

**Testimony Presented by
James F. Purcell
Executive Director
Council of Family and Child Caring Agencies**

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On Children and Families and
Oversight, Analysis and Investigation**

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Good morning, my name is Jim Purcell and I am the executive director of the Council of Family and Child Caring Agencies (COFCCA), which is the principal statewide representative for nearly all the not-for-profit agencies providing services to New York's abused, neglected and troubled children and their families. COFCCA's member agencies keep families together while ensuring the safety of the children in the home, reunite families broken apart because of substance abuse, domestic violence, or mental health problems, and find new permanent homes for children whose parents can't or won't care for them.

On behalf of the 120 COFCCA member agencies providing services to New York's children and families, I thank Chairman of the Committee on Children and Families William Scarborough and Chairman of the Committee on Oversight, Analysis and Investigation Sam Hoyt for the opportunity to address some of the child protection issues confronting the child welfare system.

I know that Assemblyman Scarborough heard testimony in White Plains a few months ago about the difficulty in identifying the chronic abuse cases and distinguishing them from the tens of thousands of calls and follow-up visits to the homes that are the subject of complaints to the State Central Register. Child protection is a very difficult and complex undertaking and one in which the expectation is that the right judgment will be made 100% of the time.

The recent spate of tragic deaths from abuse or severe neglect has clearly raised concern about Child Protection in New York City. I want to state clearly that we fully support the steps that Mayor Bloomberg and Commissioner Mattingly are taking to strengthen the capacity of ACS to protect children. We are cooperating fully with the Commissioner's request that we review all of our preventive services and foster care cases to determine if there are any children we deem to be at risk of immediate harm. By the end of last week our agencies had already reported to ACS on their safety assessments of almost 20,000 children in preventive services and in foster care.

New York City has moved quickly to ensure that enough ACS child protective workers are in place and that their caseloads are reasonable; to enhance the supervision of front

line workers by reducing managerial caseloads, to improve their training, and to provide more supports to their workers related to Family Court.

We must also get the message out to everyone in the community that there are options for working with at-risk families. We think too many people, including some professionals, think that a call to the child abuse and neglect hotline leads only to an investigation and possibly foster care. Our preventive services agencies offer that middle option when the local public child protective service office thinks it is prudent – help for families to stay together, safely, while they work to correct any areas of concern.

There has been much speculation in the press and in the letters to the editor columns about too much emphasis on keeping families together rather than making foster care placements. That thinking is flawed. It is our position that Commissioner Mattingly got it exactly right when he said recently that ACS faces, not a problem of policy or of ideology, but of practice. It is and must be the policy of all of us that whenever it is determined that children can be maintained safely with their families-- we should do so. Foster care placement should be reserved for only those instances where there is insufficient confidence that the right combination of services and supports made available on a timely basis to a family will keep the children safe. Isn't that what you would want if it were your family? A resolute commitment to safeguard the children but also every effort and support possible to develop and enhance the parent's ability to raise, nurture, and develop their children.

And that is precisely why, over 25 years ago, New York State was the first state in the nation to make a public, system-wide commitment to provide and fund what became known as preventive services. Their purpose is NOT to keep every family together. By the time some families come to the attention of the public agency they are already too devastated by drugs or alcohol; by violence in their home or community; by mental health problems; or a host of other conditions, very often in combination with each other to find enough strengths at that point to enable them to keep their children safe while they seek the help they need.

But in literally thousands of other families where the child protective service has indicated a case, or where a family has come to their attention as needing help to avoid such a situation, they find that, while there is on-going risk, that with the right supports and services the family can ensure safety to a reasonable degree even while the preventive program works with them to enhance their long term capacity to raise their children in a strong and healthy manner. We owe those families our help and our community based agencies provide exactly these services to thousands of families already determined to be at risk by CPS.

The fundamental point of our testimony today is that there are three critical components of the child welfare system. The first is clearly child protective services. Almost all of the testimony you have heard today has focused on this component. Child protective services are very clearly a public agency function. Anyone can make a report of suspected abuse or neglect against anyone and it is the role of the CPS unit of the county

or ACS in NYC to investigate the matter and determine, to the best of their ability whether the alleged actions occurred; whether those actions rise to a level that warrants indicating the report, and determining whether the children are at risk of future harm.

Preventive services constitute the second component of the child welfare system. These services are critical to a modern and well functioning child welfare system. Prior to 1980, upon finding on-going risk CPS's only recourse was to make a foster care placement or leave the family alone. In 1979, New York State became the first state to say that was insufficient and to begin to build a network of community based services to address the needs of these families.

A well functioning preventive program will offer case management services making referrals to other community supports including mental health, substance abuse treatment, domestic violence prevention, housing and job services, day care, homemaker services and other needed supports. In addition it is the expectation that a trained worker will be in regular contact with the family and all the children; in essence, overseeing the family's work to be sure their children are safe and working to resolve crises and problems as they arise. In the vast majority of cases our workers do this work very well. When they then determine that despite their efforts, the level of risk of harm is too high they go back to the child protective worker with suggestions of needed help, or a recommendation to place the children in foster care.

And finally foster care is the third critical component of the child welfare system. Once a child is placed in foster care it is the responsibility of the foster care agency to work diligently to help the family resolve their problems so that they can once again parent their children. Federal and state law, as well as good practice standards, require these "diligent efforts" to return the child to a safe family. If after working with the family for some time it is determined that the birth family will never be able to safely raise their child, then in conjunction with the county DSS or ACS a decision is made to try to terminate the parental rights and proceed with an adoption.

My point is that while child protective services is an absolutely critical part of the entire child welfare system it cannot do its job of trying to ensure safety for children without the other two components of the system – preventive services and foster care.

I have never found this better articulated than by Dr. Harold A. Richman, former Director of Chapin Hall Center for Children at the University of Chicago. He wrote:

Child welfare is not another social program. It deals with life and death issues. It deals with coercive state interventions; the stripping away of a family's privacy, the taking of a child from a family, and the presumption of a public standard of acceptable and unacceptable parenting. Its consequences have life-long effects. The values it deals with, too often cavalierly, are the values that define our society.

Child welfare is different because it cannot be about one thing. It must be about many things:

- If you have a wonderful system of investigation of child abuse or neglect, yet you have no service to keep a family together, then you have failed the children and the family and the public interest.
- If you have a good investigative branch and good services to help keep the family together, but you have poor foster care for those children who must be placed, then you have failed the child and his family and the public interest. In fact, you have perpetrated a terrible hoax on the child, asking him to trade the devil he knows for a possible equally bad or even worse devil he doesn't know.
- If you have good investigators, good family services, good foster care, good health care, and good mental health services, but terrible residential or institutional care, then you have failed the child who needs such care and the parents and foster parents who have proven that the child can make it only with such specialized care.

As I noted, our not-for-profit agencies strongly support every investment to further strengthen and improve child protective services both in NYC and in every other county. We rely very much on their professionalism, their quality work, their training, and their understanding of risk of harm to children.

But I remind you that our agencies provide foster care to 80% of all the foster children in New York State; and to 98% of such children in NYC. Our preventive services agencies across the state provide the considerable majority of preventive services to families; most referred directly by the local public child protective service. Local CPS has determined that these families can keep their children safely at home if they receive services and supports from our preventive services programs.

These children are by definition at risk of harm – that's why they were referred to us. So as you consider ways in which the state can do a better job of protecting children and safeguarding them from harm I submit that you must not consider only one third of the system. Our not-for-profit preventive services and foster care agencies need the same considerations as child protective services:

- Reasonable caseload sizes;
- Salaries high enough to reduce our 40% annual turnover rate of front line workers,
- High quality training, and
- Sufficient supervisory and managerial supports to guide and direct quality work.

Our preventive services contracts are based on caseloads of 15 families per caseworker in NYC and various county derived ratios Upstate. That means that one worker may be responsible for 30 or 40 or more children. And remember these families are struggling

with substance abuse, alcoholism, domestic violence, and/or mental health needs. Families often severely impacted by poverty and violence. Families with special needs children who can be a cause of enormous stress in a household.

And with the number of children in foster care at historic low levels, we assume that our preventive services agencies are serving the families who in the past would have had their children removed. These are high-risk families. The Council on Accreditation, the national organization which sets standards to which agencies that want to be deemed in full compliance with accreditation standards must comply, sets family support preventive service caseloads at a maximum of 12:1, and they say that these should be adjusted downward if cases are especially complex.

Caseload ratios sound like some obscure budgetary calculation but at it's simplest it means the number of families each worker will be expected to work. I ask you if you are comfortable with a worker being responsible for monitoring the safety of all the children, working to heal a family, providing or arranging for needed services and all that while documenting every conversation and interaction in the mandated computer system, (In NYC preventive workers must also enter the data into a separate mandated ACS computer system.) The current caseloads are too high for the families we are working with today and with all of the accountability requirements our agencies must deal with.

Let me now turn to community based foster care. Our foster care caseloads are even higher. Most foster care workers carry caseloads of 20 children, plus the responsibility in some districts to provide casework services to children no longer in payment status. With a caseload of 20 children each caseworker has an average of about 5.5 hours per month to devote to each child.

That is an average of 5.5 hours to:

- Visit the child;
- Visit the foster home;
- Visit the birth family;
- Recruit an adoptive family if needed;
- Prepare for and attend court hearings;
- Resolve any stipend payment changes or problems the foster family may experience;
- Arrange needed services for the birth family;
- Arrange needed services the child may need;
- Arrange supports the foster parents needs;
- Oversee training of the foster parents;
- Counsel the child;
- Counsel the birth family;
- Arrange all medical, dental, and mental health care the child needs;
- Prepare the birth family for the return of their child, including arranging housing, welfare supports, food stamps, etc;
- Follow up on any concerns raised by ACS case monitors;

- Respond to emergency calls from the child, foster family, or birth family; and
- Document all of these activities in the mandated new computer system and complete extensive forms required by the new Permanency Law.

It is not possible to do all of these tasks, all the while working energetically to keep the children in foster care for only the shortest possible amount of time, and to consistently do a good job for every child and their family.

Further, the extremely low salaries, and lack of support staff and supervisory spans of control leave workers feeling alone in their responsibilities. These factors combine to create an annual turnover rate for caseworkers in our agencies of about 40%. This turnover exacerbates the time needed to complete all of the above-enumerated duties. Further, the agencies are forced to leave positions vacant for weeks in order to save money that is not included in their rates or contracts. Our workers' real caseloads often range well over 20 children.

Finally, while last year you required that NYC raise our rates for residential care this year and begin to pay the full state OCFS established rates next July; these rates are consistently below the level that OCFS has determined to be reasonable for the types of children being serviced. This is so because rather than pay the amount determined reasonable, the state rate system sets the rate based on what the agency expended two years ago, with small COLA adjustments.

If New York State really wants the highest quality child welfare program it says it wants and if it expects our preventive services and foster care agencies to deliver these vital safety services at consistently high quality, then these issues must be addressed.

We ask the Assembly to work with the Governor and the Senate to make the following happen now.

1. Caseload sizes for preventive services and foster care workers must be lowered. We propose that preventive caseloads be no larger than 12 families; and that this level be reduced for very high-risk cases and for large family sizes. Foster care caseloads should average no more than 15:1 and all children should count and be paid for. In both instances it is critical that sufficient funding be included to enable agencies to recruit replacement workers rapidly so that caseloads are not increased every time a worker leaves.
2. Salaries for workers must be increased so that the turnover rate is reduced. Salaries more comparable to similar state or NYC front line workers are appropriate. We believe very strongly that if the caseworkers stayed in their positions longer, that children would stay in foster care for less time and families would sooner be deemed safe and healthy for their children. Alternately, we would have the casework done faster to support a decision to move for adoption. Worker turnover is a blight on our system that makes children and families wait while new workers learn their jobs.

3. The addition of family and youth advocate positions to every unit of workers in both preventive services and foster care programs would free up workers for higher priority work, better support permanency efforts, and speed up discharges. These types of para-professional workers have proven their value over and over in better linkages with families, better linkages with community resources, etc. They are not funded in either our foster care or preventive services programs.
4. Last year you began the effort to require NYC to pay the rates established by OCFS for residential care and specialized foster family care. Now we ask that you further direct OCFS to establish those rates based, not on what agencies expended two years ago, but rather on the standards which OCFS has included in their own rate system as representing the reasonable costs of providing care. Our proposal would relate only to direct care of children, not to administrative or property costs areas.

We also ask that you extend this requirement to regular foster family care in order to ensure adequate staffing for these children.

5. Our agencies need the talents of a well educated and well trained front line workforce. The skills and abilities of supervisors are especially important. We call on the Legislature to renew its commitment to the Amy Watkins scholarship Fund to assist caseworkers in child welfare to obtain their Masters degrees. In the past the Fund was open to our agency workers only with the approval of a county department . This is wrong. We request that the Fund be given \$3 Million and that one third of those funds be directed to the not-for-profit agency workers.

Thank you for your attention. I am happy to answer any questions you might have.