



August 11, 2016

The Honorable Pat Toomey
United States Senator
248 Russell Senate Office Building
Washington, DC 20510

Via fax: (202) 228-0284

Dear Senator Toomey,

The County Commissioners Association of Pennsylvania (CCAP) appreciates this opportunity to express its concern regarding many of the provisions contained in the Family First Prevention Services Act (H.R. 5456). As a County run, State administered child welfare system, the Counties of Pennsylvania have a substantial interest in how child welfare services are provided and funded. Counties rely on Title IV-E funds as a portion of the overall budget that is approved by the state Department of Human Services, with the remainder of the funding being provided by the state and county. Any decrease in IV-E funding directly negatively impacts the state and county portion of the funding. In a state that is already struggling to meet the requirements of the child welfare system due to substantial system reform and the Preventing Sex trafficking and Strengthening Families Act, such an impact would be extraordinarily detrimental to the children served in this system.

CCAP supports a number of the bill's provisions, but has serious concerns with language in the congregate care section and the limitations on the funding of prevention services. In the wake of the Jerry Sandusky sexual abuse scandal, Pennsylvania convened a Governor's Child Abuse Task Force to look at reforming the system as it pertains to child abuse reporting, investigations, and the compilation of data. This resulted in over 23 new pieces of state legislation going into effect for 2015. Shortly thereafter, the provisions of the Federal Preventing Sex Trafficking and Strengthening Families Act were enacted and Pennsylvania has been working diligently to implement these changes. The result has been a child welfare system that is suffering from growing pains and dramatic difficulties with staff retention.

Long before these changes, Pennsylvania was working hard to reduce reliance on congregate care settings and to greatly improve usage of kinship care placements. Indeed, statewide, Kinship care has increased dramatically within the state and congregate care usage has reduced from 20% in 2011 to 16% in 2015. While progress has been made, Pennsylvania, like many states, has struggled with recruiting sufficient numbers of foster homes. Additionally, the availability of trauma-informed, mental health services for abused and neglected children within family environments

has been an ongoing challenge within the state. We join California in urging Congress to consider integrating the components of the proposed Family-Based Services Act (S.429/HR.835) into this bill or adopting those measures as companions to this proposal.

Funding of Prevention Services

Of all provisions of this bill, CCAP most strongly supports the ability to draw down IV-E funding for prevention services. CCAP endorses provisions providing a federal financial match for up to 12 months for services to children and their biological, adoptive or kin family to prevent them from being placed into foster care. The provision that de-links eligibility for these families from the AFDC-FC "look back" standards is beneficial, and we support the de-link eligibility for all abused and neglected children served in foster care. We also support the ability to draw down IV-E funding to maintain the child with a parent residing in a licensed residential treatment facility.

That being said, there are a number of limitations on the ability to draw IV-E for prevention services that tremendously narrow the class of children who this may actually benefit. Children and their families should be able to access prevention services anytime it is warranted. By limiting participation to only those children at "imminent risk" for placement into foster care, beneficial services that could prevent abuse and neglect may not be able to be offered, which further puts children at risk. Further, limiting the funding of these services to only 12 months sets unrealistic limits, particularly when families may be struggling with substance abuse issues. Pennsylvania, like many state has seen dramatic increases in cases where opioid abuse is the main risk factor for abuse or neglect within the home. Oftentimes, such struggles are not easily remedied within 12 months.

CCAP is concerned with the limitation of funding for promising, supported, or well-supported practice, unless the plan includes a well-designed and rigorous evaluation. These evaluations are costly and time consuming. Additionally, being a county run system, many of our small and rural counties do not have sufficient numbers of children that they are providing services to in order to warrant such a program evaluation, if there are even statistically significant numbers of children receiving such services to even be able to undertake such a process. As a result, many of our counties will be unable to avail themselves of the opportunity provided by this bill, resulting in fewer services to children, youth and families.

Lastly, CCAP has concerns with the provision requiring a per-child tracking of expenditures. This provision will likely prove to be a costly and labor-intensive endeavor. Counties often award contracts to community providers. Consequently, the provision will require significant tracking by contract agencies and counties. For service outcome reporting, counties would have to report the specific services or programs provided to each child and the amount spent on each service or program for each child and each contractor. Compounding this issue will be the advances Pennsylvania has made in instituting a Human Services Block Grant, which provides greater flexibility with human services funding, but will make per child spending even more difficult to track as the funding from various human services (child welfare, drug and alcohol, mental health, etc.) are combined to provide services in a more holistic manner. Total expenditures for all

children and families served, categorized by service type would be a more reasonable way to report.

Limits on Funding for Congregate Care

While Pennsylvania has been working diligently to reduce its reliance on congregate care for placements, the provisions in this bill are very concerning. CCAP recognizes that the proposed federal legislation intends to address many of the same issues Pennsylvania has been focused on, but the federal overlay of several proposed requirements of this act will further exacerbate many of the struggles within the PA system.

The funding prohibitions in this bill restrict federal funding if an assessment on the need for placement in a qualified residential treatment program is not completed within thirty days. These assessments require a trained, licensed clinician who is versed in child trauma to conduct interviews with the child and family members, as well as others connected with the family, although it cannot be a county child welfare professional, who are the very people who are most capable of completing such an assessment. While the bill allows for states to request a waiver from this requirement, it is concerning that the federal government does not trust public entities to make placement decisions in the best interest of the child.

The timeframe this bill requires is very short and Pennsylvania does not have enough clinicians to conduct the proper assessment by the deadline. Additionally, limiting congregate care reimbursement to only a few situations limits its use when it may be warranted, such as Commercially Sexually Exploited Youth, Independent Living Programs, juvenile delinquency system involved youth, and programs treating gang-affiliated youth. Indeed, the federal Preventing Sex Trafficking and Strengthening Families Act requires specialized services for sex trafficked youth, but this is oftentimes a congregate care facility where the youth's needs and safety can be provided for, yet they will frequently not meet the definition of a child with a serious emotional or behavioral health disorder.

CCAP struggles to understand the provision requiring licensed or certified nursing staff and other clinical staff on site during business hours. After years of trying to provide settings that are the family-like and least restrictive possible, medicalizing treatment by requiring nursing and clinical staff being on-site seems counter-intuitive. Few children need both medical and mental health services on-site, and fewer still during business hours, when they are generally at school. In rural counties, these staffing requirements will be almost impossible. While having clinicians and medical staff available as needed is important, the provisions of this bill are unduly onerous and illogical based on how the practice actually works. Additionally, the requirement that programs be accredited may well have the result of putting many of the smaller programs out of business due to the expense involved in this.

The provision requiring court approval within 60 days of the placement will likely be less problematic in Pennsylvania than in many states, as Pennsylvania law already requires the court to make determinations regarding which placement is in the best interest of the child. CCAP welcomes the language requiring training of judges and other legal personnel on the bill's child welfare policies and payment limitations on non-foster family homes, but those provisions still do

not necessarily address decisions made by the judge which may not comport with the provisions the legislation.

Requiring Pennsylvania to submit to the Secretary of Health and Human Services the justification for a continued placement in congregate care is onerous and overreaching. Administratively, the time it will take the county and state to review/provide such documentation to HHS will create substantial additional expense and undue work. This could result in the loss of federal funding for the county and a premature end to treatment for the child, with little or no time for the agency to seek an alternative placement. CCAP recommends a requirement that Pennsylvania enact policies to minimize long-term placements in a congregate care setting.

CCAP supports other provisions contained in this proposal, such as the extension of the Chafee Foster Care education and training vouchers up to age 23, encouraging the use of electronic systems when placing children across state lines, and extending for five years the Promoting Safe and Stable Families and Child Welfare Service programs under IV-B, and the Adoption and Legal Guardianship Incentive Payments.

Thank you for taking a moment to consider the impact this bill will have on Pennsylvania's child welfare system. While there are several positive pieces in this bill, the additional provisions noted above will create substantial additional hurdles and expense to an already stressed system. We would ask that you oppose this bill until these issues can be resolved. If you have questions about our positions, please feel free to have your staff contact Brian Bornman, esquire, Executive Director of the Pennsylvania Children and Youth Administrators Association at (717)526-1010 x3107 or bbornman@pacounties.org.

Sincerely,

A handwritten signature in blue ink, appearing to read 'D. Hill', is written over a faint, illegible typed name.

Douglas E. Hill
Executive Director