**Family First Prevention Services Act**

**Overview of Key Provisions**

Companion Script for the PowerPoint Slide Deck

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|  | **Script** | **Notes** |
| Cover Slide | * We’re here together today because we see and value the potential that lives in all children and families and we recognize that supporting policies and programs that activate that potential will lead to the kind of healthy and thriving communities that we all want to live in.
* The Family First Prevention Services Act is a landmark federal child welfare law, passed in 2018, that could have a profound effect on the way states build, maintain, and repair lasting well-being for children and families.
* The law resulted from an omnibus bill in Congress, which means there are a number of provisions regarding a range of federal child welfare laws.
* This presentation focuses on two key provisions of the law.
* These two provisions represent momentous changes to federal law that will significantly impact the child welfare system in [INSERT YOUR STATE NAME].
* Notably, the law creates a new federal program to safely keep children with their families and out of the foster care system, which reduces the trauma caused by unnecessary parent-child separations.
* Research shows that these traumatic separations create toxic levels of stress that disrupt health and development.
* Just like constructing a home on a weak foundation is likely to lead to structural damage and costly repairs, a child developing on the shaky foundation created by toxic stress is more likely to experience negative consequences, including health, mental health, and behavioral challenges, now and into the future.
* By ensuring that all families are able to provide nurturing, supportive experiences and environments for their children through services provided under Family First, we can do more to safely prevent the need for foster care placements and reduce the likelihood that a child will experience the toxic stress of unnecessary separations from family and its harmful effects.
* With a new way to finance and focus on providing parents the tools they need to build children’s social, emotional, cognitive, and physical well-being, we are no longer limited to viewing foster care placement as the primary response to child abuse and neglect.

Optional additional talking points:* Ultimately the law provides for federal financial resources to our state for tools to build family well-being, should the state provide the required matching funds.
* The Family First Prevention Services Act represents many considerations and opportunities for every stakeholder in the child welfare system, including [FILL IN YOUR AUDIENCE, e.g. this organization, the court system, the state legislature, etc.]
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| Slide 2 | * The Family First Prevention Services Act became federal law in February 2018. The two key provisions featured in this presentation can take effect in states as early as October 1, 2019 unless the state chooses to delay implementation for up to two years.
* [INSERT YOUR STATE’S NAME] has up until September 30, 2019 to make its final decision on its implementation date. [*OPTIONAL TALKING POINT, if the information is known:* As of today, [INSERT YOUR STATE’S NAME] has opted to [INSERT YOUR STATE’S DECISION TO BEGIN IMPLEMENTATION ON 10/1/19 OR TO DELAY]].
* In a major change, the federal Family First Act creates a new Title IV-E Prevention Program that expands the use of federal child welfare funds for a discrete array of services to build family well-being, keeping children safely with their families and out of foster care. This is the first key provision today’s presentation covers.
* The second key provision in the law applies when foster care is needed and limits federal reimbursement for foster care and treatment to foster family settings and federally-specified residential settings.
* This means that there are certain types of congregate settings that will no longer be eligible for federal reimbursement. However, the state can still opt to use state funds to reimburse for any congregate settings that are essential to the child welfare system in [INSERT YOUR STATE HERE].
* This new limitation on federal reimbursement to the state necessitates significant changes to the foster care system in our state.

Optional talking points:* Title IV-E represents about $6.5 billion in federal funds spent on the child welfare system. Before the Family First Act, it could largely only be spent on children after they had been court-ordered into foster care. So, basically, it could only be spent on removing children from their families, which evidence shows is traumatizing in and of itself, even when it is necessary. But, it is frequently UNNECEESSARY to remove children from their parents.
* In FY 2016, there were 437,000 children in foster care nationwide. Yet, 75% of children are removed from their families and placed into foster care for neglect caused by stressors on the family, such as mental health conditions or substance use disorders.
* The theory underpinning the Family First Act is that if services are provided that help families address these stressors and repair well-being, then more children can safely remain with their families and avoid the trauma and toxic stress of parent-child separation and the experience of entering the foster care system.
 | **Implementation Dates:** The Title IV-E Prevention Program can begin as early as October 1, 2019 and *is a voluntary option for states.* However, the key provision under Chapter 2 of the law, “Ensuring the Necessity of a Placement that is Not in a Foster Family Home,” commonly known as “the QRTP provision,” is a *requirement for states that wish to continue to draw down the federal IV-E Foster Care payments.* This required provision can take effect as early as October 1, 2019 or states can delay its enactment for up to two years. |
| Slide 3 | * Chapter 1 of the Family First Prevention Services Act, or FFPSA, is titled, “Investing in Prevention and Supporting Families.”
* The law established the “IV-E Prevention Services Program”
* Here is a high-level overview.
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| Slide 4 | * The federal child welfare entitlement financing stream, often referred to as “Title IV-E”, will reimburse states at a 50% match to provide a discrete array of services to eligible candidates for the purpose of helping them fulfill their potential, build family well-being and prevent entry into foster care.
* Eligible candidates include:
	+ A child or youth that is a “candidate for foster care”…
		- who is at “imminent risk of entering foster care” but it is believed that the child…
		- can remain safely with parents or with kinship caregivers, if provided …
		- the services supported by the Family First Act.
		- (This includes children whose adoption or guardianship is at risk of disruption or dissolution.)
	+ Kinship caregivers or parents are eligible to receive services if the services may prevent their child’s entry into care.
	+ Pregnant or parenting foster youth are eligible candidates for the services.
 | **The Term “Prevention” in Family First:**In the Family First Act, the term “prevention” refers to “preventing children from entering foster care.” It does not refer to “preventing harm to children.” |
| Slide 5 | * Children who meet the eligibility definition must have…
	+ a written foster care prevention plan, prepared by the state agency, that identifies them as being at imminent risk of entering foster care and…
	+ indicates that they can remain safely at home with parents or in a temporary or permanent kinship placement, if provided…
	+ the Family First-supported services, which must be trauma-informed, evidence-based services chosen from the federal *Title IV-E Prevention Services Clearinghouse*.
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| Slide 6 | * Eligible candidates are entitled to the Family First services as noted in their foster care prevention plan.
* The law allows for the following trauma-informed, evidence-based…
	+ mental health treatment,
	+ substance abuse prevention and treatment, and
	+ In-home parent skill-based programs, including individual and family counseling.
* These services to build well-being are available for twelve months.
* The services are renewable, which means that if a child remains eligible at the end of the twelve months of services, then an additional twelve months of services can be provided.
* There is no income eligibility for the prevention services, which means that the child’s family’s income is not a factor.
* The Family First Act reimburses state expenditures with federal funds at 50%, which means that states must provide a 50% match.
	+ Beginning October 1, 2026, the federal reimbursement is the “federal medical assistance percentage”, commonly known as F-MAP.
	+ In [INSERT YOUR STATE], the F-MAP is [INSERT PERCENTAGE (see Notes)].
* The prevention services available through Family First must meet evidence-based requirements as defined in the law.
* On October 1, 2018, the Administration for Children and Families initiated the *Title IV-E Prevention Services Clearinghouse*.
* The Clearinghouse is the authority over which evidence-based practices will be eligible for federal financial reimbursement through FFPSA.
* The first list of programs included in the Clearinghouse was published on June 21, 2019. Additional evidence-based programs will be added to the Clearinghouse on a rolling basis. The second announcement of programs included in the Clearinghouse is expected by late summer 2019.

Optional talking points:* The law also provides federal financing in support of evidence-based kinship navigator services without regard to income. Kinship navigator programs provide information, referral and other services to grandparents and other relatives to link them to the benefits and supports they need when they are raising a family member’s child(ren).
* Research tells us that the public – including policy makers – does not intuitively understand the role and value of the types of services states will now have the ability to support with federal child welfare funding.
* It will likely require an active advocacy effort that relies on evidence-based communications to win the support of the state legislature to pay for the required 50% state match.”
 | **Federal Entitlement:**A federal entitlement must reimburse the expenditures to the state for any eligible child/family that is served.**F-MAP Data:**[Click here](https://www.kff.org/medicaid/state-indicator/federal-matching-rate-and-multiplier/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D) to find the F-MAP for your state. If your state’s F-MAP is more than 50%, then the federal reimbursement will be higher for your state beginning on 10/1/2026. If your state’s F-MAP is at 50%, the equal federal-to-state match will continue.**Additional Kinship Resources:** [Grandfamilies.org](http://www.grandfamilies.org/Topics/Kinship-Navigator-Programs/Kinship-Navigator-Programs-Resources) is the premier resource for the kinship provisions in Family First. They’ve produced a helpful resource, [Action Steps to Implement the Family First Act in Your Communities](http://www.grandfamilies.org/Portals/0/Documents/FFPSA/new-opportunities-kinship-families.pdf).For updated information on the Clearinghouse, visit the Administration for Children and Families [website](https://www.acf.hhs.gov/opre/research/project/title-iv-e-prevention-services-clearinghouse). |
| Slide 7 | * Chapter 2 of the Family First Act is titled, “Ensuring the Necessity of a Placement that is Not in a Foster Family Home”
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| Slide 8 | * In essence, the focus of these new provisions is on making sure that federal resources are directed toward placing children in family settings whenever possible and…
	+ that if a child is placed in a residential or congregate setting it is either for…
		- treatment of assessed behavioral health or mental health needs or…
		- because the child or youth is a fit for certain types of settings that are specified in the law.
* Beginning with the third week of a child’s placement in foster care, states will only be eligible for federal Title IV-E foster care payments on behalf of a child who…
	+ meets IV-E income eligibility requirements and…
	+ is placed in a foster family home or…
	+ one of the federally-specified settings.
* One of the settings that is federally reimbursable is a residential setting for families that is supported as an option for preventing entry into foster care. However, it does not have the same time stamp (“Beginning with the third week…”) that the other specified settings have and, when it is providing evidence-based practices, it does not require an income test for eligibility.
 | **‘Prevention’ Setting:**The “prevention setting” is family-based residential substance abuse treatment. Federal reimbursement is available when a child is placed with his/her parents in this type of family-based treatment facility. No income test is required for the use of this setting. |
| Slide 9 | * The law provides for the following definition of foster family home…
	+ Licensed or approved by the state and…
	+ providing care to six or fewer children in foster care…
	+ (exceptions to this limit of six children can be made to accommodate parenting youth in foster care to remain with their child, keep siblings together, keep children with meaningful relationships with the family, and care for children with severe disabilities).
* The law required the federal government to establish national foster care standards that states must align with or officially describe why they may not align with specific provisions.
 | **National Model Foster Care Standards:**The [National Model Foster Care Standards were issued on February 4, 2019](https://www.acf.hhs.gov/sites/default/files/cb/im1901.pdf). |
| Slide 10 | * [INSERT YOUR STATE’S NAME] will only be reimbursed by the federal government for these specified settings.
* The first specified setting is a Qualified Residential Treatment Program, or QRTP.
* The QRTP designation is a new category of placement setting, initiated by the Family First Act.
* A QRTP must be a licensed, accredited program using a trauma-informed treatment model.
* A QRTP must have a registered or licensed nurse and other licensed clinical staff on site “in accordance with the treatment model” and available 24 hours a day, 7 days a week.
* A QRTP must demonstrate family engagement, including siblings, and must provide at least 6 months of after-care support after a child is discharged from the treatment program.
* Placements in a QRTP must be justified by a qualified individual assessor within the first 30 days, initially approved through judicial review within 60 days, and reviewed periodically by the court to continually assure it is the best placement for the child.
* Every adult working in an organization that has a QRTP program must undergo a criminal record and child abuse and neglect registry check.
 | **QRTP Accreditation:**A QRTP must be accredited by [CARF,](http://www.carf.org/home/) [JACHO](https://www.jointcommission.org/mobile/accreditation/), [COA](http://coanet.org/home/) or a non-profit entity approved by the U.S. Secretary of Health and Human Services.**QRTP Length of Stay:**For every QRTP the child is placed in for more than 12 consecutive months or 18 non-consecutive months (for a child under age 13, it is six consecutive or non-consecutive months), the state agency must maintain documentation in the case plan and make it available for federal inspection or review upon request. The child can remain in the congregate treatment setting as long as needed, provided the qualified individual assessor and court continues to support the placement. |
| Slide 11 | * A second type of congregate setting that can receive federal support is one that specializes in providing prenatal, post-partum or parenting supports for pregnant or parenting youth, so young parents provide a strong foundation for their children’s well-being from the outset.

Optional talking point:* There are no further requirements for this type of congregate setting from the federal government, which means the state has the option of placing any additional parameters for quality or types of services on these types of settings.
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| Slide 12 | * Another specified setting is one that provides high quality residential care and supportive services to children and youth who have been found to be, or are at risk of becoming, sex trafficking victims, so they can rebuild their foundations of well-being.

Optional talking point:* The state of [INSERT YOUR STATE HERE] has been given the flexibility to write its own definition of “high quality residential care,” “supportive services,” and for which children and youth will be included in the population of “have been found to be, or are at risk of becoming, sex trafficking victims.”
 | **Clarification of definition of terms:**Until and unless the state further defines the terms in this description, there is no further information from the federal government to clarify the requirements for this congregate setting. |
| Slide 13 | * Finally, the Family First Act allows for federal reimbursement for supervised settings for youth ages 18 and older who are living independently.

Optional talking points:* The state agency can develop a range of these types of independent living settings as long as they are reasonably consistent with the law.
* The state can determine if these settings need to be licensed or follow any additional protocols, such as safety measures.
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| Slide 14 | * This additional type of congregate setting or “Prevention Setting” is one that may receive federal reimbursement to keep children with their families when a parent is receiving treatment in the setting.

 * Without regard to the family’s income, a child who is under the placement and care of the state can be placed with a parent who is receiving substance abuse treatment in a licensed residential family-based substance abuse treatment facility.
 | **Availability date for ‘Prevention’ Setting:**Different from other provisions described in this presentation, the option for states to use this “Prevention Setting” became available as of October 1, 2018. |
| Slide 15 | Opportunities and Next Steps (transition slide) | Presenter’s Tips:As the presenter, you can hold on this slide to focus on your “ask” of whomever you are presenting to. You are invited to contact Marlo Nash at Saint Francis for tips on what to include in this section of the presentation. (marlo.nash@saintfrancisministries.org) |
| Slide 16 | Thank you! |  |
| Slide 17 | Resources (transition slide) |  |
| Slide 18 | [*List of resources for additional information and access to tools/services in support of successful implementation of the Family First Prevention Services Act.]* | The FFPSA Powerpoint in the Saint Francis FFPSA Toolkit offers a slide to connect with Saint Francis for TA and Tools. Feel free to keep this slide or re-purpose it to include the resources and contact information your audience needs. |

**Please contact us if we can be of further assistance.** As part of its national scope, Saint Francis Ministries is actively supporting the implementation of the Family First Prevention Services Act. Through collaborative work in Washington, DC and across the country, Saint Francis is helping to turn the expectations of Family First into tangible, life-changing results. As an advocacy and systems change partner to public agency leaders, elected officials and stakeholders from nonprofit organizations and communities, Saint Francis extends its expertise and knowledge about Family First and related practices in support of a smooth and effective launch of the provisions in the law. Contact Marlo Nash, National Director of Partnerships & Policy (marlo.nash@saintfrancisministries.org; 202.431.3532), for assistance using this script, preparing your upcoming presentation on Family First, and/or implementing Family First in your state.

**Special Acknowledgement:** Saint Francis Ministries would like to thank Bridget Gavaghan, Director, National Reframing Initiative, for the National Human Services Assembly for her partnership in embedding the “Building Well-Being” frame into this script. The [National Reframing Human Services Initiative](https://www.nationalassembly.org/initiatives/national-reframing-initiative/) offers a research-supported narrative that has been demonstrated to increase understanding and support for the vital work of policy and systems change, which may be useful to explore in support of your Family First advocacy and communications efforts.