
THIRD READING

Bill No: SB 1090
Author: Hurtado (D), et al.
Amended: 3/14/22
Vote: 21

SENATE HUMAN SERVICES COMMITTEE: 4-0, 3/29/22
AYES: Pan, Jones, Cortese, Kamlager
NO VOTE RECORDED: Hurtado

SENATE JUDICIARY COMMITTEE: 10-0, 4/5/22
AYES: Umberg, Borgeas, Caballero, Durazo, Hertzberg, Jones, Laird, Stern,
Wieckowski, Wiener
NO VOTE RECORDED: Gonzalez

SENATE APPROPRIATIONS COMMITTEE: 7-0, 5/19/22
AYES: Portantino, Bates, Bradford, Jones, Kamlager, Laird, Wieckowski

SUBJECT: Family Urgent Response System

SOURCE: Children Now
County Welfare Directors Association of California

DIGEST: This bill expands the term “current or former foster child or youth” as it relates to use of the Family Urgent Response System (FURS), including children or youth who are subject to a petition declaring them a dependent child of the juvenile court, under a voluntary program of supervision or voluntary placement agreement, and who have exited foster care for any reason.

ANALYSIS:

Existing law:

- 1) Establishes a state and local system of child welfare services, including foster care, for children who have been adjudged by the court to be at risk of abuse and neglect or to have been abused or neglected, as specified. (*WIC 202*)

- 2) Provides that a child who has suffered, or is at substantial risk of suffering, abuse or neglect, as provided, by the child's parent or guardian is within the jurisdiction of the juvenile court, which may adjudge the child a dependent child. (*WIC 300*)
- 3) States that the purpose of foster care law is to provide maximum safety and protection for children who are currently being physically, sexually, emotionally abused, neglected, or exploited, and to ensure the safety, protection, and physical and emotional well-being of children who are at risk of harm. (*WIC 300.2*)
- 4) Defines "FURS" as meaning a coordinated statewide, regional, and county-level system designed to provide collaborative and timely state-level phone based response and county-level in-home, in-person mobile response during situations of instability, for purposes of preserving the relationship of the caregiver and the child or youth, as provided. (*WIC 16526(d)*)
- 5) Defines "caregiver," for the purposes of FURS, as meaning a person responsible for meeting the daily care needs of a current or former foster child or youth, and who is entrusted to provide a loving and supportive environment for the child or youth to promote their healing from trauma. (*WIC 16526(a)*)
- 6) Defines "current or former foster child or youth," for the purposes of FURS, as including a child or youth adjudicated a dependent or ward of the juvenile court and who is served by a county child welfare agency or probation department, and a child or youth who has exited foster care to reunification, guardianship, or adoption, until they attain 21 years of age. (*WIC 16526(b)*)
- 7) Defines "mobile response," for the purpose of FURS, as meaning the provision of in-person, flexible, responsive, and supportive services where the caregiver and child or youth are located to provide them with support and prevent the need for a 911 call or law enforcement contact. (*WIC 16526(g)*)
- 8) Creates a 24-hour, seven days a week, statewide hotline, established by California Department of Social Services (CDSS), as the entry point for FURS to respond to calls from both caregivers and current or former foster children during moments of instability. (*WIC 16527(a)*)
- 9) Provides, through the statewide hotline, both hotline workers who are trained in techniques for de-escalation and a conflict resolution telephone response specifically for children and referrals to a county-based mobile response system, for further support and in-person response. (*WIC 16527(a)(1)-(2)*)

- 10) Requires FURS referrals to provide a warm handoff whereby a hotline worker establishes direct and live connection through a three-way call that includes the caregiver, child or youth, and county contact, while allowing the caregiver or child or youth to decline the three-way contact if they feel their situation has been resolved at the time of the call. If direct communication cannot be established, a referral directly to the community or county based services and a follow up call to ensure that a connection occurs, is required. (WIC 16527(a)(2))
- 11) Requires the statewide hotline to maintain contact information for all county-based mobile response systems, based on information provided by counties, for referrals to local services, as provided. (WIC 16527(b))
- 12) Requires CDSS to collect de-identified, aggregated data regarding individuals served through the hotline and county-based mobile response systems. Further requires CDSS to publish annually on their internet website, beginning January 1, 2022, FURS data, including the number of children or youth and caregivers served, among other things, as provided. (WIC 16527(c))
- 13) Requires CDSS, in consultation with stakeholders, to: develop methods and materials for informing all caregivers and current or former foster children or youth about the hotline; establish protocols for triage and response; establish minimum education and training requirements for hotline workers; and, consider expanding the hotline to include communication through electronic means. (WIC 16527(e))
- 14) Requires the statewide hotline to be operational no sooner than January 1, 2021, and on the same date as the county mobile response system, as provided. (WIC 16527(f))
- 15) Requires county child welfare, probation, and behavior health agencies, in each county or region of counties, to establish a joint county-based mobile response system that includes a mobile response and stabilization team for the purpose of providing supportive services, as provided. (WIC 16529)

This bill adds the following populations to the definition of “current or former foster child or youth” for the purposes of FURS:

- 1) A child or youth for whom the child welfare agency undertakes a voluntary program of supervision, as provided;
- 2) A child or youth who is the subject of a voluntary placement agreement, as provided;

- 3) A child or youth who is the subject of a filed dependency petition; and/or
- 4) A child or youth who has exited foster care for any reason, including but not limited to reunification, guardianship, adoption, or emancipation.

Background

Child Welfare Services (CWS). The CWS system is an essential component of the state's safety net. Social workers in each county who receive reports of abuse or neglect, investigate and resolve those reports. When a case is substantiated, a family is either provided with services to ensure a child's well-being and avoid court involvement, or a child is removed from the family and placed into foster care. In 2021, the state's child welfare agencies received 400,313 reports of abuse or neglect. Of these, 61,438 reports contained allegations that were substantiated and 22,004 children were removed from their homes and placed into foster care via the CWS system. As of October 1, 2021, there were 58,072 children in California's CWS system.

Foster Care and Youth's Mental Health. Foster care can be uniquely traumatic for a child, over and above the trauma of losing one's parent(s). Most children in care for two years or more experience multiple placements, more than half of children in foster care experience caregiver violence or caregiver incarceration, and almost two-thirds have lived with someone with an alcohol or drug problem. Additionally, the use of long-term congregate group care for foster care has also been found to be inherently detrimental to the healthy development of children, and may cause additional psychological harm to already-traumatized children.¹

Despite these, and other, common sources of trauma for foster children, California has not consistently provided adequate mental health care for foster children. In 2002, current foster children and children at risk of being put into foster care in California filed a class action suit against CDSS and the California Department of Health Care Services (DHCS) for failing to provide medically necessary mental health care in adequate settings (the *Katie A.* suit).² CDSS and DHCS settled the suit, and the settlement included CDSS and DHCS agreeing to significantly overhaul access to mental health care services for children in foster care or at risk of being placed in foster care.³ The *Katie A.* settlement included, among other

¹ E.g., Dozier, et al., *Consensus Statement on Group Care for Children and Adolescents: A Statement of Policy of the American Orthopsychiatric Association*, *American Journal of Orthopsychiatry*, 2014, Vol. 84, No. 3, pp. 219-225.

² See *Katie A.*, ex rel. Ludin v. Los Angeles County (9th Cir. 2007) 481 F.3d 1150, 1152.

³ See DHCS Court Documentation, *Katie A. Settlement Agreement Implementation*, https://www.dhcs.ca.gov/services/MH/Pages/Court_Documentation.aspx (last visited Mar. 17, 2022).

things, the use of Child and Family Teams that would provide individualized care coordination and access to specific mental health services to foster children and youth.⁴

Around this same time, the Legislature enacted SB 1013 (Committee on Budget and Fiscal Review, Chapter 35, Statutes of 2012), which called for CDSS to establish a working group to develop recommended revisions to the current rate system, services, and programs serving children and families in the continuum of foster care settings. CDSS's resulting report, "California's Child Welfare Continuum of Care Reform," published in 2015, outlined a comprehensive approach to improving California's child welfare system by reforming the system of placements and services directed at youth in foster care.⁵ Many of the recommended reforms, referred to as CCR, were then implemented in legislation, including eliminating the group home licensure category and replacing them with new Short Term Residential Therapeutic Programs.⁶ In 2018, the Legislature enacted AB 2083 (Cooley, Chapter 815, Statutes of 2018), which required each county to develop and implement a trauma-informed "system of care" memorandum of understanding that would set forth the roles and responsibilities of agencies and other entities that serve children and youth in foster care who have experienced severe trauma, including, at a minimum, the establishment and operation of an interagency leadership team and an interagency placement committee to help facilitate placements and appropriate services for foster youth and children.

The Family Urgent Response System. In 2019, the Legislature enacted FURS through SB 80 (Committee on Budget and Fiscal Review, Chapter 27, Statutes of 2019). Initially, this concept was introduced through AB 2043 (Arambula, 2018), which was vetoed by the Governor for presenting significant, ongoing general fund commitments. The passage of FURS required CDSS and the counties to establish a coordinated statewide, regional, and county-level response system for current and former foster children, youth, and non-minor dependents (NMDs) and their caregivers. The response system was designed to provide collaborative and timely state-level, 24/7 hotline-based response and county-level in-home, in-person mobile response during situations of crisis or instability for foster youth and their caregivers, with the ultimate goal of preserving the relationship between the caregiver and the child or youth.

⁴ *Ibid.*

⁵ California Health and Human Services Agency & CDSS, *California's Child Welfare Continuum of Care Reform* (Jan. 2015).

⁶ See AB 1997 (Stone, Ch. 612, Stats. 2016); AB 403 (Stone, Ch. 773, Stats. 2015).

FURS was designed to provide children or youth currently or formerly in foster care and their caregivers with immediate trauma informed support when issues, big and small, arise through the 24/7 statewide hotline. By calling into the hotline, youth or their caregivers are provided with immediate access to caring counselors trained in conflict resolution and de-escalation techniques. These counselors can help youth or their caregivers process the conflict in real time, often resolving the issue without need for further intervention. This provides caregivers and youth with a trauma-informed alternative to calling 911 or law enforcement, which was often previously their only option. If further intervention is needed, the hotline can connect the youth or caregiver to the County Mobile Response and Stabilization Teams. These teams are intended to provide in-home de-escalation, stabilization, conflict resolution and support services from a trauma informed lens. Both the hotline and the mobile response teams also provide the opportunity for youth and caregivers to be further connected with and referred to the existing array of local services for the provision of ongoing supports, if needed.

Ideally, these interventions prevent the need for placement changes or more restrictive interventions, such as the involvement of law enforcement, hospitalizations, or congregate care placement referrals. This provides the opportunity for youth to heal from trauma and maintain supportive, consistent, and loving relationships rather than face additional placement disruptions and potential for further traumatization. The statewide hotline has been available for youth and caregivers since March 1, 2021. As of July 1, 2021, mobile response teams were fully implemented across all counties.

As FURS has been implemented, eligibility questions have arisen. Stakeholders have shared that youth being denied usage of FURS due to questions over whether they qualify as a current or former foster youth. This bill seeks to correct this by further clarifying that youth under a voluntary program of supervision or voluntary placements agreements, youth who are subject to a filed dependency petition but not yet adjudicated dependents, and youth who have exited care for any reason are all eligible, along with their caregivers, to utilize FURS to help them resolve any conflict they might be facing.

Comments

According to the author, “California’s foster children and youth are oftentimes the most vulnerable individuals in our communities. The Family Urgent Response System (FURS) provides current and former foster children and youth and their caregivers with the immediate trauma-informed support they need during times of instability through its 24/7 statewide hotline and county mobile response systems.

Children and youth need to be supported during all moments of instability to reduce negative behavioral modifications and help them adjust to their situations.”

The author goes on to state, “SB 1090 updates and expands the definition of foster youth to include a child or youth in the early or later stages of the system who are left out of the current definition. This is a clean-up bill that will strengthen current law and its goal.”

Related/Prior Legislation

AB 1005 (Arambula, 2019) would have established a FURS hotline and county-based response system. AB 2043 died in the Assembly Human Services Committee.

AB 2043 (Arambula, 2018) would have established a FURS hotline and county-based response system. The bill was vetoed, as it was considered as part of the budget process.

FISCAL EFFECT: Appropriation: No Fiscal Com.: Yes Local: Yes

According to the Senate Appropriations Committee, staff notes indeterminate, ongoing costs (hundreds of thousands, General Fund) for the CDSS to receive additional calls to the hotline. This estimate is based on an assumption of an expanded population eligible to be served through the FURS program. This bill increases the tasks and administrative time required for a presumed increase in volume of mobile responses provided for a county FURS Mobile Response Team. Many counties do operate their local FURS mobile response teams through utilizing staff from existing child welfare, behavioral health, and probation departments. To the extent there is an increase in caseload of eligible individuals who call into the hotline absent an increase in appropriation, those counties could see a greater impact, compared to counties who have contracted their FURS Mobile Response to a community-based program.

SUPPORT: (Verified 5/19/22)

Children Now (co-source)

County Welfare Directors Association of California (co-source)

Alliance for Children’s Rights

Aspiranet

California Alliance of Caregivers

California State Association of Counties

Children’s Law Center of California

County Behavioral Health Directors Association

John Burton Advocates for Youth
Mariposa County Health and Human Services Agency
North Los Angeles County Regional Center
Public Counsel
Sacramento County Board of Supervisors

OPPOSITION: (Verified 5/19/22)

None received

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