



House Appropriations Committee
Article II
Testimony of Rachael Keefe, MD, MPH, FAAP
Feb. 19, 2019

Submitted on behalf of:
Texas Pediatric Society
Texas Medical Association

Chair Davis, Vice Chair Sheffield, and Committee Members,

My name is Rachael Keefe, MD, MPH, FAAP, and I am a pediatrician who works primarily with children in foster care at Texas Children's in Houston. I am testifying on behalf of the Texas Pediatric Society and the Texas Medical Association. Thank you for the opportunity to provide testimony and recommendations on Article II of the budget as currently proposed by the House.

Last week, my colleague testified to the Senate Finance Committee in support of the Department of Family and Protective Services (DFPS) Exceptional Item Placeholder No. 9 relating to the Family First Prevention Services Act (FFPSA) as introduced in the August 2018 legislative appropriations request (LAR). During this hearing, DFPS introduced an updated version of the LAR that did not include this placeholder, which is of great concern to Texas physicians. We appreciate the diligence of our state agencies in continually improving our child welfare system, and we recognize the necessity to appropriate funding to address issues pertaining to the ongoing federal lawsuit. Although the state has chosen to delay implementation of FFPSA until 2021, we urge the legislature and state agencies to make the investments and preparations needed in the 2020-21 biennium to ensure we can continue to draw down federal funds that support children in foster care and maximize new federal funds for prevention services that keep families together. **Our organizations urge the legislature to pursue any additional funding needed to address new requirements and opportunities through the federal FFPSA.**

In February 2018, Congress passed FFPSA as a part of the Bipartisan Budget Act. This landmark legislation aims to shift focus and investment nationwide toward family-based prevention services and, to the extent possible, the placement of children in family-like and least restrictive settings. As a pediatrician, I know that education and support to caregivers is critical because it helps them better understand child development, foster healthy coping mechanisms, and use appropriate discipline techniques, all of which help break intergenerational cycles of abuse and neglect. FFPSA provides an opportunity for Texas to enhance its efforts in child abuse prevention by allowing states to draw down new federal matching funds to prevent the need for a child to enter foster care. FFPSA dollars will support evidence-based and trauma-informed mental health and substance use services as well as in-home parenting skill-based programs. With strategic investment and planning, Texas will be able to leverage the new dollars to bolster state programs that increase the resiliency, health, safety, and productivity of children and families.ⁱ

FFPSA also stipulates that states must take steps to safely reduce the use of inappropriate congregate and group care. In its statement supporting FFPSA, the American Academy of Pediatrics (AAP) urged

Congress to ensure the bill required that “federally-funded congregate, or group, care facilities meet common-sense standards for licensed clinical and nursing staff.” In addition, AAP asserted that “children fare best when they are raised in families equipped to meet their needs. Congregate care, when necessary, should be of high-quality for the shortest possible duration and reserved for instances when it is absolutely essential.”ⁱⁱ Investing in family-based placement capacity and improving standards in congregate or group care settings are essential to ensure children are placed in the least restrictive, most family-like setting and, when necessary, receive appropriate therapeutic supports.

Because I am a pediatrician, FFPSA brings to mind many children and families that I work with. I recently worked with a mother who had experienced severe postpartum depression that went unaddressed. Unfortunately, this mother’s story involved the fatality of her infant and the placement of her remaining children in foster care. I cannot help but think how the outcome would have been different if this mother had received the mental health or in-home parenting supports that FFPSA will support.

Thank you for the opportunity to provide testimony today. We know there are many competing priorities within our child welfare system, but Texas physicians urge the legislature and state agencies to continue working toward implementation of FFPSA to support our mission of a healthy and prosperous future for Texas children.

ⁱ Children’s Defense Fund (February 2018). The Family First Prevention Services Act: Historic Reforms to the Child Welfare System Will Improve Outcomes for Vulnerable Children. Retrieved from: www.childrensdefense.org/wp-content/uploads/2018/02/ffpsa-short-summary.pdf.

ⁱⁱ American Academy of Pediatrics (June 2016). AAP Statement Urging Advancement of the Family First Prevention Services Act as Written. Retrieved from: www.aap.org/en-us/about-the-aap/aap-press-room/Pages/AAPStatementUrgingAdvancementoftheFamilyFirstPreventionServicesActasWritten.aspx.