

Family First Prevention Services Act (FFPSA)

Investing in Prevention and Supporting Families



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FFPSA Overview

Enacted into law February 9, 2018

New federal funds to increase, not replace, state funds for prevention

Purpose is to provide support to children and families to prevent foster care placements

All of the provisions have different effective dates.

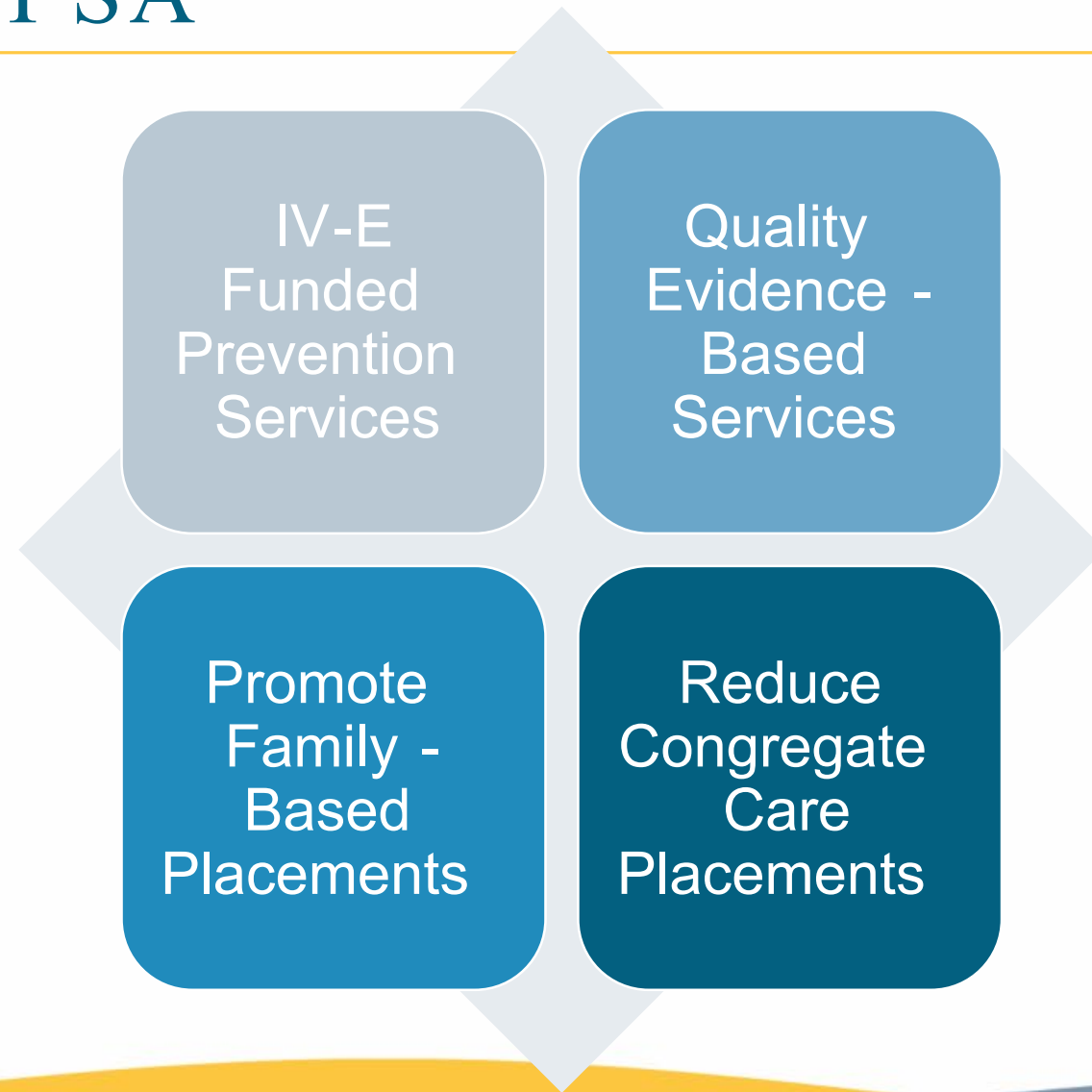
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Goals of FFPSA



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FFPSA: Continuum of Prevention

Kinship
Navigator
Program

- **Primary Prevention**
 - Prevent child welfare involvement

Prevention
Program

- **Secondary Prevention**
 - Prevent foster care placement

Chafee
Program

- **Tertiary Prevention**
 - Prevent generational child welfare involvement

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What do we know from Nebraska data?

The majority of children enter foster care due to neglect.

Annually approximately 45% of children who enter out-of-home care are ages 0 -5.

Approximately **46%** of children who enter out-of-home care ages 0-5 have at least one parent who was also a state ward.

50% or more of children who enter out-of-home care in Nebraska is due to parental substance use.

As of January 2019, approximately 60% of all children served are in out-of-home care and 40% are in-home.

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Planning for FFPSA

- DHHS– Division of Children and Family Services (CFS) hosted a Family First kick off event in June 2018
- Formed eight workgroups to lead the planning and implementation for the correlating Family First provision
- Conducted statewide service array scan
- Created a public website, http://dhhs.ne.gov/Pages/Family_First.aspx, to communicate updates, meeting agendas, draft plans, post public comments, etc.

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Title IV-E Prevention Program

Effective date: 10/1/2019
Optional for states: Nebraska opting in

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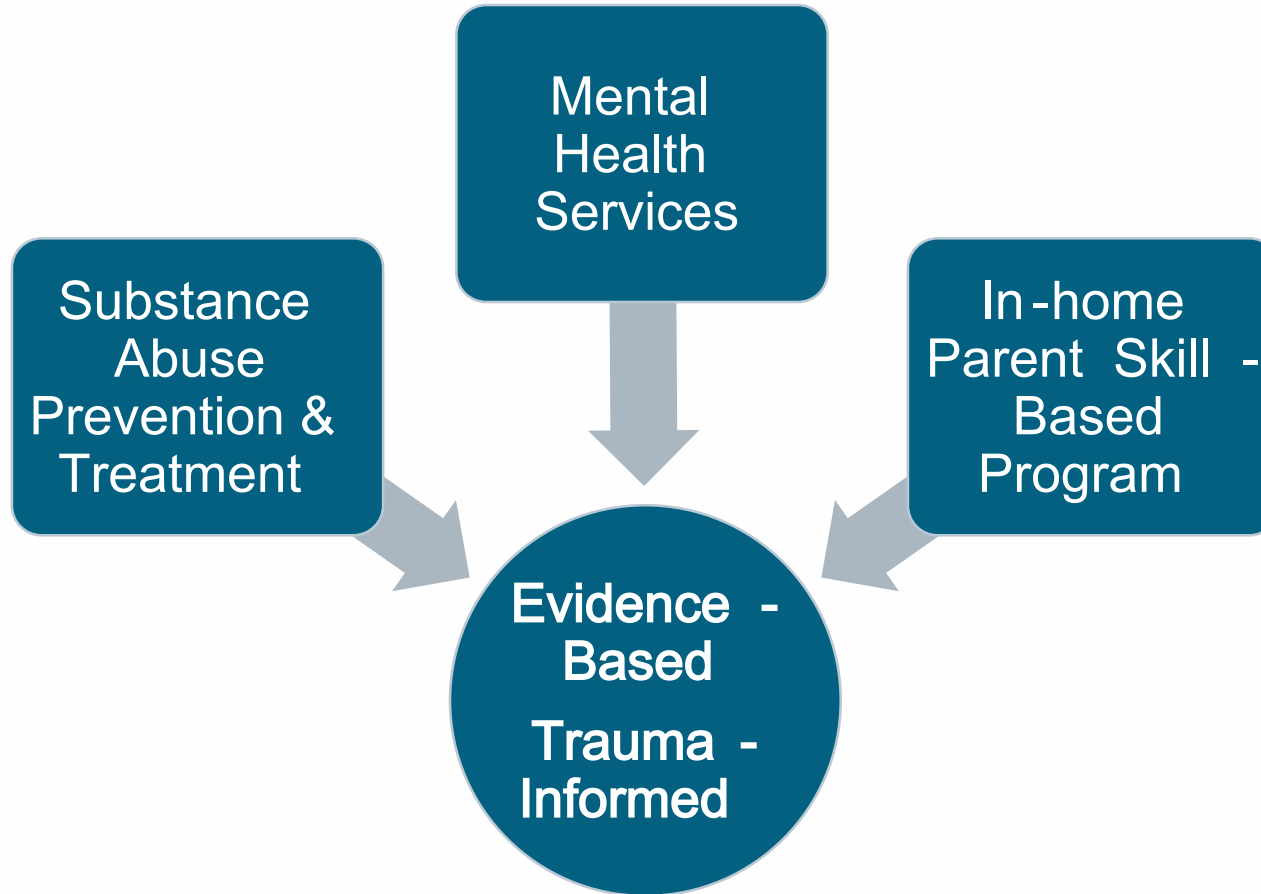
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Prevention Program

Allows federal funds to cover the cost of prevention programs to prevent children from entering foster care.



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Title IV-E Prevention Program

Eligible:

Candidates for foster care who can remain safely at home or in a kinship placement

A child whose adoption or guardianship arrangement is at risk of a disruption or dissolution

A child/youth in foster care who is pregnant or parenting

The parents or kin/relative caregivers of these children

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Title IV-E Prevention Program Services

Program	Funding Source	Current Clearinghouse Rating	Service Type	Anticipated Claiming Rate	Cost Neutral or Cost Savings
Healthy Families America	Funded through the MICHV -E grant via DPH	Well -Supported	Parenting Skills	50% General Funds and 50% (IV-E) Federal Funds	Short -term cost neutral displacing current IV -E eligible services, long -term cost savings as CW population decreases
Family Centered Treatment	Blended funding of Medicaid and general funds	Not yet rated	Mental Health	100% General Funds until rated by Clearinghouse	Short -term cost increase (unknown), long -term cost savings as CW population decreases
Trauma Focused -CBT	Medicaid, private insurance, general funds	Promising	Mental Health	50% General Funds and 50% (IV-E) Federal Funds first 2 years if under Transitional Payments, 100% General Funds thereafter unless rated higher by Clearinghouse	Potential short -term cost increase (unknown), long -term cost savings as CW population decreases
Functional Family Therapy	Medicaid, insurance, general funds	Well -Supported	Mental Health	50% General Funds and 50% (IV-E) Federal Funds	Short -term cost neutral displacing current IV -E eligible services, long -term cost savings as CW population decreases
Parent -Child Interactive Therapy	Medicaid, insurance, general funds	Well -Supported	Mental Health	50% General Funds and 50% (IV-E) Federal Funds	Short -term cost neutral displacing current IV -E eligible services, long -term cost savings as CW population decreases
Multi -Systematic Therapy	Medicaid, insurance, general funds	Well -Supported	Mental Health/Substance Abuse	50% General Funds and 50% (IV-E) Federal Funds	Short -term cost neutral displacing current IV -E eligible services, long -term cost savings as CW population decreases

Bring Up Nebraska

Community collaboratives focused on prevention into the child welfare system

Community Collaboratives :

- ▶ Blue Valley
- ▶ Cherry County
- ▶ Dakota County
- ▶ Dawson County
- ▶ Dodge County
- ▶ Douglas County
- ▶ Hall County
- ▶ Lancaster County
- ▶ Madison County
- ▶ North Platte
- ▶ Omaha Tribe
- ▶ Otoe County
- ▶ Panhandle
- ▶ Platte/Colfax County
- ▶ Sandhills Coalition
- ▶ Sarpy County

FFPSA Modifications Related to Placements

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Placement Limitations

Limitations on title IV -E foster care payments for placements that are not foster family homes

Effective date: 10/01/2019
Required for all states

Title IV -E foster care payments are limited to two weeks unless it is an approved placement (see next slide)

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Approved Placements that are not foster family homes

Family -based residential substance abuse treatment facility

A setting specializing in providing prenatal, post -partum, or parenting supports for youth

Supervised independent living for youth over 18

Specialized placements for survivors of sex trafficking

A Qualified Residential Treatment Program (QRTP)

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Placement with Parent in a Treatment Facility

Title IV -E Foster Care Maintenance Payments for Children with Parents in a Licensed Residential Family Based Treatment Facility for Substance Use

Optional for states: Nebraska opting in

Allows foster care payments for up to 12 months for an eligible child placed with a parent in a licensed residential family -based substance abuse treatment facility

Treatment facility must provide parenting skills training, parent education and individual and family counseling under a trauma -informed framework

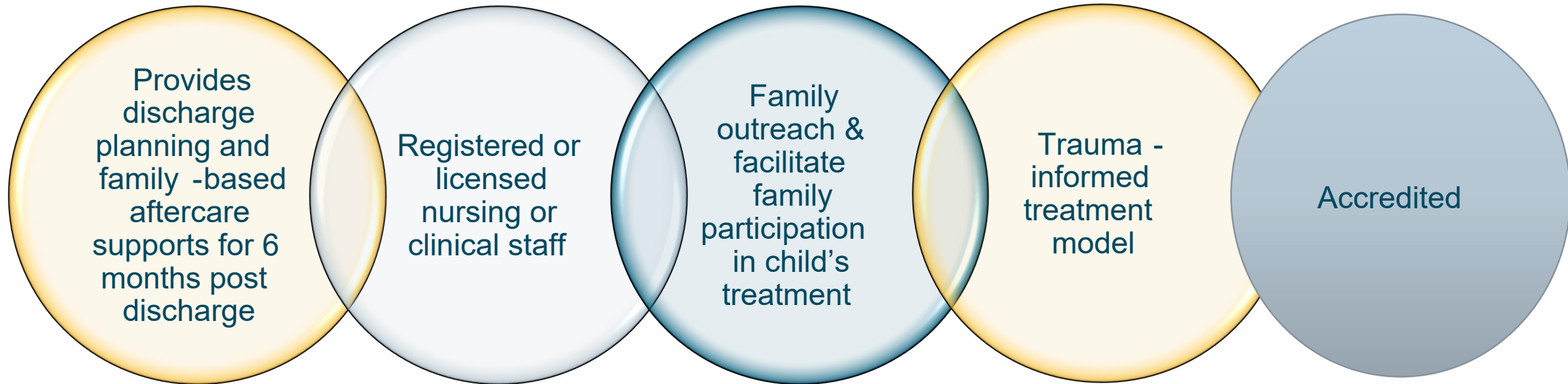
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Components of a Qualified Residential Treatment Program (QRTP)



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QRTP

30 day assessment

- To determine what placement setting best meets the child's needs
- Develop short -term and long -term mental health and behavioral health goals

60 day court review

- Court must approve placement in QRTP in order for State to continue to claim federal funding

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IV-E Modifications - QRTP

30 Day Assessment

Assessment to be completed within 30 days of placement in QRTP

Conducted by a trained professional or licensed clinician

Cannot be an employee of the State

Assess strengths and needs of the child using an age appropriate evidence based validated functional assessment tool approved by HHS

Determine which setting is best for the child

Develop list of short -term and long -term child specific mental and behavioral health goals

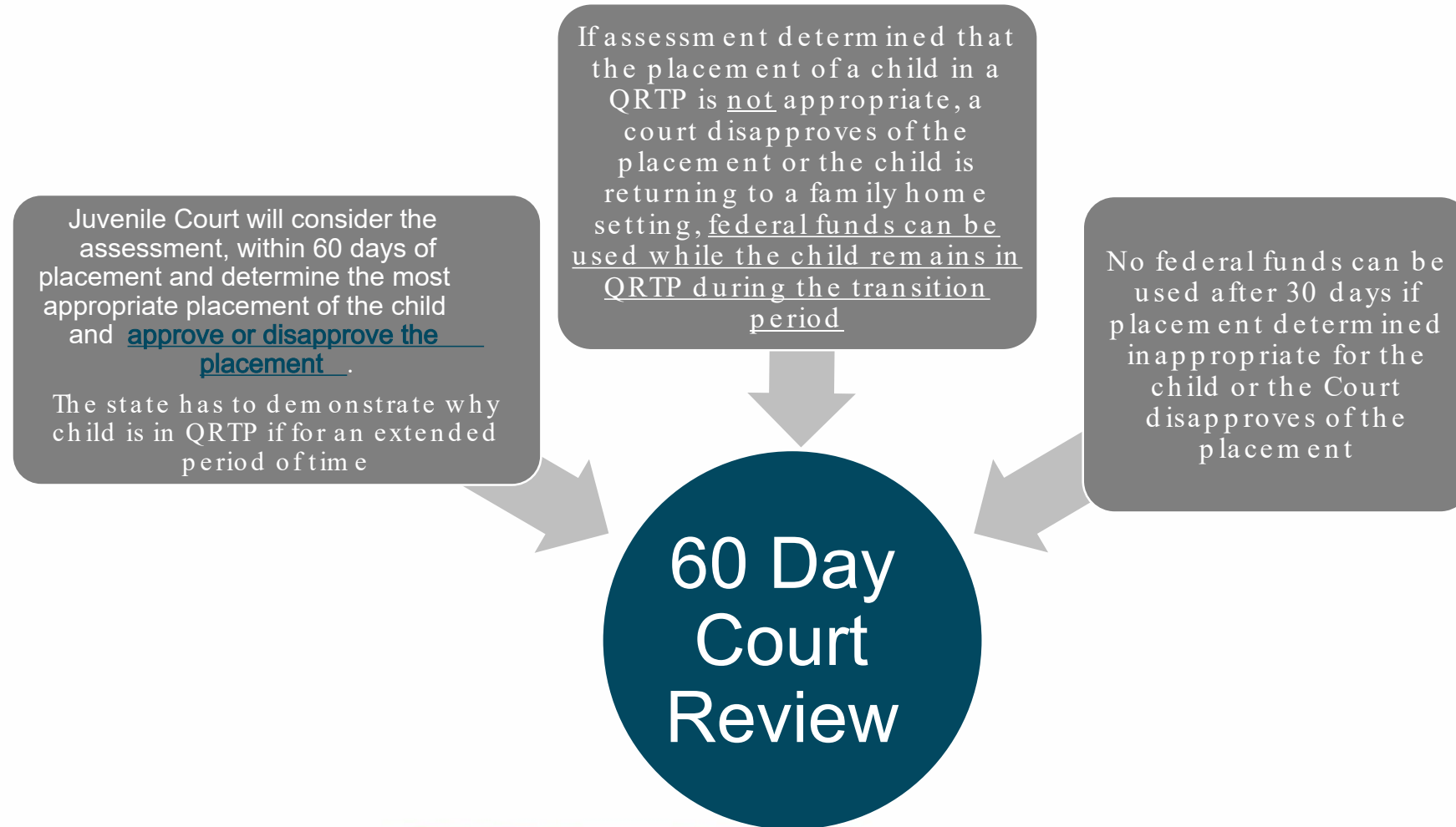
Family and permanency team must be assembled to work in conjunction with qualified individual

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IV-E Modifications - QRTP



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QRTP – At Review and Permanency Hearings

On-going assessments continue to support the placement

Meet the needs of the child in the least restrictive setting

Identify specific treatment or services needs, and length of time for treatment

DHHS's efforts to prepare for transition

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Questions?

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For more information:

http://dhhs.ne.gov/children_family_services/FamiliesFirst/Pages/Home.aspx

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