

# Update on Implementation of the Family First Prevention and Services Act (FFPSA)

February 16, 2021

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# Family First Prevention Services Act (H.R. 5456) (PL 1115-123)

## **Federal Title IV-E Funding (Pre-FFPSA)**

- The **Title IV-E** program was created in 1980 as part of the Adoption Assistance and Child Welfare Act (P.L. 96-272). That law moved earlier authorized federal funding for foster care from **Title IV-A** of the Social Security Act to the new **Title IV-E** and established initial support for adoption assistance.
- The funding stream supports foster care, adoption assistance, and guardianship assistance programs; states receive a level of reimbursements from the federal government for eligible claims. Title IV-E also includes the Chafee Foster Care Independence Program, a capped entitlement for which states are entitled to reimbursement for claims it submits to the federal government, up to a certain level, related to preparing youth in foster care for self-sufficiency when they transition out.

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## Clark County-Federal Title IV-E Funding Demonstration Waiver

Child Welfare (title IV-E) Waiver Demonstration projects were funded by the Children's Bureau and provide jurisdictions with opportunities to use Federal funds to test innovative approaches to child welfare service delivery and financing.

- In July of 2015, Clark County Department of Family Services (CCDFS) began implementing the Title IVE Waiver Demonstration Project. The demonstration project involved the use of a standardized, criteria driven approach to ongoing safety management, which utilized community-based safety services to prevent the placement of children and/or reduce the length of time for children in out-of-home care and keep children safe at home.
- Clark County operated under the waiver providing a **capped allocation rather than the typical reimbursement** process for actual services performed.

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**Mandates major changes to the use of Title IV-E to allow Funding within Two Primary Areas:**

- **Funding for Prevention Services intended to:**
  - Prevent entry into foster care; and
  - Prevent adoptions and kinship guardian placement disruption
- **Limits on Congregate Care of Children (Child Haven)**
  - Continued restrictions on use of congregate care for as a placement resource

# Family First Prevention Services Act (H.R. 5456) (PL 1115-123)

## FFPSA Prevention Services

- **Allows use of Title IV-E for Prevention Services Supports to prevent (1) placement of children and youth into foster care and (2) placement disruption for children/youth in adoptive or kinship guardianship homes.**
- **Covers for 12 months:**
  - **Services to address mental behavioral health**
  - **Substance Abuse prevention and treatment**
  - **In home parent skill-based programs, including parent education, individual, and family counseling**
- **Reimbursement for kinship navigator programs**
- **Reimbursement allowed for up to 12 months for child placed with a parent in licensed residential family-based treatment facility for substance abuse.**

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## Eligibility for Prevention Services

- **Eligible populations to receive services:**
  - Parents or relatives caring for children/youth who are “candidates for foster care” at imminent risk of entering foster care but can remain safely at home with services and supports
  - Adoptive parents and relative guardians where placement disruption is a concern
  - Youth in foster care who are pregnant or already parents
- **Extends to age 23 supports for youth transitioning out of foster care**
- **Extends to age 26 eligibility for education and training vouchers (Chafee independent living program)**
- **Covers for 12 months:**
  - Services to address mental behavioral health
  - Substance Abuse prevention and treatment
  - In home parent skill-based programs, including parent education, individual, and family counseling.
- **Reimbursement for kinship navigator programs**
- **Reimbursement allowed for up to 12 months for child placed with a parent in licensed residential family-based treatment facility for substance abuse.**

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## Key Provisions Required for Prevention Services

- **Eligible populations to receive services:**
  - Parents or relatives caring for children/youth who are “candidates for foster”
  - Prevention services and supports must be promising practices, supported practices, or well-supported practices. 50% of expenditures for prevention services must be for well-supported practice
  - Trauma-informed
  - IV-E reimbursement also allows for kinship navigator programs that meet promising, supported or well-supported practice requirements
  - IV-E Prevention funds cannot supplant current state spending. States must demonstrate maintenance of effort.
  - Funds can be used for training and administration related to the provision of prevention services.

# Family First Prevention Services Act Prevention Clearing House Review and Approval

- The secretary of the Department of Health and Human Services created a clearinghouse of approved services to include a process for future approvals. The services are similar to those identified through the California Evidence-Based Clearinghouse on Child Welfare
- Eligible services must meet certain requirements:
  - The service must be described as part of a state's plan.
  - There must be a manual outlining the components of the service.
  - The service must show a clear benefit.
  - The service must meet one of the following three thresholds:
    - **Promising Practice:** Created from an independently reviewed study that uses a control group and shows statistically significant results.
    - **Supported Practice:** Uses a random-controlled trial or rigorous quasi-experimental design. Must have sustained success for at least six months after the end of treatment.
    - **Well-supported treatment:** Shows success beyond a year after treatment.
- Represents a significant challenge for the region and the State of Nevada based on current service continuum given the extensive evidence-based approval process.



# Family First Prevention Services Act Prevention Clearing House Review and Approval

## Mental Health:

- Solution Based Casework  
Triple P - Positive Parenting Program
- Parent-Child Interaction Therapy
  - Trauma Focused-Cognitive Behavioral Therapy
  - Multi-systemic Therapy
  - Functional Family Therapy
  - Attachment and Biobehavioral Catch-Up
  - Brief Strategic Family Therapy
  - Child Parent Psychotherapy
  - Incredible Years
  - Interpersonal Psychotherapy
  - Multidimensional Family

## Substance Abuse:

- Motivational Interviewing
- Multi-systemic Therapy • Families Facing the Future
- Methadone Maintenance Therapy • Brief Strategic Family Therapy • Family Behavior Therapy • Multidimensional Family Therapy • Seeking Safety • The Seven Challenges

## In-Skill-Based: Home Parent

- Nurse-Family Partnership • Healthy Families America • Parents as Teachers • Attachment and Biobehavioral Catch-Up • Brief Strategic Family Therapy • Homebuilders • Multidimensional Family Therapy • Nurturing Parenting • Safecar

## Kinship Navigator Programs

Children's Home Society of New Jersey Kinship Navigator Model • Children's Home Inc. Kinship Interdisciplinary Navigation Technologically Advanced Model (KIN-Tech) • Ohio's Kinship Supports Intervention/ProtectOHIO • YMCA Kinship Support Services, YMCA Youth and Family Services of San Diego County

## Family First Prevention Services Act -Current Clark County Efforts to Support Future Service Approvals

- Implementation Challenge
  - Ensuring current prevention programs qualify as “well-supported.”
  - Identifying and Collaborating with already existing service providers in the community whose programming could qualify.
  - Financially supporting new prevention programming once established since Title IV-E will only partially reimburse costs.
- Clark County already invests in prevention program
  - Safe@home
  - Thrive by 5
  - Differential Response
- DFS worked with DCFS to develop of “candidacy for foster care” definition that gives flexibility in developing effective programming.

# Family First Prevention Services Act Prevention Placements

## REDEFINES FAMILY FOSTER HOME

“The statute now limits the definition of a foster family home to a home of an individual or family and requires that the foster parent resides in the home with the child. This means that the term may no longer include group homes, agency-operated boarding homes or other facilities licensed or approved for the purpose of providing foster care...as previously permitted in the regulatory definition...if that facility is not the home of an individual or family.”

Children’s Bureau July 9, 2018: ACYF-CB-P1-18-07

<https://www.acf.hhs.gov/cb/resource/pi1807>

# Family First Prevention Services Act Prevention Placements

Beginning with the **third week of a child entering foster care**, states will be eligible to receive IV-E maintenance payments only for children in the following settings:

- A foster family home that meets the new definition
- A child-care institution - defined as a licensed private institution or public child-care institution with no more than 25 children that is one of the following settings:
  - A Qualified Residential Treatment Program (QRTP)
  - A setting specializing in providing prenatal, post-partum, or parenting supports for youth
  - A supervised setting for youth living independently
  - A setting providing high quality residential care and supportive services to children and youth who are found to be, or are at risk of becoming, sex trafficking victims ✓
  - Children placed with a parent in a licensed residential family-based substance use treatment facility

# Family First Prevention Services Act Prevention Placements

As of October 1, 2019, Qualified Residential Treatment Programs (QRTP), will be reimbursed through Title IV-E. For a setting to be designated as a qualified residential treatment program (QRTP), it must meet the following qualifications:

- Utilizes a trauma-informed treatment model that includes service of clinical needs. • Meets the treatment needs of child as determined by an assessment within 30 days of placement.
- Staffed by a registered or licensed nursing staff: •
- Provide care within the scope of their practice as defined by state law. •
- Are on-site according to the treatment model. •
- Are available 24 hours a day and seven days a week.
- Facilitates outreach and engagement of family members in child's treatment plan.
- Must provide discharge planning and family-based aftercare supports for at least 6 months. •
- Must be licensed by the State and accredited by at least one of the following:
  - The Commission on Accreditation of Rehabilitation Facilities.
  - Joint Commission on Accreditation of Healthcare Organizations.
  - Council on Accreditation.
  - There are no time limits for how long a child may be placed in a QRTP as long as the placement continues to meet his/her needs as determined by assessment

# Family First Prevention Services Act Prevention Placements

## State of Nevada Clark County Current Status and Efforts

- Assembly Bill 348 (2015) reduced use of group homes
- IV-E restriction on facilities over 25 beds, so Child Haven remains ineligible for federal dollars
- Expansion of mental health placement service array includes considering Psychiatric Residential Treatment Facilities (PRTF) or development of Qualified Residential Treatment Programs (QRTP)
- PRTF- Medicaid reimbursable and served a higher level of care child
- Create QRTP Networks- group home that would serve as an “intermediate” step between specialized foster care and PRTF, reimbursable by IV-E at approximately 50%

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## Fiscal Impact

Clark County continues to work with the State of Nevada, Division of Health and Human Services for approvals and implementation of services in alignment with FFPSA with the waiver ending September of 2019

- The Family First Transition Act passed in 2019 created funding to support the IV-E loss for IV-E Waiver jurisdictions

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## Fiscal Impact (Continued)

### FY20 Actuals

- Clark County Total DFS Operating Budget= 182 M  
IV-E Reimbursement (reflects FFPSA deficit) = 55M

\*IV-E Reduction Impact in FY20 with Waiver Expiring = 6M

### Projected IV-E with Transition Act Funds

FY 21 IV-E revenue with 90% waiver baseline	61M
FY 22 IV-E revenue with 75% waiver baseline:	55M
FY 23 IV-E revenue (waiver baseline expires):	53M



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## Fiscal Impact (Continued)

### Additional Proposed Legislative Reductions In Addition to Title IV-E for F21 and FY22 Biennium

- TANF Funding FY21 and FY22= 6M

\*Total reflects biennium

- Incentive Funding (State Block Grant) 5M

\*Total reflects biennium

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Questions?

