SENATE JUDICIARY COMMITTEE Senator Thomas Umberg, Chair 2021-2022 Regular Session

SB 1090 (Hurtado)

Version: March 14, 2022 Hearing Date: April 5, 2022

Fiscal: Yes Urgency: No

AWM

SUBJECT

Family Urgent Response System

DIGEST

This bill expands the definition of "current or former foster child or youth" who are entitled to use the Family Urgent Response System (FURS) to include children or youth who are subject to a petition declaring them a dependent child of the juvenile court, who are under a voluntary program of supervision or voluntary placement agreement, and who have exited foster care for any reason.

EXECUTIVE SUMMARY

Current law establishes the FURS program, a combined state and local effort to provide current and former foster children, foster youth, and caregivers with immediate assistance in moments of crisis with the goal of avoiding the involvement of law enforcement and getting foster children and youth the trauma-related care they need. At the state level, the California Department of Social Services (CDSS) operates the FURS statewide hotline, which is available 24 hours a day, seven days a week. The state hotline workers will assess the situation and connect the caller — a current or former foster child or youth, or a caregiver — with the appropriate county-level mobile response system. At the county level, counties maintain these mobile response systems, which must be ready to respond within one to three hours for urgent situations and 24 hours in non-urgent situations. Once a mobile response system receives a referral from the statewide hotline, the mobile response system, within the appropriate time frame, provides in-person conflict resolution, de-escalation techniques, and/or referrals of services as needed to assist the foster child, foster youth, and/or caregiver.

The FURS hotline was authorized to operate in 2020. Since then, stakeholders have realized that the current statutory definition of "current or former foster child or youth" is insufficiently broad to encompass the intended population of children and youths

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who were intended to be served by the FURS program. This bill expands the definition to include the missing categories of current and former foster children and youth.

This bill is sponsored by Children Now and the County Welfare Directors Association of California, and supported by the Alliance for Children's Rights, Aspiranet, the California Alliance of Caregivers, the California Alliance of Child and Family Services, the California State Association of Counties, the Children's Law Center of California, the County Behavioral Health Directors Association, the County Welfare Directors Association of California, John Burton Advocates for Youth, and Public Counsel. There is no known opposition. This bill passed out of the Senate Human Services Committee with a 4-0 vote.

PROPOSED CHANGES TO THE LAW

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. (Welf. & Inst. Code, § 202.)
- 2) Establishes a system of juvenile dependency for children who are, or are at risk of, being physically, sexually, or emotionally abused, being neglected or being exploited, to ensure their safety, protection, and physical and emotional well-being, as specified. (Welf. & Inst. Code, §§ 300 et seq.)
- 3) States that the purpose of foster care law is to provide maximum safety and protection for children who are currently being physically, sexually, or 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. (Welf. & Inst. Code, § 300.2.)
- 4) Provides for voluntary supervision of a child, if a social worker has investigated and determined that a child is within the jurisdiction of the juvenile court or will probably soon be within the jurisdiction, in which the parent or guardian consents to undertaking a program of supervision of the child, in lieu of filing a petition or subsequent to dismissal of a petition already filed. These programs of supervision may include a voluntary family reunification program or a voluntary family maintenance program, as provided. (Welf. & Inst. Code, § 301.)
- 5) Provides for a voluntary placement agreement, in which a written agreement between either the county welfare department, probation department, Indian tribe, licensed public or private adoption agency, or CDSS acting as an adoption agency, and the parents or guardians of a children that specifies, at least the following: the

legal status of the child; and, the rights and obligations of the child and the agency in which the child is placed. (Welf. & Inst. Code, § 11400(p).)

- 6) Establishes, within the Health and Welfare Agency, the CDSS, and designates CDSS as the single state agency with the full power to supervise every phase of the administration of public social services, except health care services and medical assistance, for which grants-in-kind are received from the United States government or made by the state in order to secure full compliance with the applicable provisions of state and federal laws. (Welf. & Inst. Code, §§ 10550, 10600.)
- 7) Establishes the FURS program for foster children, foster youth, and caregivers, as a coordinated statewide, regional, and county-level system designed to provide collaborative and timely state-level phone-based response system and county-level system designed to provide state-level phone-based response and county-level inhome, in-person mobile response to foster children, foster youth, and caregivers, for purposes of providing services and conflict-management skills to help foster children, youth, and families work through issues without involving law enforcement. (Welf. & Inst. Code, div. 9, pt. 4, ch. 5.4, §§ 16526 et seq.)
- 8) Provides the following relevant definitions for the FURS program:
 - a) "Caregiver" is 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. (Welf. & Inst. Code, § 16526(a).)
 - b) "Current or former foster child or youth" includes a child or youth adjudicated under 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. A current or former foster child or youth is eligible for services through FURS until they attain 21 years of age. (Welf. & Inst. Code, § 16526(b).)
 - c) "Mobile response" means 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. (Welf. & Inst. Code, § 16526(g).)
- 9) Requires CDSS to establish a statewide 24-hour hotline as an entry point for the FURS system, with hotline workers trained in de-escalation and conflict resolution responses specifically for children or youth impacted by trauma. The hotline workers should provide:
 - a) A direct and live connection to a county-based contact to resolve a conflict between the caregiver and child or youth.
 - b) If a direct connection cannot be established, a referral directly to the appropriate community-or county based service, and a follow-up call to ensure that the connection is made.

- c) A follow-up call 24 hours after the initial call to offer additional support, if needed. (Welf. & Inst. Code, § 16527.)
- 10) Requires CDSS, in collaboration with the State Department of Health Care Services and in consultation with the County Behavioral Health Directors Association of California, the County Welfare Directors Association of California, and other stakeholders, to issue necessary guidance for the establishment of FURS county-based mobile response systems. (Welf. & Inst. Code, § 16528.)
- 11) Requires each county to establish a mobile response system for the FURS program, either on a per-county or by collaborating with other counties on a regional basis. The county-based mobile response system must include:
 - a) Phone response at a county level that facilitates entry of the caregiver and current or former foster children or youth into mobile response services.
 - b) A process for determining when a mobile response and stabilization team will be sent or when other services will be used, based on the critical needs of the caregiver, child, or youth.
 - c) A mobile response and stabilization team available 24 hours a day, seven days a week.
 - d) The ability to provide immediate, in-person, face-to-face response, preferably within one hour but not to exceed three hours, in extenuating circumstances for urgent needs, or same-day response within 24 hours for nonurgent situations.
 - e) Utilization of individuals with specialized training in trauma of children or youth and the foster care system on the mobile response and stabilization; wherever possible, peer partners and those with lived experience should be included in the team.
 - f) Provision of in-home de-escalation, stabilization, and support services and supports, including identifying the causes of the instability, diffusing the immediate situation, and coaching and working with the caregiver and the child or youth to preserve the family unit and maintain the current living situation or create a healthy transition plan, if necessary.
 - g) A process for communicating with the county of jurisdiction and the county behavioral health agency regarding the service needs of the child or youth and caregiver, provided that the child or youth is currently under the jurisdiction of either the county child welfare or probation system. (Welf. & Inst. Code, § 16529.)

This bill:

- 1) Expands the definition of "current or former foster child or youth" eligible for the FURS program to include:
 - a) A child or youth for whom the child welfare agency undertakes a voluntary program of supervision in lieu of juvenile court jurisdiction;

- b) A child or youth who is the subject of a voluntary placement agreement;
- c) A child or youth who is the subject of a dependency petition filed with the court; and
- d) A child or youth who has exited foster care for any reason, including, but not limited to, reunification, guardianship, adoption, or emancipation.

COMMENTS

1. Author's comment

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 definition under existing law does not fully encompass the entire population FURS intends to serve, and it needs to be updated to reflect the foster children or youth at the different stages of the system who still need access to FURS services. Leaving them without access to FURS could negatively impact their living situation and create further problems.

SB 1090 updates and expands the definition of foster youth to include a child or youth in the early or later stages who are left out of the current definition. This is a clean-up bill that strengthens current law and its intent.

2. This bill expands the definition of "current or former foster child or youth" who may utilize the FURS program

Around 58,000 children are in foster care in California. 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 are more experience multiple placements; more than half of children in foster care experience caregiver violence or caregiver incarceration, and

¹ California Child Welfare Indicators Project, University of California at Berkeley, Report: Children in Foster Care, CWS/CMS 2021 Quarter 3 Extract (Mar. 15, 2022), available at

https://ccwip.berkeley.edu/childwelfare/reports/PIT/MTSG/r/ab636/s (last visited Mar. 15, 2022). ² *Id.*, Placement moves per 1,000 days, *available at*

 $[\]underline{https://ccwip.berkeley.edu/childwelfare/reports/P5/MTSG/r/Fed/s} \ (last\ visited\ Mar.\ 17,2022).$

almost two-third had lived with someone with an alcohol or drug problem;³ and foster children are more likely to have frequent school changes and miss more days of school than non-foster children.⁴ 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.⁵

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 Services (DHS) for failing to provide medically necessary mental health care in adequate settings (the *Katie A.* suit).⁶ CDSS and DHS settled the suit, and the settlement included DCSS and DHS agreeing to significantly overhaul access to mental health care services for children in foster care or at risk of being placed in foster care.⁷ The *Katie A.* settlement included, among other 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.⁸

Around the 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-setting 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. Many of the recommended reforms, referred to as CCR, were implemented in legislation in the following years, including eliminating the group home licensure category and replacing them with new Short Term Residential Therapeutic Programs. In 2018, the legislature enacted AB 2083 (Cooley, Ch. 815, Stats. 2018), which required each county to develop and implement a trauma-informed

³ Bramlett & Radel, *Adverse family experiences among children in nonparental care*, 2011-2012, Nat'l Health Stat. Report, 2014 May 7;(74) 1-8, *available at* https://pubmed.ncbi.nlm.nih.gov/24806543/ (last visited Mar. 17, 2022).

⁴ National Working Group on Foster Care and Education, Fostering Success in Education: National Factsheet on the Educational Outcomes of Children in Foster Care (Apr. 2018), at p. 2.

⁵ 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.

⁶ See Katie A., ex rel. Ludin v. Los Angeles County (9th Cir. 2007) 481 F.3d 1150, 1152.

⁷ See DHS Court Documentation, Katie A. Settlement Agreement Implementation, https://www.dhcs.ca.gov/services/MH/Pages/Court_Documentation.aspx (last visited Mar. 17, 2022). ⁸ Ibid.

⁹ California Health and Human Services Agency & CDSS, *California's Child Welfare Continuum of Care Reform* (Jan. 2015).

¹⁰ See AB 1997 (Stone, Ch. 612, Stats. 2016); AB 403 (Stone, Ch. 773, Stats. 2015).

"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 Legislature also enacted legislation to establish the FURS program in 2018,¹¹ but Governor Brown vetoed the bill out of concern for the substantial financial cost of the program, stating it would be better implemented through the budget process. The FURS program was thus adopted in 2019.¹² The program is designed to build on the CCR and system of care developments in the foster care system to increase foster children, foster youth, and caregiver access to mental health services and provide counseling and conflict resolution in moments of crisis.

FURS is a combined statewide and county-based program. The state is tasked with providing a statewide hotline, available 24 hours a day, seven days a week, that is staffed with individuals trained in de-escalation and conflict resolution techniques. ¹³ Each county is responsible for establishing a mobile response system, which must be able to provide urgent response and stabilization services 24 hours a day, seven days a week, as well as non-urgent services and follow-up services. ¹⁴ When a current or former foster child or youth, or a caregiver, calls the state hotline, the hotline worker responds by providing immediate assistance and by connecting the caller to the appropriate county mobile response system. ¹⁵ If the need is urgent, the mobile response team must provide in-person services ideally within an hour of, but no more than three hours after, the call; if the need is non-urgent, the mobile response team must respond within 24 hours. ¹⁶ The mobile response team is also charged with providing any assistance with obtaining mental health and related services that appear necessary in light of their interaction with the caller. ¹⁷ The state hotline workers are tasked with following up after a hotline call to ensure that the caller received the appropriate responsive care. ¹⁸

While FURS was originally slated to go public in 2021, the Legislature in 2020 passed budget language allowing it to begin earlier, in recognition of the added stressors of the COVID-19 pandemic and the related school closures and lockdowns and the urgent need for more mental health services for foster children, foster youth, and caregivers.¹⁹

¹¹ See SB 2043 (Arambula, 2018).

¹² See SB 80 (Senate Committee on Budget and Fiscal Review, Ch. 27, Stats. 2019).

¹³ Welf. & Inst. Code, § 16527.

¹⁴ *Id.*, § 16528.

¹⁵ *Id.*, § 16527.

¹⁶ *Id.*, § 16528.

¹⁷ *Ibid*.

¹⁸ *Id.*, § 16527.

¹⁹ SB 80 (Senate Committee on Budget and Fiscal Review, Ch. 27, Stats. 2019).

3. This bill expands the definition of "current or former foster child or youth" who may utilize the FURS program

The current definition of "current or former foster youth" eligible for the FURS program includes a child or youth, until they attain 21 years of age, who:

- Is the subject of a petition to place them under the jurisdiction of the juvenile court;
- Adjudicated to be under the jurisdiction of the juvenile court as a dependent child of the court or as a ward of the court and is served by a county child welfare agency or probation department;
- Has exited foster care, including due to reunification, guardianship, or adoption;
- As a youth, exited foster care but remains within the general jurisdiction of the juvenile court under provisions extending jurisdiction until age 21.²⁰

This bill builds on the existing definition to add to the categories of children or youths who are eligible to use the FIRS program, adding a child or youth:

- For whom the child welfare agency undertakes a voluntary program of supervision in lieu of a petition to the juvenile court to take jurisdiction over the child or youth;
- Who is the subject of a voluntary placement agreement between a county welfare department, probation department, Indian tribe, licensed public or private adoption agency, and the parents or guardians of the child, that sets forth the legal status of the child and the rights and obligations of the parents or guardians, the child, and the agency in which the child is placed.
- Who is the subject of a dependency petition that has been filed but yet adjudicated.
- Who has exited the foster care system for any reason.

This language is intended to allow all of California's current and former foster youth, until age 21, to use the FURS program.

4. Arguments in support

According to bill sponsor Children Now:

FURS is 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, to preserve the relationship of the caregiver and the child or youth, promote healing and stability, and to prevent calls to law enforcement and criminalization of youth who have experienced trauma. FURS launched in 2021 and has since

²⁰ Welf. & Inst. Code, § 16526.

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been a critical tool to support youth, caregivers, and families, and stabilize living situations...

The original [FURS] legislation established that services provided were intended for a child or youth who is served by a county child welfare agency or probation department and a child or youth who has exited foster care. It further specified that the youth is eligible for FURS until they attain 21 years of age. However, a lack of clarity in the law has resulted in some confusion regarding who FURS can serve, and SB 1090 is needed to ensure children and youth can receive support from FURS throughout their trajectory in the child welfare system.

SUPPORT

Children Now (sponsor)
Alliance for Children's Rights
Aspiranet
California Alliance of Caregivers
California Alliance of Child and Family Services
California State Association of Counties
Children's Law Center of California
County Behavioral Health Directors Association
County Welfare Directors Association of California
John Burton Advocates for Youth
Public Counsel

OPPOSITION

None known

RELATED LEGISLATION

Pending Legislation: None known.

Prior Legislation:

AB 79 (Assembly Committee on Budget, Ch. 11, Stats. 2020) among other things, authorized the statewide FURS hotline to operate sooner than January 1, 2021, or prior to the date that each county notified DCSS that it established the required county mobile response system; and authorized the county mobile response systems to adapt as needed to the COVID-19 pandemic.

SB 80 (Senate Committee on Budget and Fiscal Review, Ch. 27, Stats. 2019) among other things, established the FURS hotline and county-based mobile data response and

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stabilization teams, providing that the statewide hotline could operate no sooner than January 1, 2021.

AB 1005 (Arambula, 2019) would have established a FURS hotline and county-based response system similar to the one enacted in SB 80 (Senate Committee on Budget and Fiscal Review, Ch. 27, Stats. 2019). AB 2043 died in the Assembly Human Services Committee.

AB 2083 (Cooley, Ch. 815, Stats. 2018) stated the legislative intent to build on existing CCR measures by, among other things, developing a coordinated, timely, and trauma-informed system-of-care approach for children and youth in foster care who have experienced severe trauma, and required each county to develop and implement a memorandum of understanding setting forth the roles of agencies and other entities serving foster children and youth who have experienced severe trauma.

AB 2043 (Arambula, 2018) would have established a FURS hotline and county-based response system similar to the one enacted in SB 80 (Senate Committee on Budget and Fiscal Review, Ch. 27, Stats. 2019). AB 2043 was vetoed by Governor Jerry Brown, who stated in his veto message that, because the bill's program required significant, ongoing fund commitments, he believed it should be considered as part of the budget process.

AB 1997 (Stone, Ch. 612, Stats. 2016) implemented additional CCR recommendations from CDSS relating to the licensure of foster homes and residential treatment centers for children.

AB 403 (Stone, Ch. 773, Stats. 2015) implemented a number of CCR recommendations from CDSS relating to mental health care in the foster care system.

PRIOR VOTES:

Senate Committee on Human Services (Ayes 4, Noes 0)
