

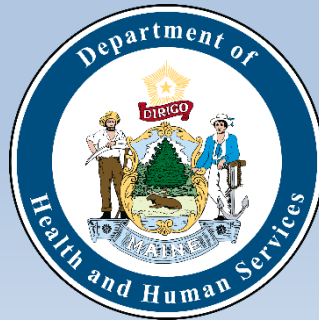
# From Federal Law to State Policy: Delivering on the Promise of QRTP

**April 26, 2023**

**Maine Office of Child and Family Services**

**Dr. Todd A. Landry, Director**

**Christine Theriault, Family First Program Manager**



# Learning Objectives:

1. Specific strategies for how to incorporate the Qualified Residential Treatment Program (QRTP) requirements under the Family First Prevention Services Act into state policy and practice to support the implementation of quality residential services across state systems.
2. Strategies for leveraging state and community partnerships in order to successfully implement federal and state policy.
3. Communication strategies as well as tools and resources created by Maine to implement Family First that can be utilized and replicated in other states.

# Audience Poll

1. Stand if you are currently implementing QRTP requirements in your state.
2. For those implementing for more than 1 year, please remain standing.
3. For those implementing for more than 5 years, please remain standing.

# How we got here...

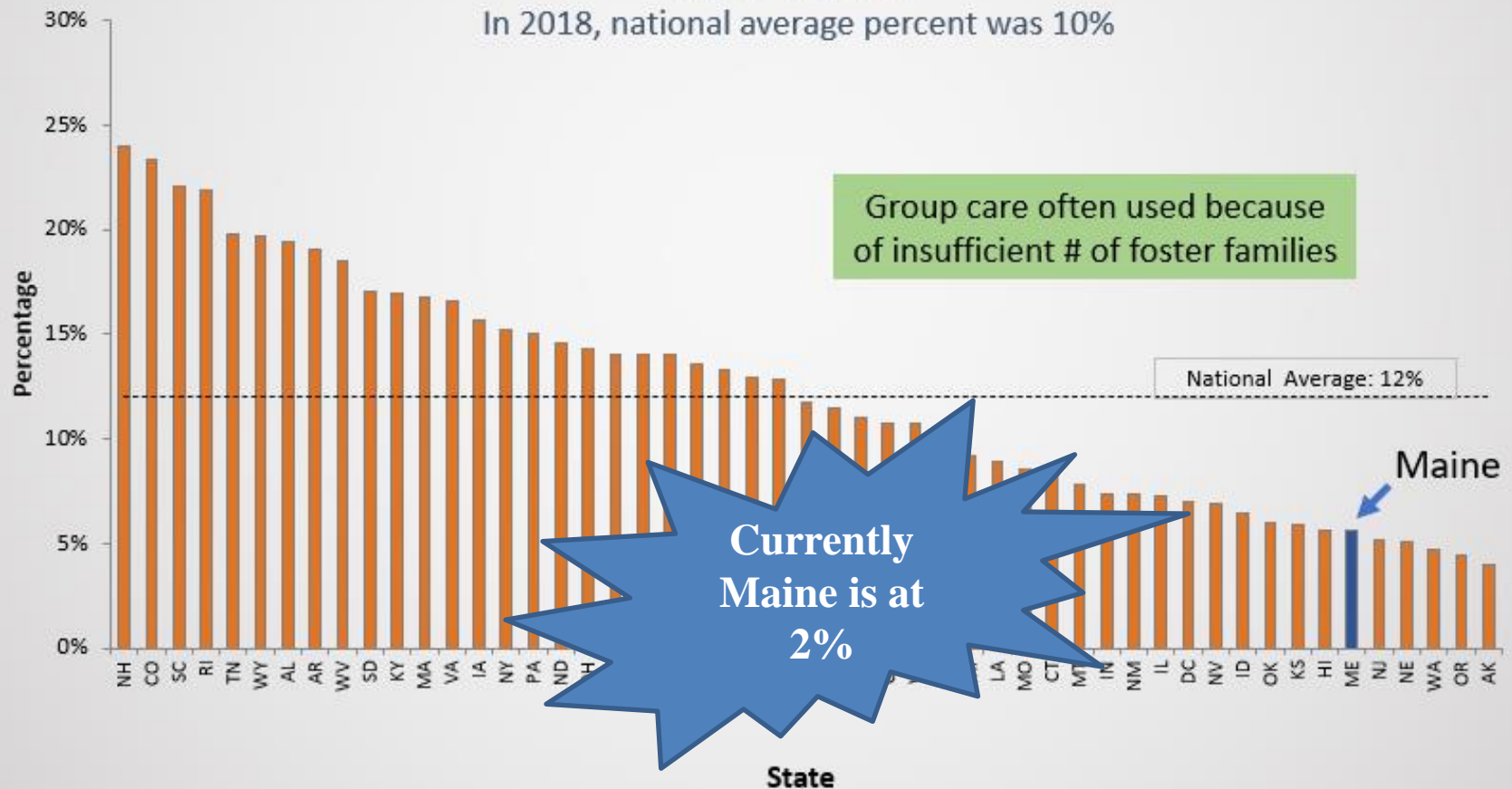


The Family First Prevention Services Act (FFPSA):

- Provides Title IV-E federal funding to states for **evidenced-based prevention services** for families to prevent the need for foster care.
- Establishes new standards of care and practice for **youth residential treatment services** that must be followed for states to receive Title-IV-E reimbursement for placement costs for youth who are Title IV-E eligible.

# Where we began....

CHILDREN IN GROUP PLACEMENTS BY STATE,  
Age 0-17 (2016)  
In 2018, national average percent was 10%



# New Standards for Residential Treatment: Qualified Residential Treatment Programs(QRTP)

## Process Standards:

- Service Intensity Assessment to determine clinical need for services.
- Judicial Review to review placement need for youth in foster care.
- Monitoring of limited timeframes for federal IV-E support for treatment placements.

## Treatment Standards:

- Heavy family engagement/involvement including siblings.
- Have registered or nursing staff and other licensed clinical staff available 24/7.
- Use trauma-informed treatment model.
- Program must be licensed and accredited.
- Fingerprint based criminal background checks required for all staff.
- Provide discharge planning and family-based aftercare support for at least 6 months post-discharge.

# Stakeholder Engagement

- November 2019: Introductory Meeting on Family First with Stakeholders
- Development of Stakeholder Workgroups:
  - Candidacy
  - Evidenced Based Practice
  - Workforce
  - Qualified Residential Treatment Program (QRTP)
- QRTP Workgroup
  - Met for the first time in March 2020.
    - Started with a presentation overview of FFPSA
  - Comprised of:
    - Children's Residential Treatment Providers
    - Outpatient Treatment Providers
    - Youth Engagement Groups & Parent Advocacy Groups
    - OCFS Staff (Child Welfare/Children's Behavioral Health/Licensing)
    - Children's Licensing and Investigation
    - Office of MaineCare Services





# Engagement of those with Lived Experience



- Youth Leadership Advisory Team
- Maine Parent Federation (Parents and Youth)
- Maine's Immigrant Community
- Tribes



# Capacity and Readiness

**9 Children's Residential Treatment Programs in Maine w/a 10<sup>th</sup> forming early on.**

**State Team: Children's Behavioral Health Program, Child Welfare Services, Office of MaineCare Services, Children's Licensing and Certification.**

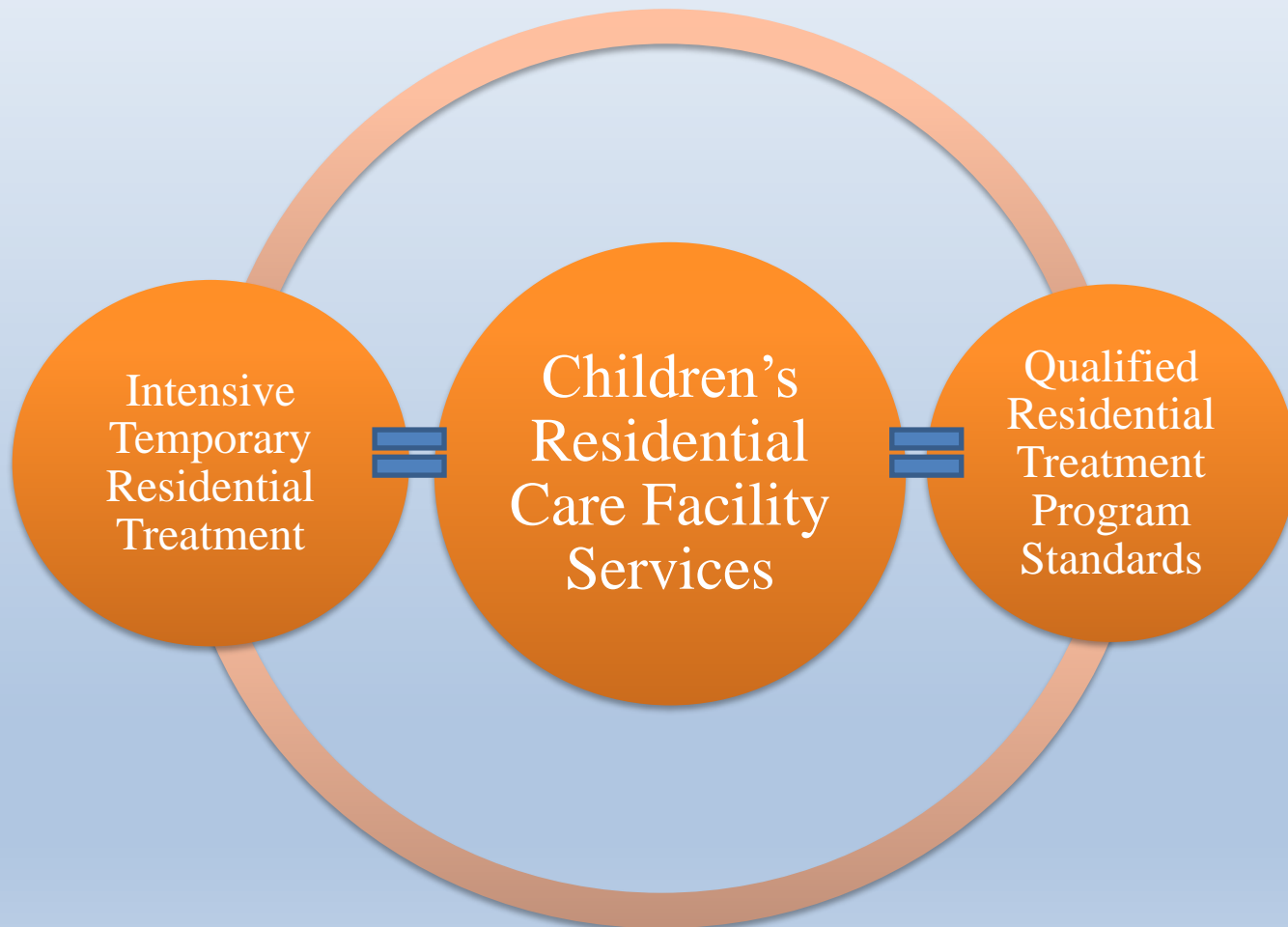
**Provider Readiness Assessments**

**Internal Workplan**

# Policy and Legislative Actions

- Office of MaineCare Services and Children's Licensing and Investigation Unit collaboration and commitment established early.
  - MaineCare rules opened and rate study initiated.
- Legislative Actions in the planning phase included:
  - Fingerprinting (LD 792)
  - Establishing the Judicial Review for Children's Residential Care Facility Services (LD 765 established the law with subsequent rulemaking w/stakeholders)

# Policy Alignment and Language Shift



# Fingerprinting

- Utilized the Family First Transition Grant to support all existing CRCF providers/staff to get fingerprinted.
- Established a multi-vendor agreement to reimburse programs who had staff who needed to be fingerprinted.
- Training and Frequently Asked Questions document created.
- Rollout:
  - Successes:
    - We were able to successfully support programs to get all staff fingerprinted.
  - Challenges:
    - Waiting for results to hire during a workforce shortage was a challenge for providers.
    - Staff members working in the education program of CRCF's have to be printed twice due to FBI rules.

# Fingerprinting Policies

- June 2019: LD 1792 – *An Act to Ensure Compliance with Federal Family First Prevention Services Legislation*. Set up the STATE law related to the fingerprint requirement.
- [MaineCare Policy](#)
- [Licensing Policy](#) and [Standard Operating Procedures](#)
  - Staff members and prospective staff members must consent to having their fingerprints taken.
  - Facilities must email the Background Check Unit (BCU) within OCFS, the name and date of birth of the staff member or prospective staff member after fingerprinting has occurred. The BCU will, upon receipt of the criminal history report, make a determination regarding eligibility status and will email the status of “eligible” or “ineligible” to the facility representative. The BCU will mail via United States Postal Service (USPS) an official letter of eligibility to the facility representative and directly to the staff member.

# Accreditation

- Utilized the Family First Transition Grant to support CRCF providers to become accredited or support re-accreditation fees.
- At the start, 3 agencies were already accredited.
- Application process was developed for agencies to apply for funds to get reimbursed for fees.
- Contracts developed with providers and executed.
- Accreditation requirement inserted into MaineCare and Licensing rules.
- All CRCF providers in Maine are now accredited.



# Service Intensity Needs Assessment

- Selected Maine's existing Prior Authorization Agency, Kepro, to be the Qualified Individual to assess the appropriateness of residential level of care.
- Utilized the QRTP Stakeholder Workgroup to establish what Screening Tool would be utilized for the assessment.
  - [CALOCUS-CASII](#) (Child and Adolescent Level of Care/Service Intensity Utilization System)
- Developed processes and standards for the implementation of the Service Intensity Needs Assessment to take place PRIOR TO placement in a QRTP program.
- Developed a flow chart to demonstrate this process for staff, parents/caregivers, and providers.



# Service Intensity Needs Assessment Policy

## MaineCare Policy:

Have a result from a Department approved, age appropriate Level of Care/Service Intensity tool which indicates the need for residential level of care, completed by the Department or its Authorized Entity prior to admission and at ongoing intervals determined by the Department. The appropriate tools include, but are not limited to:

- Early Childhood Service Intensity Instrument (ECSII) for ages zero (0) to five (5);
- Child and Adolescent Level of Care/Service Intensity Utilization System (CALOCUS-CASII) for ages six (6) to eighteen (18);
- Level of Care Utilization System for Psychiatric and Addiction Services (LOCUS) for ages eighteen (18) to twenty-one (21);



# Service Delivery & QRTP Requirements

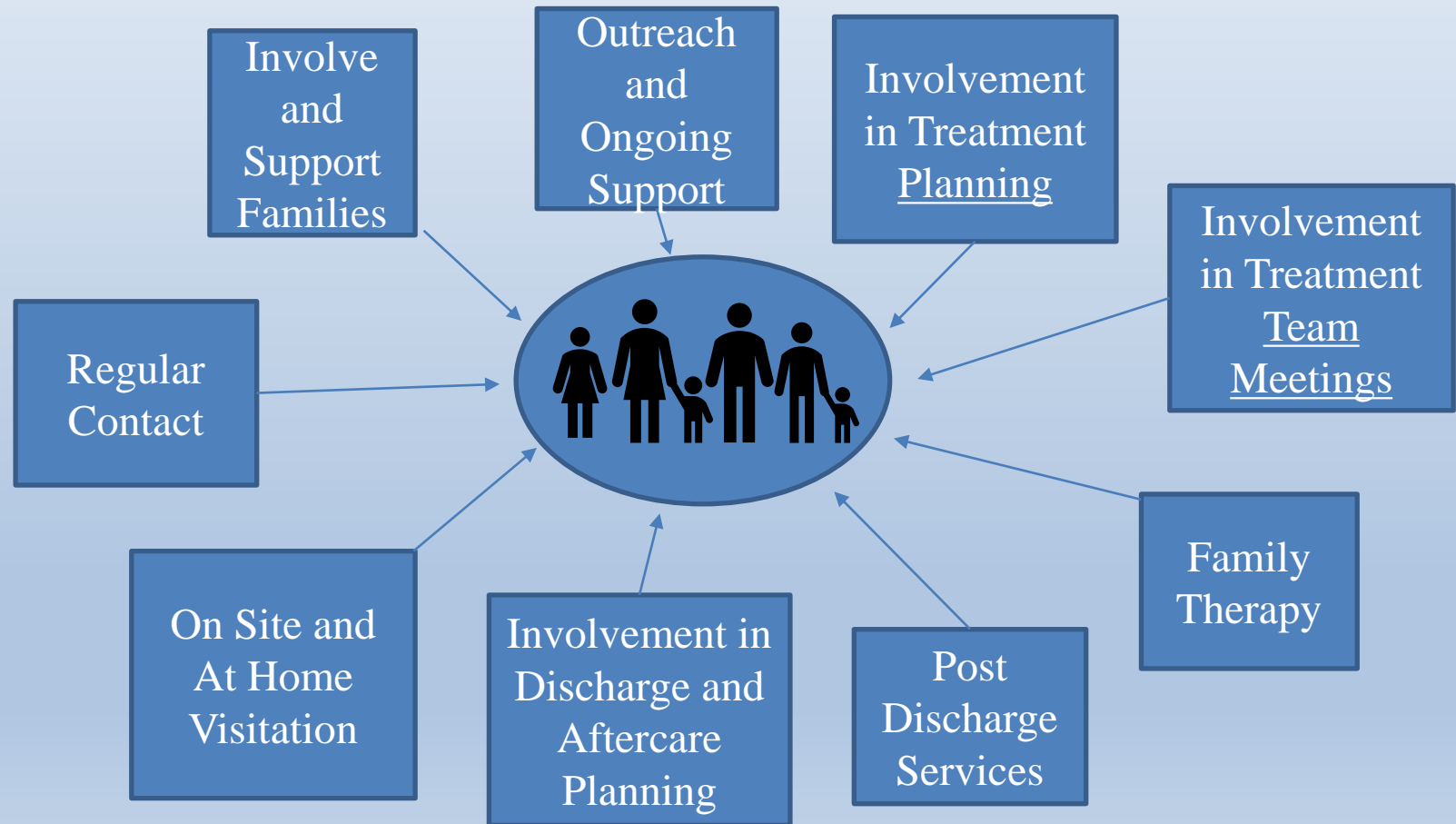
# Trauma Informed Treatment Model

All CRCF's must demonstrate delivery of Trauma-Informed Care which includes:

- The completion of a Trauma-Informed Agency Assessment annually.
- Documentation of policies and procedures that incorporate Trauma Informed Care;
- Documentation of Trauma Informed Care training for all staff to be completed within ninety (90) days of hire, and as requested by the Department.
  - Resources for training can be found on the [OCFSCBHS website](#), and
- Implementation of a Trauma-Informed Treatment model.

# Family Centered Treatment and Participation

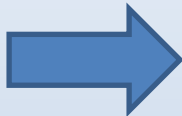
The key components of Family-Centered Residential Treatment are to be documented in the child's case file and include:



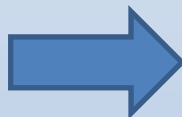
# Children's Residential Care Facility Services: The Process

- ☐ Youth is exhibiting concerning/dangerous behaviors that community-based services are unable to address.
- ☐ The child's team of providers meet to discuss if an application for CRCF services is appropriate.
- ☐ The application and supporting documents are submitted to Kepro.
- ☐ Kepro completes an initial team meeting, the Service Intensity Needs Assessment, and a read-out meeting.
- ☐ If the youth meets eligibility, referrals to appropriate in state CRCF programs are made.
- ☐ After admission to a CRCF, a Judicial Review is required within 60 days.
- ☐ Residential Reviews take place monthly.
- ☐ Timeframes are monitored and OCFS Director approval is sought for treatment placement funding options if services are needed beyond Title IV-E time limitations.
- ☐ Discharge planning and searches for family home placement begins at admission and occurs throughout the time the youth is in CRCF services.
- ☐ Post discharge Aftercare Support Services are provided to the youth/family by the CRCF for 6 months.

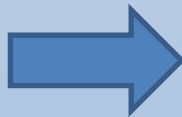
# Aftercare Support Services




Aftercare Support Services are individualized family-focused, community based, trauma-informed, culturally sensitive services that will be provided for at least six (6) months post discharge. This service is a separate MaineCare rate from the CRCF rate.



A Family Transition Specialist (FTS) is a staff requirement for the provision of Aftercare Support Services and is assigned to a youth's case. A Family Transition Specialist is a staff requirement for the provision of Aftercare Support Services (97.01-1). (Bachelor's Level)



Within seventy-two (72) hours of discharge from the CRCF, the FTS will have in person contact with the client and their family (including siblings as applicable), foster parent, or other placement provider.



Within the first seven (7) days following discharge, the CRCF nurse (RN or APRN-PMH-NP), will contact the member's parent or legal guardian to follow-up on any medical concerns or needs.

# Aftercare Support Services Policy

## Ongoing Contact

- The FTS will have ongoing contact with the youth and their family, including any of the youth's siblings (as applicable), to follow-up on the youth's status, assess any needs, and provide support. The FTS contact must minimally occur:
  - one (1) time per week, (1) to three (3) months post-discharge;
  - two (2) times per month, three (3) to six (6) months post discharge; and
  - one (1) time per month in person contact, one (1) to six (6) months post-discharge

## Aftercare Support Services Summary Reports

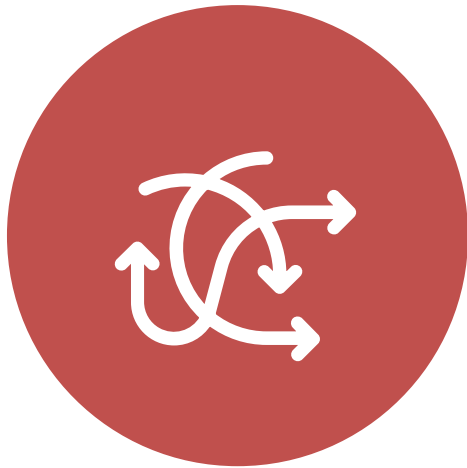
- The Family Transition Specialist shall complete a residential Aftercare Support Services summary at thirty (30), ninety (90) and one-hundred eighty (180) days after a youth's discharge from the facility.
  - The reports are due no more than fifteen (15) days after completion to the following, as applicable: child welfare or juvenile justice representative(s), guardian(s), case manager, primary care physician, and/or treatment providers.
  - A copy of the report out form will be in the CRCF Services Provider Guide.

## Exemptions

- Exemptions to Aftercare Support Services may be allowable under certain circumstances. Request for an exemption form is required to be submitted with documentation of supporting evidence that services are not medically necessary or clinically contraindicated.



# Implementation of Aftercare Support Services



CHANGE IS HARD....



SUCCESSSES

Implementation resources created including [FAQs, Fact Sheets, Recorded Trainings](#)



# OCFS Staff Specific Requirements

---

# Judicial Review Processes

A court review is required to take place within 60 days of program admission and at every subsequent Judicial review.

Within 7 days of admission or transfer, a Child Welfare caseworker must file a notice and request for a review hearing using the *QRTP Placement Notification form*.

- The notice must be filed with the court with copies of the notice of placement provided to all counsel, self-represented parties, and the guardian ad litem.
- A Judicial Review will be scheduled upon filing.

Within 42 days of the placement, Child Welfare staff must file with the court:

- Service Intensity Needs Assessment
- Other supporting documentation of treatment need.

# Initial Judicial Review

The court can approve or disapprove of the placement.

If the court disapproves of the placement, a Judicial Review to discuss placement will be scheduled for the future.

If the judge disapproves, OCFS has 30 days to claim IV-E for that youth. Internal discussions on next steps dependent upon Title IV-E eligibility status.

If there is strong documented clinical need for the placement, OCFS may decide to keep the child in the placement and use state funds for the placement.

# Subsequent Judicial Reviews

OCFS must submit evidence:

- Ongoing assessment confirms need for Children's Residential Care Facility Services.
- Specific treatment needs that will be met.
- Length of time youth is expected to need additional treatment.
- Efforts made to prepare the youth to transition to a family.

# Judicial Review Process Fact Sheet

Within 7 days of admission

- Within 7 days of a youth's admission into a CRCF/QRTP, the Child Welfare caseworker must file a notice and request for a review hearing using the QRTP Placement Notification Form found in the staff toolkit.
- The notice must be filed with the court with copies of the notice of placement provided to all counsel, self-represented parties, and the guardian ad litem.
- A Judicial Review will be scheduled to occur within 60 days. The court clerk will notify all parties.

Within 42 days after admission

- The Child Welfare caseworker must file with the court the Service Intensity Needs Assessment completed by Kepro and all supporting documentation identifying the youth's treatment need.
- If the Judicial Review is scheduled before 60 days, documentation should be filed with the court within 2 weeks of the scheduled hearing.

At the First Judicial Review

- The Court will approve or disapprove of the placement based on a review of the evidence.
- If the court disapproves, Supervisor/Program Administrator consultation should occur to discuss if placement of the youth should continue with the following considerations:
- Does the youth meet Title IV-E eligibility?
  - \*If NO, and there is a documented clinical need for treatment, discuss at the next Judicial Review.
  - \*If YES, OCFS has 30 days to claim IV-E for that youth and make a decision:
    1. Keep the youth in the program due to the clinical need and OCFS uses state dollars to fund the treatment placement,
    - OR
    2. Move the youth to another "court approved" program that will allow for Title IV-E funding to support the treatment placement.

Subsequent Judicial Reviews

- For subsequent Judicial Reviews, Child Welfare must file documentation with the court indicating:
  - Ongoing treatment need for Children's Residential Care Facility Services.
  - Length of time youth is expected to continue to need treatment.
  - Efforts made to prepare the youth to transition to a family.

Additional Notifications

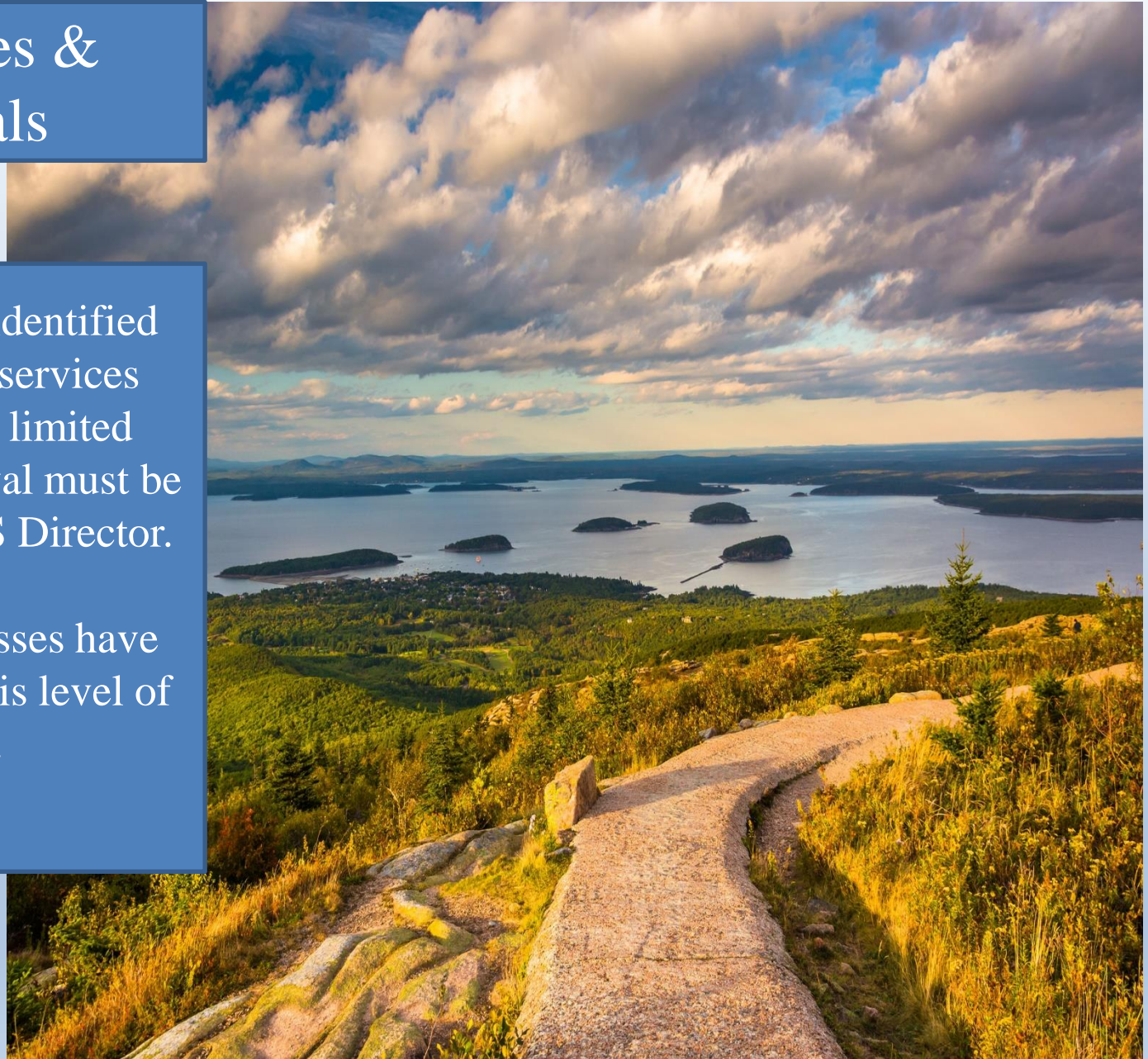
- Utilizing the QRTP Placement Notification Form additional notifications must be made:
  - If a youth is **transferred** to another Children's Residential Care Facility, notification to the court must happen within 7 days post-admission. The 60-day Judicial Review process will begin.
  - If a youth is **discharged** from a Children's Residential Care Facility, the notification form indicating discharge must be filed with the court.



# Timeframes & Approvals

If a youth has an identified clinical need for services beyond the IV-E limited timeframes, approval must be given by the OCFS Director.

A form and processes have been created for this level of approval.





Request for  
OCFS Director  
Approval for  
Funding  
Children's  
Residential Care  
Facility Services

Approvals:  
Supervisor  
PA  
RAD  
Director

This form is to request approval from the Office of Child and Family Services Director for:

- The extension of Title IV-E funding for Children's Residential Care Facility Services due to pending expiration of IV-E funding timeframes or,
- The funding of Children's Residential Care Facility Services using state dollars due to:
  - a. The lack of other treatment options
  - b. Judicial disapproval of treatment placement

Please refer to the Children's Residential Care Facility Services Guide to learn how to complete and submit this form. Please note: The reasons for requesting the extension of residential treatment services must be based on clinical necessity and not due to the lack of another placement option.

Request Date: Click or tap here to enter text.

Request Purpose: Choose an item.

Previous Request Date(s): Click or tap here to enter text.

District: Click or tap here to enter text.

Caseworker Name: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Child's Name: Click or tap here to enter text.

MACWIS Number: Click or tap here to enter text.

Legal status/effective date: Click or tap here to enter text.

Treatment Program name: Click or tap here to enter text.

Admission date: Click or tap here to enter text.

1. Date and recommendations of the most recent assessment/evaluation of clinical need: Click or tap here to enter text.

2. Efforts made to seek less restrictive treatment that could be delivered in a family setting, through foster care, relative/kinship care or a return home: Click or tap here to enter text.

3. Reasons the youth cannot be returned to a less restrictive setting, with aftercare services provided to support the discharge: Click or tap here to enter text.

4. The estimated date in which the child would be ready for discharge and the aftercare plan: Click or tap here to enter text.

5. Summary of diagnoses: Click or tap here to enter text.

6. Case Plan (Reunification/Permanency): Click or tap here to enter text.

7. Last Family Team Meeting date: Click or tap here to enter text.

8. Last Residential Review Meeting date: Click or tap here to enter text.

9. Have you included current documentation of continued treatment need in the child's case file? Click or tap here to enter text.

Additional Information:

# Residential Reviews

OCFS  
Process

Monthly  
Review of  
Cases of youth  
receiving  
CRCF Services

- District meetings monthly to review youth receiving (CRCF) Services. Includes: PA/APA, Supervisor, Caseworker, Resource/Placement Coordinator, Youth Transition Specialist, and Children's Behavioral Health Program Coordinator.)
- The *Residential Review Form* is completed and discussed with topics including:
  - The date the child entered the CRCF;
  - The timeframe left for QRTP requirements (Under 13 there is a 6-month limit, over 13 there will be a 12 consecutive or 18 non-consecutive month limit);
  - Discharge action steps, including person responsible and timeframes;
  - Barriers to discharge and steps to overcome barriers;
  - Plan for Aftercare;
  - Any case related action steps necessary.

# Children's Behavioral Health Program Roles



## Residential Specialists:

- Providing Technical Assistance and support to Residential Care Facilities



## Behavioral Health Program Coordinators (BHPC's):

- Providing the required consultation to teams prior to a referral to Children's Residential Care Facility (CRCF) Services. The Consultation will shall include, but is not limited to the following topics:

  - Referral symptoms;

  - CRCF MaineCare eligibility requirements;

  - Prior treatment services received

  - Treatment alternatives;

  - Risks and benefits of CRCF Services;

  - Importance of family treatment; and

  - Educational needs

- BHPC's will also provide additional ad hoc consultation as needed.

# Implementation Successes and Challenges: Voices from the Field

---



# Obstacles:

- Pandemic
- Workforce
- Capacity
- Accreditation
- Rural Maine

# Successes:

- Full Implementation
- Policy Incorporation
- TEAMWORK!



# OCFS Staff Resources

## OCFS Staff Toolkit

Trainings, Fact Sheets, FAQ's, Flow Charts, Forms, etc.

Children's Residential  
Care Facility Services  
Staff Resource Guide

[www.AccessMaine.org](http://www.AccessMaine.org)



# Public Resources

- Section 97 MaineCare Rules
- Children's Residential Care Facility Services Provider Guide
- Children's Behavioral Health Services Website
- KEPRO Website
- Children's Licensing and Investigation Unit





# QUESTIONS



- Christine Theriault
  - Family First Prevention Services Program Manager
  - [Christine.Theriault@maine.gov](mailto:Christine.Theriault@maine.gov)
- Dr. Todd Landry
  - OCFS Director
  - [Todd.A.Landry@maine.gov](mailto:Todd.A.Landry@maine.gov)