
Government of the District of Columbia



Child and Family Services Agency

Testimony of
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Hearing
***“Child and Family Services Agency
Performance Oversight,
Fiscal Year 2015-16”***

Council of the District of Columbia
Committee on Health and Human Services
Yvette Alexander, Chair

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Good morning, Chairwoman Alexander and members of the Committee on Health and Human Services. I am Ray Davidson, director of the DC Child and Family Services Agency (CFSA). I appreciate this opportunity to discuss CFSA's performance over the past year with you.

Last year, I told you that CFSA had a strong, multi-faceted agenda and that we would focus on solidifying best practice strategies in our daily work. That, in fact, sums up 2015 at CFSA, a year in which we stayed the course of the Four Pillars and achieved some performance gains which I will highlight today. At the same time, 2015 was also a year of adjustment—first to new leadership, which went pretty smoothly, and also adjusting some of our strategies as we tracked data and made mid-course corrections as needed. Implementation of planned actions led to some bumps in the road and a need for swift, major correction, which I will also discuss. But overall, CFSA continued to move forward. We have refreshed our agenda for 2016, and I will share what we are calling Four Pillars 2.0 as part of these remarks.

Service Demand and Demographics

In terms of District residents, CFSA is serving and the level of demand for services, we saw some shifts in key trends in FY15.

Calls to the District's 24-hour hotline for reporting child abuse and neglect were down slightly from FY14 while response and substantiation rates stayed steady. In FY15, we received (in round numbers) 25,000 calls to the hotline compared to 31,000 in FY14. But comparable to FY14 when we responded to 6,000 reports, we responded to 6,109 reports in FY15, including 3,339 investigations and 2,770 family assessments. The 3,000-plus investigations in FY15 resulted in 879 substantiations of child abuse or neglect—very much in line with substantiations in FY14.

While the overall number of children in the system continued to drop, the rate of decline of children in District foster care slowed considerably. On December 31, 2014, CFSA was serving a total of 2,827 children—and on that same date in 2015, we were serving 2,613. The total number of children served has plateaued around the 2,600 mark for about the past six months. In FY12, the number of children in District foster care dropped by 16 percent, by another 13 percent in FY13, and by 16.5 percent again in FY14. In FY15, decline in the District foster care population was five percent. We have expected this slowing. As of mid-February, CFSA was serving 1,015 children and youth in foster care, very much in line with our projections.

The two-year trend of serving more children at home with their families continued. The balance of in-home to out-of-home cases has been around 60 percent to 40 percent since 2013. At the same time, some children will always need to leave home to be safe. For these children, kinship care or a safe, temporary home in their community are the best options. We aggressively recruited foster homes in the District throughout 2015. But 48 percent of our children and youth in foster care remain in Maryland because we need more District residents to open their hearts and homes.

The final trend shift is that the long-time bubble of older youth in care is dissipating. By looking at the number of youth in various cohorts, we predicted this dramatic drop several years ago for the 2014-15 timeframe. At the peak of the bubble in 2007, youth ages 12 to 21 made up 63 percent of the foster care caseload. In FY15, the size of that age group in foster care dropped to 51 percent.

FY15 was in line with previous years in that 69 percent of entries into foster care were a result of neglect, and 19 percent were due to physical abuse. Behind these statistics are the many social issues that child welfare social workers typically confront such as:

- Poverty;
- Parental substance use (especially PCP);
- Parental incarceration;
- Untreated or sporadically treated health or mental health issues;
- Undiagnosed developmental disabilities;
- Inadequate or unstable housing;
- Domestic violence;
- Child or youth behavioral problems or other special needs; and
- More and more, we are seeing single parents overwhelmed by a large number of children with multiple issues.

FY15 Performance Highlights

As an overview of the “state of the agency” today, CFSA is embracing the changing needs of the District community, working to ensure consistent use of best practices, launching some innovations, achieving some performance gains, and correcting lapses in performance where needed. Following are the highlights of FY15.

Tracking Performance

CFSA has completed a total of 73 (or 83 percent) of the 88 standards in the court-ordered Implementation and Exit Plan under the *LaShawn* lawsuit. We continue regular internal monitoring of the 36 indicators of positive outcomes for children in our self-generated Four Pillars Scorecard, producing quarterly results posted on our website. Quality is a high priority for me, and in FY15, I integrated our Agency Performance and Quality Assurance functions to strengthen and tighten our Continuous Quality Improvement (CQI) program.

Evaluating Differential Response

Differential Response (DR) is an evidence-based practice in which serious and high-risk reports of child abuse get a full child welfare investigation while moderate-and low-risk reports get a non-adversarial family assessment. CFSA Child Protective Services (CPS) launched this practice in 2011, and brought it to scale by the end of 2013. Today, CFSA has 12 CPS-Investigation units and nine CPS-Family Assessment units.

In an earlier conversation with you, I mentioned the comprehensive evaluation of DR being underway in FY15. We recently received the evaluation report from the Institute of Applied Research Associates based in St. Louis, Missouri. They verified CFSA adherence to the fidelity of the DR model. Here is their conclusion regarding safety:

[E]valuators found no evidence that children were less safe in family assessments than in investigations. Some evidence was found indicating improved long-term safety of the children.

And the evaluators wrote the following regarding services:

Because of the short-term nature of family assessments, most of the service work of family assessment workers involved linking families with organizations and service providers—although FA social workers often provide direct assistance to families during the referral period. On the other hand, contacts with families and service referrals were high, considering that, had they been investigated in the traditional manner, most of the FA cases would have ended as unsubstantiated. The bottom line is that the evidence suggests FA has positively impacted assistance to families.

I'll be glad to give you a copy of the entire report.

Providing Placement

In 2015, CFSA had a reoccurrence of an undesirable situation that had long been behind us. Some children and youth spent a night, or part of a night, in our building or in a hotel. Throughout these stays, all had appropriate adult supervision. I want to give a brief, straightforward report on why this happened.

Over the last several years, CFSA has experienced steady decreases in the number of children entering foster care. This had led to under-utilization of contracted foster care beds, budget surpluses, and a need to right-size agency contracts for efficiency and fiscal accountability. These circumstances, along with a desire to improve quality, influenced CFSA's decision to end contracts with two private agencies in early 2015. Factors in the implementation of closing out those contracts temporarily resulted in a shortage of foster care placements.

In our two previous right-sizing efforts, many contracted foster parents elected to move to another provider, with no disruption to the District children in their homes. For example, the 2012 right sizing affected 109 children, of which only five moved to new foster homes. In 2015, a significant number of contracted foster parents at the terminated agencies did not accept this option, so that CFSA had to find new placements for 46 of the 180 affected youth. During the same period, CFSA experienced an unforeseeable bump in children entering foster care. The day-to-day difficulties that CFSA staff had in identifying appropriate placements for all these children and youth revealed a gap between contracted and actual capacity of providers. Since that time, we have taken steps to reinstate the efficient and caring placement capability that vulnerable children need and deserve. Major strategies include the following:

- Joint exploration with provider agencies of placement best practices nationwide, with the goal of developing a more viable business model for local family foster home networks given the realities of our local environment.
- Regular and continuous verification of actual and real-time capacity of providers and CFSA foster homes.
- Development of more short-term emergency placement options—with Sasha Bruce, for example, and within our own District-based foster homes.
- Continued proactive recruitment of CFSA foster homes in the District through traditional community outreach and innovative use of social media and paid advertising.
- Rebidding of family foster home contracts in FY16 for FY17, with a scope that should yield sufficient capacity and support services to meet the needs of the District children and youth in care.

Overall in FY15, CFSA placed a total of 691 children, and on the last day of the calendar year, 85 percent were in a family setting.

Implementing IV-E Waiver

CFSA continues to use funds from the federal IV-E waiver to support our shift from an agency geared for foster care to an agency geared for child abuse prevention and family support. Under the local strategy we call Safe and Stable Families, we are building a more nuanced array of community-based services to serve and strengthen families than the District has ever had before.

In FY15, we expanded the two evidence-based services that are the centerpiece of Safe and Stable Families. HOMEBUILDERS® provides intensive support for families in crisis, with the goal of preventing their children from entering foster care. The capacity of this program is 180 families annually. In 2015, Project Connect served more than 20 families where parents in recovery from substance abuse needed extra support to mend broken relationships and reunify with their children. The capacity of Project Connect is 108 families annually.

Also in FY15, CFSA’s Community Partnerships Administration recognized that they needed a better understanding of issues they were seeing in families and better ways to serve them. This led them to conduct an extensive literature search, to write a white paper on a profile that researchers call “chronic neglect,” and to develop new protocols for addressing the multiple issues these families present. We are proud of this in-depth, clinical work which identifies—and responds in a meaningful way to—the needs of those in our primary growth area of in-home families.

Stimulated by former CFSA Director and now Deputy Mayor Brenda Donald, we are also proud of the role CFSA played in developing two new and innovative housing options for special populations. In partnership with the D.C. Department of Behavioral Health, CFSA opened Wayne Place, a temporary transitional residence in Congress Heights for youth ages 18 to 24

who are leaving residential mental health treatment or foster care. Beyond just providing a roof, the program has work and educational requirements and supports the young people in setting and achieving personal goals. At Project Genesis, a beautifully renovated apartment building in Ward 4, eight young mothers and their children transitioned out of foster care and into a community where they help, and receive help from, their senior neighbors. Mayor Bowser attended the opening of both facilities and lauded them as models for serving special populations.

Becoming Trauma-Informed

A second major strategy at CFSA centers on becoming a fully trauma-informed public child welfare agency and dramatically improving clinical skills in day-to-day practice. Last summer, we introduced a series of tools that allow social workers to more accurately assess child, adolescent, and adult issues and strengths. Over time, we will use cumulative data from the assessments to identify themes and trends in the population we're serving. With several District agencies now using the same assessments, families do not need to undergo multiple assessments from different agencies, and the professionals gain a common language for discussing individual cases and overall trends and issues. Meanwhile, CFSA continues to adhere to the overall Trauma Systems Therapy (TST) approach and is preparing to introduce recent updates to the model by its originator, the noted psychiatric researcher and clinician Dr. Glenn Saxe.

Serving Youth in Care

Even as the number of youth in care declines, we continue to ramp up services to ensure these young people have life-long connections and quality preparation for adulthood. In December 2015, we submitted a comprehensive report to this Committee that addressed your interest in educational and career planning services for District youth in care. We are now working on commitments we made in that report.

In August 2015, final new rules pertaining to the rights of youth in care gained the force of law. CFSA is now in the start-up phase of implementing requirements under the Foster Youth Statement of Rights and Responsibilities Amendment Act, which you co-sponsored, Chairwoman Alexander. We've developed and printed an attractive, plain-language Youth Bill of Rights document; informed social workers and others who serve youth about what it means; and we are beginning distribution to all children and youth in the District's care.

Throughout 2015, I purposefully sought out and carefully listened to several groups of child welfare stakeholders. My contacts with youth have resulted in in-depth conversations where older youth in care voluntarily talk to me and their peers about their experiences, hopes, and concerns. We're forming a group of foster care alumni who want to advise, support, and inspire youth currently in care. And an active CFSA and stakeholder work group focused on after-care services all year. One result is that CFSA is launching a competitive bid to procure a more robust array of evidence-based after-care services for youth leaving the District's care.

Looking Forward

The Four Pillars is a solid framework that embodies timeless values important to all of us in child welfare. It will always be essential to stay focused on what the Four Pillars stand for, including: keeping families together whenever it is safe to do so, making sure foster care is temporary, fulfilling our moral obligation to improve the well being of those we serve, and ensuring children and youth leave the system for a permanent home. At the same time, strategies in play to achieve these critical outcomes must evolve to stay in tune with local capacity, improved service methods and approaches, and community needs.

For 2016, CFSA refreshed our agency agenda in what we are calling Four Pillars 2.0. It includes seven key priorities for the year. Here is an overview.

- **Critical Thinking as the Focus of Practice Improvement.** This challenges front-line social workers and supervisors to apply the Consultation and Information-Sharing Framework they've learned to daily practice. They should use the framework as a tool for critical thinking at every stage of working a case.
- **Effective Preparation and Support for Older Youth.** This is our commitment to push to develop more effective programs that ensure older youth are ready to succeed when they leave District foster care.
- **Return on Investment in Community-based Services.** As we develop new services, we want to ensure front-line workers are staying abreast of how and when to use every option in the continuum. We will continuously evaluate the service array and make adjustments as necessary to strengthen it.
- **Expand Placements and Homes.** This is a strong commitment to explore best-practice models and to build a sufficient local array of placement options and supportive services that meet the needs of the District children and youth we're serving now.
- **Improved Relationships with Foster and Kinship Parents.** We are working to strengthen training, communication, and supports so that foster and kinship parents are equipped and willing to meet the needs of the children and youth who require placement.
- **Stronger, Tighter Internal Continuous Quality Improvement (COI).** CFSA is developing a clear process that closes the loop from measurement and findings to decisions and actions that support improved outcomes.
- And finally . . . **Enhanced Organizational Well Being.** As we demand more clinical skill and better outcomes of social workers on our front line, we must do more to support them, and everyone at CFSA, in doing the difficult work of child welfare.

These key priorities, along with our existing strategies, serve to enhance our focus on the reform work we have underway.

Chairwoman Alexander, I value our partnership with you and this committee. I appreciate your kind attention to my remarks today and even more so, your interest in and support for the vulnerable District residents we serve. I look forward to working with you this year to take CFSA's performance to the next level.

Thank you, and I'll answer any questions you may have.