**Family Preservation Services**

**February 5, 2021 Provider Call**

**Agenda and Questions**

1. Heather Kestian, Deputy Director of Strategic Solutions and Agency Transformation to present on the Indiana IV-E Prevention Plan

* Presentation will be included in the notes and on the INFPS and FFPSA pages on the website.
* FFPSA live by September 2021
  + Staggered start with some features
  + Preservation, prevention, placement, QRPT facilities
* Emphasis on prevention
  + Family Preservation services
  + California Evidence Based Clearinghouse
  + We want services to meet the child’s needs
    - We don’t want the money driving the services
    - Claiming will happen on the back end – DCS will match funds to services provided
    - Not a lot of services on IV-E clearinghouse right now
      * List of Indiana Evidence Based Programs in presentation
      * Working with what’s there and what we can support in Indiana
      * Not every well-supported program is on this plan
        + Especially if there are no providers in Indiana to do it
        + Or if there are not enough families needing that program to support it
        + Model fidelity is important and difficult in some situations
* <https://www.in.gov/dcs/familyfirstact.htm>
* Link to IV-E prevention services clearinghouse: <https://preventionservices.abtsites.com/>
* Link to evaluation requirements:

<https://preventionservices.abtsites.com/review-process>

* Feel free to download the Handbook of Standard and Procedures to see what we are working with on the very strict requirements of an evaluation.
* <https://preventionservices.abtsites.com/about/programs-planned-review>
* [Heather.kestian@dcs.in.gov](mailto:Heather.kestian@dcs.in.gov) – Please contact with more questions, comments, or concerns.

Questions

* Q: Do we have to write a RFP for this?

A: No, there is no RFP related to this.

* Q: I have heard it can take a year for approval from California Clearinghouse. Has DCS heard that?

A: DCS is attempting to get INFPS approved for inclusion in the Title IV-E Clearinghouse. Providers delivering INFPS are free to use any model on the California Clearinghouse that is at least a promising practice.

* Q: Healthy Families uses a different documentation system. Will they continue that system?

A: Bright System was built on the same platform as the new upcoming DCS system is being developed on

We will use the information in the system to run claims and pull IV-E Funds

* IV-E funds used to really only be available for placing kids in foster care or other out-of-home placement; with FFPSA, Title IV-E funds can now be used to PREVENT placement as long as you use evidence based models and services are delivered to a family in which there is a “foster care candidate”
* Q: Why is Healthy Family preferable than all other evidence based practice?

A: When FFPSA passed, it had a requirement that at least 50% of EBPs used by states needed to be “well supported” (this requirement is being delayed, but it is coming)

Healthy Families has a lot of researched evidence and is in every county – this is a model that has a lot of support

We want to support Healthy Families as much as possible because they have great outcomes and in Indiana, along with Nurse Family Partnership. Healthy Families is listed as “well supported” on the Title IV-E Clearinghouse.

* Q: Is this mandatory that all agencies providing FP apply for title IV-E funds?

A: DCS is the claiming agency for IV-E.

We are working with you to ensure that services provided by agencies qualify for funding.

This is why we need your help to ensure the evaluations are done correctly.

* Q: Do you have thoughts on what services to Juvenile Justice Youth you'll be submitting for reimbursement? Obviously, it'll be the EBPs that are identified in the plan but I thought these youth weren't being referred to Family Preservation.

A: We are developing an evaluation specifically for probation-connected youth.

Will be starting a pilot with some regions in the summer

Not related to the current evaluation – keeping the populations separate in evaluation

Working with Don’s team to identify referrals for programs with approved EBPs

* Q: Thoughts on the ways that DCS can help bring trainings on the EBP’s included in the prevention plan to IN so providers can expand staff capacity to provide those programs when they will most benefit families they’re working with?

A: We have had discussions regarding which models would make the most sense to do this with. DCS does not just want to ‘pick’ one and we need investment from our providers.

If there is a program out there that will really help families and providers, DCS can help

In the meantime – providers should invest in your own trainings to meet the needs of families you serve and that fit well with your employees

Which models make the most sense for us to think about doing a group investment into to?

1. Solution-Focused Casework – Does not meet criteria on the IV-E prevention services clearinghouse. This does not mean that the rating can’t change but does not currently meet requirements. You can still use this model in Family Preservation as it is at least a “promising” practice on the California Clearinghouse.

* Q: Will Motivational Interviewing be rated for cases that are not substance abuse related?

A: Under Family Preservation you can use MI since it is on the California Clearinghouse. For Title IV-E this model only been approved for substance use services.

* Q: How many HF sites are actually offering Family Pres services as well?

A: Not relevant to Family Preservation and FFPSA

The goal is not to change what we are doing with Healthy Families, but, rather to shift the funding to Title IV-E and away from TANF.

* Q: Is this something that Homebuilders intensive services may eventually be considered for since it is considered Well-Supported by the clearinghouse?

A: Homebuilders can be delivered through Family Preservation if it is the best model for a family and your agency is qualified to provide it.

* Q: Can someone give examples of what these funds cover? Laptop for a kiddo to do e-learning, clothing, rent?

A: These are not for these costs, they are funds for services.

* Q: Specific to TFCBT, does DCS allow staff to practice after they have completed the training, but during the 12 month supervision requirement? 12 months of supervision is required before taking the certification exam. Can they practice during those 12 months?

A: Family Preservation allows for any model that is at least a promising practice – work with the model owner to ensure that you are providing that model to fidelity

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* Q: Healthy Families is on a different contract cycle. How will this work?

A: The only thing that might change is the funding source, it will not change the contract cycle.

* Q: Will families enrolled in Healthy Families still need to meet household income requirements with the Family First funding like we currently do with TANF?

A: There is no income requirement for families to receive services through FFPSA. This doesn’t mean we are going to change our target population, there needs to be a foster care candidate in the home. The income requirements are tied to TANF, there is no income requirement to IV-E eligibility after we implement FFPSA.

* Q: If a Therapist has been using CBT, not necessarily one of the more specialized forms of CBT included in the CEBC, with a family, should we still complete a Survey Monkey and just select the last option, “Other”? Or only complete the Survey Monkey when using a specific type of CBT?

A: If you put CBT as model you are using – it will be counted as not compliant

Only use VERY SPECIFIC models on California Clearinghouse exactly as they are written

* Q: Am I understanding this correctly, we will continue to provide Family Preservation based off the California Clearinghouse, but DCS may prefer agencies using the IV-E list to help meet your needs?

A: This is a good conversation/discussion to have. The requirements to get on the IV-E clearinghouse are different than the California Clearinghouse. Not certain that the answer would be to focus on services in the IV-E clearing house. Both are being updated regularly.

* Q: If children are currently out of home CHINS on a trial home visit they are not eligible for FP correct?

A: Correct

Right now, IA/In-Home or cases that have not had a long term removal only

1. “Office Hours” with the Evaluation Team!

**Dates of INFPS Office Hours**

Feb. 17th 2pm Eastern: Brian Goodwin

March 3rd 2pm Eastern: Aubrey Kearney

March 17th 2pm Eastern: Elisabeth Wilson

March 31st 2pm Eastern: Brian Goodwin

April 14th 2pm Eastern: Aubrey Kearney

April 28th 2pm Eastern: Elisabeth Wilson

May 12th 2pm Eastern: Brian Goodwin

May 26th 2pm Eastern: Aubrey Kearney

June 9th 2pm Eastern: Elisabeth Wilson

* Evaluation: You will not get confirmation that you completed the evaluation once it is processed. This could take several days.
* We will send out the link to TEAMS
* <https://www.surveymonkey.com/r/INFPS>: Link to survey monkey
* The survey is for referrals that began on or after 1/1/2021.

1. Roundtable recap and future plans
   * Potential future roundtable to include a family
   * Be thinking about a good example of a family if you have one

* Similar bi-weekly call for FCMs in development

1. Referral updates (as of 2/4/21):

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| --- | --- |
| **Region** | **Active Family Pres Cases** |
| 1 | 183 |
| 2 | 78 |
| 3 | 105 |
| 4 | 91 |
| 5 | 56 |
| 6 | 92 |
| 7 | 112 |
| 8 | 115 |
| 9 | 72 |
| 10 | 205 |
| 11 | 135 |
| 12 | 79 |
| 13 | 64 |
| 14 | 47 |
| 15 | 84 |
| 16 | 133 |
| 17 | 90 |
| 18 | 83 |
| **Grand Total** | **1824** |

1. Questions submitted:
2. Is there any way to stop back-dating on cancelled referrals? We have been told to cease services on a specific date from a FCM as DCS requested case closure from the court so we stop and then once we receive the cancelled referral it was back-dated to when we were still providing services. We did provide services to the family in their home during the time that has now been backed out of the referral. How should this be handled?

A: We are stressing with DCS staff that the services should remain in place until either the child(ren) is removed or the case closes successfully. Services really should not end for any other reason, but, please contact your Regional Services Coordinator if you receive a request to end services outside of one of these two reasons.

1. During a local regional meeting with directors, we were informed that we cannot stop services with families until the court approves to close the case. Is this correct? When our staff have communication with the FCM and they state we can close then how would we know different? Can you please clarify what should occur?

A: See above response. If there is a disagreement about this, please reach out to your regional services coordinator.

1. Is there any way of having more communication on denials, such as “does not meet service standard”? All of our weekly safety checks and other communication was on the report and everything was submitted into KidTraks on time.

A: We can ask about this, but, in the meantime, please refer case-specific denial questions to DCSPaymentResearchUnit@dcs.in.gov

1. Anything else?
2. Next meeting 2/26/2021 @ 1:00 EST (one week later than usual due to David being off on 2/19)

THANK YOU!