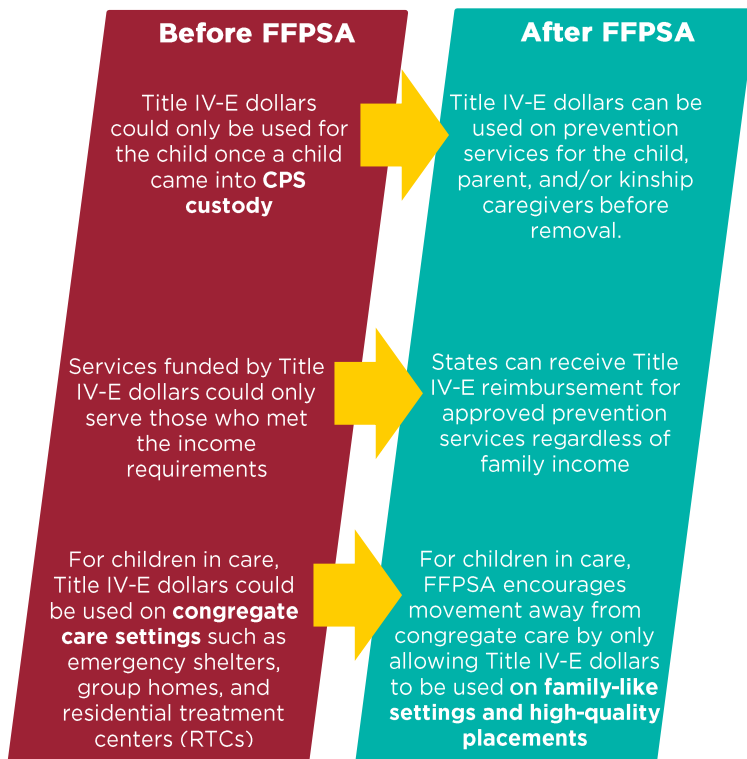


Family First Prevention Services Act: A Shift in the Right Direction for Families

What is the Family First Prevention Services Act?

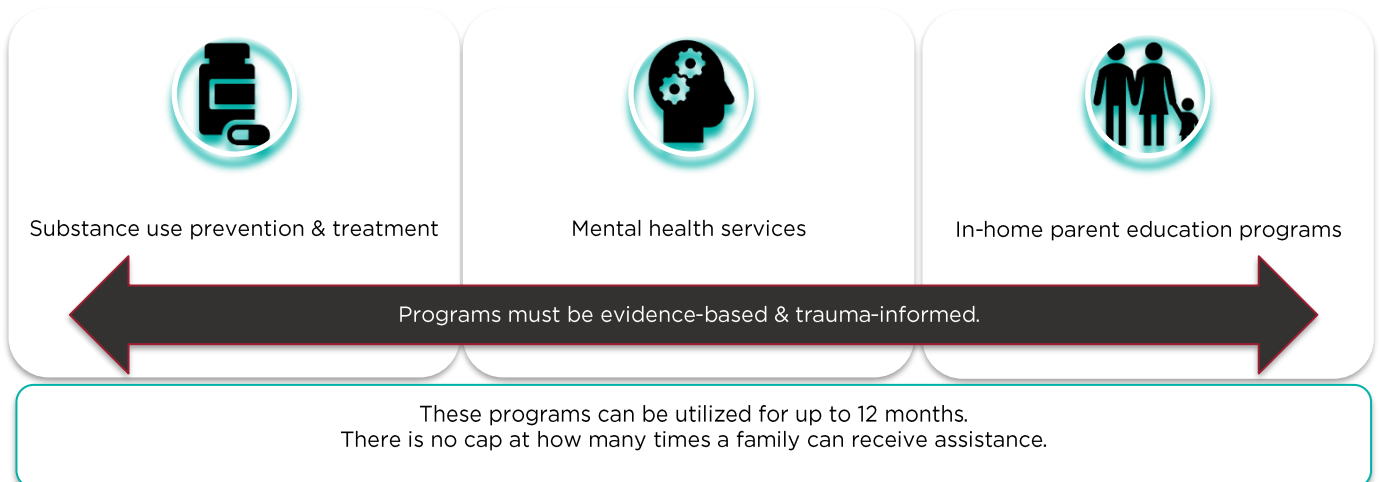


In February 2018, the passage of the [Family First Prevention Services Act](#) (FFPSA) marked a transformational shift in how states can utilize federal dollars for child protection. By making available a federal match for evidence-based substance use services, mental health care, and in-home parenting support, FFPSA addresses the known drivers of child abuse and neglect and invests federal dollars in ensuring children can remain safely at home with their families rather than entering the foster care system.

Eligibility Criteria

Federal eligibility criteria broadly includes children at imminent risk of entering foster care and their caregivers, as well as pregnant or parenting foster youth. However, states have flexibility to submit their own definition of which children and families are considered to be at imminent risk.

Flexible Funding for Prevention



Reimbursement for Prevention Services

Beginning October 1, 2021, the Texas Department of Family and Protective Services (DFPS) can access matched federal dollars towards prevention efforts for children at imminent risk of entering foster care and their caregivers, and for pregnant or parenting foster youth. Texas can be reimbursed at a rate of 50% for programs it invests in that have been approved by the federal clearinghouse. In 2026, the reimbursement rate will increase to match the Federal Medical Assistance Percentage (FMAP) rate which is currently 61.81%. Texas will need to ensure it invests no less than the amount spent in 2014 on prevention for the target population and will additionally have to ensure it has a plan to thoroughly evaluate the programs implemented. DFPS was not utilizing applicable prevention programs in 2014 for the target population defined by FFPSA, therefore, they can invest any amount and begin drawing down the federal match.

Title IV-E Prevention Services Clearinghouse Approval Ratings

The Title IV-E Prevention Services Clearinghouse was created to evaluate prevention services submitted by states and to determine if they meet the criteria for approval. There are three tiers of approval ratings: promising, supported, and well-supported. FFPSA requires that a minimum of 50% of a state's investment in prevention services be on well-supported programs to receive reimbursement.

Promising	Supported	Well-Supported
<ul style="list-style-type: none"> A program developed from an independently reviewed study that incorporates a control group and produces results that are statistically significant 	<ul style="list-style-type: none"> A program developed from an independently reviewed study that incorporates a random-controlled trial or rigorous quasi-experimental design and shows sustained positive outcomes for at least six months after treatment 	<ul style="list-style-type: none"> A program developed from at least two studies that were independently reviewed, incorporated a random-controlled trial or rigorous quasi-experimental design, and at least one of the studies shows sustained positive outcomes for at least one year after

Programs Already Approved by the Title IV-E Prevention Services Clearinghouse (as of September 2020)		
Substance Abuse	Mental Health	In-Home Parent Skill-Based
<p>Well-supported:</p> <ul style="list-style-type: none"> Brief Strategic Family Therapy Multisystemic Therapy Motivational Interviewing <p>Supported:</p> <ul style="list-style-type: none"> Multidimensional Family Therapy Families Facing the Future <p>Promising:</p> <ul style="list-style-type: none"> Methodone Maintenance Therapy 	<p>Well-supported:</p> <ul style="list-style-type: none"> Brief Strategic Family Therapy Multisystemic Therapy Functional Family Therapy Parent-Child interaction Therapy <p>Supported:</p> <ul style="list-style-type: none"> Multidimensional Family Therapy Interpersonal Psychotherapy <p>Promising:</p> <ul style="list-style-type: none"> Child-Parent Therapy Incredible Years (School Age & Toddler Basic Programs) Trauma-Focused Cognitive Behavioral Therapy Triple P – Positive Parenting Program (Group, Self-Directed, and Standard Level 4 Programs) 	<p>Well-supported:</p> <ul style="list-style-type: none"> Brief Strategic Family Therapy Healthy Families America Homebuilders – intensive Family Preservation and Reunification Services Nurse-Family Partnership Parents as Teachers <p>Supported:</p> <ul style="list-style-type: none"> Multidimensional Family Therapy SafeCare <p><i>*programs utilized in Texas are identified in bold (source: Preparing for Family First Prevention Services Act Implementation in Texas)</i></p>



Family First Transition Act

In December 2019, the Family First Transition Act (FFTA) was enacted to help states address the **financial and service approval process** challenges to implementing FFPSA. FFTA delays the original provision that 50% of a state's investment in prevention services should be on well-supported programs to receive reimbursement until 2024. In FY2020 and 2021, states have flexibility to invest in any prevention program regardless of evidence-based rating. In FY2022, that flexibility will shift and require states to invest 50% of their funds in supported and well-supported programs. Texas has been allotted \$50.3 million of FFTA funds to help implement the provisions of FFPSA and intends to utilize \$33.9 million of these funds on prevention efforts, according to the [FFPSA Strategic Plan](#) released by DFPS in September 2020.

FFPSA Implementation Timeline

Although some states began implementation of FFPSA in October 2019, Texas chose to delay implementation until 2021 due to a lack of FFPSA-qualified services and providers at the time and to allow the Texas Legislature to contribute input on the ways FFPSA would impact budget and policy decisions.



The Texas Plan

In the 86th Legislative Session, TexProtects championed [Senate Bill 355](#) which required DFPS to develop a strategic plan to leverage the opportunities in FFPSA. DFPS released their [plan](#) on September 1, 2020. Included in the plan is an overview of existing prevention services and agency activities that align with FFPSA, as well as implementation considerations and options for the prevention services and congregate care components of the bill.

Prevention Services and Eligibility

Historically, DFPS defined “children considered at imminent risk of entering foster care” with the same definition as families being served by Family-Based Safety Services (FBSS). FBSS is a stage of service within DFPS where families are referred after a traditional child abuse investigation or Alternative Response process has been attempted and it has been determined that additional services are necessary to keep their children safe. FBSS exists to provide supports to families in hopes of avoiding a removal, and the goal is for families to be successful without later CPS intervention. According to DFPS’ policy handbook, the definition for families served by FBSS includes: a) any time a child is the subject of a safety plan and, absent prevention services, the plan is removal; or b) a child is not the subject of a safety plan but is at high or very high risk of abuse or neglect, and absent preventative services, the plan is removal.

In their strategic plan, DFPS proposed an eligibility definition that is more aligned with the intent of FFPSA. In the event that they pursue reimbursement for approved prevention services, it would include:



Families with an open FBSS case,



Children who have already been in care but are now at risk of placement disruption or re-entry, and



Pregnant and parenting youth in CPS custody.

DFPS defined the circumstances that would indicate risk of entering foster care:



Child maltreatment,



Positive toxicology screens for mothers or newborns,



Substance use,



Lack of protective capacity, and



A child who has serious needs that either are not being met or are in need of more support.

Supporting Kinship Caregivers

Relatives and friends of the family, also known as fictive kin, often provide care for relative children who for various reasons are not in the home of their biological parents. Many of the benefits for these kinship caregivers either require the child in their home to already have been legally removed from their family of origin or for the kinship caregivers to know what services exist. With no kinship navigator programs approved for reimbursement, DFPS is investing in efforts to better serve informal kinship placements who do not have as many supports. They have issued four grants beginning in September 2020 to learn what the needs of kinship caregivers are, enhance the services available, and ensure better connections to inform the use of a kinship navigator program in the future.

Grantee	Counties	Amount
ACH Child and Family Services	Hill, Johnson, Palo Pinto, Parker, and Tarrant	\$111,036
Catholic Charities of Lubbock	Lubbock, Castro, Crosby, Garza, Hale, Hardeman, Haskell, Wilbarger, Bailey, Baylor, Briscoe, Childress, Cochran, Cottle, Dickens, Floyd, Foard, Hockley, Kent, King, Knox, Lamb, Lynn, Motley, Parmer, Stonewall, Swisher, Terry, Throckmorton and Yoakum	\$100,000
DePelchin Children's Center	Harris County, Fort Bend County, and Waller County	\$130,532
New Horizons Ranch and Center, Inc.	Brown, Callahan, Coleman, Jones, McCulloch, Mills, San Saba, and Taylor	\$108,430

DFPS also reports enhancing 2-1-1 by training 2-1-1 staff on the needs of kinship caregivers and how to support kinship caregivers in a culturally competent and trauma-informed manner. DFPS will additionally create a marketing campaign designed to ensure kinship caregivers are aware of the resources available to them through 2-1-1.

DFPS Proposal

The Texas Plan includes proposals as to how the agency can spend the \$50.3 million in Family First Transition Funds to begin implementation of FFPSA. Included in that list are seven options for prevention services that could be implemented with current funds and do not require additional appropriations from the 87th legislature. **These include:**

- Option 2A (Incorporate FFPSA prevention services into the Community-Based Care [CBC] model):** Community-Based Care (CBC) has been set into motion, which allows communities to more flexibly meet the needs of children who come into CPS care. In these regions, Single Source Continuum Contractors (SSCC), the contracted agencies in the catchment areas, are charged with carrying out the duties typically assigned to CPS. Currently, CBC operates in four areas, of which two have taken over case management responsibilities. In this proposal, the SSCCs would additionally build evidence-based prevention capacity, which would allow the focus to be on the community level. *COST: None until FY2024-25.*
- Option 2B (Building FBSS capacity for FFPSA prevention services):** DFPS could utilize the services they already have and partner with the Health and Human Services Commission (HHSC) to build out more programs. *COST: \$10.6 million in All Funds for FY2022-23.*
- Option 2C (Conduct a study on the integration of FFPSA prevention services into the CBC model):** This would fully inform the decision and could give time to transition FBSS to Community-Based Care. *COST: \$300,000 in All Funds for FY2022-23.*
- Option 2D (A pilot for prevention services carried out by DFPS' Prevention and Early Intervention (PEI) division):** PEI offers services to families to prevent child abuse and neglect. Their efforts focus mainly on primary prevention, which aims to reach families before the first occurrence of child maltreatment. However, some of their programs also focus on secondary prevention, which targets families who are at high risk of child maltreatment, such as FBSS families. Grants would be awarded to up to six regions. One agency would receive the grant in each region and then decide what programs to carry out in each area. This is similar to Project HOPES (Healthy Outcomes through Prevention and Early

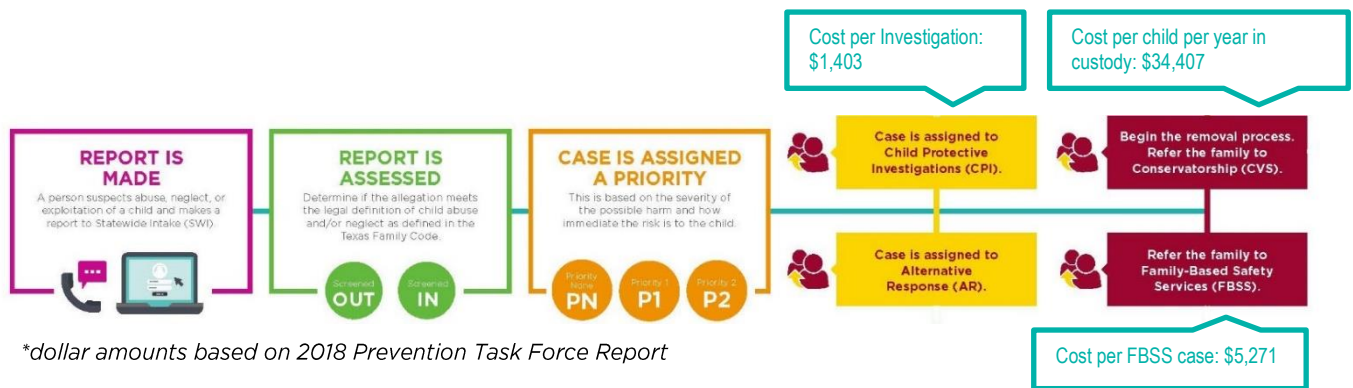
Support) and the expansion could serve an estimated 2,425 clients per biennium. *COST: \$8.6 million in All Funds for FY2022-23.*

- **Option 2E (Expand HIP [Helping through Intervention and Prevention] for all pregnant and parenting youth):** HIP is an effective program through PEI that serves current and former foster youth who are pregnant or parenting a child under the age of 3 by providing in-home parent education services. *COST: DFPS will be using base funds for this. The appropriation for FY 2020-21 is \$2.4 million in General Revenue.*
- **Option 2F (Expand in-home parenting prevention programs through PEI):** PEI could expand prevention services to families with children ages 0-6. *This would enable an additional 620 families to be served. COST: \$5.2 million in All Funds for FY2022-23.*
- **Option 2G (Train FBSS workers in rural areas to carry out an evidence-based prevention services model):** This would bring in-home services to rural families that otherwise would not have access in their area. *COST: \$7.7 million in All Funds in FY2022-23.*

Opportunities for Texas

1. Re-envision the Current System by Strengthening Prevention

Prior to FFPSA, states focused dollars on measures that are expensive and reactive rather than proactive, protective, and cost efficient. The further into the system a case flows, the more expensive it is. In 2019, there were 18,615 children who entered foster care. Preventing 3% of removals would save the state \$20 million. By investing earlier, Texas can prevent removals, save money, and keep children safe.



TEXPROTECTS' TAKEAWAY ON THE TEXAS PLAN

The prevention provisions of FFPSA are ultimately optional, so it is promising that DFPS is intending to use FFTA funds on prevention efforts. DFPS laid out a wide range of options to advance their prevention efforts, but they will eventually need to figure out which of these options works for Texas and bring it to scale for the entire state. To ensure the state can reach that goal and better serve children and families, effectiveness should be the priority when considering and narrowing down which of the options to pursue.

Three of their recommendations involve PEI (Options 2D, 2E, and 2F), which already has an established and successful infrastructure. [PEI's programs](#) are evidence-based and several—especially in-home parenting programs—have shown that they can keep children safe and reduce child maltreatment. Some of the programs also have experience serving FBSS families, who fit the eligibility definition. Additionally, several of the programs already implemented by PEI have already been approved by the Clearinghouse, including Healthy Families America, Nurse-Family Partnership, and Parents as Teachers.

The other options presented by DFPS would require a great length of time before they could be implemented (i.e. carrying out prevention services through CBC) or would be relying on FBSS caseworkers to deliver programming that is outside their area of expertise and/or credentialing requirements. Both would require significant deviation for systems and staff and potential conflicts of interest or complexities that do not make it feasible. *(Continued on next page.)*

TEXPROTECTS' TAKEAWAY ON THE TEXAS PLAN (CON'T)

DFPS would also benefit if they can better align across systems to increase access to substance use and behavioral health programs. These programs are critical for many high-risk families; however, there are significant gaps in access around the state that could be mitigated with increased FFPSA-available funding.

2. Ensure a Broader Eligibility Definition That Will Be Most Effective at Preventing Entries into Foster Care

Texas has flexibility in defining who is at imminent risk of entering foster care and to ensure they are not limiting access to services. Of the states that currently have approved plans, all six of them use risk assessments to determine who is eligible for prevention services. In addition, five of the states include families who are receiving in-home services, and three states include children who have siblings in care.

TEXPROTECTS' TAKEAWAY ON THE TEXAS PLAN

By including more than just families currently served by FBSS, Texas has aligned their proposed eligibility definition with the goals of FFPSA. However, there are many families at high risk for removal who are not captured in this definition. While the families served by FBSS are extremely vulnerable, most removals and foster care placements do not occur from the FBSS stage of service. Families are three times more likely to have a child removed and placed in foster care directly from an investigation (78.5%) as opposed to a family preservation stage of service (21.5%). Given that the recurrence rate for families who participate in FBSS is 19% within one year of completing services and 42% within five years, many families that work FBSS services have a subsequent investigation that can then lead to a removal and entry into foster care. Texas, which currently does not have an approved plan, could include families that have received FBSS services in the recent past (e.g. within 2 years) in their definition of eligible participants in addition to those currently working services. PEI currently spends limited prevention dollars on families who had a prior CPS history or may be working services in addition to their core focus serving families with primary prevention strategies prior to any CPS involvement. Such a definition would allow PEI to use FFPSA funds to serve that population, free up other dollars for primary prevention, and provide the CPS system an alternative referral strategy for families who are reported for subsequent abuse that may not warrant a formal investigation or removal at that time. Texas can also look to the other states with approved plans for populations to consider and would benefit from looking more upstream to some of the higher-risk families being served by PEI.

18,615

Total CPS Removals
Ages 0-17

14,598

Total removals from
Investigations Stage
of Service

78.5% of removals were from the
Investigations Stage of Service
with a rate of 1.97/1,000 children.

4,017

Total Removals From
Family Preservation
Stage of Service

21.5% of removals were from the
Family Preservation Stage of
Service with a rate of .54/1,000
children.

58%

Percentage of Total
Removals are For
Children 0-5

A total of 10,729 removals were
of children from ages 0-5.

8,398

Removals of
Children Ages 0-5
from Investigations

78.3% of Investigations removals
were children ages 0-5 with a
rate of 1.13/1,000 children.

2,331

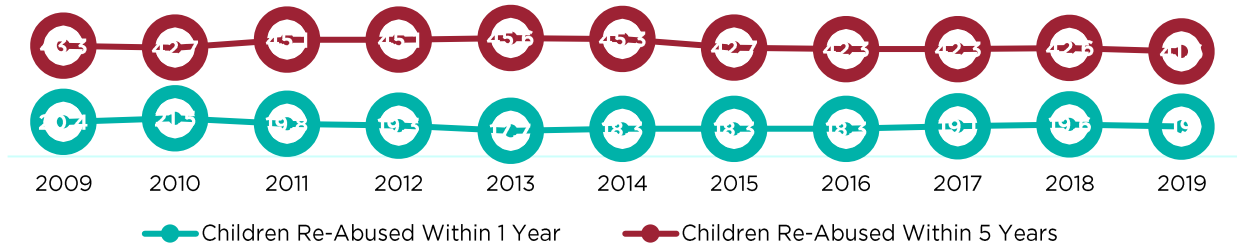
Removals of
Children Ages 0-5
from Family
Preservation

21.7% of Family Preservation
removals were of children ages 0-5
with a rate of 0.31/1,000 children.

3. Prioritize and Enhance Family Preservation Services

The families who are served by FBSS are a target population for FFPSA in order to draw down federal funding for prevention services. DFPS does not report on the services these families receive, but according to DFPS, many of the services provided to parents with an open FBSS case are not evidence-based and do not meet FFPSA standards.

Family Preservation Outcomes: Children Confirmed as Victims after Services



TEXPROTECTS' TAKEAWAY ON THE TEXAS PLAN

While the Department has logically and rightfully included families participating in FBSS in their eligibility definition, it benefits families to ensure the services the agency provides in this stage of service are effective. The recurrence data for families participating in FBSS reveals that something is not working. Ensuring the services they receive are evidence-based and trauma-informed could certainly reduce the recurrence and removal rate in the population of families served by FBSS.

4. Equip a Trauma-Informed, Prevention-Focused Workforce

Implementing the components of FFPSA requires workers to know how to assess who is eligible for the trauma-informed prevention services, develop a prevention plan that takes into account the trauma experienced by the family and how to address it, and evaluate progress in these programs. When working with families who have experienced trauma and children at risk of entering foster care, it is essential that workers understand the family's circumstances and are equipped to serve them through a trauma-informed lens. This calls for trauma-informed care training.

FFPSA requires states to submit a plan for how they will "provide training and support for caseworkers," and the state can receive a 50% match of funding to meet these requirements. Five of the six states specifically promote trauma-informed training for staff. Both D.C. and Utah use assessment tools to determine eligibility for prevention services, and they emphasize the importance of workers utilizing trauma-informed practices when implementing these assessments.



TEXPROTECTS' TAKEAWAY ON THE TEXAS PLAN

Texas has the chance to capitalize on this new funding to deliver high-quality, trauma-informed care training for workers, yet it was missing from their plan. DFPS has been in collaboration with the Statewide Collaborative on Trauma-Informed Care through the Children's Commission. They should continue towards the vision of this workgroup to ensure they become a trauma-informed system. Texas can utilize FFPSA dollars to invest in and provide trauma-informed care training for Investigations, Alternative Response, and FBSS staff since they will be the ones assessing eligibility criteria, coming up with the prevention plans, and evaluating progress. Being trauma-informed will help staff to assess needs and make appropriate referrals and recommendations.

5. Support Kinship Caregivers with Prevention Services

FFPSA promotes placement with and support for kinship caregivers all along the child protection continuum. Evidence-based prevention services may be provided to kinship caregivers who are caring for their relative children who are identified as at imminent risk of entering foster care.

Connect Kinship Caregivers to Needed Services

FFPSA also encourages investment in kinship navigator programs, which are intended to be a support and resource for kinship caregivers. Oftentimes, kinship caregivers may not know what assistance or services are available to them, and kinship navigator programs operate as a connector. Kinship navigator programs must meet the same evidence-based criteria as prevention services. These programs are also eligible for a 50% federal match if approved through the Clearinghouse.

Make Licensing More Accessible to Kinship Caregivers

More than 40% of children in state custody are placed in a kinship home across most regions, according to the [July 2019 Foster Care Needs Assessment](#). For kinship caregivers caring for relative children who have been legally removed, FFPSA aims to make it more accessible to become licensed foster parents. FFPSA seeks to do this by implementing national model licensing standards for all licensed foster placements that will serve to provide minimum standards for all states and allow states to specifically waive non-safety requirements that would otherwise impede the ability of kinship caregivers to become licensed. Licensing kinship caregivers provides them with more monetary assistance and support through a Child Placing Agency who licenses placements.

What is a Kinship Navigator program?

According to the Social Security Act, a Kinship Navigator Program:

- Connects kinship caregivers to services to meet their own needs and the needs of the relative children in their home
- Promotes collaborative partnerships between public and private agencies to service kinship caregivers

TEXPROTECTS' TAKEAWAY ON THE TEXAS PLAN

While there are no kinship navigator programs currently approved by the Clearinghouse, Texas is still working towards developing a kinship navigator program suited to meet the needs of kinship caregivers across the state. They are utilizing federal grants, which will hopefully move Texas closer toward the future submission of a program for approval. DFPS also received funding to conduct a [kinship navigator study](#), which was completed by the University of Houston. DFPS has since pursued implementing one of the recommendations which was to make enhancements to 2-1-1 and is working with the Health and Human Services Commission (HHSC) to implement next steps. Texas could also look to the other recommendations in this study to help shape a kinship navigator program.

Next Steps

It is essential that Texas maximizes the opportunities to invest in prevention, specifically Options 2D, 2E, and 2F proposed by DFPS in their strategic plan. It would also benefit families to ensure the eligibility definition captures those most at risk of entering foster care, including families who previously received FBSS services, as most entries are from investigations, not FBSS. The families participating in FBSS would additionally be better served from improvement in that stage of service altogether. The workers providing support to families in investigations, Alternative Response, and FBSS also need to be able to identify who would be eligible for prevention services and need to approach serving families in a trauma-informed manner. Kinship caregivers also would benefit from prevention services, being connected to services through a kinship navigator program, and making licensing more accessible for those whose relative children are in the state's custody.

Carrying out the opportunities provided by FFPSA requires a drastic perspective shift. The intent of FFPSA is to transform the current system, not keep it the same. FFPSA aims to invest early in effective measures that will keep families together and out of the CPS system. Every dollar Texas invests should be spent with this in mind.

With their current plan, DFPS has taken strides in the right direction for the children and families of Texas. However, it is essential the Texas Legislature supports these efforts on an ongoing basis and, in keeping with the goals of FFPSA, ensures the focus remains on child abuse and neglect prevention and family preservation.

For More Information

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