

**TESTIMONY PRESENTED BY
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TO THE

**SENATE ROUNDTABLE: A QUALITY WORK FORCE FOR CHILDREN AND INDIVIDUALS WITH
DISABILITIES LIVING IN RESIDENTIAL SETTINGS**

OCTOBER 23, 2008

Good afternoon, my name is Jim Purcell and I am the chief executive officer of the Council of Family and Child Caring Agencies (COFCCA). COFCCA is the primary 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, provide quality family based and residential foster care, reunite families broken apart because of substance abuse, domestic violence, or mental health problems, and find new permanent families for children whose parents can't or won't care for them. Our agencies provide all of the residential services for the child welfare system.

I thank you Senators Kruger, Maziarz, and Morahan for convening this Roundtable and for your continuing concern about the quality of care and services for our most vulnerable children.

Our agencies provide residential care and treatment for about 4000 youth in residential treatment centers (25 to 250 beds, most of these are from 60 – 120 beds) and about 2700 children in community based group home type settings. These children are primarily placed through the foster care and juvenile justice systems as well as about 1000 children placed in residential school settings by their local school committees on special education. The number of foster care residential placements reflects a reduction of more than 25% of all beds over the past 5 or so years.

In December 2006 the NYS Office of Children and Family Services released its report *Residential Care in New York State: 2006 and Beyond*. Our members were deeply involved with OCFS, representatives of local departments of social services, and other partners in the development of that paper. We fully support its directions which call for only those youth who cannot be maintained safely and succeed in a family setting to be placed in residential care.

Our agencies meet the needs of thousands of New York's most damaged and needy children and youth. While often referred to as the child welfare or foster care system, these facilities are used by local departments of social services, the Family Courts through juvenile justice placements of both juvenile delinquents and PINS youth, and the special education system. The considerable majority of these children and youth are dealing with serious mental health needs and/or mental retardation and developmental disabilities.

The progressive impacts of the trauma these children and youth have experienced, including physical and sexual abuse, witnesses and participants in shootings, killings, and the perfidious effects of living in unsafe neighborhoods are played out every day in our controlled settings. The goal is to work with each child, offering them a safe and nurturing environment with consistent and fair rules and adult supervision so that they can heal their wounds and develop the capabilities to be successful in the community, in school, and at home. They reflect an increasingly needy group. In a study we cooperated with several years ago which compared the conditions of our youth first coming into residential centers, then as compared with ten years earlier, found that on every measure of the children their conditions had worsened at the time they were placed. Over 60% were already on psychotropic medications, the majority had experienced prior psychiatric hospitalizations, and their other needs including substance abuse treatment, criminal involvement, etc were all worse than in the early 1990's. Yet the resources provided to meet these needs had not been re-examined or systematically enhanced.

The first question on the Hearing notice asks directly how much consistency there is between the various systems which provide residential care for our children with respect to training, qualifications, and compensation of our front line workforce. The short answer is: there is no uniformity.

It is my understanding that OCFS, OMH, and OMRDD all provide 4 to 5 weeks of orientation and training for their front line child care staff before they are assigned to cover a shift. That is commendable, and given the complex needs of the children we serve, and the extensive rules and requirements these workers are expected to meet, it is needed. A few of our agencies have used private funds to provide one or perhaps up to two weeks of such up front orientation and training.

But for workers at too many of our agencies, a key interview question is "when can you start? to be sure we cannot and do not leave these workers alone with children until background clearance checks are complete and some minimal training provided. But the funding for our programs is simply not sufficient to support the kind of training and orientation to this stressful work which is needed. The fact that the state agencies recognize this need for their own staff, but do not provide funding to allow our not for profit agencies to do the same is perverse.

Perhaps even more critical than good training is the question why don't we recruit and retain a more highly qualified workforce? The children need and deserve better. The answer, not really surprisingly, is in the salaries and benefits we can offer.

These programs are successful when they are staffed by qualified individuals who are appropriately trained; but also critically, by workers who have incentives to stay in these positions for more than a year or two. Experience matters. We do not have a current precise figure on starting or average salaries. However I canvassed a group of our agencies recently and starting salaries for our front line child care workers with a high school diploma is as low as \$ 20,000 to 25,000. Average salaries for our front line child care staff in turn probably range from \$25,000 to perhaps \$29,000.

Let me put this in terms of the state workforce. Child care workers in OCFS facilities, in programs comparable to ours, are generally Civil Service SG-12. These start at \$34,000, and with 4 or 5 years experience pay around \$38 -39,000. If we were to translate our salaries to civil service levels they would equate to about SG -5. These are entry level clerical positions.

Some years ago, you would hear our agency leaders complain that their child care staff were taking second jobs to make ends meet and support their families. Now, in too many instances, our jobs ARE the second jobs. Every agency has stories of experienced, skilled workers who left for jobs in Home Depot or CVS. The salary is as good, and the hours and working conditions are much better. The likelihood of being assaulted, of being charged with mistreating a child, or mishandling a situation are considerably lower.

With these salaries, with the need to staff facilities 24/7 including every weekend and holiday, and with too little support our turnover rates are way too high. A few years ago we conducted an extensive analysis of all agencies and found turnover rates for these workers averaging around 40%. Anecdotal levels reported today, are slightly lower. But if the critical reason we place many of these youth in residential care is to help them learn to trust caring, consistent adults and to make better daily living decisions, then the disruption and sense of abandonment these children feel when a favorite worker leaves for a better paying job so he or she can support their own family is too high a price to pay.

Certainly the provision of regular cost of living adjustments (COLAs) is needed. And I assure you that those provided in the last year are most appreciated. We urge the Legislature to work with the Governor to be sure this regular provision of these COLA's is continued this and every year.

However, I would note three facts about COLA's. First, these increases are provided on a base rate that is way too low to support a high quality workforce for our kids. While a small raise to allow a staff person to meet growing costs is expected, it does not make up for the underlying inadequate salary.

Second, the COLAs tend to reflect salary percentage increases, often those paid to the state workforce (and not allowing for step increments as the state pay structure does). The increases our agencies face for fringe benefits is much higher; notably for health insurance. Average increases in recent years have ranged from 12 to 20% for many of our agencies. A 2.5% cost of living adjustment on current rates doesn't leave much, if any, money for a salary raise if it must first fund such high related worker costs. In

order to free up these funds for raises, some agencies have no choice but to limit their year to year health insurance cost increases by raising deductibles and co-pays and cutting benefits. The result is indeed lower costs, as we price our front line workers out of even attaining family coverage.

Finally, I don't have to tell you that costs go up every year and raises to offset these increases are needed every year. A couple of years ago I met with some of your colleagues to press for a COLA, only to have someone say "but we funded those last year." A system of care that provides reasonable salaries to attract and retain qualified staff is a long term proposition that must be attended to every year.

There are a number of things which, if done in conjunction with each other, and with a commitment of support from the state over several years, can transform this situation. The key issue is rather simply that we need a good faith commitment from our leaders -- the Governor and the legislature -- and the ongoing support and oversight of the state agencies to improve the skills and capacity of those people in our state who are willing to commit their careers to meeting the needs of our children.

They deserve a salary with benefits which allows them to support their families and to know that they are supported in their career choice by our leaders and the society they seek to improve.

Such a workforce would have:

- Salaries commensurate with the skill level we would want for our own children's care givers,
- Fringe benefits which reflect the commitment we expect and need from these workers including health insurance to cover their families at a reasonable cost and retirement benefits to ensure their futures,
- Supervision and on-going training to develop and hone the skills we talk about today,
- The respect of their neighbors and all of us for the incredible work they do, the stresses they face, and the care and love they provide to some very needy and deserving children, and
- The support of a grateful state government for the career decisions they have made, in the form of both tuition supports for the development of future skills as well as a student loan forgiveness program, such as a number of other states provide, to enable them to stay in these jobs.

I would like to address a few of the other issues the hearing notice raises:

- How are assaults on staff by residents handled? While there is no system rule, I know of few agencies that do not want to see these approached on a case by case basis. Surely staff members, like all citizens, have the right to press charges against anyone who assaults them. In some cases this is the best option as our young people need to know that there are consequences for their actions. Having said that, many of our workers understand that the youth they are working with are struggling with intense needs and sometimes strike out without thinking. Most of our

agencies will allow the worker to decide what the best course of action is based on the degree of harm done; the understanding the child or youth has of consequences, etc.

- You raise the question of an interagency worker registry to record criminal histories or terminations for cause. I submit that is a complicated issue, but certainly one worth careful thought and analysis. When the institutional abuse investigation laws were passed in the 1980's they simply parroted the definitions used in familial child abuse and neglect cases. The criteria for submitting a report are the same, although you will find that our agencies probably "over report" instances, and the criteria for indicating the cases are essentially the same.

It is well worth considering how well our children and our workers are served by this approach. There are people who should not be hired to work with children. We know some of these individuals from their criminal and SCR backgrounds. There are others who, while equally unqualified, have no record. We don't want them on our staffs and will support any reasonable measure to guard against this. But I question if the current investigative rules and findings do much to improve the quality of care or the responsibility of either the operating agency or the state agencies which fund and supervise them. We would be happy to work with the Senate and others to consider this issue. What we do not need are more investigations layered on top of existing ones. Let's be more thoughtful.

- There has been much attention paid in recent years to the issue of restraints in all forms of residential care. Our agencies have been very focused, with the leadership of OCFS, on reducing the use of restraints. We recently worked closely with OCFS to design a uniform tracking mechanism for use in all facilities. Over a recent 18 month period the agencies reduced restraints by one third. Many of these agencies are now working to implement "restraint-free" environments. We need to recognize that this is always a goal and the system will always need the option of restraints to protect children from harming themselves and others. In these instances the issue becomes the technique used, the quality of the training provided, and the number of staff available to safeguard all the children present. We participated in the restraint Workgroup organized based on the statue a year ago. The next step is for the Executive and the Legislature to provide the needed funds to implement the called for staff enhancements. Then we need to more carefully consider the needs of the rest of the agencies for comparable resources.

I close by thinking of two young women I met recently who were living at the time in one of our agency facilities. A group of us "professionals" asked them to talk to us about their experiences and their thoughts about how to improve their facility and its programs. One of them stopped, and thanked the group for supporting such programs. "It has saved my life" she told us. "I needed a place where I could rely on adults to care for me, adults who understood me and what I am going through. I didn't feel safe anywhere else. I feel safe here." That young woman is not alone.

There are problems and areas we can improve our services in every program and every facility I know of. And with the support of powerful leaders such as you we can do it.

And you will find every agency I know wants to offer its children the highest quality and safest environment possible. Please join us in that effort. Better yet, provide the leadership and support – including money – to make that possible.

To me the test is really quite easy and straightforward. Are the programs we fund and operate today ones that you would find acceptable for your children or your grandchildren if they needed them? If not, why not? And what will it take to make them places you would want your child with very serious needs to live? Based on laws you passed, these children are in the legal custody of your government. They are – quite literally – our children.

Thank you.