

# RESOLUTION

**WHEREAS**, the Mahoning County Children Services Board has determined to reduce its work force through the abolishment of all classified civil service positions associated with the Residential Services Department as the result of a reorganization for the efficient operation of the appointing authority and/or for lack of work. The Statement of Rationale for the layoffs and/or abolishments is attached.

**WHEREAS**, the Mahoning County Children Services Board has determined that these layoffs and/or abolishments are necessary to meet the projected staffing levels of the Agency;

**NOW, THEREFORE, BE IT RESOLVED BY THE MAHONING COUNTY CHILDREN SERVICES BOARD:**

That the Mahoning County Children Services Board does hereby reduce its work force through the abolishment of the aforesaid classified civil service positions and does direct the Executive Director to take all necessary steps to initiate the layoff and recall procedures required by Ohio Revised Code sections 124.321 through 124.327 and the **AGREEMENT BY AND BETWEEN THE MAHONING COUNTY CHILDREN SERVICES BOARD AND THE COMMUNICATIONS WORKERS OF AMERICA, EFFECTIVE 2/1/2015 THRU 1/31/2018**, with respect to the affected employees as herein stated.

**Adopted by the Board on this 21<sup>st</sup> day of April, 2016:**

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Ms. Brigid Kennedy, Board Chair

## STATEMENT OF RATIONALE

### OBJECTIVES OF THE AGENCY

The objective of the Mahoning County Children Services Board is to significantly reduce its reliance on publicly run residential services while ensuring that appropriate funding, resources and strategies are available to safely reduce congregate care placements and improve outcomes for all of the children in its custody.

The Mahoning County Children Services Board has determined that all children in its custody shall be cared for in the least restrictive, most family-like setting possible. While the Board Recognizes that, at times, congregate care may be necessary to ensure a child's safety and stabilization, such level of care should, and ought to be, used judiciously, efficiently, and effectively.

Currently, the Agency maintains a Residential Services Department which acts as the administrator of two child residential facilities operating within the city of Youngstown. This enables MCCSB to provide primary housing for up to 20 children who interact with their peers in the community while participating in activities, school, and sports.

By the mid 1970's, most Ohio counties had closed their children's homes in preference of foster homes. Currently, Mahoning County is one of only five counties that continue to provide congregate<sup>1</sup> care as a direct governmental function. All other counties rely exclusively on private child placing organizations to provide care for children who cannot function in a family-like setting.

Since approximately 2000, Mahoning County Children Services has experienced an increasing rise in the placement costs and the level of difficulty of children in its custody who cannot be safely maintained in traditional care or a family like setting. Although the agency consistently monitors and assesses placement options in line with efficient service delivery models, costs associated with congregate care continued to rise at dramatic rates.

In accordance with its mandate to continually monitor and improve the quality of services it provides, the Agency has periodically evaluated whether it should continue to directly provide congregate care.

MCCSB has known for many years that congregate care was not best practice and that we needed to move toward other, more effective responses. Unfortunately, those more effective responses require a significant up-front investment, such as enhancing our prevention and early intervention efforts, developing a kinship unit, and recruiting and training therapeutic foster homes. It is critical to have and maintain these supports because we know, based on research and experience (de-institutionalization in the 70's), that simply transitioning our congregate care

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<sup>1</sup> The others are Trumbull, Lake, Jefferson and Adams

population to the community at-large, without proper planning and supports, is probably worse than leaving them where they are.

A study conducted in 2014 revealed that the Agency was facing a substantial fiscal deficit over a ten year projection. Based upon that information not only would we not have the resources to build the supports necessary to ensure a successful transition to less restrictive care, we were facing significant cuts. Our only option at that time would have been to merely shift that population to congregate care the private sector. This was, in the Board's opinion at that time, a step backwards in that it felt thought we did a better job at providing congregate care than the private sector.

Based upon changes in our fiscal landscape, an updated fiscal analysis demonstrates that, instead of facing a substantial shortfall over 10 years (even if we phased out residential services), we now will have sufficient funds over the same period available to build and maintain the necessary supports.

The Agency can say with confidence that, for the first time, by taking these steps now, we *will* have the resources to *safely* transition this population to less restrictive placements as opposed to merely pushing the children to the private sector.

#### **AFFECTED POSITIONS<sup>2</sup>**

As it relates to the Residential Services Department current authorization levels provide for a Placement Services Program Administrator,<sup>3</sup> the Residential Supervisor,<sup>4</sup> two Child Care Center Coordinators; thirteen full time Youth Leaders, twelve part time Youth Leaders, two full time Cooks and a full time Maintenance Worker. All positions with the exception of the Placement Services Program Administrator, the Residential Supervisor would be affected.

#### **NUMBER OF AFFECTED EMPLOYEES<sup>5</sup>**

<b><u>Position</u></b>	<b><u>Classification</u></b>	<b><u>Employees</u></b>
Group Home Coordinator	69461C	1
Full Time Youth Leader	46511C	12
Part Time Youth Leader	46511C	10
Maintenance Worker	53113C	1

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<sup>2</sup> Some positions have been approved and are on the Table of Organization, but remain unfilled.

<sup>3</sup> The Placement Services Program Administrator has intra-departmental responsibilities in addition to the Residential Services Department.

<sup>4</sup> The Residential Supervisor has intra-departmental responsibilities in addition to the Residential Services Department.

<sup>5</sup> These reflect the actual employees who are in the stated classification.

## **RATIONALE – REORGANIZATION FOR THE EFFICIENT OPERATION OF THE APPOINTING AUTHORITY**

Over the summer of 2014, the Board concluded that closing the Group homes at that time may have resulted in a total savings of \$8,323,397 over the next ten years. However, at the time, this represented only 33.8% of the savings necessary in order to achieve fiscal solvency over the same period.

The information contained within this update indicates that phasing out the residential services operations at this time and in the manner described below may result in a total savings of \$11,254,021 over the next ten years and may result in a reserve balance of \$3,915,592 at the end of that same period.

## **RATIONALE – LACK OF WORK**

Research proves that children fare far better in family care rather than in institutional placements.<sup>6</sup> Children and youth who live in congregate care are at a greater risk of physical, emotional, behavioral and social issues and are less likely to find a permanent home than those who live in foster care.<sup>7</sup> The attachments of the majority of institutionalized children are incompletely developed or even absent.<sup>8</sup>

Based largely on modern research, current Federal law mandates that each child's case plan must include a discussion of how the child's case plan is designed to achieve a safe placement for the child in the least restrictive (most family-like) setting available.

Although there may currently be a limited appropriate role for congregate care placements in the continuum of foster care settings, there is consensus across multiple stakeholders that most children and youth, but especially young children, are best served in a family setting. Stays in congregate care should be based on the specialized behavioral and mental health needs or clinical disabilities of children. It should be used only for as long as is needed to stabilize the child or youth so they can return to a family-like setting.

Nationally, there has been a significant decrease in the percentage of children placed in congregate care settings over the past decade, and this reduction is at a greater rate than the overall foster care population. Proportionately, children in congregate care comprised 18 percent of the foster care population in 2004 and 14 percent in 2013—a notable decrease. Additionally, over the past 10 years, the number of children and youth in the child welfare system on the last day of the FFY declined by 21 percent, from 507,555 in 2004 to 402,378 in 2013.<sup>9</sup>

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<sup>6</sup> *Rightsizing Congregate Care - A Powerful First Step in Transforming Child Welfare Systems*, 2010, The Annie E. Casey Foundation, Baltimore, Maryland

<sup>7</sup> National Conference of State Legislators, 2010 Permanency for Older Youth in Foster Care

<sup>8</sup> Dozier, M, et al. (2012) Institutional Care for Young Children: Review of literature and policy implications

<sup>9</sup> *A National Look at the Use of Congregate Care in Child Welfare* - U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau, May 13, 2015

Comparatively, the number of children in care on the last day who were placed in a group home or institution decreased by 37 percent (a decline from 88,695 to 55,916). Congregate care use is decreasing at a greater rate than the overall foster care population, which indicates states are making greater strides in reducing the number of children who spend time in a congregate care setting.

These trends suggest that child welfare practice is moving toward a much more limited use of congregate care. Current best-practice mandates that child welfare agencies develop and implement additional supports necessary to further reduce reliance on congregate care as a placement setting for children and youth.

However, the transition away from congregate care must be carefully crafted, funded and planned in order to avoid the troubling experiences of jurisdictions the last time the nation experienced a sharp turn in the way mental-health services were delivered.

Approximately a generation ago, the trend in this country was to shift those with high mental health needs from institutions and toward other, less restrictive forms of care. A lack of understanding about the impact of those decisions has had significant unintended consequences.

During that time of “deinstitutionalization”, the mental health field did not recognize the need to create robust community resources to service those high end mental health consumers. A prominent researcher, Charles Wilson of the Chadwick Center, stated, “So now we’ve turned the jails into the new psychiatric hospitals and [we see them] among the homeless.”<sup>10</sup>

Despite the well-intentioned goal of moving youth into family-like settings as much as possible, congregate care reforms without careful calibration will pose considerable challenges and could result in negative, unintended consequences.

Mr. Wilson stated that by “reducing the reliance of congregate care without having assets available in the community, we run the risk of moving kids into foster homes who are not able to care for them, therefore increasing the number of kids who are blowing out of foster homes, moving from home to home or ending up in the juvenile justice system.”<sup>11</sup>

The Board has determined that it is best-practice to establish an ultimate goal of total elimination of congregate care in non-exigent circumstances. However, drawing from the experiences of the past generation, the Board will employ the following strategies to ***SAFELY*** reduce congregate care placements and improve outcomes of young children include the following:

- Develop and implement a unified strategic plan
- Emphasize leadership and workforce development
- Focus resources on prevention and early intervention
- Strengthen community-based services and reduce barriers to access

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<sup>10</sup> *Research Centers Offer Congregate-Care Policy Recommendations for States*, by Jeremy Loudonback, The Chronical of Social Change, January 26, 2016

<sup>11</sup> *Id.*

- Enhance the Agency's treatment-focused foster care resources
- Implement a robust Kinship program and department

Therefore, as the Mahoning County Children Services Board begins to divert the above savings from congregate care to community-based services (including evidence-based interventions) designed to improve permanency and other long-term outcomes for children, reliance on its residential services department will steadily decrease to the point of obsolescence. Therefore, the work of the referenced positions will no longer exist.