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NATIONAL HOME VISITING SUMMIT

July 25, 2023

Family First Prevention Services Act: Child Welfare and Home Visiting

Home Visiting Advocacy &
Policy Community of Practice



Advocacy & Policy CoP: Your Co-Facilitators

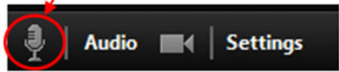

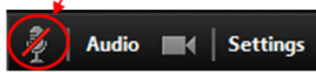


Kayla Goldfarb



Michelle Hughes

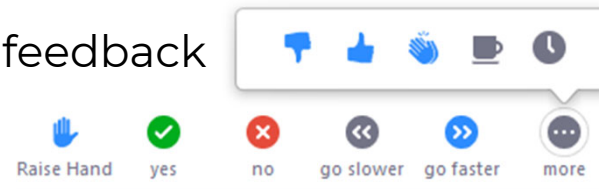
Welcome!

- ⑩ Please mute your line   

- ⑩ Use the “chat” feature to communicate with the group or specific members.



- ⑩ Use reactions to share feedback



- ⑩ Technical difficulties? Please “chat” Events @ Start Early

- ⑩ Reminder – please fill out a quick survey at the end of the webinar!

Save the Date!



START EARLY | National Home Visiting Summit
IN-PERSON & VIRTUAL CONFERENCE

SAVE THE DATE!
JANUARY 31 - FEBRUARY 2, 2024


WASHINGTON, D.C.

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NATIONAL HOME VISITING SUMMIT



The Start Early Consulting **Impact Initiative 2023**

- **How it Works:** 10-12 selected applicants receive 100+ hours of tailored support from Start Early Consulting in a 6–12-month engagement
- **Engagement Windows:** September 2023 through August 2024 (Application ends 8/2/23)
- **Benefits:**
 - Boost your systems-building work;
 - Gain insights from other states and communities; and
 - Promote equity and quality



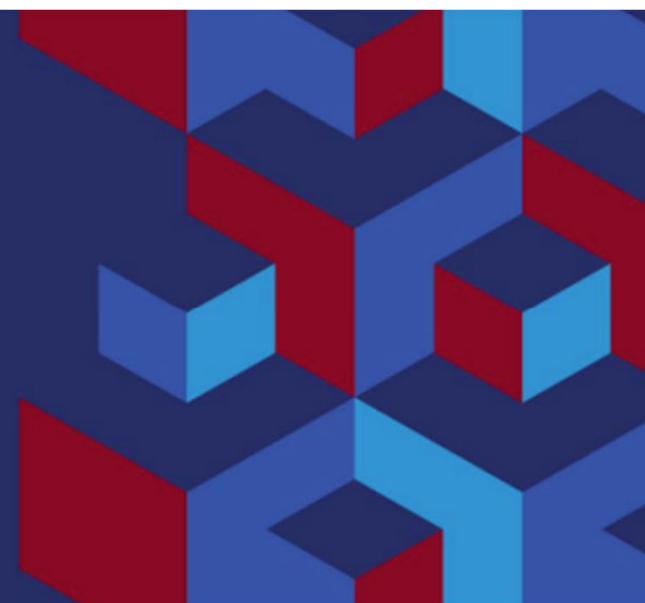
Apply Now at StartEarly.org/ConsultingImpactInitiative

Agenda

- In the Chat – *How informed are you on the implementation of Family First Prevention Services Act within your own state?*
- Chapin Hall & Start Early Chapin Hall: *Home Visiting in the Family First Context*
- FFPSA implementation state panel: *Indiana and Nebraska*
- Opportunities to engage the Administration around home visiting and the Family First Prevention Services Act

Chapin Hall & Start Early

Home Visiting in the Family First Context



Insights from State Child Welfare Leaders and Peer-Peer Discussions

- Plenary Session: “Home Visiting & Child Welfare: Emerging Family First Opportunities and Challenges” at 2022 National HV Summit
 - Follow up: 250 practitioners, program directors, and policy professionals explored child welfare and home visiting innovations and partnerships emerging through FFPSA
- *What existing opportunities do you see in the Family First context?*
- *What do you see as the future of child welfare and home visiting working together in the Family First context? Can you share examples of how this is being thought about?*
- *What important race equity and culturally relevant considerations need to be elevated in this context?*
- **New brief** opportunities, challenges, and innovations related to home visiting in the Family First context
 - reflects national interest in leaning into partnerships between HV and child welfare to create structural conditions that benefit families and provide access to supports without stigma
 - recommendations to strengthen collaboration between home visiting and child welfare at the federal, state, and local levels

Family First Prevention Services Overview

- The Family First Prevention Services Act (Family First) aims to **reduce foster care use and promote prevention** in child welfare.
 - Legislation created in 2018
 - Opportunity to build out a theory of change regarding how family strengthening programs like HV can meet the prevention aims of child welfare
- HV can reduce child welfare involvement by building trusting relationships with families and identifying meaningful goals and supports. HV **can be the primary family engagement service**, reducing the need for investigative and child protective intervention over time.
- Many states are centering their Family First prevention approach around voluntary home visiting, expanding access to such programs early to prevent child welfare involvement.
 - April 2023: 28 jurisdictions include the Parents as Teachers model in their Family First Prevention Plan, 22 include the Healthy Families America model, and 15 include the Nurse-Family Partnership model
- Collaboration between child welfare and home visiting is essential to achieve the **prevention goals** of the Family First Act → **scaling up HV services**



Challenging Histories within Child Welfare

Acknowledging and providing data that demonstrates the ways in which **child welfare systems have surveilled and intervened coercively with families, particularly families of color**, will be necessary to create an authentic home visiting and child welfare partnership built on family unity

- Emergence of child welfare system in the late 19th and early 20th centuries alongside institutionalization of children with limited consideration of family preservation.
- Bifurcation of economic and concrete supports, like early childhood care, from child welfare as if not related.
- Rise of surveillance and investigation processes, along with mandatory child abuse reporting laws saw increased removal of children from families, including disproportionately removing children from families of color
- 1997 Adoption and Safe Families Act (ASFA) emphasized timely permanency for children, quicker termination of parental rights to facilitate adoption
- Yet, there are rising calls to focus on prevention and family support; address equity and bias; and emphasize family-centered approaches, scale up home visiting to make child protective services largely obsolete



Evidence-based Home Visiting Models	Family First Clearinghouse Rating	Number of States and Jurisdictions with Model in Family First Prevention Plan	States and Jurisdictions with Model in Family First Prevention Plan (★ indicates approval)			
Child First	Supported	0	N/A			
Family Check Up for Children	Well-Supported	3	California ★ New York ★ North Dakota ★			
Family Spirit	Promising	2	Michigan ★ Oregon ★			
Healthy Families America	Well-Supported	23	Arizona California ★ Colorado ★ Connecticut ★ Florida ★ Georgia ★	Hawai'i ★ Illinois ★ Indiana ★ Kansas ★ Maryland ★ Michigan ★	Montana ★ Nebraska ★ New Hampshire ★ New York ★ North Dakota ★ Ohio ★	Oregon ★ Pennsylvania South Carolina★ West Virginia ★ Wisconsin★
Nurse Family Partnership	Well-Supported	15	Arizona California ★ Colorado ★ Connecticut ★	Florida ★ Maryland ★ Michigan ★ Montana ★	New York ★ North Dakota ★ Oregon ★ Pennsylvania South Carolina ★	Washington State ★ Wisconsin ★ Tennessee ★
Parents as Teachers	Well-Supported	28	Arizona California ★ Colorado ★ Connecticut ★ Florida ★ Georgia ★ Hawai'i ★ Illinois ★	Indiana★ Kansas ★ Maine ★ Michigan ★ Minnesota ★ Montana ★ Nebraska ★ New York ★	North Carolina ★ North Dakota ★ Ohio ★ Oregon ★ Pennsylvania South Carolina ★ Utah ★ Washington, DC ★	Washington State ★ West Virginia ★ Wisconsin ★ Tennessee ★
SafeCare	Supported	7	Arkansas ★ Colorado ★	Iowa ★ Michigan ★	Oklahoma ★ Utah ★	Washington State ★

Recommendations for State Policy Leaders



Opportunities and Challenges to Monitor

- Engaging families by providing comprehensive support centered on their strengths and needs
 - Cultivating community-oriented and culturally responsive practices to reduce racial inequities
 - Building a well-supported, community-based home visiting workforce
 - Establishing and maintaining authentic relationships with families through transparency and trustworthiness
 - Acknowledging and addressing inequities that harm children and families of color and lead to further disparities and disproportionate representation in the child welfare system
 - Coordinating and integrating services, funding, and data across child welfare and home visiting systems
-
- Maintain transparency with families about home visitors' status as mandated reporters and clearly define roles between HV and CW
 - Advocate for macro-policy changes to resource families and reduce inequities through partnerships across home visiting and child welfare leadership
 - Scale up home visiting services through coordinated service delivery, financing, data sharing, and continuous quality improvement at federal, state, and local levels
 - Coordinate appointments and administrative functions between child welfare and HV for efficient access to services
 - Carefully consider data sharing to protect family privacy and prevent surveillance by child welfare



Opportunities for State Systems Leaders and Advocates

- Engaging families by providing comprehensive support centered on their strengths and needs
- Cultivating community-oriented and culturally responsive practices to reduce racial inequities
- Building a well-supported, community-based home visiting workforce

- Involve families as co-designers and thought leaders for true systems change
- Empower families to take an active role in decision-making
- Move away from a compliance-driven child welfare approach.
- Using Family First resources to build a high-quality home visiting workforce, rather than building more child welfare workforce capacity
- Foster partnerships between child welfare and home visiting to reduce burnout and increase retention
- Decrease caseloads and enhance service quality

Innovations to scale

- Prioritizing preventative approaches that are holistic and adaptable to meeting families where they are
- Building partnerships across child welfare and home visiting systems at the local level
- Expanding programs and funding to reach more families and use data-driven practices

- Offer mental health and substance use supports, technology assistance, and improved access to healthcare, housing, transportation, childcare, and socio-economic services
- Opportunities to increase economic and concrete supports to families through home visiting and child welfare collaboration
- Foster strong relationships by bringing child welfare and home visiting staff together for mutual learning
- Partner with local service providers to address gaps and increase available services, adapting programming to family needs in real time



Recommendations for State Policy Leaders

- **Scale Up Home Visiting**
 - Collectively assess existing capacity and project needs, create strategies for scaling up home visiting to meet those needs, and determine the policy and resource requirements
 - Maximize and braid federal funds (including Medicaid, MIECHV, and Family First funding)
- **Partner and Collaborate Across Child Welfare & Home Visiting**
 - Joint strategic planning across systems
 - Push for joint federal guidance and partnerships
 - Advocate to meet basic needs of families
 - **Support a diverse and community-based workforce**
 - training for child welfare and home visiting staff to ensure their work with families is culturally humble and responsive
 - Prioritize recruitment and retention of staff who are representative of the communities being served with **robust compensation**
- **Center Family Engagement and Family Voice**

State Panel: FFPSA Implementation

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www.in.gov/dcs



Indiana IV-E Prevention Plan

Hannah Robinson, DCS Prevention Services Manager

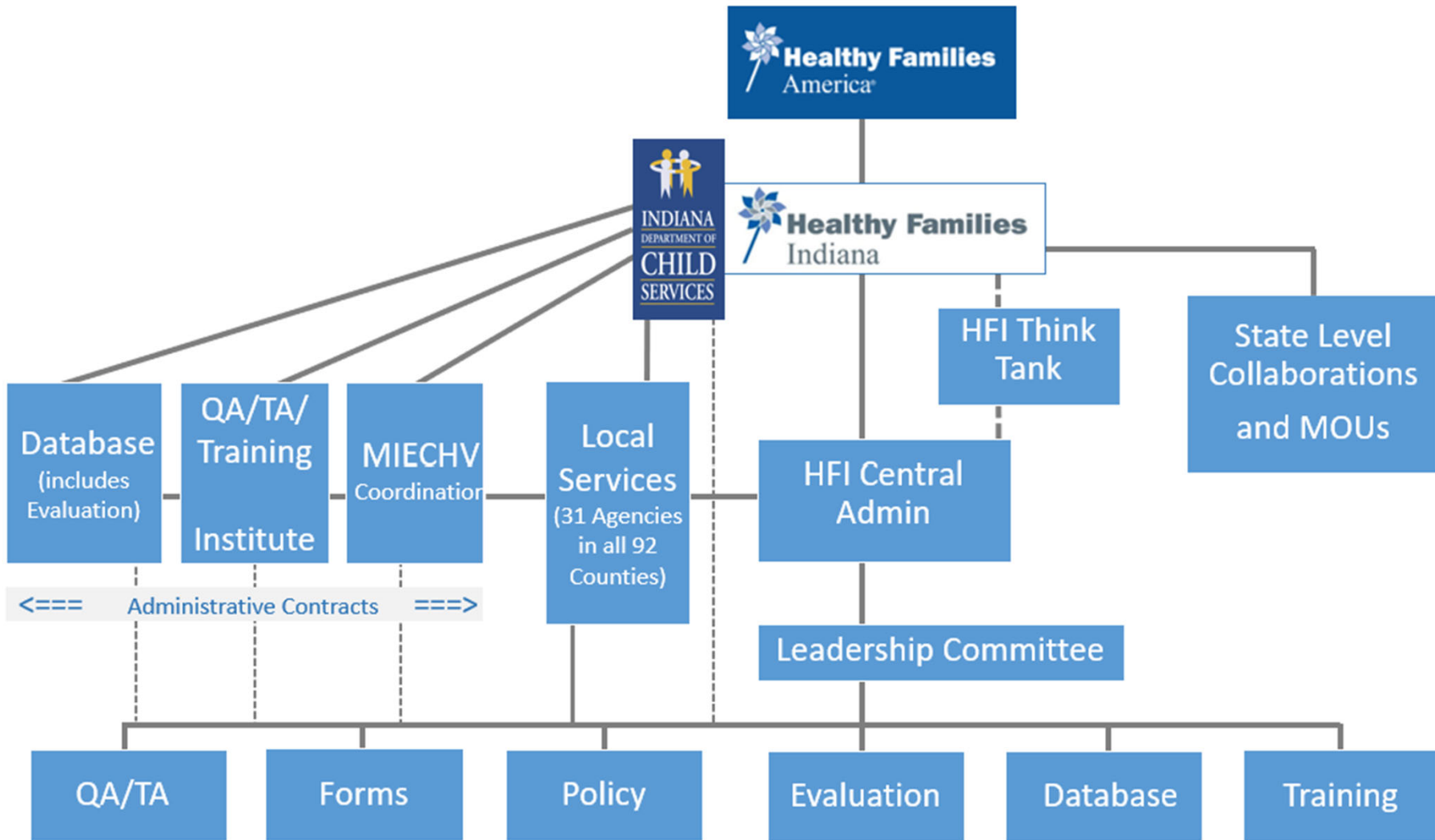
Indiana's
plan includes

Children and families
served by providers
outside of DCS

- Healthy Families America/Indiana

Children and
families served in
their homes with an
open DCS case.

- Families with an open Informal Adjustment Case
- Families with an open In-Home CHINS Case
- Pregnant and parenting foster youth and their children



- Set initially after RFP and contracts awarded
 - Reviewed and updated as needed every two years thereafter
- Based on analysis completed by DCS Rate Setting Unit from submission of actual cost reports
- Each county has a rate for assessments and a rate for home visiting families served each month
- Rate ranges
 - Assessment \$344.15-\$782.54
 - Home visiting \$348.60-\$599.60

AGENCY NAME

COUNTY

PROGRAM STATISTICS

Assessments:	<input type="text"/>
Home Visits:	<input type="text"/>
Screen to Assessment Ratio:	<input type="text"/> : <input type="text"/>
Assessment to Home Visit Ratio:	<input type="text"/> : <input type="text"/>
Staff Turnover Ratio for this period:	<input type="text"/>

RATES

	CURRENT	DESIRED
Assessment:	<input type="text"/>	<input type="text"/>
Home Visits:	<input type="text"/>	<input type="text"/>

--

OTHER DIRECT COSTS

COST ENTRY	COST (\$)
Office Supplies	
Fees, Dues, & Subscriptions	
Insurance	
Advertising	
Printing & Shredding	
Postage	
Conference & Training	
Employee Recruitment	
Interpreter Services	
Depreciation (Building & Grounds)	
Depreciation (Equipment)	
Rent	
Mortgage Interest	
Property Taxes	
Utilities	
Telephone & Internet	
Maintenance & Repair	
Small Equipment Purchase	
Leased and Rented Equipment	
Travel	
Other Direct Costs	
Total	-

INDIRECT COSTS

COST ENTRY	COST (\$)
Management Fees	
Administrative	
Human Resource	
Finance	
Facilities Management	
Management Information Systems	
Development	
Other Indirect Costs	
Total	-

IN-KIND SERVICES

Describe the service that you have designated as "in-kind" below; identify the value of the service as the cost.	COST (\$)

All 30 HFI contracted agencies have a TANF/State funded contract, and 8 agencies have a separate contract for Maternal, Infant, and Early Childhood Home Visiting (MIECHV) funding (24 counties) State funding sources include: the State appropriation, Hoosier Families First Fund (HFFF), and Home and Community-Based Services (HCBS).

DCS contracts with HFI Agencies who then bill for assessments completed and home visiting families served each month.

#1 Invoice Creation

Agency generates an invoice in Enlite based on the previous months billing.
Invoice includes the number billed for home visits and assessments under TANF, State, and MIECHV categories.

#2 Invoice Submission

Agency submits signed invoice to DCSPreventionquestions@dcs.in.gov.

#3 Tracking Invoices

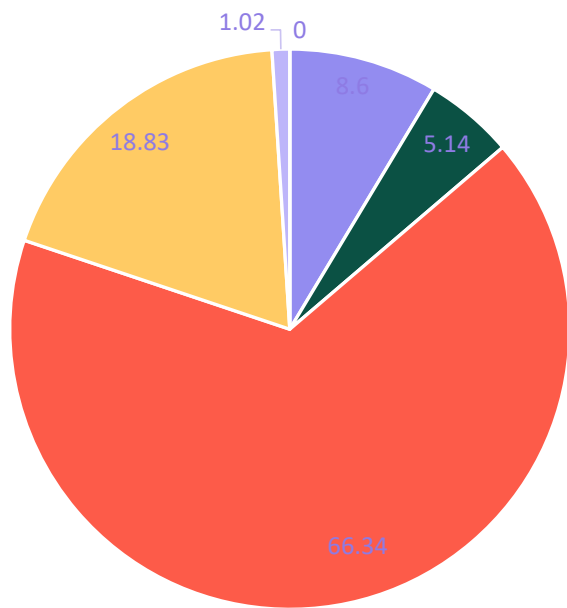
DCS Prevention team reviews invoices.
Number of home visit units and assessment units is tracked under TANF, State, and MIECHV depending on what the site billed.
DCS Prevention team generates IV-E Eligibility report in Enlite, which lists eligible families for each site for that billing period. This only includes families claimed as State by the sites.

#4 Invoices & Reports sent to Fiscal Team

DCS Prevention teams sends batch of signed invoices to budget analyst and accounts payable.
DCS Prevention team sends IV-E Eligibility Report and Billing Reports (Assessments and Long Term) to budget analyst and accounts payable.

#5 Review of expenses

Budget analyst reviews invoices and reports to determine what funding stream to use to pay invoices.
Accounts payable has already processed invoices into PeopleSoft from Kidtraks.



■ State ■ IV-E ■ TANF ■ MIECHV ■ MIECHV ARP ■ Other



Background

- ✓ 2019-Nebraska begins it's Child Welfare (CW) protocol at all 7 sites
 - ✓ 7 sites throughout 4 of our 5 Service Areas
- ✓ 2021-3 sites begin a pilot of billing for CW families via FFPSA funding
 - ✓ 3 sites cover our diverse landscapes; 1 in our most populated city, 1 in our second most populated city and 1 in our most rural area
 - ✓ These sites were able to bill fully through Nebraska's portal system
- ✓ Oct 2022-Expected date to execute contracts for all sites to bill for CW families via FFPSA funding
 - ✓ Workforce issues pushed this back to March 2023

Billing Portal and Established Rate

https://ecmp.nebraska.gov/DHHS-Claims/Welcome.aspx

Official Nebraska Government Website

NEBRASKA ENTERPRISE CONTENT MANAGEMENT PORTAL

Department of Health and Human Services Claims Portal

Help/Support Log Out

YOUR CLAIMS DOCUMENTS

Welcome
Latest news and updates from DHHS!
View Welcome Page

Open Claims
Claims that have recently been created can be viewed, filed out, and submitted here.
View Open Claims

Submitted Claims
Claims that have previously been submitted can be viewed and downloaded here for your reference.
View Submitted Claims

EOPs (Explanation Of Payments)
Explanation of Payments generated for your organization can be viewed here.
View EOPs

Authorization Notices
Authorization Notices generated for your organization can be viewed here.
View Notices

Manage Organizations
Add additional organizations to this account to view and submit their documents (Org ID and PIN required).
Manage Orgs

WELCOME NEBRASKA PROVIDERS

Thank you for your service to the Nebraska Department of Health and Human Services. It is our ongoing desire to modernize and enhance the processes and systems used by the Department of Health and Human Services (DHHS) to better serve you as an approved state provider. The Department's goal is to provide you with a more convenient experience to get the information you need in a timely manner.

With the automation of Provider Claims you will submit your claim electronically and you will have a fast and convenient way to stay up-to-date on your Open Claims, Explanation of Payment (EOP), and Service Authorization status. This new system will also notify you when claims, EOPs, and Service Authorizations are available by sending an e-mail to your registered e-mail account. You will also have the option of simply logging into your account to view your account activity at any time.

- Open and submit electronic claims with real-time data validation;
- View previously submitted claims;
- View Explanation of Payments (EOP);
- View/search relevant Service Authorization Notices; and
- Manage your account (register multiple email accounts to receive email notifications).

"IN THE BOX"

- DHHS shall pay the Contractor a daily rate.
- The daily rate varies based upon the distance traveled to deliver HFA services.
- The daily rate will begin at the date of first attempt at contact.
- The daily rate includes at least 90 days of creative outreach to re-engage families and re-establish home visiting, when a family disengages, per HFA standards, for enrolled families.

Billing Portal

Official Nebraska Government Website

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Department of Health and Human Services Claims Portal

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[Manage Orgs](#)

OPEN CLAIMS:

- Search, submit, print, and download electronic claims for your organization(s)
- Remove open claims you no longer need
- Receive real-time validation of submitted data against n-focus authorization

Searching

Select organization and billing month you would like to see open claims for - click Search.

To define your search results, you may also complete some or all of the following fields: client first name, client last name, client ID, service authorization #.

*A search will not return more than 250 results. Results will be returned in alphabetical order, by client last name.

Claims For Organization:

Billing Month:

[Advanced Search Options](#)

Removed Claims

If you want to view claims you have previously removed from your search results, click on View (below).

[Recently Removed Claims](#) [What's This?](#)

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[Manage Orgs](#)

EOPs (EXPLANATION OF PAYMENTS):

- View and print EOPs (Explanation of Payments) generated for paid claims.

Please note: To view and save EOPs, you must have Adobe Reader. This can be downloaded at file.adobe.com/reader/

EOPs For Organization:

Issue Date	Type	Payment Number	
06/06/2023	PAYMENT (ACH)	616001526	View
05/24/2023	PAYMENT (ACH)	613992034	View
05/17/2023	PAYMENT (ACH)	611850190	View
05/17/2023	PAYMENT (ACH)	611850189	View
05/16/2023	PAYMENT (ACH)	611550335	View
05/05/2023	PAYMENT (ACH)	609951003	View
04/25/2023	PAYMENT (ACH)	607760369	View
04/20/2023	PAYMENT (ACH)	606950425	View
04/19/2023	PAYMENT (ACH)	606750325	View
04/19/2023	PAYMENT (ACH)	606350296	View
04/11/2023	PAYMENT (ACH)	605250293	View
04/10/2023	PAYMENT (ACH)	605150370	View
09/28/2012	PAYMENT (ACH)	630250589	View

Official Nebraska Government Website

NEBRASKA ENTERPRISE CONTENT MANAGEMENT PORTAL
Department of Health and Human Services Claims Portal

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[Manage Orgs](#)

SUBMITTED CLAIMS:

- View, print, and download previously submitted electronic claims

Claims For Organization:

Billing Month:

[Advanced Search Options](#)

Process for Referring Families to HFA

If a child is identified as a Candidate for Foster, the CFSS will do the following:

- ▶ CFSS completes a Prevention Plan
- ▶ If the family agrees to participate in HFA at **anytime** during the case, submit a green phone referral to the applicable HFA provider on NFOCUS.
- ▶ Information to include on the Green Phone Referral:
 - Service Code: Healthy Families America
 - Provider
 - Include parent/caregiver name, phone number, and address
 - Include good times during the day to contact the parent/caregiver and if they prefer to be called or sent a text message
 - Units and Type also included

How to Create a New Prevention Plan

N-FOCUS - Detail SDM Case Plan Narrative

File Actions Help

Household Name: TANYA SAX Case Plan ID: 59805583 ADD

CHILD PLAN

Goals:

Strategy:

Services:

Identify Safety Network:

Progress:

03-4 N-FOCUS - Test Date 03-29-2021 12:50

N-FOCUS - Detail SDM Case Plan Narrative

File Actions Help

Household Name: TANYA SAX Case Plan ID: 59805583 ADD

CAREGIVER PLAN Critical Need

Goals:

Strategy:

Services:

Identify Safety Network:

Progress:

03-4 N-FOCUS - Test Date 03-29-2021 12:49

Questions?

Helping People Live Better Lives.

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

Ktwr twj nsktwr fyts?

http://dhhs.ne.gov/children_family_services/FamiliesFirst/Pages/Home.aspx

DHHS.familyfirst@Nebraska.gov



@NEDHHS



NebraskaDHHS



@NEDHHS

[immx3sj3ltf](#)

Helping People Live Better Lives.

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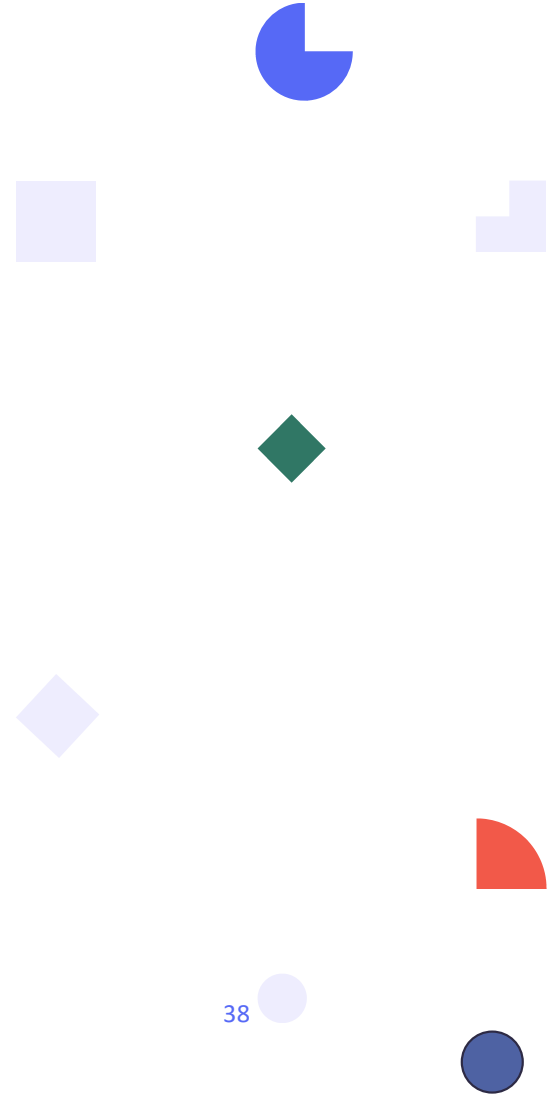
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Engaging the Administration around FFPSA

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Save the date!

August 29th CoP webinar celebrate key legislative and administrative policy wins from states and localities that are strengthening home visiting systems and services

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Michelle Hughes 
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