

**SENATE BILL REPORT**

**ESHB 1608**

**AS REPORTED BY COMMITTEE ON CHILDREN & FAMILY SERVICES,  
APRIL 4, 1991**

**Brief Description:** Improving services for children.

**SPONSORS:** House Committee on Human Services (originally sponsored by Representatives Leonard, Winsley, Rasmussen, Beck, Anderson, Hargrove, Brekke, Bowman, Dorn, Hine, Rust, Riley, Spanel, H. Myers, Dellwo, Phillips, Haugen, Jacobsen, Jones, R. King, Pruitt, Basich, R. Johnson, Van Luven, Holland, Valle, Paris, Belcher, Sheldon and O'Brien).

**HOUSE COMMITTEE ON HUMAN SERVICES**

**HOUSE COMMITTEE ON APPROPRIATIONS**

**SENATE COMMITTEE ON CHILDREN & FAMILY SERVICES**

**Majority Report:** Do pass as amended.

Signed by Senators Roach, Chairman; L. Smith, Vice Chairman; Craswell, Stratton, and Talmadge.

**Staff:** Lidia Mori (786-7755)

**Hearing Dates:** March 28, 1991; April 4, 1991

**BACKGROUND:**

The number of group home beds in Washington has declined dramatically over the past 10 years. During that time there has been an increase in child abuse and neglect as well as drug and alcohol use by children. Many of the children placed in family foster care or in programs intended for runaways would have been better served by placement in a structured environment such as that provided by group homes.

There is an increasing number of children who are involved in destructive lifestyles involving drug and street gang activity. Services that provide constructive alternatives to drugs and gang involvement are lacking.

**SUMMARY:**

The Department of Social and Health Services is authorized to assess a representative sample of children in its care to determine the appropriate level of residential and treatment services needed. The department will submit recommendations by December 1, 1992, to appropriate committees of the Legislature regarding reallocation of funds for children's services.

Statutory staffing requirements for crisis residential centers are removed. Current law which allows a crisis residential center to be also licensed as a family foster home or group care facility is stricken.

The Department of Social and Health Services is authorized to contract with a community-based nonprofit organization to establish a three-step treatment program for gang and drug-involved juvenile offenders. The program must be culturally relevant and will provide institutional, community residential and transitional services for selected juvenile offenders. The department may also establish a therapeutic family home program for up to 15 dependent youth who have been abused, neglected, or abandoned.

**Appropriation:** none

**Revenue:** none

**Fiscal Note:** available

**SUMMARY OF PROPOSED SENATE AMENDMENTS:**

Persons 16 to 18 years old until emancipation are eligible for transitional living services. The youth are living outside the family home and cannot return home, nor is adoption or foster care a viable option. Transitional living programs provide transition to self-sufficient living and minimize the incidence of long-term dependency on social services. An assessment shall be done of each youth to determine whether the most appropriate plan for the minor is preparation for emancipation and whether the minor is motivated to participate in a transitional living program. The transitional living programs may include educational services, assistance to obtain vocational training or job readiness, instruction in life skills such as money management and access to community resources, counseling and facilitation of long-term relationships with significant adults. The appropriation is removed and language is added which clarifies that if funding is not provided in the Omnibus Appropriations Act, this portion of the bill will be null and void.

The Department of Social and Health Services is directed to assess a representative sample of children in its care to determine the appropriate level of residential and treatment services needed. Prior to performing the assessment, the department shall, in conjunction with the private sector, develop a comprehensive, multi-disciplinary diagnostic/assessment tool to be used in conducting the assessment.

**TESTIMONY FOR:**

Concern expressed that since the assessment language is permissive only, DSHS may not conduct the assessment. No clear measurement tools exist with which to perform the assessment. Assessment is needed so that the limited

resources that exist can be well spent. Bill is step in the right direction.

**TESTIMONY AGAINST:** None

**TESTIFIED:** Tom Rembiesa, Executive Director, Ruth Dykeman Children's Center, Washington Federation of Residential Care Providers; Sheila Smith, Ruth Dykeman Children's Center; Teresa Rafael, Children's Home Society; Peter Berlinger, Children's Budget Coalition, Children's Alliance; Colleen Waterhouse, DSHS, Larry Fehr