
FEDERAL FAMILY FIRST PREVENTION SERVICES ACT (FFPSA) OVERVIEW AND FOCUS ON PART IV IMPLEMENTATION

CHILD WELFARE COUNCIL
SEPTEMBER 8, 2021



TODAY'S PRESENTATION

- Summary of Major Provisions of Family First
- Overview of California's Approach to Prevention Services
- Focus on Part IV and Integrating Requirements for Qualified Residential Treatment Programs

SUMMARY OF MAJOR PROVISIONS OF FAMILY FIRST PREVENTION SERVICES ACT

- Two areas of primary focus
 - Part I: Allows states to access Title IV-E funds for prevention services (optional)
 - **Part IV: Restricts use of Title IV-E funds when youth are in residential settings (mandatory – states must be in compliance by October 1, 2021)**
- Other provisions of Family First
 - Allows states to claim Title IV-E funds to allow a child in foster care to be placed with a parent in a licensed residential treatment program for substance abuse disorders for up to 12 months
 - Allows state to claim Title IVE funds to support kinship navigator programs
 - \$8 million for states for foster parent recruitment and retention programs
 - Allows states to increase maximum age for Chafee program up to age 23 (no additional federal funding)
 - Allows states to increase maximum age for Education and Training Vouchers up to age 26 (no additional federal funding)
 - Required states to amend state plans to address whether their licensing standards conform to the model standards adopted by HHS
 - Changes timelines for reunification services to allow reunification services to be provided for 15-months after a child returns home (no additional federal funding – just changed to rules on when states can use existing IV-B dollars)
 - Requires that states operating a Title IV-E program use an electronic interstate case processing system to expedite the interstate placement of children in foster care by FY2027



OVERVIEW OF CALIFORNIA'S APPROACH TO PREVENTION SERVICES



PREVENTION-BASED INITIATIVES

OCAP Strategic Plan

ICWA

**Continuum of
Care Reform**

**Foster Care Model of
Care**

**Integrated Core
Practice Model**

FFPSA

VISION: COMPREHENSIVE PREVENTION SERVICES

An integrated statewide system that supports families to provide safe, stable, nurturing relationships and environments for their children and youth.

FFPSA is one part of prevention

Opting into FFPSA is opting into a larger comprehensive prevention-based initiative

This vision can be achieved by focusing on:

- Family Voice Centeredness
- Racial Equity
- Tribal Consultation and Collaboration
- Strength-Focused and Trauma-Informed
- Community Capacity Building
- Workforce Excellence
- Integration and Collaboration
- Monitoring Integrity and Continuous Quality Improvement

FFPSA PART I PREVENTION SERVICES

Optional program to receive IV-E reimbursements for the provision of prevention services to children at imminent risk of entering foster care

- California submitted a State Five-Year Prevention Plan to the Administration for Children and Families (ACF) detailing how the program will be implemented and comply with requirements

This law is important because:

- It's the first entitlement program for prevention services
- Its an opportunity to strengthen best practices by aligning prevention services with active efforts required under the Indian Child Welfare Act (ICWA).

- Federal funds for prevention services can be claimed for individuals who meet federal eligibility requirements
 - **Candidates** for foster care; OR expectant and parenting youth (no candidacy determination); OR parent(s) or relatives of the candidate or the EPY
 - Prevention services must fall into one of **three categories**: (1) mental health; (2) substance abuse; (3) in-home parent skills based program
 - **Evidence-based program (EBP)** that has been rated as promising, supported or well-supported in the IV-E Prevention Services Clearinghouse AND 50% of all funds are for well-supported programs (beginning 2024)
 - Process to confirm **model fidelity** to the EBP standards
 - Title IV-E is the payor of last resort
 - **Per child claiming** and tracking of child after they are no longer receiving prevention services (requires automation)
 - Ongoing **continuing evaluation**

FFPSA PART I – FEDERAL REQUIREMENTS TO CLAIM PREVENTION SERVICES

2021 CALIFORNIA PREVENTION SERVICES FUNDING STREAMS - NEW FUNDING

	FFTA \$43.8 M	Block Grant \$222.0 M	ARPA CBCAP \$25.0 M	Title IV-E
Purpose	One-time, flexible grants to states and eligible tribes to support implementation of the FFPSA, child welfare waiver demonstration project transitional activities, and purposes allowable under Title IV-B of the Social Security Act.	State General Fund monies that provide funds for comprehensive prevention activities including, administrative activities, services, and training to establish a comprehensive prevention program.	CBCAP supplemental grant funding to be used towards primary and secondary prevention activities and services.	Establishes the FFPSA prevention program to allow states who opt-in the ability to claim for federal IV-E funds from qualifying prevention services.
Source	Family First Transition Act (FFTA)	State General Fund	American Rescue Plan Act of 2021 – Section 2205	Family First Prevention Services Act (FFPSA) codified as CA AB 153
Distribution Schedule	<ul style="list-style-type: none"> Can begin claiming for April 2021 Eligible for use through Sept. 30, 2025 	<ul style="list-style-type: none"> Three-year allocation beginning January 1, 2022 until June 30, 2024 	<ul style="list-style-type: none"> One-Time allocation The funding must be obligated by September 30, 2025 and liquidated by December 30, 2025. 	<ul style="list-style-type: none"> Administrative Program Development: January 2021 Services & Individualized Administrative Costs: July 2022 – October 2022 (dependent on automation)
Access/ Opt-In Procedure	<ul style="list-style-type: none"> Submit Letter of Intent by October 1, 2021 	<ul style="list-style-type: none"> Submit Letter of Intent by Nov. 1, 2021 Submission of Comprehensive Prevention Plan for access to FY 22-23 allocation 	<ul style="list-style-type: none"> Counties are to complete a Letter of Intent to Opt-In 	<ul style="list-style-type: none"> Submit Letter of Intent by Nov. 1, 2021
Allowable Activities	<p>At least 50% used towards:</p> <ul style="list-style-type: none"> Prevention & early intervention planning FFPSA evaluation activities Expanding capacity for EBPs Continuing and/or expanding prevention & early intervention services, including those with a “promising” rating Transition activities for former waiver demonstration project counties, to transition to FFPSA prevention services 	<p>50 General Fund/50% Title IV-E:</p> <ul style="list-style-type: none"> Administrative activities to expand FFPSA capacity, support evaluation, and measure FFPSA readiness Training <p>100% General Fund:</p> <ul style="list-style-type: none"> Administrative activities to support the delivery of FFPSA services FFPSA-allowable services costs (prior to automation) Non-FFPSA prevention services costs under county comprehensive plan (or written notice during Year 1) 	<ul style="list-style-type: none"> Community-Based Prevention Programs Activities which advance racial equity and support underserved populations ACYF-CB-PI-21-07 (hhs.gov) (Attachment A) 	<ul style="list-style-type: none"> Administrative activities to support the delivery of services FFPSA-allowable services costs
Required Reporting	<ul style="list-style-type: none"> APSR Reporting Form annually until Feb. 2026 Prevention Services Inventory due Nov. 30, 2021 	Expenditures on FFPSA Part 1 Initial comprehensive prevention plan and ongoing amendments, as applicable	<ul style="list-style-type: none"> Annually by September 30th via ETO 	<ul style="list-style-type: none"> Statewide automation for tracking of services costs

Date	Activity
April 2021	Release of FFTA Funding
September 2021	ACIN:ARPA CBCAP funding ACL: Prevention Services General Fund Block Grant
November 2021	CFL: Planning Allocation/Claiming Instructions for Prevention Services General Fund Block Grant ACL: Allowable Activities, Federal Match, and Comprehensive Prevention Plan Template
January 2022	CFL: Final Funding Allocation for Prevention Services General Fund Block Grant
February 2022	County Submission of APSR Reporting Form
March 2022	ACL: Data Reporting, Outcomes, and Model Fidelity
April 2022	ACL: Automation Requirements
May 2022	ACL: Joint Guidance from DHCS and CDSS
July 2022	Release of FY 2022-23 Allocation County Submission of Comprehensive Prevention Plan
(Anticipated) July-October 2022	Release of FFPSA Part I Title IV-E matching funds

FUNDING & GUIDANCE TIMELINE



**FOCUS ON PART IV AND INTEGRATING REQUIREMENTS
FOR QUALIFIED RESIDENTIAL TREATMENT PROGRAMS**



FFPSA PART IV

VISION AND RELATIONSHIP WITH ONGOING EFFORTS IN CALIFORNIA

- The Family First Prevention Services Act (FFPSA) Part IV seeks to limit reliance on congregate care for serving children in foster care.
- Related Reform Efforts
 - California's Continuum of Care Reform (CCR) that were implemented pursuant to AB 403 and subsequent legislation
 - Addressing Complex Care Needs and Funding
 - Foster Care Model of Care
 - Children's Crisis Continuum Pilot
 - AB 2083

KEY COMPONENTS OF PART IV OF FFPSA



FFPSA requires states to ensure that congregate care settings where FFP is claimed comply with the following:

1. Accreditation
2. Nursing Requirements
3. Aftercare
4. Qualified Individual Assessment and Determination
5. Court Reporting & Case Planning



FFPSA Part IV QRTP requirements will only apply to **new placements** and placement changes into STRTPs on or after October 1, 2021.



CDSS estimates the QRTP requirements to apply to **approximately 421 children per month**, 33% of which are from Los Angeles County

NEW REQUIREMENTS FOR LICENSURE AS AN STRTP

NURSING REQUIREMENTS
&
AFTERCARE

FFPSA PART IV

NURSING REQUIREMENTS

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- On and after October 1st, 2021, STRTPs will be required to provide youth with access to nursing services, 24 hours a day, 7 days a week. This will help ensure that a youth's medical needs are being met throughout their placement within an STRTP.
 - When necessary, nursing staff shall provide onsite care according to STRTP's treatment model or partner with the placing agency to arrange nursing care.
 - The provided nursing services must:
 - Be available 24 hours a day, seven days a week,
 - Utilize nursing staff who can provide telehealth care and advice, triage and recommend medical treatment for the youth in the STRTP,
 - And, when necessary, establish an agreement to provide on-site nursing staff according to the STRTP's treatment model or as otherwise required by the needs of any youth in the facility.

- By October 1, 2021, each county child welfare agency, probation department, and mental health plan will jointly provide, arrange for, or ensure the provision of the six months of aftercare services for youth and non-minor dependents transitioning from an STRTP to a family-based setting. Plan must be submitted by this date.
- By October 1, 2022, aftercare services to utilize California high-fidelity Wraparound model. Plan must be submitted by this date.
- High-Fidelity California Wraparound:
 - Encompasses family/youth voice
 - Inspires transformation and hope in families' lives
 - Informed by data (fidelity tools, admin data, CANS, etc.)
 - Consistent across California
 - Based in the California Wraparound Standards ([ACIN I-52-15](#)).

FFPSA PART IV

AFTERCARE

FFPSA PART IV

ACCREDITATION

Although this is not a new requirement for licensure as an STRTP, the Family First Prevention Services Act (FFPSA), brings changes regarding national accreditation that will impact Short-Term Residential Therapeutic Programs (STRTPs)

As a condition of Federal Financial Participation (FFP), FFPSA requires that Qualified Residential Treatment Programs (STRTPs in California) be accredited by October 1, 2021.

CDSS recognizes that some providers may be impacted by this new legislation and is reaching out to STRTPs with the goal of helping impacted providers receive their accreditation prior to October 1, 2021.

CDSS accepts accreditation from the following entities:

- The Council of Accreditation (COA)
- Commission on Accreditation of Rehabilitation Facilities (CARF)
- The Joint Commission on Accreditation of Healthcare Organizations (JCAHO)

GUIDANCE ANTICIPATED TO BE RELEASED BY 10/1/21

ACIN Providing an Overview of FFPSA Part I and IV

- Currently incorporating stakeholder feedback.

ACL on the Qualified Individual

- Currently in the internal approval process.

PIN & ACL on Nursing Requirements

- Currently in the internal approval process.

ACL on Case Planning and Court Reporting

- Currently in the internal approval process.

ACL on the Interim Aftercare Requirements

- Currently in the internal approval process.

STRTPV4 of the ILS

- Currently in the internal approval process.

NEW REQUIREMENTS FOR PLACEMENT INTO AN STRTP

THE QUALIFIED INDIVIDUAL
&
COURT REPORTING / CASE PLANNING

FFPSA PART IV

THE QUALIFIED INDIVIDUAL (QI)

- On or after October 1, 2021, a QI must conduct an assessment prior to a youth's placement into an STRTP but no later than 30 days after placement as a condition of title IV-E funding.
- The QI is defined as a trained professional or licensed clinician who is not an employee of a IV-E agency and who is not connected to, or affiliated with, any placement setting.
 - In California the QI is either an employee of or contracted by the County Behavioral Health agency.
 - The QI assessment is clinical in nature and will be conducted as a Specialty Mental Health Service

THE QI FRAMEWORK

VISION

- All children live in committed and loving families

PURPOSE

- Determine what supports are needed to meet the child and caregiver's specific needs in a family setting

QI ACTIVITIES

- 1) Engage members of the CFT including the youth and the caregiver
- 2) Review comprehensive mental health assessment
- 3) Conduct the QI assessment using the IP-CANS tool as a component of the assessment
- 4) Identify strengths and needs of the child and how those needs can be met with a family member

FFPSA PART IV

COURT REPORTING

- FFPSA requires additional court oversight. This includes:
 - Court hearings within 60 days of the start of each STRTP placement, including change in STRTP placements.
 - For each new placement and/or placement change, a new court hearing is required to approve the level of care based on an assessment by the Qualified Individual (QI).
 - At each court hearing the court of jurisdiction must take into consideration the QI's assessment when determining whether the STRTP is the most effective and appropriate level of care and whether the placement is consistent with the child's short- and long-term behavioral health and permanency goals.
 - Review of Placement at Post-Permanency, Status, and Probation Status Review Hearings
 - These hearings will require a supplemental report, or for probation a social study, to include evidence of the QI's ongoing assessment of the child's strengths and needs.
 - The [Judicial Council of California](#) will be amending or adopting new rules of court and must develop or amend the appropriate forms to implement WIC Sections 361.22 and 727.12 by October 1, 2021. The Judicial Council will also develop a procedure for the court to review the placement without having a hearing.

- The FFPSA requires additional documentation in the child welfare or probation case plan for youth placed in an STRTP.
- [Section 16501.1](#) applies to children and nonminor dependents placed in foster care by a county placing agency, and [WIC Section 706.6](#) applies to minors placed into foster care by a probation agency.
- Within 30 days of a child's placement into an STRTP, documentation in the child welfare or probation case plan is to include:
 - Information that demonstrates permanency planning, that is inclusive of the child and family, is occurring.
 - Information reflecting the Child and Family Team's (CFT) efforts and collaboration with the QI.
 - The QI's determinations and assessments, and whether the QI recommendation aligns with the child and CFT's placement preference.
 - A description of home-based services to encourage the safety, stability, and appropriateness of the next placement, and a plan for the provision of family-based aftercare support.

FFPSA PART IV

CASE PLAN DOCUMENTATION

HOW COUNTIES CAN START PREPARING

QI Implementation:

1. Work with MHP on referral process (we will have a template)
2. Develop local processes for integrating the QI with the CFT
3. Develop joint processes for gathering and decimating info to the QI when a referral is made
4. Develop local processes for how QI recommendations will be implemented by CFTs and local child serving agencies
5. When needed, processes for how the IPC will support removing barriers to implement QI recommendation

Courts Process and Case Planning:

1. Inform caseworkers of forthcoming changes
2. Plan trainings for caseworkers regarding how FFPSA will change the work
3. Create a timeline to meet court deadlines, consistent and supportive of current county practices



QUESTIONS AND ANSWERS

You can also email questions regarding FFPSA Part IV to: ffpsa@dss.ca.gov