



Family First Prevention Services Act: Candidacy by Jurisdiction

Jurisdictional Packs

Included in these state packs is information related candidacy as submitted in the Prevention Plan:

- Candidacy Criteria
- Candidacy Considerations

Prevention Plans Submitted to the Children’s Bureau as of January 2020

<i>Alaska - Pending Approval</i>	2
<i>Arkansas - Pending Approval</i>	3
<i>Kansas - Pending Approval</i>	6
<i>Kentucky - Pending Approval</i>	8
<i>Maryland - Pending Approval</i>	9
<i>Nebraska - Pending Approval</i>	11
<i>Utah - Approved</i>	12
<i>Virginia – Pending Approval</i>	13
<i>Washington, D.C. - Approved</i>	15
<i>Washington State - Pending Approval</i>	17
<i>West Virginia – Pending Approval</i>	19



Alaska

Status: Submitted to the Children’s Bureau – Pending Approval

Candidacy Criteria

Children identified as candidates for foster care will meet one or more of the following criteria:

- A child for whom the agency has received a protective services report and upon completion of the safety assessment, it is determined that there are existing risk and safety factors that can be mitigated by the provision of in-home services.
- A child who is at imminent risk of entry into the foster care system, but is able to safely remain at home or in a kinship placement.
- Pregnant and parenting youth in foster care.
- Children exiting foster care to a trial home visit with a caregiver.

Priority Considerations will be made for cases that meet one of the above criteria and:

- Substance exposed newborns and parents.
- Parents of children under the age of five who are willing and able to accept prevention services.

Candidacy Considerations

Following the department’s receipt of a protective services report (PSR), OCS conducts an initial assessment with the family using the Structured Decision Making tool and Future Risk of Abuse/Neglect (FRAN). If the child is known to be a Alaska Native, their Tribe and/or prevention worker will be invited to participate. Families with medium FRAN scores will be determined as eligible for prevention services. An in-home safety plan will be developed and continually monitored for its effectiveness. The child may be reassessed at the end of each 12-month prevention episode period.



Arkansas

Status: Submitted to the Children’s Bureau for Approval – Pending Approval

Candidacy Criteria

1. Garrett’s Law investigation that did not result in removal.

*All children in the home will be considered a candidate.

- Important criteria: Vulnerable age of the child, inconsistency with which DCFS handles these cases, and frequency with which they come into care or are subsequently abused.

2. A Protection Plan was put in place.

- Important criteria: Children who have protection plans in place are at imminent risk for coming into care.

3. A TDM was held that did not result in removal.

- A team decision meeting was held that did not result in removal or children were returned to their families/home.

4. High or intensive risk assessment.

- Child is at high risk upon administration of a risk assessment. If a child goes from being low-risk to high-risk, they will be designated as a candidate.

5. Risk of adoption or guardianship disruption.

- Children whose adoptions or guardianships fail (and who therefore fall (back) into foster care) are included as candidates.

6. SS case opened to prevent removal.

- Children are at high risk of coming into care due to judicial oversight
- Children are at risk of being entered into foster care if their caretakers are unable to receive services/assistance. Such support would be preventative.
- Provision of resources to families (DR/NFA) who need more intensive and longer involvement. Also preventative; can prevent removals and maltreatment.



7. A Less Than Custody petition has been filed.

- Restriction of the rights of one or more parents, but allowing the child to stay in the home of a relative or one of the parents.

8. A 30-day petition has been filed.

- Child is at substantial risk of harm or removal without intervention. Court/judicial oversight is necessary.

9. Child is living with a relative caregiver (Does not include provisional or relative foster care)

- Encompassing children who are not living with either of their parents, but rather a relative or fictive kin/caregiver.

10. A CACD investigation with a true finding and an in-home or unknown offender.

- Encompasses severe abuse and neglect cases such as sexual abuse and babies with broken bones.

11. Reunification has occurred, and the case remains open.

- Ensures that strategies are put in place to help families and children immediately prior to, during, and post-reunification. Addressing this could allow some children to return home earlier than they otherwise would.

12. A sibling is in foster care.

- A sibling being in foster care heightens the risk of other kids coming into care.

13. The parent or caregiver was in foster care as a child.

- Important to consider that parents or caregivers being in foster care as children is correlated with their children coming into care. Keeping this in mind helps us keep in mind emerging adults who have a child who might have left care at 18 or 21.

14. Failure to Thrive (FTT)

- Infants and young children (three or younger) who fail to grow physically/mature based on growth standards for age and gender. FTT can trigger long-term physical and cognitive developmental issues and therefore puts the kids who suffer from it at higher risk.

15. Medical Neglect if the child is 5 or under



- Neglect could cause serious and long-term harm to the child, so those who have exposed medical neglect are candidates.

16. Inadequate Supervision with a child in the home who is 5 or under

- Inadequate supervision could result in the child being left in a dangerous situation that puts them at risk of harm. Such neglect therefore makes the child vulnerable to future harm.

17. Domestic Violence in the home

- Domestic violence is in some ways tied with child abuse and is a complicating factor. Knowledge and awareness of DV can help us categorize appropriate services for children and families experiencing this.

Candidacy Considerations

- The legal definition of candidacy in Arkansas.
- Who and how DCFS in Arkansas already serves clients.
- Pulling data from CHRIS, Arkansas' current SACWIS system.
- Looking at known risk factors for youth in Arkansas.
- Only one factor has to be present for a child to be determined a candidate; however, multiple reasons may apply.
- Once a child is designated as a candidate, they will remain a candidate for the length of the case, until the end of the month in which they turn 18, or until exactly a year has passed.



Kansas

Status: Submitted to the Children’s Bureau – Pending Approval

Candidacy Criteria

- . A child(ren) or youth placed with a parent who PPS determines is at imminent risk of foster care and out of home placement but can be safe at home with prevention services.
- . A child(ren) or youth who exited foster care to adoption or permanent custodianship or guardianship, or who was reunified with parents is at risk of entering foster care and out of home placement.
- . A child(ren) or youth in placement with relative caregivers.
- . A child(ren) or youth living with parents but needs to be with a relative caregiver as a guardian with prevention services
- . Pregnant and parenting youth in foster care and out of home placement.
- . Siblings of youth already in foster care.

Candidacy Considerations

Initial reports are made to the Kansas Protection Reporting Center (KPRC). An intake specialist completes an assessment of the report using Structured Decision Making (SDM). If the report meets criteria of Abuse and/or Neglect or Family in Need of Assessment, it will be assigned to the regional DCF Service Center. An assigned PPS practitioner within the region will then locate and assess the family. The PPS practitioner completes an initial assessment of the family, using the research-based Family-Based Assessment tool, to determine if they meet criteria for services. If answers to questions 1-3 below are “yes”; and questions 4-7 are either “yes” or “NA,” they are deemed eligible for services:

- The family is at risk of having a child(ren) removed; and
- A parent/caregiver is available to protect the child; and
- A parent/caregiver is willing and able to participate in services.
- A family with chronic problems has experienced a significant change which makes them able to progress.
- A parent/caregiver with mental/emotional health issues has been stabilized.
- A parent/caregiver with limitations demonstrates an ability to care for self and children.
- A parent/caregiver with substance abuse issues functions adequately to care for children.



In addition to the questions above, the regional PPS practitioner will utilize risk and safety assessment decisions to help guide the decision for candidacy for care and service referral. Families with the following risk level and safety decisions are deemed eligible for service:

- Risk Level = High to Intense (SDM in pilot counties = High to Very High)
- Safety Decision = Conditionally Safe (SDM in pilot counties = Safe with immediate safety plan)

The PPS practitioner and the family will decide on which program(s) best meets the family's needs. The PPS practitioner will upload the required documentation into Kansas Initiatives Decision Support (KIDS). KIDS is a web-based system to record, maintain, and report assigned abuse/neglect and non-abuse neglect intakes. Key milestones and the family's services are also tracked in the Family and Child Tracking System (FACTS), the DCF-PPS system for maintaining data and reporting to legislature, federal government, internal management, department budget, and the general public.



Kentucky

Status: Submitted to the Children's Bureau - Pending Approval

Candidacy Criteria

- A child who is a victim of substantiated maltreatment in which safety and risk factors can be mitigated by provision of in-home services.
- Child exhibits moderate to severe risk factors and services are necessary to prevent subsequent maltreatment and foster care entry.
- A child who has been recently reunified and services can be provided to the child and family to mitigate risks and re-entry.

Candidacy Considerations

- Children who are determined to be candidates for foster care
- Pregnant and parenting youth
- Determination of being at imminent risk for removal, but the risk and safety issues can be addressed through a prevention plan that is customized to each child.



Maryland

Status: Submitted to the Children’s Bureau - Pending Approval

Candidacy Criteria

There are two populations eligible for Family First preventive services:

1. Pregnant and parenting youth who are in foster care.
2. Children who are determined to be candidates for foster care.

Children at imminent risk of entering foster care will be defined as **children who receive in-home services and who meet specific risk criteria**. This population excludes children who do not receive in-home services but who may still be at high risk of entering or re-entering care.

1. Families with identified risk of harm – 20% of families served

- Families that might need additional support because they have characteristics that have been found to elevate the risk of harm to the child and potential for entering foster care.
- Substance-exposed newborn
- Domestic violence involving a minor
- Substantial risk of child sexual abuse due a known sexual offender living with the child
- Caregivers with impairments
- Families with prior child fatalities or serious child injuries
- Previous reports to Child Protective Services (CPS)
- Cases where parent/s have previously had their parental rights terminated due to abuse or neglect, but they have another child

2. Families Experiencing Substance Use Disorder – 25% of entries, 7% of removals

- Caregivers with lack of protective capacities due to substance use
- Substance use disorders of the parent, child/youth, and/or other household member

3. Victims of Trafficking

- Human, labor, or sex-trafficking
- Minor being trafficked
- Note: DHS/SSA seeks to expand access to prevention services that may keep children connected to their families when appropriate or address youth who are vulnerable for trafficking when exiting foster care

4. Families in Unsafe Living Conditions – 9%

- Inadequate housing in child’s placement
- Family instability due to unsafe living conditions
- Heightened parental stressors, which could lead to maltreatment and safety concerns for children

5. Families with Complex Medical Needs

- Parents with medical challenges
- Medically fragile children
- Children with significant disabilities who need specialized care to ensure their health and safety

- Children who are reported by health care practitioners to local departments as experiencing Failure to Thrive
- 6. Families with Complex Psychological and Behavioral Needs**
 - Parents, caregivers, and children who have complex psychological/behavioral needs
 - Child's behavior is a significant indicator in entry into foster care and voluntary placements
- 7. Families with Prior Child Welfare Experience**
 - Higher risk of additional involvement in the welfare system
 - Families with prior history of maltreatment
 - Children/families involved in family preservation cases
 - Children who have exited to some form of permanency
 - Minors who leave care before turning 21
 - Siblings of children in foster care who reside at home
- 8. Children and youth with current Department of Juvenile Services involvement**
 - Intersection between those who have experienced maltreatment and engage in delinquent behaviors and could benefit from prevention services to avoid placement
- 9. Informal Kinship Living Arrangement**
 - Might need additional supports to ensure that children can thrive and remain with their families

Candidacy Considerations

Determining and documenting eligibility:

- A family's acceptance of in-home services and applicability of one of the imminent risk criteria is recorded in existing intake, assessment tools, and data fields in MD CHESSIE (Maryland's Children Electronic Social Services Information Exchange). The caseworker and supervisor will make a clinical decision using the CANS-F as to whether Family First prevention services are the appropriate course of action for the child/family in question.



Nebraska

Status: Submitted to the Children’s Bureau – Pending Approval

Candidacy Criteria

Children and youth identified as being a candidate for foster care are those at imminent risk of entering foster care, as defined by Nebraska Revised Statute 71-1901, but can remain safely in the child’s home or kinship/relative home as long as Title IV-E prevention services are necessary to prevent entry into the foster care system are provided. This includes but is not limited to those children and youth who are:

1. residing in a family home accepted for assessment, or with an , ongoing services case including non-court and court involved families where the child may be a state ward;
2. reunified following an out-of-home placement;
3. the subject of a case filed in juvenile court as being mentally ill and dangerous as defined by Nebraska Revised Statute 43-247 (3)(c);
4. pre- or post-natal infants and/or children of an eligible pregnant/parenting foster youth in foster care;
5. at risk of an adoption or guardianship disruption or dissolution that would result in a foster care placement;
6. with extraordinary needs and whose parents/caretakers are unable to secure assistance for them;
7. involved with juvenile probation and living in the parental/caretaker home.

Candidacy Considerations

- Nebraska’s approach to candidacy is to define the families currently served meeting the requirements of FFPSA.
- Nebraska’s candidacy definition, allows a child to transition between traditional IV-E eligibility and FFPSA IV-E eligibility.



Utah

Status: Submitted to the Children’s Bureau – Approved

Candidacy Criteria

There are some key populations that are eligible for services under the Title IV-E Prevention Program:

- Children under 18 who are at imminent risk of entry into foster care, but is able to remain safely in their home or kinship placement as long as mental health, substance use disorder, or in-home parenting skill-based programs/services are provided for the child, parent, or kin caregiver.
- A child in foster care who is a pregnant or parenting youth.

Circumstances or characteristics that could put children at risk of entering foster care include:

- Child maltreatment, including abuse or neglect
- Substance use or addiction
- Mental illness
- Lack of parenting skills
- Limited capacity to function in parenting roles
- Parents’ inability or need for additional support to address serious needs of a child related to the child’s behavior
- Developmental delays
- Physical or intellectual disability
- Adoption or guardianship arrangements that are at risk of disruption

Candidacy Considerations

- Usage of a functional assessment tool, The Utah Family and Child Engagement Tool (UFACET), to assess the unique dynamics of each family/substitute caregiver(s).
- Risk assessment tools to identify youth’s risk of entry into foster care, as well as youth and family needs.
- Usage of the Protective and Risk Assessment (PRA) tool to determine the risk of youth involved in the juvenile justice system reoffending and whether they have a need for services.
 - A youth is considered a candidate for foster care if they score “moderate” or “high” on the PRA and/or have one or more risk factors that identify the need for services.
- Candidate status is confirmed through the creation of a child’s prevention plan.



Virginia

Status: Submitted to the Children’s Bureau – Pending Approval

Candidacy Criteria

A “candidate for foster care” is a child identified in a prevention plan as being at imminent risk of entering foster care, but who can remain safely in the child’s home or kinship placement as long as services or programs are provided to prevent the entry of the child into foster care. Candidates include children whose adoption or guardianship arrangement is at risk of a disruption or dissolution that would result in a foster care placement.

There are some key target populations that are eligible for services under the Title IV-E Prevention Program:

- Children in CPS ongoing or prevention cases, specifically those who received ongoing, in-home services to prevent removal from the home. 61% of CPS ongoing and prevention cases received a referral for mental health substance abuse, or parent skill-based training.
- Children or youth who have been adopted and are at risk of an adoption disruption or dissolution. From October 2017 to March 2019, 165 youth were identified as experiencing an adoption disruption (international, domestic, and in and out of state), which put them at risk for entering foster care.
- Pregnant or parenting youth who are in foster care. This group is not currently tracked in VDSS’ child welfare case management system, however the NYTD Database for Virginia reported that 9% of 19 year olds and 30% of 21 year olds had a child in the past two years.

Section of the Code of Virginia provide statutory authority for the delivery of prevention services to the following groups:

- § 63.2-319 requires provision of services to “assisting in the solution of problems that may result in the neglect, exploitation, or delinquency of children and preventing the unnecessary separation of children from their families by identifying family problems, assisting families in resolving these problems and preventing the breakup of the family where preventing the removal of a child is desirable and possible.”
- §§ 63.2-1505 and 63.2-1506 provide authority “to provide or arrange for services t families at the conclusion of a family assessment or an investigation.”
- § 63.2-1501 defines “Prevention” as “the efforts that (i) promote health and competence in people and (ii) create, promote, and strengthen environments that nurture people in their development.”
- § 63.2-905 provides authority to deliver foster care services which include a child who has been identified as needing services to prevent the need for foster care placements.

Candidacy Considerations

LDSS will identify children and their parents or kin caregivers to determine their eligibility for Title IV-E Prevention Services through multiple strategies:



- At the conclusion of a CPS family assessment or investigation and services are identified that will reduce the risk for future abuse or neglect or entry into foster care, and through
 - Parent or caregiver self-referrals
 - Referrals to the LDSS from courts, schools, or other community-based organizations.

At the identification of a child and their parents or kin caregivers as referenced above, the CANS must be completed to determine family strengths and needs. Domains assessed through the CANS include life functioning, child strengths/resiliencies, child behavioral/emotional needs, child risk factors, child and family functioning modules and parent/guardian strengths and needs.



Washington, D.C.

Status: Submitted to the Children's Bureau- Approved

Candidacy Criteria

Washington D.C.'s Child and Family Services Agency (CFSA) identifies their target population for prevention services under three main categories: Front Door, Front Porch, and Front Yard. These three groups are at different stages of risk of entry into foster care and are part of a continuum of service interventions designed to meet the needs of these different types of families and prevent child abuse and neglect throughout D.C.

- Families in CFSA's Front Yard are not involved with CFSA but may demonstrate potential risk factors for involvement. Primary prevention efforts are designed to ensure children and families in the CFSA's Front Yard are supported in their communities.
- Families at CFSA's Front Porch may have engaged with CFSA, but have been able to safely remain, or reunify with their families, and receive community-based prevention services offered by our partnership with DC's Healthy Families/Thriving Communities Collaboratives.
- Families engaged at CFSA's Front Door have an open case with CFSA. Whenever possible, CFSA prioritizes keeping families together and working with parents and children in their communities.

Target Sub-Population Groups

Front Porch

1. Children served through the Healthy Families/Thriving Communities Collaboratives following a CPS investigation or closed CFSA case.
2. Children who have exited foster care through reunification, guardianship, or adoptions and may be at risk of re-entry.
3. Children born to mothers with a positive toxicology screening.

Front Door

4. Children served through CFSA's In-Home Services program, which offers intensive case management and service referrals to families.
5. Pregnant or parenting youth in/recently exited foster care with eligibility for services ending five years after exiting foster care.



6. Children of pregnant or parenting youth in/recently exited foster care (non-ward children) with eligibility for services ending five years after exiting foster care.
7. Siblings of children in foster care who reside at home and have assessed safety concerns.



Washington State

Status: Submitted to the Children's Bureau- Pending Approval

Candidacy Criteria

Washington DCYF has designated ten candidacy groups who are eligible for voluntary prevention services under their Title IV-E prevention Program. A family with prevention needs can receive assistance and services in four different ways.

1. Child Protective Services-Family Assessment Response (FAR)

- FAR is Washington State's alternative response system funded with a Title IV-E waiver that ended in September, 2019. The final evaluation report for FAR found that its implementation safely reduced the placement rate for children served by 17% compared with a traditional investigation for eligible families. In SFY 2019, 14,932 CPS cases received a FAR response from DCYF. Children served by DCYF in the CPS FAR category have a 6% placement rate in the two years post-intake.

2. Child Protective Services Investigation

- In SFY 2019, 13,720 cases received a traditional investigation response from DCYF. Children served in this category have a 15% placement rate in the two years post-intake.

3. Family Voluntary Services

- In SFY 2019, 611 cases were served by DCYF Family Voluntary Services. Families are referred to FVS if the family is identified as moderate-high risk for future abuse or neglect, 2) the children can remain safely in the home with a safety plan. Children served in this category have a 12% placement rate in the two years post-intake.

4. Children on trial return home following placement

- In SFY 2019, 3,436 children experienced a trial return home. Children reunified with their parents following placement have an 8% placement rate in the 12 months following exit from care.

5. Adoption Displacement

- DCYF has identified 87 adoption displacements in SFY 2019 from all sources. This number includes displacements that originated with DCYF, ones that were out-of-state, as well as international adoptions. These displacements are often a result of child/youth behavior and lack of family resources. In SFY 2019, the calculated ratio of displacements per finalized adoptions was 6.2 to 100. Efforts are being taken to identify needed services and opportunities for intervention.

6. Substance-using pregnant women

- In SFY 2019, DCYF screened out 774 unborn victim referrals for substance abuse. Children in this category have a 26% placement rate in two years post-intake. 57% of substance affected infant referrals to CPS have had a previous unborn victim referral during the same pregnancy. 45% of infants who are identified as substance affected at birth are placed.



7. Pregnant or parenting foster youth and pregnant or parenting juvenile rehabilitation youth
 - In SFY 2019, 20 pregnant or parenting youth were identified as being in foster care and 70 were identified as pregnant or parenting juvenile rehabilitation youth. Prevention services for these youth will help ensure preparedness for pregnant foster youth or ability to be a parent in the case of a parenting foster youth.

8. Family Reconciliation Services (FRS)
 - FRS is a voluntary program serving high-risk youth and adolescents between 12 and 17 and their families. The program is designed to assess and stabilize the family's situation with the goal of returning the family to a pre-crisis state and to identify alternative methods of handling similar conflicts. In 2019, more than 3,000 youth had an FRS intake with 825 receiving some kind of service from DCYF staff and 9% receiving EBPs. Youth served by DCYF in this category have a 7% placement rate two years post-intake.

9. State Juvenile Rehabilitation (JR) Discharge
 - 29.4% of youth in state juvenile rehabilitation facilities have had a previous foster care placement in their lifetime, and over 78% have been involved in the child welfare system to some degree. Between January 2016 and June 2019, 76 youth leaving county detention facilities utilized night-to-night placements in the child welfare system following discharge.

10. Children with developmental disabilities and/or intensive mental health needs
 - Youth with intensive mental health needs and disabilities are overrepresented in the foster care system. 56% of foster youth have a mental health need, 27% of youth over the age of 12 have a substance use treatment need, and 21% have a specific developmental disorder/intellectual disability diagnosis.



West Virginia

Status: Submitted to the Children’s Bureau- Pending Approval

Candidacy Criteria

A candidate is identified as: A child, under the age of 21, who is at imminent risk of foster care entry or re-entry and who:

- Has not been removed from their home and placed in foster care; or
- Is not under the placement and care of the Title IV-E agency and is residing with a relative or an individual with whom the child has an emotionally significant relationship characteristic of a family relationship (fictive kin); or
- Has returned home on a trial home visit; or
- Has returned from a foster care placement and is residing with their parent or a non-paid kinship relative caregiver; or
- Has been adopted or is in a legal guardianship arrangement.

The child is considered at imminent risk of foster care entry, or re-entry, if at least one of the following conditions exist:

- Has been abused or neglected or has been identified as unsafe and, without intervention, is likely to be removed;
- Suffers a serious emotional, behavioral or mental disturbance and without intervention will be unable to reside in their home;
- Has committed a prosecutable offense in which the state has filed, or is considering filing, a juvenile petition and the planned out-of-home living arrangement is a foster care setting;
- Is a runaway or homeless youth;
- Is, or will be born to, a youth residing in foster care;
- Is an adopted child or in a legal guardianship arrangement at risk of disruption.

Candidacy Considerations

- DHHR’s Bureau for Children and Families will identify pregnant and parenting youth through enhancements that have been made to the State Administered Child Welfare Information System (SACWIS). Plans are also underway to incorporate documentation strategies into the state’s CSWIS system and WV Path (People’s Access to Help) to assist with the identification of pregnant and/or parenting youth.