

## **Overview of the Family First Prevention Services Act**

The Family First Prevention Services Act (FFPSA) is the most substantial funding reform in the child welfare arena in the last 20 years. It aims to correct the value-policy mismatch perpetuated by the former funding system, which incentivized foster care placement and did not provide funding for noncustodial and prevention services. The new approach to funding incentivizes placing children in family settings; providing evidence-based services; and working with relatives who care for children in their families outside of the foster care system. FFPSA impacts a number of areas of child welfare practice, to varying degrees. The most critical elements are highlighted below.

### ***Funding Services to Prevent the Need for Foster Care***

FFPSA allows states to use federal funds to provide evidence-based prevention services in three areas: substance abuse treatment, mental health treatment, and in-home parenting skill development. Services may be federally funded for up to a twelve-month period, and families can receive services for multiple periods. There are three standards of evidence considered for these services: promising, supported, and well supported. In order to be reimbursed with federal dollars, half of the funding utilized on preventative services must be spent on those which fall into the well supported category. The Children's Bureau has released program instructions around how services will be evaluated, and a list of the initial 12 programs being reviewed for consideration. On June 6, 2019, the Children's Bureau released additional guidance allowing states with relevant partners, to assess all available services that are likely to be eligible for federal funding and identify the most critical needs throughout the state.

FFPSA also provides the flexibility to use federal funds to support kinship navigator programs. These programs connect people providing kinship care to community-based resources targeted at maintaining and stabilizing the relative placement. The programs must be evidence-based, and families must meet certain requirements in order to be eligible for federally funded services.

### ***Foster Home Licensing and Placement in a Family Setting***

The Children's Bureau released model foster home licensure standards which include new requirements for background checks in certain settings. FFPSA also establishes new guidelines for placement in Qualified Residential Treatment Programs (QRTP) and required quality and service provision standards for this placement type.

### ***Other FFPSA Legislative Changes***

FFPSA made modest changes to existing criteria related to Chafee funding, which assigns certain benefit eligibility to young people who experience foster care at age 14 or older. The Act also requires that states take appropriate actions to ensure that children are not misdiagnosed with mental illness or other disorders that could contribute to their being inappropriately placed in group care settings. Additionally, new requirements related to the collection and reporting of child maltreatment fatalities have been prescribed.

## **South Carolina's Implementation Status as of 8/27/2020 and Next Steps**

The Children's Bureau released information memoranda and program instructions to provide states guidance for implementation of FFPSA. As information is received from the Children's Bureau, South Carolina Department of Social Services (SCDSS) is incorporating that information into ongoing planning. SCDSS is assembling workgroups that include critical stakeholders and partners to implement practices, policies, and programs to support FFPSA.

On April 28, 2019, SCDSS formalized its FFPSA governance structure and chartered an executive steering committee to oversee the statewide development and implementation. SCDSS has elected to form two focused FFPSA workgroups (Prevention and Care Continuum) which are comprised of both internal and external stakeholders. The workgroups are tasked with identifying service requirements, QRTP requirements, eligibility, geographic need, policy, funding, and other miscellaneous FFPSA requirements related to their respective areas. The two meetings are ongoing and continue to work toward program design and implementation.

### **On-Going Implementation Tasks and Activities**

#### **Prevention**

On July 12, 2019, SCDSS convened the first meeting of its Title IV-E prevention services workgroup with representation from the Department of Mental Health (DMH), First Steps, Child Advocacy Centers, Project Best, Department of Alcohol and Other Drug Abuse Services (DAODAS), South Carolina Primary Health Care Association (SCPHCA), Department of Health and Human Services (DHHS), Department of Education (DOE), National Youth Advocate Program (NYAP), South Carolina Youth Advocate Program (SCYAP), Justice Works Behavioral Health Services, Carolina Youth Development Center (CYDC), SAFY, South Carolina Infant Childhood Mental Health Association (SCIMHA), Behavioral Health Services Association (BHSA; County 301s), Citizens Review Panel (CRP), A Child's Haven, Epworth Children's Home, the Palmetto Association for Children and Families (PAFCAF), the South Carolina's Children's Trust, the South Carolina Continuum of Care (COC), and the South Carolina Department of Children's Advocacy (SCDCA), members of the Joint Citizens and Legislative Committee on Children (JLCC), along with a number of other community partners.

In addition to the previously mentioned organizations, the Department has added kin caregivers and is in the process of partnering with birthparents of children with lived experience in the SC child welfare system to serve in an advisory capacity to this group. The workgroup is responsible for assisting the Department in enhancing its service array through the identification and selection of IV-E eligible EBPs across the state. The workgroup was last convened on 6/26/2020 and will next meet again in September as subgroups continue to work on assigned tasks.

In early 2020, SCDSS partnered with the University of South Carolina's Institute of Families in Society and the South Carolina Department of Licensing, Labor, and Regulation (SCLLR) to develop and disseminate a survey to help the Department better understand the landscape of evidence-based practices, provider readiness, and provider self-efficacy with evidence-based practices across the state. On 2/22/2020, the SCLLR disseminated the survey via email, to all licensed professional counselors, marriage and family therapists, social workers, psychologist, psycho-educational specialists, addiction counselors, and physicians. Subsequently, the Department, PAFCAF, and the BHSA made their network providers aware of the survey to expand the reach of dissemination.

On 3/15/2020 the survey closed; over 2,600 individuals responded, with approximately half reporting they were currently serving children, families, or caregivers. The 1,1298 respondents that were currently serving children, families, or caregivers all counties and regions across the state were represented. The resulting data indicated that there were a number of evidence-based practices being provided across the state, identified the characteristics of South Carolina's child and family serving workforce, and illuminated various factors related to implementation challenges. Each of the survey findings have applications that are integral to the successful implementation of prevention services.

On 3/3/2020, the Department convened a small subgroup of providers to assist in the development of a scope of work for a qualified provider listing to serve as a FFPSA pilot program and expand the Department's overall service array. This group also helped with developing standardized service definitions and corresponding provider requirements that comport with state law and qualifications set forth by other funder sources.

On 6/9/2020, the Department convened another FFPSA subgroup to assist in the development of capacity building grants for identified intensive in-home services. This group has met several times and will continue to meet through the fall to finalize drafting grant language and model standards.

As of 8/17/2020, SCDSS is still working on developing practice guidelines, policy, reimbursement methodology, budget, service selection and mapping, provider qualifications, and defining eligible candidates for services. The Department is committed to taking a broad approach to candidates with the intent of including defined family preservation populations, cases under investigation that meet certain criteria, as well as children in foster care that are pregnant or parenting and in need of prevention services to maintain placement with their child.

As of 8/17/2020, interventions under consideration for inclusion in the IV-E prevention plan are: Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT), Healthy Families America (HFA), Nurse Family Partnership (NFP), Parents as Teachers (PAT), Motivational Interviewing (MI), HOMEBUILDERS, Brief Strategic Family Therapy (BSFT), Functional Family Therapy (FFT), Multisystemic Therapy (MST), and Parent Child Interaction Therapy (PCIT). This list will be updated as additional interventions are considered and/or when the state determines what specific interventions will be included.

*Note: Services must be approved in the State's prevention plan and authorized for the proposed usage to be eligible for reimbursement.*

The Department intends to submit its initial draft of the prevention plan by January 2021 for initial feedback from the Children's Bureau. This will provide the state with ample time for revisions and implementation.

### **Congregate Care and Qualified Residential Treatment Programs (QRTPs)**

On 11/6/2019, SCDSS invited community partners and congregate care providers to participate in its FFPSA Care Continuum Workgroup (also known as the Private Provider Advisory Committee) to assist the agency in addressing congregate care provisions of FFPSA. The initial meeting date for this workgroup was on December 3, 2020 and providers and SCDSS staff came together to begin to draft guidelines in relation to the QRTP and other approved IV-E congregate care settings. These meetings will be ongoing and will elicit stakeholder input to move towards implementation of approved congregate care settings.

Additional IV-E approved congregate care placement setting meetings and discussions have taken place to discuss additional approved congregate care settings outside of the QRTP to include: “a setting specializing in providing prenatal, post-partum, or parenting supports for youth; in the case of a youth who has attained 18 year of age, a supervised setting in which the youth is living independently; and a setting providing 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.”

A Preliminary QRTP Guide for Providers has been developed with the specific requirements set forth by the Administration of Children and Families. In addition, with the development of the South Carolina Child and Adolescent Needs and Strengths (CANS) assessment tool, a Levels of Care Framework has been developed to include an algorithm that supports moderate-level QRTP placements and high-level QRTP placements. A proposed rate structure has been developed and is currently under review pending fiscal analysis.

A guide will begin to be developed for settings that specialize in providing prenatal, post-partum, or parenting supports for youth through the Private Provider Advisory Committee. A guide will also be developed for high-quality residential care providers that provide supportive services to children and youth who have been found to be, or are at-risk of becoming, sex trafficking victims. One of the experts from the Human Trafficking Unit will be involved in the process of completing a guide to serve this specific population.

The current Group Home Regulations and Supervised Independent Living Regulations are currently being revised and updated. Once finalized, the regulations will be codified and promulgated with the South Carolina Legislature.

### **Family First Transition Act (FFTA)**

On 12/19/2019 the Federal House and Senate passed the bipartisan budget agreement to fund the federal government for the remainder of Fiscal Year 2020. H.R. 1865 *the Further Consolidated Appropriations Act, 2020* was signed into law by President Trump on 12/20/2019.

On 2/27/2020, the Association for Children and Families (ACF) released a program instruction (*ACYF-CB-PI-20-04*) to provide states with the relevant information needed to apply for FFTA grant funding. Total funding for the FFTA Grant is \$500M; it was estimated that South Carolina would receive \$8.6 million to assist in transitioning toward FFTA.

On 4/1/2020, SCDSS submitted its application for the FFTA funds. Shortly thereafter, the Department received the forecasted amount of funds. Using these funds, the Department intends to explore transitional initiatives including, but not limited to:

- Grants for transition to QRTP
- Grants for capacity building of EBPs included in our prevention (see page 3)
- Contract with a vendor to assist in technology changes
- Contract with a vendor to assist in FFPSA rigorous evaluation strategy and overall CQI process

- Contract with a vendor to assist in programmatic evaluation post-implementation Development and implementation of a transitional pilot program to expand departmental service array and improve access to evidence-based practices

As of 8/17/2020, SCDSS in the process of partnering with technical assistance to develop an evaluation strategy and continuous quality improvement plan for the process and eligible interventions under this program.

### **Bi-Weekly Calls**

On November 22, 2019, the Department began to host monthly calls with public providers and other stakeholders through the state to solicit feedback on SCDSS FFPSA efforts. These calls are ongoing and allow for open discussion with multiple stakeholders across the state. The next call will be held on 8/28/2020. Please monitor SCDSS social media for updated times and dial-in information.

### **Model Licensing Standards**

In 2019, the Department drafted and filed proposed amendments to its foster family home licensing regulation. The amendments incorporated many of the model foster family home licensing standards proposed by the U.S. Administration for Children and Families/Children's Bureau. The amended regulation was submitted to the General Assembly for 120-day review in January 2020. Upon further consideration of the amendments, the Department decided to withdraw the proposed regulation. The Department will continue to collaborate with its child welfare services partners and plans to resubmit an amended regulation to the General Assembly.

### **Kinship Care**

The South Carolina Department received \$345,181 of federal funding from the Administration of Children and Families Children's Bureau (ACF CB) in October 2019, to enhance the Kinship Navigator program in FY18 and FY19. SCDSS has utilized funds in following areas:

- Attachment, Regulation, and Competency (ARC) training is being held in the Tri-County area (Charleston, Berkeley, & Dorchester County) and Richland County. Trainings have provided kinship caregivers with information regarding caring for children who have experienced trauma. Additionally, resources that are available to support these children and help kinship caregivers navigate systems were shared.
  - Richland County library hosted a virtual town hall meeting was held on 7/14/2020 for kinship caregivers to discuss resources available in state (over 2700 participants was on the call).
- In collaboration with the Children's Alliance, a contract was developed to implement the Caring for Our Own "Train the Trainer Program" to train kinship caregivers throughout the state. The training program will tentatively be held the week of August 24, 2020.
- On May 1, 2020, a contract was implemented to begin the expansion of support groups in all regions of the state. Kinship caregivers from other counties participate in these support groups as well.
  - Support Groups will be held beginning July 2020-September 2020.

- Federation of Families (Florence, Pee Dee region) will host virtual support groups on July 14th and 28th 2020
- Kindred Hearts in the (Richland, Midlands region) began hosting their support groups on the last Tuesday of the month
- Pendleton Place, Kimberly Perry (Greenville, Upstate region) will begin to host virtual support groups. This will be facilitated by one of our kinship caregivers who participates on the kinship advisory panel.
- HALOS (Tri-County, Low Country region) are currently hosting virtual support groups
- If additional funding is received these groups sessions will be extended yearly.

On April 1, 2020, the Department contracted with HALOS to partner with providers on enhancing their capacity to develop a comprehensive kinship navigator program.

- HALOS is collaborating with various partners throughout the state to build capacity of navigation services statewide
- Collaborating with Sisters of Charity Foundation on the development of training manual to train other providers on developing a kinship navigator program, developing a website and evaluation.

With this contract, HALOS has provided statewide kinship support services to kinship caregivers who have been experiencing a crisis and providing needed supports so children can remain in the home of kinship caregivers. Examples include home repairs for licensing, smoke detectors, assistance with clothing, food and childcare (see the attached guidance).

- The agency has utilized of \$41,848 kinship care assistance funds for kinship caregivers statewide

On August 14, 2020 the agency received additional funding from the ACF of \$340,470 for FFY 2020-2021 to continue the expansion of the above Kinship Navigation services.

#### Kinship Advisory Panel:

The Kinship Advisory Panel continue to meet monthly to promote kinship practice improvement efforts and implementation of kinship navigator services (annual report was provided to Child Welfare leadership). Updates from the panel are as follows:

- At the July 2020 Kinship Advisory Panel, Jennifer Brewton from the Department of Aging participated in this meeting and discussed resources that are available to kinship caregivers over the age of 55 and expressed the importance of our partnership
- Reviewed Kinship Care Work-Aid draft
- At the August 2020 Kinship Advisory Panel, received updates regarding the Kinship Navigator expansion and prepared for Kinship Appreciation Month in September 2020
- September 2020 tentative agenda invite internal partners to begin internal collaboration to support kinship caregivers (Child Support, Child Care, or Child-Only TANF)

## **Child Fatality**

The Department has developed two strategies to enhance the accuracy of child fatality investigations and National Child Abuse and Neglect Data System (NCANDS) data reporting. First, SCDSS has a database to track all child fatalities occurring in South Carolina, that the agency is made aware of. This database allows for data collection around fatality trends in age, ethnicity, region, and contributing factors, as well as monitors the tracking of screening decisions and determinations. The database also serves as one method of tracking for the NCANDS Child Fatality reporting.

A dual-level review process will be implemented going forward to ensure accuracy in NCANDS reporting. Additionally, SCDSS's Child Fatality Unit has begun partnership with the SC Coroner's Association and the National Center for Child Fatality Review and Prevention to enhance the frequency, reach, and efficacy of Child Death Reviews.

## **0-5 Mental Health**

SCDSS has been actively working to place children ages 0-5 in the least restrictive, most family-like settings, unless certain exceptions set forth in policy are met. SCDSS has been successful in this work and there are currently no children ages 0-5 placed in non-family-like settings, except those who meet qualifying exceptions

SCDSS has identified a statewide service array for children aged 0-5 and continues to partner with the South Carolina Infant Mental Health Association (SCIHMA) to advocate for the expansion of mental health services for infant and early childhood mental health.

To further improve evidence-based services for the states youngest and most vulnerable population, the Department has partnered with SCHIMA to increase referrals of DSS to Attachment Bio-Behavioral Catch-up (ABC) coaches. ABC is an evidence-based intervention that aims to help caregivers nurture and respond sensitively to their infants and toddlers to foster their development and form strong and healthy relationships. ABC coaches available in the Charleston, Columbia, Aiken, Rock Hill, and Greenwood areas. ABC is currently under review by the Title IV-E clearinghouse for FFPSA evidence-based practices.

## **Plan of Safe Care**

To address FFPSA requirements around families and infants affected by substance use disorders, the Department published its Plan of Safe Care policy on October 1, 2018. As of November 1, 2018, statewide training has been ongoing for staff on Plans of Safe Care and the risks of alcohol and substance abuse to unborn babies. This training is in the process of being revised and updated to include instructions on SACWIS entries to identify newborns between the ages of 0-12 months who have been affected by substance abuse and to track the number of Plans of Safe Care which are developed with a family.

The Department's child welfare staff will provide case management and coordinate with community service providers to ensure assessment, education and recovery supports are offered and developmental screening is considered for all children and families during pregnancy and up to one year after birth.

## Completed Tasks

SCDSS's Child Fatality Unit has identified unsafe sleep and suicide as recurring causes of child fatalities in South Carolina. In partnership with SCDSS Staff Development and Training, the Child Fatality Unit has assisted with the development of a Safe Sleep web-based training module to be available as part of required ongoing training for SCDSS staff. A Suicide module will be developed as well.<sup>7</sup>

SCDSS has implemented changes to the Educational and Training Voucher (ETV) by modifying eligibility criteria to eliminate the need for enrollment in a postsecondary educational program prior to the 21st birthday and extended the age of eligibility from age 23 to age 26. Outreach efforts were initiated to notify eligible youth and providers of these changes.

SCDSS modified its John H. Chafee Foster Care Program for Successful Transition to Adulthood program by changing the age of eligibility from 13 to 14 years old, as required by FFPSA. These changes were reflected in agency procedure manuals and handouts. Eligible youth and providers were notified of changes to the program through outreach efforts.

SCDSS reviewed and reported on existing South Carolina Department of Health and Human Services (SCDHHS) and SCDSS policies surrounding the prevention of inappropriate diagnosis and placement of children and youth in appropriate settings.

On September 5, 2018, SCDSS implemented changes to the group home background check process. This process requires that any adult employed within a child-care institution must undergo a fingerprint-based criminal records check of the national crime information databases, including the child abuse and neglect registry checks.

Relevant policies and procedures have been modified to reflect the revised Title IV-E Adoption Assistance program eligibility rules included in FFPSA. All program staff responsible for determining program eligibility and providing program oversight have been trained on the revision in policy and practice.

In order to prepare for a thorough implementation of FFPSA, ensure a quality service array, determine and plan for future legislative changes, and await full guidance from the Children's Bureau, SCDSS has, at this time, decided to delay implementation until October 2021. DSS is excited about the opportunity to enhance prevention practice and work with internal and external partners to support the maintenance of family connections, improving overall well-being and permanency.

For any questions related to DSS's implementation status, please send submit all inquiries to [FamilyFirstPSAinfo@dss.sc.gov](mailto:FamilyFirstPSAinfo@dss.sc.gov)