

Brave New World

Out of Home Care in Florida in light of the Family First Act.



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Menti Slides 1 to 4

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Session Overview

- Housing Options and Other services for Young Adults
Extension of Foster Care During the Pandemic
 - Availability of additional Chafee Dollars
 - Foster Youth to Independence & Family Unification Program federal housing vouchers
- Overview of the Placement Provisions in Families First Prevention & Services Act
- Qualified Residential Treatment Programs
- At-Risk Group Homes & Safe Houses for Youth who have been or are at risk of human trafficking
- Support for Relatives and Nonrelatives Caregivers.
- Recognizing and addressing racial and ethnic disparities in placements

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Supporting Foster Youth and Families through the Pandemic Act

Division X of the *Consolidated Appropriations Act, 2021*, Public Law (P.L.) 116-260, enacted December 27, 2020

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Menti Slides 5 & 6

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Florida Got A LOT of Money to help Older Youth & Young Adults on Feb. 22, 2021

Florida's 2020 regular Chafee Allotment: **\$7,538,920**

Additional Allotment under Pandemic: **\$19,791,518**

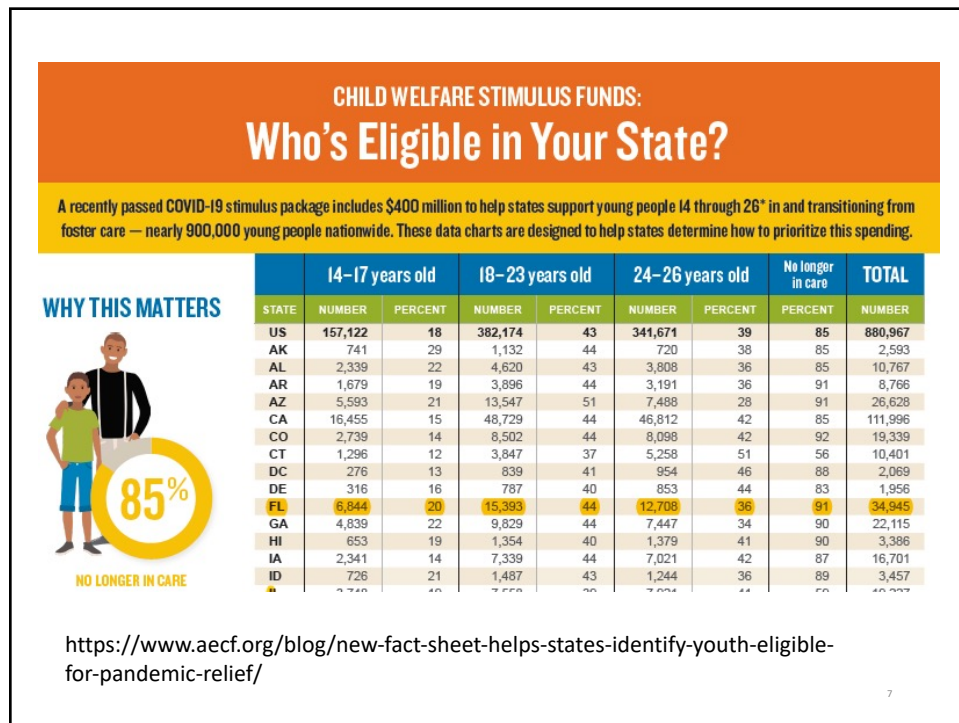
"The temporary title IV-E requirements and the additional Chafee/ETV funding and flexibility address the critical financial needs of youth/young adults who are or were formerly in foster care."

Children's Bureau Program Instruction issued March 9, 2021

- https://cdn.ymaws.com/www.naccchildlaw.org/resource/resmgr/news_items/chafee_news/acyf-cb-pi-21-04.pdf

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Extended Foster Care (\$39.6251)

- Moratorium on Exits from Care based on age 12/27/20 to 9/30/21
- Outreach to offer return to care for anyone who exited because of age from 1/27/20 to 4/20/21 [may be extended]
- Waiver of Participation Requirements:
Age, Education and Employment requirements are suspended for all otherwise eligible youth in foster care

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Education Training Vouchers

- Temporary increase from \$5,000 to \$12,000 per student until September 30, 2022.
- Students in postsecondary education who are **not eligible** for PESS may be eligible for ETV if they:
 - Attend school out of state
 - Attend less than full time

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Chafee Funds to Support Housing & Other Needs

- CB urges all child welfare agencies receiving the additional Chafee grant to consider using at least a portion of the funds to facilitate **quick and streamlined access to direct financial support** for youth who were or are in foster care. (pg.10)
- Florida's Aftercare is the current means for youth to seek assistance outside of PESS or EFC.
- States are urged to eliminate barriers:
 - We note that many state Chafee programs provide financial relief to youth/young adults. Some of these programs require that a youth complete an action plan, case plan, submit receipts, or other documentation as a condition of receiving the assistance. CB urges child welfare agencies to **review all procedures to determine if they are a barrier** to receiving needed assistance timely, specifically as viewed by youth and young adults.

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Temporary Flexibility for Use of Funds

(Until 9/30/21)

- **Age:** Anyone who experienced foster care at 14 or older **and has not yet attained age 27** (section 3(b) of Division X).
 - Includes youth who were reunified after age 14 and adopted or guardianship after 16
- **Room and Board:** Agencies may use Chafee room and board amounts for any otherwise eligible youth who experienced foster care at age 14 or older and who at the time of receiving services is age 18-26
- **Driving & Transportation Assistance** –ages 15-26
 - Includes assistance in purchasing an automobile
 - Other items covered by Keys to Independence
 - Capped at \$4,000 a year

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Recommended Use of Funds for Youth

- **Unrestricted one time or monthly direct financial assistance**
- **Payment to allow youth to remain at home during the pandemic** (eg. Due to medical condition, pregnant & parenting, quarantine)
- **Living expenses:** rent, groceries, meal delivery, utilities
- **Technology:** phones, laptops, internet
- **Respite for pregnant and parenting youth**
- **Medical expenses not covered by insurance**
- **Personal Protective Equipment**
- **Services & Support to combat social isolation**

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Advocacy Tips

- Identify young adults who are eligible to remain in care past 21 or return to care under the moratorium, advise them of the options and help them remain or re-enter.
 - Formally request that the CBC extend foster care or permit re-entry
 - File motions to confirm extension of foster care or seeking re-entry
- Identify youth who have unmet needs due to the pandemic
 - Assist them in applying for financial assistance to meet those needs
- Identify youth who receive or are eligible for ETV and make the application for greater funding.

Advocacy Resources: samples from other states

<https://drive.google.com/drive/folders/1CGlp1nuqecEn0NhvAcj72qetzvINfDpv?usp=sharing>

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FYI & FUP Housing Vouchers

Foster Youth to Independence and Family Unification Program

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Family Unification Program Vouchers

- Created in 1990, Youth became eligible in 2000
- Maximum of 36 months for youth – no limit for families
- Vouchers are limited –Competitive Program
- Serves 2 populations
 - Families in danger of losing children because of lack of housing
 - Former Foster Youth - 18-25 who left foster care or will leave within 90 days and was homeless or at risk of homelessness at age 16 or older

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Foster Youth to Independence (FYI) Vouchers

- Created in 2019
- 18-25 who left foster care or will leave within 90 days and was homeless or at risk of homelessness at age 16 or older
- Maximum of 36 months
- Youth must be offered support services to promote self sufficiency, requires partnership with Child Welfare community
- Originally not available if Housing Authority offered FUP vouchers, but that changed in 2020.
- Available upon demand (up to 50 in a non-competitive process).

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Advocacy Tip - Delay Gratification

- Extended Foster Care and Postsecondary Education Services & Supports & Aftercare should be the go-to resources to help house former foster youth up to age 24.
 - Determine eligibility for those programs first!
- FUP and FYI Vouchers can serve young adults from 24 to 27, thus should be reserved until the other eligibility is complete

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Placement Provisions in Family First Act

(Family First Prevention and Services Act)

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It's All About Family

- Keep Children with their Family of origin whenever possible.
 - Prevention Services is not our topic today
- Place them with family or fictive kin if they must be removed.
- When family /fictive kin isn't available, place them into a family foster home.
- Group care as a placement option is disfavored – should only be used as an intervention.

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Basic Premise: Group Care is Costly & Doesn't Produce Good Outcomes

- The law stems from the Senate Finance Committee and House Ways & Means Committee
- Congress looked at the data on costs and outcomes and decided that it was not putting its money to good use.
- After **October 1, 2021** the federal government will only reimburse states for the **first 14** days of group care unless an exception is met.
- Signed into law on 2/9/2018 - States had 3 1/5 years to get ready.

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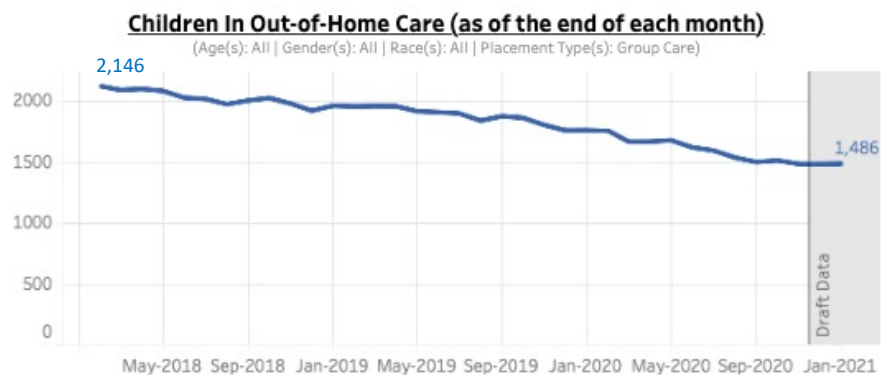
Pressure is On - Current Status of Group Care

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Group Home Population is Trending Down

DCF Dashboard

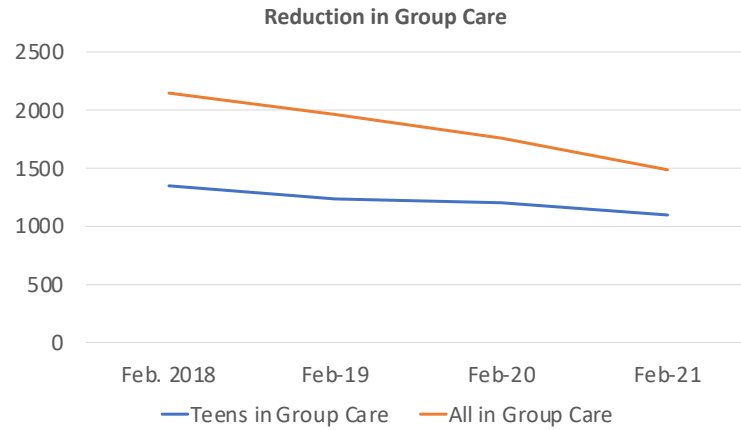


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The Decrease is Primarily Children Under 12

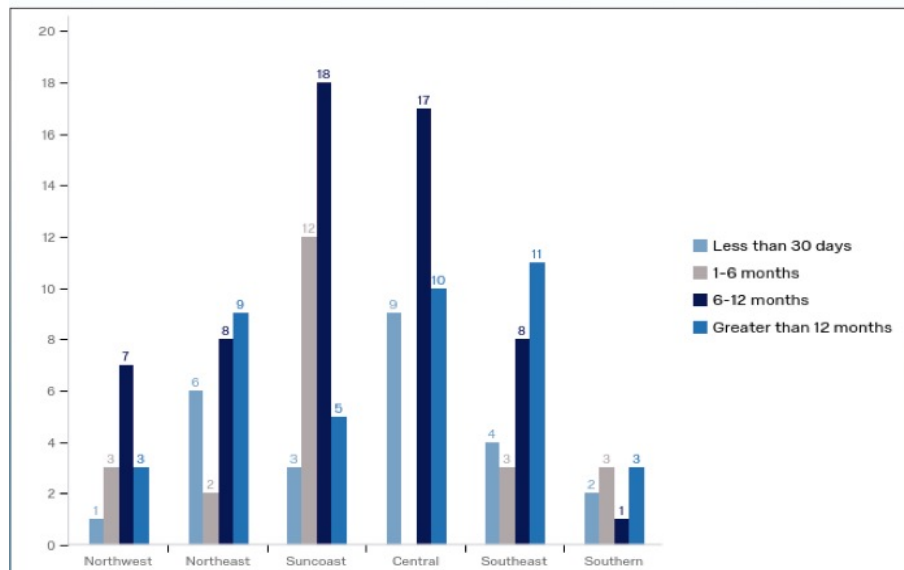
Data from DCF Dashboard



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CHILD'S AVERAGE LENGTH OF STAY IN GROUP HOME

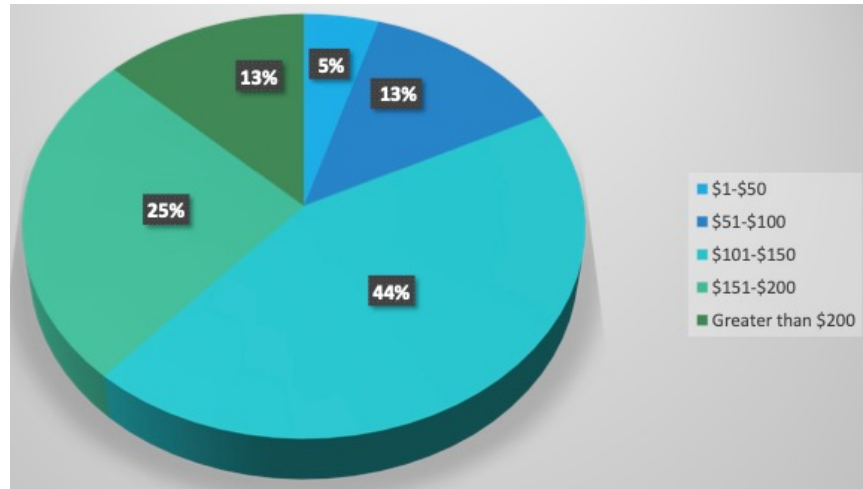


<http://centerforchildwelfare.fmhi.usf.edu/kb/prevplans/Statewide%20Group%20Care%20Survey%20April%202019.pdf>

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Statewide Average Daily Rate Per Child (4/2019)



<http://centerforchildwelfare.fmhi.usf.edu/kb/prevplans/Statewide%20Group%20Care%20Survey%20April%202019.pdf>

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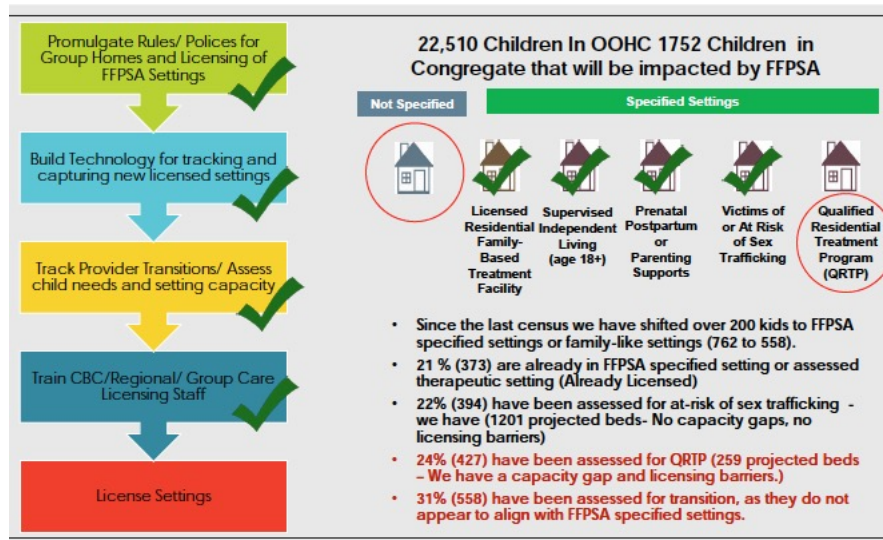
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Slide from DCF Child Welfare Task Force 2/22/21



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Take a Closer Look – as of Feb. 2021

- 394 At Risk of Sex Trafficking – 1201 Beds
- 427 QRTIP -- 259 Beds
- 558 Not Eligible for a Family First Setting

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How do we meet the
needs of kids without
group homes?

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Level II Enhanced Foster Parents Coming Soon — (items under consideration)

- **Enhanced Board Rate**
 - Based on a Matrix of Needs: large sibling groups, awaiting SIPP placement or step-down, DJJ involvement, sexual abuse history, etc.
 - Maximum of \$150 per day, or more with DCF review
- **Mandatory Foster Parent Training**
- **Incentive Stipends for maintaining placement.**
 - (\$300 after 3 months, \$300 after 6 months, \$400 with maintaining a relationship after permanency.)
- **Support Services**
 - Peer mentor, wrap around, behavior analysts

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When is a Group Home Not a Group Home? When it's a Family Foster Home

- Federal Law permits a "family foster home" to be 6 children in foster care and does not count the children of the foster parents.
- Florida Admin. Code currently limits 5 children, including the children of the caregiver, unless an over-capacity approval is given. 65C-45.015(1)(b).
 - Expect DCF to change this rule
- Family foster homes used to have to be "private residence" that restriction will be removed, so homes can be owned by providers.

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Advocacy Tip -

- Be on the look out for information on Enhanced Level II payments and services.
- Advocate for the services and supports your kids need to remain in a family home

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“Ensuring the Necessity of
a Placement that is not in
a Foster Family Home”

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The Title of the Section Conveys the Intent

States must demonstrate that the child Needs to be placed somewhere other than a foster family home to get reimbursement.

- Family Residential Treatment for Substance Abuse (parent and children together)
- Pregnant and Parenting youth
- Qualified Residential Treatment Programs
- Victims or Potential Victims of Human Trafficking

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Comprehensive Placement Assessments §39.523(2), F.A.C. 65C-28.004 (revisions pending)

- Determine the level of care needed by the child and match the child with the most appropriate placement. **Effective July 1, 2017**
- DCF is using assessments to meet the Family First requirement that children not be inappropriately diagnosed with emotional or behavioral disorders in order to meet criteria for placement. (FFPSA § 5073)
- CF-FSP 5438 is the Assessment form

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When are Assessments Done

- **Assessment must be completed at intake**, if child cannot be placed with relative or nonrelative, CPI must ask CBC to convene a multidisciplinary team. (Currently required by §39.523(2)(a), rule is being updated to match)
- **Assessment must be updated** when a change in level of care is recommended.
- **Assessment must be reviewed** every 3 months to ensure permanency.

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Multidisciplinary Team for Comprehensive Assessments

- Team must be at least 3 people:
 - DCF Representative, Case manager, therapist, attorney, GAL, teachers, coaches, Children's Medical Services, community service providers.
 - Can include clergy, relatives and fictive kin.
- Must Review:
 - Medical needs; developmental needs; medication history; behavioral health needs; alleged type of abuse; or neglect and trafficking history; community ties and school placement; placement of siblings; age, maturity, hobbies or activities and preference; ACE score.

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Placement with Parents in Residential Substance Abuse Treatment

Stay tuned - Plans to make this provision effective have not been completed.

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Traditional Group Homes

Florida Admin. Code 65C-14.123 (Rulemaking in Process)

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“Traditional” Group Homes

- Must opt between 2 populations
 - Young adults 18-21 (22 with a disability), or
 - Children and youth whose Comprehensive Placement Assessment recommends group care, but one has been identified but is unavailable at the time of placement

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Supervised Independent Living

Group Homes for Young Adults
in Extended Foster Care

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“Traditional” Group Homes

- No limit on length of stay
- Training: In addition to 40 hours of preservice, must have 8 hours of training on: independent living skills, caring for teens in care and nurturing adolescent development. Of annual in-service training, 6 hours focused on caring for and transition planning for young adults
- Services: Life skill instruction, Counseling, Educational Support, Employment preparation and placement, development of supportive network of adults.

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“Transitional” Homes

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“Transitional” Group Homes

- Length of stay limited to 14 days
- Transition planning initiated within 48 hours of placement
- Services:
 - Coordination of assessments
 - Coordinate referrals and arrange continued services in less restrictive setting
 - Assess family connections and relationships to assist with family finding

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Pregnant & Parenting

Florida Admin. Code 65C-14.1181 (Rulemaking in Process)

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Staffing / Training

- Can serve any pregnant or parenting youth **and siblings**
- Shift or house parent staffing model permitted
- 20 of the 40 hours of training required for all group home staff must include topics on prenatal care, postpartum, and parenting youth, including:
 - Mother/child health and development;
 - Developmental stages, ages birth to five;
 - Trauma, triggers, and calming strategies for young parents;
 - Pregnancy and childbirth, basic infant care, and safety; and
 - Parent and child relationships.

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Services Provided

- Pre-natal and childbirth education
- Parenting education to include safe and health parenting practices, child development of infants and toddlers, active and responsive caregiving, and emerging language and literacy
- Water safety education and training
- Individual/group/family counseling
- Clinical services to address trauma, childhood sexual exploitation, trafficking, and the parent/child relationship
- Ongoing multi-disciplinary team staffing to determine appropriate placements, service needs, and support from community partners.

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Qualified Residential Treatment Programs

QRTPS –Florida Admin. Code 65C-14.121 and 65C-28.021, (Rulemaking in Process)

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Eligibility for QRTP Placement

42 U.S.C.A. § 672 (k)(2)(D)

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Treatment Intervention to Address Emotional & Behavioral Health Needs

- **Not Emergency Placement**
- **Not Secure Shelter**
- **Not for Acute Psychiatric Crisis**

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QRTP Admission Requirement - Qualifying Assessment

- **Timing:**
 - Can be done before placement or completed within 30 days of placement
 - Children under 10 must have assessment before placement
- Develops short term and long term mental and behavioral Health goals
- Uses the Child & Adolescent Needs and Strengths assessment tool
- Must be done by a “Qualified Individual”

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Qualified Individual - Qualifications

- Licensed clinician or master's level practitioner under supervision of a licensed clinician
- 3 years experience with children & adolescents
- No actual or perceived conflict of interest with QRTP
- Specific training including trauma informed care and human trafficking

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Qualified Individual – Assessment Components

- Review prior treatment record
- Speak with: relevant parties: GAL, attorney, case manager, caregiver, family DJJ, treating professionals, permanency team
- Interview the child
 - May be by video conference under some conditions
 - Must make good faith effort to engage the child if the child refuses to participate in the interview

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Recommendation Options

- Placement in QRTP
- Placement in less restrictive setting with wraparound services. (Level II Enhanced?)
- Referral for suitability assessment / Recommend Residential Treatment Center Placement
 - Only QIs who are also Qualified Evaluators may recommend RTCs

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Comparison of QRTP & RTC

• QRTP

- Licensed per §409.175
- Serve children & adolescents with Emotional or Behavioral needs
- Only available to children in DCF custody.
- Placement per Rule 65C-28.021
- IV-E Funded if Qualified Individual recommends & court approves

• Residential Treatment Center

- Licensed per §394.875(c)
- Serve children & adolescents with emotional disturbance or serious emotional disturbance
 - Diagnosed with a mental, emotional, or behavioral disorder of sufficient duration to meet one of the diagnostic categories in the DSM. §394.492 (5) and(6)
- Children in DCF custody can only be placed pursuant to process in §39.407
- Medicaid Funded if Qualified Evaluator recommends

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What Happens if a QRTP is Not Recommended

- Case manager can request reconsideration if the QI didn't get the complete clinical record or the child has decompensated in mental or behavioral health functioning.
- Multidisciplinary Team must offer to help develop plan for treatment and support in the community.
- Child must be moved within 30 calendar days.

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Court Review & Approval of QRTP Placement (Ensuring Necessity of Placement)

- DCF must request court review within 60 days of placement in QRTP
- If QRTP is Approved, the QI must conduct an assessment review every 90 days.
- If QRTP is Denied, the child must be moved within 30 days
- If the Court orders QRTP placement without a recommendation by the QI, the case manager must request a reconsideration by the QI. (Needed for federal funding)

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Initial Assessment & Assessment Review

- Outcome of face-to-face interview, review of treatment records, contact with relevant parties, recommendation for placement, and evidenced based functional assessment tool
- Review must include outcome of new face to face interview, new treatment records, functional assessment tool, documentation of psychosocial changes, recommendation for continued placement

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Limit on Length of Stay in QRTP

- Teens – maximum placement is 12 consecutive months or 18 non-consecutive months
- 12 & under – maximum is 6 consecutive or non-consecutive months
- Maximum can be exceeded with approval of DCF Regional Managing Director who must consult with a DF Substance Abuse and Mental Health clinical professional in making the decision

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Re-Admission / Change of QRTP

- Child who elopes (runs away) or is involuntarily committed under the Baker Act can be re-admitted without a new assessment if it's within 7 calendar days of the date of occurrence.
- Child can be moved from one QRTP to another without a new assessment if there is no lapse in placement.
 - CBC must convene a multidisciplinary staffing with both QRTPs to discuss the child's needs and share records

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Advocacy Tip -

- QRTPs have a lot of due process protections for children built into federal law and Florida. Use them!

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QRTP What do You Get?

42 U.S.C.A. § 672 (k)(2)(D)

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What Do You Get?

- Trauma Informed Treatment Model
- Individual Treatment Plan
- Discharge Planning
- Aftercare Support

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Treatment Plan Required (65C-14.121 (9), Plan requirements 65C-14.040)

- Must be developed within 14 days of placement
- Developed with the child, parents, case manager, guardian ad litem and lawyer
- Must include:
 - Statement of problems to be addressed
 - Goals to be reached which address each problem
 - Action steps to accomplish goals
 - Target date for Completion
 - Description of services & frequency
 - Assignment of primary therapist or counsel
 - Diagnosis
 - Discharge Criteria

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Basic Services for QRTPS – “Time-Limited, High - Quality”

- Substance abuse and mental health screening and treatment, if applicable
- Family/group/individual therapy
- Behavioral management
- Psychiatric services
- Support groups
- Sexual abuse/sexual aggression services
- Specialized intervention services
- Social & rehabilitative services
- Psycho-educational services
- Academic supports

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Putting the “F” in QRTF Facilitation of Family Involvement Required

- Include in family therapy
- Outreach to family members, including siblings
- Document how family members are integrated into treatment process
- Document how sibling connections are maintained

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Staffing / Training

- Direct care staff to resident ratio not specified, but staffing must be sufficient to implement the trauma-informed model
- Capacity is maximum of 16 beds
- Shift or house parent staffing model permitted
- Registered or licensed nursing staff onsite, available 24/7
- In addition to 40 preservice hours for all group care staff, must have an additional 30 hours specific to QRTPs.
- 10 of 40 hours of annual in service must be specific to QRTP

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Training Topics for QRTPs

Normal childhood development	Crisis intervention and emergency procedures
Emotional disturbances in children and common behavioral problems exhibited	Self-defense and passive physical restraint
Evidenced-based interventions for children with emotional disturbances	Working with biological or adoptive families
Behavior management, theory, and skills	Placement adjustment skills
Discipline to include limit-setting, logical consequences and problem solving	Confidentiality
Relationship building skills	Cultural competency
Communication skills	Behaviors and emotional issues of children who have been sexually abused
Permanency planning	Children and youth with developmental disabilities (if serving this population).
Stress management	

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Discharge Planning

- QRTP must have a written procedure that specifies availability of services and the person responsible for implementing aftercare support
- Planning includes input from parent, case management team, GAL and attorney
- Must consider child's diagnosis
- **Shall be developed to meet needs in most appropriate, least restrictive setting**

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Aftercare Supports Offered

- Community service coordination for youth and family/caregiver
- Ensure all service referrals have been linked and barriers eliminated.
- Minimum of 2 contacts per month, at least one face to face,
- Provide case manager with a progress reports every 30 days.
- Not required if youth is discharged to higher level of care. (Statewide Inpatient Psychiatric Program, Specialized Therapeutic Group Care)

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Aftercare Support

- Aftercare must be provided for a minimum of 6 months.
- QRTP provides the aftercare services unless the child is placed more than 50 miles from the QRTP, in which case the CBC must provide the aftercare.
- Aftercare progress reports must be put in the child's record and the court informed of the child's progress at judicial reviews.

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Advocacy Tips -

- Promote family and caregiver involvement during treatment and in the Aftercare.
- Participate in the discharge process to promote meaningful aftercare services will support positive changes following discharge.

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“High-quality residential care
and supportive services to
children and youth who have
been found to be, or are at risk
of becoming, sex trafficking
victims”

42 U.S.C.A. § 672 (k)(2)(D)

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Safe Houses

Admin. Code 65C-14.119, (Rulemaking in Process)

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Safe Houses are for Commercially Sexually Exploited Children

- “A dependent child 6 years of age or older who is suspected of being or has been found to be a victim of commercial sexual exploitation must be assessed. . . to determine need for placement in a safe house or safe foster home.” Fla. Stat. §39.524 Florida’s Safe Harbor Act in effect in 2012.
- “Commercial sexual exploitation” means the use of any person under the age of 18 years for sexual purposes in exchange for money, goods, or services or the promise of money, goods, or services. Fla. Stat. § 409.016

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Admission Criteria

- 12 and older (unless a waiver is obtained)
- Facility's admission plan describe its intake and discharge procedures
 - Criteria for requesting change of placement, early or unsuccessful discharge
 - Exclusionary Criteria
- Trauma-related behaviors and coping mechanisms should not be used as a reason to deny a placement request or discharge a youth, unless it can be determined that such behavior will create an imminent risk to the safety or stability of other residents in the home

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Staff Ratios

- No more than 2 residents to a bedroom
- 1 direct care staff for 4 residents
- 24 hour supervision
- Staff must have additional 24 hours specialized training in sexual exploitation, and 8 hours each year

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Sexual Exploitation Training Topics (65C-43.004)

Distinctions between sexual abuse, sexual exploitation, and sexual trafficking	Identifying victims
Language and sensitivity	Meeting the needs of victims
Pathways to entry into sexual exploitation and sexual trafficking;	Trauma triggers
Exploiters	Trauma-informed care
Tactics of coercion and control	Vicarious trauma and self-care strategies
Impact of sexual exploitation	Behavior management activities
Stockholm Syndrome and trauma bonding	Intersection of labor trafficking and commercial sexual exploitation.

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Services Required of Safe Houses

- Victim-witness counseling;
- Individual and family counseling;
- Treatment, and intervention for sexual assault;
- Substance abuse screening and treatment, if applicable;
- Life skills training;
- Survivor mentoring support by a survivor of sexual exploitation; and
- Activities schedule.

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Discharge Process

- The safe house must re-evaluate the child's service plan and conduct a multidisciplinary team staffing with the case management agency and community-based care's human trafficking liaison.

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At Risk Group Homes

Admin. Code 65C-14.1183, (Rulemaking in Process)

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Admission Criteria

- 12 and older (unless a waiver is obtained)
- Meets definition of “Child or youth at risk of sex trafficking: An individual who has experienced trauma, such as abuse, neglect, and/or maltreatment, and presents with one or more of the accompanying risk factors:
 - History of running away and/or homelessness.
 - History of sexual abuse and/or sexually acting out behavior.
 - Inappropriate interpersonal and/or social media boundaries.
 - Family history of or exposure to human trafficking.
 - Out-of-home placement instability demonstrated by repeated moves from less restrictive levels of care.

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The Loophole You can Drive a Truck Through

- History of running away can include a child who has had a report of runaway or elopement even if it didn't involve a night away.
- Homelessness can include an experience with a parent who was also homeless at the time.
- Inappropriate interpersonal and social media boundaries not defined
- Placement instability will be determined by the CBC and based on each specific child

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Staff Ratios & Training

- Number of residents per bedroom not specified
- Direct care staff to resident ratio not specified
- Shift or house parent staffing model permitted
- 8 of the 40 hours of training required for all group home staff must be focused on human trafficking

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Services Required of At Risk Homes

- Family/group/individual counseling
- Treatment and intervention for sexual assault
- Substance abuse and mental health screening
- Life skills
- Educational supports
- Discharge planning
- Programming related to the prevention of sex-trafficking including healthy relationships, interpersonal boundaries, community engagement, etc.

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What's Missing?

- No requirement to show that Placement is Necessary
 - That least restrictive placements have been tried
 - That treatment and care cannot be provided in a family setting
- Standards for the facility to show that is qualified to provide treatment and care for the designated population
- Requirement for using a trauma informed approach
- Requirements for staff and staffing
- Requirement for aftercare and for transition planning for lower levels of care,
- Processes to assure that continued placement is appropriate.

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Advocacy Tips -

- Request service plan that identifies the child's needs and describes how services will be provided to meet those needs.
- If no formal review process is created, ask the court to review whether ongoing placement and services are required.

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Support for Relatives
and Nonrelatives for
caregivers.

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Support on Entry into Care

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It's All About Choice

Initial placement with relatives and fictive kin (nonrelatives) is handled by an order placing the child in the temporary custody of that caregivers. The caregiver should be presented with 3 choices

- Relative Caregiver Program 39.5085
- Level I Licensure – Child Specific License
- Level II Licensure – Standard Foster Parent License

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Duty to Inform Caregivers

§ 39.6221 (12)

- DCF to develop comprehensive communication strategy in support of relatives and fictive kin
 - Eligibility criteria
 - Payment rates
 - Program requirements for: Relative Caregiver, Guardianship Assistance and Level I and Level II licensure
 - Detailed description of licensure process
 - Points of Contact to get help in applying for programs or licensure

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Relative Caregiver Program – (Includes Nonrelatives) \$39.5085

- Payments

Age 0 -5	\$242
Age 6-12	\$249
Age 13-17	\$298

- Relative Caregiver funds come from welfare – Temporary Assistance for Needy Families
- Nonrelatives – funded by general revenue (must demonstrate financial need)
- Caregiver retains custody – change of placement requires court hearing

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Level I – Child Specific License Kin and “Fictive Kin”

- Fictive Kin §39.01(29): a person unrelated by birth, marriage or adoption who has an emotionally significant relationship which possesses the characteristics of a family relationship, to a child.
- Level I Child Specific License
 - requirements not directly related to safety may be waived
 - simplified training requirements
 - board rate **\$333 a month**, all ages (effective 7/1/2019)
- Caregiver retains custody – change of placement requires court hearing

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Level II – Foster Care License

- Relatives
 - Must take same training as other foster parents
 - Must meet all licensing requirements as other foster parents.
- Board Rate set by statute with annual COLA (1/2/21)

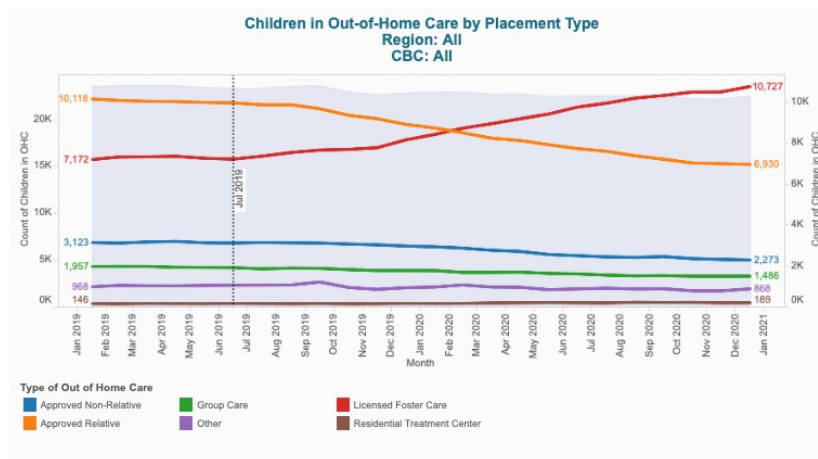
Age 0-5	\$484.06
Age 6-12	\$496.46
Age 13-21	\$581.09
- DCF retains custody – change of placement can be done without a court hearing
- Medicaid ends at age 26

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Placement Trends

(DCF Child Welfare Dashboard)



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Support at Case Closure

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Permanent Guardianship (§39.6221)

- Available to Level II- V Foster parents, Relative & Nonrelative Caregivers
- Case can be closed to PG after 6 months in care
- Custody remains with caregiver, but court retains jurisdiction
- Financial Support
 - Relative and Nonrelative Caregivers can continue to receive those funds until age child turns 18
 - Foster parents cease receiving funds
- Medicaid ends at 18

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Kinship Guardianship Assistance Kin GAP (§39.6225)

- Available to Level I Foster parents
- Case can be closed to PG after 6 months in care
- Custody remains with caregiver, but court retains jurisdiction
- Financial Support
 - \$333 a month, **unless another amount is agreed to by guardian and DCF.**
 - Funds also payable for **siblings** placed by dependency court with guardian.
- Annual redetermination of needs.
- Guardian and child **can** move out of state.

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Kin GAP Can Extend to 21

- Medicaid and GAP payments end at 18 but can continue to age 21 if:
- Guardianship entered between ages of 16 and 18
- Youth is in qualifying activity (Same criteria as EFC)
 - School, part time work, program to eliminate barriers to work, or unable to participate fulltime due to physical, intellectual, emotional or psychiatric condition.
- Youth cannot receive Postsecondary Education Services & Supports and Extended Guardianship Payments (PESS)

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Extended Adoption Subsidy to age 21

(§409.166(4) (eff. 1/2/2019))

- Adoption Assistance payments end at 18 - but can continue to age 21 if:
- Initial adoption assistance agreement entered between ages of 16 and 18
- Youth is in qualifying activity (Same criteria as EFC)
 - School, part time work, program to eliminate barriers to work, or unable to participate fulltime due to physical, intellectual, emotional or psychiatric condition.
- Youth cannot also receive PESS
- Medicaid can continue for youth who were adopted after turning 16 if previously spent at least 6 of last 12 months in licensed care.

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Advocacy Tips -

- Ensure all Relative & NonRelative caregivers are advised of all the options for licensing
- Use the Independent Living Benefit Table to review all current and future benefits associated with each option.
- Counsel children and caregivers to make an informed decision.

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Racial & Ethnic Disparity

Recognizing and addressing racial and ethnic disparities in placements

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Race Equity

Disproportionality: The underrepresentation or overrepresentation of a racial or ethnic group compared to its percentage in the total population

Disparity: The unequal outcomes of one racial or ethnic group as compared to outcomes for another racial/ethnic group

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Broward: Race Equity and Family Engagement Pilot Outcomes

Year	Removal Rate Overall	Removal Rate Pilot
2019	7.62%	1.56%
2020	12.29%	3.40%

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How This Was Done

- Looked at history and County and State data.
- Stakeholders came together in a Race Equity Child Welfare Work Group
- Supported design and implementation of CPIS Pilot Project at BSO
- All staff engaged in Race Equity Workshop
- Intentional in our work, language, purpose
- Each stakeholder completes Agency Assessment, complete Guiding Principles, and agrees to Shared Guiding Principles

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The Brave New World of Out of Home Care in Florida

Resources

3/19/21

- Pg 2. **Tip Sheet:** What Lawyers Can Do to Implement the Older Youth Provisions of the Consolidated Appropriations Act. Juvenile Law Center & Kids Voice
- Pg. 3. **ACYF-CB-PI-21-04:** Guidance and instruction related to the Supporting Foster Youth and Families through the Pandemic Act. Children's Bureau
- Pg. 29 **Family First Legal Guide:** The Family First Prevention Services Act of 2018, Guide for the Legal Community. American Bar Association, Center for Children & the Law
- Pg. 75 **Seizing the Opportunity:** Ten Ways to Advance Equity and Promote Well-Being through the Family First Prevention Services Act (FFPSA). Center for the Study of Social Policy
- Pg 77. **Child Welfare Stimulus Funds: Who's Eligible in Your State?** Annie E. Casey Foundation

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CLE Information

Reference Number: 2102046N
Title: Brave New World of Out of Home Care in Florida
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CLE Credits

General	3.0
Bias Elimination	0.5
Mental Illness	0.5

Certification Credits

Juvenile Law	3.0
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