



Family First and Prevention: Three Branch Institute

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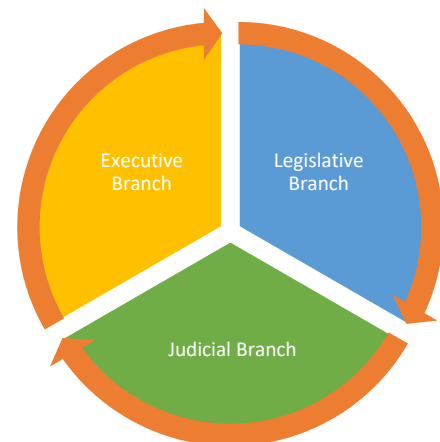
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What is the Family First Prevention Services Act?

- The Family First Prevention Services Act (FFPSA), which became federal law in February 2018, includes historic reforms to the child welfare financing streams by providing prevention services to children in families who are at imminent risk of entering foster care.
- Specifically, federal reimbursement will be available for trauma-informed mental health services, substance abuse treatment, and in-home parenting skills training to at-risk families.
- FFPSA also incentivizes states to reduce placement of children in residential treatment, and instead place children in the least restrictive, most family-like setting appropriate to their individual needs.

How is Virginia Implementing Family First?

- VDSS has implemented the Three Branch Model approach (legislative, judicial, and executive) to integrate the FFPSA into our practice.
- The Three Branch Model is designed to bring the three branches of government together to develop action plans to address the most pressing child welfare issues. This helps to redefine the responsibility of child welfare to all branches of government and child serving agencies.



Family First Prevention Services Act (FFPSA)

4/8/2019

<http://www.ncsl.org/research/human-services/family-first-prevention-services-act-ffpsa.aspx>

Overview

On Feb. 9, 2018 President Donald Trump signed the Bipartisan Budget Act of 2018 (H.R. 1892) to keep the government funded for six more weeks and pave the way for a long-term budget deal that will extend to the end of the fiscal year. Included in the act is the Family First Prevention Services Act, which has the potential to dramatically change child welfare systems across the country.



One of the major areas this legislation seeks to change is the way Title IV-E funds can be spent by states. Title IV-E funds previously could be used only to help with the costs of foster care maintenance for eligible children; administrative expenses to manage the program; and training for staff, foster parents, and certain private agency staff; adoption assistance; and kinship guardianship assistance.

Now states, territories, and tribes with an approved Title IV-E plan have the option to use these funds for prevention services that would allow “candidates for foster care” to stay with their parents or relatives. States will be reimbursed for prevention services for up to 12 months. A written, trauma-informed prevention plan must be created, and services will need to be evidence-based. The U.S. Department of Health and Human Services (HHS) expects to release guidance on service eligibility before Oct. 1, 2018.

The Family First Prevention Services Act also seeks to curtail the use of congregate or group care for children and instead places a new emphasis on family foster homes. With limited exceptions, the federal government will not reimburse states for children placed in group care settings for more than two weeks. Approved settings, known as qualified residential treatment programs, must use a trauma-informed treatment model and employ registered or licensed nursing staff and other licensed clinical staff. The child must be formally assessed within 30 days of placement to determine if his or her needs can be met by family members, in a family foster home or another approved setting.

Certain institutions are exempt from the two-week limitation, but even they are generally limited to 12-month placements. Additionally, to be eligible for federal reimbursement, the act generally

limits the number of children allowed in a foster home to six. Although the new programs are optional state officials will need to review their policies and develop state plans that are in line with the latest federal guidelines.

Section by Section Explanation

TITLE VII—Family First Prevention Services Act | Subtitle A—Investing in Prevention and Supporting Families

SEC. 50702. PURPOSE:

“The purpose of this subtitle is to enable States to use Federal funds available under parts B and E of title IV of the Social Security Act to provide enhanced support to children and families and prevent foster care placements through the provision of mental health and substance abuse prevention and treatment services, in-home parent skill-based programs, and kinship navigator services.”

PART I—Prevention Activities Under Title IV–E

States Have the Option to Use Title IV-E to Prevent Children’s Entry into Foster Care

- Allows the use of Title IV-E funds for the following services to prevent the placement of children and youth into the foster care system.
 - In-home parent skill-based programs.
 - Mental health services and substance abuse prevention and treatment services.
- Title IV-E funds can only be used in this capacity for 12 months for children who are “candidates for foster care” and for pregnant or parenting foster youth. The act further clarifies that children and youth under the guardianship of a kin caregiver are also eligible for these funds.
- 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.

- The secretary of the Department of Health and Human Services will be responsible for creating a clearinghouse of approved services by October 2018. These services will most likely be similar to those identified through the California Evidence-Based Clearinghouse on Child Welfare
- The secretary may waive the evaluation requirement for a practice if they find the practice to be effective.
- States that choose to use Title IV-E funds must demonstrate maintenance of effort of state foster care prevention spending at the same level as their 2014 spending.
- States with fewer than 200,000 children for the year 2014 may opt to base their maintenance of effort on their expenditures for 2014, 2015 or 2016.
- This section also extends the matching rate from the federal government for prevention services to 2026. The Federal Medical Assistance Percentage will be applied beginning in 2027.

PART II—Enhanced Support Under Title IV–B

Improving the Interstate Placement of Children and Extending Substance Abuse Partnership Grants

- Funding authority is provided to support states in establishing an electronic interstate processing system for the placement of children into foster care, guardianship or adoption. It also creates a \$5 million grant fund to improve interstate placement of children.
- FFPSA extends regional partnership grants for five years and allows the grants to be used on a statewide basis and for organizations that are not state agencies.

PART III—Miscellaneous

Model Licensing Standards for Kinship Care Homes and Preventing Child Maltreatment Deaths

- States must demonstrate that they are in line with newly established national model licensing standards for relative foster family homes.

Tracking and Preventing Child Maltreatment Deaths

- States must create a plan and fully document the steps taken to track and prevent child maltreatment deaths in their state.

PART IV—Ensuring the Necessity Of A Placement That Is Not In A Foster Family Home

Focus on Family Foster Care: Major Reforms to Congregate, Residential and Group Care

- Federal law defines a reimbursement-eligible family foster home as having six or fewer children, and a reimbursement-eligible child care institution as having 25 or fewer youth.
- This section places a limit of two weeks on federal payments for placements that are not foster homes or qualified residential treatment programs. This rule takes effect Oct. 1, 2019.

- An exception to this rule is made under the following circumstances:
 - Juvenile justice system (states may not incarcerate more juveniles under this provision).
 - Prenatal, postpartum or parenting support for teen moms.
 - A supervised setting for children 18 or older.
 - High-quality residential activities for youth that have been victims of trafficking or are at risk of it.
- States may delay the implementation of this part of the legislation for two years, but if they choose to do so they will delay funding for prevention services for the same length of time.
- For a setting to be designated as a qualified residential treatment program, it must meet the following qualifications:
 - Licensed by at least one of the following:
 - The Commission on Accreditation of Rehabilitation Facilities.
 - Joint Commission on Accreditation of Healthcare Organizations.
 - Council on Accreditation.
 - Utilizes a trauma-informed treatment model that includes service of clinical needs.
 - Must be 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.
 - Be inclusive of family members in the treatment process if possible, and documents the extent of their involvement.
 - Offer at least six months of support after discharge.
- Within 30 days of a youth being placed in a qualified residential treatment program, an age-appropriate and evidence-based review must be performed to determine if a qualified residential treatment program is the best fit for them.
- The court must approve or disapprove the placement within 60 days and continue to demonstrate at each status review that the placement is beneficial to the youth. The state must also show that progress is being made in preparing a child to be placed with a family, in a foster family home or with an adoptive parent.
- After 12 consecutive months or 18 nonconsecutive months, the state must submit to the secretary of health and human services approval for continued placement from the head of the state child welfare agency
- States must develop a plan to prevent the enactment or advancement of policies or practices that would result in an increase in the population of youth in a state's juvenile justice system. States are also required to train judges and court staff on child welfare policies, including limitations on use of funding for children placed outside of a foster care family.
- By 2020 the Department of Health and Human Services will perform an assessment of best practices

- Starting Oct. 1, 2018, states are required to conduct criminal history and child abuse and neglect registry checks on any adults working in a childcare institution.

PART V—Continuing Support For Child And Family Services

Recruiting and Keeping Foster Families: Increased Financial Support through 2022

- A one-time, \$8 million competitive grant will be made available through 2022 to support the recruitment and retention of high-quality foster families.

Extending John H. Chafee Foster Care Independence Programs to Age 23

- States may use John H. Chafee Foster Care Independence Program funds for youth up to 23 years of age who have aged out of foster care if that state has extended federal Title IV-E funds to children up to age 23 They may also extend education and training vouchers up to age 26, but for no more than five years total.

PART VIII—Ensuring States Reinvest Savings Resulting From Increase In Adoption Assistance

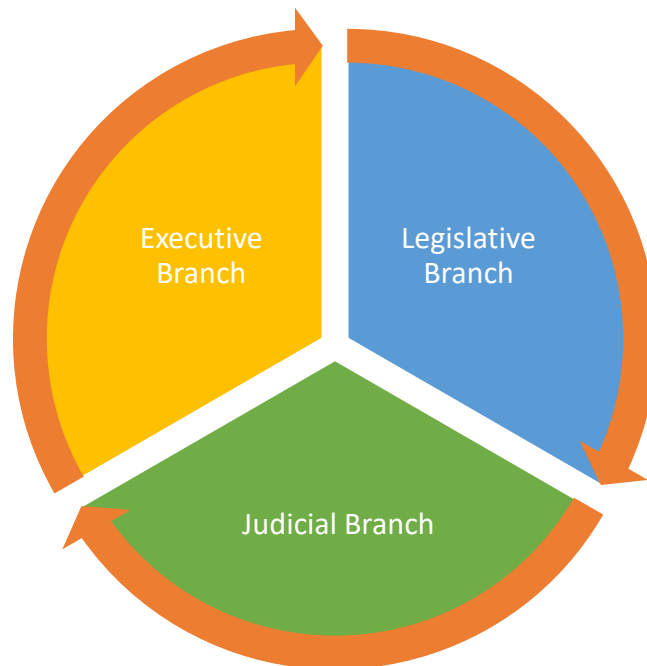
- The Fostering Connections to Success and Increasing Adoptions Act, signed in 2008, set the income test for federal adoption assistance payments to gradually expire by 2019. Teens were to be the first group to be exempt from the income test and this exemption would gradually extend to newborns.
- With the FFPSA this process is halted at 2-year-olds until 2024. The federal Government Accountability Office is tasked with conducting a study to determine how states are using the money they saved from the exemptions. The income test for federal adoption assistance payments will end in October 2024.

Family First Overview

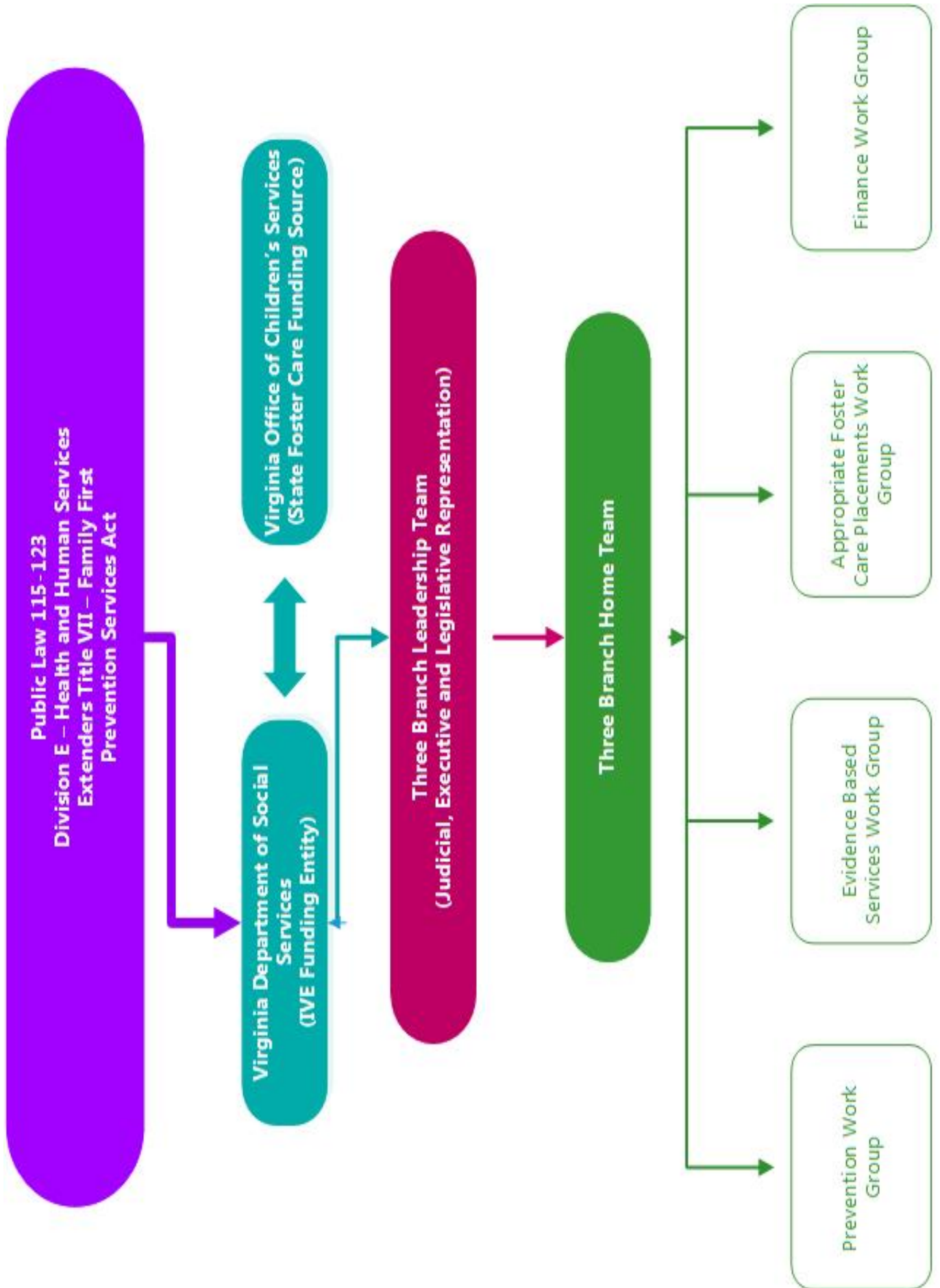
The Family First Prevention Services Act was adopted in February 2018. The act includes historic reforms to child welfare funding. The Act will provide federal funding for prevention services to families of children who are at imminent risk of entering foster care. It underscores the importance of children growing up in families and seeks to avoid the traumatic experience of children being separated from their families and entering foster care. Specifically, federal reimbursement will be available for trauma-informed mental health services, substance abuse treatment and in-home parenting skills training to safely maintain in-home family placements. It also aims to improve the well-being of children already in foster care by incentivizing states to reduce placement of children in residential treatment, and instead place children in the least restrictive, most family-like setting appropriate to their individual needs.

The Three Branch Model

Virginia is currently using the Three Branch Model for the implementation of the Family First Prevention Services Act. The Three Branch Model is based upon the National Governor's Association, National Conference of State Legislatures and Casey Family Programs' Three Branch Institute, which began in 2009. The Three Branch Model is designed to bring the three branches of government together to develop action plans to address the most pressing child welfare issues. This helps to redefine the responsibility of child welfare to all branches of government and child serving agencies.



A Collaborative Approach to Implementation: Three Branch Model



The Three Branch Model (continued)

Virginia has been a participant in three previous Three Branch Institutes with significant success in improving the child welfare system. The Three Branch model serves as a successful leadership group to enact legislative, financial, and policy changes to improve the child welfare system.

VDSS's goals for our Three Branch Model include a commitment to using data to improve decision making and ensure services provided are informed by outcomes; promoting reliable, accurate, transparent and timely two-way communication among stakeholders throughout the implementation of Family First; acknowledging that true transformation will take time, and implementation will continually be monitored and updated to meet emerging needs; and collaborating and partnering with systems across the state are the key to successful implementation of Family First. Every person and every organization, provider and system have an important role to play.

Our primary goals for each workgroup are as follows:

1. **Prevention Services Workgroups:** Target resources and services that prevent foster care placements and help children remain safely in their homes.
2. **Appropriate Foster Care Placements Workgroup:** Ensure children maintain family connections needed for healthy development and emotional well-being while finding safe, permanent homes for children as quickly as possible. Safely reduce the inappropriate use of non-family based placements; when a non-family based placement is needed, ensure children are placed in the least restrictive, highest-quality setting appropriate to their individual needs.
3. **Evidence-Based Services Workgroup:** Advance the implementation and sustainability of evidence-based, trauma-informed services that appropriately and effectively improve child safety, ensure permanency, and promote child and family well-being.
4. **Finance Workgroup:** Build capacity and leverage resources to provide effective services to prevent foster care placement while ensuring financial accountability.

Three Branch Team Membership

Last Name	First Name	Agency
Addison	Karin	Troutman Sanders Strategies
Anderson	Rebecca	DMAS
Andrews	Tina	ADORE Children and Family Services
Antell	Anna	Office of Children's Services
Aparicio	Laurel	Early Impact VA
Areson	Janet	Virginia Municipal League
Ash-Brackley	Laura	Children's Home Society
Atkinson	Amy	Commission on Youth
Ayers	Carl	Virginia Department of Social Services
Baldwin	Victoria	Department of Planning and Budget
Becker	Rachel	Senator Mason's Office
Bessmer	Janet	Fairfax Children's Services Act
Bevan	Ann	Department of Medical Assistance Services
Bowler	Nannette	Fairfax Department of Human Services
Boyle	Katie	Virginia Association of Counties
Boyle-Berger	Gena	Governor's Office
Briggs	Danika	Chesterfield DSS
Brown	Renee	Depaul Community Resources
Bryant	Sandy	Mt. Rogers CSB
Clayton	Jackie	Northumberland Department of Social Services, Director
Conner	Kim	VDSS-Finance
Crawford	Andy	Virginia League of Social Services Executives
Crossen-Powell	Sheila	Hanover DSS
Easter	Laura	Elk Hill Farm
Ehrlichmann	Emily	Virginia Department of Planning and Budget
Elwood	William	Virginia Coalition of Private Provider Associations
Evans	Kellie	The Up Center

Last Name	First Name	Agency
Everette	Ashley	Voices for Virginia's Children
Faison	Jennifer	Virginia Association of Community Services Boards
Farley	Michael	Elk Hill Farm
Fegans	Adrienne	Department of Medical Assistance Services
Gallik	Christen	Fredericksburg Department of Social Services
Gallop	Denise	Norfolk Department of Human Services
Gaskins	Courtney	Youth for Tomorrow
Gehring	Ronnie	Family Focused Treatment Association
Gibson	Lisa	Quin Rivers, Inc
Gilbreath	Allison	Voices for Virginia's Children
Gillespie	James	Fairfax CSB Child, Youth, and Family Services
Griffey	Emily	Voices for Virginia's Children
Harper	Jeanine	Greater Richmond SCAN
Hogge	Lisa	VACSB
Hunter	Katharine	DBHDS
Irvine	Kimberly	Virginia Association of Local Human Services Officials
Jobe-Shields	Lisa	University of Richmond
Johnson	Jermaine	Youth for Tomorrow
Johnston	Tammy	Elk Hill Farm
Jones	Jenny	Charlottesville DSS
Karison	Sandy	Court Improvement Program, Office of the Executive Secretary Supreme Court of Virginia
L'Herrou	Valerie	Virginia Poverty Law Center
Lindsay	Sharon	VDSS-Licensing
Lissenden	Jane	Court Improvement Program, Office of the Executive Secretary Supreme Court of Virginia
Mann	Erica	Spotsylvania Department of Social Services
Marino	Nina	DBHDS
Mason	Senator Monty	Senate Rehabilitation and Social Service Committee
Massart	Susan	Virginia House of Appropriations
May	David	Division of Legislative Services

Last Name	First Name	Agency
McMahon	Kyle	Family Preservation Services/Virginia Network of Private Providers
Morris	Audra	Powhatan Department of Social Services
Nelson	Morgan	VDSS-Division of Family Services
Nimmo-Holland	Margaret	Voices for Virginia's Children
Parente	Em	Virginia Department of Social Services
Patterson	Craig	VDSS
Peace	Delegate Chris	House Health Welfare and Institutions Committee
Perez	Lori	Youth for Tomorrow
Peters	Greg	United Methodist Family Services
Piner	Kim	Attorney General's Office
Poulin	Nicole	Family and Children's Trust Fund of Virginia
Ragland	Tara	Virginia Department of Social Services
Regimbal	James	Economist with VLM and VACO
Reiner	Scott	Office of Children's Services
Relaford	Zandra	Office of Children's Services
Rice	Karen	Virginia Home for Boys and Girls
Richardson	Hope	DMAS
Richardson-Lauve	Cory	Virginia Home for Boys and Girls
Roberts	Cheryl	Department of Medical Assistance Services
Routh	Drew	Virginia Home for Boys and Girls
Sampe	Brenda	Virginia Department of Social Services
Schreiner	Abigail	Hope Tree family Services/VCOPPA/Virginia Association of Licensed Child Placing Agencies
Shin	Sunny	Virginia Commonwealth University
Skapars	Paulette	Richmond Behavioral Health Authority
Smith	Patty	DMAS
Somerville	The Honorable Frank	Culpeper Juvenile and Domestic Relations Court
Spears	Ron	Elk Hill Farm
Specter-Dunaway	Lisa	Families Forward
Stanley	Amanda	Depaul Community Resources

Last Name	First Name	Agency
Stanton	Sarah	Division of Legislative Services
Stark	Stephan	National Counseling Group/Virginia Association of Community-Based Providers
Stinnett	Beth	DJJ
Taylor	Carla	Shenandoah Department of Social Services, Director
Toscano	Nancy	United Methodist Family Services
Tweedy	Mike	Virginia Senate Finance
Umbarger	Wendy	Youth for Tomorrow
Updike	Shannon	HopeTree Family Services
Valentine	Angela	Department of Juvenile Justice
Vinroot	Rebecca	James City County DSS
Wafford	Katina	Prince William DSS
Walker-Harris	Vanessa	VA Dept of Health
Ward	Alyssa	DMAS
White	The Honorable Ellen	Judicial Advocate
Wild	Dillon	Voices for Virginia's Children
Williams	Keisha	Virginia Department of Social Services
Williamson	Jennifer	Attorney General's Office
Wilson	Carol	Office of Children's Services
Wilson	Adalay	United Methodist Family Services
Witherspoon	Ida	Virginia Department of Social Services
Woods	Jessie	Family Preservation Services
Wyman	David	Elk Hill Farm
Zeoli	Kelly	Virginia Department of Social Services