



Family First Prevention Services Act FAQs

QUALIFIED RESIDENTIAL TREATMENT PROGRAM

GENERAL

1. What is a Qualified Residential Treatment Program and what are the federal requirements?

A Qualified Residential Treatment Program (QRTP) is a congregate care setting that must meet additional federal requirements necessary for Title IV-E reimbursement:

A QRTP must be licensed by the appropriate state authority and accredited by one of the following:

- The Commission on Accreditation of Rehabilitation Facilities
- The Joint Commission on Accreditation of Healthcare Organizations
- The Council on Accreditation
- Other independent, not-for-profit organizations approved by the U.S. Department of Health and Human Services (DHHS)

A QRTP is required to do the following:

- Utilize a trauma-informed model of care
- Have registered/licensed nursing staff and other licensed clinical staff available 24/7
- Facilitate family member participation in the child's treatment program, when appropriate and in the child's best interest
- Facilitate outreach to family members, document how the outreach was made, and maintain contact information for relatives
- Document how family members are integrated into the treatment process (including post-discharge) and how sibling connections are maintained
- Implement treatment plan identified in the 30-day assessment
- Provide aftercare support for at least six months post-discharge from the QRTP

Please see [21-OCFS-ADM-04](#) for a detailed description and approach to certifying congregate care programs as QRTPs or QRTP Exceptions in New York State.

2. If an agency is accredited, is it considered a QRTP?

Accreditation in and of itself does not designate the program as a QRTP. While accreditation is one component of a QRTP, it does not complete the program requirements of a QRTP. OCFS has released an ADM outlining the process to designate an agency as a QRTP: [21-OCFS-ADM-04](#).

3. How will a program/agency know when it is a QRTP?

A program/agency will need to apply to the New York State Office of Children and Family Services (OCFS) and submit its QRTP program descriptions to OCFS for review. OCFS will inform the program/agency if the requirements have been met to become a QRTP. OCFS has released an ADM outlining the process to designate a program as a QRTP: [21-OCFS-ADM-04](#).

Family First Prevention Services Act FAQs

4. How many voluntary agency (VA) programs have become certified QRTPs in New York State?

For a current list of QRTPs, see the Family First webpage:

<https://ocfs.ny.gov/main/sppd/family-first.php>.

5. Does congregate care include group home placement?

Congregate care includes agency-operated boarding homes (AOBH), group homes, group residences, supervised independent living programs (SILPs) and institutions. Definitions of such can be found in relevant regulations: 18 NYCRR 441.2 and 18 NYCRR Parts 442 (Institutions), 447 (AOBH), Part 448 (Group Homes) and 449 (Supervised Settings) <https://regs.health.ny.gov/content/volume-b-1-title-18>

6. If a child is not Title IV-E eligible and is placed in a QRTP, does this child still need an assessment completed by a Qualified Individual (QI)?

Yes, as required by section 409-h of the SSL, any child placed in a QRTP after 9/29/21 must have a QI assessment, regardless of Title IV-E eligibility.

7. Is a youth shelter considered CC setting, and would this trigger a QI assessment?

A youth shelter is not a CC setting, nor a setting authorized for the care of children in foster care. As such, the Family First Prevention Act (FFPSA) requirements do not apply.

8. Are aftercare services provided to children who are leaving a QRTP and returning to their family?

Aftercare services are to be provided to the child and family while the child resides in a QRTP and when a child is released from a QRTP to any family setting, whether it is their family or a foster family home. Aftercare must continue for a minimum of six months after discharge from the QRTP, regardless of custody status.

Policy

1. Is a background check required for staff working in a residential setting?

Yes. FFPSA and state law mandate national and state criminal background checks, and New York Statewide Central Register of Child Abuse and Maltreatment clearances for all current and prospective employees of congregate residential foster care programs that are licensed or certified by OCFS, regardless of their level of contact with children. FFPSA also requires a clearance request from the child abuse register of any state in which the person resided within the last five years. While not required by FFPSA, OCFS requires the completion of Staff Exclusion List (SEL) checks for all prospective employees.

2. Who will provide the required six months of aftercare, and what is the expectation of contact between the QRTP and the local departments of social services (LDSSs), especially in post-discharge follow-up?

Per the FFPSA legislation, QRTPs are required to provide six months of aftercare services. Discharge planning must begin on the first day of placement. The discharge plan

Family First Prevention Services Act FAQs

must be created in conjunction with, and with the approval of, the child's permanency team. In circumstances where there is no existing mandate to compel a youth or family to participate in services, such as when a youth is discharged from foster care and/or there are no current family court orders retaining jurisdiction, a QRTP is still required to fulfill the mandate of providing aftercare support for at least six months. Documentation may be recorded, where appropriate, in CONNECTIONS or a service provider's health care records, provided the information can be made accessible to OCFS upon request.

3. Is it required for the child to remain in LDSS custody during the six months of aftercare?

A child is not required to remain in LDSS custody for the duration of aftercare.

4. Which tool will be used for the 30-day assessment for QRTP placements?

When assessing a child for appropriateness of placement in a QRTP, QIs must complete the *Qualified Individual Report* and the *Qualified Individual Assessment Summary Report* in addition to administering a validated assessment tool. New York State has approved the following assessment tools:

- 1) the CANS-NY or the CALOCUS-CASII, when assessing a child for appropriateness of placement in a QRTP, and
- 2) the *CANS-NY Assessment and Summary Sheet* must also be completed when the CANS-NY tool has been administered.

5. How can an LDSS attest to a QRTP's adherence to trainings?

An LDSS is not required to attest to the QRTP's adherence to trainings where the LDSS is not directly operating the QRTP. The VA applying to OCFS for QRTP certification is attesting to meeting the requirements for QRTP designation.

6. Who will approve the FFPSA requirement regarding a child remaining in a QRTP longer than six consecutive/non-consecutive months (under 13 years of age) or 12 consecutive or 18 non-consecutive months (13 years of age or older)?

The head of the state agency must approve any placement in a QRTP

- when the child in foster care is 13 years of age or older and has resided in a QRTP for more than 12 consecutive months or 18 non-consecutive months; or
- if the child in foster care is under the age of 13 and has resided in the QRTP for more than six consecutive or non-consecutive months.

7. Who is responsible for submitting the request for a review to extend a youth's stay in congregate care?

The LDSS with legal custody of the child is responsible for submitting the request for a review to extend a youth's stay in the QRTP. The purpose of the long-stayer review is to assess whether there is a treatment need warranting the continued placement in a QRTP beyond the identified time frames.

Family First Prevention Services Act FAQs

The Long-Stayer Review process occurs at two levels – local and state.

Tier 1: Local Review

- Conducted by one of the following:
 - Qualified Individual (QI)
 - Local Multidisciplinary Team, which includes a licensed clinician that has been serving the child regularly (an example of this team could be a support/treatment team at the QRTP where the LDSS has representation).
- The local review team must evaluate progress on achieving goals as stated in the treatment/support plan as well as barriers to achieving goals and any other pertinent information. At a minimum, the team must review and consider
 - the initial QI assessment,
 - the current evaluation used to recommend the child remain in the QRTP,
 - the most recent court orders,
 - the QRTP's support/treatment plan,
 - the most recent Family Assessment Service Plan (FASP),
 - any other pertinent recent clinical/behavioral assessments or evaluations,
 - the youth's Individualized Education Program (IEP) (if applicable),
 - and any recent incident reports.
- If the local review team does not approve an extension, the process ends. The Title IV-E funding will stop (for those eligible). The LDSS should place the child in a lower, appropriate level of care.
- If the local review team recommends continued placement at the QRTP, justification for the extension must be submitted to OCFS along with supportive documentation such as the most recent Permanency Hearing Report (PHR), treatment/support plan, psychosocial evals, and other relevant information.

Tier 2: State Level Review

- The state review team will consist of OCFS and other relevant state agency partners depending on the case circumstances.
- The state review team may request additional information as needed.
- If the state review team does not approve the extension, then a formal denial will be sent to the LDSS; Title IV-E reimbursement will end as of the end date identified in the 60-day court review; and the LDSS should place the youth in an appropriate, lower level of care
 - NOTE: OCFS' decision will be final



Family First Prevention Services Act FAQs

- If the state review team approves continued treatment at the QRTP, the recommendation will be made to the OCFS commissioner for a final decision and formal communication to the LDSS.

See 18 NYCRR 439.5 and [21-OCFS-ADM-32](#).

8. Is a court's review deadline required 30 days from the initial placement in a QRTP or 30 days from the completion/submission of the QI assessment?

The court review is due within 60 days of the child's placement in a QRTP. The QI assessment is due within 30 days of the child's placement in a QRTP or within 30 days prior to placement in the QRTP.

9. If the QI does not recommend a QRTP level of care and the court review is not within the prescribed deadline, can the LDSS claim Title IV-E for the entire 60 days?

When a child is placed in a QRTP, the QI assessment is timely, and the QI determines placement in a QRTP is not appropriate, the LDSS may claim Title IV-E foster care maintenance payments from the date of placement in the QRTP up to 30 days after assessment determination is completed. Please note that per the enacted New York State legislation, the child must remain in the QRTP until the 60-day court review and hearing has occurred.

10. Can a child be placed in a QRTP as a last resort due to no relatives/fictive kin or foster homes being available?

No. The FFPSA legislation explicitly states that lack of availability of foster homes is not a basis for placement in a QRTP. The LDSS must continue to identify and locate kin and other discharge resources for the child while the child is placed in the QRTP.

11. Does a new QI assessment need to be completed for a youth that moves from one QRTP to another when both QRTPs are under the same parent agency and on the same campus?

FFPSA requires a 30-day QI assessment (and subsequent 60-day court review) for the following circumstances:

- Thirty days prior to, or within 30 days, of the child's placement in a QRTP
- When a child is absent from a QRTP for 90 or more days (includes absences without consent [AWOC] and hospitalizations)
- When a child is moved from one QRTP to another QRTP that has a different vendor identification number (VID)
 - If the QRTP to which a child is moved is on the same campus as the QRTP in which the child was previously placed, a QI assessment is still required if each QRTP has a different VID.

Note: If two QRTPs on the same campus share the same VID, moving a child from one QRTP to the other is not considered a new QRTP placement; therefore, a new QI assessment is not required.

Family First Prevention Services Act FAQs

12. Are QI assessments required for children placed in a supervised setting or any other QRTP exceptions?

If a child is being directly placed in a QRTP exception, the QI process will not be required. There are three QRTP exception types:

- Specialized settings providing prenatal, postpartum or parenting (PPP) supports
- “Supervised settings” where a child 18 years or older may live independently [defined in SSL §371(22)], e.g., supervised independent living program (SILP), Community-Based, College Housing
- Settings providing high-quality residential and supportive services to children who are survivors of, or at risk of, human trafficking, e.g., CSEC, EMPOWER

If a child is in a Foster Boarding Home (FBH) and there is a recommendation that the child needs a higher level of care in a QRTP, the QI process must begin. As part of the QIs assessment, they could determine that one of the QRTP Exception programs is the appropriate level of care in the least restrictive environment.

13. Is a QI assessment needed for a youth who was already in care in a CC setting that became a QRTP on 9/29/2021?

A child who entered a CC setting prior to 9/29/21 is considered “vested,” and a QI assessment is not required unless there are changes in the child’s placement. If the vested child has an absence of 90 days or longer, or transfers to another QRTP on or after 9/29/21, FFPSA requirements are triggered, including the need for a QI assessment.

Please refer to [SSL 409-h\(1\)\(a\)](#), which governs the timing of the QI assessment.

14. Should we pend Title IV-E until the 60-day court review for children placed in QRTPs after 9/29/21?

No. FFPSA does not change the Title IV-E eligibility rules. The setting in which the child is placed does not change the child’s individual eligibility. The setting does change the ability to draw down Title IV-E. This is allowability, not eligibility.

Continue to code the child as IV-E eligible in the Welfare Management System (WMS), eligibility code 02, and there is no need to “pend” the child (WMS eligibility code 01). BICS (Benefits Issuance and Control System) manages allowability and prevents Title IV-E reimbursement until the 60-day court review is completed on time and entered in CONNECTIONS. After the on-time, approved 30-day assessment, the on-time 60-day court review entered into CONNECTIONS will provide continuing Title IV-E funding.

15. Will the Raise the Age (RTA) placements receive six months of additional aftercare once their placement order expires?

In the circumstance of an RTA youth who is placed in a QRTP program, the six-month FFPSA aftercare requirements would supersede the RTA requirements. From a planning standpoint, the aftercare services should be developed and provided so that they address

Family First Prevention Services Act FAQs

both the RTA and FFPSA requirements. Based on FFPSA requirements, the services are required to be provided for a minimum of six months.

16. What is the expectation of aftercare provision if a youth is discharged from a QRTP in the following scenarios:

- Discharged from a QRTP after exceeding the 90-day absence due to AWOL or hospitalization
- Discharged from a QRTP due to movement to a secure facility
- Moved to an OCFS facility

FFPSA requires six months of aftercare be provided to those being discharged from a QRTP to family, a foster family, to Another Planned Permanency Living Arrangement (APPLA), or discharged from foster care to the community. Therefore, neither the 2nd nor 3rd scenario would trigger aftercare as those placements are higher levels of care. For the first scenario, it would depend on where the youth will reside after return from AWOL or hospitalization. If they are placed with family, foster family, or APPLA, aftercare is required.

17. If the child is vested, should workers check the QRTP as “Yes” for the new Permanency Planning Hearing (PPH) option? If so, does this answer then trigger a report or prompt for a long-stayer review?

Ongoing assessments are required for Title IV-E compliance and for the permanency hearing statutes and regulations. They closely align with the requirement to continually assess the appropriateness of a child’s placement and the need for the placement to be the least restrictive setting. As such, the questions in the permanency hearing report that are enabled based on a “Yes” response are relevant for children placed before and after 9/29/21.

18. Are youth who were placed prior to 9/29/21 in a residential voluntary agency that was later designated as a QRTP considered vested and not subject to the FFPSA requirements?

With the exception of the federal and state court review requirements applicable to children in foster care who continue to reside in a QRTP, children cared for in a residential setting prior to 9/29/21 which became an approved QRTP and who remain in the same setting are considered vested and not subject to other FFPSA requirements.

If a youth who is vested moves to another QRTP or is absent for more than 90 days and then returns, all FFPSA requirements must be met as that youth is no longer vested.

19. If Title IV-E eligibility is capped at 14 days for a youth placed in a non-specified setting and they step down to a FBH, will they be eligible for Title IV-E again in that foster home?

FBHs are not subject to the FFPSA QRTP Title IV-E requirements.

Placement in a non-specified setting does not change a child's eligibility; it changes the ability to draw down IV-E reimbursement beyond 14 days. That is allowability.

20. Are there any exemptions for youth identified or accepted in the Office for People With Development Disabilities (OPWDD) system?



Family First Prevention Services Act FAQs

If a child is in the care and custody or custody and guardianship of an LDSS or OCFS and is placed in a QRTP on or after 9/29/21, then the FFPSA requirements are applicable, regardless of diagnosis. FFPSA QRTP standards do not apply to children placed in an OPWDD facility. There are some community OPWDD settings that are eligible for Title IV-E reimbursement. With the implementation of FFPSA, those settings are now considered non-specified, so the system would only allow 14 days of Title IV-E reimbursement for an otherwise Title IV-E eligible child in foster care.

21. Is there any written guidance regarding Juvenile Delinquents (JDs)?

Some initial information:

- If a JD is not yet placed in LDSS or OCFS custody, then FFPSA requirements are not required.
- If a re-Disposition Investigation (PDI) or Youth Assessment and Screening Instrument (YASI) assessment is conducted for a JD youth prior to disposition, that does not satisfy FFPSA requirements, as the child is not yet in custody of LDSS or OCFS.
- If that JD is subsequently ordered into LDSS or OCFS custody and placed in a QRTP, FFPSA requirements are triggered.
- The PDI/YASI cannot be considered the 30-day assessment by a QI. However, the QI should have access to those reports, as information contained in those documents would most likely have relevance to the assessment they are conducting.

22. Are long-stayer reviews required for youth who are vested?

Long-stayer reviews are not required for youth who are vested; however, there must be regular, rigorous discharge and permanency planning for these youth.

23. Will OCFS provide guidance on trauma-informed models for QRTPs?

Since a QRTP must have a trauma-informed treatment model designed to address the needs of children with serious emotional or behavioral disorders, OCFS looked to the national standards set forth by the

- Substance Abuse and Mental Health Services Administration (SAMHSA) and
- National Child Traumatic Stress Network (NCTSN) to provide the framework for a trauma-informed model.

Detailed guidance can be found in [21-OCFS-ADM-04](#).

24. Do youth who are pre-dispositional Person in Need of Supervision (PINS) and are in placement for 30 days require a QI assessment?

FFPSA requirements apply to youth in the care and custody or custody and guardianship of LDSS or OCFS (SSL §§ 384 and 384-a and FCA Article 3, 7, 10 and 10-C).



Family First Prevention Services Act FAQs

This does not include

- Youth who are Adolescent Offenders (AO) or Juvenile Offenders (JO) and sentenced to confinement from criminal court or
- Youth who are Juvenile Delinquents and sentenced to confinement in an OCFS secure setting,

Youth remanded to pre-dispositional detention are not subject to FFPSA requirements. Youth who are PINS placed in a pre-dispositional placement (PDP) are not subject to FFPSA requirements as that child is not considered to be in foster care.

25. If a judge orders a youth to another 30 days prior to deciding their PINS status, would we at that point need a QI assessment?

For FCA Article 7 (PINS) cases, once disposition has occurred and if the youth is ordered into placement with LDSS legal custody and is placed in a program designated as a QRTP, FFPSA requirements are required, including a 30-day assessment by a QI.

Data

1. I am unable to access my congregate care data because I am unable to download or install programs on my computer, how can I receive my data?

Please reach out to us at FamilyFirstNY@OCFS.NY.Gov for assistance.

2. My congregate care data does not match the data provided by OCFS, why is that?

Data is pulled from CONNECTIONS, which is a living data system. Numbers will vary depending on when data was extracted. For additional assistance, please send inquiries to FamilyFirstNY@OCFS.NY.Gov.

3. What are the numbers of PINS or JD placements currently? Can we also get data for length of stay for this population?

OCFS has created a Family First folder in the Data Warehouse that enables LDSSs to create a demographic profile of youth residing in congregate care settings on the last day of any given month. Included in these predefined reports are breakouts for the type of petition associated with the child's case and length of time in their current care setting as well as other demographics, such as age, race, and ethnicity.