



**Child Welfare
Strategy Group
Transforming Foster
Care: Opportunities
Created by the Family
First Act
September 26, 2019**

THE ANNIE E. CASEY FOUNDATION



We won't improve outcomes by getting better at what doesn't work!

Transforming Foster Care

"The job isn't quite what I expected it to be; I thought I would be helping people."

Nothing ever changes until it becomes what it is!

The Family First Act was the result of growing belief and evidence that we can do better

Growing belief and evidence that children do best when living safely with their family or with close friends or relatives; and the realization that far too many children are unnecessarily placed in non-family settings.

- History of success in states in reducing group placements.
- Consensus statement by American Ortho-psychiatric Association
(<https://www.apa.org/pubs/journals/features/ort-0000005.pdf>)
- ACF report on children placed in group settings without therapeutic need.

The Family First Act takes a leap forward by...

- Investing in prevention of placement through family-based services.
- Ensuring the necessity of a placement that is not a family-based.
- Ensuring the quality of residential treatment.
- Modification to Chafee Foster Care Independence Program to be more developmentally appropriate.
- Improve state plans, and strengthen reporting and data collection requirements.

State Requirements for Electing Title IV-E Prevention and Family Services and Programs (ACYF-CB-PI-18-09)

“The creation of the title IV-E prevention program is an unprecedented step in recognizing the importance of working with children and families to **prevent the need for foster care placement and the trauma of unnecessary parent-child separation**. The Title IV-E prevention program is part of a much broader vision of strengthening families by **preventing child maltreatment, unnecessary removal of children from their families, and homelessness among youth**...

State Requirements for Electing Title IV-E Prevention and Family Services and Programs (ACYF-CB-PI-18-09)

It provides an opportunity for states to re-think dramatically how they serve children and families and creates an impetus to **focus attention on prevention and strengthening families as our primary goals rather than placing children in foster care as our main intervention.** The Children's Bureau strongly encourages all title IV-E agencies to take this opportunity to not only use the title IV-E prevention program to fund these very important services, but also to **envision and advance a vastly improved way of serving children and families, one that focuses on strengthening their protective and nurturing capacities instead of separating them.**"

Prevention and Family-Based Services and Supports

“I cannot lose my job and home because of all the services I have to participate in. Leaving my abusive husband and creating a safe home for me and my kids was a big step, but it wasn’t part of my service agreement. Everyone involved thinks I haven’t done anything and that this means I really don’t care about my kids or want them back.”

Family First Act modernizes and compels change in child welfare system culture and practice

Changing our destination often means starting
from a different place ...

Philosophy/Culture \times Practice \times Quality = better outcomes, continuously improving, and sustained over time



Family First Act modernizes the system to better meet the needs of children and families

- All children deserve the opportunity to grow up in safe, stable and secure families.
- Children and youth do best in a strong family and families do best in supportive communities.
- Children of all ages need close family relationships to develop and grow.
- Children and youth can grow up in their own homes, and families can be kept together, when caregivers have access to treatment and support services that improve their ability to safely care for their kids.
- Preventing child abuse and neglect requires broad public support for investing in children and youth and engaging local communities in services and programs for children and families.

Family First Act offers opportunities for preventing the need to place children in foster care

- Opportunity for open-ended, federal reimbursement for services to prevent entry into foster care for all children at risk of foster care without eligibility requirements.
- Opportunity to reduce the use of group placements used inappropriately (group placements solely for lack of foster families won't be reimbursable, nor will group placements that are non-therapeutic).

Family First Act offers opportunities for preventing the need to place children in foster care

- Opportunity to strengthen kin and foster family resources and improve quality of residential treatment.
- Opportunity to reimburse parent/ child substance abuse residential treatment.
- Opportunity to improve services for pregnant and parenting foster youth.

Family First Act promotes prevention

- Primary prevention is not part of Family First legislation. In order to have access to Family First prevention funds, a child must be determined to be a candidate for foster care (secondary prevention) and have a “prevention plan”.
- ACF establishing a Clearinghouse of evidence-based programs and allowing transitional payments for programs reviewed by the states, but not yet approved by the Clearinghouse. <https://www.cwla.org/wp-content/uploads/2019/07/ACYF-CB-PI-18-09-Attachment-A.pdf>

“Candidate” for foster care has been defined*

- **Definition:** A candidate for foster care is a child who is at *serious risk of removal from home as evidenced by the State agency either pursuing his/her removal from the home or making reasonable efforts to prevent such removal*. [HHS considers the terms "serious risk of removal" and "imminent risk of removal" to be synonymous and States may also use alternate descriptions that are equivalent to "imminent" or "serious risk of removal."]
- **Aftercare:** A child who is reunified, adopted/placed with legal guardian or transferred to a relative may be considered a candidate if the services or supports provided to the family can be considered the *State agency's reasonable efforts to prevent the child's removal from the home and re-entry into foster care*.
- **Length of candidacy:** HHS does not prescribe the maximum length of time a child may be considered a candidate; however, a State must document its justification for retaining a child in candidate status for longer than six months.

Eligible services and programs

Types of services

- Mental health services
- Substance abuse prevention and treatment
- In-home parent skill-based programs
- Kinship Navigator programs
- Residential parent-child substance abuse treatment programs

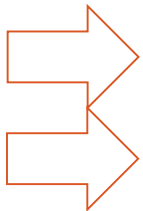
Eligible services and programs

Additional requirements or limitations

- No more than 12 months (per candidate episode)
- Must meet certain evidence-based requirements
- Must be trauma-informed
- Services must be provided by a qualified clinician

States are required to undertake certain activities to obtain federal reimbursement for prevention services

- [Importantly, no Title IV-E income eligibility requirement for services or related training and administrative expenses].
- Preventions plans.
- State Plans
 - ✓ Periodic risk assessment
 - ✓ Continuous quality improvement
 - ✓ Caseworker training
- Maintenance of Effort (MOE).
- Evaluation of evidence-based prevention programs.
- Performance measures and data collection
 - ✓ Services provided and costs
 - ✓ Duration of services
 - ✓ Child's placement status after 12 months and 2 years



Limited menu of only 12 service options are currently approved and reimbursable prevention services

Prevention Services and Programs Mental Health

- Parent-Child Interaction Therapy
- Trauma Focused-Cognitive Behavioral Therapy
- Multisystemic Therapy
- Functional Family Therapy

Substance Abuse

- Motivational Interviewing
- Multisystemic Therapy
- Families Facing the Future
- Methadone Maintenance Therapy

Limited menu of only 12 service options are currently approved and reimbursable prevention services

In-Home Parent Skill-Based

- Nurse-Family Partnership
- Healthy Families America
- Parents as Teachers

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)

Starting from a Different Place
Ensuring the Necessity of
Non-Family Placements

“I made a mistake and now I have to move!”

*“I’ve completed the program, but they forgot about me
a long time ago”*

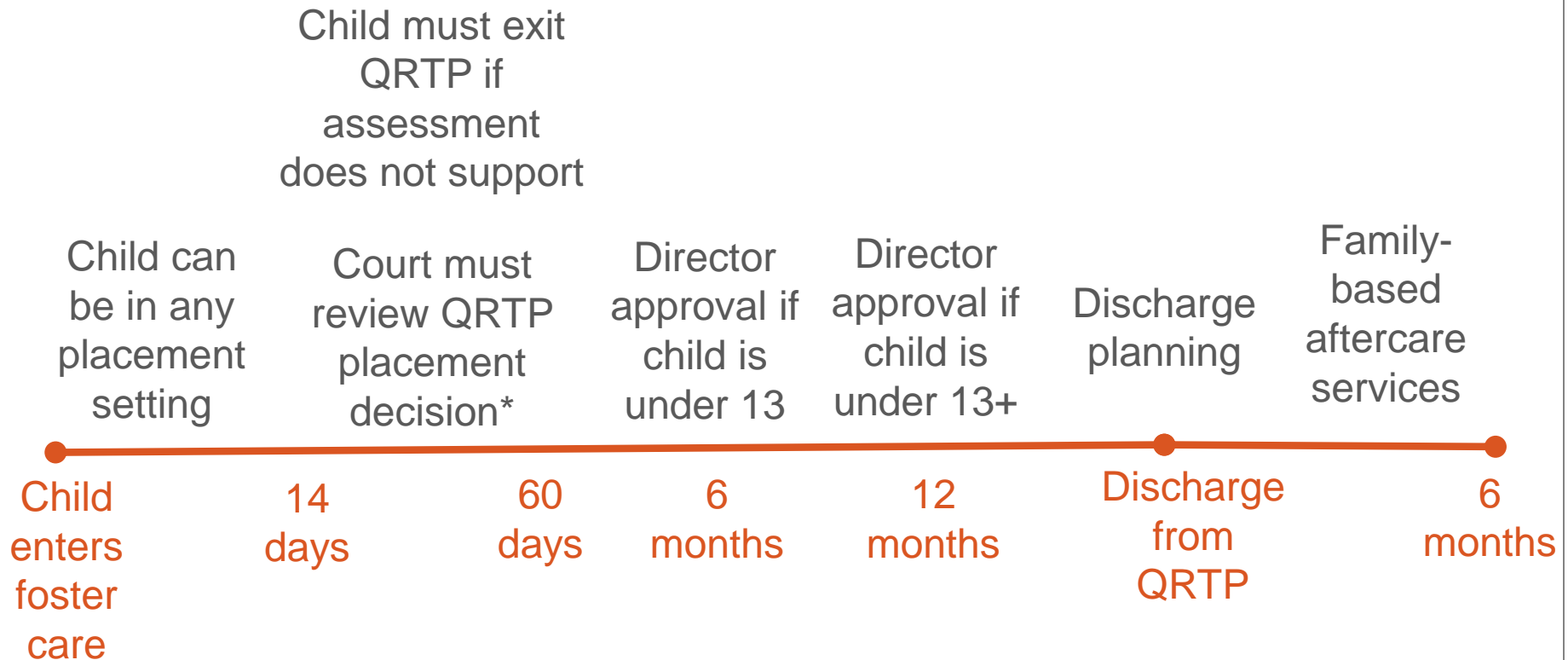
Ensuring the Necessity of a Placement that is Not a Foster Family Home

- Beginning after 14 days of entry into foster care, federal reimbursement for foster care payments limited to children in:
 - ✓ A foster family home
 - ✓ A Qualified Residential Treatment Program (QRTP)
 - ✓ A setting specializing in providing prenatal, post-partum or parenting supports for youth
 - ✓ A supervised setting for youth ages 18+ who are living independently
 - ✓ A setting providing high-quality residential care and supportive services to children who have been or at risk of being sex trafficking victims
- States may still claim administrative expenses on otherwise eligible children not in eligible placement settings.

Ensuring the quality of residential treatment: QRTP Requirements

- Trauma-informed treatment model.
- Model is designed to meet the specific clinical needs of children as identified in the child's assessment.
- Has registered or licensed nursing staff and other licensed clinical staff (on-site consistent with the treatment model, and available 24/7).
- Facilitates family participation in child's treatment program, facilitates family outreach, and documents how the child's family is integrated into child's treatment (including post-discharge).
- Provides discharge planning and family-based aftercare supports for 6+ months post discharge.
- Licensed and accredited by CARF, JCAHO, COA or other bodies approved by HHS Secretary.

QRTP Requirements Timeline



*Court must review decision again at every status and permanency hearing

How do agencies determine “right” criteria for needing residential level of care?

- Must be completed within 30 days of QRTP placement.
- Assessment by qualified individual, a trained professional or licensed clinician who is not a state employee or affiliated with any placement setting (may be waived).
- Tool must be age appropriate, evidence-based, validated, functional assessment (HHS to release guidance).

How do agencies determine “right” criteria for needing residential level of care?

- Assessment must be conducted in conjunction with a family and permanency team meeting.
- If QRTP is determined necessary, professional must document why child’s needs cannot be met in a family.
- If assessment does not support QRTP placement, states have 30 days to move child to an eligible placement or risk losing federal reimbursement.

How do agencies set up a process for ongoing utilization review of residential services?

- Court review within 60 days of QRTP placement.
- At every status and permanency hearing, state must submit evidence
 - ✓ Ongoing assessment confirms need for QRTP placement
 - ✓ Specific treatment needs that will be met
 - ✓ Length of time child is expected to need additional treatment
 - ✓ Efforts made to prepare child to transition to a family
- Child welfare director approval for children in QRTP placement for 12 consecutive/18 cumulative months (or for 6 months for children under 13).

Developmentally Appropriate Transition Supports for Older Youth

“When I came into care I was in shock. I was taken to the doctor, diagnosed with depression, prescribed medication and counseling.

I just want all of you to know that I was sad, not sick.”

“I thought it was my fault, and everything that’s happened since then has reinforced this belief.”

For older youth, a re-definition of what's required, focused on what youth need, not focused on their aging out (but no new funds are available)

- Services begin at age 14 and extension of care up to age 23, education and training vouchers to age 26, with overall 5 year limitation.
- Focus on:
 - ✓ preparing youth with training and opportunities to practice daily living skills,
 - ✓ helping youth achieve meaningful, permanent connections with a caring adult, and
 - ✓ helping youth engage in age or developmentally appropriate activities, positive youth development, and experiential learning that reflects what their peers in intact families experience.
- Training on youth development.
- States must analyze services compared to outcomes.

States and communities will have many opportunities to make key implementation decisions and lead in new ways

“Organizations need leaders who can impart a persuasive and durable sense of purpose and direction, rooted deeply in values and the human spirit. Leaders must be deeply reflective, actively thoughtful, and dramatically explicit about core values and beliefs. *Reframing Organizations* -
Lee Bolman, Terrence Deal

Family First Act offers an opportunity to prevent entry into foster care and to prevent aging out of foster care

- States will have to embrace new opportunities, not just comply with a myriad of new regulations.
- Many policy and procedural decisions will need to be made, most are administrative and some may be legislative and judicial.
- New policies and procedures will have to be developed, and others may need to be discarded.
- Training to implement the changes will be extensive to get caseworkers and supervisors up to speed.
- The necessity for training evaluators and conducting program evaluations will increase!

Challenges will require considerable planning and training to ensure quality and consistency

- Who will be involved in planning and implementation and how will they be engaged?
- How will these changes align with, amplify, or undermine aspects of the system that are working well?
- What role could legislatures and the judiciary play in the process?

Family First Legislation (state-by-state) <http://www.ncsl.org/research/human-services/family-first-updates-and-new-legislation.aspx>

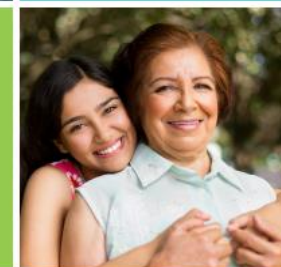
Recruiting, Developing, and Supporting Foster Parents

TO ACHIEVE QUALITY, STABLE FOSTER PARENTING

1. Support relationships between birth and foster families
2. Implement data-driven recruitment and retention practices
3. Engage foster parents in decision making
3. Provide timely access to trusted, dedicated staff and peer support for foster parents
4. Prioritize placements with family members
5. Ensure timely access to physical and mental health services



POLICY PLAYBOOK



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