

SUBCOMMITTEE NO. 3

Agenda

Senator Holly J. Mitchell, Chair
Senator William W. Monning
Senator Jeff Stone



April 21, 2016
9:30 a.m., or Upon Adjournment of Floor Session
Room 4203, State Capitol

PART A

Consultant: Theresa Pena

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**0530 HEALTH AND HUMAN SERVICES AGENCY/OFFICE OF SYSTEMS INTEGRATION
5180 DEPARTMENT OF SOCIAL SERVICES – CHILD WELFARE SERVICES**

Issue 1: Overview – Child Welfare Services – New System (CWS-NS)

Budget issue. The Governor’s budget includes \$10.7 million total funds (\$4.6 million GF) for the CWS-NS Project in the current year and \$12.1 million total funds (\$5.2 million GF).

Background. Child Welfare Services/Case Management System (CWS/CMS) was fully implemented and transitioned to its operational phase in 1998. DSS has overall responsibility for the system, including providing project and program direction to the Office of Systems Integration (OSI). OSI provides information technology expertise and is responsible for implementation and day-to-day operations of the system. The current contract for CWS/CMS runs through November 2016, with potential extensions of up to three years. Currently, the CWS/CMS does not meet the Statewide Automated Child Welfare Information System (SACWIS) requirements.

The Child Welfare Services – New System (CWS-NS) Project will replace the aging CWS/CMS with a new solution that meets current CWS business practices, as well as SACWIS requirements necessary to retain federal funding. The CWS-NS Project is intended to bring the system into compliance with state and federal laws and regulations, make the system easier to use for CWS workers, result in enhanced data reliability and availability, allow user mobility, and automate system interfaces with other state partners to enable data sharing. In November 2015, DSS and OSI announced that the CWS-NS Project will use an Agile procurement and design/development approach, where instead of building a monolithic, one-time solution, where the implementation of the IT system does not begin until all phases of the project are complete. Under the Agile approach, a Request for Proposal (RFP) is broken into a set of smaller modules that can be delivered in a short period of time. Analysis, design, coding, and testing continue for each module until the entire IT system is complete. Instead of contracting with a single vendor, a separate vendor is selected for each model.

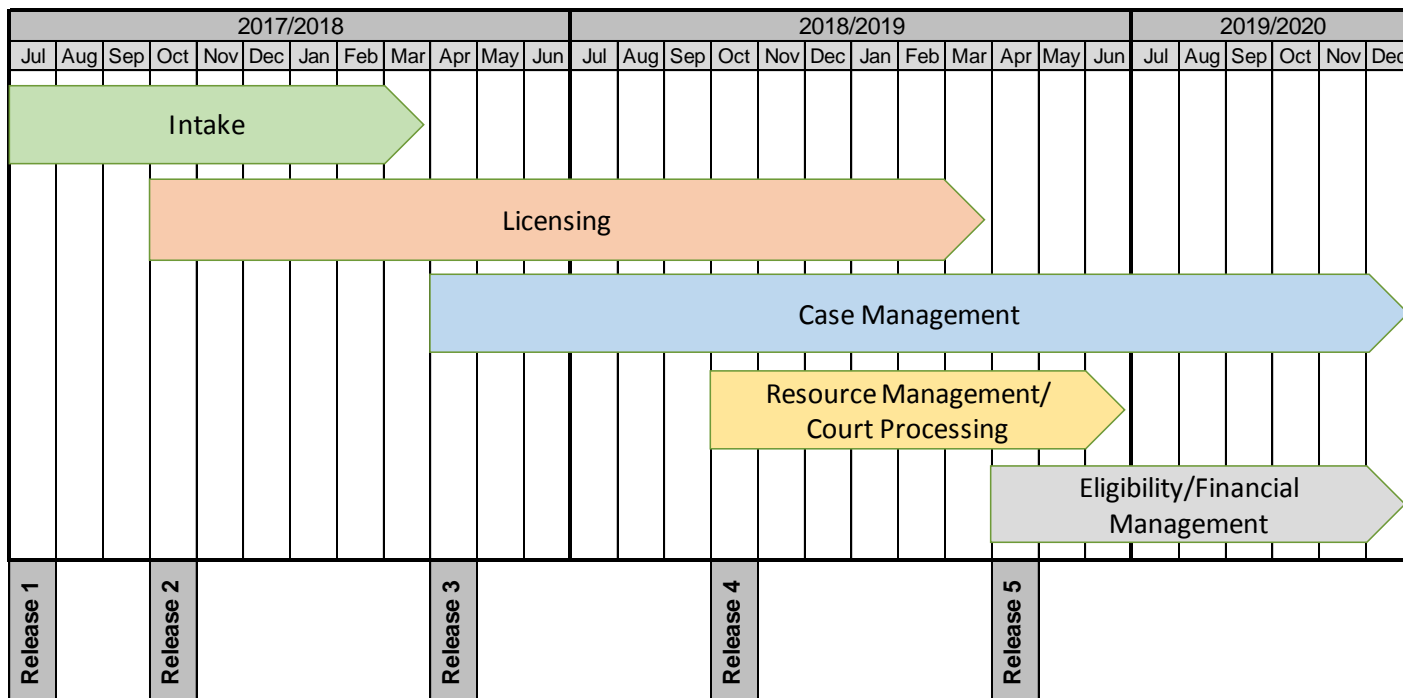
The following table shows total estimated one-time project costs, expenditures to date (July 2013 through March 2016) and the remaining budget balance:

Project Costs

Total Estimated One-Time Cost	Expenditures to Date	Remaining Balance
\$397,918,394	\$22,825,584	\$375,092,810

Compared to continuing to operate the current system and making necessary changes to it, however, the Administration estimated that the state will realize savings by completing the CWS-NS system because of its reduced maintenance and operations costs.

The new timeline for the CWS New System Project is below:



DSS and OSI are required to provide monthly project updates to the Legislature and stakeholders. DSS and OSI have fulfilled this reporting requirement through a combination of written reports and in-person briefing.

Legislative Analyst’s Office (LAO) Comments. In their publication “The 2016-17 Budget: Child Welfare Services – New System”, the LAO notes that there are both potential benefits and risks in adopting the Agile approach:

- Agile implementation is much more flexible than the traditional implementation approach because it provides IT projects with the opportunity to address challenges with one module without compromising other aspects of the IT project. This flexibility allows for functions to be completed and deployed to users more quickly.
- Where in a traditional implementation, system users would have to adapt to changes only one, in agile implementation, system users have to adapt to changes as each module is implemented.
- The Agile approach may increase vendor interest and participation, since there are a limited number of vendors with the expertise to design and implement IT systems for large projects that are implemented under the traditional approach.

- At the conclusion of the project, all modules must work together to fully meet the objectives of the project. Since there are likely multiple vendors for the various modules, this will require increased coordination.

The LAO recommends that the Legislature revise the project's reporting requirements to reflect the planned shift from the traditional to an agile implementation approach.

Staff Comment and Recommendation. Hold Open. Given that the Agile approach is new for the state in many ways, and that the CWS-NS Project is so critical to CWS operations, the Legislature should consider what level of oversight is necessary and what reporting will be needed.

Questions.

1. OSI: Please summarize the current CWS-NS timeline and project costs.
2. OSI: Please explain the Agile approach and steps you are taking to mitigate any inherent risks in this new approach.
3. OSI and DSS: How are the department and OSI working to ensure the system stays on-course? How are the department and OSI working with stakeholders?

Issue 2: Budget Change Proposal: Child Welfare Services New System Project

Governor's Proposal. The Administration requests one new permanent position, the conversion of eight limited-term positions to permanent, and a net increase of \$171,000 in the Office Of Systems Integration (OSI) spending authority for the Child Welfare Services – New System (CWS-NS) Project.

Background. The OSI and DSS have been working for some time to develop a new system to replace the CWS/CMS, which does not provide all functional capabilities required, is outdated, and is cost prohibitive to maintain and operate. The CWS-NS Project will implement an updated, web-based computing infrastructure that should have more flexibility. The department notes that CWS-NS, due to its modern architecture and underlying commercial-off-the-shelf platform, is projected to be less costly to maintain and enable upgrades and enhancements to be deployed more quickly.

OSI requests the following positions in order to be successful throughout the planning and procurement phase:

Attorney III: OSI does not currently have a dedicated attorney for the CWS-NS Project. This position will address any legal issues that arise.

Redirected CWS/CMS Positions: In 2016-17, the CWS-NS Project will begin county preparation for the transition to CWS-NS. The OSI proposes to leverage existing CWS/CMS staff that already work with the counties and perform similar services. They note that the impact of this redirection on CWS/CMS should be minimal.

Converting Limited-Term to Permanent: OSI asserts that the conversion of the limited-term positions to permanent is necessary to ensure that the CWS-NS project is procured, developed and implemented appropriately and consistently staffed. They note that the use of limited-term positions makes it difficult to recruit and retain qualified staff.

Staff Comment and Recommendation. Hold Open. Staff notes the importance of having legal representation during the various activities of IT project implementation.

Questions.

1. DSS: Please provide an overview of the proposal.

Issue 3: Spring Finance Letter: Child Welfare Services New System Project

Governor's Proposal. The Administration requests an augmentation of \$32.1 million in combined state and federal funding for DSS local assistance costs, as well as \$28.66 million in expenditure authority for OSI to develop and implement CWS-NS. This funding will be available until project completion and reviewed on an annual basis. Budget bill language (BBL) is also being requested which will allow for increased project funding beyond the appropriation authority, funds to be transferred to state operations for project related activities, and provides various reporting requirements.

Background. In November 2015, the state changed its typical procurement approach from a monolithic, multi-year Request for Proposal (RFP) to pursue an agile development approach for numerous smaller modules of functionality reflecting the same ultimate scope as the prior efforts.

The department notes that it requests additional resources for the CWS-NS project in light of uncertainty in the Agile development process, and the need to be flexible in administrative processes and contracting, and uncertainty in vendor competition and performance.

Staff Comment and Recommendation. Hold open.

Questions.

1. Please summarize the proposal and related BBL.
2. Please provide more context as to why the BBL flexibility to transfer between items is necessary.

Issue 4: Proposals for Investment

The subcommittee has received the following CWS-NS related proposal for investment.

- Child Welfare Services Automation Trailer Bill Language

Budget Issue. The County Welfare Directors Association of California (CWDA) proposes trailer bill language (TBL) that would codify the new Agile approach to CWS automation by (1) requiring DSS, OSI and CWDA to jointly seek resources to enable the necessary level of engagement by counties in the Agile development and maintenance process; (2) require that counties have a voting seat on all governance bodies; (3) require that existing CWS/CMS operations functionality be maintained and not decommissioned until the full statewide implementation of the CWS-NS in all counties; and (4) requires the continuation of existing monthly updates to the Legislature and stakeholders on efforts to develop and implement CWS-NS and regularly scheduled quarterly forums offered to provide project updates to stakeholders and legislative staff.

Staff Comment and Recommendation. Hold open. No concerns have been raised to subcommittee staff at this time.

5180 DEPARTMENT OF SOCIAL SERVICES – CHILD WELFARE SERVICES (CWS)**Issue 1: Overview**

The CWS system includes child abuse prevention, emergency response to allegations of abuse and neglect, supports for family maintenance and reunification, and out-of-home foster care. The total funding for CWS is estimated to be approximately \$5 billion for 2016-17.

The core of CWS is made up of four components:

- Emergency Response: Investigations of cases where there is sufficient evidence to suspect that a child is being abused or neglected.
- Family Maintenance: A child remains in the home, and social workers provide services to prevent or remedy abuse or neglect.
- Family Reunification: A child is placed in foster care, and services are provided to the family with the goal of ultimately returning the child to the home.
- Other Placements: Provides permanency services to a child who is unable to return home and offers an alternative family structure, such as legal guardianship or independent living.

Caseload trends. There has been a significant decline in the foster care caseload over the last 15 years. Caseload has declined more than 47 percent from 108,159 in 2000 to 57,266 in 2015. The department attributes part of the caseload decline to prevention efforts for out-of-home care and back-end efforts for permanency placements.

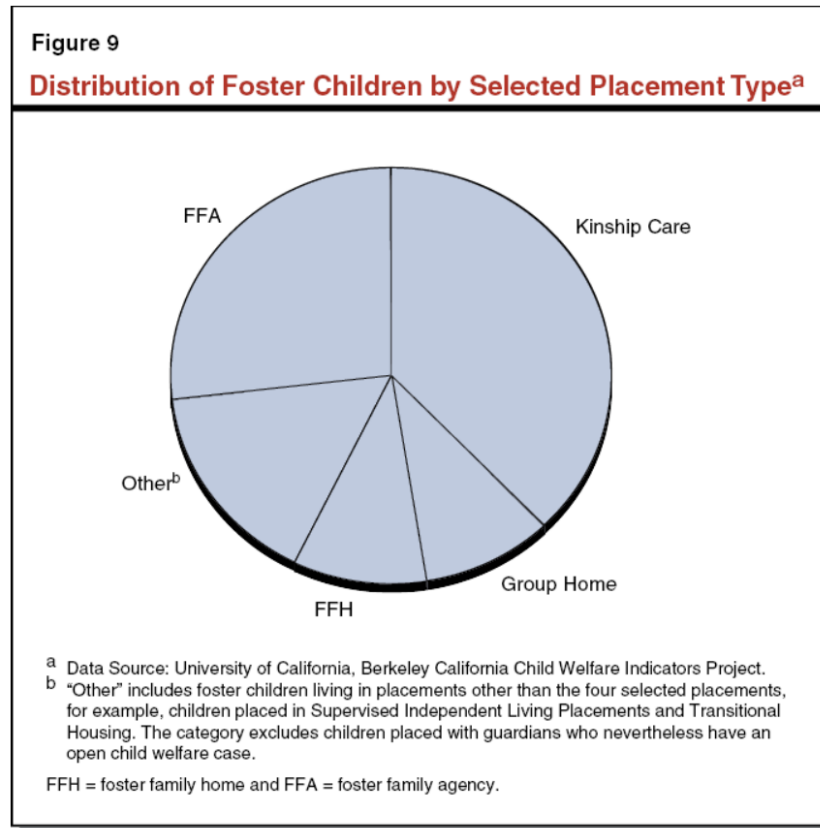
Demographics of children in foster care. Research documents how children and youth, who experience foster care and those who emancipate from care, are at risk for challenges related to education, health, and mental health. As of January 1, 2015, of the 66,969 children currently in care, around forty percent have been in care less than a year; around 23 percent have been in care for nearly two years; and roughly fifteen percent have been in care for longer than five years.

The following table, based on January 2016 data from U.C. Berkeley, displays the percentage of ethnic or racial representation of a child in foster care by placement type.

Placement Type	Black	White	Latino	Asian/Pacific Islander	Native American
Pre-Adopt	16.7%	21.3%	58.5%	2.9%	0.6%
Kinship	19.8%	21.7%	54.7%	1.8%	1.6%
Foster Home	21.4%	27.3%	47.2%	2.1%	1.3%
FFA	18.9%	24.1%	53.3%	2.2%	1.0%
Court Specified	21.3%	36.0%	37.6%	3.1%	1.9%
Group Home	29.5%	24.0%	43.1%	2.0%	1.0%
Shelter	19.8%	24.6%	47.6%	2.4%	1.6%
Non-FC	34.0%	19.3%	44.4%	1.4%	0.5%
Transitional Housing	36.1%	24.1%	35.6%	3.1%	0.9%
Guardian Dependent	39.1%	12.6%	45.7%	1.7%	0.9%
Guardian Other	30.0%	25.1%	39.3%	2.3%	2.8%
Runaway	25.5%	17.3%	54.2%	0.9%	1.8%
Trial Home Visit	17.8%	23.4%	53.7%	4.4%	0.7%
Supervised Independent Living Placement	25.5%	22.6%	47.0%	3.2%	1.5%
Other	25.4%	19.6%	50.7%	2.4%	1.7%

Placement options. There are four major temporary placement types — kinship care, foster family home (FFH), foster family agency (FFA), or group home:

- Kinship care refers to when a foster child is placed with a relative for care and supervision, known as the least restrictive and most family-like option
- Foster family homes (FFHs) are licensed residences that provide for care up to six children
- Foster family agencies (FFAs) are private, nonprofit corporations intended to provide treatment and certify placement homes for children with higher level treatment needs
- Group homes (GH) are licensed to provide 24-hour non-medical residential care in a group setting to foster youth from both the dependency and delinquency jurisdictions



<http://www.lao.ca.gov/Publications/Report/3351>

Placement costs. Group home placements constitute approximately 10 percent of foster care placement and represent a significant portion of total foster care costs. Group home rates are based on the level of care and services provided, ranging from \$2,391 to \$10,130 per month.

	Kin Caregivers				
	Relative Caregivers	Non-Relative Caregivers	Foster Family Homes	Foster Family Agencies	Group Homes
Foster care payment rate	\$369 or \$688-\$859 ^a	\$688 – \$859	\$688 – \$859	\$688 – \$859	\$2,391 – \$10,130 ^b
Supplemental caregiver payments	Specialized Care Increment ^c	Specialized Care Increment ^c	Specialized Care Increment ^c	\$189	—
Supplemental provider payments	—	—	—	\$912 – \$1,012	—

^aRelative caregivers caring for a child who is ineligible for federal financial participation and who live in a county that has chosen not to participate in the Approved Relative Caregiver Program receive the \$369, CalWORKS child-only rate. All other relative caregivers receive the basic rate.

^bUnlike home-based care providers who primarily receive a rate based on the age of the child, group home rates are determined by the level of services they provide. Rate Classification Level (RCL) 14 is the highest level and most costly group home; RCL 1 is the least costly. Children are assigned to group homes based on the level of their service needs.

^cThe specialized care increment is a monthly supplemental payment available to kin and foster family homes caregivers at the county option for the care of children with elevated needs.

<http://www.lao.ca.gov/Publications/Report/3351>

2016-17 Governor's Budget: Average Monthly Grants

2016-17 Governor's Budget: Average Monthly Grants for FY 2016-17	
Group Home	\$8,597
Foster Family Agency	\$2,133
Adoption Assistance	\$1,016
Foster Family Home	\$967
Federal Guardian Assistance	\$837
Kinship Guardian Assistance	\$762
*Grants include FY 2016-17 CNI COLA	

Length of stay. According to the department's 2014 CWS Realignment Report, for the largest age group category, 13-17 years old, of the 4,737 children, the majority (45 percent) move out of group home placements in less than 12 months, longer stays (12-36 or more months) comprise the remaining 55 percent (2,619). From 2009 to 2013, the total number of children and youth placed in group homes for the same population dropped from 7,033 to 6,188. DSS estimates that more than two-thirds of children placed in group homes remain there longer than two years. Specifically, around 3,000 children and youth are in group homes for more than one year; of these, 1,000 have been in group home for more than five years.

Licensing. The Community Care Licensing Division licenses facilities, including foster family homes, foster family agencies (who, in turn, certify individual foster families), and group homes. All facilities must meet minimum licensing standards, as specified in California's Health and Safety Code and Title 22 Regulations. Among those requirements, group homes must provide youth with direct care and supervision, daily planned activities, food, shelter, transportation to medical appointments and school, and at least a monthly consultation and assessment by the group home's social worker and mental health professional, if necessary, for each child. Currently, the department must visit all homes and facilities at least once every five years with an additional random sample of 30% of homes and facilities each year. The 2015-16 Governor's budget included resources to improve regulatory oversight by increasing the frequency of inspections of Community Care licensed facilities throughout the state. Changes to inspection frequency for Children's Residential will go into effect in two stages. During Stage 1, beginning in January 2017, all children's residential homes and facilities will be inspected once every three years with an additional random sample of 30% of facilities. During the final stage, beginning in January 2018, all children's residential homes and facilities will be inspected once every two years with an additional random sample of 20% of facilities.

Performance measures and accountability. The federal Administration for Children and Families (ACF) conducts Child & Family Services Reviews (CFSRs) of states' child welfare systems, which include measures of outcomes related to the safety, permanency, and well-being experienced by children and families served. The state is currently in Round 3 of the Federal CFSR. The statewide assessment was submitted on March 25, 2016 and the case review portion began April 1, 2016. A new Program Improvement Plan is expected to be negotiated early in calendar year 2017. Round 2 of the CFSR was conducted in 2008 with the Program Improvement Plan that was successfully completed in 2012.

The Child Welfare System Improvement and Accountability Act also created a statewide accountability system that became effective in 2004. It includes 14 performance indicators monitored at the county-specific level and a process for counties to develop System Improvement Plans (SIPs).

Realignment. The 2011 public safety realignment and subsequent related legislation realigned child welfare services and adoptions programs to the counties, transferring nonfederal funding responsibility for foster care to the counties. In addition, over the last several years, the state increased monthly care and supervision rates paid to group homes, foster family homes, and foster family agency-certified homes, as a result of litigation. The 2011 realignment funding reflects state General Fund (GF) costs for the following programs, which may also receive other matching funds.

Prior to the 2011 realignment, DSS estimated the costs associated with meeting federal and state requirements for the estimated numbers of children and families to be served as part of the annual budget process. Under the 2011 realignment, the total funding for CWS is instead determined by the amount available from designated funding sources (a specified percent of the state sales and use tax and established growth allocations) that are directed to the counties and corresponding matching funds. Both before and after realignment, certain CWS expenditures, including payment rates for care providers that are statutorily established, are provided on an entitlement basis.

Trailer bill provisions in 2012-13 additionally established programmatic flexibility that allows counties, through action by boards of supervisors after publicly-noticed discussion, to discontinue some programs or services that were previously funded with only General Fund, including, clothing allowance and specialized care increments added to provider rates and Kinship Support Services programs.

Roles of the state and counties. DSS is responsible for oversight, statewide policy and regulation development, technical assistance, and ensuring federal compliance. Prior to realignment, the state was also at risk for the full costs of any federally-imposed penalties stemming from federal Child and Family Service Reviews. Under realignment, counties, whose performance contributed to an applicable penalty, must pay a share of the penalty if realignment revenues were adequate to fully fund the 2011 base, and if they did not spend a minimum amount of allocated funding on CWS.

Required reporting on realignment. Pursuant to SB 1013 (Budget and Fiscal Review Committee), Chapter 35, Statutes of 2012, DSS must report annually to the Legislature on April 15 outcome and expenditure data, as well as impacts of CWS and Adult Protective Services program realignment. Reports must also be posted on the department's website. The 2015 Child Welfare Services Realignment Report¹ found the following:

- Child welfare practices of investigating referrals within policy timeframe continue to remain above state standards.
- There has been a significant decline in the foster care caseload. Caseload has declined more than 45 percent from 108,159 in 2000 to 57,679 in 2015.
- Between 2009 and 2014, the number of children for whom the first placement is with a relative/kin increased from 16 percent to 25 percent, while the proportion of children placed in group homes decreased from 18 percent to 13 percent.

¹ The full report can be accessed here: <http://www.cdss.ca.gov/cdssweb/entres/pdf/CWRealignmentReport2015.pdf>

- Among children entering care for the first time, the proportion exiting to reunification within 36 months of entry increased from 58 percent in 2006 to 60 percent in 2011. Among children entering care for the first time ever, between 2008 and 2013, the proportion who reunified within 12 months of entry decreased from 41.1 percent in 2008 to 34.6 percent in 2013.
- The proportion of children re-entering foster care within a year increased from 11.1 percent in 2008 to 12.3 percent in 2013.

The department continues to have discussions with legislative staff as well as the County Welfare Director's Association (CWDA) in order to clearly delineate county child welfare services expenditures for federally-required services, state optional programs, adult protective services, county case management, as well as the expenditures for counties participating in the Title IV-E Project.

Reports of Child Near-Fatalities. The federal Child Abuse Prevention and Treatment Act (CAPTA) requires that states receiving funds under CAPTA must disclose to the public findings and information about child abuse and neglect cases that result in fatalities or near fatalities. On December 8, 2015, the federal Administration for Children, Youth, and Families (ACYF) notified DSS of non-compliance with federal guidelines regarding public disclosure procedures in cases where a child dies or nearly dies as the result of abuse or neglect.

Last year, the department proposed language to bring state law in to compliance with federal requirements. However, there was no consensus among stakeholders regarding whether it would be most appropriate for the state to model its disclosures in the cases of near-fatalities after the requirements established by SB 39 (Migden), Chapter 468, Statutes of 2007, or to create different procedures. Ultimately, no action was taken by the Legislature.

The department notes that it is currently working on a new proposal that should be forthcoming within the current legislative session. If the state is unable to comply with federal reporting requirements, California could lose up to a total of \$4.8 million.

Recent policy and budget actions. Several policies and budget actions lay the groundwork for child welfare reform, including:

- **Extended foster care.** AB 12 (Beall), Chapter 559, Statutes of 2010, enacted the "California Fostering Connections to Success Act of 2010," which provides an extension for foster youth, under specified circumstance, to remain in care until age 21; increases support for kinship care (opportunities for youth to live with family members); improves education stability; coordinated health care services; provides direct child welfare; and, expands federal resources to train caregivers, child welfare staff, attorneys, and more.
- **Title IV-E Waiver.** Title IV-E is the major federal funding source for child welfare and related probation services. These funds, which were previously restricted to pay for board-and-care costs and child welfare administration, can be used to provide direct services and supports under the waiver extension. Since Title IV-E funding is based solely on actual cost of care, if a county's preventative services are effective and fewer children enter or stay in the foster care system, the county's Title IV-E funding is reduced. Thus, the county is penalized for reducing foster care placements, even though such a reduction is the most desirable outcome. The 2014-

15 budget authorized the waiver extension for five years, beginning October 1, 2014. The seven participating counties include: Alameda, Butte, Lake, Los Angeles, Sacramento, San Diego, San Francisco, Santa Clara, and Sonoma.

- **Commercial Sexual Exploitation of Children (CSEC) Program.** SB 855 (Budget and Fiscal Review Committee), Chapter 29, Statutes of 2014, established the state CSEC program to enable county child welfare agencies to provide services to child victims of commercial sexual exploitation. The CSEC program was established as a county opt-in program, and the 35 counties who opted in were separated into two tiers: 13 Tier I counties received \$25,000 to develop Interagency Protocols and 22 Tier II counties received enhanced funding based on their prevalence of CSEC youth, completion of a CSEC protocol, and the county's readiness to serve. Shortly after the state program was enacted, federal CSEC legislation was enacted with statewide requirements.

Proposed funding levels for 2015-16 and 2016-17 remain the same since the program was implemented at \$14 million General Fund. Coordination efforts with county child welfare departments, training entities, and the Child Welfare Council's CSEC Action Team are ongoing. Letters will go out to counties in the spring providing them with updated sample protocol tools to comply with the federal CSEC Program, instructions on how to opt into the FY 2016-17 state CSEC Program, how to report data, and guidance on the many policy changes that social workers and providers are experiencing.

- **Relative Caregiver Funding.** Effective January 1, 2015, counties, who opt-in to the Approved Relative Caregiver Funding Program, must pay an approved relative caregiver a per child, per month rate, in return for the care and supervision of a federally ineligible Aid to Families with Dependent Children-Foster Care (AFDC-FC) child placed with the relative caregiver, equal to the base rate paid to foster care providers for a federally-eligible AFDC-FC child.

To date, a total of 49 counties have opted in. Eleven counties opted to make payments retroactive to January 1, 2015.

Staff Comment and Recommendation. This is an informational item, and no action is required.

Questions.

1. Please provide an overview of the program, services, caseload trends, and proposed budget.
2. Please provide a brief update on reports of child near-fatalities. When can the Legislature expect to see language?
3. Please include an update on CSEC and ARC programs.

Issue 2: Budget Change Proposal: Child Welfare Services Case Reviews

Governor's Proposal. The Administration requests resources to establish a Child Welfare Services Case Reviews unit in response to the federal Administration for Children and Families (ACF) notification that the Department of Social Services oversight of Child Welfare Services is inadequate and needs a quality assurance program as required in the Child and Family Services Review (CFSR).

Specifically, the department is requesting the below positions in the Children and Family Services Division, Outcomes and Accountability Bureau to conduct oversight and quality assurance activities:

- 5.0 Associate Governmental Program Analysts (AGPA)
- 1.0 Staff Services Manager (SSM I)
- 1.0 Office Technician – Typing (OT)

Background. The federal ACF expressed their concern in a letter dated May 12, 2015, and concluded that the state had insufficient resources to provide the necessary oversight and effective quality assurance management principles to obtain federal approval of the case review process that is required. Last year, ACF had completed the rule-making process to modify the existing CFSR, including that all states must use a comprehensive review process in place of the current traditional case review methodology.

The department notes that these new resources will ensure compliance with the continued receipt of federal Title IV-B and Title IV-E funds. The new activities required by ACF cannot be absorbed by current staffing resources.

Staff Comment. Staff notes that the concerns of the ACF as well as new requirements must be addressed in order to maintain federal funding and reduce the risk of future fiscal penalties.

Questions.

1. DSS: Please provide an overview of the proposal.

Staff Recommendation. Hold open.

Issue 3: Proposals for Investment

The subcommittee has received the following CWS-related proposals for investment.

- Child Care for Foster Children

Budget Issue. There are currently two related proposals to ensure that the ability to obtain child care for foster youth is more available and accessible. Advocates cite the inability to access child care as a top barrier to finding placement for children removed from their parents.

Los Angeles County requests \$31 million to increase access to child care and enable a larger pool of families to become foster parents. This proposal includes three pieces: (1) Any resource family needing child care for children ages 0 through 3, as well as parenting foster youth, would receive an immediate, time-limited voucher to pay for child care for up to six months following a child's placement. This voucher would ensure care while the caregiver is at work, school, or fulfilling training and home approval requirements, at a cost of \$22 million. (2) Funding of \$4 million to support child care navigators through the county Resource and Referral agencies who work with the resource family to facilitate the use of the emergency voucher to ensure a foster child's immediate access to child care and continue to work with the family to facilitate placement. (3) Inclusion of \$5 million to provide appropriate trauma-informed training for child care providers, with a trainer to cover every county.

The County Welfare Directors Association of California (CWDA) proposes Trailer Bill Language to clarify statutes governing the child care system for foster youth. Specifically, the language (1) would ensure continuity of care for children already receiving child care services who are removed from their families by enabling child care services to be maintained for foster youth when placed with a foster family, and (2) would clarify the income-eligibility priorities for foster youth by excluding foster care payments from being counted as income, which would ensure that foster youth receive priority for child care services under the income-eligibility provisions. CWDA notes that this language is meant to assist counties in implementing AB 403 (Stone), Chapter 773, Statutes of 2015.

Staff Comment and Recommendation. Hold open.

- Meeting the Requirements of CSEC Mandates

Budget Issue. The County Welfare Directors Association of California (CWDA) requests a total of \$19.7 million GF increase for the CSEC program to aid child welfare agencies in meeting their mandate to serve children who are commercially sexually exploited. Specifically, CWDA requests \$16.2 million GF to bring Tier I counties up to Tier II level funding, and to fully fund all Tier II counties. CWDA also requests \$3.5 million GF for on-going training of child welfare staff to help CSEC youth.

Background. In 2014, SB 855 clarified that children who are commercially sexually exploited must be served as dependents under the child welfare system. Shortly after SB 855 was signed into law, federal mandates created additional imperative for child welfare agencies to serve this population. In 2015-16, \$10.75 million GF was made available for counties. Eighteen counties received Tier I funding to support local protocol development and twenty-two counties with established protocols received Tier II funding to implement those protocols.

Staff Comment and Recommendation. Hold open.

- Housing Child-Welfare Involved Families Experiencing Homelessness

Budget Issue. The Corporation for Supportive Housing (CSH) and various other organizations request \$10 million GF to fund the Bringing Families Home proposal, which would create a state grant program to house child-welfare-involved families experiencing homelessness. CSH estimates this program could reach approximately 135 to 350 families.

Background. In FY 2014-15, CSH requested \$3 million for this item, and in FY 2015-16 they requested \$10 million. It was initially included in the Assembly budget, but it was not included in the final budget

Staff Comment and Recommendation. Hold open. An unspecified amount for the Bringing Families Home Program is also included in the Senate “No Place Like Home” proposal.

- Chafee Education and Training Voucher (ETV) Grants to All Eligible Foster Youth

Budget Issue. The John Burton Foundation and various other organizations request \$3.63 million GF to provide Chafee Education and Training Voucher (ETV) grants to all eligible foster youth who apply. The proposal would also align the institutional eligibility to receive the Chafee ETV with the criteria applied to institutions who receive the Cal Grant, which would prohibit the use of Chafee funds at post-secondary institutions that do not meet specified graduation and loan default requirements.

Background. According to the California Student Aid Commission (CSAC), a total of 4,609 students applied for the Chafee ETV and were determined eligible in 2014-15. However, due to insufficient funds, one in four of those who applied and were eligible received a grant.

Staff Comment and Recommendation. Hold open.

- Pregnancy Prevention Among Foster Youth

Budget Issue. The John Burton Foundation and various other organizations request \$10 million GF to create a county opt-in program to prevent pregnancy among foster youth. The sponsors note that six counties in California have been testing a series of strategies to reverse the trend of pregnancy among foster youth, and this proposal would support those activities. The program would be voluntary and funds would be disbursed by DSS through an application process.

Staff Comment and Recommendation. Hold open.

- Transitional Housing Program (THP-Plus) for Former Foster Youth

Budget Issue. The John Burton Foundation and various other organizations request \$5 million GF to make the THP-Plus program available to youth who would be eligible if they were in foster care on or after age 16. Currently this group is not eligible for the program.

Background. THP-Plus was established by the Legislature in 2001 and provides affordable housing and supportive services to youth who turned age 18 while in the foster care or juvenile probation

systems. THP-Plus is administered by child county welfare agencies operated by non-profit organizations. Current eligibility extends to youth if they were in foster care on or after their 18th birthday; however, a number of youth exit between the ages of 16 and 18.

Staff Comment and Recommendation. Hold open.

- Child-Centered Specialized Permanency Services Training

Budget Issue. Families Now requests \$1.1 million GF to sponsor a series of introductory training sessions and build a cohort of implementation pilot counties using a shared learning model to implement specialized permanency services.

Staff Comment and Recommendation. Hold open.

- Public Health Nursing and Monitoring of Psychotropic Medication

Budget Issue. The National Center for Youth Law and various other organizations request \$1.65 million GF (with an assumed federal match of \$4.95 million) to provide additional staffing to ensure that there is appropriate medication case management within the Health Care Program for Children in Foster Care (HCPCFC) and to meet the requirements of recently passed legislation. This funding would enable the hiring of additional Public Health Nurses (PHNs) to review and monitor psychotropic medication and treatment, assist in scheduling and monitoring appointments, and support court review of treatments.

Staff Comment and Recommendation. Hold open.

5180 DEPARTMENT OF SOCIAL SERVICES – CHILD WELFARE SERVICES (CWS)**Issue 1: Oversight – Continuum of Care Reform (CCR) Implementation**

Governor’s Proposal. The budget includes approximately \$61 million General Fund to implement various components of the Continuum of Care Reform (CCR) enacted by AB 403 (Stone), Chapter 773, Statutes of 2015.

Background. Most children served by a child welfare agency are placed with families. However, several thousand children and youth are placed in group homes for more than one year, and probation departments often use group home settings in lieu of locked settings. Significant research documents the poor outcomes of children and youth in group homes, such as higher re-entry rates into foster care, low graduation rates, and increased risk of arrest. These group homes are also much more expensive than family placements and can cost up to \$10,000 a month per child depending on the level of care provided, whereas foster care payments for home-based family settings generally range from \$700 to \$2,000 per child per month, although some home-based family placements have higher costs due to the intensive services they also provide.

In an effort to reduce the reliance on group home placements, and to develop strategies to cultivate an adequate supply of home-based family settings, the Legislature passed SB 1013 (Budget and Fiscal Review Committee), Chapter 35, Statutes of 2012, which authorized the CCR effort to develop recommendations related to the state’s current rate setting system, and to services and programs that serve children and families in the continuum of Aid to Families with Dependent Children-Foster Care (AFDC-FC) eligible placement settings. In particular, the Legislature expressed its intent for recommended reforms, including reforms related to the use of group homes, changes to the rate systems, and changes to the assessment of children’s needs, and to outcome measurement, to promote positive outcomes for children and families. In January 2015, the department released the report “California’s Child Welfare Continuum of Care Reform”. This report provided 19 specific recommendations with the expressed goal to:

Reduce reliance on group homes as a long-term placement setting by narrowly defining the purpose of group care, and by increasing the capacity of home-based family care to better address the individual needs of all children, youth, and caregivers.

According to the department, the recommendations “represent a paradigm shift from traditional group homes as a long-term placement to Short-Term Residential Treatment Centers (STRTC) as an intervention.” The list of 19 recommendations seek to improvement assessment of child and families to make more appropriate initial placement decisions; emphasize home-based family care; support placement with available services; change the goals for group home care placement; and, increase transparency for child outcomes.

The Legislature subsequently passed AB 403 (Stone), Chapter 773, Statutes of 2015 to implement the CCR, which codified the recommendations. Various components of the statute have already begun to implement, such as the foster family agency social worker rate increase and training, recruitment, retention and support activities for resource families and foster parents. However, many key changes such as the establishment of new rates and of short-term residential treatment centers (STRTCs), will implement at later dates. Some of the main components of AB 403 include:

- Short-Term Residential Treatment Centers (STRTCs). This new placement type will begin on January 1, 2017, at which time group homes will no longer be a placement option (subject to case-by-case exceptions that may allow them to continue to operate for a period of time). STRTCs will provide care, supervision, and expanded services and supports. Children whose level of need would qualify them for the STRTC placement include those assessed as seriously emotionally disturbed or victims of commercial sexual exploitation. Children's case plans will be subject to review every six months.
- Efforts to increase access to services and supports. FFAs and STRTCs will be required to ensure access to specialty mental health services and strengthen their permanency placement services by approving families for adoption, providing services to help families reunify, and give follow-up support to families after a child has transitioned to a less restrictive placement. AB 403 also requires FFAs and STRTCs to make educational, health, and social supports available.
- Additional integration between child welfare and mental health services. AB 403 requires all FFAs and STRTCs to either obtain certification from the Department of Health Care Services (DHCS) or county Mental Health Plans (MHPs) to provide mental health services directly, or contract with mental health providers to serve children in their care.
- Efforts to improve quality and oversight. Under CCR, FFAs and STRTCs are required to obtain and maintain accreditation from a nationally-recognized body. CCR also calls for the development of publicly available FFA and STRTC performance measures, such as rates of successful family reunifications, placement stability, client satisfaction, and health and safety standards.
- Resource Family Approval (RFA). RFA replaces the existing multiple approval, licensing, and certification processes for home-based family caregivers. This streamlined assessment includes a psychosocial evaluation, risk assessment, and permanency assessment, and will automatically qualify a foster family for guardianship and adoption. This process is underway in five early-implementer counties, and the rest of the state will transition to the RFA process by January 1, 2017.
- Child and family teams. CCR also mandates the use of child and family teams in decision-making, which can include the child, his or her custodial or noncustodial parents, representatives from the child's out-of-home placement, the child's mental health clinician, and other persons with a connection to the child.
- New assessment tool. CCR calls for the creation of a new, comprehensive strengths and needs assessment upon entering the child welfare system in order to improve placement decisions and ensure prompt access to supportive services.
- New STRTC and FFA payment rates. Reimbursement rates for 14 separate group home levels will be replaced by a new set of rates, beginning January 1, 2017. These new rates are expected to reflect the expanded set of responsibilities of STRTCs and FFAs under CCR. A DSS and stakeholder workgroup is considering a system where the child's needs assessment partly determines the rate paid to a child's caregiver and supportive service providers, which could

allow a county to contract or provide supportive services for children in home-based family placements other than FFA-certified homes, as opposed to current practice where a child’s placement generally determines the foster care payment rate and services the child receives.

Implementation Update.

The Governor’s 2016-17 proposed budget recognizes new state General Fund costs associated with CCR implementation and also county savings from the elimination of duplicative foster caregiver approval processes and the transition of children out of group homes.

Figure 11
2016-17 Proposed Continuum of Care Reform State Spending

(In Millions)

General Fund	2015-16 Estimated	2016-17 Proposed	Change
Local assistance to county welfare and probation departments	\$21.5	\$57.5	\$36.0
Department of Social Services—state support	0.5	3.0	2.5
Department of Health Care Services and local assistance to county mental health plans	—	0.4	0.4
Totals	\$22.0	\$60.8	\$38.8

Below is a breakdown of the total approximately \$61 million General Fund:

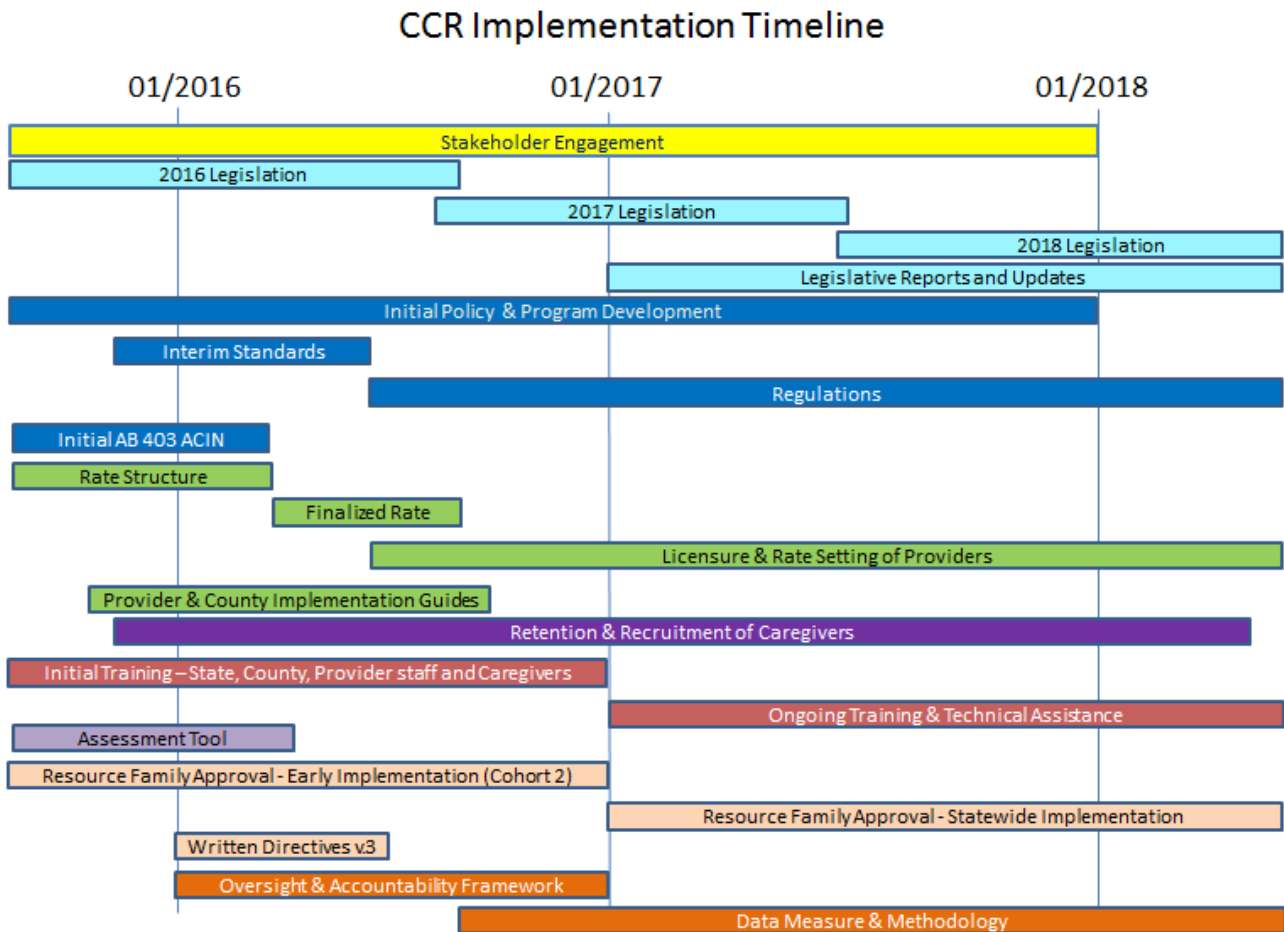
Figure 12
Proposed CCR State Spending for County Child Welfare and Probation Department Implementation

(In Millions)

Activity	2015-16		2016-17		Change From 2015-16	
	General Fund	Total Funds	General Fund	Total Funds	General Fund	Total Funds
Foster parent training, recruitment, retention, and support	\$17.2	\$25.8	\$32.2	\$47.4	\$15.0	\$21.6
Resource Family Approval ^a	—	—	11.2	16.2	11.2	16.2
Child and family teaming	—	—	9.7	14.4	9.7	14.4
2015-16 FFA rate increase	4.3	7.3	4.5	7.6	0.2	0.3
Case planning assessment, reviews, and training	—	—	4.4	6.6	4.4	6.6
Accreditation	—	—	1.4	2.8	1.4	2.8
Automation and performance measure development	—	—	0.5	0.8	0.5	0.8
Assumed foster care payment savings at the county level ^b	—	—	-6.4	-7.3	-6.4	-7.3
Totals^c	\$21.5	\$33.1	\$57.5	\$88.6	\$36.0	\$55.5

^a Estimated total spending for Resource Family Approval is net of estimated county savings, which are estimated at approximately \$19 million in total funds.
^b Assumed foster care payment savings offset the costs of the other proposed CCR activities, reducing the total estimated state funding for CCR implementation.
^c This figure does not include the approximately \$3.4 million General Fund (\$6.4 million total funds) in the Governor’s proposed budget to support DSS state operations, DHCS state operations, and county Mental Health Plans’ CCR implementation efforts.
 CCR = Continuum of Care Reform; FFA = Foster Family Agency; DSS = Department of Social Services; and DHCS = Department of Health Care Services.

The department has provided the following timeline of implementation activities:



The main activities that the Governor’s budget provides funding for are:

- Foster Parent Recruitment and Support. Over half of the Governor’s proposed spending is to help counties increase the supply of high-quality, home-based family placements. About half of this proposed spending is intended for county probation departments. In 2015-16, allowable uses of the funding provided to counties included: (1) staffing to provide direct services and supports to foster caregivers, (2) foster care payment supplements to support caregivers of children with exceptional needs, and (3) intensive relative finding and engagement. It is unclear whether the 2016-17 proposed funds will be allocated to counties using the same criteria.
- RFA implementation. Although meant to save money in the long-run by eliminating duplicative processes, RFA imposes additional training requirements on home-based family caregivers and expands the assessment criteria that child welfare workers have to apply before approving a caregiver as a qualified placement.
- Other CCR-related activities. Various other activities are funded in the Governor’s budget, including (1) maintaining the FFA rate increase enacted in 2015-16, (2) implementing needs assessments and

STRTC case reviews, (3) helping cover a portion of initial FFA and STRTC accreditation costs, (4) updating child welfare workers' case management system, (5) developing the provider performance indicator dashboard, and (6) aiding county MHPs in ensuring children in STRTCs are appropriately placed.

The department notes the following implementation activities that are underway:

- DSS hosts State/County and Stakeholder Implementation committees, a workgroup for FFAs, STRTCs, and other stakeholder meetings to provide policy recommendations for the implementation of CCR, and training workgroups.
- Additional workgroups for probation, performance and outcomes, and mental health will convene in spring 2016, and an All County Information Notice outlining the requirements of AB 403 is scheduled to be released in late spring 2016.
- Implementation Guides for county agencies, FFAs and STRTCs are currently being developed and will be available in April 2016.
- The policy development for Core Services to be provided by FFAs and STRTCs, is currently being drafted.
- A proposed rate structure for FFAs and STRTCs will be released by spring 2016. Interim licensing standards are anticipated to be available by July 1, 2016.

The department has also provided the following timeline of important implementation milestones leading up to the January 1, 2017 implementation date:

1. Identify an Assessment Tool/s and Provide Instruction to Counties		
Selection of child welfare assessment tool/s to be tested by the state pursuant to CCR assessment provisions	CDSS	Mar-16
Develop agreement with tool developer for pilot	CDSS	Mar-16
Develop procedures and training for county pilots	CDSS	Mar-16
Outline expectations for use of tool (ACIN/ACL) statewide	CDSS	Mar-16
Develop and inform counties of accountability expectations such as reporting, integration into CQI etc.	CDSS	Apr-16
Develop direction for how counties will use assessment information to inform rate.	CDSS	
Identify training resources available to counties to ensure fidelity and consistent training plans for using new tool	CDSS	Apr-16
2. Budgeting and County Resources for Implementation		
Determine costs and standards for consistent application of CFT process	CDSS, DHCS	Apr-16
Identify costs for RFA implementation	CDSS	Apr-16
Determine resources for Foster Parent Recruitment, Retention & Support	CDSS	Apr-16
Determine other resource needs	CDSS	Apr-16
Complete assessment for anticipated resource needs for FY 16-17	CDSS	Apr-16
Budget-allocation and instructions for claiming	CDSS	Sep-16

3. Rates		
Determine rate structure for FFAs and STRTPs	CDSS	Apr-16
Identify process and tools to be used for level of care determinations within the CFT	CDSS, counties	Jul-16
Issue instructions to providers and counties	CDSS	Jul-16
4. RFA		
Implement survey of Resource Families	CDSS	Jan-16
Determine staff qualifications for counties	CDSS	Jul-16
Written Directives on new RFA requirements (including Due Process)	CDSS	Jul-16
Determine Staff Qualifications for FFA's	CDSS	Jul-16
Emergency Relative Approval - Variance determination/approval	CDSS, Fed CMS	Aug-16
Identify Early implementing FFA's for RFA	CDSS	Aug-16
Review county implementation plans for RFA implementation	CDSS, CWDA	Jan-17
5. CFT		
Reporting/Accountability/Evaluation Design (engage with counties and stakeholders)	CDSS	Jan-16
Clarify and align expectations about MHP participation	CDSS, DHCS	Jul-16
Confidentiality and Information Sharing - Identify barriers and resolutions per AB 403	CDSS	Jul-16
Clarify expectations for Regional Center participation in CFT's (coordinate with DDS & DHCS)	CDSS, DHCS	Jul-16
ACL on CFT process and CCR requirements	CDSS	Jul-16
Training Plan in CFT process for Social Workers and additional CFT Facilitators		
6. Mental Health Coordination		
Development of Core Services Guide	CDSS, DHCS	Jul-16
Mental Health Certification Instructions Issued	CDSS, DHCS	Jul-16
Revise statutory provisions for Mental Health certification/contract provisions	CDSS, DHCS	May-16
Align definitions between DHCS and CDSS for terms: assessment, certification and outcomes	CDSS, DHCS	May-16
Align/clarify language to address SED determinations between CW and Probation populations	CDSS, DHCS	May-16
Clarify "medical necessity" determinations for youth requiring STRTP placement that do not currently meet MN standard	CDSS, DHCS	May-16
Analyses certification, accreditation, licensure processes to identify overlap, duplication and streamlining opportunities	CDSS, DHCS	May-16
Develop System for updated list of approved mental health services in STRTPs and FFAs	CDSS, DHCS	Aug-16
7. STRTP & FFAs		
Develop STRTP classifications for STRTP 'peer support' and 'volunteer classifications' per CCR report	CDSS	Jan-16
Interim Standards for FFA's and GH's to transition (including program statement and core services)	CDSS	Jul-16
Transition process - DSS staffing in place/trained	CDSS	ongoing

Instructions to counties on approving program statements	CDSS	Jul-16
Instructions to providers and counties regarding rate extensions	CDSS	Jul-16
Update Placement Agreement for services to be delivered	CDSS	Jul-16
8. Accreditation		
Timeline for agencies to transition	CDSS	May-16
Exemption process finalized and instructions issued	CDSS	Jul-16
Instructions for agencies to receive reimbursement for accreditation costs (pending budget approval)	CDSS	Aug-16
9. Performance Outcomes		
Define performance outcomes for providers	CDSS, DHCS	Jan-16
Determine process for Client Satisfaction survey	CDSS	Jan-16
Post data twice per year per AB 403 regarding provider performance	CDSS	Jan-16
ACL on Performance Outcomes and Client Satisfaction Survey	CDSS	Jan-16
10. Other - Policy		
ACIN on CCR	CDSS	Mid- Mar-16
Implementation Guides for Counties and FFA's	CDSS	Apr-16
Data reports to counties with child count for children/youth in GH care level 1-9 and 10-13	CDSS	Early April
ACL or ACIN on county extension process for providers who may not be able to meet 1/17 timeline	CDSS	Jul-16
ACL to counties to meet new requirements under WIC 361.2	CDSS	Jul-16
Changes in licensing regulations to conform to CCR	CDSS	Jul-16
Process for counties to operate an FFA or STRTC	CDSS	Jul-16
11. County Shelters		
Consult with counties in development of transition plans for County shelters	CDSS	May-16
ACL or ACIN on new Shelter facility requirements	CDSS	Aug-16
12. Youth in GH - Transition		
Develop transition strategies for foster youth in group homes who do not want to be transitioned to family-based care (Rec #3 CCR Report)	CDSS	Sep-16

Also of note, the Administration has reversed its estimate on county savings since January and no longer presumes them, so the previous charts no longer accurately reflect what the Governor's proposed spending on CCR will look like. Funding updates to this and other components of the CCR are expected in the May Revision.

Advocate Concerns. The counties and other stakeholders have raised significant concerns about the possible lack of adequate funding in the Governor's proposal. The counties are working closely with the department, and an update is expected in this hearing regarding the status of those conversations.

LAO Comments. In the "2016-17: Analysis of the Human Services Budget," the LAO notes that the Governor's proposal is a logical next step in the implementation of CCR, but that many uncertainties still surround CCR implementation, including:

- Future costs or savings from CCR are contingent on a host of interconnected factors, including the new STRTC and FFA foster care payment rates, the rate at which children exit group homes to

home-based family care, and which home-based settings are most heavily utilized following the closure of group homes.

- Without a considerable increase in the number of home-based family placements, CCR's goal of reducing the state's reliance on long-term group home placements cannot be met.
- Realignment may complicate budgeting for CCR implementation. The Governor's budget attempts to compensate counties for the increased net costs associated with CCR, but current estimates are based on a number of assumptions.
- There are still uncertainties surrounding mental health services and certification.

Panel. The Subcommittee has requested the following panelists, in addition to the Department of Social Services, to provide comment on the implementation of the CCR:

- Frank Mecca, County Welfare Directors Association of California
- Ben Johnson, Legislative Analyst's Office
- Chi Lee, Department of Finance

Staff Comment. AB 403 enacted major policy shifts in the child welfare system that the Legislature has long been invested in seeing come to fruition for the well-being of children and cost-effectiveness of the system. Given the complexities and uncertainties surrounding the implementation of CCR, a refinement of the Governor's proposal is expected at May Revision that will incorporate feedback from the counties and other stakeholders. In particular, the development of rates is critical and will be the driving force behind a number of costs in CCR.

Questions.

1. Please provide an overview of CCR and current implementation.
2. Please explain what activities are the most critical to fund this year in order to meet the January 1, 2017 deadline.
3. Does the department expect to be able to implement all necessary activities by January 1, 2017?
4. When will a rates package be released in order to provide adequate time for legislative and stakeholder review?
5. How does the department intend to report on CCR outcomes? What can the Legislature expect for CCR progress reporting before the January 1, 2017 implementation date, and after?
6. Please provide an update on conversations with counties and stakeholders.

Staff Recommendation. Hold open.

Issue 2: Budget Change Proposal: Funding Continuum of Care Reform Implementation (AB 403)

Governor’s Proposal. The Administration requests \$5 million (\$2.5 million General Fund) on a three-year limited term basis to support approximately 34 positions to implement AB 403. The requested positions are as follows:

CCR - AB 403 BCP

POSITIONS	CFSD*	CCLD*	Legal	ISD*	Admin	Total
CEA	1.0	-	-	-	-	1.0
SSMI	5.0	-	-	-	-	5.0
SSMII	1.0	-	-	-	-	1.0
AGPA	10.0	1.0	-	-	-	11.0
RPS II	1.0	-	-	-	-	1.0
ATTY III	-	-	4.0	-	-	4.0
OT	1.0	1.5	-	-	-	2.5
Sr Programmer Analyst	-	-	-	3.0	-	3.0
SSA	-	4.5	-	-	-	4.5
Accounting Admin I - Specialist	-	-	-	-	1.0	1.0
Total Positions	19.0	7.0	4.0	3.0	1.0	34.0

* CFSD- Children and Family Services Division
 CCLD- Community Care Licensing Division
 ISD- Information Systems Division

Background. AB 403 seeks to achieve the goal that all children as members of committed, nurturing, and permanent families, and that these children and their families must have local access to a broad continuum of services and supports. This legislation fundamentally changed the manner in which foster care and other entities coordinate and deliver services to foster children. Workload includes the development of 228 new procedures, processes, or protocols; 26 consultations with varying combinations of 18 specified or open-ended stakeholder groups; development of 19 sections of regulations; development of eight new training programs or new curriculum for existing programs; and reports to the Legislature or to publicly publish information.

The department asserts that a group of dedicated personnel is required to carry out AB 403 activities, particularly to meet the January 1, 2017 implementation deadline. The requested staff will be used to achieve the following goals: limit reliance on congregate care; increase capacity for home-based family care; increase engagement with foster children/youth and families; revise the foster care rate structure; increase accountability and performance; reporting; and legal support.

Staff Comment and Recommendation. Hold open.

Questions.

1. Please provide an overview of the proposal.