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Page 2: Contact Information

Q1

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Page 3: Question 1: Early Learning

Q2

Virginia is known to have a 'non-system' of early learning where programs operate under different departments and sets of rules. What would you do to better link programs and improve the efficiency and effectiveness of Virginia's early learning programs?

I think we need to take a look and decide if we need to combine them under one umbrella, one department; clearly you can breed inefficiency and confusion, as well as having programs work at cross purposes to one another. If the "Children's Cabinet" doesn't address this already, perhaps it ought to. I think we need a cogent and coordinated early learning program enacted across the Commonwealth, especially in underserved areas, like rural and inner cities. I can attest from my experience in healthcare that education is the number one determinant of so many morbidities, it's not even funny. Invest early, and invest in people- in children!- and the benefits to society are enormous. And it may only take linking programs and working efficiently to help address that.

Page 4: Question 2: Foster Care

Q3

Most children entering foster care are returned to their families. In most cases, these families do not receive additional support and services from the child welfare system, which can lead to poor health and education outcomes for children. How do you think the Commonwealth can better support children once they are returned to their families?

Some of it I want to solve in ancillary ways, such as universal pre-K and single payer healthcare. That would certainly ameliorate some of what slips through the gaps when kids move between foster homes, or when they move from foster care back in with their parents. The opioid crisis has also strained the foster care program beyond belief, as well.

I've long had issues with politicians who claim to fight for families, for children, for life, etc, whatever nomenclature you prefer, but then refuse to fund programs like these, to ensure these kids have the support they need in and out of the foster care system. These legislators seem to act like the term "foster care" has an incredible stigma to it, which totally demeans the awesome folks who step up to the plate to care for these kids in their most desperate times of need. I know foster parents; they soldier against unimaginable odds for little recognition and support, because they believe in doing the right thing. Foster care programs need to be completely funded and have the full-throated support and backing of the General Assembly; we need to be advocates for every child in the Commonwealth.

Page 5: Question 3: School to Prison Pipeline

Q4

The US Department of Education data analyzed by the Center for Public Integrity shows that Virginia schools, in a single year, referred students to law enforcement agencies at three times the national rate. Numerous studies show that these school discipline policies increase the chances of these students becoming involved with the adult criminal justice system. If elected, how would you address these issues?

Well, we have a pretty serious problem here in Virginia; we're sending kids to prison and effectively making sure they stay there. Not only does that make zero moral or ethical sense, but the cost to keep these juveniles in prison compared to what rehabilitation programs would be is enormous! And how're we expecting them to learn to do or be anything better if we never take any steps to actually accomplish that?

One concrete thing I do want to work on is the felony larceny rate, which is now \$200, one of (if not the) lowest in the country. The designation of "felon" is an incredibly destructive force that we sling about too cavalierly here in VA. I think a first offense theft should be at something like \$500-600 for it to be a felony. Otherwise, it should stay as a misdemeanor.

I'm generally for ensuring we're giving our CAs and judges the discretion to handle things appropriately, because I'm not a fan of "cookie cutters" or "mandatory minimum sentencing", but I will grant it's something of a roulette wheel depending on which jurisdiction you find yourself in.

I've heard of prosecutors that claim they are there to do justice first and foremost, but they do have totals that affect their funding. The argument then goes, if you happen upon a young-gun trying to make a name for themselves, you're SOL. So I think, in this instance, there are too many variables to allow it to be at the whim of a single person. Give them room to move downward but not upward. The truly bad guys will still be caught, and the one time thief will not be given a lifetime of harm for a single screw-up, especially from an adolescent.

Page 6: Question 4: Health Insurance

Q5

Virginia's Children's Health Insurance Program (known as FAMIS in Virginia) and Medicaid provide low-income children with health insurance that their families would otherwise be unable to afford. If the federal government cuts payments to the states for Medicaid and/or FAMIS, how would you support the health needs of low-income children?

I don't know. This is something that, as an emergency department nurse, concerns me greatly, because right now the answer is "send them to the ER for everything," and I know full well how much of a non-answer that is. I think we really need to be fighting for Single Payer, or something similar, if the Republicans in Washington are truly intent on blowing the system up. We're going to have to do something to fight this on the state level, because I think it's clear that's our only chance to save our kids' well-being. I'm in favor of allowing autonomous practice for nurse practitioners and physician assistants in primary and mental health areas in particular, which would increase access, particularly amongst the at-risk populations served largely by these programs. But that can't fix the federal government's inaction alone. I wish I could give you a solid answer on this one, it'll largely depend on what ends up coming down the pipe. But the answer of shrugging or saying "Everyone can just go to the ER" is NOT acceptable.

Page 7: Question 5: Opioid Epidemic

Q6

Substance abuse by parents affects both the parents and their children. Brain research shows that positive attachment between a parent and child in the first few years of life is critical to the child's healthy brain development. Substance abuse can significantly impact those early bonds between parents and children. If elected, what policy solutions would you promote to address the needs of the whole family?

This is something else I'm on the front lines of fighting in the ER. It's going to take a holistic approach and fighting it from multiple angles to solve it effectively. I wish I had a simple policy solution I could point to here, but I don't, because whatever we do, it's not going to be easy. Or fun. But it's clear it needs to be done, because I've seen the end result, the families it destroys, what it does to kids physiologically, the toll it takes on emergency services folks. Treating it as a health problem and not a crime; keeping the sort-of medication we usually reserve for end-stage cancer patients out of the hands of children in the first place; going after Big Pharma, which (via both action and inaction) is largely responsible for this epidemic; and working on programs like the UVA School of Medicine is, for non-narcotic answers to pain management. We need to stop criminalizing addicts, and focus more on rehabilitation, because the people who get hooked- it's a medical issue. Too many think it's all willpower, but, no, it's a chemical dependency and people need medical help to solve it.

Page 8: Question 6: Cross-Systems

Q7

A child can interact with many systems (schools, health and mental health, courts, etc.) as they grow up. A Virginia Children's Cabinet has been established to facilitate cross-agency collaborations at the highest levels of state government. If elected, how would you facilitate this type of cross-agency collaboration for children?

Yes; I can attest to this personally, having seen it firsthand being an elementary school nurse, as well as an ER Nurse. I'm not exactly sure what I would do address this; I think the Children's Cabinet, as you mentioned, was a good first step. We need to do what we can to incentivize cross-department cooperation- foster a mentality that boosts and streamlines it. I've seen that in the hospital, where different departments will sometimes act as completely different facilities and organizations, but the truth is we're all on the same team here. We all have a common goal and objective, and we're doing the people we're supposed to be fighting for a huge disservice if we don't find a way to work together effectively.

Page 9: Question 7: Mental Health

Q8

In 2016, Virginia ranked 49th in the nation for the rate of youth with major depression who did not receive any mental health treatment. There are many barriers to quality mental health treatment for children, including: type of insurance, place of residence, lack of access and stigma. What do you view as the most significant barrier to effective mental health care for children and adolescents in Virginia, and how would you propose addressing this barrier?

Yes, again, being an ER Nurse, I get to see this first hand, because since our track record of helping folks with mental health issues is so poor, they end up (more often than not) in the ER. Including children and adolescents. We're talented healthcare professionals, but we don't have the breadth of specialized training that these kids deserve, and need, to help them. And they need that specialized help; kids aren't just "little adults". Dumping them in the ER, having to board them for days at a time before they're able to get an inpatient bed. Just closing our eyes and pretending they're not there isn't a solution, and I'll be danged if I'll accept the politicians in the General Assembly who think it is. The problem with this, too, is there ARE politicians who are fighting to fix it, and I'm certain feel very passionately that it needs to get done, but the measures passed are largely ceremonial in nature and do little to actually help solve the problem. We need to listen to the experts in this field and take a systemic look at how we fix it from the ground up.

Page 10: Question 8: Education

Q9

The achievement gap between lower income students and their higher income peers and between white students and students of color has been a persistent problem in Virginia that has recently worsened. How would you address the achievement gap in Pre-K to 12 education?

I think you hit on a good part of the answer there; universal pre-K. I know how much of a difference it's made for my kids to have access to, educationally. And I know first hand how tough it is to be able to give your kids that opportunity. When I started nursing school at UVA, I couldn't afford daycare; thank God I was in the School of Nursing, because I doubt I would have been able to have as understanding of Professors to me bringing a baby girl to class because of it. When I finally did get her into preschool, it literally ended up costing me, by the time she was in kindergarten, more than my UVA tuition. That's not a joke or an exaggeration. I was able to include it into my school loans, and had to work those off- which was tough enough. But how many families are going to be as lucky as I was, first to get her into a world-class preschool, and then be able to afford it? Or in underserved areas, are they going to even be able to access anything at all? I think there are more answers here, but that'd be the first one I'd probably focus on as a legislator.