

# Families First Prevention Services Act

## Impact on the Continuum of Care in NC

### What is FFPSA?

- New federal legislation that was part of the Bipartisan Budget ACT that passed and signed into law on February 9, 2018.
- Opens up federal IV-E funding to support new prevention services to reduce the number of children coming into foster care.
- Prevention services such as:
  - Substance abuse treatment
  - Mental health treatment
  - Parent education & training
  - Placement of children with a parent in residential substance abuse programs
- Limits federal funding for Children's Homes (congregate care) to 2 weeks with limited exceptions:
  - Pregnant or parenting teens
  - Independent Living for youth over 18
  - Children that have been, or are at risk of, Human Trafficking
- Any federal dollars for congregate care after 2 weeks requires the child to meet behavioral health eligibility requirements to be placed in a new residential mental health treatment facility called Qualified Residential Treatment Programs (QRTPs).

### How was FFPSA funded?

- No new money was allocated (Budget neutral).
- The reduction of money used on congregate care, due to the 2 week limit, is redistributed to cover the cost of the new prevention services.
- The cost model is based on the premise that any non-mental health congregate care is inappropriate and that all children should be placed in foster family settings unless they need mental health treatment.

### Purpose of Congregate Care in NC:

- Children placed in congregate care need an alternative to family foster care and generally fall into three categories:
  1. Large Sibling Groups – Children's Homes keep siblings together (this IS their family)
  2. Older Youth (starting around 15) – Children's Homes provide Transitional Living Services
  3. Multiple Failed Foster Placements – Children who have behaviors that make it hard to succeed in a volunteer foster family but can stabilize (and thrive) in congregate care.

**Congregate Care in North Carolina is Very Limited:**

- Foster home, adoptive home or kinship placement: 71%
- Treatment (therapeutic foster care, PRTF, therapeutic group home): 12%
- Other: 9%
- Children's Homes (congregate care): 7%
- Correctional institution or runaway: 1%

**Current State of Foster Care in NC:**

- There were 16,796 children in the NC foster care system in 2018.
- 27% increase (approximately 3,000) new children entering the system in the last 8 years.
- The number of children entering foster care continues to rise (45% related to substance use disorder) while the number of available foster homes are decreasing.

**Impact on Continuum of Care:**

- Children's Homes, an essential part of the continuum of placement options for children, may cease to exist with only 2 weeks of federal funding.
- Without Children's Homes, sibling groups will be separated even though it is contrary to their best interest and to federal law.
- Children with normal and expected responses to trauma will be in a treatment setting instead of a homelike or professional parenting setting.
- Critical services such as Independent Living, Educational Supports, Youth Employment, College Access and Trauma-informed Professional Parenting could be lost.

**Impact on Private Funding:**

- With the critical loss in services comes a critical loss in private funding.
- \$30 million dollars are raised annually by the agencies represented.
- These funds supplement the rates paid for basic shelter to provide high-quality and nurturing homes, additional services and support for the children, training in independent living skills for older youth, and college support for those continuing their education.

Celeste Dominguez, MA – Children's Hope Alliance  
[cdominguez@childrenshopealliance.org](mailto:cdominguez@childrenshopealliance.org) / (704) 832-2200

Brett A. Loftis, J.D. – Crossnore School & Children's Home  
[bloftis@crossnoreschool.org](mailto:bloftis@crossnoreschool.org) / (828) 733-4305

Gary Lee – Freewill Baptist Homes  
[glee@fwbch.org](mailto:glee@fwbch.org) / (252) 235-2161

### **The Experience of Three Sisters**

CHA had a sibling set of 3 sisters that came to one of our DSS homes in late summer. The girls had disrupted in a foster placement and there were no foster homes anywhere in NC that would take them together. If they stayed in FC, they would definitely be separated. The three girls were ages 12, 14 and 16. Because our DSS home embraces sibling sets, the girls were able to stay together which was very important to them. They stayed in their home school which took considerable effort on the part of DSS and our staff to get up very early in the morning to drive them to their home school.

Also because of the staff effort the girls could maintain appointments with the doctor near their home. One of the girls that was in therapy was able to continue the therapy she started with the therapist she would have once she was discharged.

The girls stayed with us just over 6 months. CHA provided gas cards so that the girls' mother could come visit and work with staff on parenting skills, communication skills and preparing for the girls to go home. In addition, CHA also provided mom gas cards so she could get to therapy and participate with her daughter in therapy which was being provided near the family home.

The girls were discharged home to mom at the end of the school term. Immediately after these three girls successfully went home, we received a new sibling set of 3 girls ages 7-17. Their family situation and pain is nearly identical to the first sibling set. We are working with these girls and their mom now to get them back home and anticipate that the placement will take a bit longer as the girls' mother is struggling with an opiate addiction. As part of this placement, the 17 year old will be going to Prom with the other teen girls in the home. The teaching parents in the home will be chaperones. Prom tickets, the dress, the meal, the flowers, the hair and nails are all being paid for by private dollars. Pictures with mom will be part of this young girl's experience. The state rate pays for the basics of a home to be provided. The agency pays for a warm, nurturing, healing family like environment that allows siblings to stay together, supports mom's involvement and needs, and provides life experiences that none of them thought were possible

### **From a PRTF to College**

CHA has a youth in our Independent Living Program that started in one of our acute (PRTF) treatment programs after a long history of sexual abuse, trafficking, and behavioral problems that led to multiple failed placements. This young lady was involved with DSS for a very long time and did not have a healthy home to return to, nor did she want what she called a "new family".

To get her on track, she was provided a safe treatment placement where she learned to control her emotions and behaviors. She also learned to communicate and ask for help. She participated in therapy in two very structured treatment placements over 1.5 years and stopped raging at the world and stopped focusing on all the terrible traumas she had experienced. She saw hope for a different future and she wanted a new life living on her own and supporting herself. A life where she didn't have to consider going back to trafficking to have money to live and eat.

With all of her progress, she no longer needs a treatment environment. This beautiful young woman, is now at our Independent Living Program and has been there for about 8 months. She will be graduating high school this coming June and she is going to Appalachian State to study special education. She wants to "give back". State dollars will help her with some of the basics of college, but private dollars will pay for the extras that will make her dorm room safe and nurturing, transportation, a place to stay on college breaks, fees for participating in special activities, clothes for work, and many other things that most of us would provide to our own children as they venture into adulthood.

### **A Testimonial**

From a 17-year-old girl that successfully discharged from our Independent Living program after eight months receiving care and support; on her last day in care she said:

"I'm ready to leave CHA. Without the teaching and help of the group home and apartment staff, I would still be using drugs, still be trafficked and would probably be dead. Thank you for my new life".