Thank you Chairman Merrin, Vice Chair Manning and Members of the House Health Committee for hearing sponsor testimony for House Bill 14- The Kinship Care Navigator Program. I also want to thank my Joint Sponsor, Representative Baldridge.

House Bill 14 will provider Kinship caregivers the assistance they need to care for some of our most vulnerable children through a statewide resource and referral program, known as the Kinship Care Navigator Program. Whether it’s illness, death, violence or trauma that causes children to be removed from their biological parents, their next placement is vital to their healing, health and development.

First, I think it is necessary to define a few basic terms. Kinship caregiver is defined under ORC section 5101.85 as any of the following adults caring for a child in place of the parents: grandparents (up to "great-great-great"), siblings, aunts, uncles, nephews, and nieces (up to "great-grand"), first cousins and first cousins once removed, stepparents and stepsiblings, spouses and former spouses of the above individuals, a legal guardian of the child, or a legal custodian of the child. This bill would add “any nonrelative adult the child identifies as having familiar and long-lasting relationships or bonds with…” such as mom or dad’s lifelong friend or clergy.

Second, kinship navigators are defined by Ohio Revised Code 5101.851 as a statewide program of kinship care navigators to assist kinship caregivers who are seeking information regarding, or assistance obtaining, services and benefits available at the state and local level that address the needs of those caregivers residing in each county. The program shall provide to kinship caregivers information and referral services and assistance obtaining support services. Some of the services may include access to publicly funded child care, respite care, training for special needs children, legal services, as well as access to a toll-free number for additional assistance.

Currently, this section of Ohio Revised Code is permissive and with local Jobs and Family Services feeling the burn on local dollars already, many counties have not been able to provide this service. The hallmark of this legislation before you is to change that. We understand
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it is necessary to create a system where all kinship caregivers have equitable access to these support services. It is inconsistent and problematic that caregivers in some counties have access to a Navigator program, but caregivers in counties without a program are without the guidance and counseling needed to care for children in what is the most traumatic and stressful moments of their lives. We can and must do better for our most vulnerable populations.

House Bill 14 requires the implementation of a statewide program of kinship navigators, but in order to efficiently and strategically create this program, the bill allows the Director of Jobs and Family Services one year after the effective date to adopt rules in accordance with this legislation. HB 14 would require a few basic guardrails in implementing this language. First, HB 14 requires the Director of ODJFS to establish a system of as few as 5 and up to 12 regions for the statewide program of kinship care navigators. Second, these regions shall be created based on population, number of kinship caregivers, available kinship navigator expertise, as well as any other relevant factors necessary to establishing stable and functional navigator regions. Third, these navigators, like current law but mandatory in this bill, will provide information and referral services and assistance in obtaining support services for kinship caregivers within its region.

Finally, programs and policies come with a state investment and this legislation requires the Director of ODJFS, not later than one year after the bill's effective date, to amend the state Title IV-E plan in order to provide federal funding for the kinship care navigators. The legislation further requires ODJFS to pay the full nonfederal share for the program and provides that a county department of job and family services or public children services agency is not responsible for the cost of the program. This is important because our locals are in need and have felt the pain of delivering vital local services to their constituents.

This body of policy makers can create, restore and fortify systems that help stabilize families in crisis, and this bill is a living example of such an effort.

Thank you Chairman Merrin, Vice Chair Manning, and Members of the House Health Committee for the opportunity to offer sponsor testimony for House Bill 14. I and my Joint Sponsor will answer any questions from the committee.