



**The New York City Council,
Committee on General Welfare
Committee on Contracts
June 21, 2018**

“Oversight – Model Budget for Human Services Contractors”

**Testimony by
New York City Administration for Children's Services
David A. Hansell, Commissioner**

Good afternoon Chair Levin, Chair Brannan, and members of the Committees on General Welfare and Contracts. I am David Hansell, Commissioner of the New York City Administration for Children's Services. With me are Dr. Jacqueline Martin, Deputy Commissioner for the Division of Prevention Services (DPS), and Kailey Burger, Assistant Commissioner for Community Based Strategies. Thank you for the opportunity to speak with you about ACS's model budget process for our contracted prevention services providers. Generous investments in prevention services by the de Blasio Administration and by the City Council have allowed ACS to develop a quality model budget to ensure providers can implement the best possible service models to support families and that they are appropriately compensated for doing so, and I look forward to updating you on our collaborative process.

Before I discuss our model budget process, I would first like to address two matters that have been at the forefront of our thoughts recently, and of the utmost concern for ACS.

First: The tragic death of 5-month-old Raymond Porfil, Jr. in the Bronx earlier this month pains all of us greatly. Our responsibility at ACS is to do everything in our power to protect children—there is no mandate more important. While I am not able to discuss the specifics of this case, I can tell you that we are conducting an in-depth investigation, looking at all aspects of what happened. As part of our continuing reform effort, we look at all of our work critically in order to constantly strengthen both our protective and preventive work. I look forward to discussing with the Council soon any new initiatives that stem from our review of this case. My mandate as Commissioner is to ensure that we are continuing our aggressive reform efforts in order to protect children and support families in New York City, and I am grateful for the Council's partnership in that mission.

Second: Yesterday I accompanied Mayor de Blasio to a center in East Harlem that provides services to children who have been separated from their parents at the border and brought to New York. We met with the leadership and staff of the center, and we observed some of the children who were there. We've all been horrified by the Federal government's separation policy, and were stunned to learn yesterday how many of the children are here in NYC. These are federal programs that are not under ACS's jurisdiction, but we are concerned about the safety and wellbeing of all children in New York City. The staff at Cayuga described the depth of trauma, mental health, and other issues these children are experiencing. We committed to Cayuga staff that we will provide any support they need to ensure kids are getting what they need.

The impact of the Executive Order is still unclear and there is no definitive indication that these kids will be reunited with their parents, so our concern remains. We've requested access to the other two programs in NYC, and we are working closely with the Mayor's Office of Immigrant Affairs and coordinating with our sister agencies—Department of Health and Mental Hygiene, Department of Education, Health + Hospitals—to ensure that all of this City's resources are brought to bear for the children and families torn apart by this disastrous policy.

I'll now turn to discussing our prevention services work and the model budget we developed over the last year.

ACS Prevention Services

The goal of prevention services is to support NYC families in building skills to manage crises, maintain safety and stability within the home, and strengthen their ability to thrive within the community. A May 2017 assessment by Casey Family Programs, a

nationally recognized child welfare organization, found that New York City leads the nation in providing evidence-based and promising practice prevention programs to support families, and cites New York City as “a national leader in investing in the continuum of preventive services and supports.”

ACS has steadily increased the availability of prevention programs that are shown to reduce rates of maltreatment and improve overall child and family wellbeing. Over 20,000 families per year receive in-home support, parent coaching, trauma therapy, and other supportive services to help them cope with mental health, domestic violence, substance abuse issues, parenting challenges, and other stresses that can make parenting difficult. Our vision is for every NYC child to have the support of a strong family and a healthy community to help them succeed, and for our system of prevention programs to help provide those supports for families experiencing serious challenges.

ACS could not achieve any of this without the work of our 54 contracted non-profit provider partners— the people who do the work every day. The providers we work with are some of the best in the country, and they deliver high quality services directly to families every day. In creating a model budget, our goal was to engage in a truly collaborative and effective process to ensure our providers have the resources they need to deliver the quality services our NYC families and children deserve.

Historic Investments in Prevention Services

Most of ACS’s contracts with prevention agencies have been in place since 2009, with minimal budget increases. By early 2017, many providers were facing critical staff shortages because of inadequate salaries, which reduced capacity and contributed to a service backlog. When I became Commissioner in March of last year, I quickly realized

that while our preventive models and providers were outstanding, we needed to take action to shore up the infrastructure of our programs. Recognizing the fiscal challenges facing nonprofits delivering child welfare services, Mayor de Blasio and the Council allocated over \$50 million in the FY2017-18 City budget to enhance funding for prevention services contracts to ensure they align with the costs of delivering quality services. ACS acted immediately to provide this additional funding to our prevention agencies in two phases. First, we identified specific areas in which we believed that our preventive providers needed additional resources to meet core programmatic requirements. These included support for additional family conference facilitators, a key component of our model, and enhanced training opportunities, which enabled us to establish baseline training requirements for all of our preventive agency case-handling staff. We also added a Cost of Living Adjustment (COLA) wage increase for provider agency staff.

Secondly, in the City budget for FY 2017-18, ACS received \$26 million in increased funding to develop a quality model budget for prevention providers. In summer 2017 ACS began a model contract review process, in close collaboration with a steering committee comprising many of our prevention providers, to assess where additional resources were needed to support high-quality service delivery.

Model Budget Process

ACS worked with providers to identify needs that could be addressed within the constraints of our existing contracts and procurement rules, while pursuing better outcomes for children and families. We commenced this collaborative process with a three-month listening tour in which leadership in the Division of Prevention Services met with providers to learn about their ideas, challenges, and needs to help ensure that the process would result in meaningful solutions for our provider agencies. We then

partnered with the Council of Family and Child Caring Agencies (COFCCA), NYC Opportunity, and the NYC Office of Management and Budget, to convene a steering committee with representation from a cross-section of prevention services providers to collectively develop budget enhancements and a process that would meet the needs of our diverse network of providers, and which would also reflect and articulate ACS's own needs. DPS conducted six focus groups, consisting of more than 90 prevention staff of all levels across eight provider agencies, and completed extensive research and data analysis to help inform the resulting enhancements.

The work of the steering committee revealed the most prominent challenges with which our prevention providers were struggling, including staff turnover, high caseloads, service utilization, and a waitlist for service referrals. To target these challenges directly, ACS and the model budget steering committee developed a package of four focused budget enhancements:

1. Stronger Supervision: To provide better management and oversight for provider agency staff, the model budget includes funding to reduce the supervisor-to-case planner staff ratio to 1:4 across all prevention programs, with the goal of decreasing turnover of frontline staff and supervisors, and increasing service utilization over time.
2. Casework Support: The model budget now mandates providers to employ case aides or parent aides, and provides funding for this added position. Case aides and parent aides will provide workload relief by assisting case planners, which will in turn help to reduce staff turnover and increase service utilization.
3. Quality Improvement: We firmly believe that all families should have access to quality services, and we are committed to helping our providers improve and

maintain the high standard of services that have positioned New York City as a national model. To further this work, the model budget includes funding for each provider to hire a designated Quality Assurance (QA)/Quality Improvement (QI) staff person to manage the QA/QI work across the provider's prevention portfolio. This measure will help to improve case practice and supports collaborative quality improvement.

4. Recruitment and Retention: Lastly, the model budget includes funding for much needed salary increases for case planners and supervisors. A more competitive pay scale will help to recruit qualified staff and will encourage experienced staff to remain, thereby improving overall case practice quality. Providers are given three options for implementing the allocated funds: 1) increasing existing base salaries, 2) implementing incremental salary increases to help promote longevity, or 3) instituting wage differentials to help recruit staff with specialized skills or licensure.

ACS announced the model budget components in January of this year. Since then we have been working in close coordination with our providers to amend contracts and implement the enhancements, and we are currently in the final stages of contract amendments. Although it is still too early in the process to discuss outcomes, we are heartened by the positive feedback we have received from our providers so far and look forward to the results yet to come. I must give enormous acknowledgement to the two colleagues with me at the table today, who oversaw the process and established an extraordinary level of partnership with our providers, while simultaneously remaining relentless in keeping the process moving forward. I am also proud of the unprecedented levels of collaboration with providers, COFCCA, and across the divisions of ACS. I would

like to thank our non-profit and City agency partners for making this possible. This model budget process is proof that by working together and listening – we can achieve great results.

Closing

Thank you again for the opportunity to discuss ACS’s model budget process. We appreciate the Council’s advocacy on behalf of our prevention service provider community, and for the role the Council has played in making our model budget a reality. ACS endeavors to maintain our transparent relationship with the City Council and we will continue to seek your guidance and support as we move ahead with our implementation efforts. Thank you again for your time. We are happy to take any questions.