EXHIBIT 4
December 12, 2017

Governor Eric J. Holcomb
206 Statehouse
Indianapolis, Indiana 46204-2797

Dear Governor Holcomb:

The five years I have served as the Director of the Department of Child Services have been the most fulfilling of my 36 year career in child welfare. During my tenure, my team and I have taken this agency from an embattled organization that reverted millions of state dollars as children-in-care died, and the facilities that served our most troubled youth closed their doors, to one where children come first. As you are aware, my tenure as director has coincided with a tsunami of heroin and the opioid crisis which has pushed child welfare systems nationally to their breaking point, as children's needs grew to historic levels as their parents continued to place substance abuse above the welfare of their children. Despite these unfortunate circumstances, my team and I achieved historic success in improving the Indiana child welfare system. I would like to highlight just a few of the many accomplishments.

The years before my appointment were marked with conflict and strife between DCS and the provider community, including foster parents, who provide the frontline services to our most vulnerable children. At least three class action lawsuits were filed by providers, residential treatment facilities, and foster parents, concerning the inadequacies of DCS and its relationship with them and the resulting harm to children. The process forced many facilities to close and leave the state. Nearly one thousand beds were lost, just as the opioid crisis hit. My team and I have worked tirelessly to rebuild and restore the synergy between DCS and its providers, and to establish trust and collaboration in serving the needs of children. I would encourage you to ask the CEO of any provider whether the system is more functional now, or five years ago. The gains are undeniable.

The theme of my tenure has been child safety; if children can't be safe, nothing else matters. Under my leadership, the agency has taken concrete steps to reduce child fatalities, despite the need to repair the defective and misleading methodology used before my appointment that kept
the reported numbers of substantiated fatalities due to child abuse or neglect artificially low. These efforts can be seen by the fact that prior to my arrival, approximately 21% of all child fatalities caused by child abuse or neglect, were amongst children who had prior contact with our agency--now that number is close to 5%. Despite the dramatic decline, I have never stopped working to move the number of fatalities of children with prior contact with DCS to zero. Amongst our many efforts, in 2017, we finished planning and implemented the Eckerd Rapid Safety Assessment Tool which uses predictive analytics to identify those children coming into contact with our system most likely of becoming a statistical fatality and providing targeted interventions.

Much has been discussed about the staffing levels of DCS family case managers. Prior to March, 2013, the officially reported staffing numbers were manipulated to the point that they were nothing more than pure fantasy. The staffing deficit that existed as a result of an honest application of the statutory caseload standards and the rising caseloads resulting from increased reporting through the hotline and the opioid crisis caused a need for additional staff. DCS made every effort to reallocate internal positions to maximise the number of employees directly serving children.

In addition to utilizing internal resources to create additional Family Case Manager positions, my team and I have made great strides to reduce turnover and increase the training and professionalism of all staff. The training program DCS provides is state of the art and the model for other states around the country. DCS’s training program is designed to prevent catastrophes, like the one that resulted in the $31 million dollar civil rights judgment against the State for events that occurred before my tenure, in the recent case of Finnegan v. Payne et. al.. Beyond training, one of the most promising efforts to increase services to children and families while reducing turnover, has been the localization of child welfare services in Marion County, the state’s busiest and most complex region. Opening four “local” offices within a single county places services closer to the families, improves employee morale by placing line staff closer to management, and has reduced turnover by 17%.

Many of the issues that formerly attracted public ire and attention have been resolved. No longer is DCS routinely on the front page of the newspaper or the fodder of political cartoons. For example, in 2012, the Indiana Child Abuse Hotline was the center of a legislative study and constant constituent complaints related to long wait times, and ineffective administration. Many of these problems were the result of poor implementation and oversight. The changes that my team and I implemented reduced wait times to the current level of less than 26 seconds, increased quality, and has become a model that other states are interested in to protect children. The Hotline has gone from a pariah to a national model in 5 years.

Despite these and many other accomplishments, I am now in the untenable position of seeing Hoosier children being systematically placed at risk, without the ability to help them. This is a first in my 36 year career devoted to children. I feel I am unable to protect children because of the position taken by your staff to cut funding and services to children in the midst of the opioid crisis.
crisis. I choose to resign, rather than be complicit in decreasing the safety, permanency, and well being of children who have nowhere else to turn. I would request that you accept this resignation immediately and waive my two weeks notice. However, I am willing to serve an additional two weeks, if requested.

Because of the personal respect that I have for you and the love I have for all Hoosier children, I feel the obligation to explain the obstacles that currently endanger the child welfare system. Whoever you choose to succeed me will not be successful unless you aid them in resolving these problems.

First, I have effectively been stripped of the power to run DCS for the past 11 months. Staff from your office chose a chief of staff with no child welfare experience who had been “an asset during the campaign.” The current chief of staff has engineered the hiring of his choices, driven out career professionals, engaged in bullying subordinates, created a hostile work environment, exposed the agency to lawsuits, overridden my decisions, been brazenly insubordinate, and made cost cutting decisions without my knowledge or regard for the consequences. Despite my repeated attempts to secure the additional funding needed to run the agency in this time of crisis, I have followed your instructions and attempted to reduce our budget in any way that does not impact child safety; however, the chief of staff, upon direction from OMB and SBA, is bent on slashing our budget in ways that all but ensure children will die. Any attempts I have made to rein him in on non budgetary issues have likewise not been supported; I am truly the DCS director in name only. The current chief of staff, with the position and authority he has been given by your office, is the greatest threat to this agency and child welfare.

Second, the relationship with the provider community that I have worked so hard to foster over the past 5 years is in jeopardy. Foster parents, child placing agencies, and residential treatment facilities are the backbone of the child welfare system, caring for our most traumatized and vulnerable children on a daily basis. Efforts are now being made to undermine the collaborative relationship that has been established and return to the adversarial, litigious relationship that predated me. In 2016, I, my staff, and the provider community as a whole, including foster parents, engaged in a long term effort to update the antiquated rate rules that no longer met the needs of the State or the providers. All parties engaged in a collaborative rulemaking negotiations to improve the system and prevent litigation. In 2017, these thousands of manhours of work were unilaterally scrapped. If the State does not engage in collaborative rulemaking with its providers on both rates and licensing, substantial litigation and a consent decree are inevitable. Again, I encourage you to speak with the provider CEO’s, their board members, and IARCA about the synergistic relationship and the promise of collaborative rulemaking.

Third, the Child Support Bureau, a lesser known division of DCS exists on the verge of collapse due to antiquated technology. It is not a matter of if ISETS, the current 30 year old system, collapses, but when. This collapse will affect not only DCS, but the prosecutors, every noncustodial parent in Indiana that pays child support, and every child and custodial parent that
receives child support. DCS reserved funds over the course of many years, meticulously planned, and sought federal approval and matching funds for a new system, INVEST. In 2017, after more than 9 years of planning, I was abruptly ordered to cancel the program by your staff. With no alternative plan for modernizing child support, the administration risks a financial crisis for millions of Hoosier families, as the collapse of ISETS will stop ordinary child support payments from getting to children.

Finally, current efforts to reduce or cap staffing in the crucial areas of Family Case Managers and Child Welfare Attorneys will lead to disastrous results. The plan to reduce the contract amounts with the providers serving our children and families by nearly $15 million will leave more than 1000 families without appropriate, court ordered services. This year, DCS was only given permission from your office to request a fraction of the staffing and funds from the general assembly needed to protect children. It is undeniable that the opioid crisis has placed more children in care over the past four years. While this crisis is ongoing, additional funds and staff are needed to protect the innocent children that are being destroyed as a result. Only once society has found a solution to opioid abuse and its consequences, would it be appropriate to even think about cutting funding to child welfare. Remember, today’s children are tomorrow’s parents. What we do now will shape an entire generation.

It has truly been an honor to serve Hoosier children these past five years. I wish nothing but success for the agency and my successor; however, without serious change in the way the Governor’s office approaches child welfare and the needs of vulnerable children, I fear lives will be lost and families ruined

Respectfully,

Mary Beth Bonaventura
Director