



How Three New York Counties Are Right-Sizing Congregate Care and Prioritizing Family-Based Care

Overview

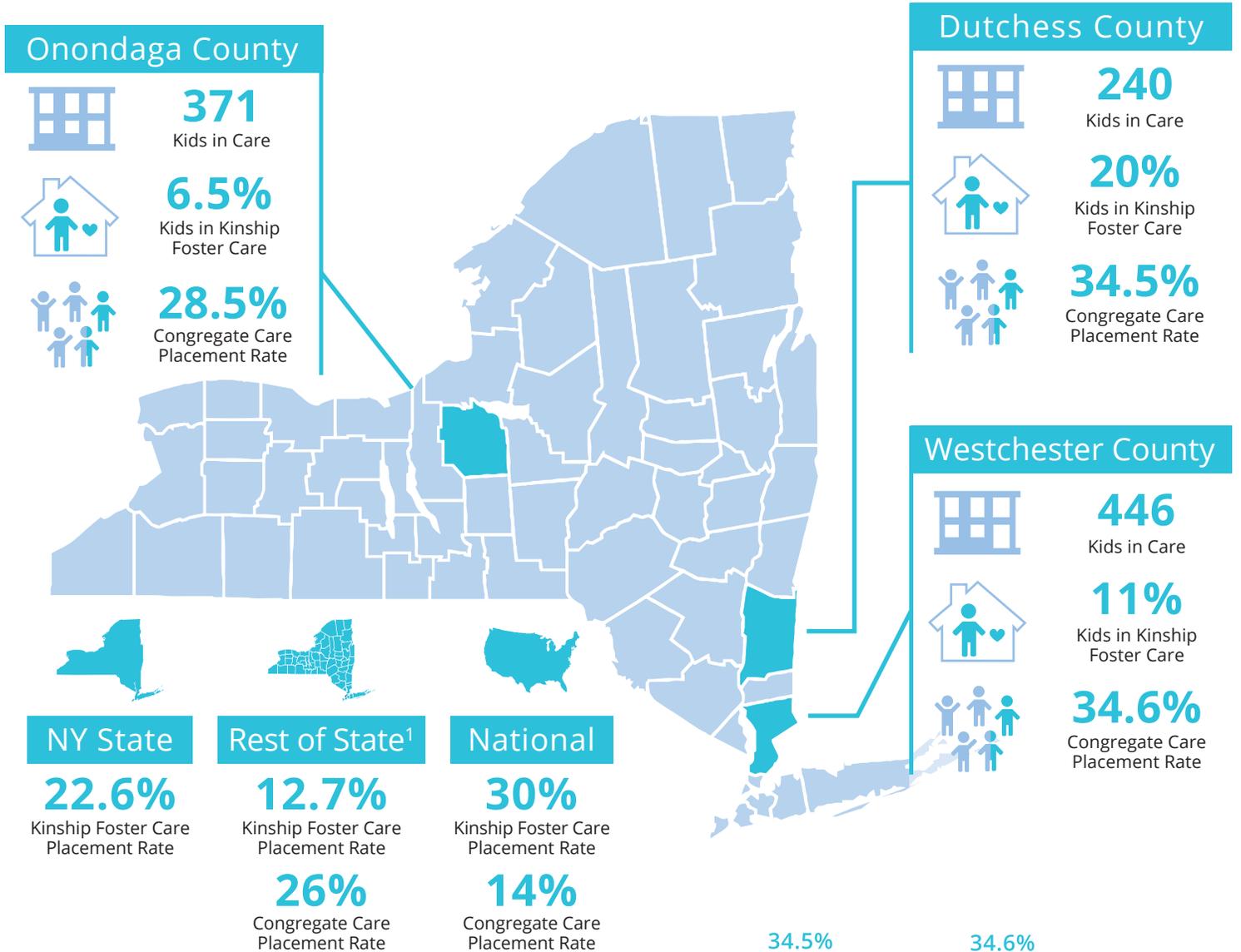
As leaders throughout New York brace for systemic changes brought with new federal legislation, counties can prepare by looking to their neighbors for effective strategies that prioritize family-centered practices and are also financially feasible. The Family First Prevention Services Act (FFPSA) makes way for a renewed focus on family-based foster care and preventive services. The law includes federally-funded preventive service provisions to keep families together, an extension of Chafee funding to age 23, new federal-funding opportunities for kin navigator programs, and an expansion of Education and Training Vouchers up to age 26. Perhaps most challenging for New York, the FFPSA limits federal reimbursement for certain congregate placements.

With some of the highest congregate-care placement rates in the country, New York and its counties must be proactive: leaders can prepare now by improving policies and practices to recruit and strengthen foster and kinship families and evaluate its current use of congregate care. Three counties in New York have reform initiatives underway to reduce unnecessary congregate care and increase kinship foster care, which in turn has reduced lengths of stay and increased permanency. Though they are each at different stages of implementation, Onondaga County having had the earliest start, they have shown that shifting their systems is possible with strong management, collaboration and smart reinvestment strategies.

The stories of these counties - Onondaga, Dutchess and Westchester - are discussed in this guide, including a review of their key motivations and strategies to effectively influence their departments' cultures and the priorities and practices of contracted providers. Not only is it possible to reform our systems in a collaborative and sustainable way, it is financially beneficial in the long run.

The online companion to this overview is an information clearinghouse, FamilyFirstNY.org, that will house the strategies and tools used and developed by Onondaga, Dutchess and Westchester Counties as well as resources from national partners. Practitioners will find instructions, forms and templates to help catalyze reforms in your county. This website will be updated regularly with new tools, resources and key developments impacting New York as a result of FFPSA.

Baseline Data, 2017

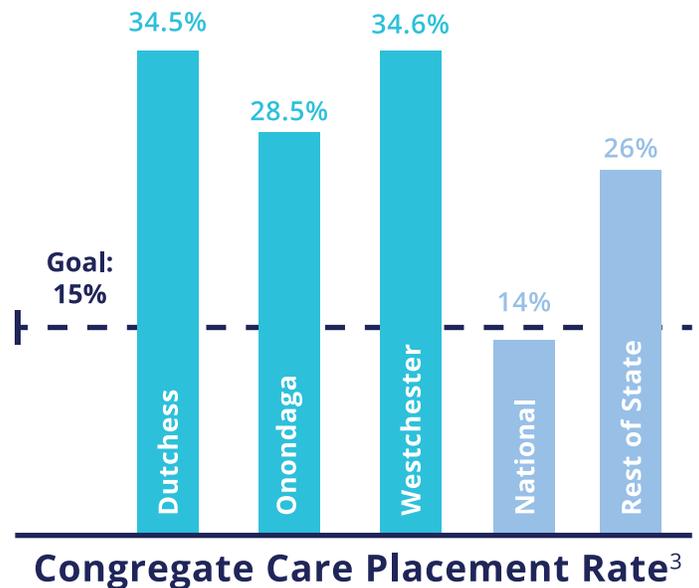


Placement Costs

Congregate Care is 3-10 times more expensive than family foster care. For example in New York, one child in congregate care can cost \$134,000 a year versus \$27,000 for a family-based placement.²

Family-Foster Care

Congregate Care



¹ ROS is an acronym for "Rest of State" which refers to all the counties outside of those that make up New York City. It is important to filter out data from NYC when looking at statewide trends because averages that include NYC may not accurately represent trends in the ROS due to the large foster care population in NYC.

² Costs based upon fiscal analyses completed by Onondaga County Department of Children and Family Services.

³ County data from 2016, accessed from OCFS MAPS profile

Initiating Reform

Contending with poor permanency outcomes and long lengths of stay, Onondaga, Dutchess and Westchester Counties felt a sense of urgency to improve their systems, and they identified congregate care as a critical area of focus. Getting started involved accepting that there was a need for reform, articulating their motivations, and working through and moving past some deep-rooted assumptions. Recognizing their motivations and assumptions poised the counties to more accurately define the issues and develop targeted solutions to improve family outcomes.

Goal:

Reduce congregate care and increase kinship foster care for improved permanency

Motivations



Reduce Overreliance:

Too many kids are placed into congregate care and many don't need to be there.



Improve Well-being & Permanency:

Congregate care adds to trauma, increases lengths of stay and often leads to aging out.



Be Cost-effective:

Family-based care is less expensive and has better outcomes.

Assumptions Challenged



Congregate care placements are mostly JD/PINS



Kinship caregivers do not want to be licensed



Kinship caregivers will not pass background checks



Foster parents do not want teens



Youth in group care cannot be successful in a family

Conclusions

If we remove barriers and provide better support to staff, it is possible to certify kinship families and create stable family-based placements for teens.

“Kinship allows you to increase foster parent recruitment, increase permanency, and ensure that kids feel like they belong.”

Jim Czarniak

*Onondaga County Children and Family Services
Deputy Commissioner*

“Children need a home.”

Sabrina Jaar Marzouka

*Dutchess County Community and Family
Services Commissioner*

“We want to improve outcomes for children while reducing the unacceptable dependency on congregate care.”

Elizabeth Dwyer

Westchester County Director of Child Welfare

Case Studies of Reform



“You have to bring naysayers to the table and work diligently to get them aligned to what you’re thinking.”

Jim Czarniak
Onondaga County Children and Family Services Deputy Commissioner

Jim Czarniak, Deputy Commissioner of Onondaga County’s Department of Children and Family Services, was promoted to his position in 2016 and quickly realized that things needed to change. A panel he attended led by the Annie E. Casey Foundation inspired him to act. He returned to his office, analyzed his data, and found an alarming trend. The county was overreliant on congregate care and failed to make sufficient use of kinship foster care.

Diagnosing the Problems and Analyzing the Business Process: Jim and his team looked at county-wide data over time such as placement types (including informal kin placements), lengths of stay, demographic data, clinical diagnoses and foster home capacity. They found that they were placing children directly into institutional care, that placements were unstable, reentries were high, aftercare supports were lacking, and that kin were only used for informal placements and lacked the financial and service supports they required for permanency.

The next step was for the county to go deeper into their removal and placement process. Key barriers emerged from this analysis including: tight court deadlines, gaps in case histories, unclear case transfer procedures between CPS and foster care, limited family-finding resources, few kinship foster care training options, no expedited certification process, and limited staff experience with certifying kinship foster homes and processing KinGAPs.

Developing Solutions and Earning Stakeholder Support: Jim’s greatest asset in his campaign to transform Onondaga County’s placement practice from institution to family, has been his stakeholder team and staff. They have developed the key innovations and strategies to overcome existing barriers, and they work together to achieve them. While Jim gets a lot of credit for the shift that he is leading, he did not do it alone. He harnessed the input from the converted and naysayers alike and developed a robust implementation team made up of diverse stakeholders.

Onondaga County’s Child Welfare Stakeholder Group Meeting is co-chaired by the lead judge for the Court Improvement Project and the Deputy Commissioner of Child Welfare for the county. The stakeholder group is comprised of all family court judges, child welfare staff, county attorney’s office staff, a CASA program representative, family court clerk’s office staff, attorneys for the child, providers including referral agencies, medical providers and mental health providers, foster care agencies and OCFS regional staff. The collaborative has four standing work groups including: Legal Issues, Kinship and Family Focused Placement, Adoptions, and Parenting Time/Visitation. This group continues to meet to review their strategy and data, identify new areas of focus, and divide the work.

Due to the savings and reinvestments, the reforms are completely sustainable and there is more funding than before invested in family and permanency-centered work.

Triage Model: The stakeholder group put their heads together to develop a new process to address time delays and develop expertise in certifying kinship homes. The team explored the pros and cons of training all staff versus training a few specialists who would build progressively more expertise over time. The majority believed that creating specialists would have greater impact and be more feasible. Through collaborative thinking and researching national best practices, Onondaga's stakeholder team developed the concept of a time-bound "triage." It brings together all the key partners on a case including family, to complete case histories, identify family resources, secure material needs, and so on. Not only has the Triage Model led to more family-based placements, it also has decreased approval times for safety assessments of homes, for supplies and material needs of kin families, and has improved the preparedness of workers in court which has, in turn, increased the family court's confidence in approving kin placements.

Kinship Foster Care Training and Certification: While kinship resources were being identified earlier and more frequently, Onondaga had to simultaneously increase its capacity to find, certify and train new kinship foster families. The county subcontracted with Hillside Family of Agencies to support this effort. It involved more family-finding, new procedures to expedite certifications for families willing to take teens or sibling groups, revised home-study assessments, more frequent and flexible training options, and ongoing support services for families after placement.

Stepping Down Youth in Congregate Care: Recognizing that congregate care placements were not only the first placement for many youth, but also becoming a final destination, the county developed a monthly case review to assess the continued need for high-levels of care for all youth in congregate care. Onondaga County partnered with one of their provider agencies, Elmcrest Children's Center, to develop a process of reviewing each case for

progress towards behavioral health and permanency goals. New congregate care case reviews have helped to reduce lengths of stays, and moved youth to lower levels of care when they are ready, thereby reducing expensive congregate care bed days.

Prevention, Lowest Level of Care and Aftercare Supports and Services: It only took about 6 months for the county to see results and start realizing significant cost savings. In the first year of reforms, 2017, the county saw cost savings of about \$3 million of which the LDSS successfully retained \$700,000 for enhanced supports for kinship caregivers, aftercare and Family Functional Therapy. In the second year, 2018, the county realized \$6 million dollars in savings with an investment of \$1 million dollars to support family-based care, kinship foster care and permanency. Due to the savings and reinvestments, the reforms are completely sustainable and there is more funding than before invested in family and permanency-centered work.

Marketing and Communication: Sharing and celebrating success was a key part of Onondaga's strategy to gain support for this initiative both internally and externally. Jim and his team launched the #Allin4Kin campaign to communicate the goals of this reform effort and to generate ongoing urgency and commitment across the child welfare community. This campaign included a revised website, consistent messaging, and a well-attended regional convening.

This reform effort has been underway since July 2017, and by acting with urgency, analyzing data, evaluating barriers, leveraging the experience and expertise of his department and partners, the #Allin4Kin initiative has produced remarkable results. The next challenge for the county is to address youth in the highest levels of care and to develop a community-based therapeutic model to support them in the home.

Reforms

“Set aggressive goals... When you know your resources and where you are going, you can start making change.”

Jim Czarniak

Onondaga County Children and Family Services Deputy Commissioner

Placement Practice



- Dedicate a Triage Team to ensure a kin-first placement and a smooth case transfer between CPS and Foster Care for all new entries within 72 hours of removal.
- Increase capacity to certify kinship homes through expanded and more frequent training options, and emergency and expedited kinship certification.
- Require director-level approval for all congregate care placements (a “firewall” policy).

Support Foster/Kinship Families



- Expedite certification of homes willing to take teens and sibling groups.
- Create financial and program supports for foster/kin homes with teens/siblings and streamline process to obtain supports.
- Update current home study to support more kin options.
- Dedicate slots for Functional Family Therapy for kinship families to support therapeutic needs of families.

Step-Downs & Permanency



- Review congregate care placements to determine continued need for higher level of care and to identify family-based placement options.

Reinvestment of Cost Savings



- Shift contracts with congregate providers to provide funding for aftercare supports.
- Reinvest savings into staffing required for Triage Model.
- Fund enhanced foster-boarding-home rates and supports for youth with high needs in therapeutic/treatment foster homes.

Jim’s Advice to Others



Prioritize messaging and communications to all stakeholders, particularly providers



Set aggressive goals, bring naysayers to your table and actively engage them in the solution



Understand how your decisions translate to the budget and **be strategic about the financing**

Stakeholder Buy-in



Launched an **#Allin4Kin campaign** to disseminate new policies and key messages via a website and stakeholder meetings to garner community-wide support.



Developed a **diverse implementation team**, that involved input from stakeholders from every level.



Hosted a regional convening to discuss Onondaga's new vision and practices.

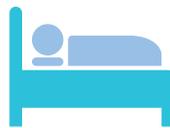
"Success brought buy-in. If you start showing results, they'll be convinced."

Jim Czarniak, Onondaga County Children and Family Services Deputy Commissioner

Year 1 Progress



12.5% of youth now in kinship foster care, up from 1%



Projected **25% reduction** in congregate care bed days including **6000 fewer institutional-care bed days**



71% of referrals to Triage Team resulted in a supported kinship placement



Cut costs by 25% even though more kids are in care (because more kinship homes are now certified)



Saved \$6 million and **invested \$1 million** back into family support services



75% of youth are in home settings, up from 66%

The Key to Success



Congregate Care Gatekeeping



Reinvestment



Collaboration & Buy-in

Case Studies of Reform



“This is the most rewarding initiative because of the impact it has on families.”

Sabrina Jaar Marzouka
Dutchess County Community and Family Services Commissioner

County Commissioner Sabrina Marzouka is passionate about children and families. She and her leadership team are reforming their system to put family back at the center of all that they do. Dutchess County underwent a comprehensive data analysis and diagnostic period that helped them challenge the assumption that congregate-care placements were driven by probation. Instead they found that many children, including babies, were unreasonably placed in an emergency shelter as a first placement, leading to long lengths of stay.

Developing a Kin-First Placement Culture: The county developed a multi-pronged approach to achieve its goals, with increasing kinship foster care as a central strategy. Building upon a strong culture of kinship (albeit, informal and relatively unsupported placements), Dutchess County’s leadership team decided to establish gate-keeping procedures to disincentivize first placements into group care and to facilitate increased kinship foster care. The team identified barriers to kinship certification and placement by analyzing the county’s business process through Kinship Process Mapping, and learned that a key gap in its process was a failure to continue family finding throughout the life of the case. Dutchess County is contracting with 3P Consulting LLC for training on family search and engagement, which includes a site visit for county staff and providers to a

Massachusetts-based agency, Plummer Youth Promise, to learn firsthand how the model works.

Supporting Staff: To maintain momentum for the county’s reform initiative, Sabrina strongly believes in communication, transparency and keeping a pulse on the front-line work. She conducts “listening tours” with all levels of staff and addresses issues both large and small; for example, she made improvements to the county vehicle parking system and installed changing tables in the visitations rooms in response to staff suggestions. These efforts helped to establish trust and a sense of comradery in her department. She prioritized staff support by reducing the supervisor-to-staff ratio by nearly half. Moving away from a “blame” culture to one focused on teamwork and collective responsibility invited more discussions of opportunities and solutions. In Dutchess County, sustaining progress is about clear and frequent communication, being out in the field, responding to the concerns of staff, and acknowledging that burn-out is prevalent in child welfare.

Even though the county only began to implement its strategies in April 2018, it has seen incremental improvements. Sabrina’s advice to other leaders is to be ambitious with your goals, address staff concerns, be collaborative and always refocus the case practice on the needs of the entire family unit.

Year 1 Progress



Congregate care population has **reduced 40% from 2017**



Congregate care placement rate is **27% of total in care population**, compared to **35% in 2017**



LOS have decreased anywhere from 17% to 46% since 2016 depending on the placement type and entry year

“By strengthening families, we can create a community where children thrive and can be resilient in their environment. Failure is not an option.”

Sabrina Jaar Marzouka, *Dutchess County Community and Family Services Commissioner*

Placement Practice



- Institute new gatekeeping policy to require high-level approval for new congregate care placements.
- Implement kinship firewall policy to discourage non-kin first placements.
- Identify family resources during in-home preventive services.

Step-Downs & Permanency



- Review all congregate care placements monthly to determine continued need for higher level of care and to identify family-based placement options.
- Hold providers accountable to stepping down children to family by requiring extensive justification for placements.

Support Foster/Kinship Families



- Utilize continuous Family Search and Engagement (3PLLC), a method to support youth permanency through effective family search and engagement, throughout the case.
- Enhance support for all foster and kin families including increased contacts, respite care and customer service to increase placement stability.
- Create an Immediate Response Team that meets when a kin placement is at risk of disruption to provide the family with supportive community resources to preserve the placement.

Financing and Provider Contracts



- Collaborate with key providers to find ways to adjust existing contracts for unused bed-days to support in-home services.

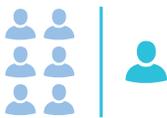
Stakeholder Buy-in



Developed workgroup and assigned a staff member internally to be the project manager to convene the workgroup to review progress towards goals on a monthly basis.



Developed an internal quality assurance team to continuously analyze progress and report back to the stakeholder group.



Restructured staff to better support workers by reducing the supervisor to staff ratio by nearly half (from 10:1 to 6:1).



Announced ambitious new goals and efforts to department and external stakeholders.

“Sustaining and maintaining buy-in is a matter of communication. You want to show you mean what you say and that you care.”

Sabrina Jaar Marzouka, *Dutchess County Community and Family Services Commissioner*

The Key to Success



Congregate Care Gatekeeping



Project Management



Staff Support

Case Studies of Reform



“Residential care is meant to be a temporary, therapeutic intervention, but it had become a destination for too many of our young people.”

John Befus

Westchester County Department of Social Services First Deputy Commissioner

Together with his leadership team, First Deputy Commissioner John Befus set a goal to reduce congregate care in the county three years ago. At the time, Westchester County had one of the highest congregate care placement rates in the state at nearly 50%. John believed the county could build upon the progress they made starting in 2012 to reduce PINS/JD placements. The launch of a Cross System Unit involved a collaboration between child welfare, mental health, probation, and community agencies to reduce PINS placements, reduce reentries and shorten lengths of stay. The county saw success by prioritizing preventative programs and diverting potential PINS placements into community resources. This resulted in more than a 50% reduction of the PINS/JD population.

Through this effort, Westchester experienced an overall decline in its foster care census and congregate care; however the congregate-care placement rate continued to be too high at more than 40%. Director of Child Welfare Elizabeth Dwyer believed the county needed to improve their front-end placement process to increase kinship and foster-family-based care, and also at the back end to speed up step-downs and discharges to permanency.

Diagnosing the Problems and Increasing the Number of Foster and Kin Parents: To tackle these front-end reforms, the county engaged in a comprehensive data diagnostic and analysis period in 2017. It identified opportunities to improve its foster parent recruitment and retention pipeline, and to promote kinship foster care. It analyzed how well its current pool of foster parents is utilized and identified a need to recruit more foster parents in

high-need neighborhoods. The county revised contracts with private providers to set more ambitious goals and to improve the quality of foster parent training and onboarding. To increase kinship foster care, the county reorganized staff in district offices to assign a kinship specialist to each case at risk of foster care. This specialist is responsible for identifying kinship resources suitable for placement prior to removal. The team is also currently evaluating policies in an effort to reduce barriers to kinship certification.

Diagnostic Treatment Center Case Reviews: On the back end, Elizabeth believed one of the barriers to decreasing lengths of stay in congregate care were the county’s diagnostic centers. The county’s first intervention was to assign a county worker on a part-time basis to partner within a diagnostic center that placed a high number of children in residential treatment centers. This worker now participates in case review meetings at time of entry and at the end of a 30-day diagnostic period to review diagnoses, alternative placement options, and to identify kin who could provide an appropriate level of support. These meetings, and the emphasis on kinship and family foster care, are helping to shift the culture and practices across the department and with providers.

By assigning a project manager to the reform initiative, analyzing data upfront and periodically throughout the initiative to monitor progress, and working collaboratively with its providers, the county is staying focused and making strides to reduce its overreliance on congregate care. This lays the foundation for continual progress as they enter the next phase of implementation.

“We quickly realized that kinship foster care is the answer for so many reasons: well-supported kin is not only the best alternative to group care, but it’s where the kids want to be, with family.”

John Befus, Westchester County Department of Social Services First Deputy Commissioner

Placement Practice



- Continually work with probation and mental health to reduce PINS/JD placements.
- Prevent removals with pre-placement conferences focused on keeping families safe and intact in the community.
- Assign existing staff to “Kinship Specialist” role in all district offices to collaborate with CPS to facilitate kin-first placements.
- Conduct reviews of congregate care referrals to identify alternatives when possible.

Step-Downs & Permanency



- Implement case review process with Diagnostic Treatment Centers at time of entry and 30-day assessment period.

Support Foster/Kinship Families



- Improve the recruitment-to-certification pipeline and revamp orientation and training.
- Develop higher targets for agencies contracted for recruitment.
- Support kinship foster families through identification, certification and onboarding.

Year 1 Progress



17% reduction in entries since 2016, impacting their overall congregate care population



A **44% decline** in the number placed in congregate care since 2016

The Key to Success



Congregate Care Gatekeeping



Project Management



Collaboration with Providers

Summary of Strategies

The table below summarizes how the strategies outlined in the Onondaga, Dutchess and Westchester case studies connect with the strategies recommended in the companion piece to this toolkit “The Family First Act: The Tailwind Needed to increase Family-Based Care in NY” (April 2018, Redlich Horwitz Foundation).



Onondaga



Dutchess



Westchester

Front-End Strategies

Reduce entries into care, when possible.	★	★	★
Revise placement procedures to increase family-based care and reduce unnecessary residential care.	★	★	★
Initiate child-centered kinship recruitment when a child first becomes known to the child welfare system.	★	★	★
Implement a Kin-First set of policies.	★	★	★
Significantly intensify the targeted recruitment of foster families.			★

Back-End Strategies

Conduct monthly Congregate Care Reviews to expedite step-downs and permanency.	★	★	★
Pursue child-centered recruitment to transition children to family-based placements.	★	★	★

Recruit and Retain Kinship and Foster Parents

Expedite certification for kinship families.	★	★	★
Know your foster-family pool by conducting a foster-family utilization review.			★
Target foster family recruitment by geography, profession, and with the help of existing foster parents.	★		★
Dedicate a worker to provide assistance to foster and kinship parents as they navigate the licensing, certification, and training requirements.	★	★	★
Utilize trauma-informed pre-service and skills-training curricula to prepare families.	★		★
Create peer-support networks for kinship and foster parents.		★	
Adhere diligently to prudent parenting standards.	★	★	★

Financing In-Home and Community-Based Services

Obtain county commitment to reinvest portion of savings from residential placements into child welfare.	★		
Reinvest the savings from reductions in residential placement to augment recruitment, retention and support of foster and kin families.	★		
Renegotiate contracts with residential providers to prioritize in-home treatment services over bed days.	★	★	

Moving Forward

The reform efforts initiated in Onondaga, Dutchess and Westchester counties demonstrate that it is possible to right-size congregate care and prioritize family-based care by analyzing and adjusting placement practices, monitoring current congregate care placements, and increasing kinship foster care. By collaborating with vested stakeholders to develop solutions, the counties were able to generate momentum and a shared sense of responsibility throughout their departments.

Many other efforts are underway throughout New York State to reduce congregate care, in part compelled by the new residential provisions that will be mandated by FFPSA. The Office of Children and Family Services has launched a Family First Implementation Workgroup and is developing a blueprint; the Administration for Children’s Services and other local departments of social services are conducting fiscal and data analyses; provider agencies are convening and learning from national and state experts; child welfare advocates are conducting policy analyses and educating policymakers; and other foundations and child welfare organizations such as Casey Family Programs and the Annie E. Casey Foundation are providing thought leadership and technical assistance.

The Redlich Horwitz Foundation is working in collaboration with many of these partners and intends to support efforts across NY to develop and scale meaningful strategies for implementation. Though FFPSA is unprecedented in the level of policy and practice changes it requires, these case studies show that its vision is achievable in New York.



Collaboration



Staff Support



Project Management



Congregate Care Gatekeeping



Child-Centered Recruitment



Kinship & Foster Parent Support



Goal:
Meet FFPSA Policies and Requirements in NY

Acknowledgements

The Redlich Horwitz Foundation is fortunate to have partnered and supported the visions of Onondaga, Dutchess and Westchester Counties. The development of this guide would not have been possible without their generous assistance. These counties spent numerous hours speaking with us, providing data, sharing forms and templates, and more. The Redlich Horwitz Foundation is thankful to all the county stakeholders who helped make these efforts a success, leading the way for statewide reform initiatives.

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Tracy L. Connelly, Quality Assurance/Contract Monitoring Supervisor
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Westchester County



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Phil Goldstein, Associate Commissioner Child Welfare
Elizabeth Dwyer, Director of Child Welfare
Marcia Forrester, Manager, Children Residential Services and Child Welfare Authorization Unit
Michelle Bethencourt-Garcia, Program Administrator
WDSS Staff and Providers

About Us

The Redlich Horwitz Foundation is dedicated to improving the lives and long-term outcomes of children and young adults in the foster care system in New York and elsewhere. We believe that every child who experiences foster care deserves to be raised in a loving, stable family.

The Foundation's approach is both to support collaborative work among government agencies and nonprofit organizations to identify and scale best practices, and to provide administrators and policy makers with the data, research and grassroots voice needed to propel change in the foster care system. We work collaboratively to implement thoughtful, data-driven policies and programs directed toward **(1) ensuring that every child exits the foster care system into a permanent, loving family through timely reunification, adoption, kin guardianship, or other lifelong adult connection** and **(2) promoting more efficient and effective practices and policies across the systems that impact children and youth in foster care.**

To learn more about our work and to contact us visit rhfdn.org.

Our Mission

We believe that every child who experiences foster care deserves to be raised in a loving, stable family. We work to increase and improve family-based care and to reduce time to permanency for all children in the foster care system in NY.

What We Do

Produce Reports,
Tools, & Convenings



Grant Funds through
RFPs for Counties &
Provider Agencies



Support Grassroots
Voice & Coalition
Building



Scale County
Data Systems





Redlich Horwitz
Foundation