

DIVISION III WRITTEN QUESTIONS

3/5/2021 Representative Wallner DHHS Division of Children, Youth, and Families
Provide information on the change in child protective services referrals since the start of the Covid-19 pandemic, particularly those related to or resulting from the increased prevalence of remote education.

Please see attached slide deck on the topic of educational neglect and truancy. Please also see the data reports published online at: <https://www.dhhs.nh.gov/dcyf/documents/dcyf-data-book-2020.pdf> and <https://www.dhhs.nh.gov/dcyf/covid19-data.htm> which include data on shifts in child abuse neglect reporting, open cases, and removals.

LBA Note: See "Division of Children, Youth, and Families and Department of Education Presentation - Educational Neglect & Truancy through the Pandemic, February 2021" document.

3/5/2021 Representative Wallner DHHS Division of Children, Youth, and Families
Provide information on whether children have been subject to child protection services cases and later subject to juvenile justice services cases and vice versa.

Because the 2020 data was significantly impacted by the COVID-19 pandemic, specifically resulting reduced child protection assessments and reduced juvenile justice delinquency cases, data from 2019 to

LBA Note: See "Sununu Youth Services Center Cost Estimates" document. and youth

with any DCYF child protection or juvenile justice involvement was 7,156. Of those, 1,413, roughly 20%, had both a child protection and juvenile justice case, either concurrently or subsequently.

3/5/2021 Representative Nordgren DHHS Division of Children, Youth, and Families
Provide information on New Hampshire resident juvenile offenders housed out of state.

As of data extracted on March 1, there are a total of 74 DCYF involved youth, for child protection or juvenile justice, placed out of state. Of those youth, 67 are at programs in neighboring states. The remaining 7 youth are in programs in Oklahoma, Florida, Missouri, Arkansas, Pennsylvania, and Mississippi.

It is anticipated that the completion of the residential service procurement/redesign articulated in the following Requests for Proposal by the Division of Behavioral Health Services will alleviate the need to place children in distant states: <https://www.dhhs.nh.gov/business/rfp/rfp-2021-dbh-11-psych.htm>; <https://www.dhhs.nh.gov/business/rfp/rfp-2021-dbh-12-resid.htm>; and <https://www.dhhs.nh.gov/business/rfp/rfp-2021-dbh-03-compr.htm>.

3/5/2021 Representative Erf DHHS Division of Children, Youth, and Families Provide
a copy of the children's behavioral healthcare request for proposal.

<https://www.dhhs.nh.gov/business/rfp/rfp-2021-dbh-11-psych.htm>;
<https://www.dhhs.nh.gov/business/rfp/rfp-2021-dbh-12-resid.htm>; and
<https://www.dhhs.nh.gov/business/rfp/rfp-2021-dbh-03-compr.htm>.

3/5/2021 Representative Erf DHHS Division of Children, Youth, and Families Provide a definition of "system of care."

In general the term "system of care" is understood to mean the following:

"A spectrum of effective, community-based supports, that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs, in order to help them to succeed at home, in school, in the community, and throughout life" (<http://www.socflorida.com/documents/professionals/06-17 Updating SOC Concept&Philosophy.pdf>)

The definition and related explanatory language as it relates the system of care for children's behavioral health in New Hampshire exists in current statute:

" 135-F:3 Definition; System of Care. –

I. In this chapter, "system of care" means an integrated and comprehensive delivery structure for the provision of publicly funded behavioral health services to New Hampshire children and youth."

In 2016, the General Court declared that: "It is the policy of New Hampshire to implement a system of care model for providing behavioral health services to children in all of the publicly-funded service systems in the state." RSA 135-F:2.

The statutorily established purposes of the system of care, as stated in RSA 135-F:1, include:

- I. Increase service effectiveness and improve outcomes for children with behavioral health challenges and their caretakers.
- II. Reduce the cost of providing services by leveraging funding sources other than general funds, reducing the need for costly out-of-home placements, and reducing duplication across agencies.
- III. Coordinate care for children involved in multiple systems and children at risk of court involvement and out-of-home placement.

In addition, the System of Care must adhere to the following key characteristics, also established in statute, the rest of which can be found at RSA 135-F:3

- III. The system of care shall have the following characteristics:
 - (a) A comprehensive behavioral health program with a flexible benefit package that includes clinically necessary and appropriate home and community-based treatment services and comprehensive support services in the least restrictive setting.
 - (b) An absence of significant gaps in services and barriers to access services.
 - (c) Community-based care planning and service delivery, including services and supports for children from birth through early childhood.
 - (d) Service planning and implementation based on the needs and preferences of the child or youth and his or her family which places an emphasis on early identification, prevention, and treatment and uses an individualized wraparound approach for children with complex needs.
 - (e) Services that are family-driven, youth-guided, community-based, trauma-informed, and

culturally and linguistically competent.

It is important to recognize that while this system of care for children’s behavioral health is to be administered by the Division of Behavioral Health Services, its development and success are integral to and inseparable from the ongoing transformative work happening within DCYF’s child protection and juvenile justice services.

3/5/2021 Representative Edwards DHHS Division of Children, Youth, and Families
Provide information regarding potential proposals for dealing with budgetary implications of Sununu Youth Services Center funding and services, particularly for SFY 2023.

DHHS agrees that the need for juvenile detention and commitment is not and will not be at a scale to justify the continued reliance use of the Sununu Youth Services Center for that purpose. The need, however, for some capacity for detained and committed youth will continue.

While state fiscal year 2019 data indicates that peak utilization was 27 youth, assuming continued support of 1) the System of Care, 2) the Juvenile Justice Transformation efforts, and 3) the procurement of enhanced residential programming, including a Psychiatric Treatment Facility, the census should continue to decline. Assuming that the development of a new location will likely take two or more years, the state should be able to safely plan to serve fewer than 20 youth at any given time in a future secured facility for juvenile detention and commitment.

3/5/2021 Representative Edwards DHHS Division of Children, Youth, and Families
Provide information on the Sununu Youth Services Center utilities prioritized needs request, including how funding the request would impact the overall DHHS budget.

If the House funds the priority request in 7914 to put the utilities in SYSC, where they actually belong, there would be no impact on the rest of the DHHS budget.

3/5/2021 Representative Wallner DHHS Division of Children, Youth, and Families
Provide information on whether DHHS uses other accounting units to cover Sununu Youth Services Center costs, how much funding is used, and why.

SFY 20 Actual	\$ 2,067,403
SFY 21 to date	\$ 800,402

Materials and Labor for repairing and maintaining Buildings & Equipment
Unemployment Costs
Worker's Comp Costs
Security Camera System
Utility Costs
A/C Repair
New Water Heater

State vehicle repairs
 CoVID Related expenses
 Sprinkler Repair Emergency Water Line Repair
 Portable Radios for SYSC Maintenance
 Labor & truck Fee for Boiler Repair
 Overtime – non-SYSC staff

3/5/2021 Representative Edwards DHHS Division of Children, Youth, and Families
Provide information on the overtime used across DHHS to provide services at the Sununu Youth Services Center.

SFY 20 Actual	\$ 306,050
SFY 21* (actual to date)	\$ 359,642

3/5/2021 Representative Rogers DHHS Division of Children, Youth, and Families
Provide information on funded but unfilled positions, as well as contracted positions, at the Sununu Youth Services Center.

	FY 21 Funded Position Status		
Accounting Unit	Funded	Filled	Vacant
7909	5	4	1
1203	5	4	1
7914	9	5	4
7915	8	5	3
7916	66	50	16
7917	15	11	4
	108	79	29

In addition, there is a full time psychologist and part time psychiatrist who support the youth in the facility through a contract with Dartmouth Hitchcock.

3/5/2021 Representatives Wallner and Edwards DHHS Division of Children, Youth, and Families
Provide information on the vacancy rate for child protective services staffing.

As of the end of February 2021, the vacancy rates for the child protection workforce are as follows:

- Child Protection Service Workers - 15%
- Child Protection Supervisor IV – 5%
- Child Protection Supervisor VI – 0%

3/5/2021 Representative Erf DHHS Division of Children, Youth, and Families
Provide information on Sununu Youth Services Center Rehabilitative Programs (7916) current expenses (020).

Cable TV
Cleaning Supplies
Office Supplies
Postage
Residential clothing & hygiene items
Modem

3/5/2021 Representative Edwards DHHS Division of Children, Youth, and Families

Please tell Division III what the SYSC's budget would be if the program was redesigned to serve an average daily census of 2 youth - one male and one female with typical needs for the SYSC population. Assume that the facility must remain capable of accepting intakes and conducting intake assessments 24 hours per day, each day. Please line up the projected costs with the accounting units in the Governor's budget.

Please see the Division III SYSC Response.pdf with FY 22 & 23 Operating budgets for two different gender youth in placement and 24/7 emergency intake capacity budgets.

*Note - it would be an estimate of \$600k in payouts to reduce the current staffing to meet this proposed model.

LBA Note: See "Sununu Youth Services Center Cost Estimates" document.