Testimony before the District of Columbia Council Committee on Health and Human Services

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Child and Family Services Agency Oversight Hearing Margie Chalofsky Executive Director

Foster & Adoptive Parent Advocacy Center (FAPAC)

Good morning, Chairperson Alexander and members of the Committee on Health and Human Services. I am Margie Chalofsky, the Executive Director of the Foster and Adoptive Parent Advocacy Center, commonly known as FAPAC, and an adoptive parent of a 21-year old son. FAPAC provides training and support for foster, kinship and adoptive parents, works to strengthen relationships between birth and foster parents, and partners with CFSA and private agencies to develop solutions to systemic problems in the child welfare system.

FAPAC supports a vision of strong prevention programs to keep families intact; high quality, well-trained and supported foster placements when children do need to come into care; serious efforts towards reunification and other permanency options; and meaningful and effective post-permanency services to support families and keep them stable and healthy.

As we welcome both a new interim director and a new Council committee, we will use our testimony to identify some programs we see as successful as well as issues that we believe need priority attention.

First and foremost, it is important that we positively acknowledge CFSA's shift in paradigm of these past few years that focuses upon keeping more children with their birth families. Towards this purpose, CFSA has worked to decrease removals, as well as to identify and license kin quickly when a removal is necessary. We want to state our support for both of these efforts and our hopes that this vision will continue to lead CFSA's charge forward. We also believe that it is critical that as commitment is continued in this direction, significant measures be in place in order to be confident that we are simultaneously strengthening the safety net serving children well in their birth families, and to ensure that services are adequately substantive to allow families to succeed and children to thrive.

Other directions and programs we see as working well include:

1) The shift in practice to encourage stronger relationships between birth and foster parents. These past few years, FAPAC has been pleased to be partnering with CFSA on the Family Link program, which focuses on helping birth and foster parents to build increased

communication and stronger working relationships on behalf of their children. We have been encouraged by this partnership, and although it will take time for culture to truly shift, seeds have definitely been planted and begun to grow.

- 2) The Mobile Crisis Stabilization (MSS) Program, a partnership between CFSA and Catholic Charities, provides services to foster parents on a 24/7 basis, with the goal of preserving placements that show signs of destabilizing. FAPAC has received positive feedback from foster parents who have utilized this service.
- 3) The Healthy Horizons on-site clinic, which helps to ensure that health services reach children and families as quickly as possible.
- 4) The Office of the Ombudsman: We have seen many positive outcomes for children and families come from the involvement of the CFSA Ombudsman. We advocate that consideration be given to increasing the capacity and systemic impact of this office through increased staffing as well as through building a closer link between this office and the Quality Service Review Process and other means of internal quality assurance.
- 5) Improved foster and kinship parent pre-service/pre-licensing training: *Trauma Informed PS MAPP* provides hands on experience to emphasize the effects of trauma on children and ways in which foster/adoptive parents can be most supportive in helping children with de escalation and self- regulation. *Caring For Our Own* is now utilized as the kinship care pre-service training. This training program is facilitated through a group-learning model, which fosters a supportive atmosphere in which peer support helps participants to process feelings associated with taking care of relatives involved in the child welfare system.

We advocate for priority attention to the following:

1) A deeper and comprehensive focus on permanency for older teens. This commitment towards permanency has to be integrated into all systems, functions and programs, and held as standard for youth in care, transcending any specific permanency goal a youth may have been given. Although

increased permanency for older youth has been identified as a desired outcome for many years, internal and external systems are not adequately aligned to get us there.

2) We continue to be very concerned about the children in our homes with the highest level of emotional needs, especially those for whom placement stability has not been achieved. Although we do see progress through the focus on trauma as well as the existence of new evidence- based therapy programs, there is still a disconnect between the behavioral/emotional needs of some of our children and the skills inherent in the range of placement options. We must significantly increase supports and deepen the clinical skills of our families as well as of our workers if we are to build stability and positive outcomes for our most emotionally vulnerable children in family settings.

CFSA continues to move forward with positive motion in many areas. We support the current vision and direction and look forward to our continued partnership on behalf of the District's children and families.

Thank you for the opportunity to testify today.