

safe children

strong families | supportive communities

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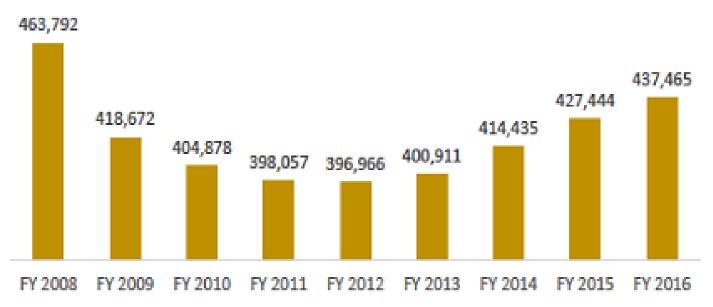
The Family First Prevention Services Act I. BACKGROUND AND INTRODUCTION

Casey Family Programs

- The nation's largest operating foundation focused on safely reducing the need for foster care and building Communities of Hope for children & families.
- We work to influence long-lasting improvements to the safety and success of children, families and the communities where they live.
 - We operate in all 50 states, DC, Puerto Rico, and the Virgin Islands.
 - We have direct agreements with 16 tribes.
 - We operate 7 field offices providing direct services to youth in care.

After years of decline, the number of children in foster care has steadily risen in recent years.

Number in foster care on September 30 of the FY

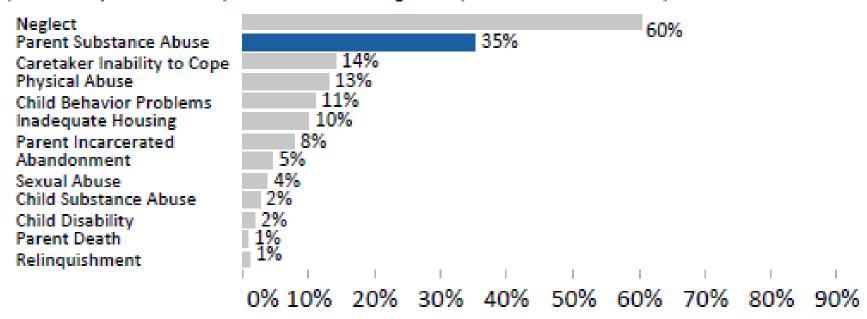


SOURCE: Adoption and Foster Care Analysis and Reporting System (AFCARS)

Children enter foster care overwhelmingly due to neglect

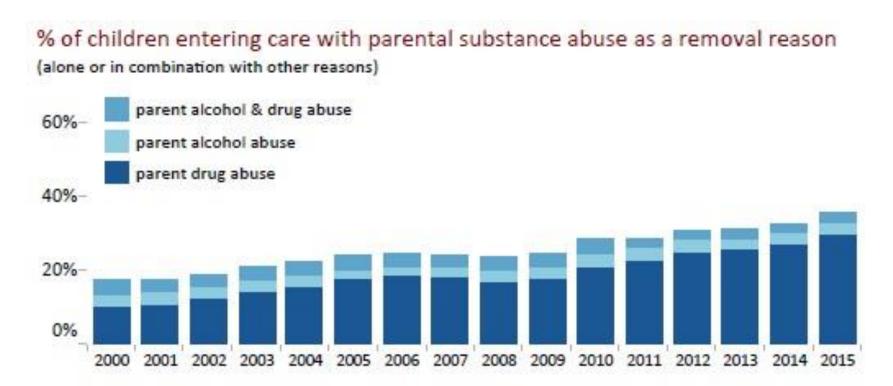
% of children entering care for each removal reason*

(note: multiple reasons may be selected for a single child, Federal Fiscal Year 2015)



Source: Adoption and Foster Care Reporting System (AFCARS) FY2016

Nationally, the percentage of children entering foster care due to parental substance use has risen

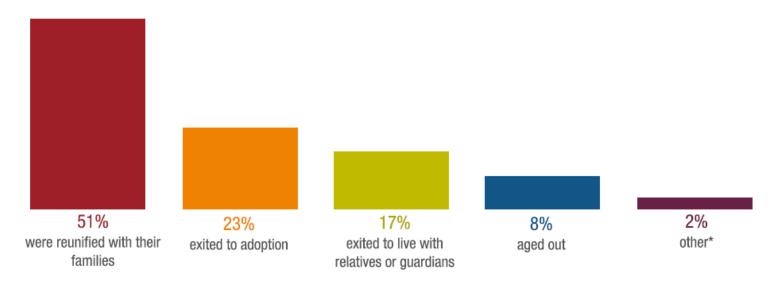


Source: Adoption and Foster Care Reporting System (AFCARS) FY2016

Children Exiting Foster Care

What happens to children who end up in foster care? Most are safely reunited with their own parent or extended family. A significant number are adopted. Communities across America have shown that they can help more children to grow up in safe, stable families by providing appropriate and timely services after they return home.

Among children who exited foster care in 2016:



*"Other" includes transferred to another agency, ran away or died.

Numbers may not equal 100% due to rounding.

Data source: AFCARS Report #24

Child Welfare: What do we know is best for children and families?

- The goal in child welfare should be to ensure the safety, permanency and well-being of children and their families.
- We know to support child well-being, it is important to intervene as early as possible.
- We know that the act of removing children from their families and homes creates emotional distress and trauma that should be avoided whenever possible.
- We know some children can be better served by remaining safely at home while their parents receive the community services and support they need.

Family First Prevention Services Act of 2018

- The Family First Prevention Services Act was passed and signed into law (P.L. 115-123) as part of the Bipartisan Budget Act on February 9, 2018.
 - New option for States and Tribes to claim Title IV-E funds for prevention activities as early as October 1, 2019.
 - New policy to ensure appropriate placements for children in foster care as early as October 1, 2019.
 - New funding and reauthorization of existing funding for child welfare programs including prevention funding, court funding, and specific substance abuse prevention grant funding.

Child Welfare: Past and Future

History:

- Federal child welfare dollars focused only on the child for foster care after removal from their home Family First and the future:
- Federal dollars now available for prevention services for the child, the parent and the kinship caregiver

New Title IV-E of the Social Security Act:

Federal Payments for Foster Care, Prevention and Permanency

Big Opportunities for Child Welfare

Pre-2018 federal law

Most federal \$\$ for foster care

Family First

New federal \$\$ for prevention

Services only for child

Prevention for parents, child, kinship caregivers

Income test to qualify

No income test

\$\$ for children placed in group homes with little oversight

No \$\$ unless placements are quality settings and appropriate

No \$\$ for child placed with parent in residential treatment

12 months of federal \$\$ for such placements

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The Family First Prevention Services Act II. NEW FUNDING FOR PREVENTION **ACTIVITIES**

Allows states to receive open-ended entitlement (Title IV-E) funding for evidence-based prevention services

Who:

- 1) Children at imminent risk of placement in foster care
- 2) Pregnant and parenting youth in foster care
- 3) Their parents or kinship caregivers
- No income test for eligibility
- Defines children who are "candidates for foster care" as those who can remain safely at home or in a kinship placement with receipt of services.

 Allows states to receive open-ended entitlement (Title IV-E) funding for evidence-based prevention services

What services:

- Mental health prevention and treatment services provided by a qualified clinician for up to 12 months.
- Substance abuse prevention and treatment services provided by a qualified clinician for up to 12 months.
- In-home parent skill-based programs that include parenting skills training, parent education and individual and family counseling for up to 12 months.

There is <u>no limit</u> on how many times a child and family can receive prevention services.

- Requires prevention services and programs to be promising, supported, or well-supported, to qualify for reimbursement.
 - Requires the Secretary of HHS to issue guidance to states regarding the practices criteria required for services or programs.
 - This guidance must include a pre-approved list of services and programs that satisfy the requirements.

- Requires a state to submit a prevention and services program plan as part of the state's Title IV-E plan.
 - Requires the plan to include a number of components such as a description of how the state will administer the program, determine eligibility, train caseworkers and numerous other items.

- Reimbursement rates for prevention activities:
 - Beginning October 1, 2019 through
 September 30, 2026, federal financial participation (FFP) is 50%
 - Beginning October 1, 2026, FFP is the state's FMAP (Medicaid) rate.
 - At least 50% of the spending in every fiscal year must be for well-supported practices.

- States that opt to administer a prevention program also may claim Title IV-E reimbursement for administrative costs at 50% and training costs at 50%.
 - As with the prevention services, these costs are not related to the income eligibility of the child or their family.

- When: Title IV-E reimbursement for eligible prevention services begins on October 1, 2019.
- Non-Supplantation: New federal funds for prevention services are intended to augment, not supplant, state funding for prevention services.
- Maintenance of Effort: MOE will be set at FY2014 spending for these same prevention services for candidates for foster care.

U.S. House Committee Report 114-628 includes the following to provide further information on Congressional intent

.... the Committee recognized that children may come to the attention of the child welfare system and be considered at imminent risk of entry into foster care in a wide variety of scenarios. Accordingly, the Committee intentionally did not attempt to provide an exhaustive list of the living situations and caregiver dynamics that would trigger eligibility for the evidence-based mental health, substance abuse, and parent skill-building services made available under this bill.

"The Committee believes the intent of this legislation is for states to use these new matching funds in the panoply of possible scenarios under which a child may be at imminent risk of entering foster care and would likely enter but for the provision of support services.

The following represents examples, but is by no means an exhaustive list, of the types of scenarios during which a state could claim a match for title IV-E prevention services on behalf of a child and his or her caregivers:

- When an adopted child is at risk of entering or re-entering foster care, these prevention services can come in the form of post-adoption supports and be made available so that such parents need not relinquish their parental right in order to access such services;
- When a child in a formal or informal kinship placement is at imminent risk of entering or re-entering foster care, these prevention services can be made available;
- When a child is living with his or her parents and is deemed as being at imminent risk of entering foster care, but a relative caregiver could become the guardian if provided prevention services, such services can be made available;

- If a child at a young age was deemed a candidate for care and his or her caregiver received services under this bill and years later the child was again deemed at imminent risk of entry later in life, this bill would allow for the state to draw down prevention services under title IV-E at both points in the child's and family's lives; or
- When a child is living with his or her parents and is deemed as being at imminent risk of entering foster care, but can remain safely at home through the provision of prevention services.

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The Family First Prevention Services Act III. ENSURING APPROPRIATE PLACEMENTS IN FOSTER CARE

Ensuring Appropriate Placements in Foster Care

The following placement options already are allowable under current Title IV-E and will continue under Family First:

- Facility for pregnant and parenting youth
- Supervised independent living for youth 18 years and older
- Specialized placements for youth who are victims of or at-risk of becoming victims of sex trafficking
- Foster Family Home (defined) no more than 6 children in foster care, with some exceptions

Ensuring Appropriate Placements in Foster Care

- Beginning October 1, 2018, Title IV-E foster care
 maintenance payments can be made on behalf of a child
 in foster care placed with their parent in a <u>licensed</u>
 residential family-based treatment facility for up to 12
 months.
 - No income test applies, unlike other Title IV-E foster care placements.
- Beginning as early as October 1, 2019, after 2 weeks in care, Title IV-E federal support will be available for foster care maintenance payments for eligible youth placed in a Qualified Residential Treatment Program (QRTP).

What is a Qualified Residential Treatment Program (QRTP)?

- Has a trauma informed treatment model and a registered or licensed nursing and other licensed clinical staff onsite, consistent with the QRTP's treatment model.
- Facilitates outreach and engagement of the child's family in the child's treatment plan
- Provides discharge planning and family-based aftercare supports for at least 6 months
- Licensed by the state and accredited

There are no time limits on how long a child can be placed in a QRTP and receive federal support as long as the placement continues to meet his/her needs as determined by assessment.

Ensuring Appropriate Placements in Foster Care

- States have the option to delay this provision for up to 2 years, until September 29, 2021. However, delays in implementation of these provisions requires a delay in prevention provisions for the same period of time.
- To support State implementation of this provision, Family First provided \$8 million in FY2018 for grants to states and tribes to support the recruitment and retention of high quality foster families.

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The Family First Prevention Services Act

IV. ADDITIONAL SELECT ITEMS TO PROMOTE SAFETY, PERMANENCY AND WELL-BEING

Additional select items to promote safety, permanency, and well-being

- <u>Kinship Navigators</u>: Provides Title IV-E support for evidence-based kinship navigator programs at 50%, <u>beginning October 1, 2018</u>.
- Foster parent licensing standards. Requires HHS
 to identify model foster parent licensing
 standards. By April 1, 2019, states have to
 identify the licensing standards they implement, if
 state standards differ from the model standards,
 and why they differ.

Additional select items to promote safety, permanency, and well-being

Child Abuse and Neglect Fatalities. Requires the development of a statewide plan to track and prevent child abuse and neglect fatalities. As of October 1, 2018, states must document in their Title IV-B plan the steps being taken to:

- track child maltreatment fatalities, including working with other relevant agencies and stakeholders;
- develop and implement a comprehensive, statewide plan to prevent the fatalities, including engagement of relevant public and private partners.

Promoting Timely Permanency for Children Across State Lines

- Provides \$5 million in new grants to states to expand the development of the electronic system to expedite the interstate placement across state lines of children in foster care, guardianship or adoption.
- Requires that states use an electronic interstate case processing system by October 2027.

Reauthorizes Adoption Assistance & Legal Guardianship Incentives

- Reauthorizes the Adoption and Legal Guardianship Incentive Programs through FY2022.
- Delays the phase in/expansion of the Adoption Assistance delink for children under age 2 (eligibility tied to 1996 AFDC income test) through June 30, 2024.

Continues Child Welfare Funding

- Reauthorizes Title IV-B programs and services until FY2021.
 - Stephanie Tubbs Jones Child Welfare Services Program, including funding for monthly caseworker visits
 - Promoting Safe and Stable Families Program
 - Court Improvement Program
 - Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Heroin, Opioids, or Other Substance Abuse
- Modernizes and reauthorizes the John H. Chafee Foster Care Independence Program until FY2021.

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The Family First Prevention Services Act V. RECENT DEVELOPMENTS & **ACTIVITIES**

Recent Activities by Congress

The FFY2019 appropriations bill includes the following among the investments for children and families in FFY2019:

- <u>Kinship navigators</u>: \$20 million in FFY2019 grants for states/tribes to continue to develop, improve and evaluate Kinship Navigator Programs in order to meet the evidence-based standard in the Family First Prevention Services Act.
- These grants were also included in the FFY2018 appropriations bill, and the 2018 funds have already been distributed to the 46 states and 8 tribes that applied.

FFY2019 Appropriations Bill

Administration for Children and Families: \$23.2 billion, an increase of \$357 million, including:

- Head Start: \$10.1 billion, an increase of \$200 million.
- Child Care and Development Block Grant: \$5.22 billion, an increase of \$50 million, building on the historic \$2.4 billion increase provided in FFY2018.
- Social Services Block Grant: \$1.7 billion
- Regional Partnership Grants: \$20 million
- Adoption & Guardianship Incentives: \$75 million

Recent Activities by HHS

- On July 9, the federal HHS released a Program Instruction (PI) outlining how states must implement the new Title IV-E provisions.
 - Family First has five different deadlines for states/tribes to meet.
 - Of note, the PI outlines that states who wish to delay the QRTP provisions for up to two years must notify HHS by November 9, 2018.
 HHS has since clarified that this certification of intent to delay is non-binding.

Recent Activities by HHS

- On May 4, HHS published availability of one-time funding of \$20 million in FY2018 for all states and direct-funded title IV-E tribes to develop, enhance and evaluate Kinship Navigator programs
 - At least 45 states (including New Mexico), 8 tribes and 2 territories applied.
 - Funds have no match requirement.

Questions?

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