



**David A. Hansell, Commissioner
Testimony to the New York City Council
Committee on General Welfare
June 14, 2021**

“Oversight—The Child Welfare System During COVID-19”

Good morning Chair Levin, and members of the Committee on General Welfare. I am David Hansell, the Commissioner of the New York City Administration for Children's Services (ACS). With me today are my colleagues who have worked tirelessly to keep children safe and families supported throughout the pandemic: Julie Farber, Deputy Commissioner for Family Permanency Services; William Fletcher, Deputy Commissioner for Child Protection; Dr. Jacqueline Martin, Deputy Commissioner for Prevention Services; Alan Sputz, Deputy Commissioner for Family Court Legal Services; and Dr. Angel Mendoza, our agency Chief Medical Officer.

We are deeply grateful to all of the ACS and contracted provider staff who have worked tirelessly throughout the pandemic, during times of fear, uncertainty, and personal challenge, to carry out ACS's mission. I would also like to take this moment to thank Chair Levin and the Committee members for your steadfast leadership and partnership during this trying time. And I hope you will join me in recognizing and honoring the contributions of our dedicated ACS and provider agency staff who have persevered throughout the pandemic to meet the needs of children and families—often in new and innovative ways.

I am very pleased to be here today to be able to speak to you about how ACS and our child welfare providers have and continue to respond to the COVID-19 pandemic, as well as the long-term lessons we have been able to learn from this challenging and unpredictable time. In my testimony today, I will first discuss how the pandemic has impacted our work quantitatively and then focus on how we adapted our policies and practices to meet the health and safety needs of families and staff. Finally, I will discuss some of the ways in which ACS and our partners are excited to contribute to

the City's long-term recovery and share some of my thoughts on how I believe the pandemic may change the future of child welfare.

Impact of COVID-19 on Child Welfare

While it is impossible to truly quantify the impact of the pandemic, we have been carefully monitoring our data in order to guide our work. Some of the key metrics that ACS monitors changed dramatically during the pandemic, including reports of alleged abuse or maltreatment to the Statewide Central Register (SCR); Family Court filings; removals and placements of children into foster care; and discharges of children from foster care.

At the start of the pandemic, in March and April 2020, reports to the state child abuse hotline dropped 50% compared to similar spring reporting levels from prior years. The initial drop in reporting in late March and April was largely due to reductions in reports by mandated reporters such as school personnel, health care personnel and law enforcement during the early days of the pandemic. Reports to the state child abuse hotline are now closer to the levels we have typically seen in prior years. In March and April 2021, we received 17% fewer reports than in March and April 2019, and the difference continues to narrow.

Throughout the pandemic, we have received a larger proportion of reports from non-mandated reporters, such as friends, neighbors and relatives. When comparing the COVID-19 period of March 23, 2020 through February 28, 2021, to the same period the prior year, March 23, 2019 to February 28, 2020, we find that pre-COVID-19 about one-third of reports came from non-mandated reporters while during the COVID-19 period

almost 50% of reports have come from non-mandated reporters. This tells us that New Yorkers are looking out for children who may be at risk of harm and taking steps to protect their safety.

As I will discuss in greater detail, the pandemic also drastically altered our operations in Family Court. New York City has invested in a strong portfolio of prevention programs for families that help keep children safe at home, and through our new contracts in 2020, we scaled up successful practices to connect families with services early in a case and divert them from Family Court involvement. Prior to the current crisis in which the Family Court limited its operations, ACS had been reducing its utilization of court-ordered supervision, with a 23% decrease from CY2017 to CY2019. In CY2020 ACS filed 33% fewer cases seeking court-ordered supervision than in CY2019. While this drop is partially attributable to pandemic-related court limitations, it also reflects significant changes in practice – in particular, the new model of early engagement of families in prevention services, which we piloted prior to the pandemic and brought to scale last year in our new prevention programs.

Since the start of the pandemic, we have also seen the number of children entering foster care decline 38% compared to the 12-month period prior to COVID-19. With the significantly decreased Family Court operations, we also saw discharges from foster care decline 35% during the pandemic.¹ In response, we developed new protocols to review cases of thousands of children in foster care to identify those that could progress toward reunification, even with the limited court operations. Through these efforts, the foster care census has continued to decrease. Just prior to the

¹ These data are comparing the period of March 2019 to February 2020 with March 2020 to February 2021.

pandemic, ACS announced that the foster care census was at an all-time low of fewer than 8,000 NYC children in foster care. This number has continued to decline, and there are now fewer than 7,600 children in foster care.

As I will discuss in the next section of the testimony, this data helped ACS to guide our work as we took many proactive steps to promote child safety and to provide families and communities with the services and supports that keep children safe.

Policies and Practices Modified to Adapt to the Pandemic—and Beyond

While our mission and critical child safety timelines never changed, the COVID-19 pandemic required us to rethink the ways in which we carried out our core jobs of keeping children safe and families supported. This work occurred rapidly across all fronts including the implementation of health and safety protocols, redoubling of our efforts to connect families with concrete information and resources, and adapting our support for families receiving prevention services, as well as families with children in foster care. Significantly, the pandemic also impacted our work in Family Court, and I will talk in more detail about our intensive and ongoing efforts to move cases and permanency planning efforts forward, despite limited court availability due to COVID-19 health and safety measures.

Implementation of Health and Safety Protocols

As always, the health and safety of staff, and the children and families we serve, has continued to be our top priority. ACS implemented targeted measures based on guidance from national, state, and city health experts, as well as the support and guidance of our own agency Chief Medical Officer, Dr. Angel Mendoza. I cannot

overstate how incredibly valuable it has been during this pandemic to rely on someone inside the agency for credible health information and guidance.

Throughout the pandemic, we have implemented protocols that aim to minimize COVID-19 transmission in our congregate care facilities, including increasing the frequency of cleaning, maintaining social distancing, and providing PPE for residents, ACS and provider agency staff, and the families who we serve. We also adjusted our work to minimize health risks to children, families, and frontline staff, while continuing to ensure that children are safe from abuse and neglect, and families supported. For example, while our immediate child protective response for every reported case of suspected abuse or maltreatment since the start of the pandemic never stopped, we modified procedures for health reasons. Child protective staff ask health screening questions before entering homes, and we observe social distancing precautions when we meet with parents and observe children. We may also ask to see children outside of the home and use remote technology to speak with parents and other resources when these methods are sufficient to conduct our child safety assessments.

ACS also leveraged our communications team to continuously maintain frequent, clear communication to assist our workforce and the families we serve. During this time, we enhanced our internal and external websites to create a repository of information for ACS and provider agency staff and other stakeholders to easily access, which has helped reinforce the continuing health and safety protocols that we have in place. We also used these tools to disseminate important information to New Yorkers, such as the importance of social distancing measures and face covering (and beginning this year,

COVID-19 vaccinations), and information about the resources that were available to assist families throughout the pandemic.

Concrete Resources and Supports

ACS has long been committed to earlier and better ways to keep children safe while keeping families together, and we continue to believe that the best way to do this is to provide families with the services and support that they need. For many families, COVID-19 has further highlighted the economic and social disparities in our city. Job loss, isolation, trauma, housing instability, health impacts and other crises faced by families have compounded the need for social services to meet families' concrete needs. The movement toward a greater emphasis on prevention, and especially primary prevention, is more crucial than ever.

Currently, ACS has three Family Enrichment Centers that have been co-created with families and community members, so that they truly represent responses to community-identified needs. True to the program's purpose and the grassroots infrastructure of each center, the Family Enrichment Centers have remained operational throughout the pandemic and continue to be trusted and reliable hubs of support, connections, and resources for families and children. During the pandemic, our Family Enrichment Centers have offered virtual support to community members and have provided food, clothing, and homework help to families.

Additionally, many of our neighborhoods are rich in services and resources, but these supports may not be well-known or easy for families to access. Our Community Partnership Programs in 11 high-need neighborhoods around the city have historically provided supports to families involved in the child welfare system. The partnerships

have helped to connect all of the dots of service that exist, so that families can learn about and gain access to the full continuum of supports available in their neighborhoods.

Because of this existing mix of programs, ACS was able to quickly mobilize our network to reach families hit hardest by the pandemic: those who got sick, lost their jobs, were in need of child care and experiencing other challenges. These programs have helped deliver food; provided clothing and diapers; helped families enroll in public benefits; offered transportation; helped keep families morale high by texting and calling to check in; offered virtual exercise classes and parent cafes; and hosted virtual events including for holidays and summer camp.

All of our core programs shifted to provide even more concrete resources to help families in need, including food, clothing, diapers, formula, pack and plays and more. In 2020, New Yorkers for Children and ACS established the COVID-19 Emergency Response Fund to address urgent needs arising from the COVID-19 pandemic among children, youth and families involved with ACS. The Fund's strategic partnership with philanthropy and individuals has helped raise and disperse more than \$1.5 million in support of vulnerable youth and families, reaching more than 3,000 youth, parents, foster parents, and other caregivers since April 2020. ACS also collected more than \$3 million in in-kind donations to distribute to families and youth, including clothing, winter coats, diapers and wipes, essential care items, backpacks, and more.

As part of ACS's early and ongoing efforts to help families and youth impacted by the pandemic, we launched campaigns through social media and radio advertisements to communicate a variety of information and resources to all New Yorkers. "Coping

Through COVID” (nyc.gov/acs/covidhelp) is our resource page aimed at supporting families through the pandemic and “Teens Take on COVID,” (nyc.gov/acs/covidteen) is targeted to provide resources for teens, many of whom are struggling with social isolation, and some of whom may be experiencing violence at home. Considering the extended amounts of time that families have remained at home, ACS’s child safety campaigns have focused on helping parents avoid tragic accidents and create safer home environments, for example by learning about infant safe sleep practices, how to store medications and cleaning supplies out of reach of children, and the importance of installing window guards. Our current and most recent child safety campaign “Look Before You Lock,” is aimed at reminding parents to never leave a child alone in a hot car.

Supporting Families with Prevention Services

We believe that the best way to keep children safe is to provide families with the services and supports that they need. We do this through both the primary prevention services I discussed, as well as through our nationally recognized prevention services continuum. We serve approximately 20,000 families with roughly 41,000 children annually through prevention services to support and strengthen families and keep safely children at home.

Whenever possible, and following COVID-19 health and safety protocols, our prevention and home-making providers have continued to deliver in-person services to families during the pandemic. Providers make family-specific determinations about whether to meet with families in person, based on assessed risks to child safety and well-being that the service is targeted to address, balanced with any current COVID-19

related health risks. Providers have used personal protective equipment and consistent screening to manage health risks to both families and staff. Providers have also leveraged telehealth to conduct ongoing and regular contacts with families and children, particularly when COVID-19 health risks existed for families. In addition to routine contacts, ACS has encouraged providers to have frequent interim contact with families by telephone or other electronic communication to combat isolation and offer additional support. ACS also launched a “Telehealth Tips” website for families, providers, and advocates to guide and support the use of telehealth services. For many families, particularly those who may be especially isolated in this stressful time, and who may be experiencing serious mental health challenges or are survivors of intimate partner violence, the reassurance of hearing regularly from a supportive case planner cannot be overstated.

Despite the many unprecedented emergency demands last spring, through the perseverance of ACS staff and our contracted provider partners, we were able to launch our redesigned prevention services system with 119 new contracts in place on July 1, 2020. Our new system is now in place and is continuing to grow and thrive, increasing families served by 33% in just the last 10 months.

Supporting Families when Children are in Foster Care

From the start of the pandemic, ACS recognized how challenging it was for both children and their parents when children were in foster care during the pandemic. Fears for each other’s health and safety, and the restrictions on seeing loved ones in person during the height of the pandemic, which created a difficult time for all New Yorkers, were compounded for parents and children and youth in foster care.

Placement of children with foster caregivers who are relatives, friends, or other trusted adults is known to reduce trauma and help speed permanency. We have seen the percentage of placements with family members and close family friends increase even during the pandemic, with more than half of the children who have entered foster care during this past fiscal year being placed with kinship caregivers. By continuously strengthening our work to identify and support kinship caregivers, we have been able to achieve an overall increase in the proportion of the city's foster children who are with kinship caregivers from 30% in 2017 to more than 42% in 2020.

We have consistently emphasized that family time and communication between children in foster care and their parents are essential to support the child's well-being, minimize trauma, and speed the timeline toward reunification. ACS collaborated with our providers to ensure that all children, youth and parents had access to electronic devices that would allow for virtual visits, including that foster care agencies have purchased phones and phone plans for youth, parents, and foster parents when needed. We provided detailed guidance to our providers about how to carefully review and weigh child safety needs and the family's potential health risks when determining if contacts should be held in person or virtually. Furthermore, the guidance makes clear that agencies cannot have "blanket" visitation policies, but rather that decisions must be made on a case-by-case basis. The vast majority of visits are now occurring in person. Moving forward, there is opportunity for virtual visits to supplement and enhance the time that children in foster care can have to connect in person with their families, further strengthening communication and relationships.

Ensuring that the children and youth in ACS's care have access to high-quality education services is always a crucial priority for ACS, and it required extra attention and partnership during the pandemic. Starting in Spring 2020, we partnered with the DOE to provide thousands of young people in foster care with remote learning devices. Continuing into this school year, ACS has worked closely with DOE staff to expedite delivery for children and youth newly entering care who require devices. ACS and providers have also furnished students with tablets and desktop computers when needed while students are awaiting arrival of their DOE devices. In addition, ACS and DOE have collaborated to enhance the capacity of foster care agency staff to support students in foster care with remote and hybrid learning, offering a series of provider trainings on how to assist families in navigating remote learning technology. We have also partnered on a series of successful information sessions about remote and hybrid learning for foster parents and parents of students in foster care.

As we approach the end of a school year like no other, I want to commend and congratulate every student and caregiver for the dedication and perseverance it has required to achieve educational goals during this challenging time.

During this difficult period when youth and families lost jobs due to the pandemic and economic downturn, ACS ensured that more than 1,300 paid internships and jobs were available to youth in the foster care system. We also helped youth build their skills through a variety of certified industry-specific trainings linked to immediate jobs in professional services, building trades, and social services sectors. ACS developed these opportunities in collaboration with DYCD, the Center for Youth Employment in the Mayor's Office, the Robin Hood Foundation, and the Pinkerton Foundation. Our

programs serve youth ages 16-24 in foster care or formerly in care, including youth attending college and those who are disconnected from school or work. Since April 2020 when ACS first launched our highly successful series of Virtual Career Fairs, over 300 youth have attended, and we have helped connect many youth who are in foster care or transitioning out of care to meaningful private sector jobs that have great training programs, college tuition reimbursement programs, and strong career pathway opportunities.

Additionally, through Fair Futures, thousands of young people in foster care ages 11-21 are receiving coaching, tutoring, educational advocacy and support, assistance with planning for housing, and access to regular supportive guidance as they achieve important life milestones. We know that Fair Futures coaches and tutors have been tremendous supports to young people throughout the pandemic. The Mayor and ACS remain committed to the Fair Futures program as an important model to promote well-being and good outcomes for youth in foster care.

Family Court and Permanency

On March 18, 2020, the New York State Court system essentially suspended in-person operations when the Governor issued an Executive Order that closed most offices and buildings, and suspended speedy trial laws in the state. Much of this Executive Order remains in place today. On March 25, 2020, the New York City Family Courts began very limited virtual court proceedings. Since that time, the Court system has taken incremental steps to first expand virtual proceedings and then to begin very limited in-person proceedings for pro se litigants. With some exceptions, the courts have been hearing cases described as “essential and emergency court matters,” including

applications where ACS seeks immediate safety interventions for children who are at risk of harm, such as court-ordered removal and/or an order of protection.

When the Family Court moved to a virtual platform in March 2020, our Family Court lawyers and support staff adapted to telework almost overnight. Fortunately, we already had a system in place to file our petitions electronically with the court. Additionally, we had already made a significant investment in technology before COVID-19 so that every Family Court lawyer already had an ACS laptop with cellular service. This was instrumental for our attorneys to seamlessly gather information and appear in virtual courts.

There have been many challenges to resolving more cases through virtual court processes, including: technology for parties and witnesses; the need for more clerical staff for the Family Court; and initially, a need for more court reporters for the virtual courts, as pre-pandemic, much of the court reporting work was handled by digital tape recorders. While we have seen modest steps to increase the capacity and capability to hear cases virtually, there is a significant backlog from when the court stopped hearing its calendar of regularly scheduled matters on March 18, 2020, and was not able to begin rescheduling many of these matters until Fall 2020. Since January 2021, the Family Court began providing increased court access by creating dedicated virtual links for every courtroom citywide, and it enhanced capabilities for these courtrooms by implementing a recording system for proceedings. With these two developments, we have experienced increasing virtual court activity, although it remains well below pre-pandemic levels.

Given the limited operations of the Family Court during the pandemic, ACS was extremely concerned about the impact this would have on the pace of family reunification. As a result, ACS took aggressive action to implement strategies outside of the normal court process. Since the pandemic began, ACS and our foster care providers have proactively reviewed the cases of 4,000 children and worked with parents' and children's attorneys to determine if cases could move forward with increased and/or unsupervised visiting, pre-disposition release, trial discharge or final discharge. In cases where all parties agreed that the case should proceed, our Family Court attorneys worked with the parent's attorney and children's attorney where necessary to sign stipulations and submitted these agreements to the court for approval. This process has helped to move reunification cases forward even without the Court holding hearings. We have also worked with our foster care agencies so that adoption and kinship guardianship cases are ready to proceed as soon as the Court calendars these matters.

We have found these proactive reviews to be beneficial in expediting the reunification process, so ongoing, we will be working with our providers to incorporate this into their regular case practice.

Last week, ACS issued its RFP to reprocur and redesign foster care services, including both family foster care and residential care. These RFPs are the result of extensive research and input from youth, parents, foster parents, advocates, provider agencies, child welfare experts, and other stakeholders. The vision for the redesigned foster care system builds upon the progress already made to strengthen New York City's foster care system, including reducing the number of children in foster care to a

historic low; reducing the length of time children stay in foster care; reducing the use of residential care; placing a greater proportion of children in foster care with family and friends; and expanding services for children and youth in care. The redesigned system will strengthen foster care services in a number of key ways. First, the new system will require and fund foster care agencies to hire parent advocates with lived experience of the child welfare system, to help parents safely reunify with their children more quickly and to improve race equity outcomes. Every parent working towards reunifying with their children will have an assigned parent advocate to partner with them throughout the process. Second, the redesigned system will significantly increase therapeutic and evidence-based supports to better meet children's needs while they are in foster care. Third, the redesigned system increases resources and expands the use of proven practices across the system in key areas, including visiting; continuing to increase the proportion of children placed with family and friends; expediting reunification; and providing services and supports to youth in care such as coaching, tutoring.

Recovery

Like so much of our City's recovery, ACS's next phases critically depend on the COVID-19 vaccine, and we have actively encouraged our workforce and the children and families we serve to be vaccinated. As soon as vaccines became available to New Yorkers, ACS successfully advocated to the State and the City for essential, direct service staff at ACS and our contracted provider agencies to be prioritized for vaccination in early January.

ACS has taken a number of steps to encourage and help staff to get vaccinated. We regularly share important health-related information about the vaccine in staff emails

and on our agency intranet site. We created a weekly “Ask Dr. Mendoza” column where our Chief Medical Officer answers staff questions about vaccines. This information is also on our web site for our providers. Dr. Mendoza, as well as other prominent leaders, such as Anthony Wells from Local 371 participated in a town hall to answer questions and share experiences about the choice to become vaccinated. Earlier this spring, we also operated a vaccine POD (point of distribution) at 150 William Street, where nearly 1,000 staff and their family members were vaccinated.

As young people—now age 12 and up—have become eligible to be vaccinated, ACS and our provider agencies are working to obtain the necessary parental consents and vaccine appointments for the eligible youth in our care. ACS developed detailed guidance for providers on how to approach the various and sometimes complex consent situations for youth in foster care. We also disseminated fact sheets to the providers to aid their efforts to educate youth about the vaccines. We are creating and promoting educational materials for youth so that they can learn about the vaccine and make informed decisions about getting vaccinated. This spring, we also hosted an Instagram Live event with Ericka Francois from the Fair Futures Youth Board!

In addition to focusing on vaccines for all eligible New Yorkers who want one, including those who we work with and serve, it is critical that we focus recovery efforts on the communities that have been disproportionately impacted by the pandemic. Families in these communities have particularly felt the economic and social impacts of COVID-19 including devastating job loss, trauma, housing instability, health impacts and other crises. We know these same communities have long been burdened by the pernicious effects of direct and systemic racism, and this is the moment to confront and

address that painful legacy while meeting current family needs to connect to concrete services and supports. In this regard, the movement toward greater emphasis on prevention, and especially primary prevention, is more crucial than ever.

Just last month, Mayor de Blasio announced we will be expanding from three Family Enrichment Centers to thirty FECs over the next four years. The FECs will be located in neighborhoods that the Mayor's Task Force on Racial Inclusion and Equity (TRIE) has identified as those hardest hit by COVID-19 and that have historically experienced other service, health, and social disparities. The new FECs will build on the success of the initial three, as community hubs co-administered by non-profit organizations and the communities themselves. Just like the initial three FECs, the new FECs will be specifically tailored to provide the services, supports and social connections that each individual community feels they want and need.

Additionally, as I testified in ACS's Executive Budget hearing, ACS is implementing a bold new plan to increase access to low-cost, federally-funded child care vouchers for thousands of additional families, with a number of measures to expand access. We are prioritizing child care access for families who are experiencing homelessness, families who have recently participated in ACS's child welfare programs, and families who need post-transitional child care as they are transitioning off other public assistance benefits. ACS is also seeking state approval for a demonstration project to target high need families in the TRIE communities. When families and communities build their protective factors and have access to needed resources, children will be safe and families will be stable without traditional child protection system interventions.

Child Welfare After COVID-19

There is no question that this pandemic will have a profound impact on all of our lives. There are many lessons that we have learned and reflections on a pre-COVID-19 time that now seems so distant, which I believe will change the future of child welfare.

Some of these include:

- Increasing opportunities to proactively resolve cases outside the court process:

The success of our proactive reviews of Family Court cases suggests that we pursue future opportunities to collaborate with providers and attorneys to resolve cases and move families towards reunification without a court appearance.

- Increasing opportunities to address safety issues without court intervention, by

continuing to reduce the use of court-ordered supervision: During the pandemic, when our ability to file court-ordered supervision cases in Family Court has been limited by the Court's emergency restrictions, we expanded upon our model of early engagement in prevention services to provide families with services and promote child safety. As we move forward, we are committed to continuing this and other strategies to reduce utilization of court-ordered supervision.

- Determining whether and how best to make use of virtual visits, casework

contacts and court appearances: While video will never replace in-person interactions, there are clearly some benefits. For families involved in the court system, for example, fewer in-person court experiences on ACS cases, as well as other family matters such as child support, might benefit parties who would not need to take time off from work or find child care for the day in court. In addition, video visits can be a good supplement—but not a replacement—for

parent/child visiting or family time, as it can allow more frequent and flexible communication.

- Maintaining access to telehealth: We have heard positive feedback, particularly from youth, about telehealth for health and mental health services. While not all services can or should be virtual, this is something with potential to build on—which will require more permanent approvals of Medicaid reimbursement.
- Addressing the digital divide: COVID-19 also shows the clear impact of the digital divide and the need to ensure all families have access to the internet and the technology so many of us now rely on. And from a system's perspective, COVID-19 lays bare the need for government agencies, nonprofits, social service providers, lawyers, courts and families to have access to and be able to leverage technology.
- Addressing economic stability: For many families, COVID-19 has further highlighted the economic and social disparities in our city. Job loss, isolation, trauma, housing instability, health impacts and other crises faced by families have compounded the need for social services to meet families' concrete needs. The full impact here has not yet been fully realized and is something for which we all need to prepare. In this regard, our movement toward greater emphasis on prevention, and especially primary prevention, is more crucial than ever.
- Addressing racial disproportionality: And finally, COVID-19 has brought to the forefront of our attention the systemic inequities families and children of color face. The pandemic has disproportionately impacted these communities, and we

must galvanize to both address the systemic racism in this country and meet the needs of families.

Conclusion

As we look forward to the day when COVID-19 is behind us, there are important lessons learned that will continue to inform and improve our child welfare policies and practices. We appreciate the Council's continued support as we carried out our work under challenging circumstances. Thank you again to all of the ACS staff, prevention staff, and foster care staff, who selflessly supported the children and families of New York City this past year.

We are happy to take your questions.