Welcome to day 120 of Pennsylvania’s budget crisis.

Day 119 brought fierce advocacy from freshman Senator Art Haywood (D-Philadelphia, Montgomery) urging the Pennsylvania Senate to stay in Harrisburg until there is a final state budget.

Haywood sought to block an adjournment resolution – usually a pro forma part of the Senate’s regularly scheduled activities. This adjournment resolution would have the Senate leave Harrisburg after today returning the week of November 16th. A party line vote (31 Republicans, 19 Democrats) favored the Senate taking a break from legislative session through November 16th.

That attempt to put Republican Senators on the spot and in Harrisburg was followed by Republicans removing Governor Wolf’s veto measure for the stop-gap spending bills (Senate Bills 1000 and 1001) “from the table.” These bills were sent to him and subsequently vetoed in late September.

Wednesday then has the PA Senate calendar including Senate Bills 1000 and 1001. If Republicans do put the veto overrides up for a

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Crime Victims Fund gets tapped in federal Bipartisan Budget Act of 2015

In the October 28th edition:

1. **Day 120 of PA Budget Crisis, stage set to override veto of short-term spending**
2. **Crime Victims Fund gets tapped in federal Bipartisan Budget Act of 2015**
3. **Congressional Republicans scramble to get support for bipartisan 2-year budget deal**
4. **Relief from budget caps (aka sequestration) key to bipartisan federal budget agreement**
5. **11 months, 1 Pennsylvania county and 5 child fatalities**
6. **Casey initiated Protecting Our Infants Act clears U.S. Senate**
7. **S. 799 could lead to more intention about Plans of Safe Care for infants affected by prenatal drug and alcohol exposure**
Tucked inside the 2-year federal Bipartisan Budget Act of 2015 (H.R. 1314), which was negotiated to avoid having America default on its debt or shut down the government because of a budget fight, is language requiring that $1.5 billion in the Crime Victims Fund (created by the Victims of Crime Act) be “rescinded and permanently canceled.”

The explanation of the brokered 2-year budget deal assures even as the Crime Victims Fund is used to pay for other portions of the budget deal, the overall deal still “preserves adequate balances to meet programmatic funding needs for the foreseeable future.”

Congressmen Ted Poe (R-Texas) and Jim Costa (D-California) quickly notified House leaders that this “raiding” of the Fund was “not only a

### Congressional Republicans scramble to get support for bipartisan 2-year budget deal

The budget and debt ceiling deal was unveiled Monday after being negotiated by the White House and top Republican leaders in the U.S. House of Representatives (Speaker John Boehner) and U.S. Senate (Majority Leader Mitch McConnell).

The brokered budget deal, which is achieved via a Senate amendment to H.R. 1314, is part final gift and feather in the cap for outgoing U.S. House Speaker John Boehner, who assured Republicans skeptical of the big budget deal that it achieves goals critically important to Republicans including:

- Secure significant long-term savings from structural entitlement reforms.
- Protect our economy from a dangerous default.
- Strengthen our national security and protect our troops.
- Bring certainty to next year's appropriations process.
- Protect more Americans from ObamaCare.
- Reject all of the tax increases proposed by the administration.

Still many Republicans remain unconvinced.

It took a late night meeting and scrambling by the U.S. House Rules Committee to ready H.R. 1314 for a vote in the U.S. House Wednesday.

### Relief from budget caps (aka sequestration) key to bipartisan federal budget agreement

The brokered federal budget deal (H.R. 1314) ensures there will be no government shutdown drama before the November 2016 election.

The deal provides incentive for Congressional Democrats to support it, because it blunts the impact of arbitrary Congressionally imposed spending caps (aka sequestration) on discretionary spending. FY 2016 would be the first year that the full effect of the budget caps would be felt requiring a nearly $40 billion reduction (further reduction) in non-defense discretionary spending.
H.R. 1314 seeks to adjust the spending caps benefitting defense and non-defense discretionary spending equally. In total the caps would be adjusted by $80 billion ($50 billion in FY 2016 and nearly $30 billion in FY 2017).

As Democratic leaders were assuring that the cap adjustment buys breathing room, Speaker [To stay informed, become a CJAR subscriber!](http://www.c4cj.org/subscribe.php)

### 11 months, 1 Pennsylvania county and 5 child fatalities

In recent weeks the Pennsylvania Department of Human Services (DHS) has placed three Pennsylvania counties on a provisional license with regard to the counties’ children and youth services (CYS) operations.

Dauphin, Luzerne, and York Counties now have downgraded licenses and are operating under corrective action plans.

The move by PA DHS to take such action can be traced back, in part, to child fatalities particularly in Dauphin and Luzerne counties.

PA DHS cited concerns about the assessment of safety and risk for children and the struggle to secure and document key safeguards (e.g., background checks for care providers).

As these counties work on corrective action plans and to bounce back from the public and legislative scrutiny resulting from the downgraded licenses, PA DHS recently recommended “a thorough review of the policies and procedures regarding response times” in Schuylkill County.

This recommendation was included in the state’s fatality review report for a 1-year-old that died in December 2014. Within a month of the toddler’s death, there was an open intake [To stay informed, become a CJAR subscriber!](http://www.c4cj.org/subscribe.php)

**A 1-month-old infant died related to unsafe sleep arrangements in February 2014.** During the investigation it was learned that the parents and four children, including the infant, “had been sleeping in bed with the parents.”v The infant was not known to the children and youth services (CYS) agency. However, the family was previously known to the agency in 2011 after law enforcement reported a domestic violence incident between the parents. The parents reported to CYS that they were co-sleeping with a 2-year-old child and the “parents were advised of the safety concerns regarding co-sleeping.”vi A subsequent domestic violence incident occurred, while the father was “high on bath salts.” In this incident, the 2-year-old sustained a “scratch.” The father was incarcerated and released on bail a week later.

The mother resumed contact with him and children and youth indicated that “the mother did not appear to recognize the safety concerns” for the child. A safety plan was put in place requiring that the child, who was injured in 2011, remain with the maternal grandmother “until it was safe and appropriate for him to return to his parent’s care.” Later that year after the father “admitted to illegal drug use,” the family was open for general protective services. Additional children were born to the parents in 2011, 2012 and 2013. CYS closed the family’s case in August 2012 and thus were unaware of the children born in 2012 and 2013.
Both parents were drug tested on the day of the infant’s death and again within a week of the infant dying. The initial drug screens were

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**Casey initiated Protecting Our Infants Act clears U.S. Senate**

Last week, the U.S. Senate approved an amended S. 799 – the Protecting Our Infants Act.

Pennsylvania U.S. Senator Bob Casey joined with Republican (and Senate Majority Leader) Mitch McConnell (R-KY) earlier this year in introducing the legislation.

The legislation directs the federal Department of Health and Human Services (HHS) to study “gaps in research and any duplication, overlap or gaps in prevention and treatment programs related to prenatal opioid abuse and infants born with opioid withdrawal.” HHS has to issue a report to Congress within eighteen months after meeting with diverse stakeholders to develop

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<table>
<thead>
<tr>
<th>Contents of legislation</th>
<th>S. 799 and H.R.1462 as introduced</th>
<th>Senate passed S. 799</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Title</strong></td>
<td>To combat the rise of prenatal opioid abuse and neonatal abstinence syndrome</td>
<td>To address problems related to prenatal opioid use</td>
</tr>
<tr>
<td><strong>Short Title</strong></td>
<td>Protecting Our Infants Act of 2015</td>
<td>Protecting Our Infants Act of 2015</td>
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<tr>
<td><strong>Findings</strong></td>
<td>Congress finds as follows:</td>
<td>Eliminated, no findings included</td>
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<td></td>
<td>1. Opioid prescription rates have risen dramatically over the past several years. According to the Centers for Disease Control and Prevention, in some States, there are as many as 96 to 143 prescriptions for opioids per 100 adults per year.</td>
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<td>2. In recent years, there has been a steady rise in the number of overdose deaths involving heroin. According to the Centers for Disease Control and Prevention, the death rate for heroin overdose doubled from 2010 to 2012.</td>
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<td>3. At the same time, there has been an increase in cases of neonatal abstinence syndrome (referred to in this section as “NAS”). In the United States, the incidence of NAS has risen from 1.20 per 1,000 hospital births in 2000 to</td>
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<tr>
<td>Contents of legislation</td>
<td>S. 799 and H.R.1462 as introduced <a href="https://www.congress.gov/bill/114th-congress/senate-bill/799/text/is">1</a> <a href="https://www.govtrack.us/congress/bills/114/hr1462/text">2</a></td>
<td>Senate passed S. 799 (as amended on 9/30/15 in the Senate HELP Committee and passed by the U.S. Senate on 10/22/15)</td>
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<tr>
<td>Developing recommendations for preventing and treating prenatal opioid abuse and neonatal abstinence syndrome</td>
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<td>Report, scope of study/contents of report</td>
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<tr>
<td>Report, recommendations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improving prevention and treatment for prenatal opioid abuse and neonatal abstinence syndrome</td>
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<td></td>
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<tr>
<td>Improving data on and public health response to neonatal abstinence syndrome – Data and Surveillance</td>
<td></td>
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**S. 799 could lead to more intention about Plans of Safe Care for infants affected by prenatal drug and alcohol exposure**

S. 799, as passed last week by the United States Senate, is silent on a key existing federal statute – the Child Abuse Prevention and Treatment Act (CAPA) and its provision requiring Plans of Safe Care for infants “affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder.”

Still the legislation may well motivate the HHS to elevate attention to and provide guidance to states on Plans of Safe Care.

Pennsylvania has responded to CAPTA by enacting Act 4 of 2014 and Act 15 of 2015.

The CAPTA Plan of Safe Care provision was initially conceived by former Pennsylvania Congressman Jim Greenwood. During a 2002 Congressional debate, the Congressman spoke of a struggle that still exists today:
“These babies are born in hospitals, they are frequently underweight, and they are frequently frail. Much money and effort is devoted to bringing them to health. These children do not meet any definition of child abuse, and probably they should not, but what happens is they are sent home from hospitals every day in this country and it is only a matter of time in so many instances until they return back to the hospital abused, bruised, beaten, and sometimes deceased.”

As Congress was debating this CAPTA provision, the Washington Post wrote a series (‘Protected’ Children Died as Government Did Little) addressing the deaths of “drug-exposed or medically frail newborns” that

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1 Section 702 of Senate amendment to HR 1314
http://docs.house.gov/meetings/RU/RU00/20151027/104149/HRPT-114-HRept114-315.pdf

ii http://docs.house.gov/meetings/RU/RU00/CPRT-114-RU00-D001.pdf


v http://www.dhs.state.pa.us/cs/groups/webcontent/documents/document/c_201850.pdf

vi http://www.dhs.state.pa.us/cs/groups/webcontent/documents/document/c_201850.pdf
