

# **Family First Prevention Services Act (Family First)**

HHS Budget Subcommittee

February 14, 2019

# Overview

## ***Children do best in families!***

Family First will restructure how the federal government spends money on child welfare to improve outcomes for children:

- Prevent the need for removal through evidence-based family preservation services
- If removal is necessary, placement in this order:
  - Relative or fictive kin
  - Licensed Foster Family
  - Institutional care (for treatment only)
- All possible strategies for keeping children with their families, or in family settings, must be explored.

# Foster Care Prevention Activities Under Title IV-E

## **Services Eligible for Federal Financial Support:**

- Mental health treatment
- Substance abuse treatment
- In-home, parent skill-based programs
- Evidence-Based Kinship Navigator Program

## **Eligible Population and Criteria:**

- A child who is at imminent risk of entering foster care, but can remain safely at home or in a kinship placement with receipt of services or programs
- A child in foster care who is pregnant or parenting
- A child with parents in a residential treatment facility for substance abuse

## **Quality of Service:**

- Service must be a Promising, Supported or Well-Supported Practice
- Services must be 12 months or less in duration

# Part I: Additional Requirements

## State Shall:

- Report to HHS data on children receiving foster care prevention services – including duration, expenditures and outcomes
- Submit a comprehensive report on to support a competent and professional child welfare workforce to deliver trauma-informed and evidence-based services
- Provide a description of how caseload size for prevention caseworkers will be determined, managed, and overseen

## Fiscal Implications:

- Begins October 2019 and ends in September 2026.
- Rate of federal reimbursement is 50% for eligible expenditures for the Foster Care Prevention program and Kinship Navigator Program - for 100% of kids.

# Ensuring the Necessity of a Placement that is not in a Foster Family Home

**What is Different:** Limitations on federal financial participation for placements that are not in foster family homes. Designed to discourage use of institutional care settings.

**Services Eligible for Federal Financial Support:**

- The setting is a Qualified Residential Treatment Program (QRTP)

**Difference between QRTP and Group Care:**

- Must have a registered or licensed nursing staff on-site 24/7
- Provide family-based aftercare support for 6-months post-discharge
- Accredited by a nationally recognized organization
- Means an institution with no more than 25 children
- Program must be able to meet the clinical treatment needs identified in the assessment needed for placement

**Eligible Population and Criteria:**

- A child whose who has been assessed to have mental and behavioral health goals cannot be met in a family or family-like setting

# Rates of Removal

- The national average is 6.3 per 1,000 kids (FFY16)
- Iowa is consistently 8+ per 1,000 kids (FFY 13 – 16)
- Lowest removal rate in the nation is Maryland at 3 per 1,000 kids
- Highest removal rate is West Virginia at 16 per 1,000 kids

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# Foster Care Population

- Iowa's foster care population reduced by 22% between FFY 2007 – 2012.
- An additional 10% reduction occurred between FFY 2012 – 2016.
- One of only 14 states to see consistent reduction (FFY 2007 – 2016).

# Location of placements

- In Iowa, 83% of children in foster care are in a family-like setting.
- Family placements increased from 1,759 to 1,878 (SFY16 – 18).
- While group care placements were reduced from 635 to 521.
- Shelter placements were also reduced from 147 to 130.



# Child Welfare System in Transition

## A system in transition is not resource neutral

### Develop and implement a Comprehensive Child Welfare Information System (CCWIS):

- Federal government is covering 50% of associated expenditures for CCWIS
- CCWIS will have the following functions:
  - Allow for mobile technology
  - Provider community to directly access and enter information
  - Enhance search for relatives
  - Better medical and mental health coordination
  - Meet the strict reporting requirements under Family First

### Lower Caseloads:

- Expedited case planning
- Shorter lengths of stay in foster care
- Time to locate relatives and fictive kin

### Implementation of Evidence-Based Practices:

- These models have demonstrated sustainable positive outcomes with families
- Services are eligible for 50% Federal financial participation under Family First
- High quality, intense services demonstrated to work reduce episodes of repeat maltreatment and create efficiencies with DHS and providers.

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# Questions?