Welcome

Children's Continuum of Care Reform
Stakeholder Kickoff Meeting
May 3, 2018
10:00 a.m. – 1:00 p.m.

WHO WE ARE

Mission

PCSAO is a membership-driven association of Ohio's county Public Children Services Agencies that advocates for and promotes child welfare program excellence and sound public policy for safe children, stable families, and supportive communities.
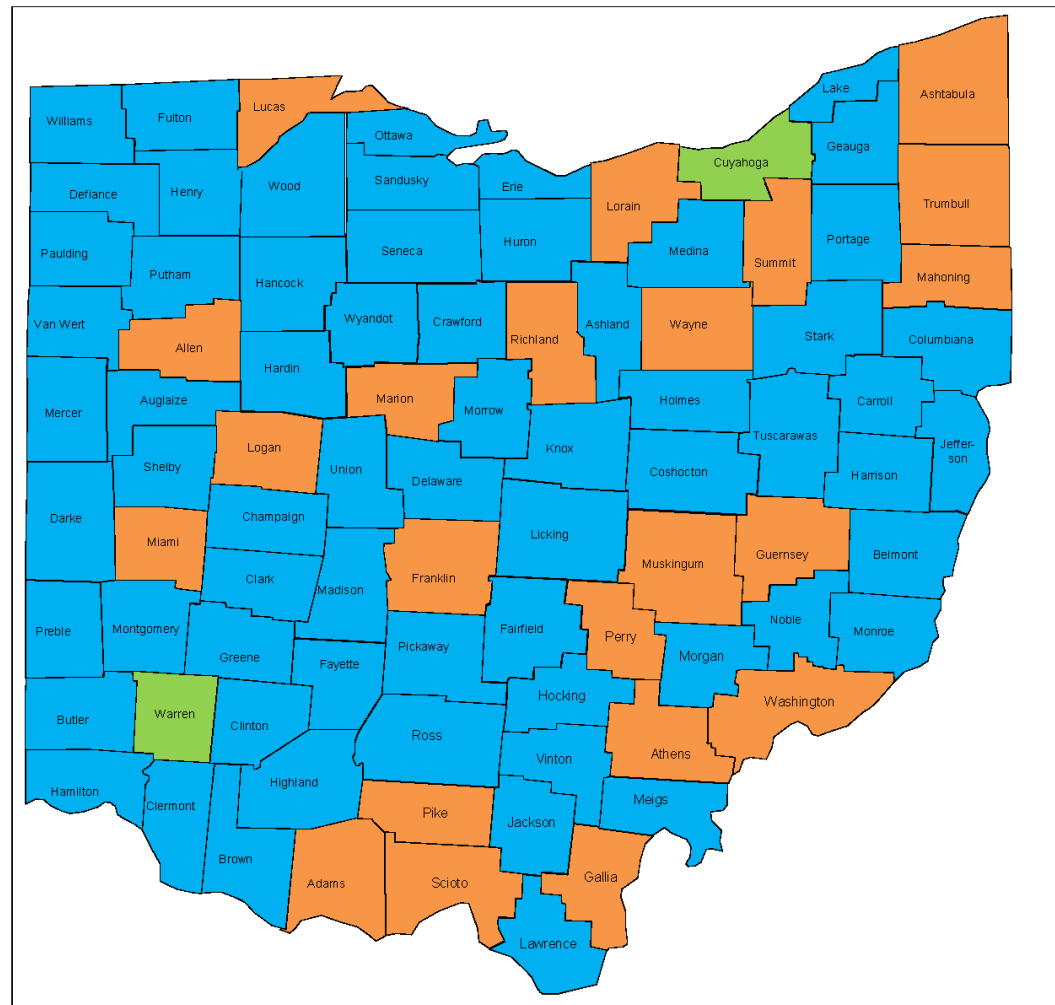
OUR MEMBERS – COUNTY PUBLIC CHILDREN SERVICES AGENCIES

Agency Structure

61 combined agencies (JFS), 22 separated (CSB), & 2 Hybrids

Combined Job & Family Services
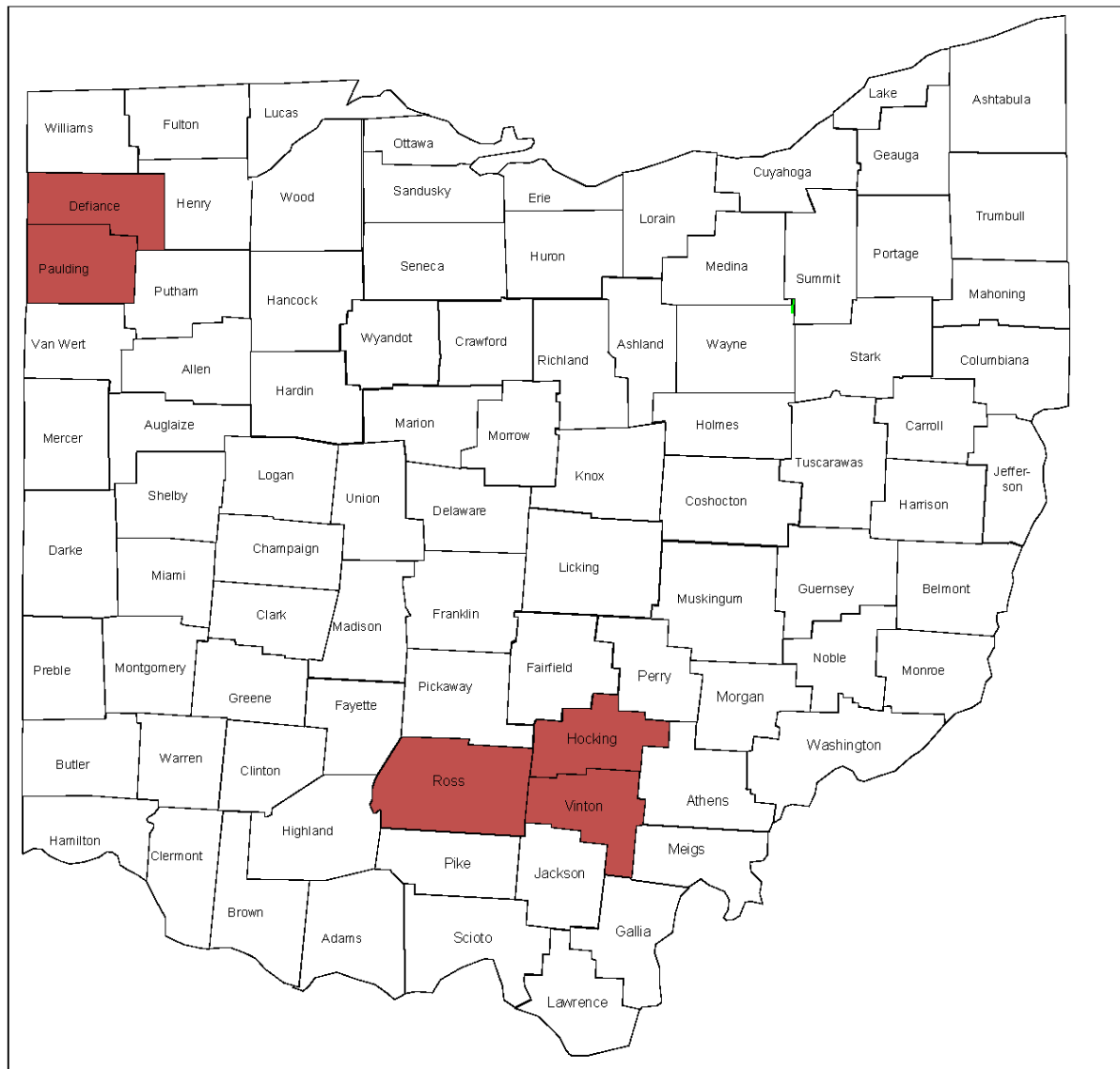
Separated Children Services Board

Hybrid (e.g., Director reports to County Manager/Executive

PCSA Sizes

CPOE = Child Protection Oversight and Evaluation

Legend:
- Small
- Medium-Small
- Medium
- Large
- Metro
- Major Metro

WHY A CHILDREN'S CONTINUUM OF CARE REFORM PLAN?

More Children in Foster Care

Ohio's Children Services System Is Strained

More children are entering foster care at alarmingly higher rates than ever before

Children in Foster Care on a Given Day
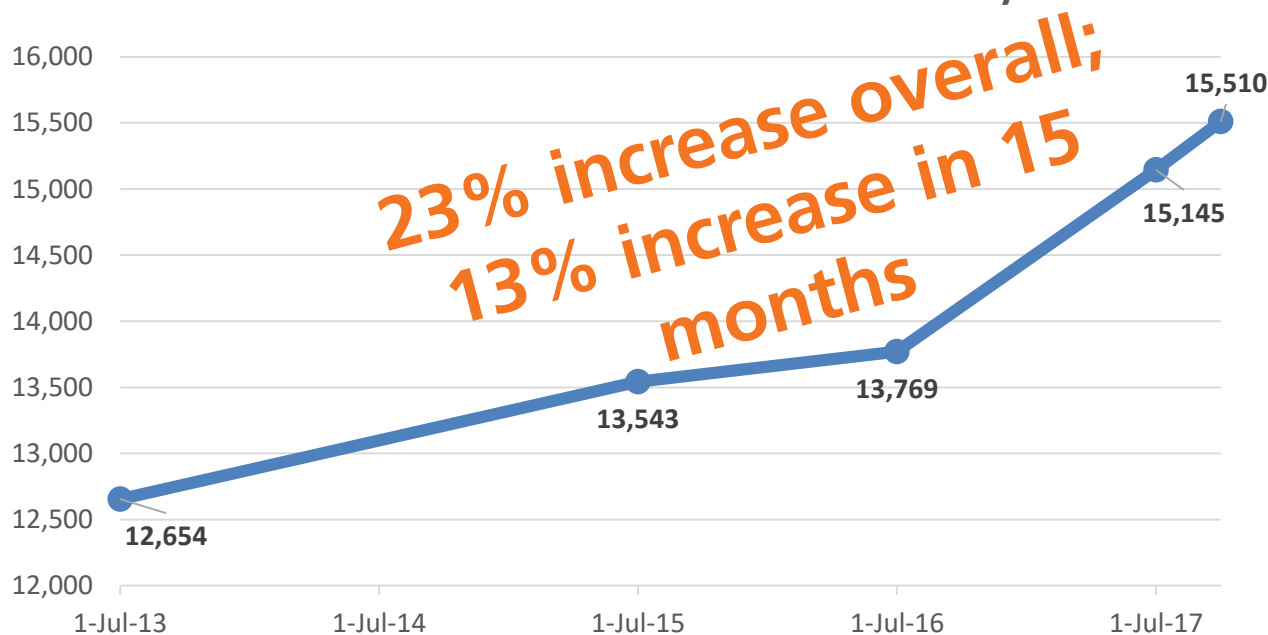
67% of children in foster care are 12 and younger; 28% are 3 and younger.

23% increase overall; 13% increase in 15 months

- 15,510
- 15,145
- 13,769
- 13,543
- 12,654

Chart values (y-axis): 12,000 — 16,000
Chart x-axis: 1-Jul-13, 1-Jul-14, 1-Jul-15, 1-Jul-16, 1-Jul-17

Source: ODJFS SACWIS special data run, received Nov. 2017.
Point in Time Data for July 1, 2013, 2015, 2016, 2017 and Oct. 1, 2017

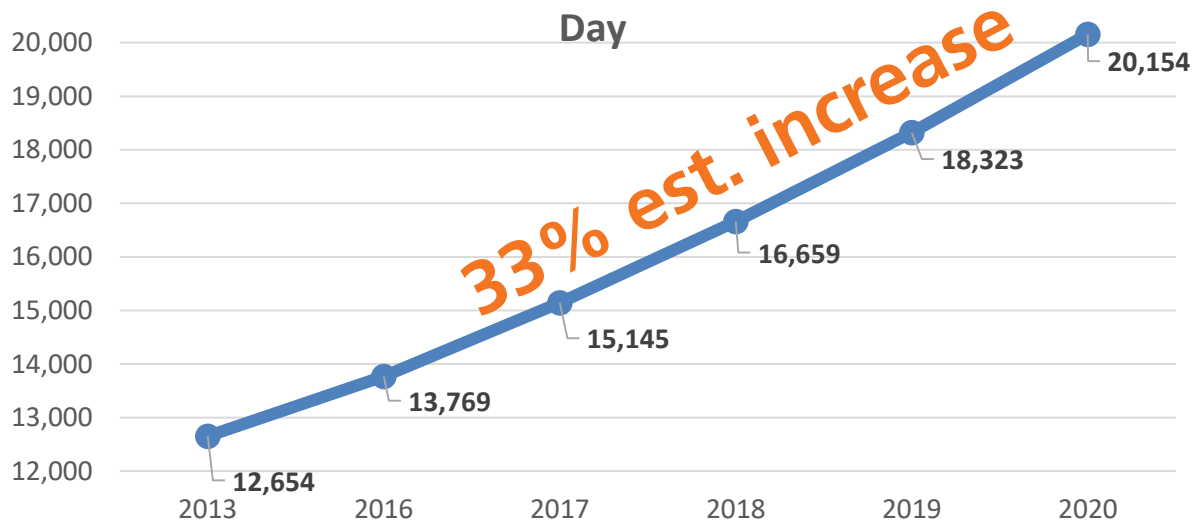# Ohio's Children Services System Will Explode

If the opioid epidemic continues at its current pace, Ohio will have over 20,000 children in foster care by 2020

Est. Number of Children in Foster Care on a Given Day

33% est. increase

Year	Number
2013	12,654
2016	13,769
2017	15,145
2018	16,659
2019	18,323
2020	20,154

Only 7,200 foster homes available; not increasing at the same pace – 2.5% increase/year
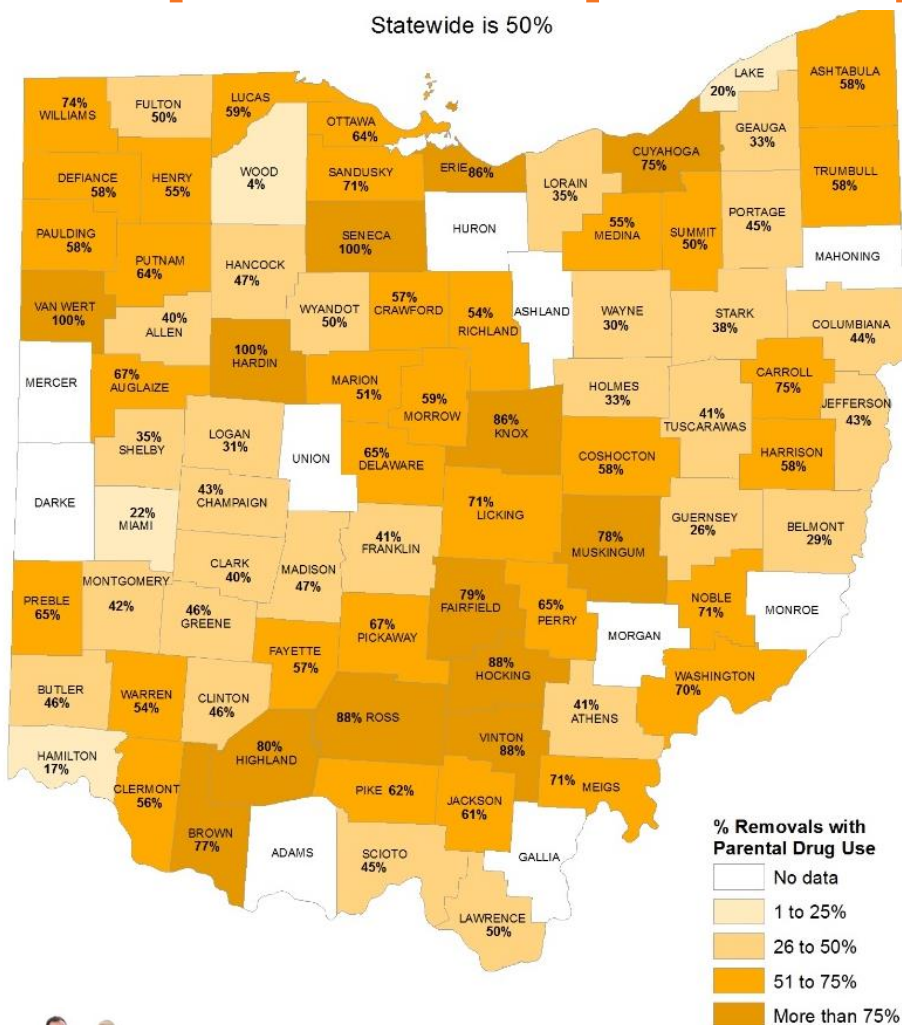
Source: ODJFS SACWIS special data run, received Nov. 2017. Additional calculations by PCSAO. Point in Time Data for July 1, 2013, 2015, 2016, 2017 and Oct. 1, 2017

Impact of Opioid Epidemic on Children

Statewide is 50%

50% of children taken into custody in 2015 had parental drug use

Source: PCSAO Opiate Survey, 78 county Public Children Services Agencies responded, Apr. 2016

Impact of Opioid Epidemic on Children

Statewide is 28%

28% of children taken into custody in 2015 had parents who were using opioids at time of removal
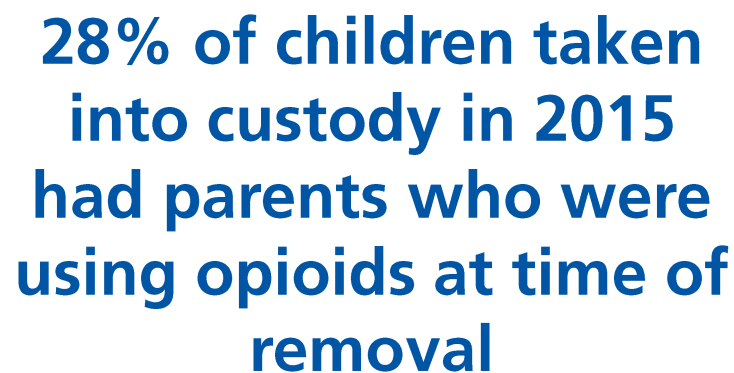
Source: PCSAO Opiate Survey, 78 county Public Children Services Agencies responded, Apr. 2016
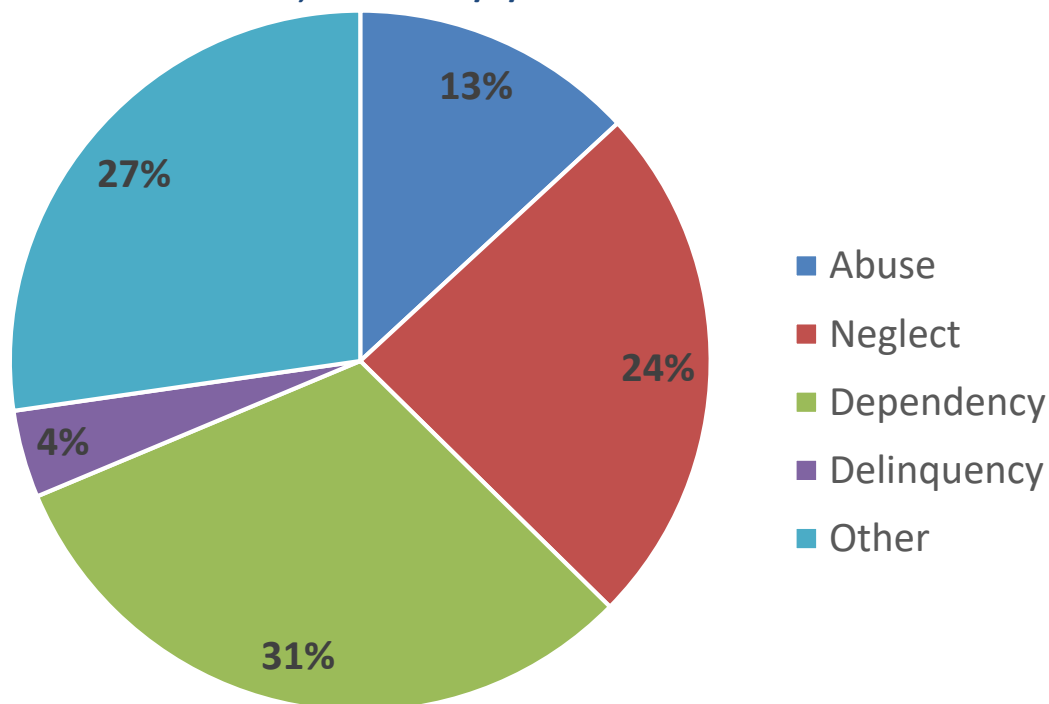
More Complex Needs

Ohio's Children Services System Today

More children are removed for reasons other than abuse and neglect.

Reasons for Removal

Total= 13,683 as of 7/1/16

- Abuse — 13%
- Neglect — 24%
- Dependency — 31%
- Delinquency — 4%
- Other — 27%

Source: ODJFS SACWIS, calculations by PCSAO, SFY2016

Ohio's Children Services System Today

Nearly half (49%) in residential or group homes have a primary removal reason other than child abuse and neglect:

Legend:
- Unruly Status Offender
- Child Behavioral Problem
- Delinquency
- Abuse
- Neglect
- Dependency
- Other

Chart values:
- Abuse and Neglect: Abuse 8%, Neglect 11%
- Unruly, Behavioral, and Delinquency: Unruly Status Offender 3%, Child Behavioral Problem 16%, Delinquency 25%
- Dependency: 29%
- All Other: 11%
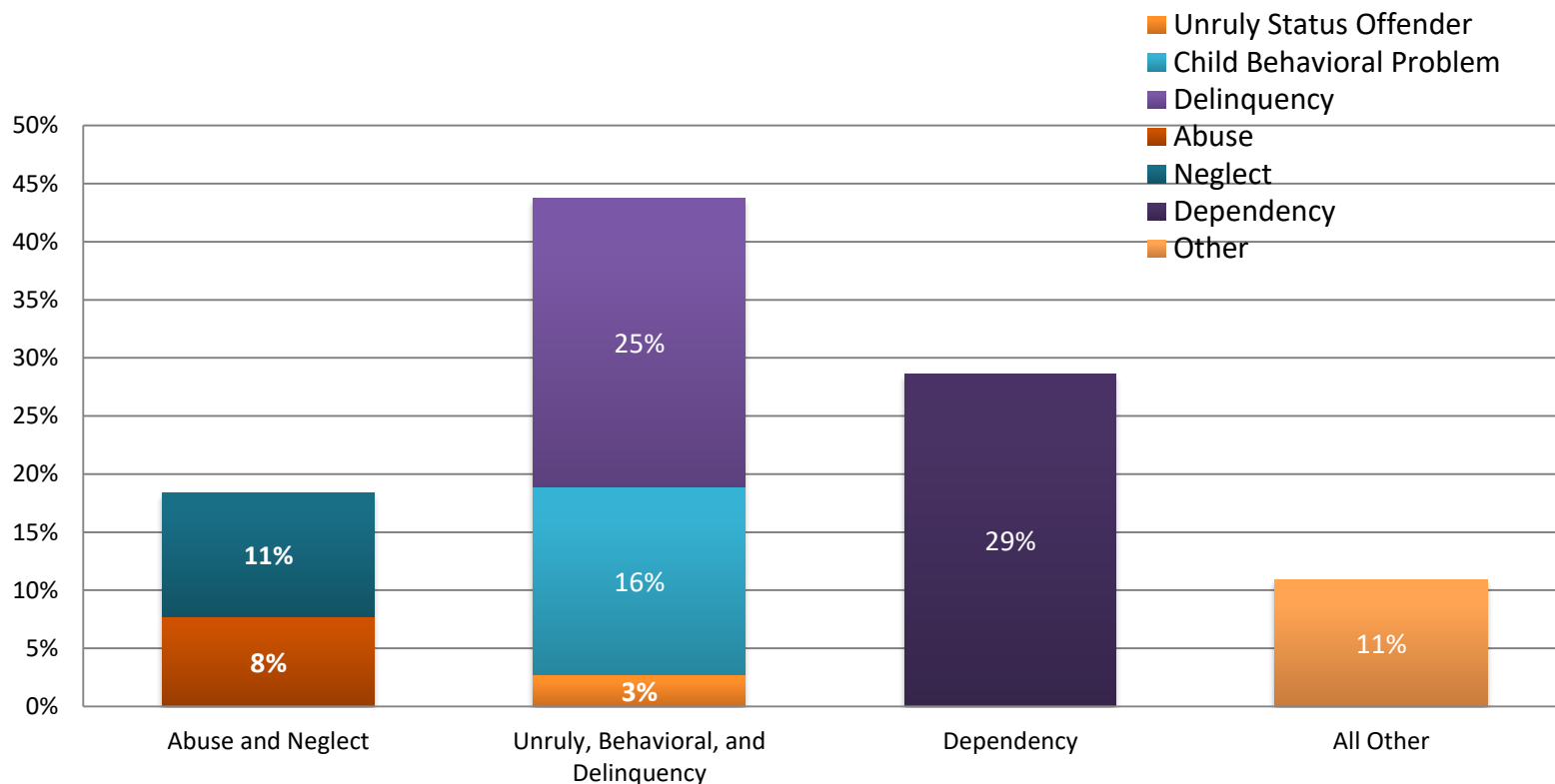
Source: ODJFS SACWIS, calculations by PCSAO, SFY2016

Quick Look at Residential

Placement Type	2015	2016	2017
CRC In-State	1,467	1,455	1,572
CRC Out-of-State	94	88	113
CRC Total	**1,561**	**1,543**	**1,685**
GH In-State	628	644	670
GH Out-of-State	5	3	5
GH Total	**633**	**647**	**675**

➢ 67% of CRC placements are males
➢ 86% of CRC placements are the ages of 13-18
➢ 40% of CRC placements are African American
➢ 74% of CRC placements are in temporary custody

Source: ODJFS SACWIS special data run, received Nov. 2017.
Point in time data for July 1, 2015, July 1, 2016, July 1, 2017
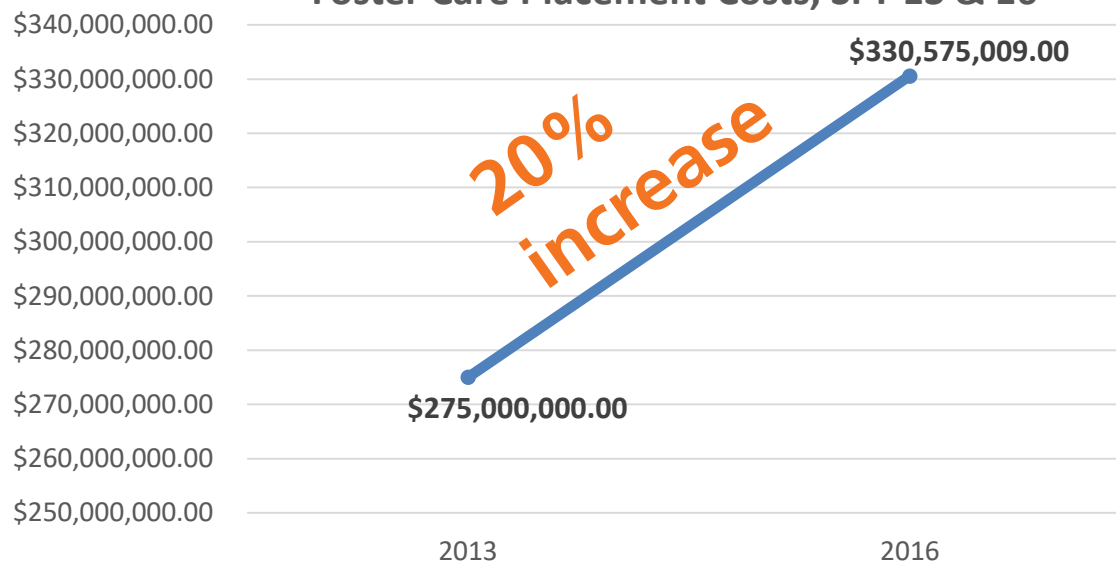
More Expensive Costs

Ohio's Children Services System Is Strained

Placement costs have increased dramatically due to more children in care and their needs are more complex

66% paid with local dollars, 34% paid with federal dollars

Foster Care Placement Costs, SFY 13 & 16

$340,000,000.00
$330,000,000.00 — **$330,575,009.00**
$320,000,000.00
$310,000,000.00
$300,000,000.00
$290,000,000.00
$280,000,000.00
$270,000,000.00 — **$275,000,000.00**
$260,000,000.00
$250,000,000.00

2013   2016

20% increase

Source: ODJFS SACWIS special data run, received Jan. 2017. Additional calculations by PCSAO.

Average Placement Costs Per Day

Type of Placement	Aver. Per Diem
1. Family Foster Home:	$25/day
2. Treatment Foster Home:	$77/day
3. Detention Facility:	$173/day
4. Group Home:	$211/day
5. Residential Center:	$244/day
6. Residential Out-of-State:	$302/day

Data provided by ODJFS, Special Request, Median Per Diem Costs as of 10/1/17
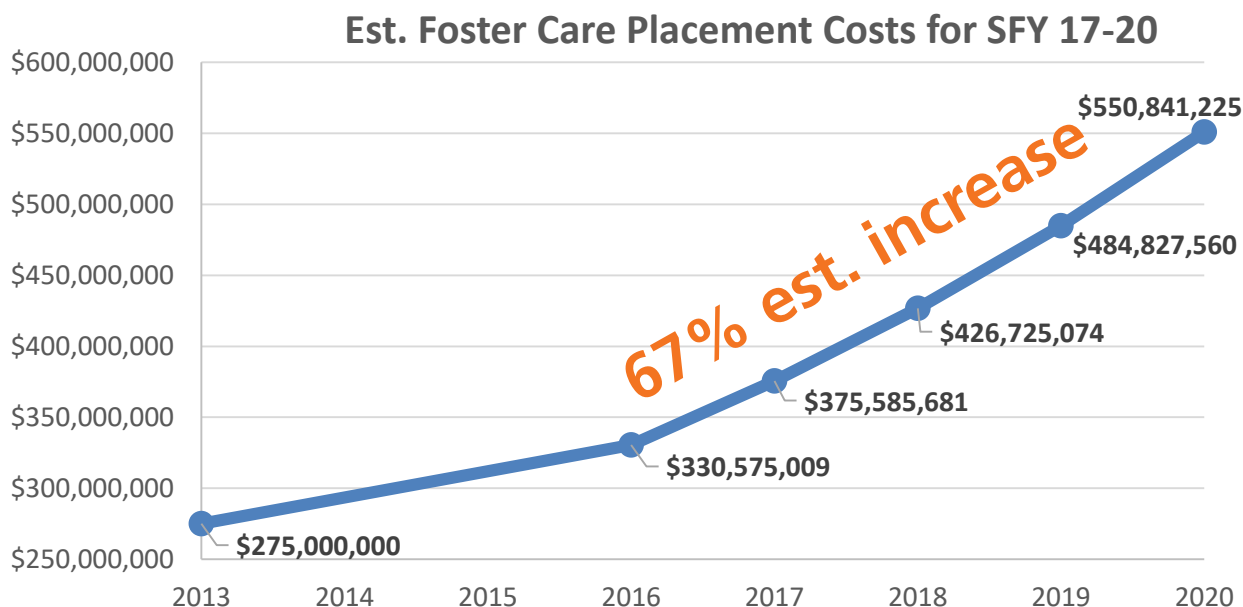
Ohio's Children Services System Will Explode

The skyrocketing cost of foster care in Ohio is reaching levels that will require substantially more State resources

An additional $175M will be needed in 3 years - just for placement costs!

Est. Foster Care Placement Costs for SFY 17-20

67% est. increase

- $275,000,000 (2013)
- $330,575,009 (2016)
- $375,585,681 (2017)
- $426,725,074 (2018)
- $484,827,560 (2019)
- $550,841,225 (2020)

Source: ODJFS SACWIS special data run, received Jan. 2017. Additional calculations by PCSAO.

We need some action!

Gearing Up for the Reform

- Board authorized forming an action planning group as a result of Membership discussion in late August 2017

- **Purpose:** To develop a plan to address the barriers to accessing available, affordable, and appropriate in-state foster care and residential centers for children.

Action Planning Members

- Tim Schaffner / Trumbull CCS - Chair
- Kristi Burre / Fairfield CJFS
- Jewell Good / Montgomery CJFS
- Patty Harrelson / Richland CCS
- Pam Meermans / Clark CJFS
- Michael Morrow / Auglaize CJFS
- Jacque Ringer / Marion CCS
- Chip Spinning / Franklin CCS
- Moira Weir / Hamilton CJFS
- Angela Sausser / PCSAO
- Scott Britton / PCSAO

Planning Activity

- Met monthly from August – March to develop the plan

- Conducted national research, looked at state data, and evaluated best practices.

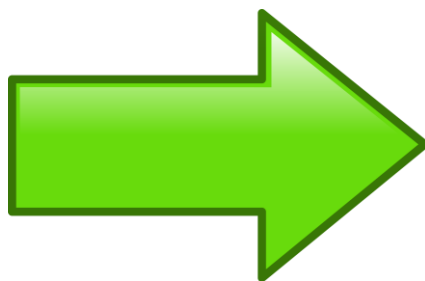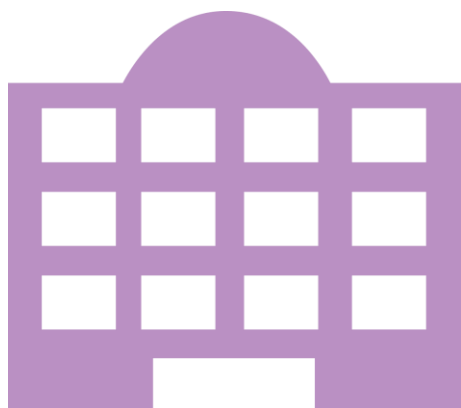- Connected to California on their reform efforts

Major Problem Areas

1. Kids are being placed out of state for residential care

2. Kids are staying in care longer

3. Kids should not be raised in institutions but rather with families

4. Kids are being placed with foster families and in facilities that are not in or continguous to home county

Shifted the Focus

Continuum of Care Gaps

- Lack of community-based services and being able to keep or place with families

- Foster care model is outdated

- Lack of short-term crisis stabilization options

- Unable to find care for the highest acuity kids

- Need more holistic services

- Lack of a real trauma treatment system of care

Our Vision:

Children's Continuum of Care Reform

Children's Continuum of Care Reform (CCCR) Goal Statement

To reduce reliance on congregate care settings and embrace that kids do better with families, Ohio needs to establish a children's continuum of care that focuses on preventing and intervening with community-based, short-term crisis stabilization and diversion services.

If children need to be removed from their families, there needs to be a robust foster care system that can support the challenging needs of kids in a family-based setting while focusing on reunification.

Continuum of Care Reform Plan

Four Strategy Areas

Prevention, Intervention, Crisis & Diversion Services

Foster Care Services

Aftercare & Reunification Services

Residential Care Services

CCCR Expected Outcomes

1. Increase in the availability of prevention services

2. Reduce the number of children coming into care

3. Increase family search and engagement efforts

4. Increase the recruitment of foster families

5. Increase the retention of foster families

CCCR Expected Outcomes

6. Reduce the length of stay in foster care

7. Reduce children reentering foster care

8. Reduce residential placements

9. Reduce out-of-state placements

10. Reduce children experiencing (additional) trauma

CCCR Strategy Area 1: Prevention, Intervention, Crisis & Diversion Services

➢ *Increase availability and accessibility of such services so that children can remain with their families.*

Priority Area 1: Prevention, Intervention, Crisis & Diversion Services

Objectives:

A. Incorporate High-Fidelity Wraparound as a Medicaid-billable services.

  ➢ Refer to plan in folder for specific action steps.

B. Expand the Intensive Home-Based Treatment continuum.

  ➢ Refer to plan in folder for specific action steps.

Priority Area 1: Prevention, Intervention, Crisis & Diversion Services

C. Increase short-term crisis options that are trauma-informed.

  ➢ Refer to plan in folder for specific action steps.

D. Expand Juvenile Court diversion programs.

  ➢ Refer to plan in folder for specific action steps.

E. Expand community-based supports that can meet family's basic needs and assist in stabilizing the family.

  ➢ Refer to plan in folder for specific action steps.

Priority Area 1: Prevention, Intervention, Crisis & Diversion Services

F. Expand Peer Mentor models to keep families together.

  ➢ Refer to plan in folder for specific action steps.

G. Enhance Ohio's family search and engagement efforts so children can remain with their relatives if they do have to be removed from their family of origin.

  ➢ Refer to plan in folder for specific action steps.

Priority Area 1: Prevention, Intervention, Crisis & Diversion Services

H. Develop effective, trauma-informed mental health, substance abuse, and parenting prevention services.

➢ Refer to plan in folder for specific action steps.

CCCR Strategy Area 2: Foster Care Services

➤ *Create a robust foster care system that can meet the variety of challenging needs of children while focusing on reunification efforts.*

Priority Area 2: Foster Care Services

Objectives:

A. Develop statewide foster parent recruitment and retention assistance.

  ➢ Refer to plan in folder for specific action steps.

B. Modernize Ohio's foster care system.

  ➢ Refer to plan in folder for specific action steps.

CCCR Strategy Area 3: Aftercare and Reunification Services

➢ *Increase availability and accessibility of such services so that children can safely return to their families and achieve sustained permanency.*

Priority Area 3: Aftercare and Reunification Services

Objectives:

A. Develop and expand aftercare and reunification services that provide supports to families so that sustained permanency can be achieved.

➤ Refer to plan in folder for specific action steps.

B. Ensure appropriate aftercare services for all levels of care exist throughout the state and can be accessed within counties.

➤ Refer to plan in folder for specific action steps.

CCCR Strategy Area 4: Residential Care Services

➢ *Decrease Ohio's use of congregate care (residential, group homes) settings and when needed, ensure high-quality residential treatment facilities can meet the needs of children is available in proximity of family.*

Priority Area 4: Residential Care Services

Objectives:

A. Ensure availability and accessibility to instate high acuity residential placements, including affordability for families to access without relinquishing custody.

  ➢ Refer to plan in folder for specific action steps.

Priority Area 4: Residential Care Services

Objectives:

B. Develop more short-term, individualized, defined, trauma-informed, high-quality, residential treatment facilities that are accessible and affordable for PCSAs and families.

  ➤ Refer to plan in folder for specific action steps.

C. Expand residential options by working in partnership with Ohio's providers.

  ➤ Refer to plan in folder for specific action steps.

Where's Kinship?

➢ Separate policy group of PCSAO – recommendations were included in the Gubernatorial Candidates' Foster Hope for Ohio's Children paper

➢ Current Activity:

➢ Kinship Navigator bill

➢ AG's Grant – Pilot Program

➢ Kinship Child Care program

A Federal Opportunity

Family First Prevention Services Act (FFPSA)

- Passed in February 2018

- Landmark legislation with significant reform (practice and funding) for child welfare

- Provisions impact prevention, foster care, reunification, residential, kinship care

Family First Prevention Services Act (FFPSA)

- Prevention:
  - Opens Title IV-E for specified services to be provided at state option (match: 50/50)
    - Mental health and substance abuse prevention and treatment services
    - In-home parent skill-based programs that include parenting skills training, parent education, and individual and family counseling

Family First Prevention Services Act (FFPSA)

- Prevention:
  - Services can be given up to 12 months to:
    - A child who is a candidate for foster care
    - A child in foster care who is pregnant or parenting
    - A parent or kin caregiver of the child
    - Includes a child whose adoption or guardianship is at risk of disruption

Family First Prevention Services Act (FFPSA)

- Prevention:
  - Service requirements will be provided by HHS by Oct. 1, 2018 and must be:
    - Trauma informed
    - Promising, supported, or well-supported
    - Specifically listed in the state plan
    - Subjected to a well-designed and rigorous evaluation

Family First Prevention Services Act (FFPSA)

- Prevention:
  - Service requirements will be provided by HHS by Oct. 1, 2018 and must be:
    - Trauma informed
    - Promising, supported, or well-supported
    - Specifically listed in the state plan
    - Subjected to a well-designed and rigorous evaluation

Family First Prevention Services Act (FFPSA)

- Foster Care:
  - Review and improving licensing standards
    - HHS to identify such standards by Oct. 1, 2018
    - States need to respond by April 1, 2019 on whether licensing standards are in accord with HHS standards

    - Amends the definition of family support services to include community-based services designed to support and retain foster families.

Family First Prevention Services Act (FFPSA)

- Reunification:
  - Amends timeline for such services under Title IV-B
    - Allows for indefinite provision of services while child is in foster care
    - Allow up to 15 months of post-reunification services to families after child returns home

Family First Prevention Services Act (FFPSA)

- Residential:
  - Creates a new placement type – Qualified Residential Treatment Program (QRTP)
    - Has trauma-informed treatment model
    - Able to implement the treatment identified for the child
    - Has registered or licensed nursing staff and other licensed clinical staff; available 24/7
    - Facilitates participation of family in child's treatment

Family First Prevention Services Act (FFPSA)

- Residential:
  - Creates a new placement type – Qualified Residential Treatment Program (QRTP)
    - Facilitates outreach to family members, including siblings
    - Documents how family members are integrated into the treatment process, including post-discharge
    - Provides discharge planning and family based aftercare for at least 6 months post-discharge

Family First Prevention Services Act (FFPSA)

- Timeline
  - States can move forward with prevention services IF able to meet the requirements for residential starting on Oct. 1, 2019
  - Option is available to states to request a delay for up to 2 years (by Oct. 1, 2021)

Feedback

Small Group Discussion

Over lunch, discuss with a small group the following:

➢ What did you like about the plan?

➢ What needs improved upon?

➢ What are other opportunities to assist with this reform?

Large Group Discussion

➢ What do you like about this plan?

➢ What needs improved upon?

➢ What are other opportunities to assist with this reform?

Possible Next Steps

➢ Determine how Ohio can fill the "gaps" to be ready for FFPSA, especially prevention & residential

➢ Form an Advisory Council to focus on:
  ➢ Prevention/Aftercare Services
  ➢ Foster Care Services
  ➢ Residential Care Services

Join the Reform Effort

➤ Please complete the commitment form indicating if you/your organization supports this effort.

➤ Indicate on the form what area(s) you/your organization would want to work on.

Final Thoughts & Questions

Thank You!

Contact Information:

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Angela@pcsao.org