

Background

On February 9, 2018, President Donald Trump signed the [Bipartisan Budget Act of 2018 \(H.R. 1892\)](#) which included the Family First Prevention Services Act (FFPSA). Several provisions within the act will dramatically change Florida's child welfare system. FFPSA seeks to curtail the use of group care for children and instead places a new emphasis on family foster homes. With limited exceptions, the federal government will not reimburse states for children placed in group care settings for more than two weeks. Approved settings include group care specializing in providing services to youth who are: pregnant or parenting, victims of or at risk of becoming victims of sex trafficking, age 18 or older in extended foster care, and/or have a serious emotional or behavior disorder requiring placement in a qualified residential treatment program (QRTP). A QRTP must use a trauma-informed treatment model and include services provided by a registered or licensed nursing staff and other licensed clinical staff. The youth must be formally assessed within 30 days of placement to determine if his or her needs can be met by family members, in a family foster home or another approved setting.

Overview

In an effort to plan and implement statewide changes to Florida's group home model, the Florida Department of Children and Families (DCF), Office of Child Welfare has worked in partnership with Department regional staff, Community-Based Care Lead Agencies, and residential care providers to engage stakeholders in on-going discussions regarding the FFPSA requirements and development of a comprehensive group home model to provide specialized placement and care to children with specified needs. During the month of April and May 2019, six group care forums were held (Suncoast 4/29; Southeast 4/30; Southern 5/1; Northeast 5/6; Central 5/7; Northwest 5/13). The forums were well attended, totaling more than 300 participants, representing Department licensing staff and leadership, Community-Based Care Lead Agency contract staff and leadership, residential care directors and supervisors. The topics covered included a refresher training on the Title IV-E foster care eligibility requirements with a focus on foster care maintenance, detailed overview of the group care settings outlined in FFPSA, highlight of trends noted from the FFPSA group care survey completed by the residential care providers (see companion document), and an open discussion on group home program recommendations to successfully implement FFPSA.

The following include the common group home program recommendations identified during the six forums:

FFPSA GROUP HOME SETTING	RECOMMENDATIONS
Pregnant and Parenting Youth	Develop screening tool to better identify strengths/needs of parenting youth
	Develop service plan to address individual needs of the parenting youth
	Allow siblings to be placed with parenting youth
Safe House	Develop step down/lower level intensity programming
	Reduce the total number of core/pre-service training hours and/or allow specialty training hours to substitute for core training
At-Risk	Clear program requirements that is lower than a safe house (i.e. security and staff to youth ratio)
	Determine a group home name that is not "at-risk"
	Develop a new screening tool that is not the current human trafficking (HT) tool

	<p>Develop a definition and target population that includes the following youth characteristics:</p> <ul style="list-style-type: none"> • No adult in child’s life/poor relationships • Runaway • Sexual abuse (inappropriate relationships, molestation) • Drug abuse • DJJ/LE involvement • Truancy • Mental Health/Behavioral conduct (Baker acts) • Exposure to HT lifestyle • Instability (multiple placements, transient child or family)
<p>Qualified Residential Treatment Program (QRTP)</p>	<p>Clear policies regarding the aftercare and discharge process including exceptions</p>
	<p>Ensure there is statewide capacity of qualified evaluators</p>
	<p>Engage SAMH and MEs to partner with for services</p>
	<p>Engage AHCA to assist with the Medicaid process (becoming a provider, billing, etc.)</p>
	<p>Provide listing of trauma-informed treatment models</p>
	<p>Develop policy to require QRTP 30-day assessment to be completed sooner, within 14 days of placement</p>
	<p>Improve child welfare collaboration to ensure residential care providers are part of the transition, treatment, and case planning</p>
	<p>Allow siblings to be placed with QRTP youth</p>

The following include the common FFPSA barriers identified during the six forums:

- Insufficient funding to provide social services (non-allowable Title IV-E foster care maintenance payment expenses)
- Completing the requirements/process to become a Medicaid provider
- Communities do not have capacity to provide the necessary services
- Inadequate number of available and trained foster family homes for the teen population
 - As of 5/28, FSN data reporting shows a total of 284 child-caring agencies with an active license issued by the Department
 - Of the 284 child-caring agencies, a total of 18 (11 maternity group homes and 7 safe houses) meet FFPSA requirements for Title IV-E reimbursement

Next Steps:

- In June, a joint meeting will be held with Department licensing staff and the FCC Residential Providers Subcommittee to further review the FFPSA requirements for residential group care providers. Information gathered from this meeting will help inform the group home model development.
- OCW will work within the appropriate timeframes to submit to Department leadership recommendations to support the implementation of FFPSA, including proposals for consideration in the 2020 legislative session.