



Ohio Job and Family Services Directors' Association

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Joel Potts, Executive Director

**Ohio House Finance Committee
Testimony of Joel Potts, Executive Director
Ohio Job and Family Services Directors Association
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Chairman Smith, Vice-Chairman Ryan, Ranking Member Cera and members of the House Finance Committee, my name is Joel Potts and I am the executive director of the Ohio Job and Family Services Directors' Association. Thank you for the opportunity to testify before you today as a proponent for the opiate investments included in Substitute House Bill 49.

The growing opiate epidemic is putting unparalleled pressure on the protective services system. In Ohio, half of all children taken into protective custody last year had parental drug use identified at the time of removal. Among the infants in care, 70% are there due to their parents' opiate addiction.

The House proposed investment of \$15 million per year would provide significant resources in Ohio's efforts to provide the most appropriate placement options and to safeguard the health and safety of the most innocent victims of the still-growing opiate crisis. The amount of casework necessary for child protective services in opiate households is often both far more complex and time-consuming than most cases. Opiate-related cases also remain open much longer than other types of cases. The increase in drug-related cases also requires more foster care placements, kinship services, treatment for children who may have substance problems themselves and resources for the trauma and other behavioral health issues suffered by children in drug addicted homes.

The House proposal to utilize this investment by first providing a base of \$100,000 per county will be of significant help in many of our hardest hit areas that either lack levies or have strained the local budgets to the breaking point.

We are also excited and highly supportive of the House plan to provide child care support for kinship caregivers. When a child needs to be removed from his or her home due to unsafe conditions or neglect, children services workers first check to see if there is a suitable extended family member, or kin, to care for the child. Kinship placements are less traumatic for the child than being placed with an unfamiliar family or in an unfamiliar community. Kinship placements are more stable while permanency options are explored and less expensive than foster home placements.

One of the most significant barriers counties encounter while exploring potential kin placements is the cost kinship caregivers face in taking on the obligation of financing child care for the wards they have brought into their home. The House investment and policy change include in the House Opiate Plan would enhance the number of kinship caregivers and therefore improve outcomes for many of the children in our care while decreasing the costs to foster care and the child protective services system.

These investments alone would go a long way to provide safe and suitable placement options for the kids in our care but the House plan appropriately and necessarily goes much further. The full \$170 million investment will also ensure communities are breaking down barriers, working closer together, maximizing resources and addressing the crisis in a holistic manner. No one program, idea or system will be effective in the fight against addiction. The House plan would greatly advance our ability to deal with the problems of opiate addiction in our state.

Funding for local ADAMH boards, the establishment of acute substance abuse stabilization centers, funding for mental health centers and capital resources for treatment facilities will greatly enhance available services when and where they are needed. The \$2.2 million for County Commissioners to establish County Hub Programs to combat the opioid epidemic in all 88 counties will bring communities together to better engage the public and ensure everyone is working together (including the faith based community, law enforcement, schools, healthcare professionals and government leaders).

The increase funding proposed for Adult Protective Services also recognizes that the opiate crisis is hitting all segments of our society and the need to do more to help our most vulnerable citizens. Older adults are increasingly victims of exploitation and abuse as a result of the opiate epidemic. On a recent survey over 80 percent of county department respondents indicated an increase in APS referrals just in the past two years, and over 40 percent have seen that increase continue within the past six months. In addition, over 40 percent of county departments have seen an increase in APS referrals directly attributable to opiate abuse. Now more than ever counties need to have the capacity to be able to respond to requests for help from Ohio's seniors.

Your proposed investments in workforce are also a necessary component to address the long-term impacts and needs to improve the quality of life for residents who have been impacted by opiate addiction.

This bill also makes certain that healthcare continues to be available to provide necessary services for individuals struggling with behavioral health issues. This is a key component in the fight against addiction and the road to recovery: not just for the individual but also for our communities. Adequate healthcare services are also critical to reuniting parents involved with child protection who have mental health or addiction issues.

By approving the opiate provisions included in the recent House budget, Ohio will take significant strides to fight the opiate crisis. You have made this a top priority and put the resources necessary to advance the epidemic fight on every front. It is now incumbent on us to utilize these dollars wisely and effectively, and produce positive results for the clients we serve. You have done your part and we need to do ours in our partnership to address this healthcare crisis.

Mr. Chairman and members of the committee, thank you for your time. I would be happy to answer any questions and look forward to working with you to finalize a budget which meets the needs of the citizens we serve.