

Health Services

Public Health, Behavioral Health & Recovery Services, and Public Conservator's Office

Recruitment Request:

Program: Health Care Program for Children in Foster Care

Position: Senior PH Nurse/Public Health Nurse – 1 position.

This position works within the Health Care Program for Children in Foster Care unit, which is a public health nursing program to provide public health nurse expertise in meeting the medical, dental, mental and developmental needs of children and youth in out of home placement. This position performs the following duties:

- Medical and health care case planning;
- Help foster caregivers to obtain timely comprehensive health assessments and dental examinations,
- Expedite referrals for medical, dental, mental health and developmental services;
- Coordinate health services for children in out-of-county and out-of-state placements;
- Provide medical education through the interpretation of medical reports and training for foster team members on the special health care needs of children and youth in foster care;
- Participate in the creation and updating of the Health and Education Passport for every child as required by law.

Position Requesting	Position Number	Annual Salary Step 3	Benefits (salary *70%)	Budgeted FY 25/26 Y or N	Funding Stream(s)	Mandate d (y or n)	Mandate Section	Mandate Description	Operational Impact	Metrics/Data	Revenue Generating
Senior Public Health Nurse	3850	\$114,483.20	\$80,138.24	Y	14% SGF, 19% FFP, 21% 1991, 46% IGT	Y	WIC § 16501.3	County shall establish and maintain a program of public health nursing that meets the federal requirements for the provision of health care to minor and nonminor dependents in foster care consistent with Section 30026.5 of the Government Code	Safety, Health, and Well-being of Foster Youth	The HCPCFC Unit was staffed with 5 FTEs; right now they are operating with 3.0 FTEs (two nurses and a staff assistant) with a caseload of 187 clients between the two nurses. This vacancy is one of the two nurses in the unit.	Position brings in State General Fund and Federal Financial Participation (using 1991 Realignment as match)

Health Care Program for Children in Foster Care Mandate (HCPCFC):

HCPCFC is a mandated program under state and federal law (linked to Title IV-E and state child welfare requirements). California Code, Welfare and Institutions Code - WIC § 16501.3
In Mendocino County HCPCFC is within Public Health not Social Services.

County shall establish and maintain a program of public health nursing that meets the federal requirements for the provision of health care to minor and nonminor dependents in foster care

consistent with [Section 30026.5 of the Government Code](#). The purpose of the public health nursing program shall be to promote and enhance the physical, mental, dental, and developmental well-being of children in the child welfare system.

(b) Under this program, counties shall use the services of a foster care public health nurse. The foster care public health nurse shall work with the appropriate child welfare services workers to coordinate health care services and serve as a liaison with health care professionals and other providers of health-related services. This shall include coordination with county mental health plans and local health jurisdictions, as appropriate.

Operational Implications:

Not meeting Health Care Program for Children in Foster Care requirements or failing to complete JV-220 forms can have serious implications, including missed health assessments and delayed follow-ups on medical, dental, and mental health needs, leading to untreated conditions, developmental delays, and poor health outcomes. Gaps in coordination between foster care, health care providers, and social workers further increase risks, while non-compliance may trigger state audits, corrective action plans, sanctions, or even loss of federal and state funding.

Foster youth, who are already highly vulnerable, face widened health disparities, inconsistent access to care, and disruptions in permanency planning and stability. In addition, court authorization is legally required before prescribing psychotropic medications; missing or incomplete JV-220 forms result in non-compliance with the Welfare & Institutions Code, exposing agencies, providers, and case workers to legal liability. Delays in authorizations can prevent timely treatment, worsen mental health conditions, heighten behavioral crises, and destabilize placements, ultimately causing more placement disruptions, emergency room visits, or hospitalizations, driving up costs, and placing additional strain on foster families and providers who may lack the resources to manage untreated behaviors.

Funding:

Health Care Program for Children in Foster Care is funded by State General funds, Federal Financial Participation Title 19, Realignment and Inter-Governmental Transfer Funds. No County General Funds are utilized for this program.

Efficiency Measures:

Staffing Overview

- FY 24/25 Budgeted Positions: 144
- FY 25/26 Budgeted Positions: 126
 - Filled: 98
 - Vacant: 28

Budget Reductions:

- Reduction in number of positions.
- Reduction in positions being filled.
- Reduction in 2000's series.

Staffing Optimization:

- Reduced overall staffing by 16 positions compared to the previous year, improving operational efficiency and reducing overhead.

Administrative Streamlining:

- Consolidated administrative functions, reducing administrative staff from 16 to 10 positions by integrating Administration, Fiscal, Compliance, and Quality Assurance teams. This allowed for a stronger focus on program delivery and client care.

SharePoint Implementation:

- Developed and launched a centralized SharePoint platform to enhance internal communication, streamline document management, and support collaboration across departments.

Online Training Platform:

- Introduced an online training system to minimize time spent on in-person training while ensuring all staff remain compliant with state and federal training requirements.

Budget Simplification:

- Streamlined the Public Health budget by consolidating 10 budget units into a single unified budget, improving transparency, oversight, and resource allocation.

Paperless Processes:

- Transition more forms and processes to digital platforms, reducing the need for physical paperwork, filing, and manual processing, while improving accuracy and accessibility.

Supporting Data:

Health Care Program for Children in Foster Care only has three positions within the unit, which includes two Public Health Nurses and a staff assistant. With two (2) nurses managing 187 HCPCFC clients, each nurse is responsible for approximately 90 children. This workload includes coordinating annual health assessments, as well as managing dental and mental health follow-ups, processing JV-220 forms for psychotropic medication, and maintaining ongoing communication with providers, foster families, and social workers.

Organizational Structure:

Public Health Nursing

