



CWDA
Advancing Human Services
for the Welfare of *All* Californians



CHIEF PROBATION OFFICERS
OF CALIFORNIA

May 13, 2023

To: The Honorable Caroline Menjivar
Chair, Senate Budget Subcommittee No. 3

Honorable Members
Senate Budget Subcommittee No. 3

The Honorable Dr. Joaquin Arambula
Chair, Assembly Budget Subcommittee No. 1

Honorable Members
Assembly Budget Subcommittee No. 1

From: Cathy Senderling-McDonald, Executive Director, CWDA
Karen Pank, Executive Director, CPOC

**RE: CHILD WELFARE SERVICES: SERVING FOSTER
YOUTH WITH COMPLEX NEEDS**

The County Welfare Directors Association (CWDA) and Chief Probation Officers of California (CPOC) urge the Legislature to support foster children who are highly traumatized and have unmet complex needs. CWDA and CPOC are jointly requesting \$43.7 million General Funding (GF) in FY 2023-24 to stabilize foster youth and youth at risk of foster care with acute and complex needs, to better enable California to realize the goals of the Continuum of Care Reform (CCR) effort, as adopted pursuant to AB 403 (Stone, Ch. 773, Statutes of 2015).

Continuum of Care Reform Work is Unfinished

In 2015, the Legislature enacted the Continuum of Care Reform (CCR) to reduce the use of congregate care, increase home-based services, and improve outcomes by leveraging critical supports and services, including mental health, for children and foster youth served by child welfare and probation. Implementation of CCR began on January 1, 2017. In the five years since, CCR has been successful in many ways. Counties have reduced placements into congregate care settings by 56 percent and family-based caregiving has greatly increased. While those are important accomplishments, some foster youth with complex trauma and significant, cooccurring needs across multiple child-serving systems continue to lack the intensive, specialized and coordinated services they need in a therapeutic setting. Many of these foster youth are overstaying in county shelters, or temporarily housed in county offices

and hotels, and searches for appropriate residential therapeutic settings can take weeks or months.¹ Child welfare social workers are often called upon to assist in the daily supervision of these foster youth in these temporary settings due to lack of other direct care staff—work that is inappropriate to their role and can be a safety issue. This also stretches county staff resources and is leading to increased staff turnover.

While these are challenges for county agencies, the emotional toll these trends have taken on foster youth and their families is a far greater concern. Every change in caregivers and direct service providers equates to another loss for the child, and another trauma that can ultimately lead to a mental health crisis resulting in hospitalization and in some instances, cross over into the juvenile justice system. There is an urgent need for more investment in youth with complex trauma to prevent undesired consequences including hospitalization, running away, referrals to juvenile hall and, at in extreme cases, severe injury or even death. A moratorium on out-of-state placements, which went into final effect January 1, 2023, necessitates additional immediate and on-going investment into a broad array of residential and family-based, community services.

Proposed Investment

CWDA and CPOC request \$43.7 million GF beginning in FY 2022-23 (growing to \$62.7 million by year four) and adoption of trailer bill language for the following investments to address the gaps across the entire care continuum, as reflected SB 408 by Senator Angelique Ashby:

1. **Enhanced Short Term Residential Therapeutic Programs (STRTP) with Care Team Component:** This proposal would authorize development of specialized STRTPs to provide intensive services for up to four foster youth, delivered on-site by a robust multi-disciplinary Care Team and for up to six months post-discharge. The Care Team would also work concurrently with the youth's next care provider (e.g. resource parent, family caregiver, etc.). This model would be a 'can't say no' program to reduce further trauma to the youth. This component is estimated at \$500,000 SGF in Year 1 and \$6.6 million SGF in Year 2 and on-going.
2. **Regional Health Teams (RHTs):** This component leverages 90 percent federal funding for up to two years to establish up to ten RHTs to serve any foster youth or youth at risk of foster care placement, if that youth is in acute crisis and requires higher-level diagnostic screening, assessment, and service access, beyond what is typically immediately accessible through the child's primary care provider, mental health clinician, or regional center. This component is estimated at \$2.5 million GF and would

¹ "'We Didn't Get it Right', How California law to help foster kids created a bottleneck in care." Sacramento Bee (1/7/23). <https://www.sacbee.com/news/california/article269833277.ece>

leverage another \$25 million in federal funds for the first two years of implementation, with on-going cost of \$12.5 million SGF (\$12.5 million federal funding).

3. **Continuously Appropriate Existing Complex Care Funding to Counties:** This component would make the one-time, \$43.3 million appropriation an annual appropriation to establish a broad array of residential and family-based community services for youth with unmet complex needs. On-going funding is needed to sustain staffing and capacity for these critically-needed services. This proposal would also broaden the allowable uses of existing child-specific funding so counties can tailor services to the unique needs of children, youth and families, working in partnership with county behavioral health agencies, regional centers, community-based organizations and care providers.

All of these investments are consistent with the California Children and Youth System of Care State Team's recent findings² calling for "a well-connected model comprised of a continuum of settings and services that are informed by ongoing analysis of the needs of children who are not experiencing stable care in the least restrictive setting."

Thank you for your consideration of this request.

cc: The Honorable Angelique Ashby, California State Senate
Chris Woods, Office of the Senate President Pro Tempore
Mareva Brown, Office of the Senate President Pro Tempore
Jason Sisney, Office of the Speaker of the Assembly
Kelsy Castillo, Office of the Speaker of the Assembly
Elizabeth Schmitt, Senate Budget and Fiscal Review Subcommittee No. 3
Nicole Vazquez, Assembly Committee on Budget Subcommittee No. 1
Kirk Feely, Senate Republican Fiscal Office
Joe Shinstock, Assembly Republican Fiscal Office
Jessica Bartholow, Office of Senator Skinner
Ginni Bella Navarre, Legislative Analyst's Office
Richard Figueroa, Office of the Governor
Angela Pontes, Office of the Governor
Marko Mijic, Health and Human Services Agency
Kim Johnson, California Department of Social Services
Adam Dorsey, HHS, Department of Finance
Justin Garrett, California State Association of Counties
County Caucus

² <https://www.chhs.ca.gov/wp-content/uploads/2023/02/AB-2083-Multiyear-Plan-for-Increasing-Capacity.pdf> (January 2023).