Meadows Mental Health Policy Institute

Request for Information: Family First Prevention Services Act – October 2020 House Committee on Human Services

Through the Family First Prevention Services Act (FFPSA), Texas has the option to use federal Title IV-E funding for evidence-based practices (EBPs) for children and youth at-risk of foster care placement and their families. Drawing down federal dollars for evidence-based prevention services would enable Texas to address historical barriers that have stymied efforts to reduce child welfare caseloads. These challenges include reimbursement systems that don't reward quality; funding streams limited to services aimed only at the child instead of the whole family; and academic and workforce training programs that focus on reimbursable interventions rather than those with the strongest evidence-base. Key EBPs include Multisystemic Therapy (MST) and Functional Family Therapy (FFT), which effectively address disruptive child and youth behaviors often related to trauma exposure.

With the investment in FFPSA prevention services, including MST and FFT, we expect to see the following outcomes over time:

- Fewer children and youth entering the foster care system;
- Reduction of child maltreatment and resulting trauma;
- Lower use of expensive and restrictive interventions, including Residential Treatment Centers (RTCs) and psychiatric inpatient programs; and
- Potential for improved child outcomes resulting from access to mental health treatment and support including reduced delinquency, improved academic performance, and lower use of out-of-home placements.

The COVID-19 pandemic and resulting economic downturn present a significant risk to many Texas families. In a soon to be released paper, we estimate the impact of the COVID-19 economic recession and associated unemployment on child abuse and neglect in Texas; our models project a significant increase in children and youth who could be victims. The effects of any increase will have dire implications, because physical isolation and school closures over the past six months have led to a sharp decrease in reports of abuse and neglect. The backlog in reports of previous cases of abuse and neglect, combined with a general rise in child maltreatment, could quickly overwhelm the system and endanger many children and youth. For these reasons, any supports for families, like FFPSA, could help offset the potential for a major crisis in the child welfare system.

Community-Based Care (CBC) has successfully bolstered collaboration and coordination across social services agencies. Early CBC models have overcome traditional barriers to improved foster care outcomes through flexible problem-solving and by bringing together diverse care

teams to support families. This approach can help establish prevention services through FFPSA. Additionally, enabling CBC providers to bill for a continuum of services, provided to a broader population, will achieve some economies of scale in terms of staff training and support.

However, we must strive for equal access to these services and supports. The majority of the foster care system remains in the legacy system, and statewide implementation of CBC is years away. Additionally, while the goal of FFPSA is to keep children and youth from entering foster care, CBC contractors are paid for providing foster care services. If CBC contractors oversee FFPSA prevention services, the state must ensure contractors are also incentivized to keep children and youth from entering foster care, irrespective of their foster care duties.

MMHPI recognizes that building the statewide capacity to deliver evidence-based prevention services will entail significant upfront investment, as well as close coordination at the state and local level. However, over the long-term, the infrastructure is likely to significantly decrease childhood trauma resulting from removal and save the state in foster care expenses. It is also likely that creating a system of payment based on the delivery of EBPs will improve the services all Texans receive, establishing a social services framework that is more efficient and cost-effective.

To achieve the sweeping improvements FFPSA aims to achieve, Texas will need a formal and diverse coalition to develop and monitor implementation activities, as well as strong leadership at the state level to oversee financial activities and related communications. This coalition should focus on specific considerations and costs associated with the implementation of evidence-based prevention services. The DFPS FFPSA Strategic Plan published in September 2020 provides high-level cost estimates and information on current programming but more work is needed to determine which EBPs would most effectively strengthen Texas families and what providers will need to efficiently implement these practices.

Conclusion

Thank you for the opportunity to provide data-based information on the Family First Prevention Services Act to the House Committee on Human Services. MMHPI stands ready to serve as a resource as you gather information and consider actionable solutions for your interim charges.

If you have questions regarding this submission, please contact:

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