinator (if different from above):**

**\*If your county has multiple ILP Coordinators please attach a list of all ILP coordinators with phone number and email contact information**

Name:	Title:
Mailing Address:	E-mail:
Fax Number: ( )	Phone: ( ) ext.

**ILP Aftercare Administrator (if different from above):**

Name:	Title:
Mailing Address:	E-mail:
Fax Number: ( )	Phone: ( ) ext.

**County Transitional Housing Placement Program (THPP)/  
Transitional Housing Program (THP)-Plus Administrator:**

Name:	Title:
Name of Agency (if different from ILP agency):	
Mailing Address:	E-mail:
Fax Number: ( )	Phone: ( ) ext.

**Probation Officer:**

Name:	Title:
Name of Agency:	
Mailing Address:	E-mail:
Fax Number: ( )	Phone: ( ) ext.

**Chafee Education Training Voucher (ETV) Point of Contact:**

Name:	Title:
Mailing Address:	E-mail:
Fax Number: ( )	Phone: ( ) ext.

# NARRATIVE

FFY 2012 (October 1<sup>st</sup>, 2011 – September 30<sup>th</sup>, 2012)

## Complete all portions of the Narrative

### Part 1: ILP Program Overview

1. If different from last year, please briefly describe one or two innovative, successful and/or promising practices/programs that go beyond provision of the cores services as outlined in the regulations. This can include any aspect of ILP services/outreach to youth including community based volunteer programs, education services or employment services. Include transitional housing programs if applicable.
2. If applicable, describe any unique accomplishment achieved in your ILP and/or THP.
3. Describe any planned improvements over the next fiscal year for ILP service delivery, improved outcomes for youth and/or transitional housing program.

### Access to Services (optional)

1. Describe/list the problems/barriers youth are experiencing in your county that may prevent youth from accessing/receiving services (e.g. transportation).
  - a. Describe your plans to address these barriers.

### Part 2: Specific Accomplishments in Achieving the Purpose of the ILP

1. Describe how your county helps in-care youth make the transition to self-sufficiency?
2. Describe how your county helps in-care youth receive the education, training, and services necessary to obtain employment?
3. Describe how your county helps in-care youth prepare and enter post-secondary training and educational institutions?

4. Describe methods or strategies your county uses to provide personal and emotional support to in-care youth through mentors and the promotion of interactions with dedicated adults?
  - a) Identify the one practice used in your county that has been most helpful in assisting youth in establishing a permanent connection with at least one dedicated adult prior to transitioning out of foster care.
  
5. Describe how your county provides financial, housing, counseling, employment, education, and other appropriate support and services to **former foster care recipients** between 18-21 years of age to complement their own efforts to achieve self-sufficiency and to assure that program participants recognize and accept their personal responsibility for preparing and then making the transition into adulthood.
  
6. Describe how your county provides services to youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption?.

### Part 3(a): Coordination with Tribes

1. How many Tribal youth in your county were eligible for ILP?
2. How many Tribal youth participated in ILP?
3. Describe the methods used in your county to collaborate with Tribal representatives to ensure that Tribal youth receive culturally appropriate services as well as access to the same services as other youth.

### Part 3(b) Specialized Programs/Coordinating with other Federal or State programs

1. Does your county offer any specialized programs for the following (check all that apply)
  - Pregnant/parenting youth
  - Lesbian, Gay, Bisexual, and Transgender youth (LGBT)
  - Homeless youth
  - Disabled youth
  - Abstinence program
  - Local housing program (Not THPP/THP-Plus or THP+FC)
  - School-to-work programs
  - Child care program
  - Other (Describe below. Include any collaboration with other state, county or federal programs)
  
2. Please describe what services/programs you offer for each checked category.

3. Please describe what other, if applicable, county resources exist to meet the needs of youth if your county does not offer specialized programs or services. If no program exists, but there is a need in your county, please describe efforts that will be made to address the needs of the youth.

#### **Part 4: Training**

1. Describe your county's specific training that was planned and conducted for FFY 2012 to help foster parents, adoptive parents, workers in group homes, and case managers understand and address the issues confronting adolescents preparing for independent living.
2. Describe any additional training needs in your county:
  - a. Describe how you will address those additional training needs

#### **Part 5: The National Youth in Transition Database (optional)**

1. Describe your county's outreach methods in informing youth of the National Youth in Transition Database (NYTD) survey.

# FFY 2012 HOUSING EXPENDITURES

## Part III – Housing Programs \*please explain if left blank\*

	Number of Youth Participating	County Expenditures
Chafee 30 percent housing for emancipated foster youth only		
<b>Total Cost</b>		

	Number of Youth Participating
Transitional Housing Placement Program	
Transitional Housing Program-Plus (THP-Plus)	
<b>Total Cost</b>	