

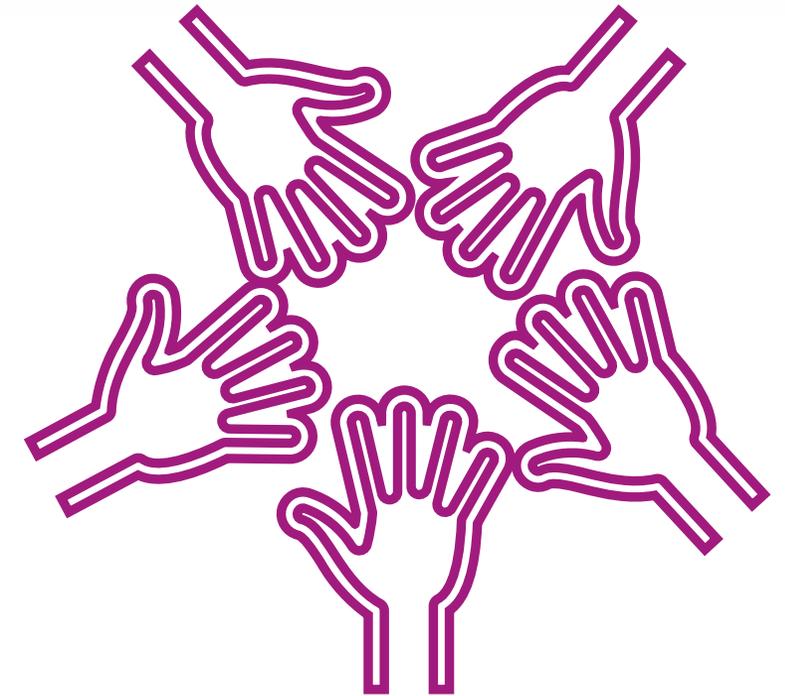
Hamilton County Children's Services Tax Levy Review

Final Report

June 1, 2021

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I. Scope of Work and Methodology

Scope of Work

PCG is contracted to conduct a review of Children's Services of Hamilton County Job and Family Services (JFS) and to complete the following tasks:

| Task | Status |
|--|----------|
| Task 1: Compliance with TLRC recommendations for current levy cycle | Complete |
| Task 2: Comprehensive financial analysis of internal financial data, the analysis of historic trends, and projections for the immediate future | Complete |
| Task 3: Review of levy request and prioritization at different funding levels | Complete |
| Task 4: Comparative data collection and analysis of data for other county JFS departments | Complete |
| Task 5: Make recommendations for future JFS requirements upon passage of the levy | Complete |
| Task 6: Prepare draft and final reports | Complete |

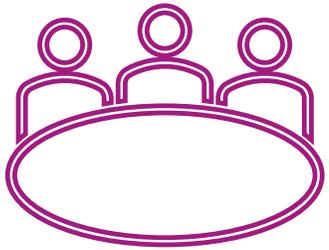
The Children's Services Levy Subcommittee of the TLRC also asked PCG to review and analyze diversity, equity and inclusion across the system, as well as family poverty and homelessness issues that affect children and families in Hamilton County. This information is contained within this report.

Methodology

PCG employed a mixed-methods approach to inform this work, collecting both qualitative and quantitative data from a wide variety of sources, including interviews with key stakeholders, staff focus groups, and a community-member focus group.

Qualitative Data Collection

Data Sources

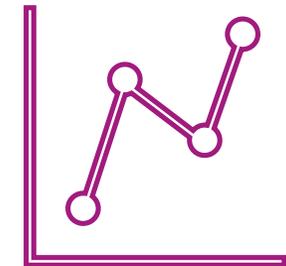


- 25 individual/group interviews
 - JFS leadership
 - Providers/contractors
 - Juvenile Court
 - Advocates/GAL/CASA
 - Cincinnati Public Schools
 - Cincinnati Children's Hospital
- JFS supervisor focus group
- JFS caseworker focus group
- Community member focus group
- Child welfare research
- JFS service array

Quantitative Data Collection

Data Sources

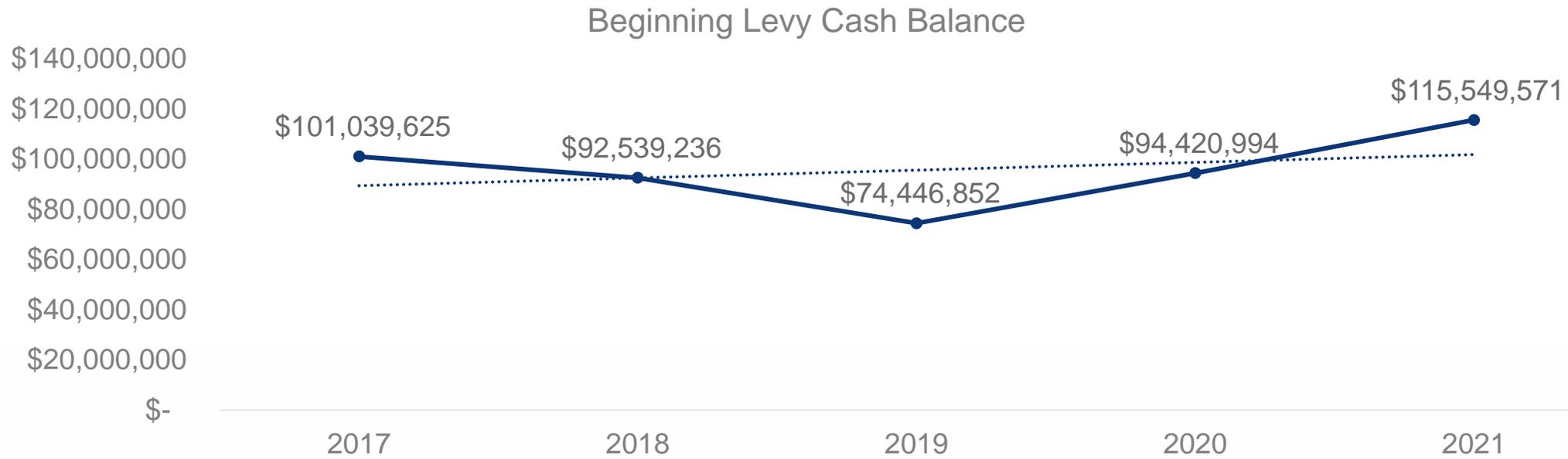
- Previous levy reports
- Levy budget
 - Revenue
 - Expenditures
- Staffing information
 - Staff demographics
 - Staff levels/vacancies
- Caseload data
- Placement data
- Federal Child and Family Services Review measures



II. Recent History and Overview of Children's Services Operations

Overview of Children's Services Tax Levy and Funding

- In 2018, the Children's Services Tax Levy increased from \$39MM to \$78MM – or from 2.77 mills to 4.75 mills – to support a shrinking levy reserve largely driven by an increase of the number of children in Hamilton County JFS custody, an increase to the length of time children were spending in custody, and the rising cost of out of home placements.
- The levy increase occurred by adding a second levy to the ballot in 2018, which was approved by a vote of nearly 60%.
- The tax levy costs the owner of a \$100,000 home ~\$109 annually.
- In 2018 the overall population in Hamilton County was 816,684. There were 187,547 children (0-18 years of age), accounting for 23% of the population.

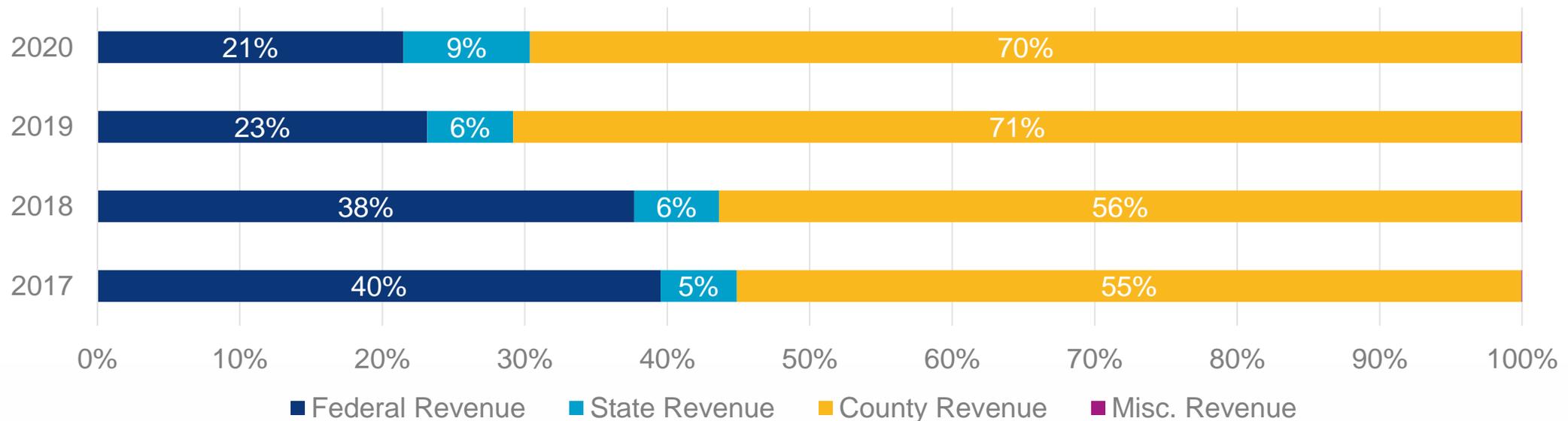


Overview of Children's Services Tax Levy and Funding

Ohio's state government contributes the lowest amount to child welfare budgets across all 50 states – even after they doubled their contribution in 2019 from \$3.9 million to \$6.4 million.

- Other state governments contribute an average of 42 cents of every dollar spent on child welfare; in Ohio, state government has contributed only 10 cents, while counties shoulder about half the costs.*
- As of Fiscal Year 2020, **70% of Hamilton County's child welfare funding comes from the county.**

Revenue by Type



*PCSAO: <https://www.pcsao.org/membership>



Overview of JFS and Children's Services

Mandated Services:

- Operate 241-KIDS, a 24-hour hotline to report abuse and neglect
- Investigate allegations of abuse, neglect and dependency
- When safety threats exist for vulnerable children who have parents without protective capacities, transition case to provide ongoing services and support
- Make reasonable efforts to prevent removal of a child from their home
- Provide services so children can remain safely in the home. Services include: emergency housing, mental health and substance abuse assessment/treatment, domestic violence programs, parenting mentoring and training
- When a child is unsafe, seek intervention through the court.
- When necessary, for safety, place children in temporary care with relatives, foster care or a more restrictive setting.
- Make reasonable efforts to finalize permanent placement of the child.
- Provide pre-and post-adoption services.
- Prepare older teens to live independently.

MISSION:

“To ensure the safety, permanency and well-being of children in our Hamilton County community.”

Operational Impacts

Potential Threats Identified in 2018

| Threats | Update |
|--|---|
| Continuation of the Opioid Epidemic | In 2017, 46% of children entering JFS care had "drug abuse of a parent" listed as a removal reason. In 2020, that number is down to 23%. |
| Vulnerability of Young Children (0-5) | 36% of children in JFS care are 5 or younger – this is a decrease from 40% at the time of our 2018 assessment. Nationally, ~42% of children in foster care are 5 or younger. |
| Inadequate Trauma Informed Behavioral Health Services | <p>The HOPE program is designed to help children with cross-system needs who need intensive therapy and treatment. Partnership with FAIR and Hamilton County Mental Health and Recovery Services Board has resulted in support of in-house Trauma Consultant available for case consultation.</p> <ul style="list-style-type: none"> JFS offers contracts for blended funding to provide trauma-informed, family-centered services but there is a lack of provider capacity to meet the need. |
| Rising Number of Children in Foster Care | <p>In 2017, there were 3,554 children in JFS care. In 2020, there were 2,621 – a decrease of 36% over the course of 3 years. It should also be noted that calls to 241-KIDS decreased significantly during the pandemic, which affects our ability to utilize 2020 as a benchmark year.</p> <ul style="list-style-type: none"> While the overall number of children in care/custody has decreased, the number of children in Permanent Custody has remained high, the complexity of their needs is greater, and placement costs are higher. |
| Lack of Family Like Settings for Out of Home Placement Options for Children | In 2017, JFS had 31% of children in their care in kinship placements. In 2020, 38% of children in JFS care were in a Kinship placement at one point during the year. JFS has worked hard to increase support for kinship placements; beginning in 2019 they began paying each kinship placement a monthly stipend of \$350 per child. Since implementing the stipend, placements have become more stable with longer stays and fewer disruptions of placement. |
| Workforce Stability | <p>In 2017, 21% of all JFS positions were vacant. As of February of 2021, JFS has a 15% vacancy rate.</p> <ul style="list-style-type: none"> 5% pay differential for Assessment caseworkers and supervisors Agency attempts to improve culture, resiliency, and secondary traumatic stress, including addition of two part-time trauma coordinators, and a contracted service focused on helping staff address burnout issues. On-site nurse available to all county employees Flexible schedule/work-from-home options |

Analysis of Operating Impacts

Since 2018, JFS has implemented a variety of new programs and services – as well as expanded existing programs and services -- to meet the increased need for services in order to produce positive outcomes for children and families

Expanded Programs and Services

- Behavioral Health services
- Kinship services –financial and other support
- Parent Education
- Crisis stabilization for youth
- Substance abuse treatment
- Trauma-informed care
- In-home services
- Safe & Sound Campaign
- Safe Sleep Campaign
- DVERT Expansion
- Staff Development and Leadership Training
- Growth of Quality Assurance & Safety Culture Staff
- Prevention services

New Programs and Services

- Safety Model and Safety Culture Program
- 30 Days to Family – Intensive family-finding model
- Ohio START
- Drug Court Model
- Family Voice parent advocacy program
- Clients Rights Office
- Wendy's Wonderful Kids for Adoptive Home Recruiting
- On-staff nurses available for case consultation
- Dedicated resources to educational services
- Enhanced internal communications (Tuesdays with Tim, quarterly all staff practice meetings, monthly all manager meetings, inclusion and feedback process for policy creation, additional trainings)

Workforce Initiatives

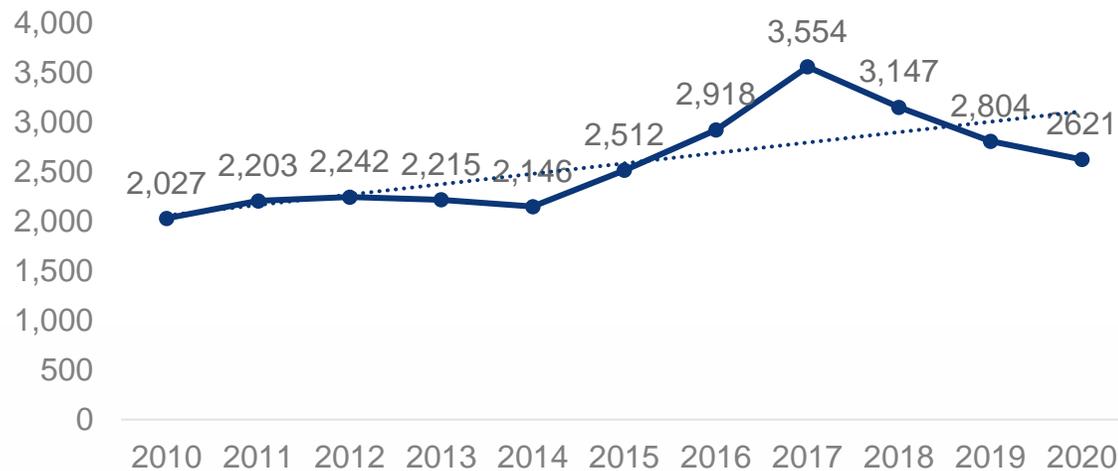
- Coach Ohio and Resilience Alliance
- Leadership Training for all managers
- Management mentoring program
- National Association of Counties Leadership Training for future JFS Leaders
- Individual coaching and consultation
- Partnership with Hamilton Co. Mental Health and Recovery Services Board to support in-house trauma consultant
- National Partnership for Child Safety collaboration with Casey Family Programs



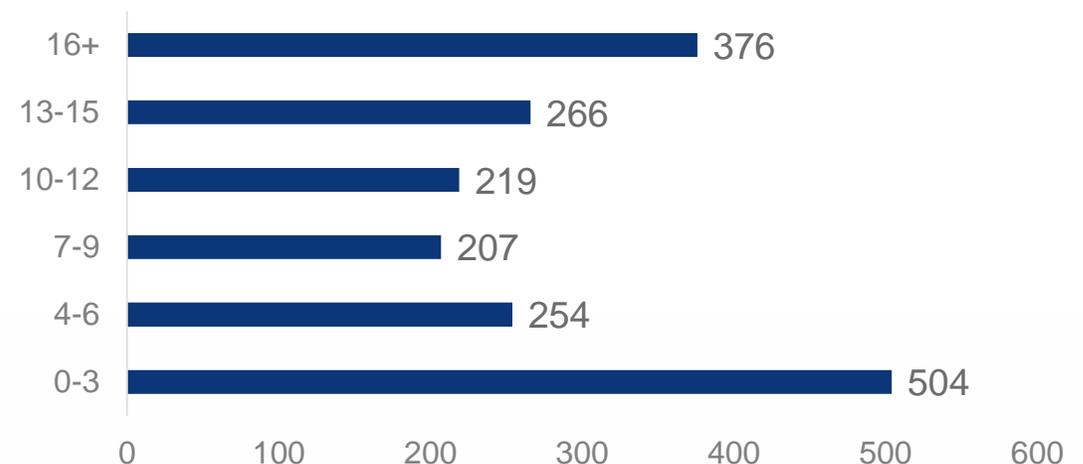
Total Youth in Care and Placement

- In Hamilton County, the total youth in care and placement has increased 29% since 2010. Since 2017, at the peak of children in JFS care and the height of the opioid epidemic – that number has decreased 26%.
 - The number of children in permanent custody (where parental rights have been terminated so there is no longer an attempt to reunify) has **increased by 71% since 2016 – from 414 children to 708 children**. Typically, these children have been in care for longer periods, are older, and are generally more complex cases.
- JFS also has a significant portion of older youth in care, many of whom entered care during the opioid epidemic and have not successfully reunified – with over 20% of all youth in care being 16 or older. Nationally, 14% of youth in care are 14+.

Total Youth in Care & Placement

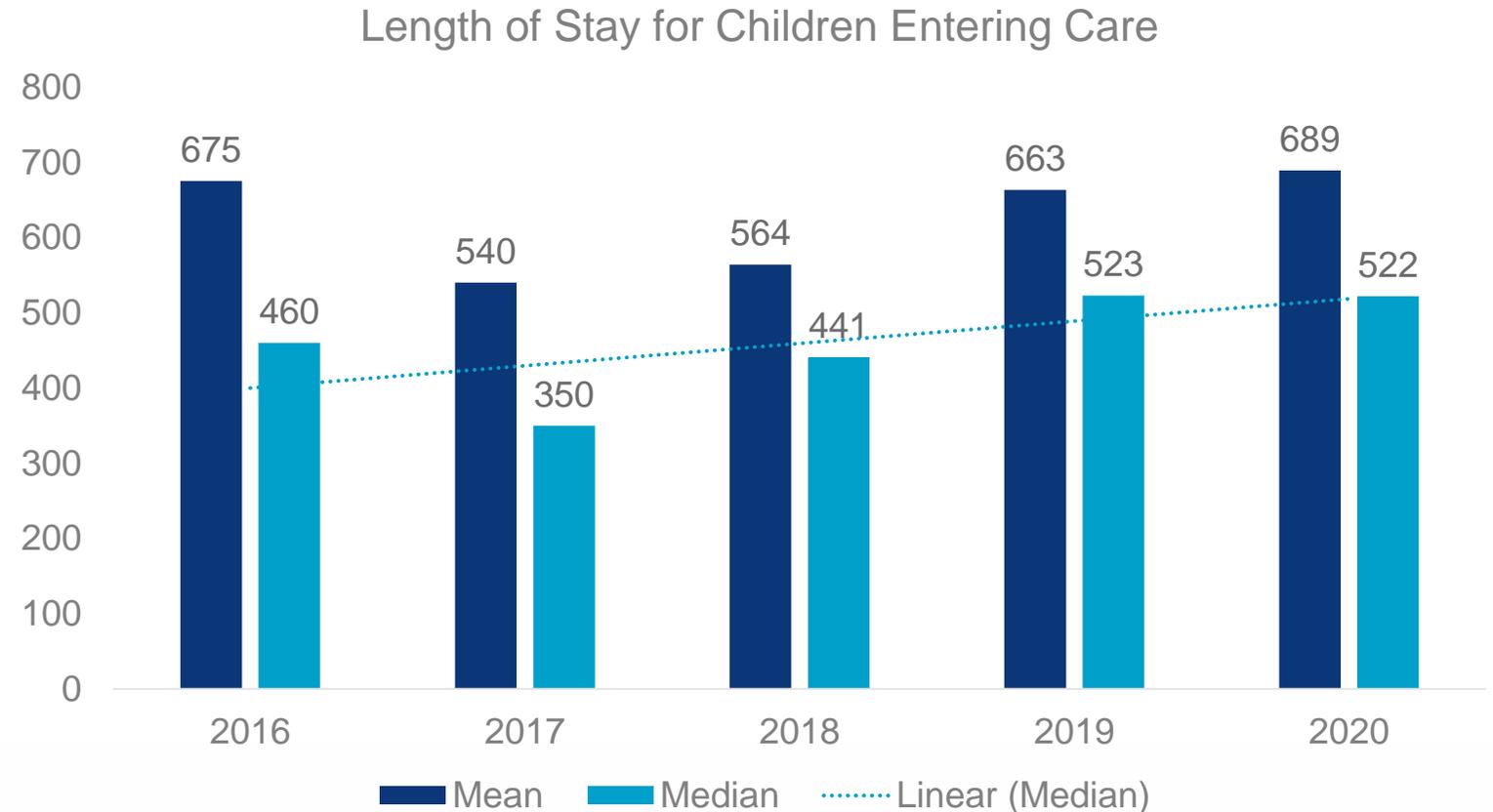


Ages of Youth in JFS Care



Length of Stay

- Since 2016, the median length of stay for children in JFS care has increased by 12% to 522 days, or ~ 17.5 months.
- Nationally, the median amount of time spent in foster care is 14.7 months.*

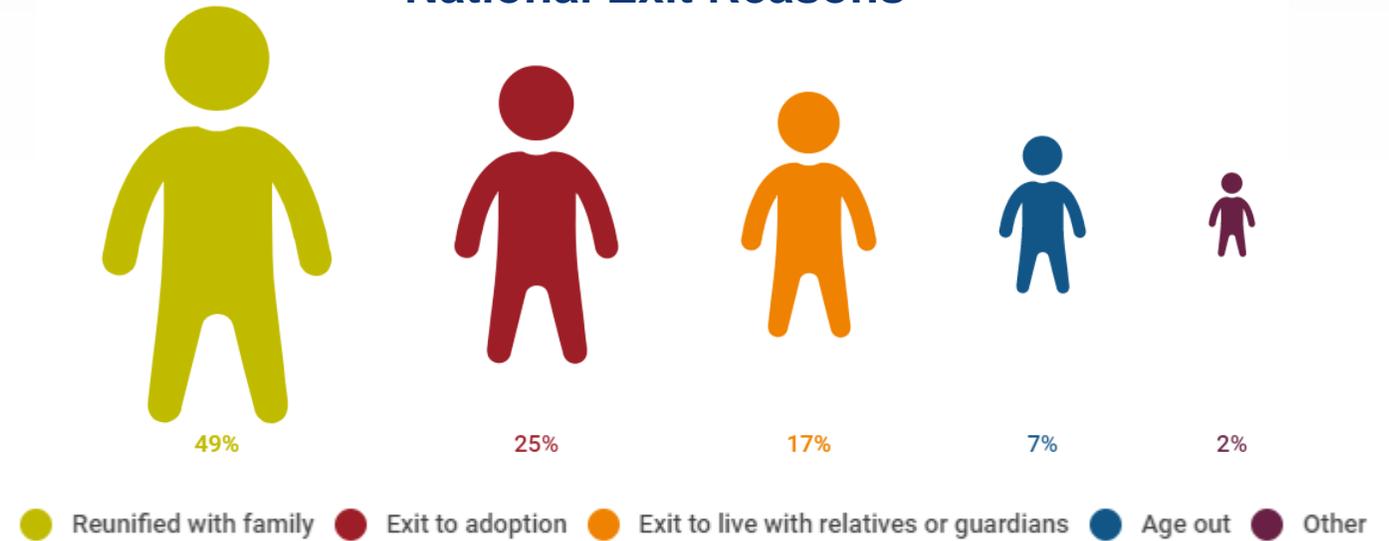


*<https://www.childwelfare.gov/pubPDFs/foster.pdf>

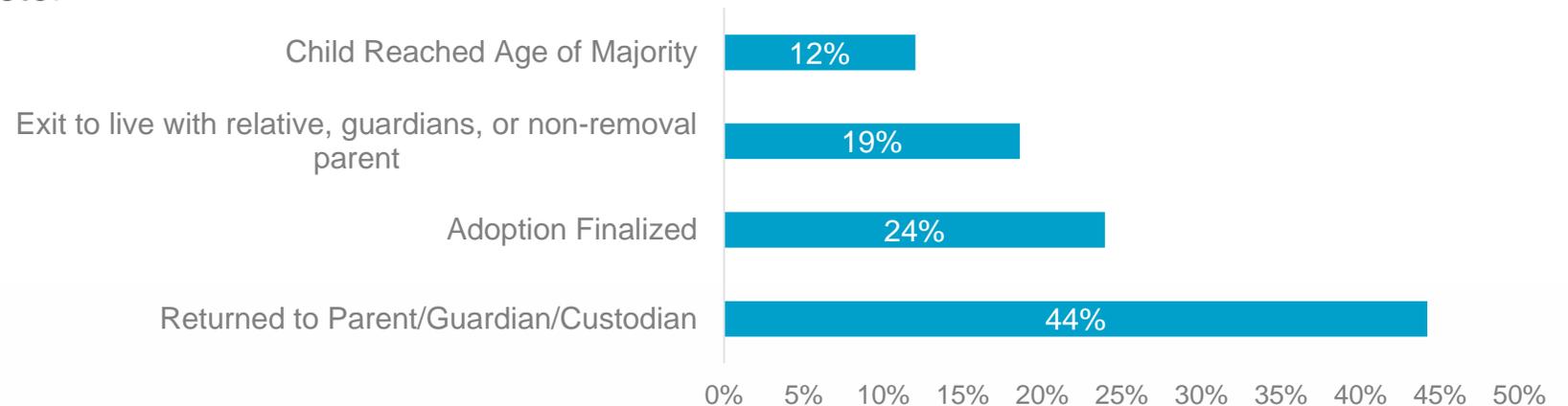
Exit Reasons

- Nationally, among children who exited foster care approximately 50% are reunified with family, 25% are adopted, 17% exit to relative or guardian care, and 7% age out.
- In Hamilton County, 5% fewer children than the national average are reunified with family and 5% more children than the national average age out of foster care than nationally.

National Exit Reasons



HCJFS Exit Reasons



Source: <https://www.casey.org/state-data/>

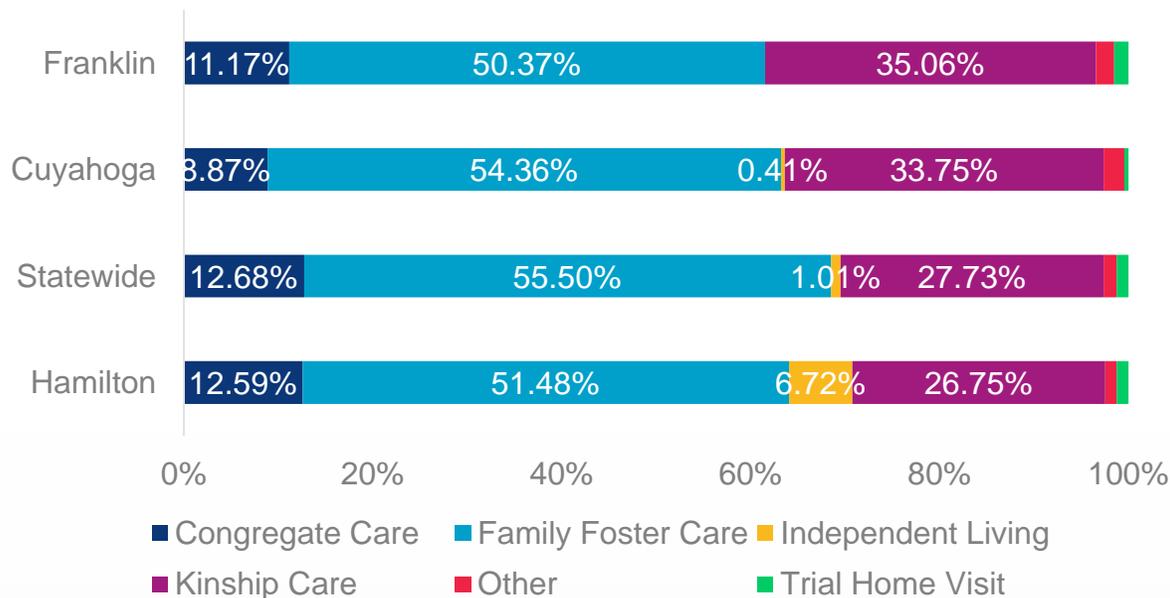


Placement Type

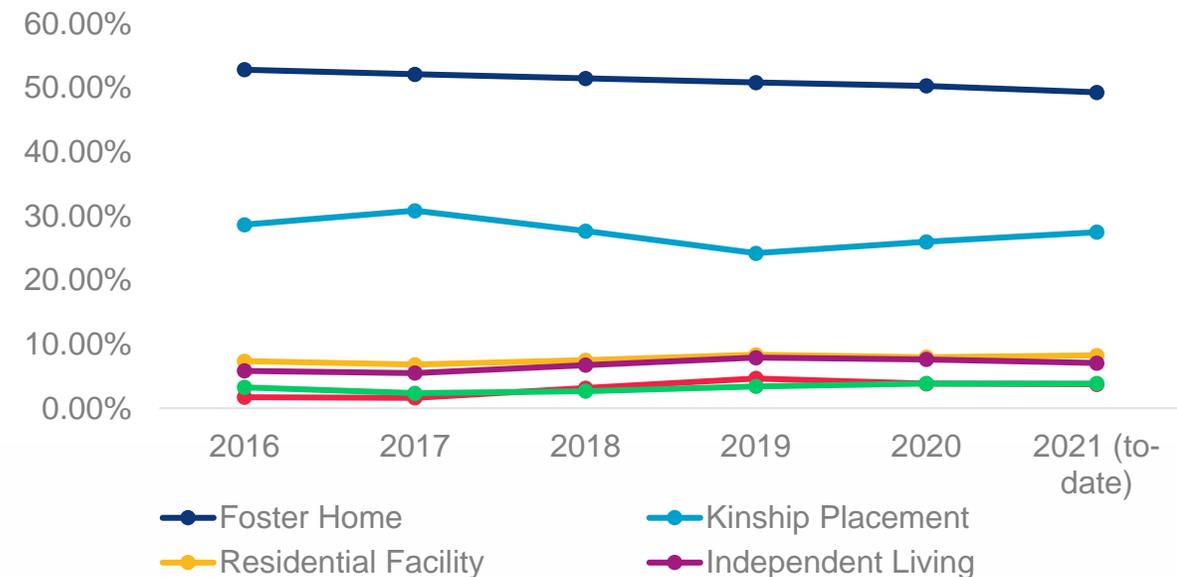
Compared to children in placement across the state, Hamilton County has a similar number of children in congregate care settings, in family foster homes, and in kinship settings – with a slightly higher amount of youth in Independent Living settings.

- However, both Franklin and Cuyahoga Counties have fewer children placed in congregate care settings and a higher proportion of children in family foster care and kinship care.
- Overall, placement trends have remained relatively stagnant in Hamilton County since 2016; family foster home placements have decreased by 4%, while all other placement types have increased or decreased no more than 1-2%.
- Statewide, 27% of children are in relative placements; the national average for relative placement is 32%.
 - However, the overall number of days in kinship placements have increased, which shows kinship placement stability has increased.

Placement Type by Setting



Hamilton County Trends in Placements by Type



Source: Children In Care Statewide Report, February 2021

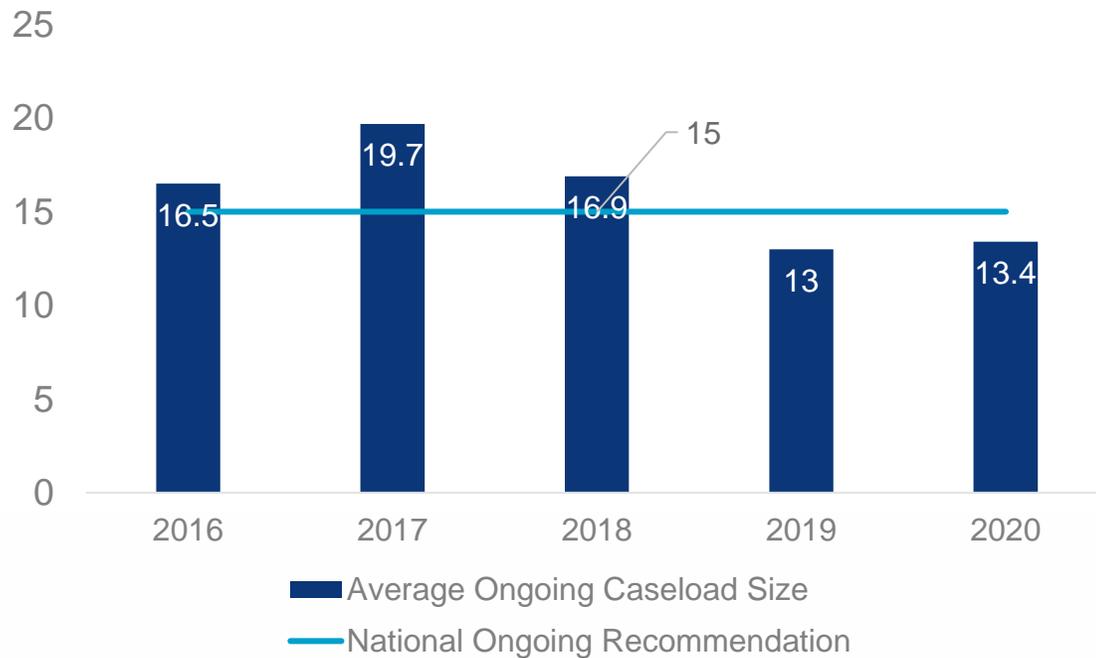


Caseload Size

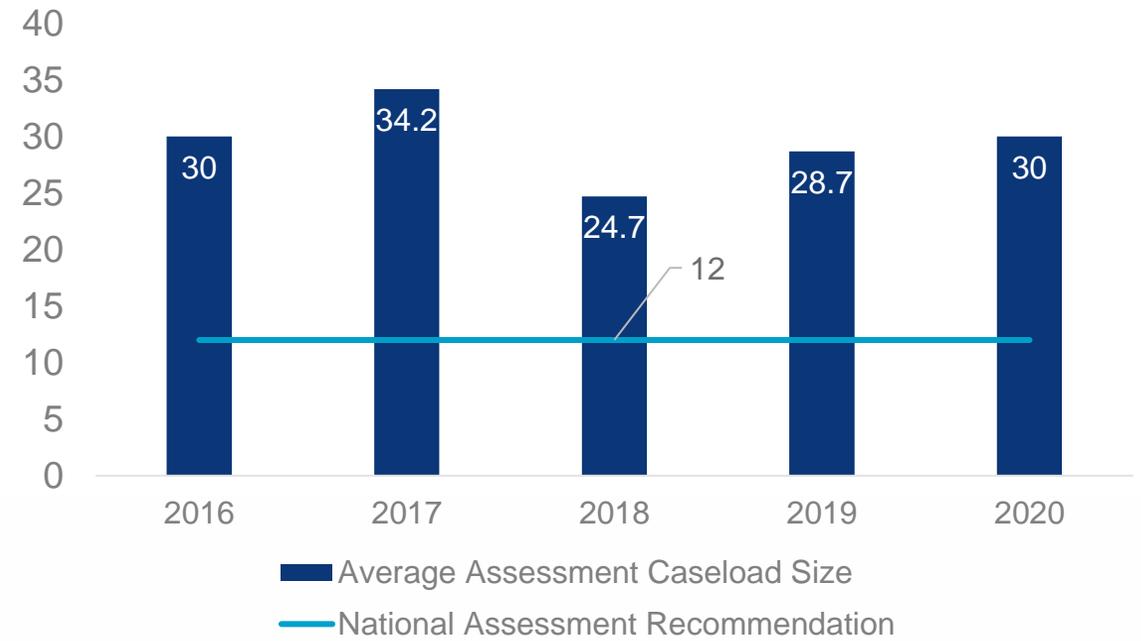
Since 2016, the average caseload size for ongoing workers has decreased by 19% and is now within the national recommendation for this position.

Since 2016, the average caseload size for intake and assessment workers has ebbed and flowed, but ultimately has not decreased. The assessment caseload size is more than double the national recommendation. Jurisdictions across the country struggle to meet these recommendations. Intake workers report excess burnout, stress, and a lack of support related to their high caseload size.

Average Ongoing Caseload Size



Average Assessment Caseload Size



Staffing

- Vacancies at JFS have decreased from 20% of all positions in August of 2017 to 15% of total positions in February of 2021.
- Since August of 2017, JFS Children's Services have increased their total number of positions by 3%.

JFS Staffing Levels



Diversity in Staffing

- The racial composition of JFS employees is in line with the overall county demographics of Hamilton County, and stakeholders have reported JFS is the most diverse government agency within the county.
- The racial composition of JFS employees far exceeds overall county staff demographics.
- JFS has made it a priority to focus on staff diversity, and nearly **half of JFS Children's Services employees are people of color.**

| Employee Race | County Demographics | JFS Children Served | All County Staff | All Children's Services Staff | Frontline or Admin Staff | Supervisor | Section Chief / Administrator |
|---------------------------|---------------------|---------------------|------------------|-------------------------------|--------------------------|------------|-------------------------------|
| Asian | 3% | 0% | 1% | 1% | 1% | 2% | 8% |
| Black or African American | 26% | 49% | 35% | 42% | 41% | 48% | 33% |
| Declined to Identify | 0% | n/a | <.1% | 0% | 1% | 0% | 0% |
| Race Unknown | | 2% | <.1% | 4% | 0 | 0 | 0 |
| Hispanic or Latino | 4% | n/a | 1% | 2% | 2% | 2% | 0% |
| Two or More Races | 3% | 13% | <.1% | 1% | 1% | 0% | 0% |
| White | 65% | 36% | 62% | 50% | 54% | 48% | 58% |
| TOTAL | 100% | 100% | 100% | 100% | 100% | 100% | 100% |

III. Analysis of Compliance with TLRC Recommendations

Summary of Recommendations

The TLRC developed the following list of recommendations to JFS Children's Services in reports from June 27, 2016, and May 11, 2018. The matrix below provides a brief overview of JFS's progress on each recommendation.

| Recommendations | Complete | Ongoing | Not Started |
|---|----------|---------|-------------|
| Implementation of a Family Rights Advocacy program | | X | |
| Development of a weekly JFS Dashboard report that provides real time data and demographics | X | | |
| Continued implementation of new programs and services | | X | |
| Further development of internal communications | X | | |
| Continued workforce hiring and retention initiatives | | X | |
| Support and expansion of Kinship Placements | X | | |
| Modification of the JFS Customer Services website to give clear identification of parental rights and a phone number to call for assistance | X | | |

Progress on Recommendations

| Recommendation | Update |
|---|---|
| Implementation of a Family Rights Advocacy program | <ul style="list-style-type: none"> • JFS is soon to release an RFP for a vendor to implement the Office of Family Voice. The contract will be overseen by the county office of Economic Inclusion & Equity. The contracted vendor will: <ul style="list-style-type: none"> • Work with child welfare system to improve outcomes for children and families • Provide a peer advocate for parents and caregivers • Empower recipient parents to effectively advocate for themselves and their families • Increase family engagement in case planning and implementation • Work to build trusting relationships between parents, alternative caregivers, legal representatives and caseworkers • Increase engagement of fathers • Assist parents with understanding of the child welfare legal system, court orders and rulings |
| Development of a weekly JFS Dashboard report that provides real time data and demographics | <ul style="list-style-type: none"> • JFS Dashboard is live for external viewing on the JFS website and provides data for public consumption. https://www.hcjfs.org/about/program-data/ |
| Continued implementation of new programs and services | <ul style="list-style-type: none"> • Many new programs and services have been expanded and or implemented (<i>see slide 12</i>) <ul style="list-style-type: none"> • Safety Model and Safety Culture • 30 Days to Family • Fatherhood initiatives • Ohio START • Expanded Wendy's Wonderful Kids Adoption program • Intensive In-Home services • Nursing and clinical case consultation |

Progress on Recommendations

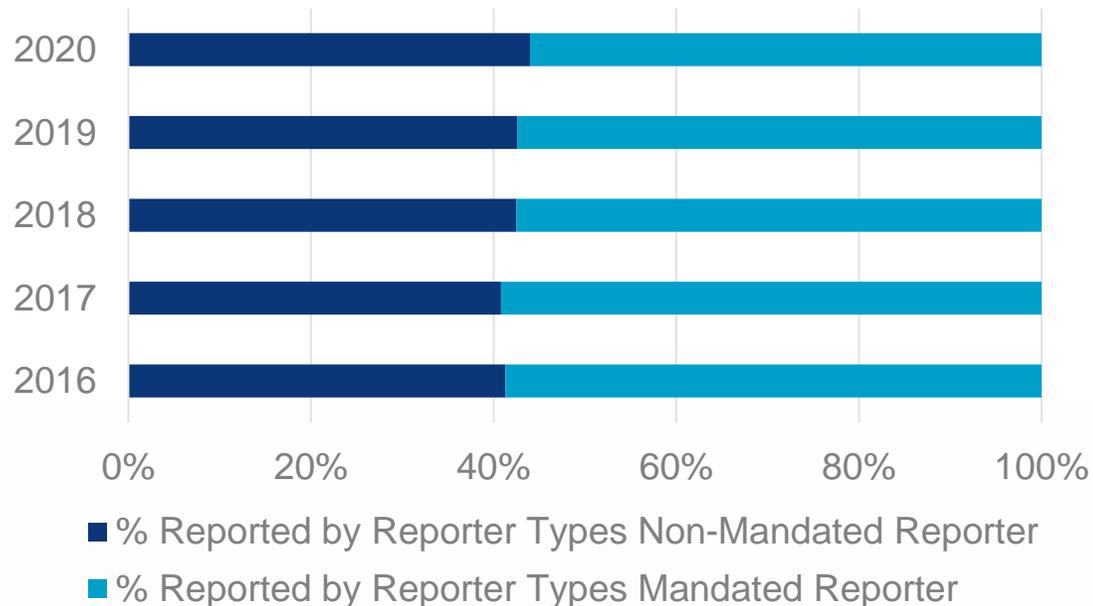
| Recommendation | Update |
|--|---|
| Further development of internal communications | <ul style="list-style-type: none"> • Improved communication over the past few years has been reported by all stakeholders interviewed. <ul style="list-style-type: none"> • Quarterly all-staff practice meetings, monthly manager meetings, individual 1:1 meetings, etc. |
| Continued workforce hiring and retention initiatives | <ul style="list-style-type: none"> • Staff retention and turnover is still an issue, however, there have been efforts to support staff <ul style="list-style-type: none"> • Coach Ohio and Resilience Alliance • Management Mentoring Program • Expanded training for new workers through Safety and Culture Model • Remote work and flexible schedule • Trauma case consultation and secondary trauma support • New virtual reality training for staff recruitment and training called AVEnueS • Impact U to study the intake and ongoing process and observe where bias occurs and developing interventions to address bias. |
| Support and expansion of Kinship Placements | <ul style="list-style-type: none"> • Kinship stipend of \$350/month for kinship families started in 2019. • ODJFS will begin providing time limited Kinship Support Program (KSP) at \$10.20/day |
| Modification of the JFS Customer Services website to give clear identification of parental rights and a phone number to call for assistance | <ul style="list-style-type: none"> • Office of Client Rights was created in 2018 • Website for this service was launched in 2019 |

IV. Current and Future Issues Facing Children and Families in Hamilton County

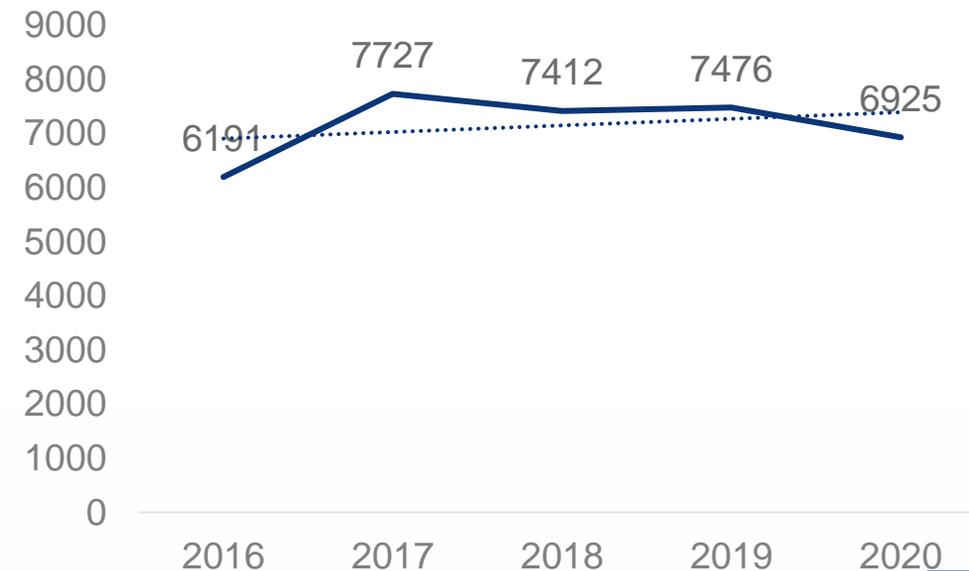
COVID-19 Pandemic and Child Welfare

- In 2020, there was a decrease in mandated reports as well as a 7% reduction in screened-in intakes from the previous year as well as a decrease in child welfare reports performed by mandated reports (such as teachers).
- Through interviews, participants commented that an uptick in hotline calls once children return to school full-time is likely due to increased school absenteeism during the pandemic and the increased mental and emotional health needs children have incurred during COVID-19.

Reports by Reporter Type



Screened-In Intakes*

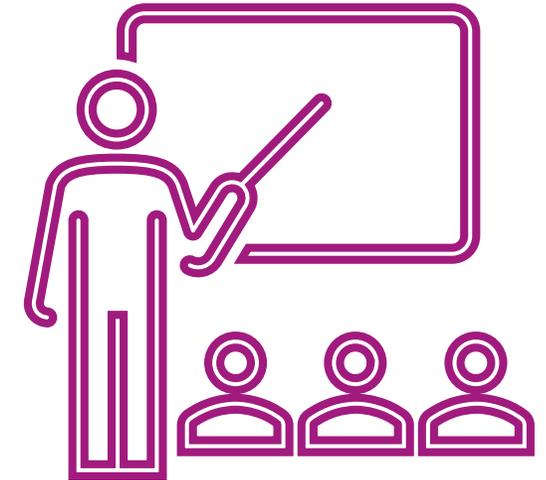


COVID-19 Pandemic and Child Welfare

Human services systems need to be prepared to address educational deficits and have supports in place, especially for minorities and children in placement.

One of the widest spread effects of the COVID-19 pandemic has been the change to student learning that has occurred across this country.

- According to a study by McKinsey & Company in June 2020, research shows that due to factors affecting at-home learning environments such as a student's access to quiet spaces, individual learning devices, internet connectivity and supervision, the results of remote learning vary greatly.
- For example, one study suggested that only **60% of low-income students logged on to remote learning** on a regular basis, whereas **90% of high-income students logged on regularly**. The same is true for predominantly black and Hispanic students.
- Learning loss will most likely be greater for low-income, black, and Hispanic students.
- Child abuse-related emergency room visits decreased during the pandemic, but the severity of injuries among child abuse-related ER visits has increased and resulted in more hospitalizations.
- Many children have experienced distress during the pandemic due to disruption in routines, isolation, loss of social contact, stress in the household.



COVID-19: Effects on Mental Health & Substance Use

General Public

- Studies of the general public reveal lower psychological well-being and higher scores of anxiety and depression compared to before COVID-19.
- Average share of adults reporting symptoms of anxiety disorder and/or depressive disorder has increased, January-June 2019 11% vs. January 2021 41%.
- Many mothers (specifically among parents) are experiencing challenges with the effects of school closures and lack of childcare falling on them, leading to poor mental health for them and their children.
- A recent study found that 18% of individuals who received a COVID-19 diagnosis were later diagnosed with a mental health disorder, such as anxiety or mood disorders.

Effects of Income Loss

- Research from past economic downturns found that job loss is associated with increased depression, anxiety, distress, and low self-esteem and can lead to higher rates of substance use disorder and suicide.
- During the pandemic, adults in households with job loss or lower incomes report higher rates of symptoms of mental illness than those without job or income loss 53% vs. 32%.

Communities of Color

- The pandemic has disproportionately affected the health of communities of color. Non-Hispanic Black adults 48% and Hispanic or Latino adults 46% are more likely to report symptoms of anxiety and/or depressive disorder than Non-Hispanic White adults 41%.

Substance Use

- Early 2020 data show that drug overdose deaths were higher from March to May 2020, coinciding with the start of pandemic and lockdowns an 18% increase.
- American Medical Association reported that more than 40 states have seen increases in opioid-related mortality along with ongoing concerns for those with substance use disorders in 2020.
- A July 2020 survey found that a higher share of households experiencing income or job loss reported that pandemic-related worry or stress caused them to experience at least one adverse effect on their mental health and well-being, such as difficulty sleeping or eating, increases in alcohol consumption or substance use 46% vs. 59%, respectively.
- June 2020, 13% of Americans reported starting or increasing substance use as a way of coping with stress or emotions related to COVID-19.

Adolescents and Young People

- During the pandemic, an increase number of young adults ages 18-24 report symptoms of anxiety and/or depressive disorder 56%.
- Solitary substance use vs. social use has increased among adolescents during the pandemic.
- A June 2020 survey found that substance use and suicidal ideation are particularly pronounced for young adults, with 25% reporting they started or increased substance use during the pandemic, and 26% reporting serious thoughts of suicide.



Family First Prevention Services Act: Overview

- Payments will no longer be paid on behalf of a Title IV-E eligible child placed in a childcare institution (CCI) after the 14th day , unless the placement setting meets certain requirements. The placement must be:
 - Considered a QRTP; or
 - Specialize in providing prenatal, post-partum, or parenting supports for the youth; or
 - Specialize in providing services to children who are or at risk of becoming sex trafficking victims; or
 - Supervised independent living for youth 18+
- Funding for prevention services for mental health/substance abuse and in-home parent skill-based programs for candidates for foster care without regard to whether the child would be eligible for title IV-E foster care, adoption, or guardianship, pregnant/parenting foster youth, and the parents/kin caregivers of those children and youth
- Expanded Title IV-E funding for children whose parents are in a family-based treatment facility.
- Increased federal funding for Kinship Navigator Programs.
- Changes to the Chafee foster care independence program including expanding age ranges for specific services, allowing unused funds to be rolled over to the next year, and adding more specific reporting requirements.



Family First Prevention Services Act: QRTP

Residential Provider Requirements to Meet QRTP

1. Must be accredited by CARF, JCAHO, COA, or other approved by HHS Secretary
2. Must have licensed nursing staff onsite and available 24/7
3. Must have 'other licensed staff' who provide care within the scope of their practice on-site and available 24/7 (they do not have to be employees of the QRTP)
4. Must have a trauma-informed treatment model
5. Must facilitate outreach to the family members of the child, including siblings, documents how the outreach is made
6. If in the best interest of the child, family members must be involved in the child's treatment
7. Must provide discharge planning and family-based aftercare support for 6 months post discharge

State Agency Requirements to Meet QRTP

1. Must have an assessment completed by a qualified individual within 30 days of placement (assessment must recommend QRTP placement)
2. Must have court review within 60 days of placement (court must approve QRTP placement)
3. The case plan shall specify why the QRTP is the most effective, least restrictive setting, providing the appropriate level of care, and how the recommended placement is consistent with goals in the child's permanency plan.
4. Agency must assemble a family and permanency team for the child placed in the QRTP
5. For youth placed in a QRTP for an extended period of time, must have state director or designee review placement.
6. To claim to Title IV-E, child must be Title IV-E Eligible

Family First Prevention Services Act: Prevention Services

Overview of Requirements

1. The programs and services must be specified in advance in the **child's prevention plan**
2. The programs and services must be **trauma-informed**
3. The programs and services must be approved on the IV-E prevention clearinghouse as **promising, supported, or well-supported practices**.
4. Services must be included in the State's approved **5 year IV-E Prevention Service Plan**
5. The state must meet the **outcome assessment and reporting** requirements
6. An **evaluation strategy** must be included for each program or service in the state's five-year prevention plan

Prevention Plan Requirements

- “Candidates for foster care”**, documented in the prevention plan,
- identify the foster care prevention strategy for the child so that the child may remain safely at home, live temporarily with a kin caregiver until reunification can be safely achieved, or live permanently with a kin caregiver;
 - list the services or programs to be provided to or on behalf of the child to ensure the success of that prevention strategy
- Pregnant/parenting foster youth**, documented in the case plan,
- list the services or programs to be provided to or on behalf of the youth to ensure that the youth is prepared or able to be a parent,
 - describe the foster care prevention strategy for any child born to the youth.

Data Collection and Reporting requirements

For each child for whom, or on whose behalf, mental health and substance abuse prevention and treatment services or in-home parent skill-based programs are provided:

- The specific services or programs provided and the total expenditures for each of the services or programs,
- The duration of the services or programs provided, and
- In the case of a child who is a candidate for foster care: the child's placement status at the beginning, and at the end of the one-year period, respectively, and whether the child entered foster care within two years after being determined a candidate for foster care.

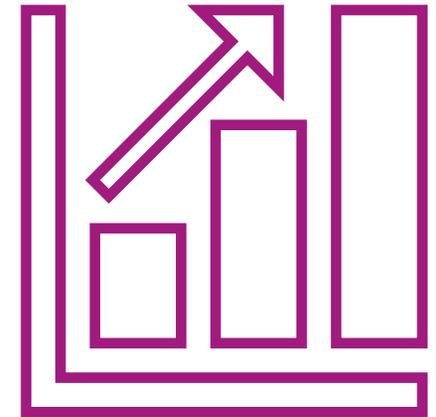
Annually report the following to HHS:

- The percentage of candidates for foster care for whom, or on whose behalf, the services or programs are provided who do not enter foster care, including those placed with a kin caregiver outside of foster care, during the 12-month period in which the services or programs are provided and through the end of the succeeding 12-month period, and
- The total amount of expenditures made for mental health and substance abuse prevention and treatment services or in-home parent skill-based programs, respectively, for, or on behalf of, each child.



Family First Prevention Services Act: Cost Drivers

- QRTP Requirements:
 - Accreditation
 - Nursing/clinical staff
 - TIC training and programming
 - 6 months aftercare post discharge
 - Documentation of family and sibling contacts and engagement efforts
- QRTP 30 Day assessment – to be completed by an independent party
- Administrative costs associated with proper and efficient administration of the plan
- Staff trainings on EBP identification and prevention planning process
- Provider trainings on EBPs
- System updates needed to meet documentation requirements:
 - Special Populations
 - QRTPs (provider type, assessment completion dates, assessment determinations, court approvals, case plan documentation requirements,
 - Prevention Services (prevention plan documentation services and candidates for foster care, case plan requirements for pregnant and parenting youth, tracking of expenditures for claiming of direct services and meeting of State MOE).
- Updates needed to the claiming processes
- Ongoing CQI processes/evaluation strategies for EBPs implemented



Coordination and Communication with State

Several pieces of federal legislation have been enacted since the last tax levy review. These include but are not limited to the following:

- **Family First Prevention Services Act of 2018**
- **CARES Act of 2020**
- **Consolidated Appropriations Act of 2020**
- **American Rescue Act of 2021**

These legislative changes are reviewed and strategized at the state level to develop guidance and approaches for county agencies to implement.

- These constant changes, particularly during the pandemic period, have led to a greater need of coordination and communication between the ODJFS and JFS.
- Delays in communication and guidance impact JFS' ability to prepare, plan and thoughtfully implement changes.



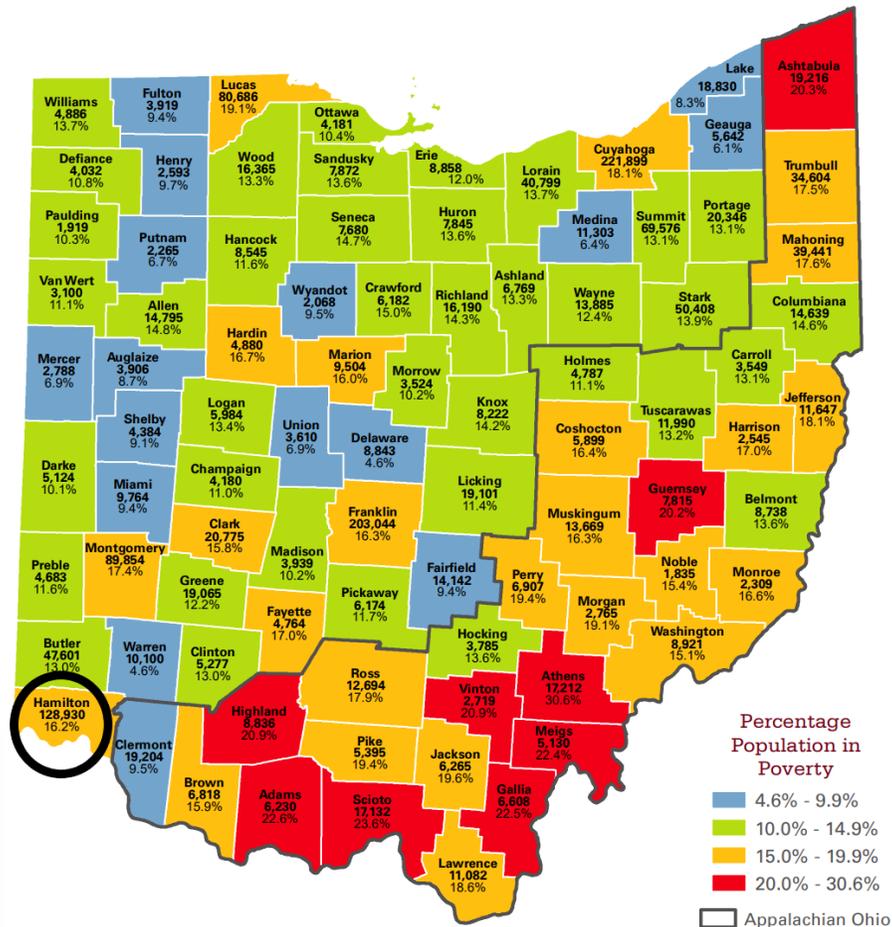
Diversity, Equity, and Inclusion

JFS is investing more than \$1 million in 2021 for the following initiatives to directly support and impact in a positive way the BOCC's declaration of "Racism as a Public Health Crisis."

- **Safe Sleep Campaign** - \$252,000 – JFS is funding the largest ever Safe Sleep Campaign in Hamilton County history. This campaign is an effort to prevent any infant sleep related deaths but will be focused on preventing the disproportionate number of in the African American community.
- **DVERT** - \$425,000 – DVERT is a trauma informed response team that partners with local law enforcement for a collaborative response to domestic violence survivors.
- **Office of Family Voice** - \$300,000 to \$400,000 – JFS is funding the contract with a vendor to implement the Office of Family Voice. The contract will be overseen by the county office of Economic Inclusion & Equity
- **Intersections** – \$150,000 - JFS contracts with Intersections to provide organization consulting services focused on assisting JFS with enhancing equity in all aspects of JFS. This is the 3rd year of this contract for this minority owned and operated consulting service.
- **JFS Internal Initiatives** – Continuation of the Core Equity Group; Development of a DEI Council; Higher Education Mentoring Initiative (HEMI); Kids in School Rule; the Harmony Project; Metro Equity Work with Casey Family Programs; and Increasing staff diversity at all levels of Children's Services.

Family Poverty

The Ohio Poverty Report, released in June 2020, estimated 284,000 or 9.7 % of Ohio families are poor compared to the U.S. rate at 9.3% (*family poverty rates are lower because family members share resources, and not all persons are in families*).



- According to the American Community Survey, U.S. Census Bureau (2014-2018), **16.2% of people** in Hamilton County live in poverty. There are relatively high poverty rates in most Ohio counties with metropolitan area central cities.
 - Child poverty rates in Hamilton County are estimated at **23.6% and 40.4% in Cincinnati** according to this same survey.
- According to Kids Count Data Center, **20% of children** in Hamilton County live in poverty, which is higher than the national average at 17% and **35% of single-parent families with related children** are below poverty.
- Multiple studies have shown a correlation between family poverty and involvement in the child welfare system. Poverty is also a risk factor for neglect.
- Stakeholders reported high poverty rates as an issue facing many families involved with JFS.

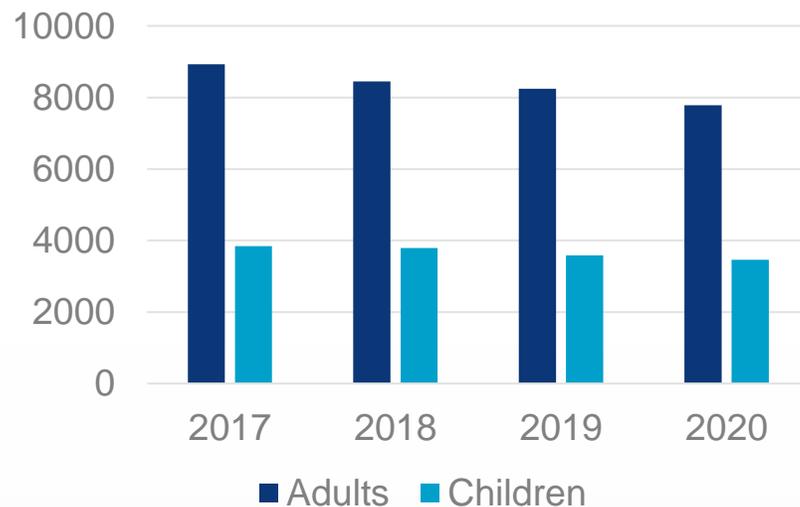


Family Homelessness

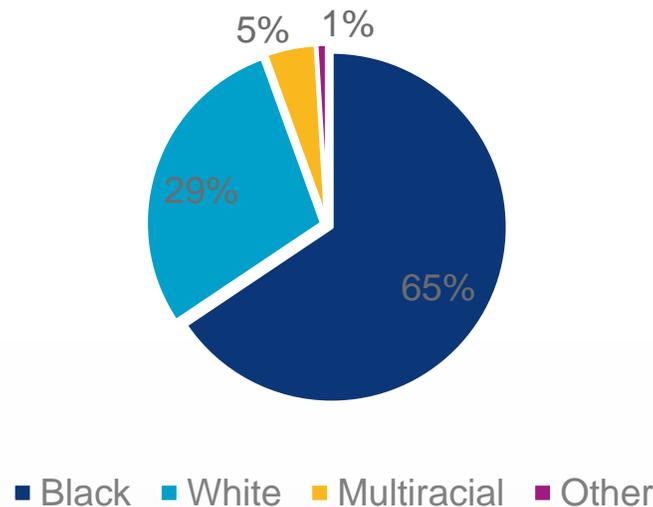
According to 2020 data from Strategies to End Homelessness, 11,256 individuals consisting of 7,783 adults (69%) and 3,464 children (31%) were served by the following programs: shelter diversion, street outreach, emergency shelter, transitional housing, rapid re-housing, and permanent supportive housing projects.

- While the number of people experiencing homelessness in Hamilton County has decreased slightly over the past five years, data from 2015 – 2019 shows that the number of people served by homelessness prevention services has declined 17%, which indicates cuts in funding homeless prevention efforts.
- Stakeholders reported a lack of affordable housing options within Hamilton County as a barrier to success.
- JFS has explored paying room and board for JFS families residing at First Step Home.

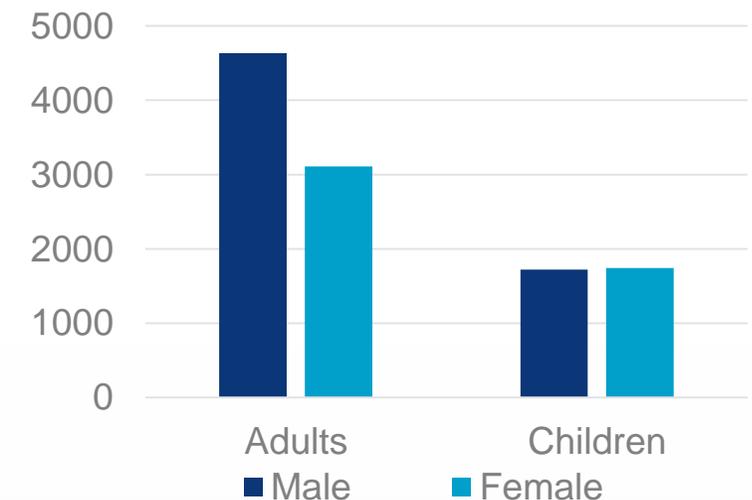
Individuals Experiencing Homelessness for Entire System, 2017 - 2020



Individuals Experiencing Homelessness by Race, 2020



Individuals Experiencing Homelessness by Gender, 2020



V. Comparative Data Analysis

Child and Family Services Review Measures

The CFSR is a federal review to ensure child welfare agencies are conforming with federal child welfare requirements and to gauge outcomes for children and families. The chart below compares Hamilton County, Ohio against two major metropolitan counties in Ohio; Franklin and Cuyahoga – with the national standard on seven national CFSR measures. Child welfare agencies across the nation struggle to meet all the federal performance measures, and nationally there is no agency that meets each of these measures. Hamilton County exceeds the national standards for many of these measures, 5 of the 7, whereas both Cuyahoga County and Franklin County meet the national benchmark in 4 of the 7 measures. In 2018, Hamilton County also met the national standard in 5 of the 7 measurements.

| Child and Family Services Reviews (CFSR) Measure | Hamilton County | Cuyahoga County | Franklin County | National Benchmark |
|---|-----------------|-----------------|-----------------|--------------------|
| Maltreatment in Foster Care | 3.39 | 12.83 | 7.94 | 8.5 |
| Permanency in 12 Months | 44.4% | 40.6% | 47% | 40.50% |
| Permanency in 12 Months for Children in Foster Care 12 - 23 Months | 41.4% | 45.8% | 42% | 43.60% |
| Permanency in 12 Months for Children in Foster Care 24 Months or More | 35.2% | 24.1% | 27.7% | 30.30% |
| Placement Stability | 3.9 | 2.2 | 3.47 | 4.12 |
| Recurrence of Maltreatment | 10.8% | 9% | 8.2% | 9.10% |
| Re-entry to Foster Care | 6.1% | 11.3% | 17.9% | 8.30% |

*Data is for most recent rolling 12-month period, ending in December 2020.

Meets or Exceeds
National Benchmark

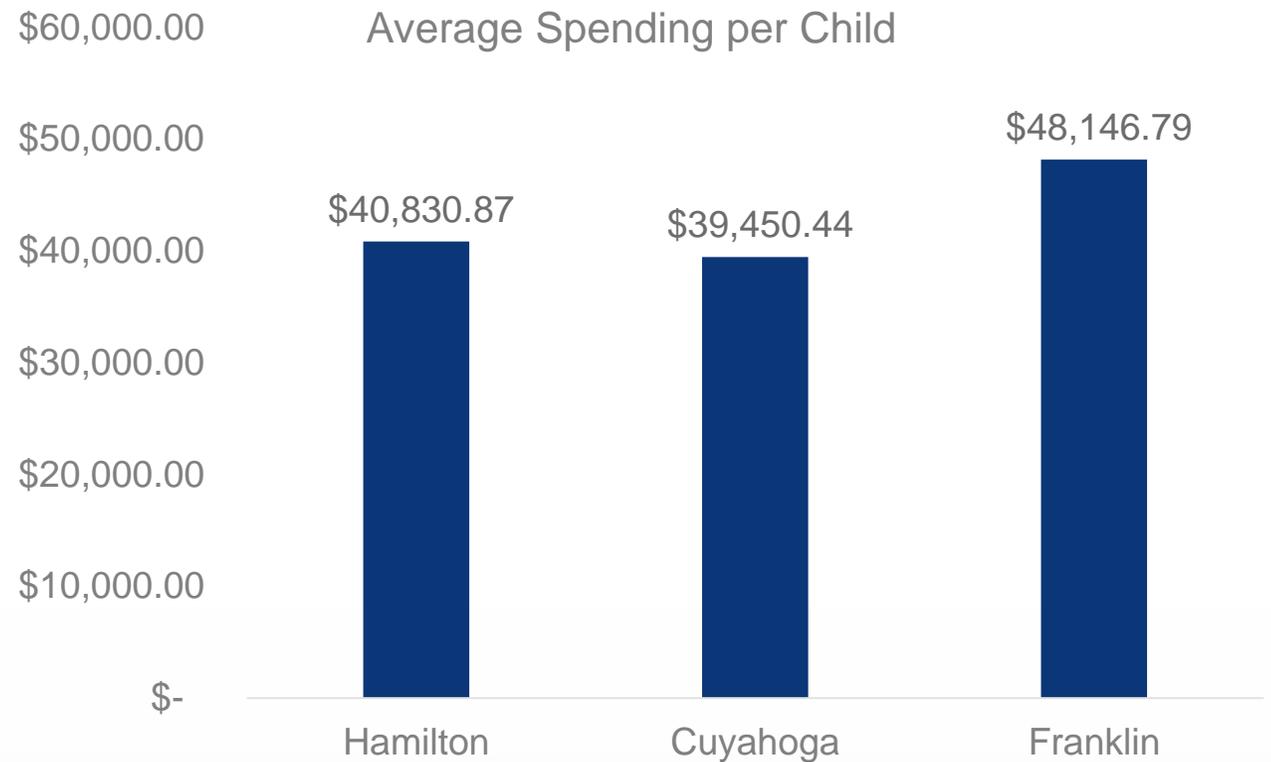
Does not Meet National
Benchmark



Children and Families Served and Expenditures

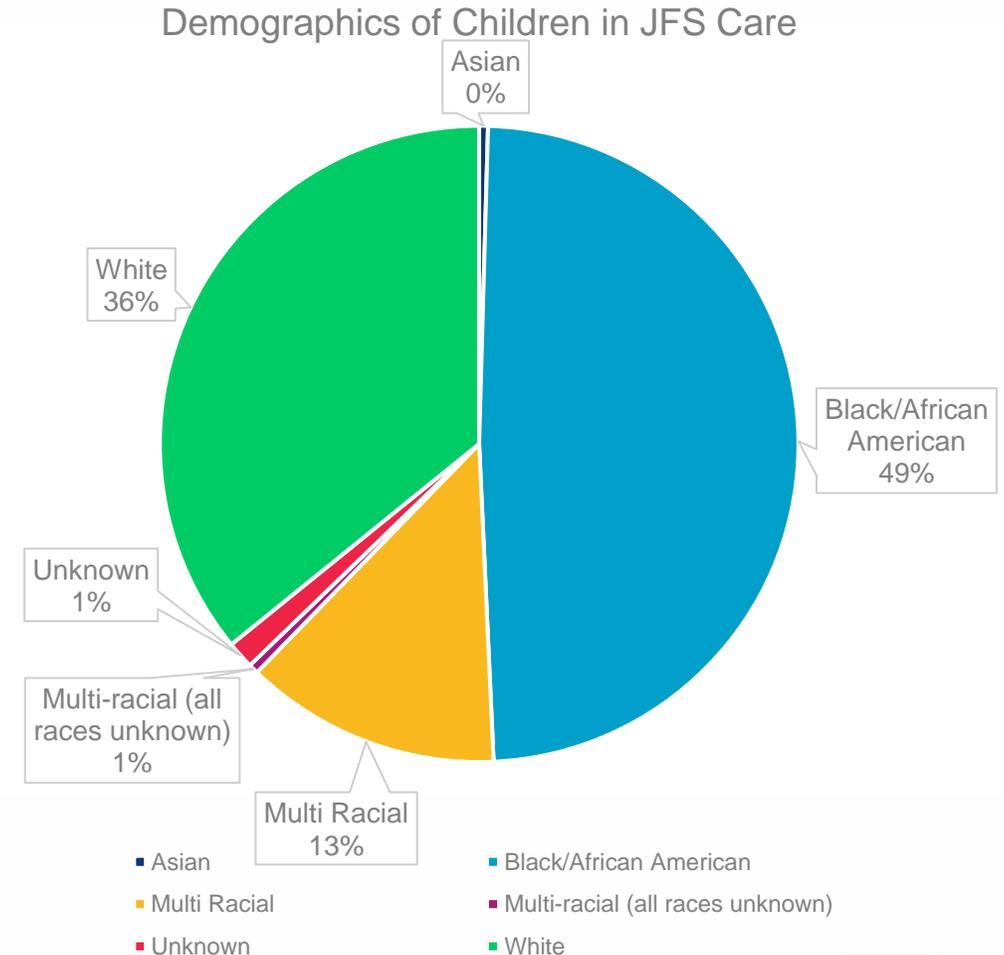
The table and chart below provide an overview of both the total number of children in out of home care as well as the total expenditures for each agency. **This data is from 2018 -- the most recent data available through PCSAO -- which is prior to passage of the most recent levy.** While Franklin County exceeds Hamilton and Cuyahoga Counties in all three areas, Franklin County also has a larger population. Franklin County also spends more per child compared to both Hamilton and Cuyahoga counties.

| | Hamilton | Cuyahoga | Franklin |
|------------------------------|---------------|---------------|---------------|
| County Population | 817,500 | 1,235,000 | 1,317,000 |
| Children in Out of Home Care | 3,407 | 3,526 | 4,397 |
| Expenditures | \$139,110,764 | \$139,102,247 | \$211,701,417 |



Children and Families Served Demographics

- The chart on the right-hand side of the page shows the demographic breakdown of children currently (as of April 2021) in JFS care in Hamilton County.
- In 2000, 70% of children in JFS care were Black or African American, and in 2017 it was 50% -- compared to 49% in 2020.
 - *PCG did not collect information in previous reports related to other races or ethnicities.*
- JFS has implemented several initiatives in recent years to address racial disparities during the screen-in process, which include:
 - Implicit bias and equity training;
 - Performing blind screenings
 - Participating in "Impact U" Training to study the intake and ongoing process and observe where bias occurs and developing interventions to address bias.

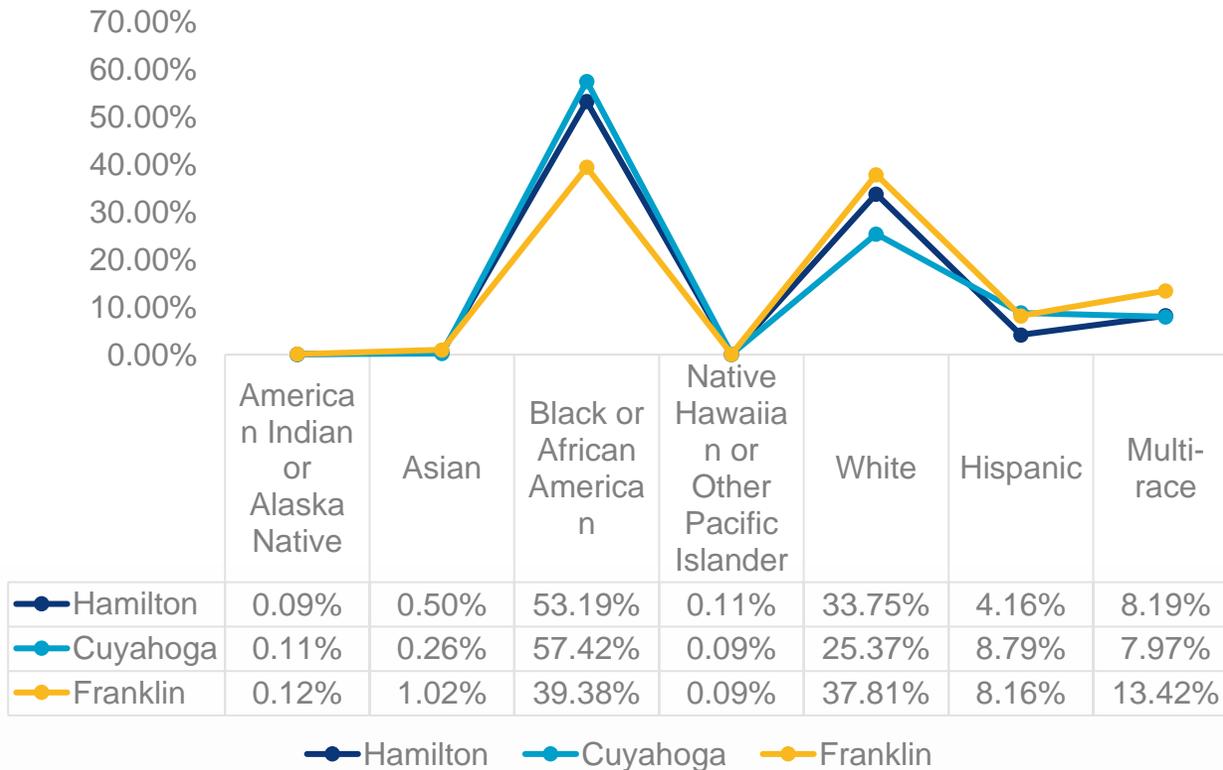


Children and Families Served Demographics

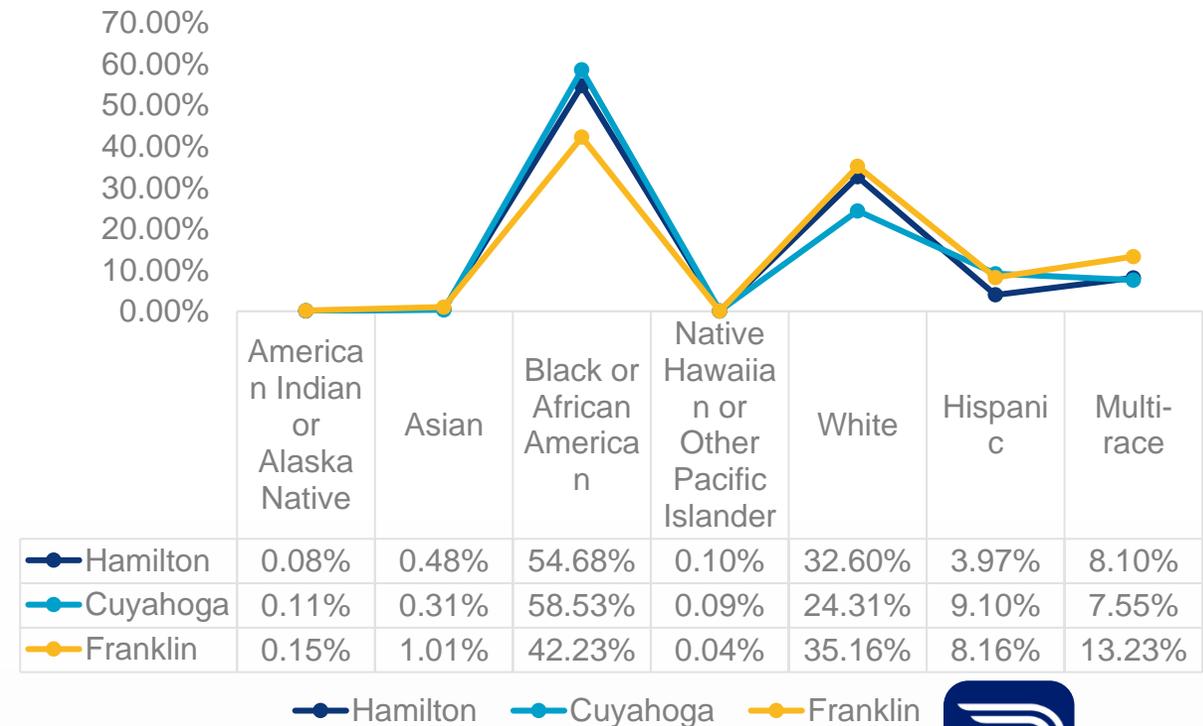
The chart below shows the total number of reports received (e.g., hotline calls) by each county child welfare agency by race. In Hamilton County, a disproportionate number of calls are received for children who are Black or African American, American Indian or Alaskan Children, Native Hawaiian or Pacific Islander, and Multi-race.

The chart below shows the total number of reports accepted (e.g., screened-in) by each county child welfare agency by race. In Hamilton County, a disproportionate number of children are screened-in for children who are Black or African American, Native Hawaiian or Pacific Islander, and Multi-race.

Percent of Children in CPS Reports by Race and County



Percent of Children with Accepted Referrals by Race and County



Children and Families Served Demographics

The table below shows each county's average screen-in rate and the percent increase or decrease from the average for each race. The average screen-in rate, highlighted in yellow, is generated by dividing the total number of accepted reports by the total number of reports received.

While Hamilton County screens in a higher proportion of Black or African American children than children of other races, they only screen those children in at a 2% higher margin than the average screen in rate. Cuyahoga County screens in children who are Asian, Black or African American and Hispanic at a higher rate than average; and Franklin County screens in children who are American Indian or Alaska and Black or African American at a higher rate than average.

| County | Avg. Screen-in Rate | American Indian or Alaska Native | Asian | Black or African American | Native Hawaiian or Other Pacific Islander | White | Hispanic | Multi-race |
|----------|---------------------|----------------------------------|-------|---------------------------|---|-------|----------|------------|
| Hamilton | 69% | -11% | -2% | +2% | -10% | -3% | -4% | -1% |
| Cuyahoga | 71% | -2% | +14% | +2% | = | -3% | +3% | -4% |
| Franklin | 49% | +13% | = | +4% | -25% | -3% | = | = |

VI. Financial Analysis

Financial Overview

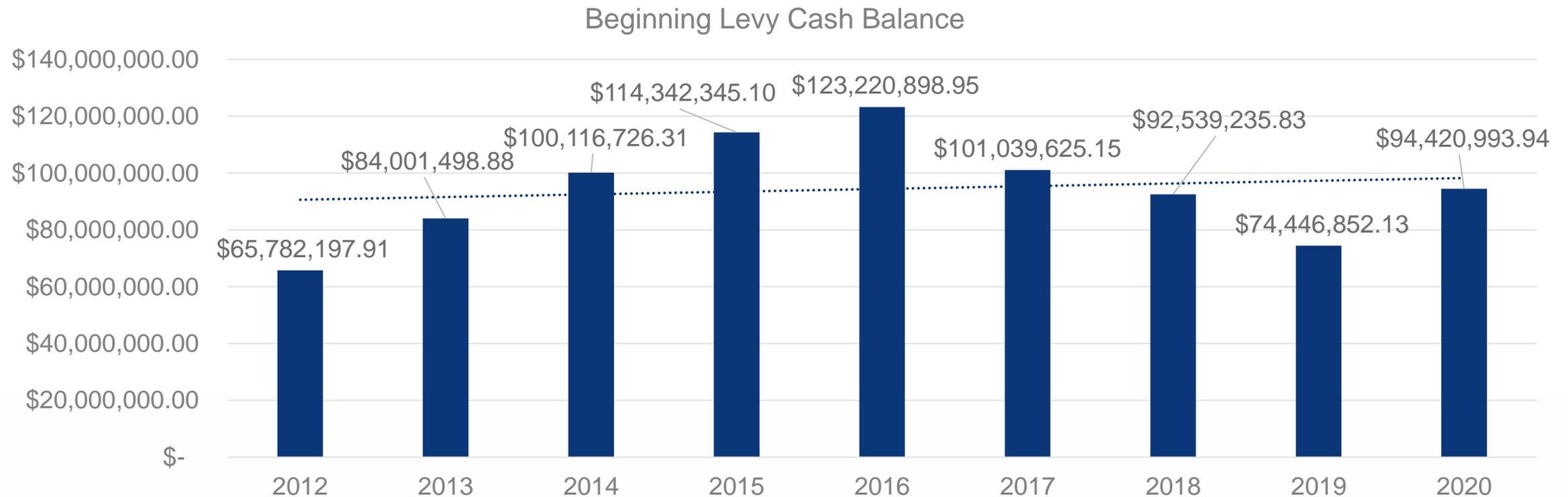
| | |
|---|--|
| Total JFS Budget (2021) | \$232,815,172 |
| JFS Children's Services Budget (2021) | \$126,428,473 |
| JFS Children's Services Expenditures (2021)* | \$107,149,482 |
| Largest Children's Services Expenditures by Percentage | <ul style="list-style-type: none"> - Out of Home Care (48%) - Staff and Overhead (23%) |
| Total JFS Employees | 820 |
| JFS Children's Services Employees | 362 |

*estimate



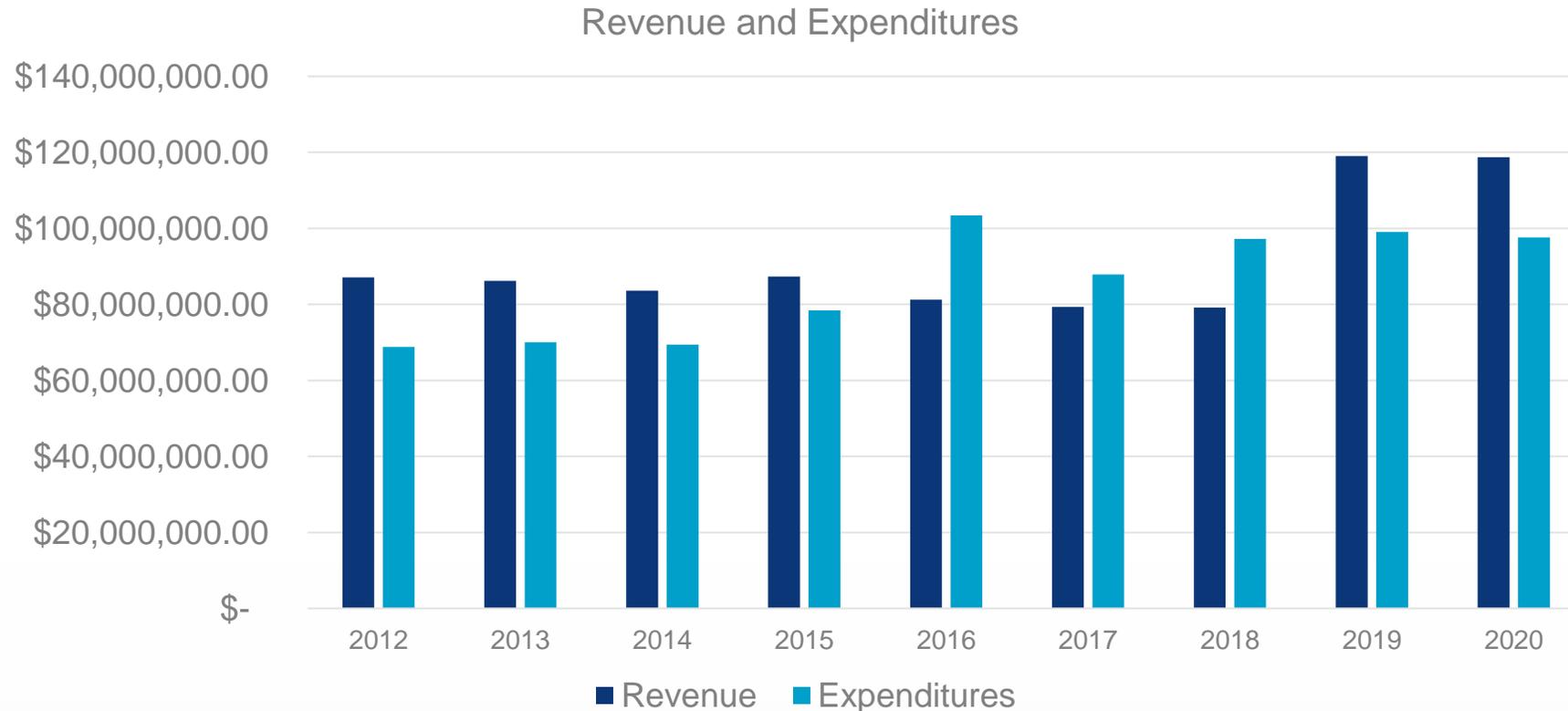
Levy Overview

Since 2012, the levy balance has increased from \$65MM to \$94MM or 44%, or at an average rate of 5% per year. The exception to the increase in levy growth was from 2017-2019, a time period where JFS faced a large increase to the number of children in custody and prior to the increase in millage to the Children's Services Levy. It is recommended that the levy balance is never less than \$25MM - \$30MM. JFS would have to maintain an average annual deficit of \$17M to reach a balance a levy balance of \$30MM in five years.



Financial Overview

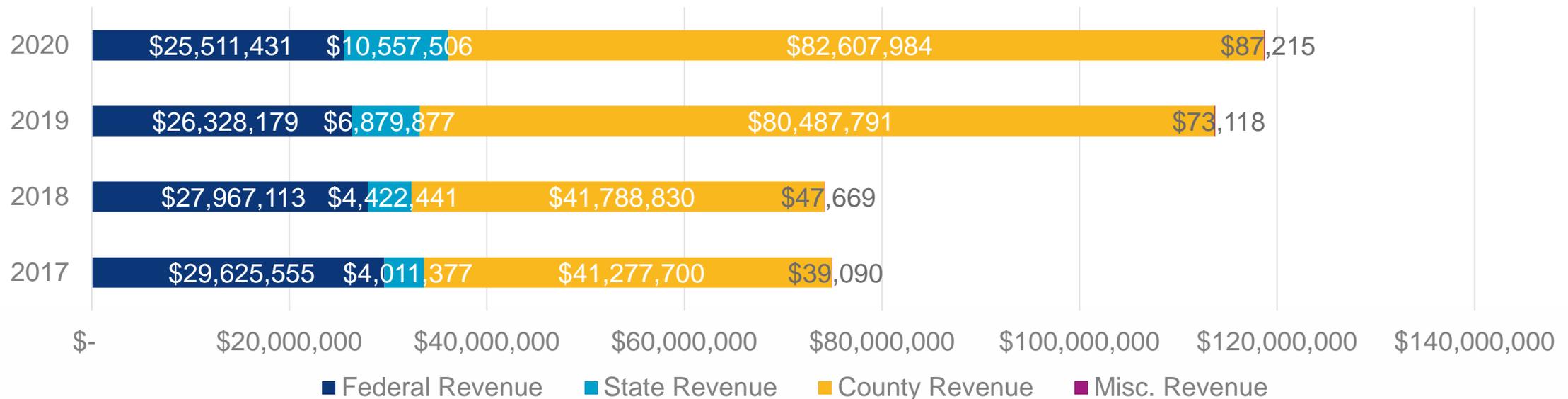
- On average JFS's revenue is \$5.5MM more than their total expenditures each year.
- From 2016-2018, JFS faced major deficits due to a large increase to the number of children entering JFS care – which was offset by an increase to the Children's Services Levy in 2019.



Revenue Analysis

- From 2017 to 2020, Federal revenue decreased by \$4.1MM – largely due to changes in Title IV-E through the end of the Title IV-E Waiver.
- From 2017, to 2020, State revenue increased by \$6.5MM – the Governor recently doubled the state’s allocation as well as provided an additional allocation to help meet the needs of kids in care.
- Nearly all the total budget increase has come from increase in the levy. The levy pays for most programs as well as the matching portion of several federal programs (i.e., Title IV-E, Title IV-B, Child Support).

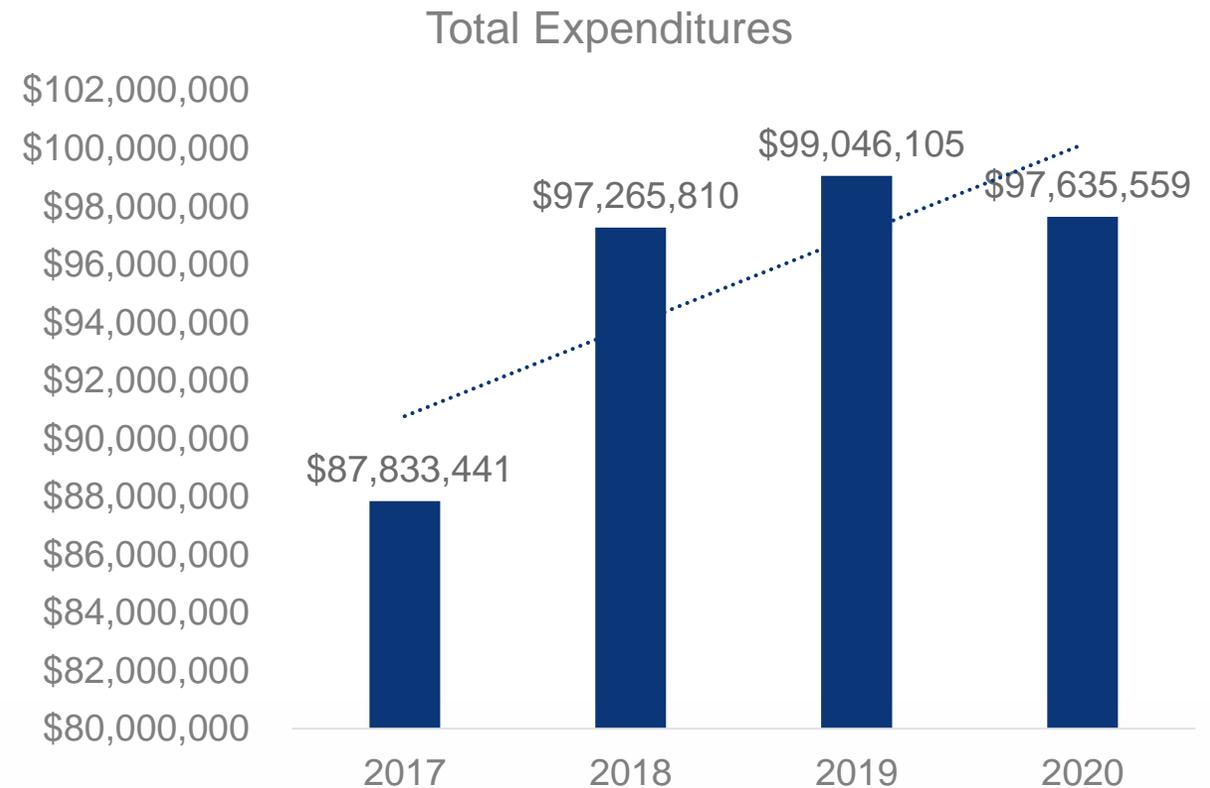
Revenue by Type



Expenditure Analysis

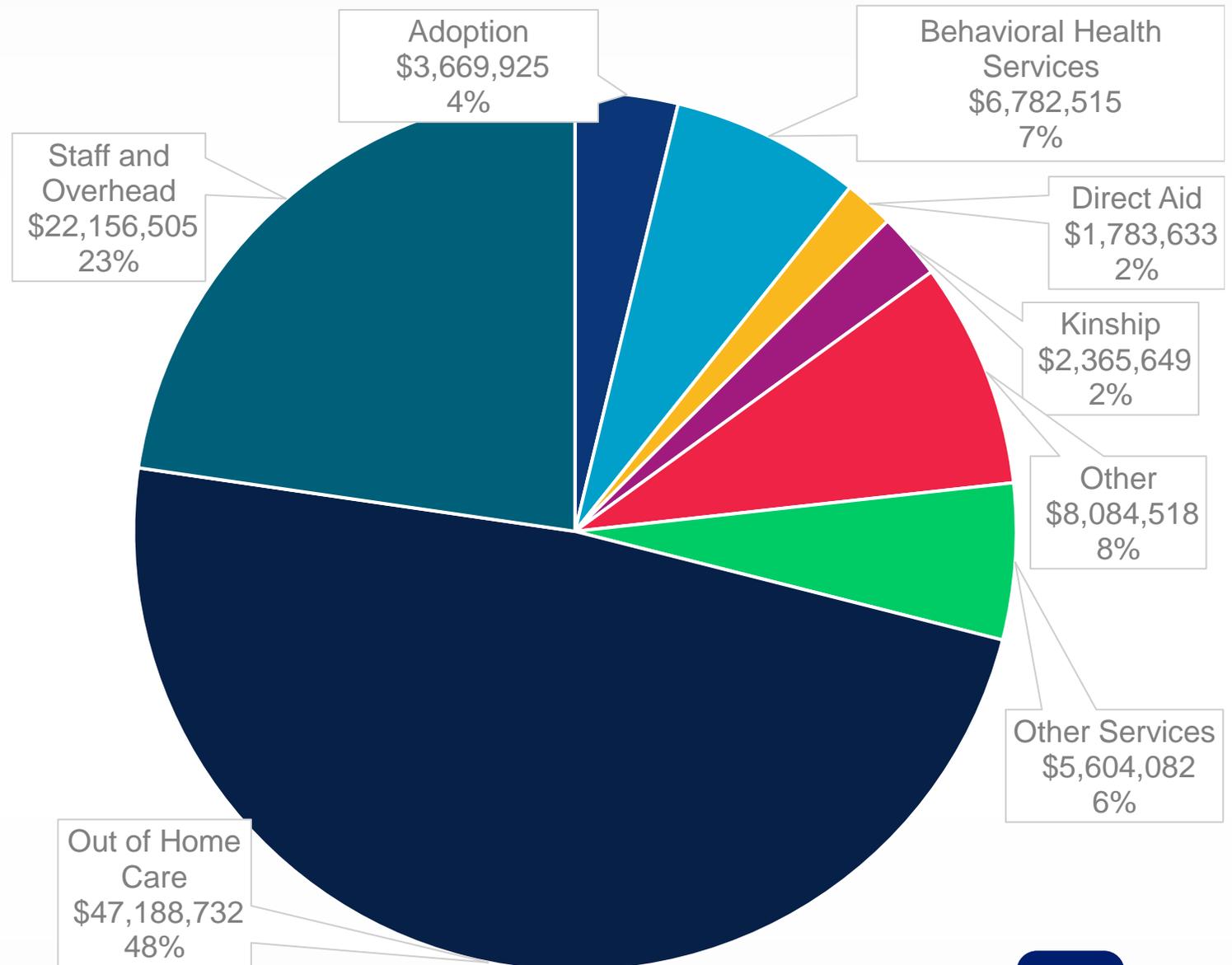
JFS expenditures have increased by 11% since 2017 – from \$87.8MM to \$97.6MM. The table below shows which expenditure line items have seen the largest growth by percentage from 2017 – 2020.

| Line Item | % Change | \$ Change |
|--|----------|-----------------|
| FAIR Program (<i>single point of entry to access behavioral health services</i>) | 191.9% | \$ 354,304.19 |
| Tax Settlement | 110.9% | \$ 554,082.62 |
| Adoption Assistance | 95.8% | \$ 1,718,904.72 |
| Dependency Court | 49.4% | \$ 396,911.50 |
| Social Security Processing | 41.6% | \$ 34,138.27 |
| Vouchers and Other Assistance | 40.8% | \$ 476,149.87 |
| Kids in School Rule | 33.9% | \$ 116,780.97 |
| Child Support Match | 21.1% | \$ 191,271.00 |
| Children's Services Administration | 18.0% | \$ 3,378,808.09 |



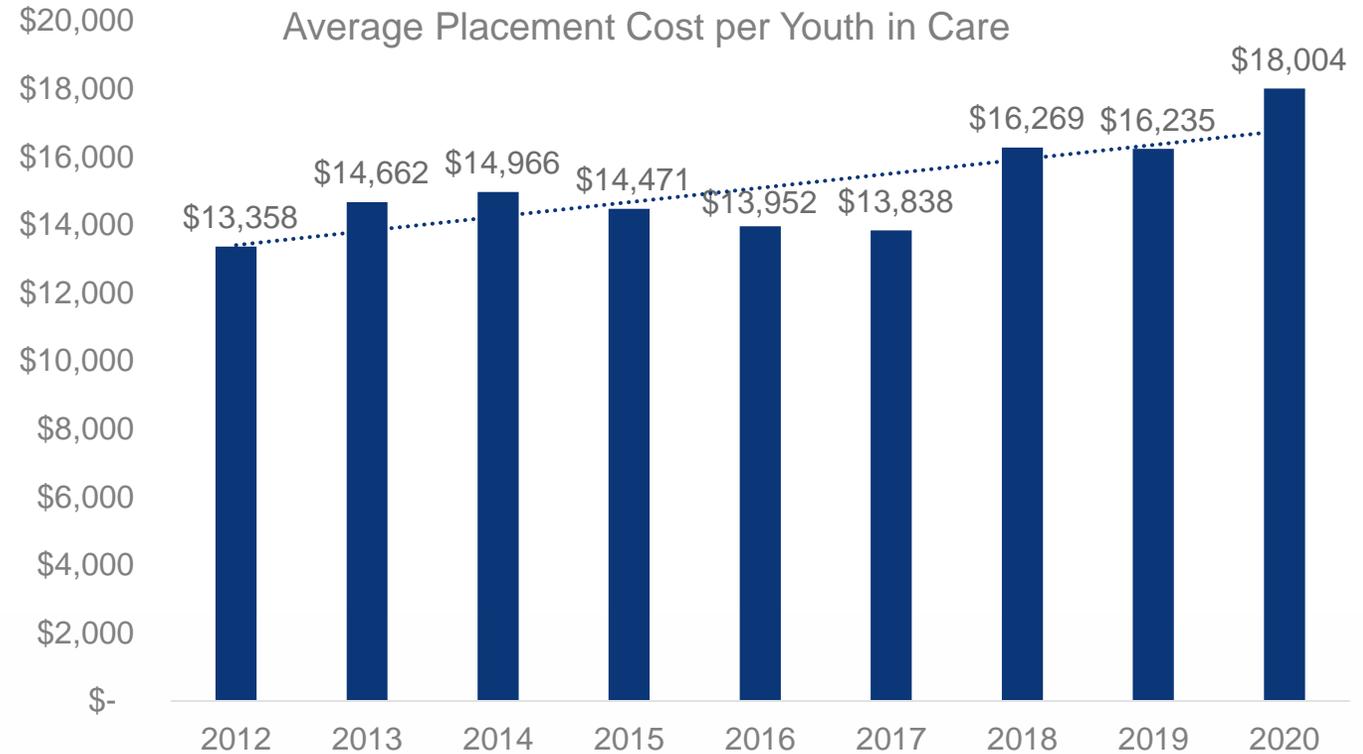
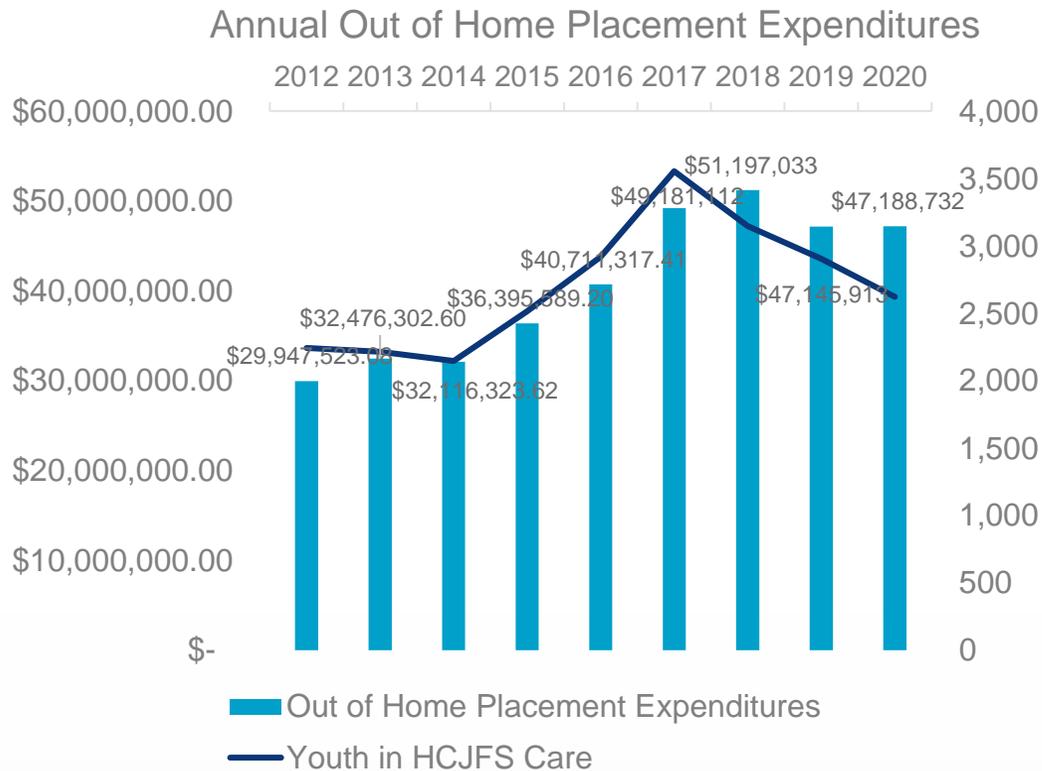
Expenditure Categories

- JFS expenditures have increased by 11% since 2017 – from \$87.8MM to \$97.6MM.
- The pie chart breaks down JFS expenditures by major category. The chart illustrates the largest cost drivers for JFS are out of home care followed by staff and overhead. Combined, these costs make up 71% of total JFS expenditures.



Placement Expenses

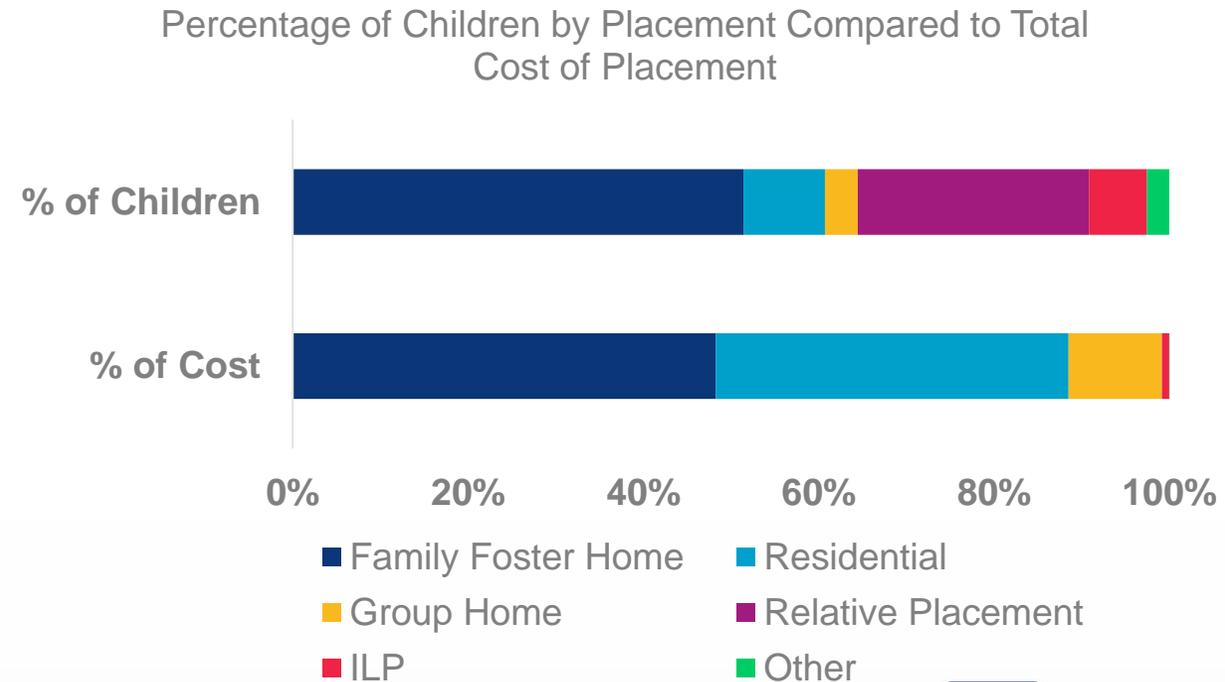
- Out of home placement expenditures are the leading cost driver for JFS and makes up nearly 50% of total JFS expenditures.
- Annual out of home expenditures per child have increased by 35% since 2012, or 4.3% per year on average.



Placement Expenses by Provider Type

Out of Home Expenditures are the biggest driver of costs for JFS. The table below shows that JFS spends the most total dollars on Family Foster Homes and has the highest proportion of children in this placement type as well. However, the second highest cost bucket are residential providers, comprising 40% of total costs; however, only 9.3% of children in JFS custody are placed in that setting. While nearly 7% of children in JFS custody are placed in Independent Living Placements (ILP), this setting only accounts for 1% of total funding.

| Out of Home Expenditure Type | Approximate Annual Cost | Percent of Total Cost | Percent of Total of Children |
|------------------------------|-------------------------|-----------------------|------------------------------|
| Family Foster Home | \$14,758,896.48 | 48% | 51% |
| Residential | \$12,308,968.12 | 40% | 9% |
| Group Home | \$3,258,414.20 | 11% | 4% |
| Relative Placement | \$11,815.60 | 0% | 26% |
| ILP | \$238,414.12 | 1% | 7% |
| Other | \$5,905.20 | 0% | 4% |



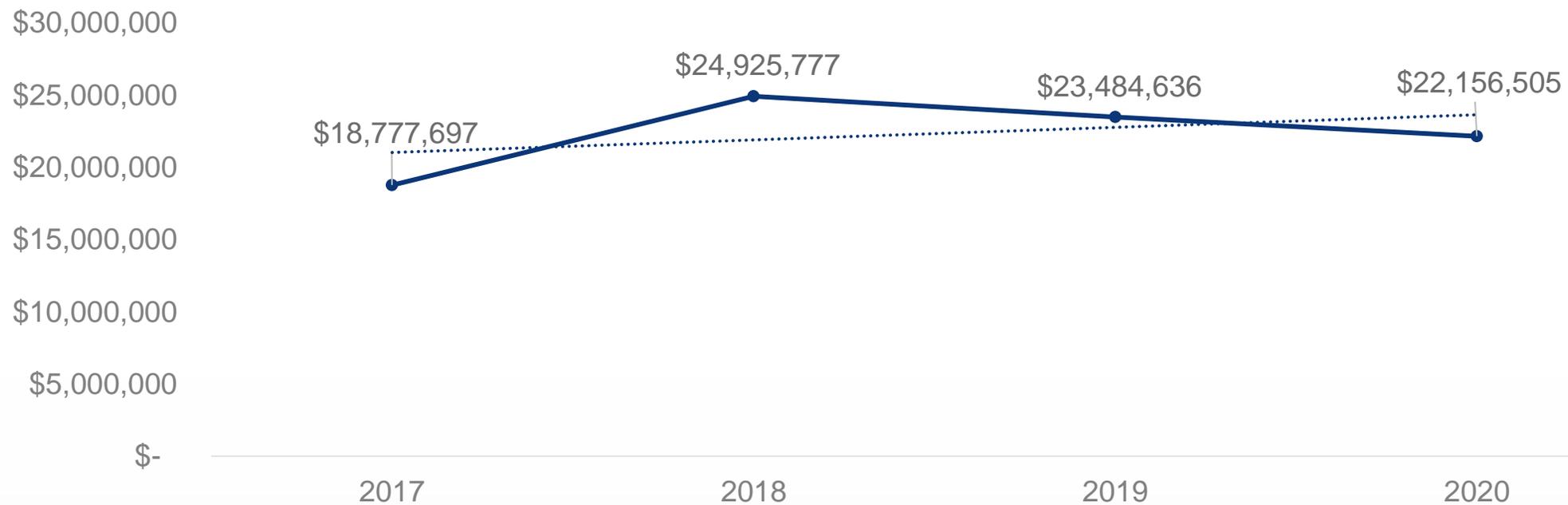
*Kinship stipends are paid through a different budget line item and therefore are not included in this analysis



Administration Expenditures

- Children's Services Administration Expenses comprise 23% of overall JFS expenditures.
- Since 2017, these expenditures have increased by 18%, or by an average of 6% each year.
- These costs are driven by a 3% increase in total JFS positions as well as a 5% decrease in overall vacancy rates.

Children's Services Administration Expenses



VII. Summary of Key Observations

Strengths of Children's Services

Improved internal communication

Focus on equity and inclusion

Focus on educational needs of youth in care

Safety Culture

Solution-oriented

Collaboration with external partners

Focus on trauma and its effects on staff

Kinship stipend

Focus on family voice

Investment by leadership in making improvements within the agency

Increase use of material assistance to meet family's immediate needs during the pandemic

Focus on community engagement and outreach

Collaboration with Cincinnati Children's Hospital

Safe Sleep Campaign

"Committed to moving beyond mandates -- leader on prioritizing educational and medical needs for kids in foster care." - Stakeholder



Areas for Continued Improvement of Children's Services

Family First
Prevention Services
Act preparation*

Supports for older
youth and youth
transitioning

Recruitment and
retention of staff *

Supervisory training
in "people
management"*

Caseload sizes

Referral and intake
process required
through FAIR and
HOPE

Community-based
provider capacity,
and in-home
services

Deficiencies in
affordable housing
and childcare
options in the
community

Interventions and/or
assistance available
to families

Organizational
supports such as
administrative staff
and technology

Diversity and cultural
sensitivity training of
providers

Support for diversity,
equity and inclusion
moving forward*

* Denotes active efforts in progress



VIII. Recommendations

Recommendations Summary

| Recommendations | |
|-----------------|---|
| 1. | Maintain current Children's Services levy millage and utilize current levy reserves to plan offsets for Title IV-E revenue loss and increased expenditures due to the Family First Prevention Services Act. |
| 2. | Expand efforts to increase staff recruitment and retention. |
| 3. | Increase organizational supports to caseworkers for the completion of administrative duties. |
| 4. | Continue progress with diversity initiatives to address disproportionality and expand further to support equity and inclusion. |
| 5. | Increase services and supports for the older youth in foster care population. |
| 6. | Increase capacity of community-based programming and expansion of the current service array. |
| 7. | Expand community health initiatives to further address well-being for all populations of children served. |
| 8. | Increase the availability of concrete goods, material assistance and other provisional services to families in need. |
| 9. | Increase supports for Safety Culture. |
| 10. | Enhance communication, collaboration and partnerships with community members and stakeholders. |



Recommendation: 1

| | |
|----------------------------------|---|
| Recommendation | Maintain current Children's Services levy millage and utilize current levy reserves to plan offsets for Title IV-E revenue loss and increased expenditures due to the Family First Prevention Services Act. |
| Why? | <ul style="list-style-type: none"> • There are many unknowns as to how FFPSA will affect future Title IV-E revenue and agency budgets. • There are several cost drivers associated with FFPSA implementation: QRTP requirements, QRTP assessment, training, admin costs etc. • Payments will no longer be paid on behalf of a Title IV-E eligible child placed in a childcare institution (CCI) after the 14th day, unless the placement setting meets certain requirements. |
| How? | <ul style="list-style-type: none"> • Utilize current levy reserve to help offset foreseen Title IV-E revenue loss. • Monitor the reserve over the next three years to determine the full impact. |
| Cost Impact (2022 – 2026) | \$0 (no increase to the Children's Services Levy revenue) Estimated \$5MM federal Title IV-E revenue loss annually |

Recommendation: 2

| | |
|--------------------------------------|---|
| Recommendation | Expand efforts to increase staff recruitment and retention. |
| Why? | <ul style="list-style-type: none"> • The assessment caseload size is more than double the national recommendation. • Ongoing case worker case loads have decrease, but with FFPSA prevention services implementation their case loads will likely increase. • Cases with multiple case workers (case transfer) due to turnover experience more negative outcomes, i.e., longer assessment timeframes, longer length of stay in foster care, decrease likelihood of achieving permanency. |
| How? | <ul style="list-style-type: none"> • Additional support could include increased wages, sign on or retention bonuses, and/or tuition reimbursement or student loan re-payment program. • Increased focus should be on investigation workers whose caseload sizes are well above the standard. • Since JFS does not have an internal Human Resources Department, ensure timely review and analysis of exit surveys and utilize data collected from Hamilton County Human Resources to identify reasons for turnover. • Survey current staff to help determine reasons for turnover. |
| Cost Impact (2022 – 2026) | \$10.0MM |

Recommendation: 3

| | |
|--------------------------------------|--|
| Recommendation | Increase organizational supports to caseworkers for the completion of administrative duties. |
| Why? | <ul style="list-style-type: none"> • Staff reported spending an extraordinary amount of time on ancillary tasks such as paperwork, data entry and other supplementary procedural tasks. • Research shows that workload issues negatively impact retention and overall agency outcomes. • Providing supports for completion of administrative tasks can directly assist with staff retention and allows staff to spend more direct time with families. |
| How? | <ul style="list-style-type: none"> • Consider investing in supporting staff efficiencies, such as hiring administrative support staff and maximizing the use of technology, such as mobility solutions, dictation software, document imaging, etc. to further support caseworkers. • Complete a time study to determine the job duties completed by caseworkers in order to identify duties for reassignment and time spent completing task in order to determine the administrative staff needed. • Increase internal outreach to staff to ensure they are aware of all organizational supports (such as transportation and visitation resources) currently available and expand services as needed. |
| Cost Impact (2022 – 2026) | \$4.0MM |



Recommendation: 4

| | |
|--------------------------------------|--|
| Recommendation | Continue progress with diversity initiatives to address disproportionality and expand further to support equity and inclusion. |
| Why? | <ul style="list-style-type: none"> • Hamilton County screens in a higher proportion of Black children than children of other races. • There is an over representation of black and brown families in the foster care population nationally, and these youth see longer lengths of stay. • Making it a priority to focus on staff diversity is effective as seen by the diversity in the Children's Services staff population. |
| How? | <ul style="list-style-type: none"> • Develop a succession plan for the work completed by Intersections. • Consider the need for a Diversity, Equity and Inclusion Officer specific to Children's Services from outside the agency at the management level to continue momentum. • Engage external partners and community members in diversity initiatives that build capacity to address the disproportionality of the youth and families in foster care. |
| Cost Impact (2022 – 2026) | \$3.0MM – \$4.0MM |

Recommendation: 5

| | |
|----------------------------------|---|
| Recommendation | Increase services and supports of the older youth in foster care population. |
| Why? | <ul style="list-style-type: none"> • Youth nearing transition out of foster care are a particularly vulnerable population. Youth who age out exhibit elevated rates of dropout, teen pregnancy, crime/recidivism, and homelessness. • Over 20% of all youth in foster care are 16 or older in Hamilton County. • 5% more children in Hamilton county age out of foster care in Hamilton County than the national average. |
| How? | <ul style="list-style-type: none"> • Consider the creation of a specialized unit focused on older youth with case workers dedicated and well informed about the needs of and the resources available for these youth. • Increase funding for independent living and transitional living programs and services for the older youth population. • Expand mentoring and other independent living supports to all youth. • Establish financial guardians for youth in care when applicable. |
| Cost Impact (2022 – 2026) | \$12.0MM – \$14.0MM |

Recommendation: 6

| | |
|--------------------------------------|---|
| Recommendation | Increase capacity of community-based programming and expansion of the current service array. |
| Why? | <ul style="list-style-type: none"> • There is a shortage of providers willing to provide intensive in-home services. • There are waitlists for some behavioral health services accessible through HOPE and FAIR. • There is a new opportunity through FFPSA to seek reimbursement of EBPs in the state's prevention plan. • There is an increased number of youth who exhibit severe behavioral issues. Youth and families need services that meet their individual needs and have been proven effective. |
| How? | <ul style="list-style-type: none"> • Identify EBPs that would be effective in addressing the needs of children and families in Hamilton County and invest in those EBPs through a blended funding model of federal, state and county funds that are based on implementation of an in-home service model. • Utilize FFPSA administrative training reimbursement opportunities to train providers on needed EBPs, and train staff on the identification of families that would be best served by the EBP. • Work with agency and community-based partners to identify solutions to address waitlists for accessing services through HOPE and FAIR. |
| Cost Impact (2022 – 2026) | \$7.0MM – \$8.0MM |



Recommendation: 7

| | |
|--------------------------------------|---|
| Recommendation | Expand community health and education initiatives to further address well-being for all populations of children served. |
| Why? | <ul style="list-style-type: none"> • Research shows the social and emotional well-being of children in care has long-term consequences. • Trauma-informed systems with a focus on health and educational outcomes are critical to the well-being of children and families. • Hamilton County has many initiatives to address safety and permanence, but stakeholders reported a need to expand focus on child and family well-being. |
| How? | <ul style="list-style-type: none"> • Expand the Comprehensive Health Evaluations for Cincinnati's Kids (CHECK) Foster Care Center program to prevention services candidates, and/or youth receiving in-home services. • Expand in-home nursing services and staff with the goal of building a team of trauma-informed nurses. • Expand educational supports in more school districts within Hamilton County. |
| Cost Impact (2022 – 2026) | \$3.0MM – \$5.0MM |

Recommendation: 8

| | |
|--------------------------------------|--|
| Recommendation | Increase the availability of concrete goods, material assistance and other provisional services to families in need. |
| Why? | <ul style="list-style-type: none"> • Studies have found a direct correlation between family poverty and involvement in the child welfare system. Child poverty rates in Hamilton County are estimated at 23.6% and 40.4% in Cincinnati. • Stakeholders reported a lack of affordable housing options in Hamilton County • Concrete resources provide opportunities to alleviate the need for removal and support reunification efforts. |
| How? | <ul style="list-style-type: none"> • Increase internal communication about vouchers, transportation services and childcare policies to both caseworkers and supervisors for the accessibility of concrete goods and services, and remove barriers to accessing vouchers, where necessary. • Analyze the need to expand emergency childcare / daycare, respite services and housing supports for families to access when needed. • Engage with community stakeholders and partners to determine where opportunities exist to address these needs e.g., Safe Homes project, Family Housing Partnership, Safe Care program, Shelter Diversion programs, etc. • Engage JFS Planning Committee to develop and fund a plan to address family homelessness and help keep children from entering JFS care. |
| Cost Impact (2022 – 2026) | \$5.0MM – \$6.0MM |



Recommendation: 9

| Recommendation | Increase supports for Safety Culture |
|--------------------------------------|--|
| Why? | <ul style="list-style-type: none"> • Safety Coordinators do not have the capacity to reach the goal of screening 5-7% of cases. • There is need for increase capacity to train supervisors as the current CORE training does not address managing staff. • There is a need for increased capacity to support ongoing case managers on implementation of the safety model. |
| How? | <ul style="list-style-type: none"> • Develop a training for managers. This will allow for additional practice guidance needed by field staff. • Add staff and supervisors to the Safety Culture department to support embedding the model and reaching the goals set by the department. |
| Cost Impact (2022 – 2026) | \$5.0MM |

Recommendation: 10

Recommendation **Enhance communication, collaboration and partnerships with community members and stakeholders.**

Why?

- Stakeholders reported a perceived gap in linking services to children and families in the community. There is a gap in communication of those services and providers available to help families in crisis.
- Stakeholders reported a lack of trust between the community and JFS. Partnerships within local communities can help to improve the perceptions of JFS and provide families with a better understanding of local resources.
- There are many organizations and non-profits that want to help vulnerable children and families that JFS can benefit from in building these relationships to expand services.

How?

- Build linkages and referral processes for families to receive services from community-based organizations and clearly communicate those processes through the JFS website and through community organizations.
- Invest resources into local communities or local school districts by co-locating JFS staff or contracted providers within those communities. Consider creating specific positions, such as community liaisons, or navigators to support families in need of services. JFS recently hired a position for child welfare community engagement.
- Build relationships with existing community liaisons/community organizers
- Create media campaigns to raise awareness of services and programs to support families in need.

Cost Impact
(2022 – 2026) \$500K



IX. Fiscal Scenarios for Next Levy Cycle

Scenario 1: Maintain Levy Millage with Current Service Level

Scenario 1 shows the total JFS Children's Services **Projected** Revenue and Expenditures by Year for the next five (5) fiscal years. This projection **assumes current levy millage and service levels are maintained for all JFS services**. Scenario 1 results in a \$73MM ending cash balance in 2026 with no implementation of the Recommendations.

| Scenario 1 | 2022 | 2023 | 2024 | 2025 | 2026 |
|----------------------------|---------------|---------------|---------------|---------------|---------------------|
| Total Revenue | \$113,377,078 | \$110,815,454 | \$110,463,895 | \$111,683,450 | \$113,089,150 |
| Total Expenditures | \$119,460,472 | \$121,602,562 | \$123,380,651 | \$126,722,363 | \$129,136,775 |
| Ending Cash Balance | \$128,745,168 | \$117,958,061 | \$105,041,305 | \$90,002,393 | \$73,954,769 |

Scenario 2: Maintain Levy Millage with Implementation of Recommendations

Scenario 2 shows the total JFS Children's Services **Projected** Revenue by Year for the next five (5) fiscal years. This projection **assumes maintaining the current levy millage with the implementation of the Recommendations**. Scenario 2 results in a \$24MM ending cash balance in 2026 and allows for JFS to implement the Recommendations.

| Scenario 2 | 2022 | 2023 | 2024 | 2025 | 2026 |
|----------------------------|---------------|---------------|---------------|---------------|---------------------|
| Total Revenue | \$113,377,078 | \$110,815,454 | \$110,463,895 | \$111,683,450 | \$113,089,150 |
| Total Expenditures | \$122,409,720 | \$129,340,786 | \$134,130,568 | \$139,002,831 | \$144,852,796 |
| Ending Cash Balance | \$125,795,921 | \$107,270,590 | \$83,603,917 | \$56,284,537 | \$24,520,892 |

Scenario 3: Reduced Levy Millage with Current Service Level

Scenario 3 shows the total JFS Children's Services *Projected* Revenue and Expenditures by Year for the next five (5) fiscal years. This projection **assumes current service levels are maintained for all JFS services and reduces the property tax levy by \$10MM per year.** Scenario 3 provides a \$30MM ending cash balance in 2026 with no implementation of the recommendations.

| Scenario 3 | 2022 | 2023 | 2024 | 2025 | 2026 |
|----------------------------|---------------|---------------|---------------|---------------|---------------------|
| Total Revenue | \$104,488,522 | \$101,834,880 | \$101,973,651 | \$102,896,992 | \$104,336,725 |
| Total Expenditures | \$119,460,472 | \$121,602,562 | \$123,380,651 | \$126,722,363 | \$129,136,775 |
| Ending Cash Balance | \$119,856,612 | \$100,088,930 | \$78,681,930 | \$54,856,559 | \$30,056,509 |

Scenario 4: Reduced Levy Millage with Implementation of Recommendations

Scenario 4 shows the total JFS Children's Services *Projected* Revenue and Expenditures by Year for the next five (5) fiscal years. This projection **assumes the implementation of the Recommendations and reduces the property tax levy by \$10MM per year.** Scenario 4 results in a negative ending cash balance in 2026.

| Scenario 4 | 2022 | 2023 | 2024 | 2025 | 2026 |
|---------------------|---------------|---------------|---------------|---------------|-----------------------|
| Total Revenue | \$104,488,522 | \$101,834,880 | \$101,973,651 | \$102,896,992 | \$104,336,725 |
| Total Expenditures | \$122,409,720 | \$129,340,786 | \$134,130,568 | \$139,002,831 | \$144,852,796 |
| Ending Cash Balance | \$116,907,364 | \$89,401,459 | \$57,244,542 | \$21,138,703 | (\$19,377,368) |

Recommendation: Scenario 2

PCG recommends Scenario 2 to Maintain Levy Millage with Implementation of Recommendations. The table below shows the specific line-item expenses at increased service levels which align to the Recommendations in Section VIII of this report. If all recommendations are implemented, it will cost approximately **\$50MM – \$57MM** over the next levy period.

| TOTAL COST IMPACT | | |
|---|--|---------------------------|
| Line Item | Recommended Increase | Cost Impact (2022 – 2026) |
| Medical, Food, Rent, Utilities, Furniture, Etc. (ESSA Vouchers) | Increase by 5% each year | \$5M – 6M |
| MCSA/HOPE/NON-HOPE | Increase by 5% each year | \$3M – \$4M |
| Independent Living Services / HEMI | Increase by 5% each year (baseline includes maintaining new level of Chafee funding) | \$8M – 12M |
| Mental Health - FAIR Program | Increase by 10% each year | \$1M |
| Children Services Administration | Increase by 10% each year | \$27M |
| Kids in School Rule (Legal Aid) | Increase by 10% each year | \$400K |
| Medical Services (CHMC) / Medicaid Consultant | One-time increase of 20% | \$200K |
| Nursing Consultation Services | Increase by 400-800K each year | \$2M – 3M |
| Intensive In - Home Services | Increase by 5% each year | \$500K |
| Prevention Services | New line item | \$2.5M |
| TOTAL COST | | \$50M – \$57M |

X. Appendix

Projected Revenue – Scenario 1 and Scenario 2

| Line Item | 2022 | 2023 | 2024 | 2025 | 2026 |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|
| IV-E Waiver Transition Funds | \$ 2,020,605 | - | - | - | - |
| IV-E Traditional / FCM Admin | \$ 10,771,978 | \$ 12,109,557 | \$ 13,319,568 | \$ 14,533,255 | \$ 15,773,333 |
| IV-E Admin. & Training | \$ 7,660,838 | \$ 7,885,431 | \$ 7,782,719 | \$ 7,980,824 | \$ 8,087,021 |
| Multi System Youth/Best Practice/Foster Parent Recruitment/AA COVID | \$ 1,000,000 | \$ 1,000,000 | \$ - | \$ - | \$ - |
| IV-E Contracts | \$ 940,527 | \$ 1,026,396 | \$ 1,075,905 | \$ 1,139,705 | \$ 1,205,242 |
| Title IV-B | \$ 663,484 | \$ 423,610 | \$ 424,178 | \$ 406,263 | \$ 426,724 |
| ESSA (Title IV-B) | \$ 494,410 | \$ 116,146 | \$ 316,309 | \$ 9,411 | \$ 216,657 |
| State Child Protective Allocation | \$ 5,848,930 | \$ 5,777,142 | \$ 5,611,512 | \$ 5,508,443 | \$ 5,363,666 |
| Chafee (Independent Living) | \$ 2,026,842 | \$ 489,132 | \$ 456,150 | \$ 470,486 | \$ 471,311 |
| Other allocation (grant) amounts | \$ 450,561 | \$ 459,882 | \$ 456,664 | \$ 458,853 | \$ 429,611 |
| Property Tax Levy | \$ 78,888,556 | \$ 78,980,575 | \$ 78,490,245 | \$ 78,786,459 | \$ 78,752,426 |
| Misc. Rev (SSA, VA, Child Support) | \$ 1,273,015 | \$ 1,163,045 | \$ 1,117,282 | \$ 1,089,236 | \$ 1,015,337 |
| Kinship Caregiver | \$ 700,000 | \$ 700,000 | \$ 700,000 | \$ 700,000 | \$ 700,000 |
| MCSA Funds from other County Departments | \$ 581,213 | \$ 628,420 | \$ 657,246 | \$ 544,397 | \$ 591,704 |
| Misc. Returns | \$ 56,119 | \$ 56,119 | \$ 56,119 | \$ 56,119 | \$ 56,119 |
| TOTAL | \$113,377,078 | \$110,815,454 | \$110,463,895 | \$111,683,450 | \$113,089,150 |

Projected Revenue – Scenario 3 and Scenario 4

| Line Item | 2022 | 2023 | 2024 | 2025 | 2026 |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|
| IV-E Waiver Transition Funds | \$ 2,020,605 | - | - | - | - |
| IV-E Traditional / FCM Admin | \$ 10,771,978 | \$ 12,109,557 | \$ 13,319,568 | \$ 14,533,255 | \$ 15,773,333 |
| IV-E Admin. & Training | \$ 7,660,838 | \$ 7,885,431 | \$ 7,782,719 | \$ 7,980,824 | \$ 8,087,021 |
| Multi System Youth/Best Practice/Foster Parent Recruitment/AA COVID | \$ 1,000,000 | \$ 1,000,000 | \$ - | \$ - | \$ - |
| IV-E Contracts | \$ 940,527 | \$ 1,026,396 | \$ 1,075,905 | \$ 1,139,705 | \$ 1,205,242 |
| Title IV-B | \$ 663,484 | \$ 423,610 | \$ 424,178 | \$ 406,263 | \$ 426,724 |
| ESSA (Title IV-B) | \$ 494,410 | \$ 116,146 | \$ 316,309 | \$ 9,411 | \$ 216,657 |
| State Child Protective Allocation | \$ 5,848,930 | \$ 5,777,142 | \$ 5,611,512 | \$ 5,508,443 | \$ 5,363,666 |
| Chafee (Independent Living) | \$ 2,026,842 | \$ 489,132 | \$ 456,150 | \$ 470,486 | \$ 471,311 |
| Other allocation (grant) amounts | \$ 450,561 | \$ 459,882 | \$ 456,664 | \$ 458,853 | \$ 429,611 |
| Property Tax Levy (reduced by \$10MM) | \$ 70,000,000 |
| Misc. Rev (SSA, VA, Child Support) | \$ 1,273,015 | \$ 1,163,045 | \$ 1,117,282 | \$ 1,089,236 | \$ 1,015,337 |
| Kinship Caregiver | \$ 700,000 | \$ 700,000 | \$ 700,000 | \$ 700,000 | \$ 700,000 |
| MCSA Funds from other County Departments | \$ 581,213 | \$ 628,420 | \$ 657,246 | \$ 544,397 | \$ 591,704 |
| Misc. Returns | \$ 56,119 | \$ 56,119 | \$ 56,119 | \$ 56,119 | \$ 56,119 |
| TOTAL | \$104,488,522 | \$101,834,880 | \$101,973,651 | \$102,896,992 | \$104,336,725 |

Projected Expenditures – Scenario 1 and Scenario 3

| Line Item | 2022 | 2023 | 2024 | 2025 | 2026 |
|---|--------------|--------------|--------------|--------------|--------------|
| TANF Mandated Share Transfer | \$3,531,838 | \$3,531,838 | \$3,531,838 | \$3,531,838 | \$3,531,838 |
| CSEA Match Transfer | \$796,228 | \$712,278 | \$749,072 | \$715,279 | \$636,091 |
| Dependency | \$1,200,000 | \$1,200,000 | \$1,200,000 | \$1,200,000 | \$1,200,000 |
| Hillcrest / JC out of home services | \$1,720,317 | \$2,496,668 | \$2,120,252 | \$2,512,347 | \$2,712,315 |
| Children Services Legal Services | \$1,812,219 | \$1,790,403 | \$1,792,846 | \$1,801,477 | \$1,795,034 |
| GAL | \$581,630 | \$639,793 | \$703,772 | \$774,150 | \$851,564 |
| Out Of Home Care (flat growth) | \$62,865,355 | \$65,899,748 | \$67,899,983 | \$69,679,871 | \$71,379,314 |
| Medical, Food, Rent, Utilities, Furniture, Etc. (ESSA Vouchers) | \$950,000 | \$950,000 | \$950,000 | \$950,000 | \$950,000 |
| Kinship Child Care | \$287,898 | \$228,978 | \$241,091 | \$280,837 | \$257,434 |
| Kinship Stipend | \$1,050,988 | \$840,790 | \$672,632 | \$538,106 | \$430,485 |
| Kinship Caregiver | \$700,000 | \$700,000 | \$700,000 | \$700,000 | \$700,000 |
| Adoption Assistance (Local Share) | \$3,700,000 | \$3,512,867 | \$3,293,489 | \$3,293,489 | \$3,293,489 |
| PASSS | \$75,000 | \$65,740 | \$67,739 | \$67,739 | \$67,739 |
| Non-Recurring Adoption | \$69,031 | \$69,031 | \$69,031 | \$69,031 | \$69,031 |
| MCSA/HOPE/NON-HOPE | \$4,997,795 | \$4,997,795 | \$4,997,795 | \$4,997,795 | \$4,997,795 |
| Independent Living Services / HEMI | \$2,292,500 | \$558,112 | \$558,112 | \$558,112 | \$558,112 |
| Tax Settlement Fee | \$1,094,141 | \$1,094,141 | \$1,094,141 | \$1,094,141 | \$1,094,141 |
| Mental Health - FAIR Program | \$626,557 | \$639,088 | \$651,870 | \$664,907 | \$678,206 |

| Line Item | 2022 | 2023 | 2024 | 2025 | 2026 |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|
| Gas Cards | \$84,415 | \$86,103 | \$87,825 | \$89,581 | \$91,373 |
| Background Checks/ Absent Parent located | \$344,384 | \$351,272 | \$358,297 | \$365,463 | \$372,772 |
| Children Services Administration | \$24,557,877 | \$24,708,885 | \$25,239,361 | \$25,998,915 | \$26,602,028 |
| Adoption Contracts/Services | \$171,882 | \$178,972 | \$190,296 | \$195,973 | \$203,849 |
| Miscellaneous | \$21,642 | \$21,642 | \$21,642 | \$21,642 | \$21,642 |
| Advertising | \$77,677 | \$77,677 | \$77,677 | \$77,677 | \$77,677 |
| Kids in School Rule (Legal Aid) | \$548,654 | \$605,758 | \$641,602 | \$690,764 | \$737,986 |
| Return SSI Checks | \$179,658 | \$169,022 | \$153,256 | \$181,300 | \$176,543 |
| Medical Services (CHMC)/ Medicaid Consultant | \$172,830 | \$180,247 | \$189,494 | \$186,523 | \$194,689 |
| Consulting/Safety Assess. | \$721,562 | \$774,825 | \$748,194 | \$761,510 | \$754,852 |
| Nursing Consultation Serv. | \$291,913 | \$293,178 | \$294,443 | \$295,708 | \$296,973 |
| Children w/Medical Handicaps | \$1,430,744 | \$1,326,238 | \$1,232,202 | \$1,209,378 | \$1,180,826 |
| Election Expenses/PCG Review | \$0 | \$150,000 | \$0 | \$150,000 | \$0 |
| Intensive In-Home Services | \$230,870 | \$209,084 | \$192,303 | \$186,598 | \$183,822 |
| Prevention | \$500,000 | \$500,000 | \$500,000 | \$500,000 | \$500,000 |
| Student Bus Transportation | \$216,234 | \$260,072 | \$302,332 | \$345,645 | \$388,256 |
| Visitation | \$938,192 | \$985,101 | \$1,034,356 | \$1,086,074 | \$1,140,378 |
| Non-Medicaid Transport. | \$595,816 | \$771,360 | \$796,555 | \$921,983 | \$980,589 |
| Legal Services/Claims | \$24,625 | \$25,857 | \$27,150 | \$28,507 | \$29,932 |
| TOTAL | \$119,460,472 | \$121,602,562 | \$123,380,651 | \$126,722,363 | \$129,136,775 |



Projected Expenditures – Scenario 2 and Scenario 4

| Line Item | 2022 | 2023 | 2024 | 2025 | 2026 |
|---|--------------|--------------|--------------|--------------|--------------|
| TANF Mandated Share Transfer | \$3,531,838 | \$3,531,838 | \$3,531,838 | \$3,531,838 | \$3,531,838 |
| CSEA Match Transfer | \$796,228 | \$712,278 | \$749,072 | \$715,279 | \$636,091 |
| Dependency | \$1,200,000 | \$1,200,000 | \$1,200,000 | \$1,200,000 | \$1,200,000 |
| Hillcrest / JC out of home services | \$1,720,317 | \$2,496,668 | \$2,120,252 | \$2,512,347 | \$2,712,315 |
| Children Services Legal Services | \$1,812,219 | \$1,790,403 | \$1,792,846 | \$1,801,477 | \$1,795,034 |
| GAL | \$581,630 | \$639,793 | \$703,772 | \$774,150 | \$851,564 |
| Out Of Home Care (flat growth) | \$62,865,355 | \$65,899,748 | \$67,899,983 | \$69,679,871 | \$71,379,314 |
| Medical, Food, Rent, Utilities, Furniture, Etc. (ESSA Vouchers) | \$1,914,665 | \$2,010,398 | \$2,110,918 | \$2,216,464 | \$2,327,287 |
| Kinship Child Care | \$287,898 | \$228,978 | \$241,091 | \$280,837 | \$257,434 |
| Kinship Stipend | \$1,050,988 | \$840,790 | \$672,632 | \$538,106 | \$430,485 |
| Kinship Caregiver | \$700,000 | \$700,000 | \$700,000 | \$700,000 | \$700,000 |
| Adoption Assistance (Local Share) | \$3,700,000 | \$3,512,867 | \$3,293,489 | \$3,293,489 | \$3,293,489 |
| PASSS | \$75,000 | \$65,740 | \$67,739 | \$67,739 | \$67,739 |
| Non-Recurring Adoption | \$69,031 | \$69,031 | \$69,031 | \$69,031 | \$69,031 |
| MCSA/HOPE/NON-HOPE | \$5,144,789 | \$5,402,028 | \$5,672,130 | \$5,955,736 | \$6,253,523 |
| Independent Living Services / HEMI | \$2,292,500 | \$2,407,125 | \$2,527,481 | \$2,653,855 | \$2,786,548 |
| Tax Settlement Fee | \$1,094,141 | \$1,094,141 | \$1,094,141 | \$1,094,141 | \$1,094,141 |
| Mental Health - FAIR Program | \$689,213 | \$758,134 | \$833,948 | \$917,342 | \$1,009,077 |

| Line Item | 2022 | 2023 | 2024 | 2025 | 2026 |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|
| Gas Cards | \$84,415 | \$86,103 | \$87,825 | \$89,581 | \$91,373 |
| Background Checks / Absent Parent located | \$344,384 | \$351,272 | \$358,297 | \$365,463 | \$372,772 |
| Children Services Administration | \$25,833,100 | \$28,416,410 | \$31,258,051 | \$32,820,954 | \$36,103,049 |
| Adoption Contracts/Services | \$171,882 | \$178,972 | \$190,296 | \$195,973 | \$203,849 |
| Miscellaneous | \$21,642 | \$21,642 | \$21,642 | \$21,642 | \$21,642 |
| Advertising | \$77,677 | \$77,677 | \$77,677 | \$77,677 | \$77,677 |
| Kids in School Rule (Legal Aid) | \$548,654 | \$605,758 | \$641,602 | \$690,764 | \$737,986 |
| Return SSI Checks | \$179,658 | \$169,022 | \$153,256 | \$181,300 | \$176,543 |
| Medical Services (CHMC) / Medicaid Consultant | \$207,396 | \$207,396 | \$207,396 | \$207,396 | \$207,396 |
| Consulting/Safety Assess | \$721,562 | \$774,825 | \$748,194 | \$761,510 | \$754,852 |
| Nursing Consultation Services | \$690,648 | \$790,648 | \$890,648 | \$990,648 | \$1,090,648 |
| Children w/Medical Handicaps | \$1,430,744 | \$1,326,238 | \$1,232,202 | \$1,209,378 | \$1,180,826 |
| Election Expenses / PCG Review | \$0 | \$150,000 | \$0 | \$150,000 | \$0 |
| Intensive In - Home Services | \$242,414 | \$254,535 | \$267,261 | \$280,624 | \$294,656 |
| Prevention | \$500,000 | \$500,000 | \$500,000 | \$500,000 | \$500,000 |
| Student Bus Transportation | \$216,234 | \$260,072 | \$302,332 | \$345,645 | \$388,256 |
| Visitation | \$938,192 | \$985,101 | \$1,034,356 | \$1,086,074 | \$1,140,378 |
| Non-Medicaid Transportation | \$595,816 | \$771,360 | \$796,555 | \$921,983 | \$980,589 |
| Legal Services / Claims | \$24,625 | \$25,857 | \$27,150 | \$28,507 | \$29,932 |
| TOTAL | \$122,354,854 | \$129,312,848 | \$134,075,105 | \$138,926,824 | \$144,747,334 |



Revenue Assumptions – Scenario 1 and Scenario 2

| Line Item | Assumptions |
|--|---|
| IV-E Waiver Transition Funds | Title IV-E Waiver Transition funds end when The Family First Prevention Services Act is implemented on 10/1/21 (Q1 FY22). The total Transition Fund amount was provided in ACYF-CB-PI-20-08. |
| IV-E Traditional / FCM Admin | Based on forecasted expenditures for Out of Home care for the next five (5) fiscal years. Splits total OOH expenditures between Foster Families and CCIs based on proportions of costs from FY2020. Assumes an eligibility rate of 72.9% and an allowability rate of 64.3%. Assumes 10% of providers will become QRTPs, with an increase of 10 percentage points per fiscal year. Assumes 75% of all children in QRTPs will meet all QRTP standards required for Title IV-E claiming. |
| IV-E Admin. & Training | Forecasted based on data from previous five (5) fiscal years. |
| Multi System Youth/Best Practice/Foster Parent Recruitment/AA Covid | State general revenue for multi-system youth forecasted to extend through FY22/FY23. This funding has been reduced and re-allocated to the state. Assumes funding does not extend beyond FY23. |
| IV-E Contracts | Forecasted based on data from previous five (5) fiscal years. |
| Title IV-B | Forecasted based on data from previous five (5) fiscal years. |
| ESSA (Title IV-B) | Forecasted based on data from previous five (5) fiscal years. |
| State Child Protective Allocation | Forecasted based on data from previous five (5) fiscal years. |
| Chafee (Independent Living) | For 2022, additional Chafee funds were allocated through the Appropriations Act for 2022. This is a one-time allocation. Revenue for 2023-2026 was forecasted based on data from previous five (5) fiscal years) |
| Other allocation (grant) amounts | Forecasted based on data from previous five (5) fiscal years. |
| Property Tax Levy | The property tax levy assumes a rate of 4.75 mils (current level). |
| Misc. Rev (SSA, VA, Child Support) | Forecasted based on data from previous five (5) fiscal years. |
| Kinship Caregiver | Allocated amount is \$1,000,0000 -- gradually increase each year over next 5 years to hit full allocation. |
| MCSA Funds from other County Departments | Forecasted based on data from previous five (5) fiscal years. |
| Misc. Returns | Flat amount constitutes of an average of revenue from 2017 -2020. |

Revenue Assumptions – Scenario 3 and Scenario 4

| Line Item | Assumptions |
|---|---|
| IV-E Waiver Transition Funds | Title IV-E Waiver Transition funds end when The Family First Prevention Services Act is implemented on 10/1/21 (Q1 FY22). The total Transition Fund amount was provided in ACYF-CB-PI-20-08. |
| IV-E Traditional / FCM Admin | Based on forecasted expenditures for Out of Home care for the next five (5) fiscal years. Splits total OOH expenditures between Foster Families and CCIs based on proportions of costs from FY2020. Assumes an eligibility rate of 72.9% and an allowability rate of 64.3%. Assumes 10% of providers will become QRTPs, with an increase of 10 percentage points per fiscal year. Assumes 75% of all children in QRTPs will meet all QRTP standards required for Title IV-E claiming. |
| IV-E Admin. & Training | Forecasted based on data from previous five (5) fiscal years. |
| Multi System Youth/Best Practice/Foster Parent Recruitment/AA Covid | State general revenue for multi-system youth forecasted to extend through FY22/FY23. This funding has been reduced and re-allocated to the state. Assumes funding does not extend beyond FY23. |
| IV-E Contracts | Forecasted based on data from previous five (5) fiscal years. |
| Title IV-B | Forecasted based on data from previous five (5) fiscal years. |
| ESSA (Title IV-B) | Forecasted based on data from previous five (5) fiscal years. |
| State Child Protective Allocation | Forecasted based on data from previous five (5) fiscal years. |
| Chafee (Independent Living) | For 2022, additional Chafee funds were allocated through the Appropriations Act for 2022. This is a one-time allocation. Revenue for 2023-2026 was forecasted based on data from previous five (5) fiscal years) |
| Other allocation (grant) amounts | Forecasted based on data from previous five (5) fiscal years. |
| Property Tax Levy | The property tax levy reduces approximately \$10M per year. |
| Misc. Rev (SSA, VA, Child Support) | Forecasted based on data from previous five (5) fiscal years. |
| Kinship Caregiver | Allocated amount is \$1,000,0000 -- gradually increase each year over next 5 years to hit full allocation. |
| MCSA Funds from other County Departments | Forecasted based on data from previous five (5) fiscal years. |
| Misc. Returns | Flat amount constitutes of an average of revenue from 2017 -2020. |

Expenditure Assumptions – Scenario 1 and Scenario 3

| Line Item | Assumptions |
|---|---|
| TANF Mandated Share Transfer | Flat |
| CSEA Match Transfer | Forecast based on last 7 years |
| Dependency | Flat |
| Hillcrest / JC out of home services | Forecast based on last 2 years |
| Children Services Legal Services | Forecast based on last 10 years |
| GAL | 10% increase each year |
| Out Of Home Care (flat growth) | Forecast based on last 10 years, with 10% increase each year to account for increased costs associated with Family First. Assumes average historical growth rate of 4.3% + additional 6% to account for half of OOH expenses rising due to congregate care. |
| Medical, Food, Rent, Utilities, Furniture, Etc. (ESSA Vouchers) | Flat (based on comments about budget decrease, did not use historical data) |
| Kinship Child Care | Average with a forecast based on last 5 years. |
| Kinship Stipend | County portion of Kinship stipend. Assumes state is covering majority of kinship costs since most placements last less than 6 months. |
| Kinship Caregiver | 2% increase each year |
| Adoption Assistance (Local Share) | Decrease based on previous 5 years amounts |
| PASSS | Flat |
| Non-Recurring Adoption | Flat |
| MCSA/HOPE/NON-HOPE | 2% increase next year, then flat |
| Independent Living Services / HEMI | Large increase in 2022, then average of last 5 years |
| Tax Settlement Fee | Based on Levy: averages 1.36% of levy amount, so this amount is based on 2020 levy assuming no changes to levy. |
| Mental Health - FAIR Program | Average of previous 3 years, then 2% increase each year |

Expenditures – Scenario 1 and Scenario 3

| Line Item | Assumptions |
|---|--|
| Gas Cards | 2% increase each year |
| Background Checks / Absent Parent located | 2% increase each year |
| Children Services Administration | Forecasted based on last 10 years. |
| Adoption Contracts/Services | Forecast based on last 10 years |
| Miscellaneous | Average with flat growth |
| Advertising | Average with flat growth |
| Kids in School Rule (Legal Aid) | Forecast based on last 5 years |
| Return SSI Checks | Forecast based on last 10 years |
| Medical Services (CHMC) / Medicaid Consultant | Forecast based on last 5 years |
| Consulting/Safety Assessments | Average of previous 2 years |
| Nursing Consultation Services | Forecast based on last 2 years |
| Children w/Medical Handicaps | Forecast based on last 10 years. |
| Election Expenses / PCG Review | Flat |
| Intensive In - Home Services | Forecast based on last 5 years |
| Prevention | New line item – estimated based on conversations and projections from JFS. |
| Student Bus Transportation | Forecast based on last 5 years |
| Visitation | 5% increase each year |
| Non-Medicaid Transportation | Forecast based on last 5 years |
| Legal Services / Claims | 5% increase each year |

Expenditures – Scenario 2 and Scenario 4

| Line Item | Assumptions |
|---|---|
| TANF Mandated Share Transfer | Flat |
| CSEA Match Transfer | Forecast based on last 7 years |
| Dependency | Flat |
| Hillcrest / JC out of home services | Forecast based on last 2 years |
| Children Services Legal Services | Forecast based on last 10 years |
| GAL | 10% increase each year |
| Out Of Home Care (flat growth) | Forecast based on last 10 years, with 10% increase each year to account for increased costs associated with Family First. Assumes average historical growth rate of 4.3% + additional 6% to account for half of OOH expenses rising due to congregate care. |
| Medical, Food, Rent, Utilities, Furniture, Etc. (ESSA Vouchers) | Increase by 5% each year |
| Kinship Child Care | Average with a forecast based on last 5 years. |
| Kinship Stipend | County portion of Kinship stipend. Assumes state is covering majority of kinship costs since most placements last less than 6 months. |
| Kinship Caregiver | 2% increase each year |
| Adoption Assistance (Local Share) | Decrease based on previous 5 years amounts |
| PASSS | Flat |
| Non-Recurring Adoption | Flat |
| MCSA/HOPE/NON-HOPE | Increase by 5% each year |
| Independent Living Services / HEMI | Increase by 5% each year (baseline includes maintaining new level of Chafee funding) |
| Tax Settlement Fee | Based on Levy: averages 1.36% of levy amount, so this amount is based on 2020 levy assuming no changes to levy. |
| Mental Health - FAIR Program | Increase by 10% each year |

Expenditures – Scenario 2 and Scenario 4

| Line Item | Assumptions |
|---|----------------------------------|
| Gas Cards | 2% increase each year |
| Background Checks / Absent Parent located | 2% increase each year |
| Children Services Administration (10% growth) | Increase by 10% each year |
| Adoption Contracts/Services | Forecast based on last 10 years |
| Miscellaneous | Average with flat growth |
| Advertising | Average with flat growth |
| Kids in School Rule (Legal Aid) | Increase by 10% each year |
| Return SSI Checks | Forecast based on last 10 years |
| Medical Services (CHMC) / Medicaid Consultant | One-time increase of 20% |
| Consulting/Safety Assessments | Average of previous 2 years |
| Nursing Consultation Services | Increase by 400-800K each year |
| Children w/Medical Handicaps | Forecast based on last 10 years. |
| Election Expenses / PCG Review | Flat |
| Intensive In - Home Services | Increase by 5% each year |
| Prevention | New line item |
| Student Bus Transportation | Forecast based on last 5 years |
| Visitation | 5% increase each year |
| Non-Medicaid Transportation | Forecast based on last 5 years |
| Legal Services / Claims | 5% increase each year |



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