

SENATE HUMAN SERVICES COMMITTEE

Marie Alvarado-Gil
Chair

***Oversight Hearing:
Reforming California's Child Welfare System:
Recent Mandates and Innovations***

February 12, 2024
10:00am, Room 2200

BACKGROUND

INTRODUCTION

California's child welfare services (CWS) system is an essential component of the state's safety net. Social workers in each county receive reports of abuse or neglect, then investigate and resolve those reports. When a case is substantiated, a family is either provided with services to ensure a child's well-being and avoid court involvement, or a child is removed and placed into foster care. In 2023, the state's child welfare agencies received 435,302 reports of abuse or neglect. Between October 2022 and September 2023, 48,295 reports contained allegations that were substantiated and 18,297 children were removed from their homes and placed into foster care through the CWS system. As of October 1, 2023, there are 45,044 children in the CWS system living with their parents or in out-of-home arrangements.¹

Abused and neglected children who have been removed from their homes fall under the jurisdiction of the county's juvenile dependency court. The dependency court holds legal jurisdiction over the child, while the child is served by a CWS system social worker. This system seeks to ensure the safety and protection of these children, and where possible, preserve and strengthen families through visitation and family reunification. The CWS system provides multiple opportunities for the custody of a foster child, or the child's placement outside of the home, to be evaluated, reviewed and determined by the judicial system, in consultation with the child's social worker to help provide the best possible services to the child. It is the state's goal to reunify a foster child or youth with their biological family whenever possible. In instances where reunification is not possible, it is the state's goal to provide a permanent placement alternative, such as adoption or guardianship, with other relatives or nonrelative extended family members, or with Resource Families.

In California, the CWS is state supervised and county administered. The 58 counties each maintain a county child welfare agency that has a 24-hour response system to receive and investigate reports of suspected neglect or child abuse. The CWS is California's primary statewide intervention

¹ UC Berkeley, California Child Welfare Indicators Project
<https://ccwip.berkeley.edu/childwelfare/reports/Entries/MTSG/r/ab636/1>

program for children who have been abused, neglected, or exploited. The goal of the program is to protect children through an integrated service delivery system and to provide prevention and intensive services to families to ensure enough child safety, permanency, and well-being to allow families to stay together in their own homes. If a child is deemed to be at risk by a county social worker, with oversight by the local juvenile court, a temporary out-of-home placement is arranged with the goal of reunifying the family once it is safe for the child. If family reunification is not possible, a permanent placement in the safest and least restrictive environment is arranged and monitored by county child welfare agencies.

The California Department of Social Services (CDSS) serves as the state agency responsible for oversight of the CWS program and collaboration with county, federal, and Tribal partners. The CWS program provides services to children and families at the county level. The program provides services through four components: Emergency Response, Family Maintenance, Family Reunification, and Permanent Placement.

- 1) Emergency Response (ER) services are designed to provide in-person investigations, 24 hours a day, in response to reports of abuse, neglect, or exploitation. These investigations determine the necessity for providing initial intake services, whether crisis intervention is needed to maintain the child safely in their own home, or if emergency removal and foster care placement are needed to protect the safety of the child.
- 2) Family Maintenance (FM) services are time-limited protective services provided to families determined to be in crisis to help prevent or remedy abuse or neglect to allow children to remain safely in their own homes. Social workers develop a case plan that includes the appropriate services necessary to meet each family's unique needs.
- 3) Family Reunification (FR) services consist of time-limited services provided to children and their families to prevent or remedy abuse, neglect, or exploitation when the child has been removed because they cannot remain safely at home. These services are aimed at remedying the cause of the abuse, neglect, or exploitation that led to the child's removal so the child can be reunified with their family.
- 4) Permanent Placement (PP) services offer alternative family structures and services to children who cannot remain safely at home and are unlikely to return home. The PP caseload includes children who are pending adoption or relative and non-related extended family member guardianship or are in a legal guardianship with an unrelated caregiver, or youth who are expected to age out of foster care and are receiving Independent Living Program services.

The CWS program also provides Transition Services to non-minor dependents (NMDs) who are young adults continuing in foster care after age 18. These services are focused on assisting the NMD in meeting the goals necessary to transition successfully to adulthood. Eligibility is contingent upon the NMD's participation in employment, career development activities, education, or having a medical condition that prohibits such activities.

CHANGES AT THE FEDERAL AND STATE LEVEL TO MOVE TO FAMILY BASED CARE

In 2011, the California Legislature directed the CDSS to reduce the CWS system's dependence on congregate care². In 2015, after a three year workgroup co-led by the County Welfare Directors Association of California (CWDA), the CDSS published a report entitled "California's Child Welfare Continuum of Care Reform (CCR),"³ as required by the legislature in SB 1013. The 56-page report, developed in collaboration with stakeholders, provided recommendations for restructuring the child welfare system to care for children in foster homes. The CCR report outlined a reform of California's CWS system by improving assessments of children and families, emphasizing home-based family placements of foster children, and changing the goals of congregate care placements. The report noted: "Children should live in their communities in home-based family care settings." This move mirrored changes being made at the federal level.

CCR was designed to reduce the number of foster children placed in congregate care settings by improving the assessments of children and families and establishing child and family teams (CFTs) for each child in foster care. Assembly Bill 403 (*Stone, Chapter 773, Statutes of 2015*) was the first of six CDSS-sponsored CCR bills and provided the statutory and policy framework to ensure services and supports provided to the child or youth and their family are tailored toward the ultimate goal of maintaining a stable permanent family. AB 403 advanced California's goal to move away from the use of long-term group home care by enacting a sunset for group home licenses, increasing youth placement into family settings, strengthening training and supports through the development of "child and family teams." Subsequent bills established requirements for mental health certification of Short-Term Residential Therapeutic Programs (STRTPs), made changes to the Resource Family Approval (RFA) process, and provided additional oversight of foster homes, the Intensive Services Foster Care category for children with high needs, and an option to license respite caregivers, among other changes. A sunset was also placed on federal and state participation in rates paid to group homes, effectively eliminating placement into group home care.

In the years leading up to California's CCR efforts, federal law⁴ directed states to implement policies to ensure children are placed in a permanent home quickly through reunification, adoption, guardianship, or permanent placement with a fit and willing relative. Changes in federal law included prohibiting a plan of long-term foster care for children younger than 16 years old, expanding the requirement to notify relatives when a child is brought into care, and increased incentives for adoption and guardianship. In California, the simultaneous reforms mandated by CCR required changes in the approach to evaluating children's needs, including the use of a newly adopted evaluation tool, the implementation of CFTs to determine placements, an increased emphasis on family finding for youth who must enter care, and the use of a new RFA process for all foster parents and relative caretakers. The reforms also created the STRTP model, which requires an integration of federal Title IV-E and Medi-Cal funded services.

² SB 1013 (*Committee on Budget and Fiscal Review, Chapter 35, Statutes of 2012*)

³ https://www.cdss.ca.gov/cdssweb/entres/pdf/CCR_LegislativeReport.pdf

⁴ Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351) and the Preventing Sex Trafficking and Strengthening Families Act (P.L. 113-183)

One of the Governor’s top priorities in 2024 is finalizing the last element of the CCR effort, which is payment reform. Existing rates are based on a child’s location in the child welfare system, meaning that children placed in STRTPs receive significantly higher rates than children placed in foster family settings. The new proposed structure, which will be detailed in trailer bill language that is pending, will refocus the funding for care on the youth, regardless of placement, based on the assessed needs of the child.

Movement Away from Group Homes. For more than a decade, researchers have documented poor outcomes for foster children in group homes. These outcomes have been especially pronounced for children and youth placed in group or congregate care settings. Research shows that children placed in group care settings are more likely to be juvenile justice involved, more likely to drop out of school, and are at greater risk of suffering additional physical abuse than their peers who are placed in family care settings.⁵ Indeed, several group homes in the state were closed due to abuse and insufficient care of the children placed in their care.⁶ When it comes to reunifying with their families, studies found higher foster care re-entry rates for children coming from a congregate care placement than for children who reunified from family-like foster care settings. There were also pronounced gaps in English and Mathematics achievement for youth placed in group home settings relative to other students in foster care.⁷

Living in a group home also is associated with an increased overall number of placements for youth, which, in turn, is correlated to poorer outcomes. When youth leave group care they are often less successful than their peers who were raised in family-like foster care settings. Former foster youth who experienced five or more placement changes have the worst outcomes during the transition to adulthood as identified by higher levels of public assistance, poor educational achievement, and likelihood of single parenting.⁸

Out of State Placements. In April 2020, staff members at a Michigan facility for foster youth restrained 16-year-old Cornelius Frederick for 12 minutes until he lost consciousness. He was in cardiac arrest when the paramedics arrived. Frederick died in a hospital two days later and his death was ruled a homicide. He had been living at the facility for two years. A Michigan state investigation concluded that the facility failed to follow state licensing rules on restraints.

Following Frederick’s death, several fights broke out and 26 of the 124 youth housed there ran away, according to news accounts. The facility was also experiencing widespread exposure of COVID-19 at the time. The Michigan Department of Health and Human Services subsequently ordered all youth be removed from the facility. Forty-one California youth were brought home in May 2020.

⁵ Casey Family Programs, “What are the outcomes for youth placed in congregate care settings?” Feb. 5, 2018, <https://www.casey.org/what-are-the-outcomes-for-youth-placed-in-congregate-care-settings/>.

⁶ ProPublica, “Level 14: California Backs off Group Homes, Looks to Lean on Foster Families,” Nov. 2, 2015, <https://www.propublica.org/article/california-passes-group-home-legislation-foster-families-troubled-youth>

⁷ Wiegmann, W., Putnam-Hornstein, E., Barrat, V.X., Magruder, J. and Needell, B. (2014) The Invisible Achievement Gap Part 2: How the Foster Care Experiences of California Public School Students Are Associated with Their Educational Outcomes.

⁸ Bethany and Ron Thompson, “Comparing Outcomes for Youth in Treatment Foster Care and Family-style Group Care,” Child Youth Services Review, 2008.

The same year, CDSS reviewed the operations of all certified out-of-state facilities and found significant licensing violations. In December 2020, CDSS decertified the out-of-state facilities failing to meet licensing standards, and returned all youth placed in those facilities back to California. Subsequently, the Legislature passed AB 153 (*Committee on Budget, Chapter 86, Statutes of 2021*), a budget trailer bill, which phased out the use of out-of-state residential facilities by child welfare and probation departments, removing foster children from out-of-state facilities by July 1, 2022.

Child and Adolescent Needs and Strengths (CANS). California implemented a set of shared values, principles and behaviors called the Integrated Core Practice Model (ICPM). This practice framework was identified through the 2016 Child and Family Services Review and Performance Improvement Plan effort, in response to the need for California child welfare agencies and their partners to improve the engagement of children and families in case planning and decision-making processes across the life of the CWS case for safety, permanency, and well-being. Child and Family Teaming (CFT) and Child and Adolescent Needs and Strengths (CANS) assessment tools are two approaches informed by the ICPM framework.

The CANS is a multi-purpose tool that supports decision-making, including level of care and service planning, which allows for the monitoring and outcome of services. When used as part of the CFT process, the CANS helps guide conversations among CFT members about the well-being of children, youth and NMDs, helps identify their strengths and needs, including the social and behavioral needs; helps to inform and support care coordination; helps aid in case planning activities, and helps to inform decisions about placement. The CANS replaced the child welfare Structured Decision Making Family Strengths and Needs Assessment Child Strengths and Needs Assessment, and as such, every child, youth, and NMD with an open child welfare case must have a CANS completed.

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Children Have Better Outcomes When Placed With Family. Research has shown that children placed with their own relatives and extended family members have greater placement stability, fewer emotional and behavioral problems, and more connections to their biological families and social-cultural communities. The Budget Act of 2022 allocated \$150 million from the General Fund in one-time funding, available for expenditure through June 30, 2027, for the purposes of participation in the Excellence in Family Finding, Engagement, and Support (EFFES) Program and to support implementation through the establishment of The Center for Excellence in Family Finding, Engagement, and Support (CFE).

CDSS has contracted with University of California, Davis to launch the CFE to support efforts to keep children and youth connected to their biological and extended families and will provide multi-tiered, culturally appropriate training and technical assistance such as conducting evidence-based, organization-specific assessments of implementation activities, and strengthening trauma-informed practices and programs related to family finding and engagement.

The CFE will provide training and technical assistance for counties and tribes that have opted to participate in the EFFES program. Specialized trainings and support will be available to county welfare agencies, probation departments, participating tribes, and foster care providers to enhance their practices, policies, and efforts for family finding, support, and engagement. The CFE will also provide training on how to engage children and young people in the family finding process. All trainings will utilize family finding and engagement, and permanency subject matter experts.

MOST RECENT REFORM – FAMILIES FIRST PREVENTION SERVICES ACT

In 2018, Congress passed, and the President signed, the Bipartisan Budget Act of 2018, which included the Families First Prevention Services Act (FFPSA). The FFPSA included two major reforms in how Federal Title IV-E funds can be used. First, it reformed the way child welfare financing worked, allowing federal dollars to be used for prevention services, rather than only after a child has been removed from their family and placed into foster care. Second, it limited federal financial support for children and teens in group care. Under the FFPSA, placements in settings with more than six children for more than two weeks will generally not be eligible for federal funding. The combination of these changes impacts both how services are delivered and how they are reimbursed, with a continued focus on the benefits of children remaining in the home or in the care of family members.

Prior to the passage of the FFPSA, Title IV-E funds could only be used for the costs of foster care maintenance, administrative expenses related to program management, training of staff and foster parents, and adoption assistance. The focus of these federal dollars was on after a child had been removed from the home, not before. With the changes, federal dollars can now be used before a child is removed as a prevention measure, in addition to if they are removed and placed into care. The FFPSA helped move the child welfare system from one that is reactionary to one that also includes prevention.

FFPSA Part I. The FFPSA has multiple parts, and California has opted into Part I and Part IV. Under Part I, states can receive Title IV-E dollars for prevention services. Under the FFPSA, there are two specific groups that are eligible for prevention services.

First is a child who is a “candidate for foster care” but can remain safely at home or in a kinship placement with receipt of evidence-based services or programs categorically identified in the Family First Act. These services and programs include mental health, substance abuse, and in-home parenting services that have a well-supported, supported, or promising evidence base, as defined in the Act. The FFPSA allows states the discretion to determine who is a “candidate for foster care” so long as the child meets the following parameters: the child is at imminent risk of entering foster care; the child can remain safely in their home or in a kinship placement as long as services or programs that are necessary to prevent the entry of the child into foster care are provided; and includes a child whose adoption or guardianship arrangement is at risk of a disruption or dissolution that would result in a foster care placement⁹. Second is a child in foster care who is pregnant or parenting. The prevention services can be provided to the child or youth as well as parents or caregivers, so long as the child fits the above criteria.

Title IV-E contains a Prevention Services Clearinghouse of programs and services, which includes substance abuse prevention and treatment services, mental health, and parent skill-based services. California has selected ten evidence-based programs from this list to implement. As part of the participation in the FFPSA program to draw-down federal dollars, California was required to submit a Five-Year Prevention Plan for approval from the Administration for Children and Families (ACF). This plan was approved on April 7, 2023. As of March 2023, 50 counties and 2 Tribes have chosen to participate in FFPSA programs, and each are in various stages of the planning process.

Title IV-E addresses the needs of those at “imminent risk” of entering foster care. This means that the funding is for activities for secondary prevention and tertiary prevention. Secondary prevention are programs for families that are currently in need in order to prevent future escalation. Tertiary prevention includes interventions for children that are currently experiencing maltreatment. California will go further by contributing additional funding sources to the Title IV-E funds, allowing their five-year plan to include comprehensive prevention services that include primary prevention strategies.

FFPSA Part IV. Part IV of FFPSA addresses when a youth must be placed out-of-home. It establishes new requirements for placements in institutions to be eligible for federal Title IV-E funds. The goal of this is to limit the reliance on such placement settings and ensuring such placement in congregate care is done only when absolutely necessary. Further, federal funding generally will not be available for stays longer than two weeks. California implemented Part IV on October 1, 2021.

In order to place an eligible child in residential care, the facility must meet the FFPSA requirements for a qualified residential treatment program (QRTP) and the requirements of the child’s placement in a QRTP must be met. These requirements include operating a trauma-informed treatment model to meet the clinical needs of children with serious emotional or behavioral disorders, access to

⁹ 42 USC 675 (13)

licensed clinical staff and nursing around the clock, and provision of discharge planning and family-based aftercare supports post-discharge for at least six months.

LOOKING FORWARD

The past decade has seen a series of sweeping reforms in the child welfare space. These reforms have acknowledged the poor outcomes that occur when placing children out of home or away from family and worked to focus on keeping children either with their parents or in the care of a family member. California has committed to the reforms set forth in the FFPSA and begun the process of implementation. As with all sweeping program changes, challenges may arise and offer opportunity for legislation to fulfill the vision of the FFPSA.