



STOP INSTITUTIONAL CHILD ABUSE ACT APRIL 27, 2023

Background: During the last legislative session, Paris Hilton and representatives from the Senate and House were in the news more than once promoting legislation that would end abusive treatment for residents in congregate care settings.

Reportedly, based on news coverage: “Their target was the troubled teen industry – a network of mostly unregulated abusive congregate care facilities that use ‘tough love’ and other non-evidenced based therapeutic services, schooling and shelter. They are privately owned, powerfully punitive, and often wilderness based therapy programs, residential treatment centers, therapeutic boarding schools, group homes, boot camps and faith based academies.”

During that period, I didn’t get the sense that folks in Washington were limiting their concerns to unregulated congregate care facilities. To some degree, the potential exists for all congregate care facilities to be painted with the same broad brush and I suspect any regulations developed will be applicable to all.

As you may recall, Hilton held a press conference on the National Mall that included creating a 4 x 4 concrete block isolation room. It was an impactful way to help others visualize the kind of mistreatment she was subjected to as a resident. “Prevent the Abuse Neglect and Death of Institutionalized Youth in America” was painted in large lettering on one side of the structure for all to see.

The following statement by Paris Hilton was reported in the news: “I was strangled, slapped across the face, watched in the shower by male staff, called vulgar names, forced to take medication without a diagnosis, not given a proper education, thrown into solitary confinement in a room covered with scratch marks and smeared in blood and so much more.”

“At Provo Canyon School in Utah, I was given clothes with a number on the tag. I was no longer me. I was #127. I was forced to stay indoors for 11 months straight, no sunlight, no fresh air. These were considered privileges she said.”

On a personal note, it is my belief that no individual regardless of their age should ever be subjected to the kinds of abusive treatment reportedly rendered Hilton.

Several things in press releases about the proposed Act that had not yet been filed during the last legislative session concerned me. Reportedly, Hilton was advocating a Bill of Rights for Children. One of the rights identified was a child’s right to practice their religion of choice or to abstain from religious practices.

I don’t know of any faith based agencies that don’t require children to attend church. Of course, those expectations are discussed with the child and their parents prior to placement. Parents and children who are adamant in their refusal to participate in religious services are advised to find a different resource that more closely meets their expectations.

What was promised in the last legislative session is now reality in the current legislative session.

Sen. Jeff Merkley – Press Release 04/27/23:

MERKLEY, CORNYN, TUBERVILLE, KHANNA, AND CARTER INTRODUCE BIPARTISAN LEGISLATION TO END CHILDREN’S ABUSE IN RESIDENTIAL TREATMENT CENTERS – Paris Hilton, Abuse Survivors Joins Lawmakers at Capitol Press Conference



The **STOP INSTITUTIONAL CHILD ABUSE ACT** is referenced as bipartisan legislation that would provide greater oversight and data transparency for institutional youth treatment programs.

Washington, D.C. – Oregon’s U.S. Senator Jeff Merkley teamed up with Texas’ U.S. Senator John Cornyn, Alabama’s U.S. Senator Tommy Tuberville and Representatives Ro Khanna (D-CA-17) and Earl “Buddy” Carter (R-GA-01) to introduce the bipartisan Stop Institutional Child Abuse Act. This bipartisan, bicameral bill would provide

greater oversight and data transparency for institutional youth treatment programs, begin implementing urgent recommendations to develop robust information sharing systems among states, and promote dissemination of best practices for identifying and preventing institutional child abuse.

“Institutional care, without oversight, all too often becomes institutional abuse,” said Sen. Jeff Merkley. “Reforming our residential care system would improve the lives of thousands of children across our country, and it merits our urgent attention.”

“Residential treatment programs play a pivotal role in addressing our country’s mental health crisis and helping young people navigate behavioral and emotional challenges,” said Sen. John Cornyn. “Every residential treatment facility should be a safe place for children to heal and grow, and this legislation would prevent institutional abuse by strengthening accountability and transparency from these facilities.”

“Kids and young adults will decide the future of this country,” said Sen. Tommy Tuberville. “I dedicated my life to mentoring young people because they are the most precious commodity we have. If we get everything else right, but neglect our young people, our country has no future. I’ve seen some of these residential care facilities with my own eyes and I know they need reform. There’s an old saying that sunlight is the best disinfectant. We need some more sunlight on these facilities so we can put a stop to the waste, fraud, and abuse in the system. I’m proud to support this bill and stand with our kids.”

“It takes a lot of courage for survivors like Paris Hilton, Caroline Cole and Kayla Muzquiz to come forward and share their stories. We owe it to them to make sure that Congress listens and passes this bill swiftly and decisively.” said Rep. Ro Khanna. “Right now, over 100,000 children are at risk of abuse, neglect, and even death due to a complete lack of transparency in the so-called ‘troubled-teen industry.’ We cannot allow this to continue. The Stop Institutional Child Abuse Act will shed light on the abuse and neglect occurring in congregate care programs around the country, and will start reforming a system that has gone unchecked for far too long.”

“Children in institutional care deserve to be safe, healthy, and properly cared for, and their parents deserve transparency about their child’s living conditions,” said Rep. Buddy Carter. “What’s happening in these facilities, too often, constitutes child abuse, and the federal government must come together to protect our nation’s youth.”

In recent years, residential care facilities have come under fierce scrutiny of the abuses that take place behind closed doors. Working closely with advocacy groups and law-

makers in D.C., Paris Hilton, a residential care facility survivor and fierce advocate, has been a leading force shining a light and increasing awareness of the prevalence of physical, emotional, and sexual abuse of youth in these programs, leading to hospitalizations, prolonged trauma, and even deaths.

"For decades, children have experienced widespread abuse, neglect, and preventable death in youth residential programs across the country. Meanwhile, this deceptive multi-billion dollar industry has operated without any real accountability or transparency. At long last, this is finally beginning to change with the Stop Institutional Child Abuse Act. As a survivor, I am proud to stand with bipartisan congressional leaders who are working to protect our nation's most vulnerable youth," said Paris Hilton, a residential care facility survivor.

Investigations have uncovered abuse in these facilities across the nation, including broken bones, fight clubs, sexual abuse, forced isolation, and failure to provide adequate medical care or evidence-based treatment. Far too often, youth experience abuse resulting in additional trauma and even death at the hands of staff employed by these programs. Some youth enter through the child welfare system and require treatment for emotional or behavioral challenges, and others enter this network directly from parents seeking treatment for their children.

The industry's lack of transparency and quality of care is alarming, and Congress must step in and pass comprehensive legislation to crack down on the physical and emotional abuse that many children in these facilities experience. The Stop Institutional Child Abuse Act is a critical step forward that would provide increased oversight and data transparency for institutional youth programs by implementing urgent recommendations from the Government Accountability Office (GAO) and Substance Abuse and Mental Health Services Administration (SAMHSA), including developing robust information sharing systems among states that also promote the dissemination of best practices for identifying and preventing institutional child abuse.

The Stop Institutional Child Abuse Act:

- ***Establishes the Federal Work Group on Youth Residential Programs, comprised of representatives from the Administration for Children and Families, the Administration for Community Living, the Substance Abuse and Mental Health Services Administration, and other relevant federal agencies.***

- ***Directs the National Academies of Sciences, Engineering, and Medicine to conduct a study on the use of restraints, seclusion, and other restrictive interventions in youth residential programs.***

The Stop Institutional Child Abuse Act is cosponsored by Senators Ben Ray Luján (D-NM), Chris Murphy (D-CT), and Susan Collins (R-ME).

This legislation is supported by leading experts, advocates, and organizations representing survivors of institutional abuse in youth residential programs.

“It is long past time we have more transparency about what happens in youth residential programs. Youth, including disabled youth, are continuously subjected to dangerous seclusion, restraints, and other unsafe practices in these facilities. The Stop Institutional Child Abuse Act takes needed steps to improve transparency, increase professional development and training of staff, and ultimately increase the safety of youth. I applaud Senators Merkley and Cornyn for their work on this bill,” said Kimberly Knackstedt, Ph.D., Director of the Disability Economic Justice Team and Senior Fellow at the Century Foundation.

“Rights4Girls applauds the introduction of the bipartisan Stop Institutional Child Abuse Act -- legislation that seeks to end the abuse of children inside youth residential programs and promotes greater transparency over current practices that have too often led to violence, trauma, and even death,” said Yasmin Vafa, Executive Director of Rights4Girls.

“Inside facilities that are supposed to provide treatment and rehabilitation to our country’s children, many of our nieces, nephews, grandchildren, and children are having their lives, innocence, and well-being destroyed by institutional child abuse. Once passed, SICAA will help shed the light of transparency and accountability on these acts of violence against children and ensure that the proper government agencies are collaborating to prevent, track, and respond to institutional child abuse,” said Aubrey Edwards-Luce, Vice President of Child Welfare and Youth Justice at First Focus Campaign for Children.

“Transparency within our institutions is a critical step in both protecting our children and making sure these systems accomplish their intended purposes. No family or community should have to wonder if their children are safe within the walls of a government institution, yet we know some of the worse abuses of power have occurred in these settings. Taking every possible step to eliminate that possibility is the only conscientious way forward,” said TaKasha Smith, Executive Director of the Juvenile Justice Coalition.

“This legislation is long overdue,” said Ross W. Greene, Ph.D., Founding Director of Lives in the Balance.

“Nobody and no one deserves to be abused, misused or neglected.... regardless of their circumstances especially children,” said Jayette Lansbury, Co-President of National Alliance on Mental Illness (NAMI) Huntington.

“As a nation, we can no longer rely on residential facilities and other programs to provide accountability for their programs which are actually perpetuating harm and trauma to our most vulnerable children. We must ensure that our “forgotten children” — Black Indigenous People of color (BIPOC) and youth who struggle mental health disabilities who are primarily from marginalized communities, are not further victimized and traumatized by those who are entrusted with their emotional and behavioral health. The creation of a federal work group, that includes those with the lived experience who are involved in all levels of decision-making, will help to ensure accountability,” said Kathy Wright, Executive Director of the New Jersey Parents Caucus.

“The Freedom from Religion Foundation expresses appreciation to Paris Hilton for courageously sharing her story and advocating for the protection of vulnerable children, as well as Congressmen Ro Khanna (D-CA) and Buddy Carter (R-GA), and Senators Jeff Merkley (D-OR) and John Cornyn (R-TX), for joining Paris in their bipartisan efforts on the Stop Institutional Child Abuse Act. This bill is a crucial step towards preventing child abuse in youth residential programs and improving data collection and reporting to ensure the safety and well-being of children in institutional care settings,” said Laurie Gaylor, Co-President and Co-Founder of the Freedom From Religion Foundation.

“Unchecked power will always corrupt those in power, and we need this oversight and protection for our most vulnerable children or they will continue to be harmed. As a clinical psychologist who has worked in residential and locked facilities, I can attest to the utmost need for these protections,” said Dr. Toby Watson, PsyD, Associated Psychological Health Services.

“Neurodivergents have a spectrum of support needs, but one thing we share universally is dehumanization and abuse. All of us at NDLC are survivors of restraint, seclusion, and institutional abuse. It’s time to humanize those who struggle rather than abusing and caging us. We are worthy of our own humanity,” said Jennifer Litton Tidd, Co-founder of Neurodivergent Liberation Coalition.

“As an attorney who has represented numerous victims of physical and sexual abuse in residential programs, I’ve witnessed the devastating impact of mistreatment on our most vulnerable children. It is clear that the current system is failing, and there is an ur-

gent need for change. The Stop Institutional Child Abuse Act is a vital step towards ensuring our children's safety and well-being. Through transparency, oversight, and prioritizing community-based care, SICAA aims to heal the wounds of institutional abuse and build a better future for our nation's most vulnerable children," said Tommy James, Lawyer.

I have witnessed first hand the traumatic and long-lasting damage of institutional child abuse. Practices such as restraint and Seclusion need to be addressed in order for us to have a happy and healthy future for all of society," said David Gray-Hammond, Founder of DGH Neurodivergent Consultancy.

"Without legislative protections, our most vulnerable children are being warehoused, commodified, dehumanized, and aggressively stripped of their autonomy and basic human rights. Often, Black, Brown, and Indigenous children and disabled children are most vulnerable to being traumatized by for-profit networks that continue to benefit financially from the destabilization of children through their adult lives by being pipelined into mental health facilities and prisons. Generations of survivors have warned against the lifelong impact of the abuses they suffered in congregate care institutions. We have access to humane, compassionate, and life-affirming approaches to supporting and accommodating the children whose needs are not served by compliance-driven behavioral approaches. It is a crime against humanity to neglect to impose legislation that would safeguard vulnerable children from being exposed to soulless, abusive interventions," said Terra Vance, CEO of NeuroClastic.

"All children have the right to basic protections of their human rights. No child should be submitted to psychological, emotional, physical or sexual abuse because of their need for substance abuse treatment or because of a mental or psychological disability. Over the last several decades, many residential treatment facilities have been investigated for severe mistreatment of patients in their care. Perpetrators of this kind of abuse have created an entire system of false credentials by which they deliberately and maliciously deceive and defraud parents and even governmental regulatory and funding agencies. We need state and federal regulatory legislation to prevent these horrible human rights abuses against these vulnerable children and young adults," said Dr. Janet Parker, Executive Director of the Medical Whistleblower Advocacy Network.

"We must protect our future generations from abuses we allow to damage them, as a survivor it is our duty to protect the next generation by any means necessary," said Mr. Five Mualimmak, Executive Director of Incarcerated Nation Network.

“AbleChild strongly encourages lawmakers to start to hold these behavioral health public/private companies accountable. We are encouraged by this bill,” said Sheila Matthews-Gallo, Co-Founder of AbleChild.

“How many youth need to die for people to realize this is a systematic problem, not an individual one? When will the wellbeing of youth take priority over their exploitation through profit? Who will be brave enough to use their voice, vote, and privilege to advocate for those without the choice? We stand in solidarity with survivors & allies by supporting the passing of SICCA,” said Survivor Nonprofit Organization, We Warned Them.

Bill text can be found [here](#).”

[The aforementioned information in was accessed using this link: <https://www.merkley.senate.gov/news/press-releases/merkley-cornyn-tuberville-khanna-and-carter-introduce-bipartisan-legislation-to-end-childrens-abuse-in-residential-treatment-centers>]

The press release from Senator Tommy Tuberville, the ranking member of the Senate Health, Education, Labor, and Pensions (HELP) Subcommittee on Children and Families, stated: “Kids and young adults will decide the future of this country. I dedicated my life to mentoring young people because they are the most precious commodity we have. If we get everything else right, but neglect our young people, our country has no future. I’ve seen some of these residential care facilities with my own eyes and I know they need reform. There’s an old saying that sunlight is the best disinfectant. We need some more sunlight on these facilities so we can put a stop to the waste, fraud, and abuse in the system. I’m proud to support this bill and stand with our kids.”

His press release included comments from Paris Hilton: “For decades, children have experienced widespread abuse, neglect, and preventable death in youth residential programs across the country,” said Paris Hilton, a residential care facility survivor. “Meanwhile, this deceptive multi-billion-dollar industry has operated without any real accountability or transparency. At long last, this is finally beginning to change with the Stop Institutional Child Abuse Act. As a survivor, I am proud to stand with bipartisan congressional leaders who are working to protect our nation’s most vulnerable youth.”

Investigations have uncovered abuse in these facilities across the nation, including broken bones, fight clubs, sexual abuse, forced isolation, and failure to provide ade-

quate medical care or evidence-based treatment. The industry's lack of transparency and quality of care is alarming, and this legislation would help crack down on the physical and emotional abuse that many children in these facilities experience.

The *Stop Institutional Child Abuse Act* is a critical step forward that would provide increased oversight and data transparency for institutional youth programs by implementing recommendations from the Government Accountability Office (GAO) and sharing systems among states and disseminating best practices Substance Abuse and Mental Health Services Administration (SAMHSA), such as developing robust information for identifying and preventing institutional child abuse.

The *Stop Institutional Child Abuse Act* would:

- ***Establish the Federal Work Group on Youth Residential Programs, comprised of representatives from the Administration for Children and Families, the Administration for Community Living, SAMHSA, and other relevant federal agencies.***
- ***Direct the National Academies of Sciences, Engineering, and Medicine to conduct a study on the use of restraints, seclusion, and other restrictive interventions in youth residential programs...***

<https://www.tuberville.senate.gov/newsroom/press-releases/tuberville-colleagues-introduce-bipartisan-legislation-to-end-childrens-abuse-in-residential-treatment-centers>



Who is subject to the *Stop Institutional Child Abuse Act*?

Prudent judgment would dictate the need for residential providers to look carefully at the content of the legislation rather than rely on references made concerning the legislation. For example, many references made to the bill by legislators suggest the bill is strengthening protections for youth in residential treatment centers.

Group care providers not providing treatment services could intuitively believe the legislation would not impact their programs.

As a rule of thumb, it is always imperative that the legislation be carefully reviewed. I am not an attorney, but I'll render my thoughts. I don't always get it right, but I'll identify some red flags that surfaced for me when I read the legislation.

Who's Excluded From the Legislation?

Under the exclusion section of the legislation, two categories of providers don't fall under the auspices of the Act:



The term 'youth residential program' does not include:

- *a hospital licensed by the State; or*
- *a foster family home that provides 24-hour substitute care for children placed away from their parents or guardians and for whom the State child welfare services agency has placement and care responsibility and that is licensed and regulated by the State foster family home.*

So, if your operation doesn't fall under either of the aforementioned exclusion categories, it may be beneficial to look more carefully at the legislation.

The following categories of **Youth Residential Programs** fall under the auspices of the Act:

“(A) IN GENERAL.—The term ‘youth residential program’ means each location of a facility or program operated by a public or private entity that, with respect to one or more youth who are unrelated to the owner or operator of the facility or program—

“(i) provides a residential environment, such as—

- a program with a wilderness or outdoor experience, expedition, or intervention;
- a boot camp experience or other experience designed to simulate characteristics of basic military training or correctional regimes;
- **an education or therapeutic boarding school;**
- a behavioral modification program;
- a residential treatment center or facility;
- a qualified residential treatment program (as defined in section 472(k)(4) of the Social Security Act);
- a psychiatric residential treatment program that meets the requirements of subpart D of part 441 of title 42, Code of Federal Regulations (or any successor regulations);

- **a group home serving children and youth placed by any placing authority;**
- an intermediate care facility for individuals with intellectual disabilities; or
- any residential program that is utilized as an alternative to incarceration for justice involved youth, adjudicated youth, or youth deemed delinquent;

The second variable, along with the aforementioned category of care that seemingly impacts the determination is:

(ii) serves youth who have a history of or diagnosis of—

- an emotional, behavioral, or mental health disorder;
- a substance misuse or use disorder, including alcohol misuse or use disorders;
- or mental, physical, or sensory disability.

Realistically, many of the children in out-of-home care often have a psychological evaluation that reflects some level of emotional, behavioral, or mental health disorder.

Would that diagnosis bump the resident into a category that the facility would be subject to the requirements of the Stop Institutional Child Abuse Act? I don't know the answer to the question, but at face value the Act suggests that only licensed hospitals and foster family homes are excluded.

Following Passage – Immediate Impact - Personal Thoughts

So what is the immediate impact of the legislation once it passes? Unlike other legislative requirements that require individuals or providers to make adjustments, this legislation outsources the need for more professional evaluation on what changes need to be made before anything is required of providers.

It is not my intent to oversimplify the immediate outcome, but it looks to me as though the legislation figuratively kicks the can down the road without any immediate protections provided that would prohibit the use of restraints, and seclusion.

As I shared, the bill does the following two things:

- **Direct the National Academies of Sciences, Engineering, and Medicine to conduct a study on the use of restraints, seclusion, and other restrictive interventions in youth residential programs.**
- **Establish the Federal Work Group on Youth Residential Programs, comprised of representatives from the Administration**

for Children and Families, the Administration for Community Living, SAMHSA, and other relevant federal agencies.

The bill requires that not later than 45 days after the date of enactment of this Act, the Secretary of Health and Human Services shall seek to enter into a contract with the National Academies of Sciences, Engineering, and Medicine (referred to in this section as the “National Academies”) to conduct a study to examine the state of youth in youth residential programs and make recommendations.

Pursuant to the contract under subsection (a), the National Academies shall, not later than 3 years after the date of enactment of the Stop Institutional Child Abuse Act, issue a report informed by the study conducted under such subsection that includes—

- identification of all Federal and State funding sources for youth residential programs;
- identification of Federal data collection sources on youth in youth residential programs;
- identification of existing Federal and State regulation of youth residential programs, including alternative licensing standards or licensing exemptions for youth residential programs;
- identification of existing standards of care of national accreditation entities that provide accreditation or certification of youth residential programs;
- identification of existing barriers in Federal and State policy for blending and braiding of Federal and State funding sources to serve youth in community-based settings;
- recommendations for coordination by Federal and State agencies of data on youth in youth residential programs; and
- recommendations for the improvement of Federal and State oversight of youth residential programs receiving Federal funding.

Federal Work Group On Youth Residential Programs

“(a) IN GENERAL.—The Secretary shall establish the Federal Work Group on Youth Residential Programs (referred to in this section as the ‘Work Group’) to improve the dissemination and implementation of best practices regarding the health and safety (including with respect to the use of seclusion and restraints), care, treatment, and appropriate placement of youth in youth residential programs.

“(b) COMPOSITION.—

IN GENERAL.—The Secretary shall appoint 9 representatives to the Work Group from the Administration for Children and Families, the Administration for Community Living, the Substance Abuse and Mental Health Services Administration, the Department of Education, the Department of Justice, the Indian Health Service, and the Centers for Medicare & Medicaid Services.

(2) OTHER FEDERAL AGENCIES.—The Work Group may include representatives from other Federal agencies, as the Secretary determines appropriate, appointed by the head of the relevant agency.

“(c) CONSULTATION.—In carrying out the duties described in subsection (d), the Work Group shall consult with—

- (1) child advocates, including attorneys experienced in working with youth overrepresented in the child welfare system or the juvenile justice system;
- (2) health professionals, including mental health and substance use disorder professionals, nurses, physicians, social workers and other health care providers who provide services to youth who may be served by residential programs;
- (3) protection and advocacy systems;
- (4) individuals experienced in working with youth with disabilities, including emotional, mental health, and substance use disorders;
- (5) individuals with lived experience as children and youth in youth residential programs, including individuals with intellectual or developmental disabilities and individuals with emotional, mental health, or substance use disorders;
- (6) representatives of State and local child protective services agencies and other relevant public agencies;
- (7) parents or guardians of children and youth with emotional, mental health, or substance use disorder needs;
- (8) experts on issues related to child abuse and neglect in youth residential programs
- (9) administrators of youth residential programs;
- (10) education professionals who provide services to youth in youth residential programs;
- (11) Indian Tribes and Tribal organizations;
- (12) State legislators;
- (13) State licensing agencies; and
- (14) others, as appropriate.

DUTIES.—The Work Group shall—

(1) develop and publish recommendations regarding a national database that aggregates data, including process-oriented data such as length of stay and use of restraints, and seclusion and out-come-oriented data such as discharge setting and ability to be safety maintained in school and community at least 6-months after discharge;

(2) beginning not later than 2 years after the date of enactment of the Stop Institutional Child Abuse Act, and every 2 years thereafter, submit to the Secretary and the Committee on Health, Education, Labor, and Pensions and the Committee on Finance of the Senate, and the Committee on Education and the Workforce, the Committee on Energy and Commerce, and the Committee on Ways and Means of the House of Representatives, a report containing policy recommendations designed to—

(A) improve the coordination of the dissemination and implementation of best practices regarding the health and safety (including use of seclusion and restraints), care, treatment, and appropriate placement of youth in youth residential programs;

(B) promote the coordination of the dissemination and implementation of best practices regarding the care and treatment of youth in youth residential programs among State child welfare agencies, State Medicaid agencies, and State mental and behavioral health agencies; and

(C) promote the adoption and implementation of best practices regarding the care and treatment of youth in youth residential programs among child welfare systems, licensing agencies, accreditation organizations, and other relevant monitoring and enforcement entities.

For a comprehensive review of the text:

https://www.merkley.senate.gov/imo/media/doc/sica_bill_text.pdf

Status Update On Legislation Requested By CORE

Create Accountable Respectful Environments For Children Act (CARE Act)



Dr. Neal Dunn, Congressman from Florida, tentatively plans to file the legislation on behalf of CORE if support can be garnered from a number of legislators on the Ways and Means Committee.

If you have a relationship with any members of the Ways and Means committee, your advocacy on behalf of this legislation would be greatly appreciated.

In addition, your assistance is also needed on another matter. One of the things we must substantiate along with the bill being filed is a listing of professional organizations that would support and endorse the need for the CARE ACT. For example, if your state has a membership organization composed of residential childcare providers, would that organization substantiate the need for the legislation?

In the current draft of the legislation, please note the change in identifying the model of care provided. We are using the term “Cottage Family Care”. In an earlier draft of the bill, we referred to the model as Enriched Foster Care.

Part of the rationale for the change relates to the number of check and balance systems provided in cottage family care. In addition, the model has a host of support staff that aren’t always present in foster care.

The following is a one page narrative highlighting provisions of the draft of legislation:

Creating Accountable Respectful Environments for Children

*The proposed draft: The **Creating Accountable Respectful Environments (CARE) for Children Act** is aimed at increasing capacity, keeping sibling groups together, and providing children a normalized home and community environment with opportunities for age-appropriate extracurricular, enrichment, cultural, and social activities and the same freedoms afforded peers living with families.*

The Act adds “cottage family homes” to the continuum of care for which Title IV-E funding can be used. The term “cottage family home” means a family-like home operated by a public or private childcare agency licensed or approved by the state where it is located. Cottage family homes offer a family-like living environment in a single-family style residence with no more than two children per bedroom unless it is in the best interest of children; and one in which children are under the care of live-in cottage parents that implement the reasonable and prudent parent standard and provide 24-hour substitute care for children placed away from their parents or caretakers.

The cottage family home model:

- Provides children with full time cottage parents available for supervision and nurturing around the clock.*
- Enables siblings to stay together.*
- Provides a myriad of checks and balances to ensure the child’s safety.*
- Offers community and enrichment opportunities for children.*

- *Creates a layer of support for the parents of children in care. Instead of attempting to replace parents of children, agencies work with parents and their children to resolve difficulties with the goal of reunification*
- *Guarantees that staff receive extensive training and use a systemic approach in providing trauma-informed care. The health, safety, and well-being of children is critically important. To maintain a high standard of care, this Act offers the following stipulations:*
- *Requiring the implementation of a trauma-informed approach to care.*
- *Prohibiting the use of seclusion, mechanical or chemical restraints.*
- *Allowing the use of short-term physical restraint if approved in the agency's policies to prevent injury to self or others and the prohibiting the use of prone physical restraint.*
- *Requiring providers to have a system in place for children to alert a staff person if they have concerns or feel they have unfairly been denied their rights or are subject to the threat of mistreatment.*
- *Requiring a continuous quality improvement methodology that regularly solicits information from children concerning their perceptions of the quality of care and identification of strengths and weaknesses of the program.*

The Act is intended to address or assist in resolving the shortage of appropriate foster homes for children. It provides a system of checks and balances to ensure a child's on-going safety and wellbeing in a cottage family home and makes such a child's placement eligible for foster care maintenance payments.

[If you are interested in co-sponsoring, please contact Bea Valenti (Beatrice.Valenti@mail.house.gov) in Congressman Dunn's office.]



REQUEST FOR PROPOSALS

2023 CORE National Conference

THE RFP for the 2023 CORE CONFERENCE will be posted on the CORE website Friday, May 5. As soon as I get the link, I will distribute it. All of our workshop sessions will be 60 minutes.

We are open to reviewing any topic for which you have an interest in presenting.

Two Are Better Than One; They Have A Good Return For Their Labor

Dan Windmiller, Recreation Coordinator for Black Mountain Home, had the thought that networking with like-minded staff from other CORE member agencies operating robust recreation programs could be beneficial. He talked with Jimmy Harmon, President of Black Mountain Children's Home and found support for his plan.



On March 27, 2023 a teams meeting was held with 15 or 16 participants. I had the privilege of being invited to be included. Dan provided time for the group to make introductions and briefly share about their programs. He then highlighted their recreation program.

I had the sense that for each participant in the group, it was time well spent. The group plans to meet quarterly. The next meeting is Tuesday, May 16th. Part of the agenda is looking at summer recreations needs.

If you want to be included, please reach out to Dan Windmiller, His contact information is dwindmiller@blackmountainhome.org

[Note: Due to the limited new information, I chose to wait until now to combine the March and April Executive Director's Report]