

FOR YOUR INFORMATION

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Issue 19-12

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IMPLEMENTATION OF SENATE BILL 89 MANDATES Part I: Inform Youth of Their Rights and Remove Barriers

The California Department of Social Services (CDSS) convened a Healthy Sexual Development Workgroup in February 2016 to address the concerns of pregnancy prevention and reproductive and sexual health care for youth and NMDs in foster care, resulting in the release of California's Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependents in October 2016. Senate Bill 89 subsequently went into effect in June 2017, resulting in further new requirements for child welfare agencies and those serving foster youth, related to the reproductive and sexual health care of youth in foster care, as described in [All County Letter 18-61](#), dated June 20, 2018.

This FYI provides instructions to DCFS staff on complying with one of the legal mandates of Senate Bill 89. DCFS is gradually implementing the requirements of SB 89. Further instructions on other SB 89 mandates will be forthcoming.

SB 89 REQUIREMENT:

I. Inform Youth of Their Rights and Remove Barriers (WIC 16501.1(g)(20),(21))

CSWs are to update case plans annually for youth in foster care, 10 years of age and older, including young adults in foster care, to indicate that the CSW has:

1. Informed the youth or young adult that he or she may access age-appropriate, medically accurate information about reproductive and sexual health care, including, but not limited to, unplanned pregnancy prevention, abstinence, use of birth control, abortion, and the prevention and treatment of sexually transmitted infections.
2. Informed the youth or young adult, in an age- and developmentally appropriate manner, of his or her right to consent to sexual and reproductive health services and his or her confidentiality rights regarding those services.
3. Informed the youth or young adult how to access reproductive and sexual health care services and facilitated access to that care, including by assisting with any identified barriers to care, as needed.

CSW Responsibilities:

1. Communicate with DCFS youth, age 10 and above, about their reproductive and sexual health, and utilize the following [resources](#):
 - [DCFS FYI 17-36](#): **FOR DCFS-SERVED YOUTH: Know Your Rights For Sexual Health Services, Sexual Health Services Available At The Medical Hub Clinics And Reproductive Health Resources for Youth**
 - [FACT SHEET](#): **“What CSWs and DPOs Need to Know: Preventing Unwanted Teen Pregnancies & Sexually Transmitted Infections.”**



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- **CDSS' BROCHURE: Know Your Sexual and Reproductive Health Rights**
- **CDSS' A Guide for Case Managers: Assisting foster Youth with Healthy Sexual Development and Pregnancy Prevention"**
- **Pocket Guide LA: Empowering Los Angeles Youth to Make Healthy Choices**

Please Note: The above resources also contain links to additional tools and information for line staff and their adolescent clients.

2. Document the required activities in the case plan utilizing the two (2) new Case Management Services, Service Categories: **Inform Sexual and Repro Health Rights and Assist Access to Sexual/Repro Care Svcs.**

Since Case Plans are attached to court reports, the court will be kept apprised of CSWs meeting the mandates of having an annual conversation with youth age 10 and above regarding their reproductive health rights, accessing reproductive health services, and assisting in removing any identified barriers.

3. Document the required activities in a contact in the case. Documentation should include any actions the CSW took to provide the youth/NMD with information, resources, and assistance to remove any barriers the youth/NMD may have in receiving sexual and reproductive health care. Confidential information about the youth/NMD receiving sexual and reproductive health care does not belong in the case documentation.

PLEASE NOTE: *Two additional reminders have been added to CWS/CMS to assist CSWs in tracking Sexual Health Education Services for youth in placement, age 10 and above. Further directives on this mandate will follow in **Part II** of this FYI. Procedures are currently being developed. The Case Plan may still be created without completing the Sexual Health Education Services reminders.*



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