February 17, 2012

Testimony - Appropriations Committee

H.B. 5014 AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES AND REVENUES FOR THE FISCAL YEAR ENDING JUNE 30, 2013.

Re: DCF Budget – Cuts to Residential Services and Funding for a 1% Cost of Living Adjustment for Private Providers

Good evening Senator Harp, Representative Walker, and members of the Appropriations Committee. My name is Alice Forrester and I am Executive Director of Clifford Beers Clinic and a Member of the Connecticut Community Providers Association Board of Directors. I am here today on behalf of CCPA to discuss the Department of Children and Families' FY13 Midterm Budget Adjustments.

The Connecticut Community Providers Association (CCPA) represents organizations that provide services and supports for people with disabilities and significant challenges including children and adults with substance use disorders, mental illness, developmental, and physical disabilities. Community providers are the state's safety net, delivering quality health and human services to 500,000 of Connecticut's residents each year. We are the safety net.

Clifford Beers Clinic has been dedicated to strengthening children and families since 1913. The Clinic seeks to promote the emotional, psychological and physical well-being of children and families who are affected by the effects of sexual abuse, domestic violence, poverty and other significant life stressors. The Clinic believes that stronger children and families lead to healthier communities. Annually, the Clinic serves 1600 children, with an estimated 3600 total child and family members through a variety of services and supports focused on family strengthening. 95% of the families we serve live below the poverty level. The Clinic's services and supports include: early intervention and prevention programs, live triage and referral service, 24/7 emergency mobile psychiatric service, care coordination for the CT Systems of Care, advocacy for victims of crime, family support program for children affected by parental incarceration, intensive out-patient mental health programs for youth 0-26, and parents when needed, specialized services and supports for youth with problem sexual behavior, substance abuse and

risky behavior prevention, and community consultation. In addition, the Clinic is a nationally recognized child trauma agency and an affiliate member of the National Child Traumatic Stress Network offering trauma informed services and supports for children and their families through the provision of evidenced based practices.

I would like to first express sincere appreciation to Governor Malloy for his support of the safety net for human services in our state that supports and serves our most vulnerable citizens. The Governor's proposal to amend the FY13 budget to add a 1% cost of living adjustment for community providers is essential in preserving the safety net. However, I am here to discuss the impact of significant cuts to three Board and Care services accounts in the DCF budget.

Cuts to DCF Board and Care Accounts: residential, adoption, and foster care:

The proposed $23.8 M cut to residential services, which we have heard will include the closure of at least five (5) Safe Homes and two (2) Therapeutic Group Homes for children, does not provide DCF with the ability to "rightsize" Connecticut's congregate care system. A key premise of national rightsizing efforts (which were presented at recent DCF Continuum of Care Partnership meetings) is that the dollars saved by reductions to higher levels of care are *reinvested* into lower levels of care.

We fully support Commissioner Katz's belief that every child and adolescent deserves to live at home with a loving family. But in order to ensure that goal is realized, children must have access to services in and near their homes. The total proposed $30 M cut from the adoption, foster, and residential board and care accounts needs to be reinvested into new home and community-based services in order to meet the increased demand that those congregate care reductions will inevitably bring.

And community providers need support and assistance through DCF's transition process so that they can continue to serve vulnerable children and their families.

1% COLA:

As you consider other changes to the FY13 budget, we also encourage you to extend the FY13 COLA adjustment to begin July 1, 2012, rather than deferring this essential increase to a time almost a year away. Our organizations are financially fragile after 20 years of less than 1% increases in revenue for existing state contracts and 4 years with no increases at all. Please know that this is simply not sustainable.

Thank you for this opportunity to be heard. I am happy to answer any questions you might have.

Alice M. Forrester, Executive Director, Clifford Beers Clinic
203-772-1270 x214 / aforrester@cliffordbeers.org