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Testimony Before the District of Columbia Council
Committee on Human Services
April 18, 2018

Public Hearing:
Budget Oversight Hearing
Child and Family Services Agency

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INTRODUCTION

Good afternoon Chairperson Nadeau and members of the Committee on Human Services. My name is Judith Sandalow. I am the Executive Director of Children's Law Center¹ and a resident of the District. I am testifying today on behalf of Children's Law Center, which fights so every DC child can grow up with a loving family, good health and a quality education. With more than 100 staff and hundreds of pro bono lawyers, Children's Law Center reaches 1 out of every 9 children in DC's poorest neighborhoods – more than 5,000 children and families each year. We serve as guardians *ad litem* for hundreds of children in foster care and represent foster parents and caregivers for children who are in or at risk of entering the District's child welfare system.

Our yearly deep dive into the Mayor's proposed budget for Child and Family Services Agency (CFSA) is driven by a need to ensure that parents can access quality prevention services to keep children safe in their homes, that young people in foster care have the supports necessary to prepare them for successful adulthood, and that children get the trauma-informed services they need to heal and thrive. As independent advocates for the wellbeing of children who touch the foster care system, we want to ensure that CFSA has the adequate programming and resources to serve the District's children and families.

This year, the high-level view of the proposed budget does not reveal any drastic changes. The top-line of proposed fiscal year 2019 (FY19) for the CFSA budget remains

flat in comparison to the approved budget for fiscal year 2018 (FY18), with a decrease of just over \$2.2 million, or about 1%.² However, our deep dive suggests that CFSA is making some important changes. We strongly support their investments in case management and improving the effectiveness of their technology. However, we have concerns about cuts to services and supports necessary for children's well-being in foster care and when they are at home with their birth families. I hope the Committee will follow up on concerns I raise in my testimony in order to have the information it needs to assess CFSA's final FY19 budget.

INCREASES

The numerous shifts and enhancements in the proposed FY19 budget communicate that during the upcoming fiscal year, CFSA will prioritize improving its data management software, its case management in the In-Home, Permanency and Child Protective Services units, and its supports for older youth.

The proposed budget includes a \$4.9 million increase in the Agency's Information and Technology activity.³ We understand that the Agency will use the bulk of this funding to come into compliance with the federal government's requirement for child welfare agencies to upgrade to an automated case management system.⁴ We hope that this technological advancement will reduce the time case managers spend inputting and retrieving data from their case management system and will provide supervisors and managers with easier access to reports. Too often foster parents and

birth parents report that social workers do not have adequate time to build relationships and to effectively overcome barriers to safety, wellbeing and permanency. In our experience, children in foster care reunify with their families of origin quicker when their case managing social workers have the tools and supports they need to be at their best. We support the Agency's investment in the case management system and look forward to seeing how it improves outcomes for youth in foster care.

The proposed budget also includes an additional \$4.1 million in funding to add 17 positions within four units: the Permanency Unit, Child Protective Services Family Assessment Unit, Child Protective Services Investigation Unit, and the In-Home Unit.⁵ Children's Law Center believes these are wise investments. Although the agency is "narrowing the front door" by bringing fewer children into foster care, those who are entering have greater needs and require more attentive and intensive case management. As the front door continues to narrow, we think the need for quality case management will only grow.

Although we support this investment, we are concerned that only a small amount of the funding (about \$600,000) is directed toward the In-Home Unit. The In-Home Unit works with children and families when the Agency finds that there has been abuse or neglect, but believes a child can stay safely with his or her birth family with some additional services or supports.

While we do not work directly with In-Home cases, some of the children we represent have had In-Home cases prior to entering the foster care system. We have noticed a trend in these cases; many of the families with prior in-home cases have not been engaged in services that have generated a true change in the families' capacity to provide a safe home. Sometimes families don't engage with change-making services because the In-Home case manager does not have the skills or rapport to effectively communicate the value of the services to the parents. Other times, case managers don't refer families to the type of services that could prevent deeper involvement with the child welfare system. Angela's situation demonstrates both failures.⁶ Angela is one of our child clients. She has serious medical needs that could not be handled by her parents alone. Her parents, who primarily spoke a language other than English, had completed multiple investigations and a year-long In-Home case before we were assigned to Angela's court case. Once we were on the case, we learned that the in-home case manager did not speak the same language as the parents. We also learned that the Agency had not helped the family apply for benefits that could have helped the family manage Angela's medical condition. These case management oversights and missteps contributed to Angela's entanglement in the child welfare system.

We know there can be many reasons that families do not engage in In-Home services. Regardless of the specific reasons in any one case, successful intervention requires In-Home unit case managers to problem solve around these barriers to

engagement. Therefore, we support developing case managing social workers' capacity to motivate, empower, and connect families to services that will allow the families to keep the children safe in their communities. We hope that the \$600,000 investment in In-Home Unit is sufficient to improve case management and ensure that fewer children enter the foster care system in FY19.

Lastly, we applaud the Agency's \$640,000 investment in its Teen Services Activity. CFSA struggles to provide older youth with the life skills necessary to avoid homelessness, hold jobs, and have safe, meaningful adult relationships. We are eager to learn how this funding will be used, especially because the agency is reducing its funding for tutoring and housing by \$250,000 and \$500,000 respectively.⁷

DECREASES

The Mayor's proposed budget for CFSA includes significant decreases that will result in the termination of some services that CFSA is currently offering. Although at the Agency's budget briefing Director Donald explained that savings from the Temporary Safe Haven Redesign generated significant savings for the Agency, Children's Law Center does not see how these cuts and terminations will leave the Agency with sufficient funds to meet the needs of the children and youth who are in or are at risk of entering foster care during FY19.

The Proposed FY19 Budget Cuts \$7.4M from the Child Placement Activities

CFSA will have a \$7.4 million decrease in Child Placement activities under the

proposed FY19 budget. Child Placement activities includes the cost of matching children with the right foster families or programs, as well as the cost of maintaining those placements. This line item then, covers a couple of areas that are critical to the wellbeing of foster children and in which CFSA is currently underperforming.⁸

Although some savings from the Temporary Save Haven Redesign are appropriate, we are very concerned that the Agency is underestimating the cost of building and maintaining a diverse “placement array.”

“Placement array” is a bureaucratic term that means, in simple terms, having the variety of “living arrangements for children who must enter foster care, including family foster homes, group care, and independent living programs.”⁹ Some foster parents are well-situated to care for a medically fragile child who requires continuous care. Others can provide the needed love and attention that an active toddler requires. Still others have the training and empathy to work with an angry teenager who is recovering from the trauma of repeated sexual abuse. Some older youth need and wish for a foster family and others need independent living programs to prepare them for adulthood. It is important that CFSA have a wide array of placements so that any child who comes into care can have immediate access to the type of family or program that best fits their specific needs.

Currently, CFSA does not have enough foster parents who are willing and trained to meet the needs of the children in their care. We have myriad examples of

children whose specific needs could not be met by their foster parents – and foster parents who are being asked to care for children they know they are not equipped to support. A few examples: foster parents whose work schedules meant they couldn't provide transportation to maintain a child's longstanding relationship with a therapist, a LGBTQ-identified youth placed with a foster family that was not affirming, and foster youth placed in foster families who do not speak the language of the child and her birth family.

The results are devastating. When the Agency places children in foster homes that are not situated to adequately meet their needs the children pay the price. Youth lose or leave their jobs, run away from their foster homes, or stop going to therapy. Poor placement matches also often result in placement disruptions and foster youth being moved from home to home. Children in DC's foster care experienced 492 replacements in FY17.¹⁰ This is distressing and requires urgent attention because research shows that the wellbeing of children in foster care is significantly injured by their experience of placement instability.¹¹

Under the proposed budget CFSA would get \$13 million less for Child Placement than it spent in FY17.¹² CFSA estimates that it will save approximately \$5.6 million on the cost of room and board for children in foster care during FY19.¹³ Even after accounting for this saving and what could be either a modest increase or decrease in the number of children in care, we are very doubtful that proposed budget will

enable the Agency to grow the number and array of placements sufficiently during FY19. As I stated earlier, we project that the youth who will come into foster care in FY19 will have needs that are more significant than children from years past. Therefore, the Agency needs the funding to provide DC's foster children with placements that can meet those needs. Without seeing sizeable investments in activities such as Well Being, Family Resources or Kinship support, we cannot see how CFSA will be equipped to make the first placement, the best placement.

We know that the Agency is taking some steps to improve its placement matching capacity, but we are concerned that this effort is under resourced. CFSA has recently shared with us a conceptual version of its enhanced placement matching tool. Based on our observations, this tool could generate some additional cost saving for the Child Placement line, but we are very concerned that it fails to capture critical information necessary to make good matches. For example, the tool does not capture a foster parent's willingness and capacity to care for children of different ages or with varying needs. To maintain a matching tool with the right information to make good matches will take more time and staffing than is in CFSA's current plan. We ask that this committee continue to closely monitor the Agency's development of the placement matching tool and progress toward increased placement stability. Adding foster homes to its array will require adequate placement, licensing, clinical, and administrative resources. It is crucial that CFSA's placement efforts are properly funded.

We are also very concerned that the Agency is saving money by terminating placement options without replacing them with comparable options for DC's youth. For example, we recently learned that the Agency has decided to terminate its contract with The Elizabeth Ministries, an Independent Living Program (ILP) provider for teen moms in foster care. The Agency reported that The Elizabeth Ministries was not generating adequate outcomes for the teens placed there. Therefore, the Agency decided to not renew its contract with the ILP provider in FY19. While we appreciate the Agency's commitment to using evidence to drive its programming decisions, it is not clear that they have an alternative plan that would achieve better outcomes for these youth and their children.¹⁴ Closing this program is occurring at the same time that the Agency's rapid housing budget is being cut by \$500,000.¹⁵ Currently, the Agency has great difficulty finding appropriate foster home placements for many older youth, especially parenting youth. We are concerned that the Agency's proposed budget will limit its investment in placement options for parenting youth.

The Proposed FY19 Budget Cuts \$3.2M from Prevention Services

For nearly six years, CFSA has decreased the number of children in foster care significantly on the theory that it will reach families before they are in crisis and provide the support and services necessary to maintain children safely at home with their parents even when there is substantiated abuse or neglect.¹⁶ Under a Department of Health and Human Services (DHHS) waiver of funds provided by the federal

government through Title IV-E of the Social Security Act, CFSA has been able to use federal funds to provide these prevention services. Children's Law Center has consistently voiced support for the decision to invest significant resources in these services. But, we are growing increasingly alarmed by the failure of the Agency to provide adequate preventive supports and services to these families.

We are very concerned that the proposed FY19 budget for CFSA request \$3.16 million less for prevention services than was approved for FY18. This is the lowest amount requested for prevention services since FY11.¹⁷ It is also \$1.5 million less than was actually spent in FY17. Children's Law Center is concerned that the requested \$16.2 million allocation to Prevention Services will not provide CFSA with the funds necessary to improve their current program to adequately protect children and provide effective prevention services during FY19.

Part of the reduction in Prevention Services' cost is the termination of two programs currently being funded through the Title IV-E waiver: Project Connect and HOMEBUILDERS ®. According to CFSA, the termination of these two programs will reduce the Agency's cost by nearly \$5 million.¹⁸ However, the need for quality prevention services remains and CFSA has not articulated a strategy for how it will replace these services and improve their support for children and families during FY19, although preventing entry into foster care is one of CFSA's priorities.

The Agency reports it is working with experts and exploring federal funding to develop a “city-wide approach prevention framework.”¹⁹ Given the District’s longstanding difficulty building effective cross-agency programs and the significant reduction in funding to support children at home with their birth families, we ask the Committee to schedule regular roundtables with CFSA and its sister child-serving agencies to learn about its planning for the city-wide approach to prevention and to ensure that implementation will not be delay by these funding reductions.

Alternatively, we ask the committee to require CFSA to report quarterly on its work with experts and require the agency to gather input about implementation from community stakeholders once it has crafted its plan.

The Proposed FY19 Budget Decreases District Funding for Home Visiting

We are concerned to learn at the Agency’s budget briefing that all home visiting dollars are cut from CFSA’s proposed budget, which will decrease availability of this vital component of our early childhood system of care. Home visiting is an effective strategy with outcomes in child welfare, health, and education systems, including “improved maternal and child health; prevention of child injuries, child abuse or maltreatment; improvement in school readiness and achievement; reduction in crime or domestic violence; and improvements in family economic self-sufficiency.”²⁰ The District should be increasing and stabilizing its support. Instead, the District is continuing a trend of cutting this effective investment in the futures of young children

and parents. Government officials state they see DC Health as the agency for home visiting, but the DC Health Proposed Budget does not have a corresponding increase in home visiting funding, so families will see a reduction in services.

We are concerned about the decision to cut all funding for home visiting from CFSA's budget, because the District's home visiting programs need expansion and variety. Some families who would choose home visiting are not able to access it now. Some programs create wait lists and others must turn away some families who do not reside in the priority areas for DC Health-funded programs. Sources and amounts of District funding for home visiting have decreased over the last few years, which have contracted the offerings to families.²¹ Now, the proposal to remove all CFSA-supported home visiting will leave even less capacity and variety in programs. CFSA funding is, for example, supporting a program focused on fathers. CFSA and the Deputy Mayor for Health and Human Services indicated that they see DC Health as the agency for home visiting.²² However, the Mayor's proposed budget does not increase home visiting within DC Health, so the reduced CFSA funding will decrease home visiting slots and programs available to families in DC.

At the DC Health Budget Oversight hearing, we, along with other members of the Home Visiting Council, asked for a recurring investment of \$2,000,000 in true home visiting programs. However, that request was before learning that the District had cut its investment from CFSA. We now ask this Committee and the Committee on Health

to ensure that the increased investment equals \$2,000,000 plus the amount of CFSA funding, so that families do not experience a reduction in home visiting services, but rather an increase.

The Proposed FY19 Budget Cuts \$2.9M from Clinical Practice Division

The Mayor has proposed a \$2.9 million cut to the Clinical Practice Division of CFSA which will be partially offset by a one-time \$1.1 million allocation. The result is \$1.8 million less than was provided in FY18. The Clinical Practice Division is responsible for providing a range of health, mental health, education and other services to help children heal from the trauma of abuse and neglect and become healthy, learning young people. We are very concerned about this overall reduction because our clients regularly fail to have timely access to effective mental health and behavioral services. For example, one child who had experienced physical abuse waited for nearly a year to have their first session with a therapist. Sadly, delays of six, nine or 12 months is not uncommon. We regularly see the impact of delays such as this: from school suspensions to delinquency charges on one hand to missed opportunities for children to be reunified with their families of origin or leaving foster care to adoption.²³

Although CFSA is not a mental health provider, it is specifically responsible to ensure that the children in its care have their mental health care needs met. For this reason, we strongly support all efforts to improve timely access, including the one-time funding in the proposed budget to support CFSA's internal work to improve the

accessibility and quality of mental health services available to children in foster care and their families.

While, one-time funding is good, this is not a one-time need for children in foster care. We are concerned that the net \$1.8 reduction in Clinical Practice funding will limit the Agency's ability to meet the mental health care needs of children in care, especially given the unmet needs that we see with the current amount of funding. Given the dearth of quality mental health care services in the city the Agency may need to start contracting with providers that only accept private insurance in order meet the mental health needs of children in care or increase the number of single contracts. We ask the Committee to ensure that CFSA has the funds available to do that.

CONCLUSION

I hope that the Committee will protect the investments CFSA is making in its programs while following up with CFSA about how it can ensure the safety and wellbeing of children in its care, given the proposed cuts.

Thank you.

¹ Children’s Law Center fights so every child in DC can grow up with a loving family, good health and a quality education. Judges, pediatricians and families turn to us to advocate for children who are abused or neglected, who aren’t learning in school, or who have health problems that can’t be solved by medicine alone. With more than 100 staff and hundreds of pro bono lawyers, we reach 1 out of every 9 children in DC’s poorest neighborhoods – more than 5,000 children and families each year. And, we multiply this impact by advocating for city-wide solutions that benefit all children.

² CFSA Proposed Budget FY19, p. E-19.

³ CFSA Proposed Budget FY19, p. E-21.

⁴ CFSA. *FY19 Proposed Budget: CFSA Overview for the Community*. Presented on April 12, 2018, slide 13.

⁵ \$770K increase in Permanency (includes case management and permanency support once adoption or guardianship is identified as the goal); \$1.1M (8 FTEs) increase in Family Assessment-Child Protective Services; \$1.6M (9 FTEs) increase in Investigations-Child Protective Services; \$592K (2 FTE) increase in In-Home. CFSA Proposed Budget FY19, p. E-22.

⁶ Angela is a pseudonym created to maintain the confidentiality of our client.

⁷ See CFSA. *FY19 Proposed Budget: CFSA Overview for the Community*. Presented on April 12, 2018, slide 7.

⁸ See generally, CFSA. *2018 Priorities*. (PowerPoint Presentation to Stakeholders).

⁹ CFSA Proposed Budget FY19, p. E-23.

¹⁰ CFSA. *2018 Priorities*. (PowerPoint Presentation to Stakeholders), slide 17. January 31, 2018.

¹¹ “Psychiatric emergencies among children in foster care are often precipitated by disruptions in their attachment relationships with foster parents.” B. Troutman, *et al.*, (ND). *The Effects of Foster Care Placement on Young Children’s Mental Health*. University of Iowa Hospitals and Clinics. Retrieved from https://www.healthcare.uiowa.edu/icmh/archives/reports/Foster_Care.pdf (citing D. Pilowsky & W. Kate, (1996). *Foster children in acute crisis: Assessing critical aspects of attachment*. Journal of the American Academy of Child and Adolescent Psychiatry. Vol. 35.).

¹² CFSA Proposed Budget FY19, p. E-22. In correspondence with the Children’s Law Center, CFSA reported that it spent \$43,441,148 on Child Placement in FY17. However, the Mayor’s Proposed Budget reports that the Agency spent \$60.658 million on Child Placement in FY17. We hope the Committee will inquire further into this discrepancy.

¹³ See CFSA. *FY19 Proposed Budget: CFSA Overview for the Community*. Presented on April 12, 2018, slide 8.

¹⁴ The Agency did explain that it is developing a RFP for a group home provider for older youth with developmental disabilities, but this potential provider is not likely to be good placement option for parenting teens.

¹⁵ See CFSA. *FY19 Proposed Budget: CFSA Overview for the Community*. Presented on April 12, 2018, slide 7.

¹⁶ Director Donald unveiled the Four Pillar Strategic Plan in a community stakeholder meeting in June 2012.

¹⁷ The proposed FY11 budget requested \$15.8 million for Prevention Services. CFSA Proposed Budget FY11, p. E-25 (Table RLO-4; line 3080). During FY15 and FY16, Prevention Services were funded through the Community Partnership Services and the Mayor requested \$30.3 million and \$38.4 million respectively See CFSA Proposed Budget FY15, p. E-24 (Table RLO-4; line 8010) and See CFSA Proposed Budget FY16, p. E-24 (Table RLO-4; line 8010). Prevention Services became its own line item again in FY17 and the Mayor requested \$20.9 million. See CFSA Proposed Budget FY17, p. E-17 (Table RLO-4; line 8030). The current proposed budget requests \$16.2 million for Prevention Services. CFSA Proposed Budget FY19, p. E-23 (Table RLO-4; line 8030).

¹⁸ See CFSA. *FY19 Proposed Budget: CFSA Overview for the Community*. Presented on April 12, 2018, slide 9.

¹⁹ CFSA. *2018 Priorities*. (PowerPoint Presentation to Stakeholders), slide 14. January 31, 2018. CFSA is also “working with Casey Family Programs and Chapin Hall and exploring Family First Prevention

Services Act for opportunities to build a city-wide approach to prevention.” CFSA. *FY19 Proposed Budget: CFSA Overview for the Community*. Presented on April 12, 2018, slide 10.

²⁰ Department of Health—Proposed Budget and Financial Plan FY 2019, p. E-74. Evidence also shows that home visiting leads to improved health care utilization by families, earlier identification of developmental delays in children, fewer subsequent pregnancies, increased rates of return to (or continuation in) school, and decreased criminal behavior and parental impairment due to substance abuse. See *Zero to Three*. Libby Dogget. (January 2013). *New Research Strengthens Home Visiting Field*. p. 7-8. See also Status Report on home Visiting in the District of Columbia Literature Review, prepared by DC Action for Children (Sept. 2016),

https://www.dcactionforchildren.org/sites/default/files/HVSR_lit_review_FINAL_web.pdf.

²¹ For example, the DC Office of the State Superintendent of Education previously funded some home visiting, including a program targeted to preschool age children, HIPPY, that no longer gets any District funding and continues with much smaller capacity.

²² Statements at the public CFSA FY 19 Proposed Budget Briefing on April 12, 2018.

²³ National Conference of State Legislatures. *Mental Health and Foster Care* (May 9, 2016). Retrieved from <http://www.ncsl.org/research/human-services/mental-health-and-foster-care.aspx>.