

FINANCING CHILD MALTREATMENT PREVENTION AND FAMILY SUPPORT SERVICES:

Highlights from three agencies

November 15, 2017

Agenda

- **Introductions**, Anthony Williams, CFP
- **Background of child welfare finance survey**
- **Overview of funding of prevention/family support services**
- **Agency-level highlights:**
 - New York City
 - Kentucky
 - Maryland
- **Q&A**

Today's presenters:

- **Kristina Rosinsky**, Child Trends
- **Jacqueline Martin**, New York City
- **Jose Macedo**, New York City
- **Kevin Newton**, Kentucky
- **Scott Robinson**, Kentucky
- **Velma Graves**, Kentucky
- **Tracy Desimone**, Kentucky
- **Rebecca Jones Gaston**, Maryland

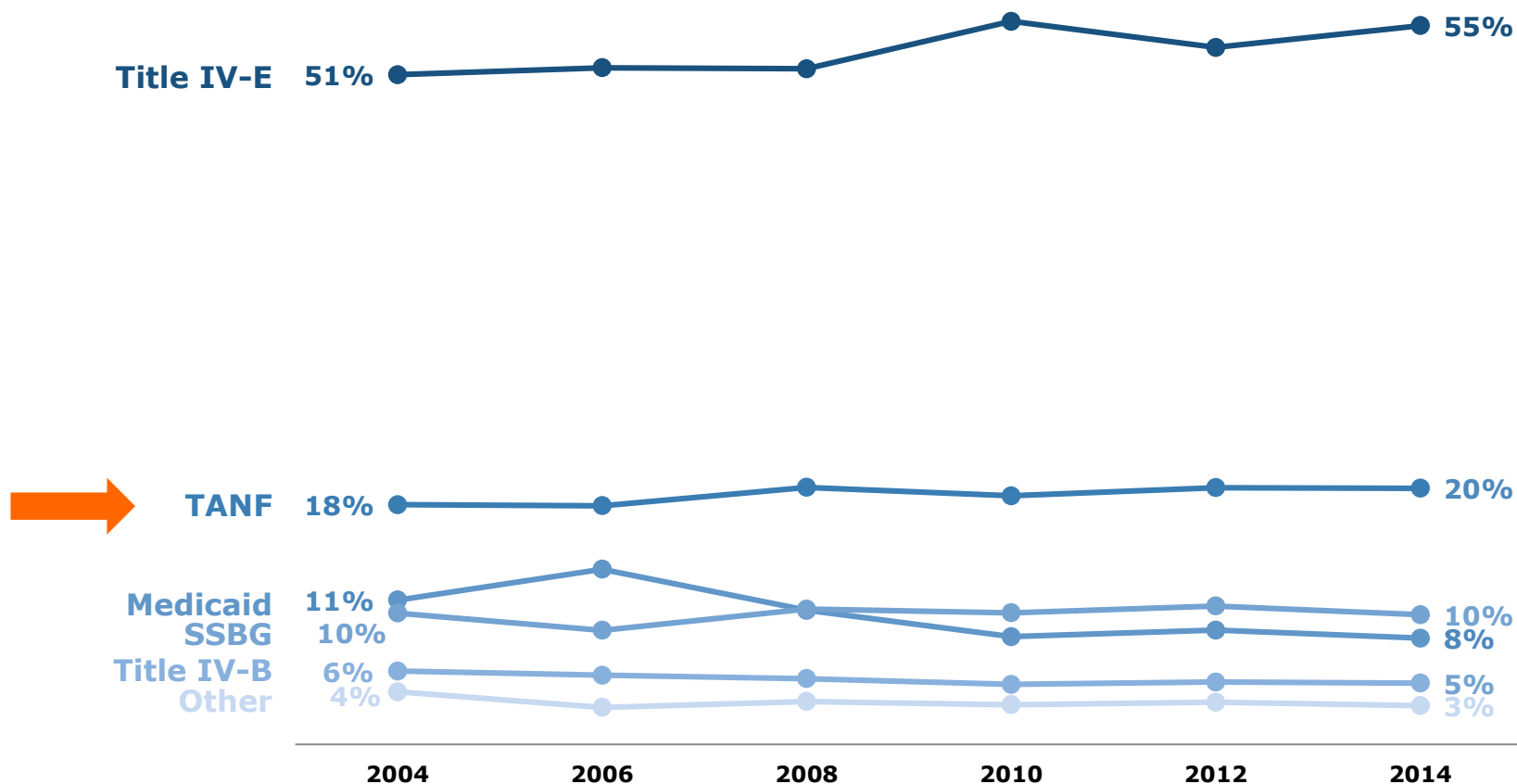
Survey Background

- Funded by the Annie E. Casey Foundation and Casey Family Programs; conducted by Child Trends
- Latest survey (SFY 2014) extends biennial tracking since SFY 1996
- Documents the sources and amounts of spending by child welfare agencies across the U.S.
 - National and state-specific trends
 - Comparisons across states
- 52 states (including DC and Puerto Rico)

Key survey findings

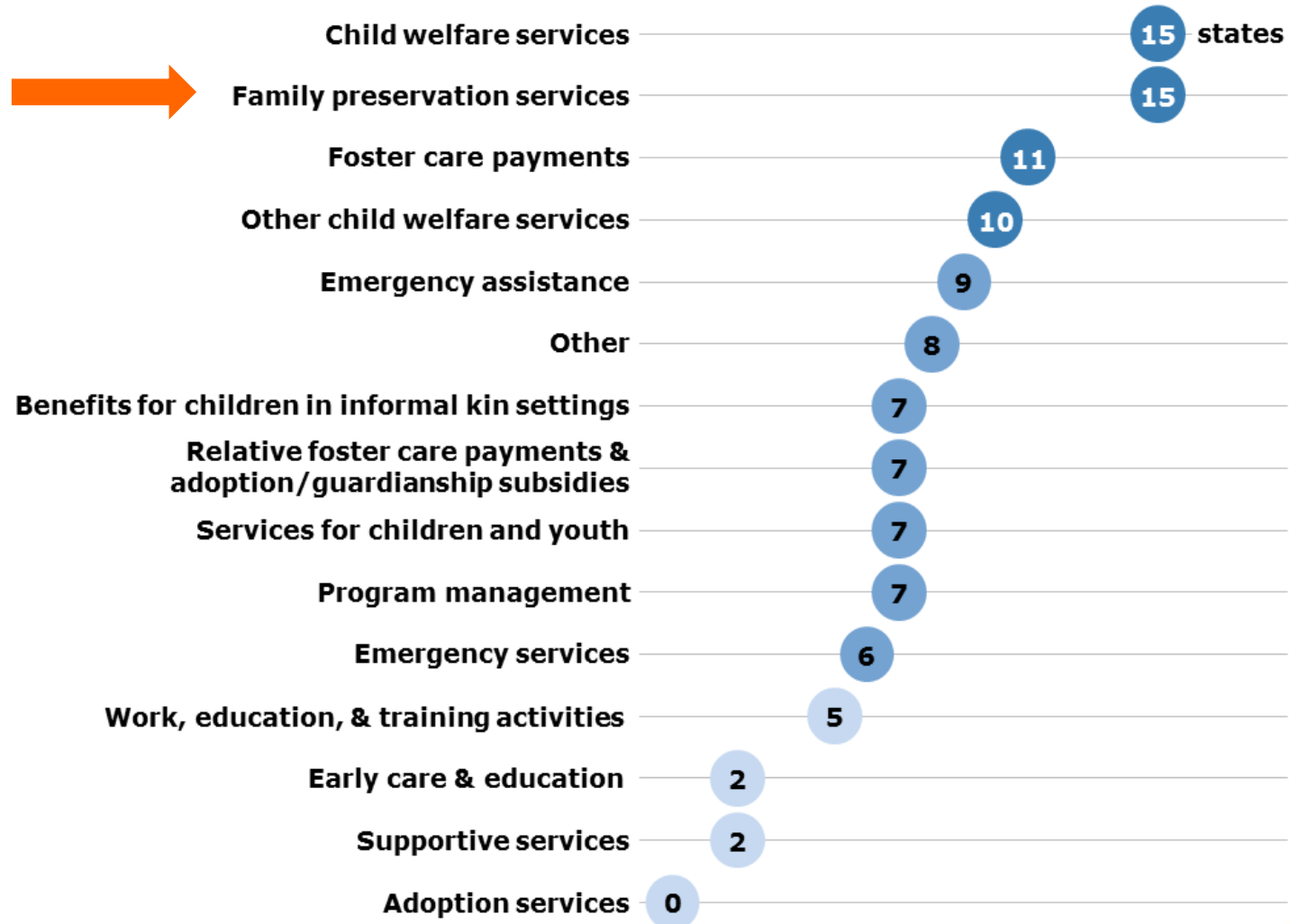
- Major funding streams that support prevention
 - TANF
 - SSBG
 - Title IV-B
 - Title IV-E waivers
 - State and local funds

Federal child welfare agency expenditures



Based on an analysis of 38 states with comparable data across all six years.

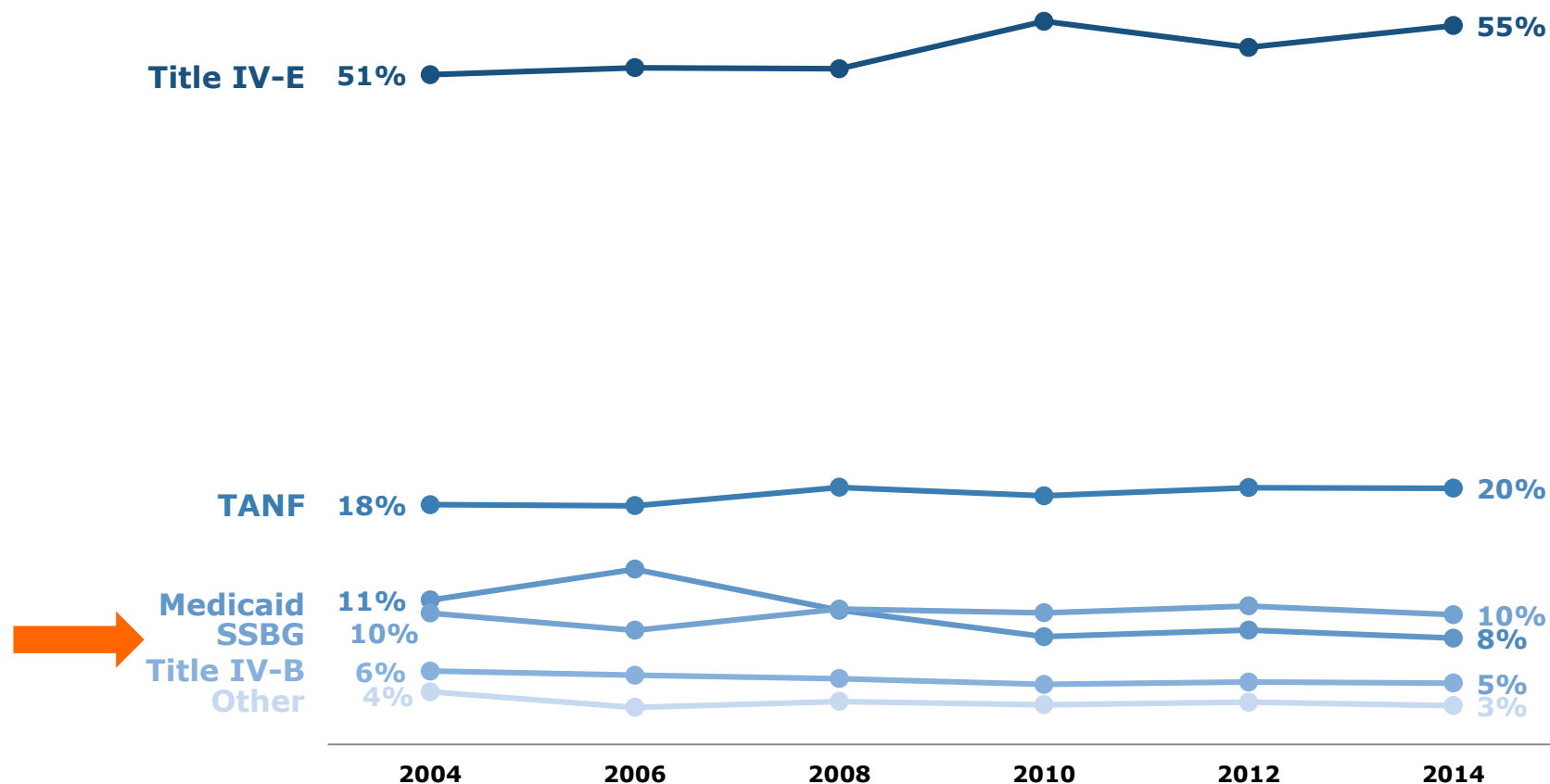
Child welfare activities most commonly supported by TANF



Key survey findings

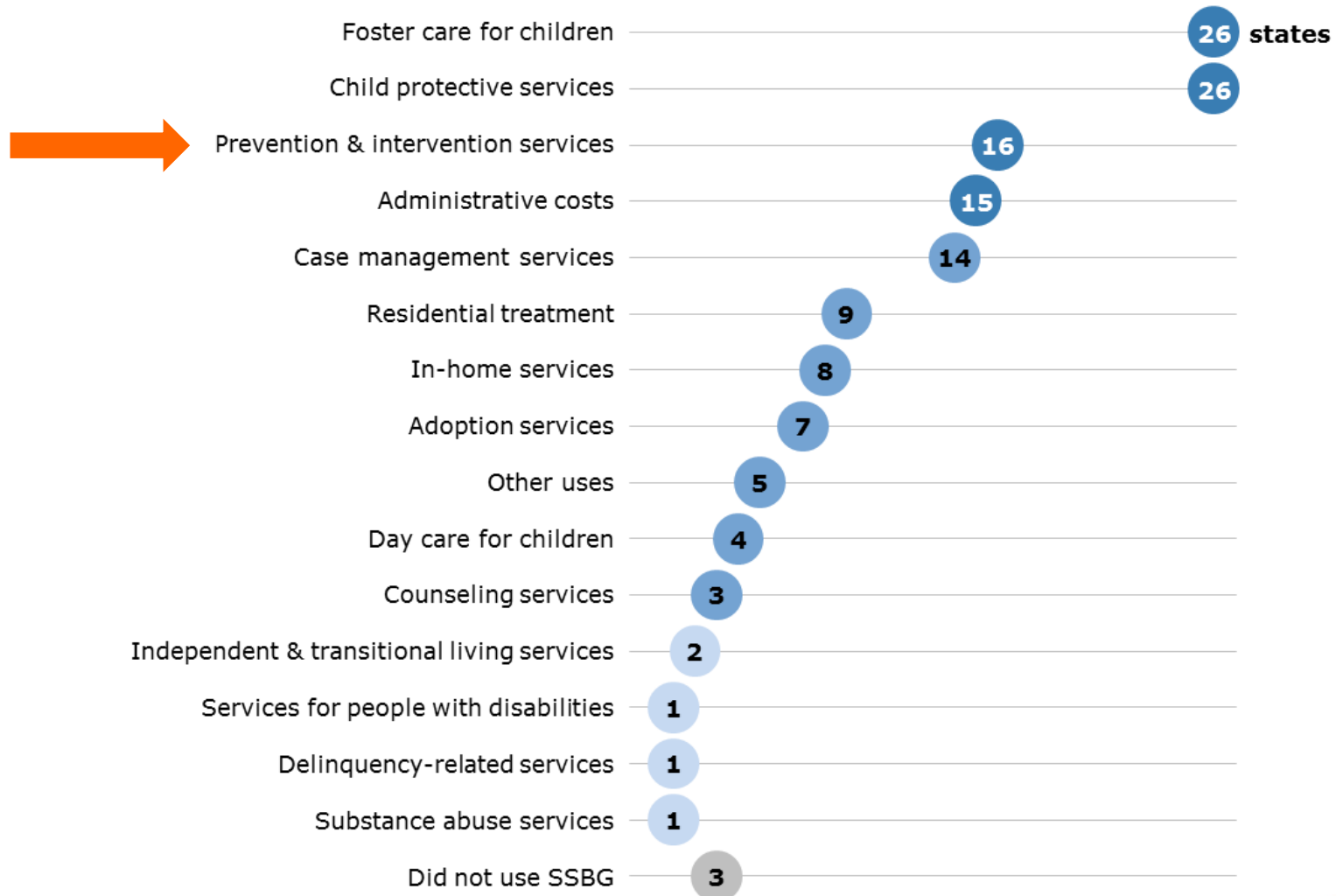
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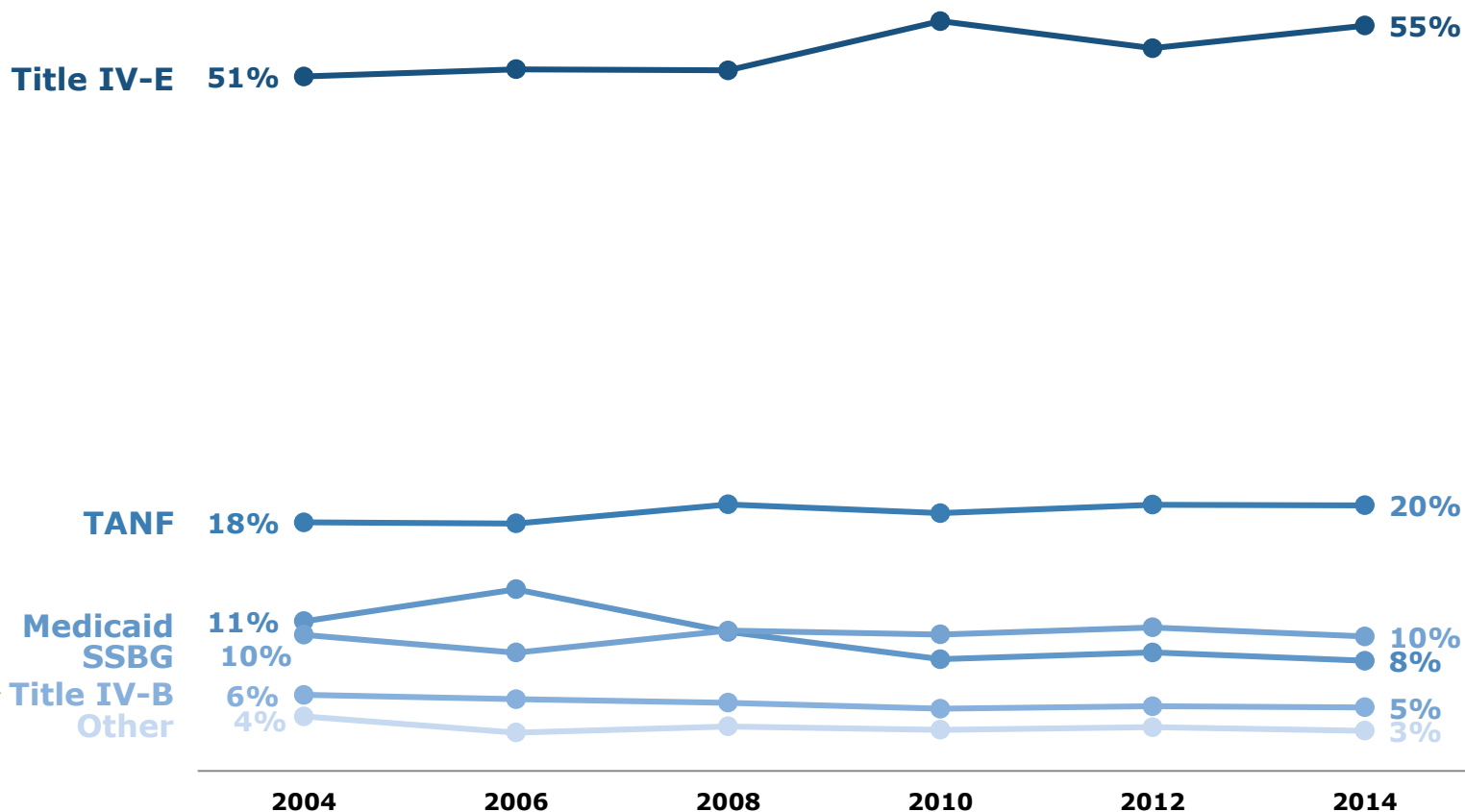
Child welfare activities most commonly supported by SSBG



Key survey findings

- Major funding streams that support prevention
 - TANF
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 - **Title IV-B**
 - Title IV-E waivers
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Based on an analysis of 38 states with comparable data across all six years.

Key survey findings

- Major funding streams that support prevention
 - TANF
 - SSBG
 - Title IV-B
 - **Title IV-E waivers**
 - State and local funds

Ten percent of Title IV-E waiver funds were used to support activities **not** funded via traditional Title IV-E

Title IV-E waiver spending in SFY 2014 (among 18 states)

Costs that would have been reimbursed without waiver

58%

Costs for IV-E eligible activities for non-IV-E eligible children

32%

Costs for non-IV-E eligible activities/services

9%

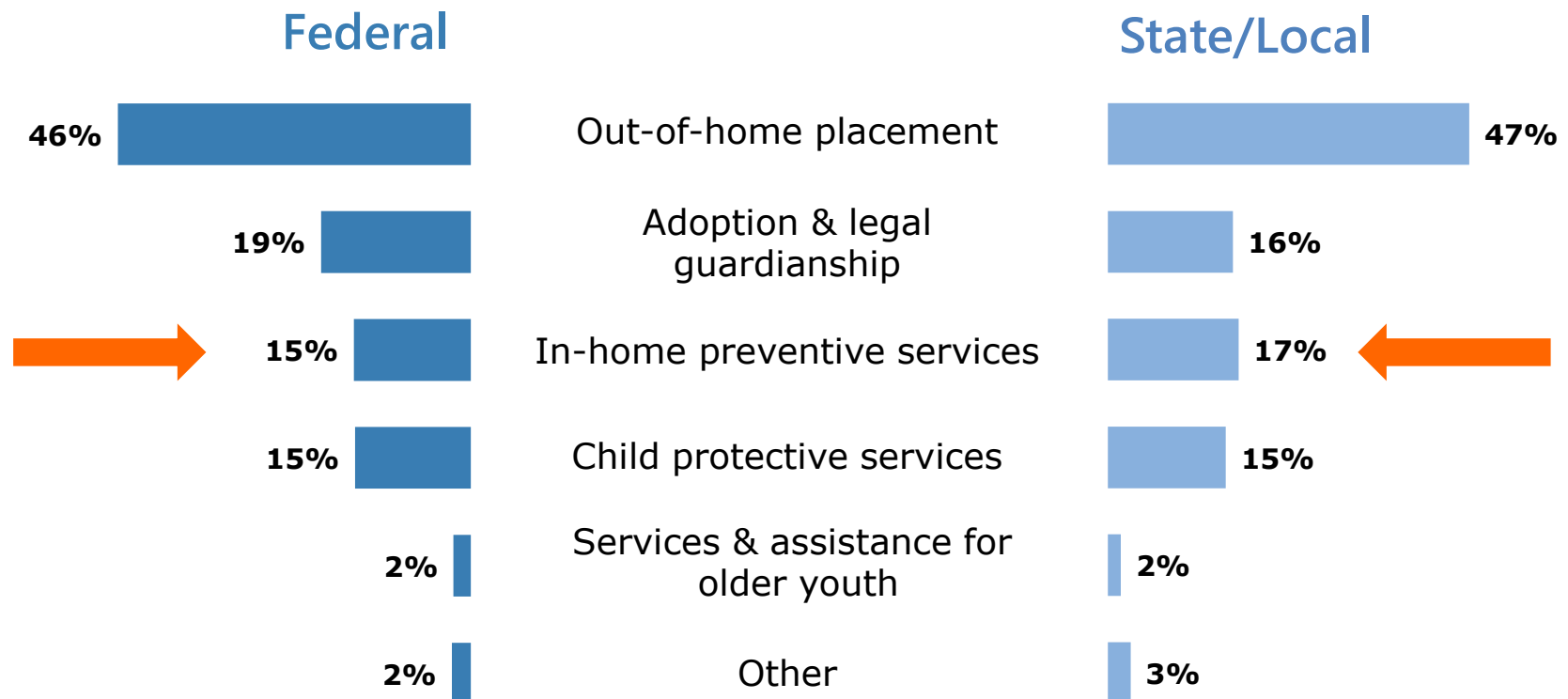
Project development and evaluation costs

1%

Key survey findings

- Major funding streams that support prevention
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 - SSBG
 - Title IV-B
 - Title IV-E waivers
 - **State and local funds**

Federal and state/local expenditures



Agency Highlights

Child Welfare Financing: NYC Preventive Services

ADMINISTRATION FOR CHILDREN'S SERVICES

Preventive Services for Children and Families:

Defining ACS Preventive Services

- Preventive Services are designed to help families keep their children safely at home. Services help to promote safety, permanency, and well-being for children and families in their homes and communities.
- ACS provides Preventive Services in collaboration with and through contracted, non-profit providers. Outcomes focus on:
 - Strengthening families,
 - Reducing the likelihood of placements into foster care for children,
 - Reducing the likelihood that children receiving preventive services will be the subject of subsequent abuse and neglect reports during and after services,
 - Promoting reunification & permanency for the children in foster care, and
 - Reducing children's risk of re-entry into foster care.

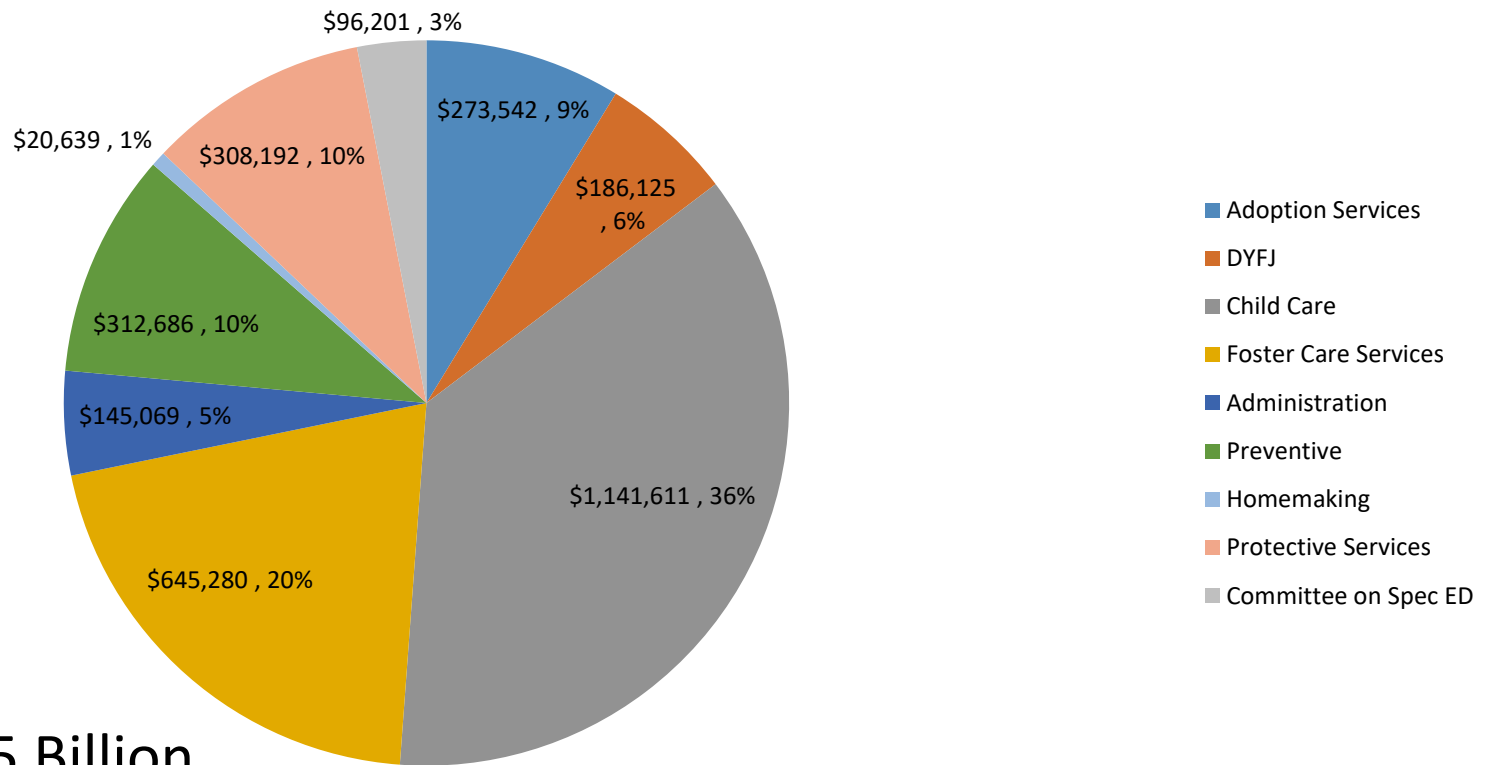
Preventive Services for Children and Families: *Overview & Scope of ACS Preventive Services*

- 54 community-based provider agencies
- 200+ preventive service programs
- 18 program types (including 10 Evidence-Based and Promising Practice models)
- Program services range in intensity from low-risk case management to high-risk interventions aimed at protecting children from repeated maltreatment, abuse and neglect
- More than 75% of preventive cases each year are referred by child protection during or following an investigation, including roughly 3,000 families under court order supervision

Preventive Services for Children and Families: *2015 Results/Outcomes*

- 10,858 families (47,000 children) received preventive services in 2015
- 1,613 SCR calls made during preventive services in 2015
- 42% of these SCR calls were made by service providers
- <7.5% indicated investigations within 6 months after preventive services ended
- <1% children removed to foster care within 6 months of leaving GP/FT-R
- <2% children removed to foster care within 6 months of leaving an evidence-based program intervention

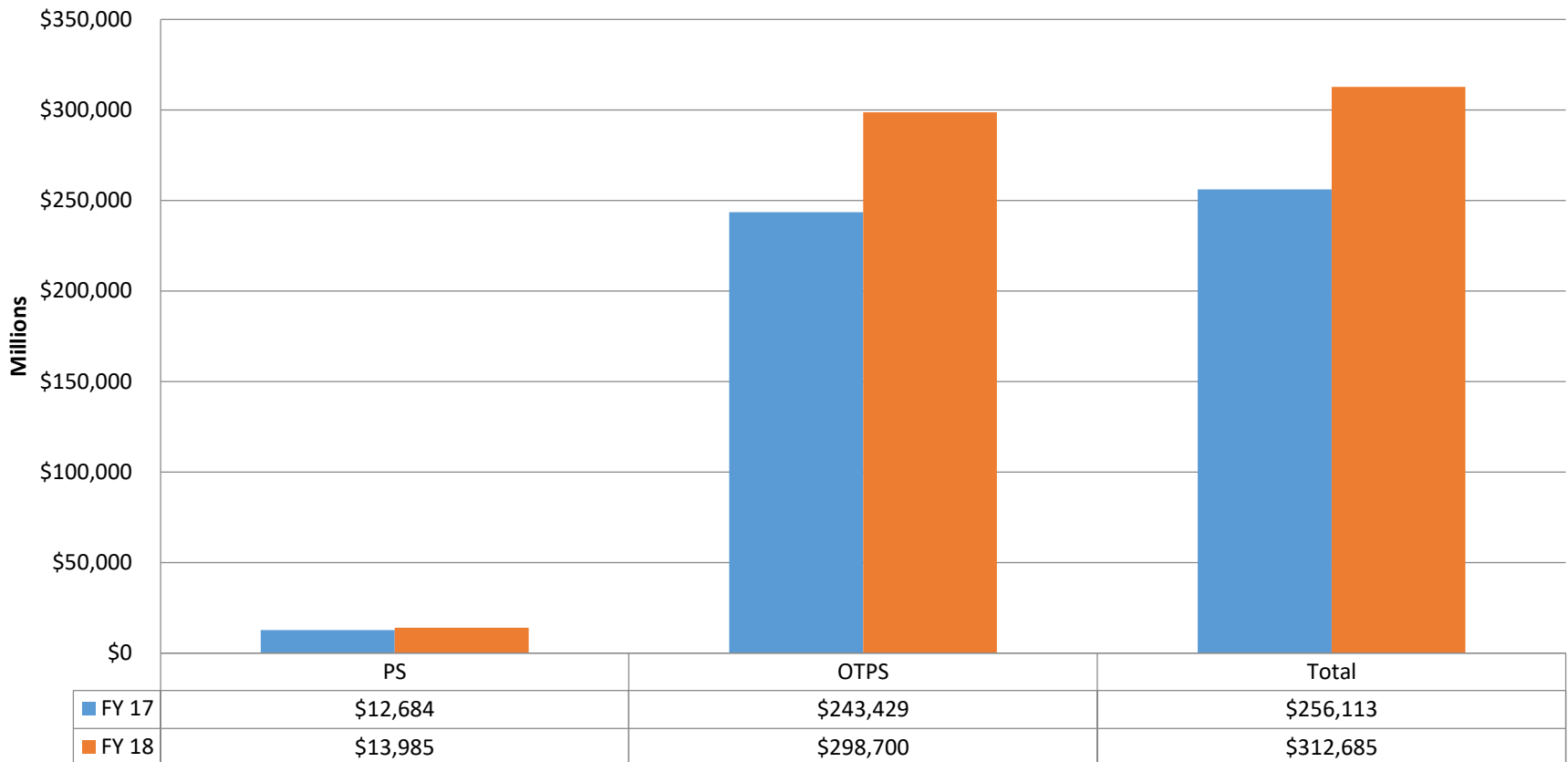
Preventive Services for Children and Families: *ACS Operating Budget Fiscal Year 2018*



\$3,129,345 Billion

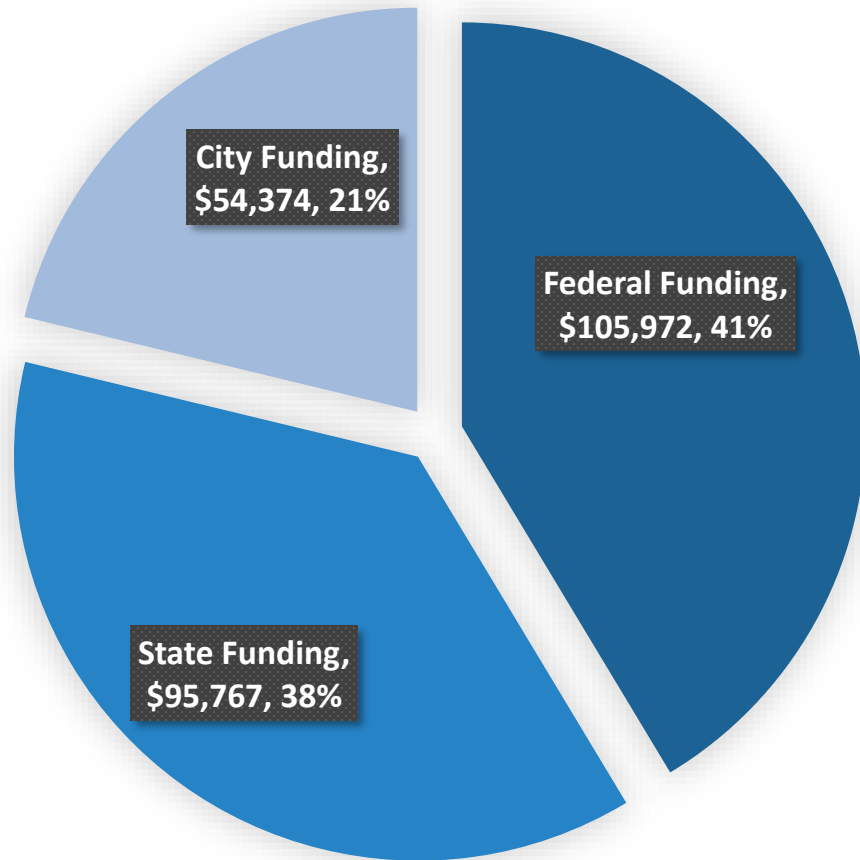
Preventive Services for Children and Families: *ACS Use of Preventive Funding*

ACS Preventive Budget

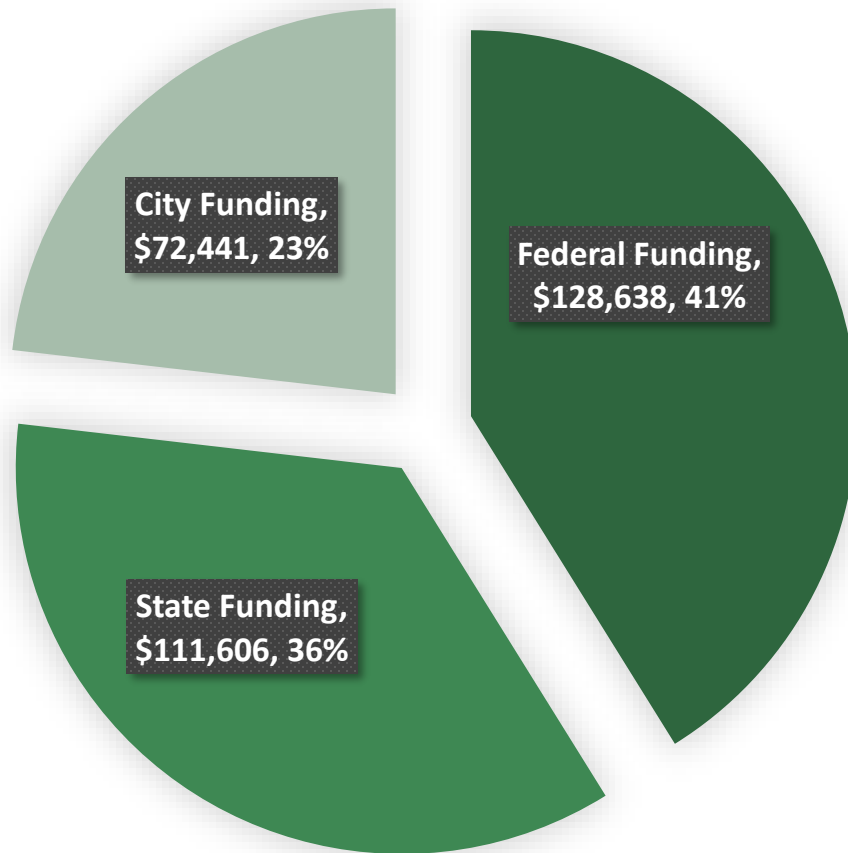


Preventive Services for Children and Families: *ACS Source of Funding (FY 17)*

**Funding Composition:
\$256,111 Millions**



Preventive Services for Children and Families: *ACS Source of Funding (FY 18)*



**Projected Funding:
\$312,685 Million**

Preventive Services for Children and Families:

Funding Stream Financing

How Does New York State Fund Preventive Services?

- ❑ Other Than Personnel Services (OTPS) and Personnel Services (PS)
- ❑ Federal Funds
 - ***NYC must spend \$193M in Federal dollars before accessing NYS Open-Ended Child Welfare Services funding***
 - ✓ Title IV-E (Random Moment Study: PS)
 - ✓ Title XX (TANF Funds transferred to Title XX)
 - ✓ Title IV-B Subpart 2 Promoting Safe and Stable Families
- ❑ NYS State Funds
 - ***Open-Ended Child Welfare Services***
 - ✓ 62% State funding
 - ✓ 38% City matching
- ❑ Community Optional Preventive Services (COPS)
 - ***Capped Funding Stream***
 - ✓ Nurse Family Partnership

**Commonwealth of Kentucky
Cabinet for Health and Family Services
(CHFS)
Department for Community Based Services
(DCBS)
Child Welfare Financing 2014
Prevention and In-Home Services**

Presented by:

**Tracy Desimone, Human Services Program Branch
Manager, Division of Protection and Permanency**

**Kevin Newton, Director, Division of Administration and
Financial Management**

**Scott Robinson, Budget Analyst, Division of
Administration and Financial Management**

**Velma Graves, Budget Analyst, Division of
Administration and Financial Management**

Topics

- ❖ Discuss overview of 2014 CWF survey and funding streams for in-home preventive services
- ❖ Provide an overview of in-home services provided by DCBS
- ❖ Discuss the different intensity levels of the various programs
- ❖ Discuss the number of families served
- ❖ Explain outcomes for prevention services

2014 Overview of Child Welfare Financing for Kentucky

Kentucky had approx. 7,100 children in Out of Home Care in 2014

Kentucky currently has approx. 8,500 children in Out of Home Care as of August 2017.

Fed IV-E funds (AA & FC)	\$ 87,804,048.00
IVB – P art 1	\$ 4,281,248.00
IVB – Subpart 2	\$ 6,126,732.00
Medicaid	\$ 0.00
TANF	\$ 80,705,993.86
SSBG	\$ 21,891,130.00
Other Federal funds	\$ 13,167,326.11
Total Federal Funds	\$213,976,477.97
State CW structure	State Administered
Total State Funds	\$330,846,700.00
Local	\$ 0.00
Total State	\$330,846,700.00
Used to match Federal dollars	\$ 48,438,437.00
Used for MOE	\$ 19,803,331.00
Total	\$ 68,241,768.00
Which program MOE	TANF
Fed	\$213,976,477.97
State	\$330,846,700.00
Total	\$544,823,177.97

Funding Streams for In Home Services

- Community Collaboration for Children (CCC) are funded by the Community-Based Child Abuse Prevention (CBCAP) grant, which is a sub-grant under the Child Abuse Prevention and Treatment Act (CAPTA).
- Family Preservation Program (FPP) uses a combination of state and federal funds, which includes Temporary Assistance for Needy Families (TANF) block grant funds.
- Diversion families must be eligible for TANF funds.
- Kentucky Strengthening Ties & Empowering Parents (KSTEP) is funded by Title IV-E (of the Social Security Act) funds as part of a waiver demonstration project.
- Sobriety Treatment & Recovery Teams (START) uses a combination of TANF General Maintenance of Effort, Title IV-E Waiver monies, Medicaid, and federal grants.

Intensity of Services

- **Community Collaboration for Children**-Lowest risk and intensity of services
- **Family Preservation**- Moderate risk and intensity of services
- **Family Reunification**-Moderate to high risk and intensity of services
- **Diversion**-Moderate to high risk and intensity of services
- **Kentucky Strengthening Ties and Empowering Parents/Sobriety Treatment and Recovery Teams**-Highest risk and intensity of services

Community Collaboration for Children (CCC)

Program Goal: To teach families needed skills to provide a safe home environment and divert the family from DCBS interventions

- Serves children ages 0-17
- Includes families referred by community partners without DCBS involvement and DCBS cases of the lowest risk
- Services are short-term and aimed at empowering families through teaching skills necessary to safely parent and become self-sufficient
- Lowest level of intervention services



Community-Based Child Abuse Prevention Grant

Services Provided by grant support community based efforts to develop, operate, expand enhanced federal initiatives aimed at preventing Child Abuse and Neglect and support a network of coordinated resources and activities to strengthen and support families.

- 100% Federal funding
- 20% In-kind match provided by vendors
- Actual spent in SFY 2014 approx. \$1.5 million
- Actual spent in SFY 2017 approx. \$2.2 million
- Contracted services to approx. 20 agencies across the state

Family Preservation



Program Goal: To support DCBS' efforts to ensure safety, permanency, and well-being of children by preventing unnecessary placement in out-of-home care, as well as enhance protective and parental capacities of caregivers

- Serves children 0-17
- Services are short-term, intensive, designed for in-home crisis intervention
- Children are at moderate to imminent risk of removal, or have a child being placed back into the home after an out-of-home care episode
- Moderate level of risk associated with these cases

Family Reunification

- Program Goal: To support DCBS' efforts to ensure safety, permanency, and well-being of children and facilitate the safe and timely return home for a child in placement
- Serves children 0-17
- Services are short-term, intensive, and designed to assist families in managing the parent/child relationship to prevent recurrence of maltreatment and re-entry into out-of-home care
- Children have been placed out of the home, risk has been minimized and the children have returned home, or are in the process of returning home
- Moderate to high level of risk associated with these cases

Diversion

Program Goal: To safely divert children who are at risk of placement in out-of-home care and to return children who have recently been placed in out-of-home care but could be returned safely to their home with in-home service provision

- Serves children ages 5-17
- Serves families who are TANF-eligible
- Services last 3-4 months
- Higher level of risk associated with these cases



Family Preservation Program and Diversion

Funding for grant must be spent on Family Preservation, Family Support, Time-limited reunification Services and Adoption promotion and support.

- Promoting Safe and Stable Families grant
 - IV-B2 75%
 - Federal 25%
 - State approx. \$6.0 million spent in 2014
- State general funds including TANF MOE approx. \$7.0 million spent in 2014
- Contracted services to approx. 20 agencies across the state.

Kentucky Strengthening Ties and Empowering Parents (KSTEP)



- Program goal: To reduce the number of children entering out-of-home care and decrease the occurrence of repeat maltreatment by providing parental substance abuse intervention, intensive in-home services, and quick access to substance abuse treatment
- Serves children ages 0-9
- Services can last up to 8 months
- Highest level of risk associated with these cases

KY Strengthening Ties and Empowering Parents

KSTEP is a IV-E waiver program that provides intensive in home services to families experiencing substance abuse disorder.

The program is currently being piloted in 4 counties in the Northeastern region of the state with plans to expand state wide in the coming years.

Program is just getting started and has served 21 families and 40 children since its inception.

Since the program is in its infancy, there are no outcomes to report at this time

- \$200K funded approx. in SFY 2017 through the Title IV-E Waiver.
- IV-E Waiver began October 2015 and scheduled to end September 2019.

Sobriety Treatment and Recovery Teams (START)

Primary goal: To help parents achieve sobriety while keeping children safely in the home, whenever possible

- Serves families that have at least one child under the age of 6
- Services can last as long as needed, but average cases are opened for approximately 14 months
- Highest level of risk associated with these cases



Sobriety Treatment and Recovery Teams (START)

Kentucky Start is an intensive intervention model for substance abusing parents and families involved in the child welfare system.

We currently have 490 children active AND 246 families active in START across all five county sites. Currently just over half capacity.

Assumptions based on full capacity with expansion

Jefferson: 120 families with an estimated 239 children

Kenton: 120 families with an estimated 239 children (once we have fully expanded)

Boyd: 60 families with an estimated 119 children

Daviess: 45 families with an estimated 90 children

Fayette: 60 families with an estimated 119 children

Total: 405 families with an estimated 806 children at a time

- \$2.0 million approx. funded each SFY from TANF (MOE) funding
- \$300K approx. federal demonstration project grant
- \$1.0 million approx. funded in SFY 2017 through the Title IV-E Waiver
- IV-E Waiver began October 2015 and scheduled to end September 2019.

CCC, FPP, Diversion Statewide Totals

	SFY2015	SFY2016	SFY2017	Total
Number of referrals accepted	3,424	3,363	3,003	9,970
Number of children at risk of placement in accepted referrals	5,260	5,281	4,948	15,489
Total number of children in home in accepted referrals	8,032	7,833	6,968	22,833

CCC, FPP, Diversion Statewide Totals (cont.)

	SFY2015	SFY2016	SFY2017	Total
Percent of target children in the home at closure	96%	95.7%	92.3%	94.7%
Number of families services complete	2,907	2,854	2,455	8,216

CCC, FPP, Diversion Statewide Totals (cont.)

	SFY2015	SFY2016	SFY2017	Total
Percent of target children still in the home at 6 month follow-up	86.3%	88.1%	81.9%	85.8%
Percent of target children still in the home at 12 month follow-up	83.2%	82.9%	76.7%	81.3%

Families Served KSTEP
Totals since implementation on July 1, 2017
Data collected on 8/11/17

	Carter	Greenup	Mason	Rowan	Total
Number of referrals accepted	4	8	2	2	16
Total number of children in home in accepted referrals	6	14	5	4	29

START Families Served and Program Outcomes

START (Since implementation in 2007 through present)

- Women who receive START services are twice as likely to achieve sobriety as compared with those who did not receive services.
- Children are half as likely to enter out-of-home care when the family receives START services as opposed to families who do not.
- Since inception, 836 cases have been closed; 421 were closed successfully; and 192 achieved partial success.
- Repeat maltreatment, after 6 months, occurred at a rate of 4.6% in families receiving START services, and at a rate of 10% for families not involved with START.

Questions



INVESTING IN PREVENTION

Rebecca Jones Gaston, MSW

Executive Director, Social Services Administration

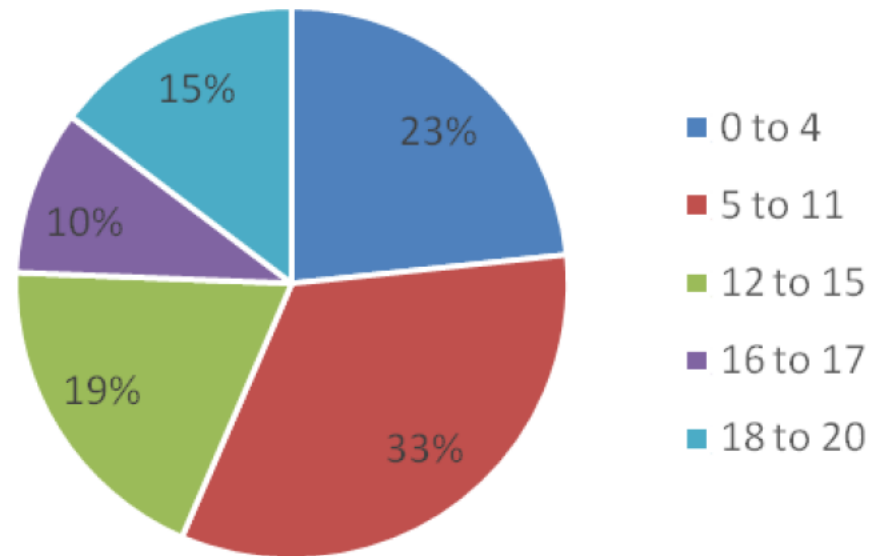
Maryland Department of Human Services



Maryland at a Glance

Age Groups	Population of Youth Ages 0 to 20
Totals	1,578,736
0 to 4	367,095
5 to 11	526,354
12 to 15	300,408
16 to 17	154,871
18 to 20	230,008

Population of Youth Ages 0 to 20,
by Age Group

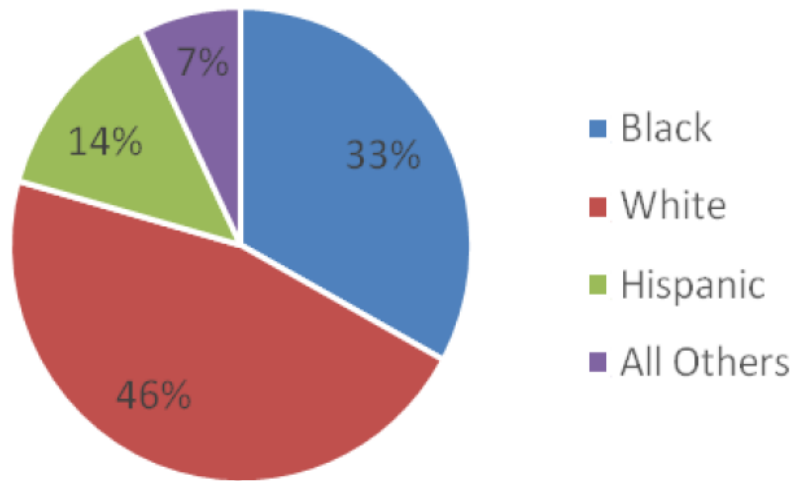


Source: Bridged-Race Population Estimates Data Files -

http://www.cdc.gov/nchs/nvss/bridged_race/data_documentation.htm

Maryland at a Glance

Population of Youth
Ages 0 to 17, by Race

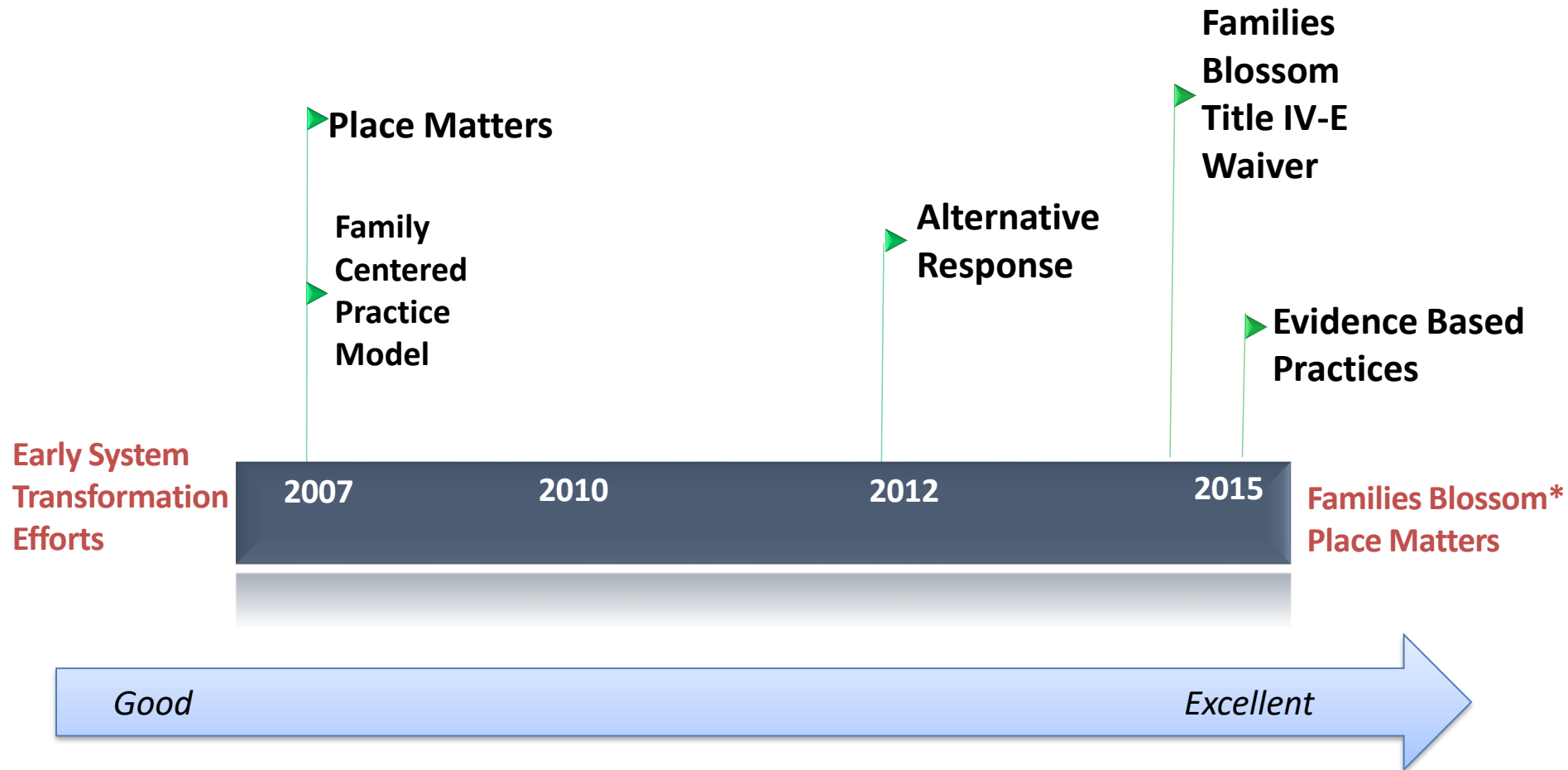


Race	Population of Youth Ages 0 to 17	Population of Youth Ages 0 to 20
Totals	1,348,728	1,578,736
Black	445,680	520,803
White	608,858	721,912
Hispanic	196,003	222,031
All Others	98,187	113,990

Source: Bridged-Race Population Estimates Data Files -

http://www.cdc.gov/nchs/nvss/bridged_race/data_documentation.htm

SSA's System Transformation – Looking Back



Maryland Results to Date



- Reduced the number of children in foster care from over 10,300 children in 2007 to 4,700 in 2017

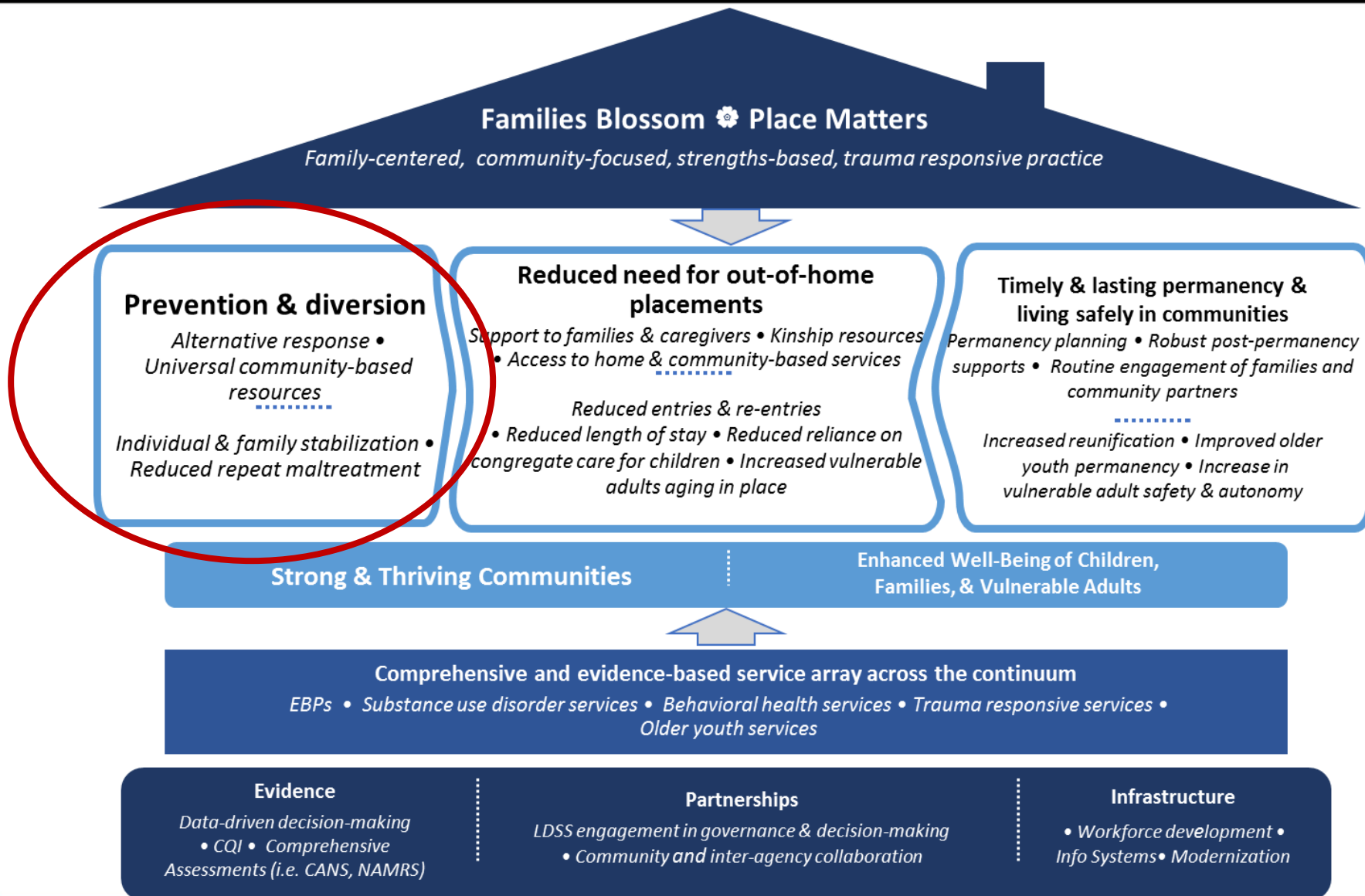


- Increased exits to permanency (reunification, adoption, guardianship,) from 66% in 2008 to 83% in 2017)



- Reduced number of children placed in group homes from nearly 20% in 2007 to 10% in 2017.

Families Blossom 🌸 Place Matters Strategic Direction



Prevention and Diversion

Types of Responses

- Risk of Harm
 - Assessment
 - Services
- CPS
 - Alternative Response
 - Investigation
- Placement & Permanency

Practice Shifts, Services & Supports

- Family Preservation
- Family Involvement Meetings (FIMs)
- Alternative Response (AR)
- Families Blossom

What has been funded....

Family Preservation

- University of Maryland
 - ❖ Family Connections
- Family Tree
 - ❖ Research Based Parenting Classes
 - ❖ Support and Resources
 - ❖ Home Visiting

- Financial Assistance
- Mental Health Services
- Social/ Recreational Activities
- Education Services
- Faith Based Services
- Employment Services/Training
- Relative Caregiver Services
- Medical Services

Families Blossom Funding: Purpose



- Seize unique opportunity provided through IV-E Waiver :
 - Create a family-centered, strengths-based and trauma-responsive child welfare system of care
 - Prevent entries and re-entries into foster care
 - Improve outcomes in safety, permanency and well-being
 - Address child and family needs that cannot be addressed with other funding sources

Families Blossom Funding: Objectives



- Expand existing services to populations who could not previously be served
- Provide funding for new services that fill gaps in the service array
- Build capacity of community partners in family-centered, strengths-based and trauma-responsive practice
- Meet needs of children and families that are part of their service plan

Families Blossom: Allowed Uses and Service Populations



Funds may be used to meet individual needs of children, youth, and families, *and/or* local service, program and infrastructure needs.

Funds can be used to serve children and families who are:

- At risk of child welfare involvement.
- Have an open CPS, In Home or Out of Home child welfare case

Families Blossom: What has been funded



- Parent Education
 - Incredible Years
 - Nurturing Parenting Program
 - Healthy Families America
 - Strengthening Families Program
- Integrated Practice
 - Solutions Based Case Work
 - Nurturing Heart

Families Blossom: What has been funded



- Substance Use Services
 - Safe Babies Court
 - Families in Recovery
 - Addictions Specialists
- Behavioral/Mental Health Services
 - FFT
 - PCIT
 - MST
 - Seeking Safety
 - Partnering for Success/CBT+

Questions?

Sarah Catherine Williams
swilliams@childtrends.org

Kristina Rosinsky
krosinsky@childtrends.org