## Summary of "The Child and Family Services Improvement and Innovation Act" September 9, 2011

"The Child and Family Services Improvement and Innovation Act" is bipartisan legislation that extends and makes modest adjustments to the Child Welfare Services and the Promoting Safe and Stable Families programs, which expire September 30, 2011. These programs pay for services to families so children can safely remain with their own parents or be supported by other caretaker adults. They represent about 10 percent of all Federal child welfare spending (most of which is for payments to foster and adoptive parents and kin guardians and administrative costs). The legislation also extends child welfare waiver authority for three years.

The bill has no cost, and reflects agreements between Republicans and Democrats on the House Ways and Means and Senate Finance Committees for reauthorizing these programs as well as extending child welfare waiver authority. Human Resources Subcommittee Chairman Geoff Davis (R-KY) and Ranking Member Lloyd Doggett introduced prior legislation extending these programs on August 2, 2011 (H.R. 2790), and the House unanimously approved legislation extending child welfare waiver authority on May 31, 2011 (H.R. 1194). Below is a list of specific provisions in *The Child and Family Services Improvement and Innovation Act*:

## **Reauthorization Provisions**

- 1. Reauthorizes two child welfare programs through FY 2016 at current funding levels.
  - a. Authorizes \$325 million/year in discretionary funds for Child Welfare Services.
  - b. Authorizes \$345 million/year in mandatory funds as well as \$200 million/year in discretionary funds for the Promoting Safe and Stable Families program.
- 2. Reauthorizes the Court Improvement Program through FY 2016 at the same level as in prior years, although \$20 million of the \$30 million in annual funding will now be a set-aside from the Promoting Safe and Stable Families program instead of a separate additional appropriation.
  - a. Simplifies the program by allowing States to submit one application for each of three court improvement grants instead of three separate applications.
  - b. Tribes and tribal organizations are made eligible for funding to improve their family courts, with \$1 million of the \$30 million total set aside for tribes.
- 3. Reauthorizes HHS authority to grant new child welfare waivers through FY 2014.
  - a. HHS could grant 10 State waivers per year during FYs 2012 through FY 2014.
  - b. States would receive approval to operate a waiver for up to five years, with possible extensions, although no waivers can continue past FY 2019.
  - c. States must implement at least two of the following "child welfare improvement policies" (including at least one new policy) to qualify for a waiver: (1) establishing a bill of rights for foster youth, (2) creating a plan to meet the health and mental health needs of foster youth, (3) operating a kinship guardianship program, (4) providing foster care support for youth up to age 21, (5) planning for the appropriate use of congregate care, (6) increasing sibling placements, (7) improving retention of high quality foster homes, (8) helping youth transitioning out of care, (9) helping youth reconnect with families, and (10) establishing family finding, family counseling or related programs.
  - d. States must report spending before and during the waiver to ensure that waiver

funds do not supplant other funds previously used for those services.

4. Ends the Mentoring Children of Prisoners program, for which no funds were appropriated in FY 2011, while adding mentoring as a purpose for which Promoting Safe and Stable Families program funds may be spent.

## **Child Welfare Program Improvements**

- 5. Revises the current requirement for caseworkers to visit foster youth each month to better capture the percentage of visits actually made in the year and ensure a substantial percentage of visits occur in the home.
  - a. Requires States to complete at least 90 percent of expected monthly foster care visits (instead of the current requirement that they visit 90 percent of foster youth each month), rising to 95 percent by FY 2015.
  - b. Requires that at least 50 percent of all visits occur in the home of the child.
- 6. Broadens the focus of current regional grants for helping parents with substance abuse issues by removing the priority for methamphetamine, permitting States to focus on the most critical substance abuse issues, while also capping the amount of these funds that can be used for administrative purposes to 5 percent.
- 7. Improves data matching and program integrity by requiring standardized data and HHS coordination of data exchanges across State child welfare programs.
- 8. Modifies State requirements on serving foster youth to better meet children's needs:
  - a. <u>Educational stability</u>: States must work to ensure that foster youth remain in the same school whenever possible in each placement, not just in the first placement.
  - b. <u>Psychotropic medications</u>: States must explain how they will ensure psychotropic medications are used correctly.
  - c. <u>Developmental needs of young children</u>: States must explain how they will address developmental needs of young children in care and how they will work to reduce the time children under five spend without a permanent family placement.
  - d. <u>Targeting services</u>: States must explain how they will focus services on those most at risk of maltreatment.
  - e. <u>Emotional trauma</u>: States must explain how they will minimize emotional trauma associated with removing a child from their home.
  - f. <u>Child maltreatment deaths</u>: States must describe data sources used to report child maltreatment deaths and how they will incorporate missing sources of data.
  - g. <u>Child ID theft</u>: States must provide older youth a copy of an existing credit report, and assisting them in resolving inaccuracies due to ID theft.
- 9. Requires States to better document spending on post-adoption services, and HHS to compile child welfare spending data and post it on their website.
- 10. Requires HHS to evaluate the effectiveness of regional grants to help parents with substance abuse issues, and GAO to investigate duplication in child welfare programs and to report on the time families must wait for substance abuse or other services.