

October 27, 2022

Good Afternoon,

On behalf of Gemma Services (Gemma), I want to thank Chairman Hayward and the Members of the Committee for providing me the opportunity to speak to you today about the challenges Gemma faces as a Foster Care Provider agency when we try to successfully match and place youth in our foster homes.

My name is Melissa Harvey. I am the Vice-President of Community Based Programs. Gemma was formed in 2019 when Silver Springs – Martin Luther School and theVillage united to operate as one single organization serving children, families, and communities across the Philadelphia region. Their similar histories, strongly rooted in the Lutheran and Presbyterian faith of their founders, date back to the late 19th Century when they were founded as orphanages in Philadelphia. Today, with locations in Plymouth Meeting (Montgomery County), the Mt. Airy section of Philadelphia, and Southwest Philadelphia, Gemma provides vital behavioral health, special education, child welfare, and prevention services for more than 4,000 youth and families each year. Across all programs, Gemma is guided by the vision of a world in which children, youth, and families feel valued and have the tools to realize their highest potential.

At Gemma Services, we believe every child deserves the safety, and security associated with residing in a nurturing, stable home environment. In our Foster Care Program, we work with families, county agencies, educators, and others involved in a child or teen’s life to identify the best possible home to fit the unique needs of each individual. We provide Foster Family Care services for children from Philadelphia and surrounding counties who cannot reside in their own homes. Foster families provide compassionate care in a home environment that addresses the needs of children with emotional and behavioral challenges and helps them heal and flourish. From offering financial assistance and ongoing training, to professional guidance, we work closely with our foster families to ensure they have the skills and supports they need to help each child to thrive.

Our program exclusively provides services for Treatment Level Foster Care (TFC) and Specialized Behavioral Health (SBH) Care. Therefore, we only recruit, and license foster parents who demonstrate that they can meet the needs of children who are assessed at this level of care, which are significantly greater than those of youth in general foster care. Many of the youth in our homes have been impacted by trauma, and our foster parents are specially trained to support them. Our goal is to ensure that all youth are placed in a safe, supportive, and stable environment that will help them heal from their traumatic experiences and thrive. When we seek to match youth to a potential new foster home, we consider a variety of factors to ensure that it is a successful match, including, age, gender, cultural, spiritual, and LGBTQ+ needs; school location; and behavioral health history.

When we receive a referral for our level of foster care and try to make a successful match, we often face significant challenges, and consequently have to decline the referral. Some of the key themes and reasons around why we decline referrals include:

*Page 1 of 3*

**- Insufficient information is provided with the referral:**

Most significant is that children are referred with limited, confusing, or dated information, which limits our ability to explain the child's behaviors to our foster parents as ones that can be appropriately managed in a TFC/SBH level home. It would be very helpful to have clear, current, and timely information from the Community Umbrella Agencies (CUAs) and/or Philadelphia Department of Human Services (DHS) so that we could present this to our families along with proactive guidance on how they might best help the youth. Referrals are routinely same day or urgent. This makes it difficult to create a successful match, and stresses families who are being asked to reorganize their household routines as soon as the next day to accommodate the child's needs, which may or may not have been communicated to them. Many of our foster parents recently have asked to meet the child or youth prior to accepting the placement strictly based on safety concerns, which creates additional complexity when we are trying to assess for the right "fit" to ensure a successful placement. There is often no opportunity for this to happen, and then the family is required to care for the child a minimum of 90 days, per DHS guidelines, even if the placement turns out not to be a good fit.

**-Increased behavioral needs of youth that we cannot safely manage in a foster home:**

As a provider agency we understand that CUA is placing children internally who they can fit with their own TFC/SBH program and referring children with higher levels of need to the Central Referral Unit (CRU) for programs such as ours. The children referred by the CRU present with more serious behaviors and have had multiple prior placements and placement disruptions. The number of children with delinquent, physical aggression, weapon-related violence, and eloping behaviors has increased. The number of SBH level youth pregnant or parenting needing placement has also increased.

Our resource parents have understandably become less open to children with violent behaviors, property destruction, history of arrests and /or eloping behaviors.

- Their concerns are exacerbated by the additional stresses of increased violence in the city, as they are not equipped or trained to manage this level of intensity.
- Restrictions on the type of placement needed, i.e., one with no younger children, a private bedroom, must be the only child in home, etc. further limit our ability to match children referred with our licensed homes.
- A parenting teen who has TFC/SBH level needs and is also the legal guardian of their young child creates safety concerns for both our agency and our foster parents.
- Further, some of the children referred at SBH level needing placement have already been served by Gemma Services, sometimes in multiple homes, and we were unable to find additional internal resources, or we assess that the child would be better served at a higher level of care.
- Adding to this problem is the current shortage of supportive behavioral health services that could help both foster youth and foster families. This shortage of services is caused by an extreme shortage of behavioral health workers, which likely is caused, at least in part, by insufficient funding of these essential services, and the number of behavioral health staff who have left the field at incredibly high rates over the past few years.

Foster parents and their families want to feel safe in their own homes, and we want the foster youth to be safe as well.

**-School challenges:**

The Educational Stability Act creates additional challenges for us to expedite placements. In Philadelphia, the process to obtain a determination as to whether the child can move schools takes too much time. Because of this, it eliminates potential matches when the foster parent can't commit to driving a youth to and from school for months on end with no clear plan in sight as to when the determination may be changed.

**-Poverty and disproportionality in Black youth and families:**

In a city where nearly a quarter of residents live in poverty, the deluge of new abuse reports disproportionately involves Black families, leading to a sharp increase in the number of Philadelphia children being taken from their parents. Over the past five years, the system has become overburdened by the flood of unfounded abuse cases, taxing resources that are already understaffed. As a result, many families end up having an "open" case with Philadelphia DHS when all they really need is help with life essentials, such as food and housing.

**Potential Solutions**

We recommend that:

- The pre-placement process be reevaluated and reconfigured so that essential and current information is shared with the care provider at the same time a referral for placement is made. This will help us make an appropriate match and ensure the most successful outcomes and stable placements for children and youth.
- Bringing back a comprehensive evaluation center to help assess, evaluate, and frame youth's behaviors should be considered. This process would help coordinate the most appropriate pre-placement for the youth.
- Resources with the School District, Community Behavioral Health, and Philadelphia DHS can increase their coordination efforts to blend funding and supports in a braided manner to wrap services around these youth.
- Increase and expand training opportunities for professionals on when to report, and when it's better to provide help to a family in need instead.
- Consider additional resources to help support families and to keep them intact. This includes investment in more prevention and community-based programming for youth and families to support the youth to remain safe and live with their families. For example, Gemma Services is launching a voluntary, parenting program for families with young children ages two through five, called the Family Support Program. This program uses an evidence-based curriculum to support parents and guardians in Philadelphia who need extra support in managing difficult behaviors of young children. We believe early investment in proven practices will provide long term sustainable impact to the challenges that are facing our system.

I can be reached at [mharvey@gemmaservices.org](mailto:mharvey@gemmaservices.org) for any additional information.

Very truly,  
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Gemma Services