

Family First Prevention Services Act

PL 115-123

Stakeholder Informational Meeting Highlights

The Family First Prevention Services Act (FFPSA) was signed into law as part of the Bipartisan Budget Act on February 9, 2018. This act reforms the federal child welfare financing streams, Title IV-E and Title IV-B of the Social Security Act, to provide services to families who are at risk of entering the child welfare system. North Dakota Department of Human Services (NDDHS) is responsible to implement the federal regulations resulting from FFPSA, manage the Title IV-E State Plan, and administer funding to support these efforts. The department will host Stakeholder Informational Meetings the 3rd Wednesday of each month during 2019. The purpose of the monthly meetings is to engage with Stakeholders and inform on progress, while soliciting feedback and comments related to FFPSA implementation.

DATE	December 18, 2019
FACILITATORS	Tracy Miller – Children and Family Services Division Kelsey Bless – Children and Family Services Division Brittany Fode – Children and Family Services Division
TOPICS	KinshipND website Title IV-E Prevention Plan status QRTP process and policy review
This is the FINAL monthly scheduled FFPSA Stakeholder Informational Meeting	

Highlights of FFPSA Call:

Highlights and resources shared during all monthly information meetings are available online at <https://www.nd.gov/dhs/services/childfamily/family-first.html>

KinshipND Website

KinshipND.com was developed in collaboration with Lutheran Social Services ND and Kat Marketing. Funding for website development was provided through the Kinship Navigator development grant received by DHS from the Administration of Children and Families. Focus Groups convened by LSS-ND were valuable in understanding what information kinship caregivers needed; thus, contributed to the content included within the website.

KinshipND.com went live 12/19/19. The Department plans to issue a news release to notify the public of this resource. Link: <https://kinshipnd.com/>

KinshipND.com is “*Support to caregivers who provide care and protection when a child cannot remain in their home.*” It is intended to be a resource to all caregivers including foster parents, relatives, fictive kin, etc.

The front page of the site includes a brief survey so that we can gather information from those accessing it and ensure needed information is available to them.

Additional features were built into KinshipND.com, such as a blog, an events calendar, and online courses so that once we have a Kinship Navigator, he/she can monitor and edit the website as needed.

Topics addressed on KinshipND.com include:

- **How to Set Boundaries** which includes links to:
 - Zero to Three
 - AARP: Raising Grandchildren
 - Guidance for Foster Kinship Caregivers

- Raising the Children of the Opioid Epidemic
- Healthy Sexual Development
- Discipline and Setting Boundaries
- **Social Media** which includes links to:
 - How Using Social Media Affects Teenagers
 - Teaching Kids to Be Smart About Social Media
 - Social Networking and Children
 - CommonSenseMedia.org
 - Parent Forum Information for Internet Safety
- **Discipline** which includes links to:
 - Discipline Strategies for Teenagers
 - Discipline and Setting Boundaries
 - Rethinking Discipline
 - Child Development: Positive Discipline
 - Positive Discipline
 - About Positive Discipline
- **Stages of Development** which includes links to:
 - Healthy Child Development
 - CDC: Positive Parenting Tips
 - The Developing Brain
 - Child Development Milestones
 - CDC's Development Milestones
 - Zero to Three
 - Healthy Communication
 - AARP: Raising Grandchildren: Support
 - Complex Trauma: Facts for Caregivers
 - Symptoms of Trauma and Treatment Options

Resources available on KinshipND.com include:

- **Contact** which includes a link to FirstLink 2-1-1
- **FAQs** (Frequently Asked Questions) which include detailed answers and, in some cases, links to resources
- **Legal Resources** which include links to:
 - Power of Attorney forms
 - Minor Guardianship forms
 - Criminal Background Check Authorization forms
- **Helpful Links:**
 - Application to provide family foster care
 - Child Care Assistance program

- Child Care Aware
- Children, Families and Finances from NDSU Extension
- Connected Parents, Connected Kids
- Family Caregiver Supports and Services Study
- Foster Care Services
- Foster Parent Guide
- Grandfamilies Fact Sheet for North Dakota
- Grandfamilies.org
- Healthy Steps Children's Health Insurance Program
- Nine Steps to Respite Care for Grandfamilies
- North Dakota Economic Assistance Brochure (Kinship Care program)
- North Dakota Medicaid
- North Dakota Public Assistance Programs
- Respite Provider Information
- Supplemental Nutrition Assistance Program (SNAP)
- Supporting Children Exposed to Violence and Trauma
- Temporary Assistance for Needy Families (TANF)
- The Developing Brain
- Trauma Informed Parent
- Volunteer Lawyer Program
- **Find Support** which includes links to:
 - Family to Family Network
 - Federation of Families
 - ND Parent-to-Parent/Family Voices
 - North Dakota Post Adopt Network
 - Parent Cafes
 - Parent Resource Centers
 - ParentsLEAD

A one-page informational sheet about KinshipND.com has been produced and will be given to the Regional Supervisors in early January 2020 for distribution to agencies in their area. A copy of this informational sheet is available as a meeting resource on the FFPSA Stakeholder Informational Meetings website.

Title IV-E Prevention Plan Status

The Title IV-E Prevention Plan is a 5-year plan that includes services the state intends to implement that provide enhanced support to children and families and prevent foster care placements through the provision of mental health/substance abuse prevention and treatment services and in-home parent skill-based programs. The services must meet certain thresholds of evidence as determined by the Title IV-E Prevention Services Clearinghouse. This Prevention Plan must be submitted and approved by the Administration of Children and Families. States can add to or amend their plans going forward. Once the plan is approved, states can submit for 50% reimbursement of service costs incurred by candidates for foster care, parents of candidates for foster care, and pregnant or parenting teens in foster care.

Update on ND In-Home Parent Skill Based Programs:

1. Healthy Families North Dakota

Children ages 0-5 comprise the largest percentage of those entering foster care in North Dakota. Therefore, CFS Division has decided to focus on expanding Healthy Families North Dakota (HFND) services in the state. HFND cultivates and strengthens nurturing parent-child relationships, promotes healthy childhood growth and development, and enhances family functioning by reducing risk and building protective factors. HFND offers services until the child is three to five years old. HFND is an approved provider within the Healthy Families America network, which has been reviewed by the Title IV-E Prevention Services Clearinghouse and received an evidence rating of Well Supported (the highest rating possible). Favorable impacts noted in the research include:

- Child safety;
- Child well-being: Behavioral and emotional functioning;
- Child well-being: Cognitive functions and abilities;
- Child well-being: Delinquent behavior;
- Child well-being: Educational Achievement and Attainment;
- Adult well-being: Positive parenting practices;
- Adult well-being: Parent/caregiver mental or emotional health; and
- Adult well-being: Family functioning.

The ND Title IV-E Prevention Plan will outline the planned efforts to implement expansion HFND in the state and will include: Expected outcomes, plan to monitor fidelity, use of data, target population, assurance for trauma-informed service delivery, and evaluation process.

2. Training on Motivational Interviewing

Motivational Interviewing (MI) is a method of counseling designed to promote behavior change and improve physiological, psychological, and lifestyle outcomes. MI aims to identify ambivalence for change and increased motivation by helping clients progress through five stages of change. The Title IV-E Prevention Services Clearinghouse evaluated MI and it received an evidence rating of Well Supported. Favorable impacts noted include:

- Child permanency
- Child well-being: Behavioral and emotional functioning
- Child well-being: Substance use
- Child well-being: Delinquent behavior
- Adult well-being: Positive parenting practices
- Adult well-being: Parent/caregiver mental or emotional health
- Adult well-being: Family functioning

MI is a reimbursable service under many third-party payers, including Medical Assistance; however, training costs are not. It is our understanding 50% of training costs can be reimbursed through the Title IV-E Prevention Plan. Therefore, North Dakota plans to include MI Training for child welfare agencies, including public and private practitioners, in our prevention plan submission. In respect to this portion of the plan, we will outline the planned efforts to train MI statewide and will include: Expected outcomes, plan to monitor fidelity, use of data, target population, assurance for trauma-informed service delivery, and evaluation process.

NOTE: Of the eleven states/jurisdictions that have started implementing FFPSA, there are only 2 approved Title IV-E Prevention Plans - Washington D.C. and Utah.

Qualified Residential Treatment Program Process and Policy Review

On December 6, 2019 CFS disseminated Policy Issuance (PI) 19-24 on **Qualified Residential Treatment Program (QRTP) Placements 624-05-20-17**, located in the Foster Care Permanency Planning policy manual which includes direction on:

- CANS Assessment
- Qualified Individual
- Grandfathered in Youth
- Emergency Placement
- Placement Approvals into QRTP
- Placement Maximums
- Case Manager Responsibility
- Reconsiderations – Submit to Ascend
- Managing QRTP Denials
- Aftercare Services
- Out of State Placements
- Ascend Contact Information

Also, on this date CFS issued policy regarding **QRTP – Court Involvement 624-05-20-18** (within the same PI of the Foster Care Permanency Planning policy manual) which includes direction on:

- State Juvenile Court Review Process
- Foster Care Court Orders

Link to **Policy Issuance (PI) 19-24**: [PI 19-24](#)

A QRTP Q & A document was also provided and is included in Foster Care Permanency Planning policy. Link to **PI 19-24 ND FFPSA Q&A Attachment**: [Q & A Attachment](#)

Frequently asked questions that continue to percolate are those pertaining to the following topics:

Aftercare Services: Children and families are eligible for aftercare services from the QRTP following discharge from the facility. Also eligible for aftercare services are those who were grandfathered in to the QRTP for the time period exceeding 30 days past October 1, 2019.

Emergency Placements: Emergency placements into a QRTP are allowed. The custodial case manager must immediately submit the SFN 824 and supporting documentation to the facility where he/she is seeking placement **AND** fax to Ascend. **NOTE:** Make sure the SFN 824 is fully and accurately completed including demographic information and a list of collateral sources the Qualified Individual can contact for the CANS assessment. Incomplete forms impede their ability to make timely decisions. The youth will be assessed by the Qualified Individual within 10 days and if approved to remain at the QRTP level of care, the 90-day period begins **from the date of emergency admission**. If the youth is NOT approved for the QRTP level of care, the custodial case manager will have 30 days **from date of admission** to secure a different placement.

Grandfathered In Youth: Custodial case managers of youth who have been grandfathered in to a QRTP will receive an email from Ascend stating that a new SFN 824 and supporting documentation be completed and submitted according to a prescribed date/deadline. Ascend will attempt to contact the custodial case manager 3 times via email and if no response is received, the names of the children will be forwarded to CFS administration. Our goal is to have all youth grandfathered in to a QRTP assessed by the Qualified Individual by December 31, 2019.

Transfers of Youth from One QRTP to Another QRTP: If the youth was approved for the first QRTP facility, the child can transition to another QRTP facility without needing a new CANS assessment if it's within the 90-day approval period.

QRTP Denials and Reconsideration Requests: Reconsideration requests need to be submitted to Ascend within **5 days** of the denial. This is a change from the previously allowed 10 days. The reason for the change is to allow adequate time for the Child and Family Team to meet, or to get on the calendar for a regional team case review (or state team case review) if needed, during that 30-day window so that stability in the youth's placement is managed.

Juvenile Court Review Process: For state court cases, Ascend is e-filing the documentation to the court. The juvenile court director or designee will review the documentation and will provide a letter of approval or denial to the custodial case manager. The juvenile court director or designee has the authority to contact the custodial case manager to ask any additional questions or request any additional needed information to finalize the administrative review process. For tribal court cases they are e-filing the documentation to the tribal court.

Much of the challenge thus far has been around QRTP denials, and CFS administrators have staffed these cases with those involved (i.e. juvenile court, custodial agencies, QRTPs). CFS Administrators, Ascend, and Dr. Etherington (clinics officer) continue to test the assessment algorithm and convene clinical alignment calls to look at the bigger picture. We all recognize there is a 'bottleneck' due to the ongoing need for placements that may not currently exist and the complications that result from this. Other early observations include the need for:

- Strong internal supervision to staff these complex situations and determine best placement options for children;
- Building collaborative relationships between custodial agencies, placement agencies, and service providers both locally and throughout the system; and
- Centralized recruitment and retention process, which is going to launch soon.

STAKEHOLDER Q & A

Can you explain the role of the clinical alignment team because there are quite a few teams operating (i.e. regional teams, state team, etc.) and it gets confusing?

The Clinical Alignment Team is made up of CFS Administrators (Brittany Fode and Kelsey Bless), Clinics Officer (Dr. Rosalie Etherington), a Human Services Center Clinical Director (Heather Wilson), and Ascend. We meet every week and go through cases that are high priority and those for which custodial case managers have questions. The role of this team is detailed in the QRTP policy.

The process is as follows:



Most of the cases that have come through this process have been DJS related. To date, the overall QRTP approval rate is around 50% of referrals received (5 QRTP, 2 PRTF, 5 lower level of care).

Can you help those of us who work at a QRTP better understand the process of the Qualified Individual coming into our facilities in terms of what they say to the kids (sort of feels like we're a parent entrusting our kids to a process we know nothing about)? It's been challenging for me to understand how, in a 30-minute conversation, combined with whatever collaterals they talk to, they have adequate information to make appropriate decisions? The information then goes back to the custodian, but we receive no information, so I feel left out of the conversation.

Please know, as the service provider, you can request a copy of the assessment report from the custodial case manager and per policy, you should be receiving it from the case manager. We have received the question regarding collateral contacts from custodians, too, and have been asked why the clinical team or treatment coordinator isn't being contacted by the Qualified Individual. Again, it's important that these experts are listed as collaterals on the SFN 824 by the custodial case manager so that the Qualified Individuals know who to contact for the assessment.

Did you say all grandfathered in youth should have their CANS assessment completed by the end of December 2019?

Yes, that's correct. Ascend will send 3 email reminders to the custodian and if they don't hear back the will contact CFS Administrators. If you are aware of any grandfathered in youth in your facilities who haven't been assessed, please let me (Brittany Fode) know. We aren't being extremely rigid with this timeline but that's the expectation. Our goal is that 75% are completed by the end of December.

Comment – *Ensuring child placement locations are accurate in FRAME, and that juvenile court is notified timely, is critical. It's also important to keep Ascend informed timely. We hope to meet with the Human Service Zone directors about this soon.*

With the closure of Hope Home, is there going to be any other provider who is going to serve younger children?

Currently only DBGR in Fargo and Charles Hall Youth Services accept children starting at age 10. However, children under the age of 12 can only be in a QRTP for 6 months. So, the CFT teams and potentially the Regional Team will be important resources in finding appropriate placements for younger children. If at all possible, we want these children in family homes rather than facilities.

Do you have any updates on the status of the community crisis teams being developed across the state? These could be a good resource to families and potentially foster parents.

I know the positions have been advertised, not sure if any have been filled. The plan is to have these established by January 2020. The positions will be part of Field Services positions.