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***Submitted to the Children’s Bureau on 4/1/2020**

Enhancing South Carolina’s Child Welfare System: Developing a Child and Family Well-Being Continuum

The South Carolina Department of Social Services (“Department”) is South Carolina’s lead child welfare agency. The Department’s charge is to protect the state’s most vulnerable populations; its mission, to promote the safety, permanency, and well-being of children while strengthening families. To fulfill its objective, the Department envisions a system that is trauma-informed, family-centered, strengths-based, culturally-responsive, and recognizes that children belong in the least restrictive, most family-like, and trauma-informed settings possible, where they can thrive and grow. Reinforcing its belief in strengthening families, the Department firmly believes that empirically sound interventions and services can prevent the occurrence and reoccurrence of child maltreatment.

On Feb. 9, 2018, President Donald Trump signed the Bipartisan Budget Act of 2018 (H.R. 1892) into law which included the Family First Prevention Services Act (FFPSA; Public Law 115-123). This Act dramatically changed the way Title IV-E funds can be spent by states. Multiple reforms within the legislation provide a novel opportunity for child welfare systems to begin their transformation into systems of well-being for children and families. This legislation, paired with our values and vision, uniquely poises the State for systemic transformation.

While this legislation brings great hope for change, with it too comes implementation challenges. Specifically, the requirements related to prevention services and Qualified Residential Treatment Programs will require the Department to innovate and act intentionally. Notwithstanding these challenges, the Department affirms its commitment to develop a continuum of care that addresses the needs of South Carolina’s children and families and appreciates the substantial investment and meaningful partnership with community partners necessary to achieve this goal.

The prevention component enables states, territories, and tribes with an approved Title IV-E prevention plan to provide time-limited prevention services for mental health, substance use prevention and treatment, and for in-home parent skill-based programs. This aspect of the legislation is transformative and has far-reaching implications that will fundamentally change the practice for the Department but requires that approved services must meet certain qualifying thresholds designated by the Title IV-E

Clearinghouse. Currently, the Clearinghouse has a limited number of evidence-based programs (EBPs), which when compared with the state's service array are either not present in South Carolina or are present but geographically limited. Furthermore, the costs associated with building capacity, whether statewide or in specific geographic locations, create fiscal challenges difficult to overcome without assistance from our federal partners.

The second area of focus is the use of congregate or group care and its emphasis on the need for children to be placed in "family-like" settings (i.e. family foster homes) or in approved settings such as a Qualified Residential Treatment Program (QRTP). While the Department believes that children belong in the least restrictive and most "family-like" settings possible, it understands that a higher level of care might be needed in some cases. However, QRTP requirements in the Act require a significant shift from current congregate care practice in the State. To comply with QRTP mandates and bridge the gap in meeting these thresholds for care, the Department will need to invest in its community providers as they transition to new processes, standards, and placement requirements.

Additionally, this paradigm shift will also require a marked change in information technology to efficiently support initiatives in training for the Department's workforce. Also, as mentioned above, to ease this transition the Department will need to invest in a pilot program to build capacity for QRTPs and services.

Outlined in the following section are transitional initiatives the Department will pursue if FFTA funds are provided:

- 1. Assist congregate care providers to transition to QRTP requirements**
- 2. Build capacity for evidence-based practices**
- 3. Develop, implement, and maintain a FFPSA pilot program**
- 4. Train, and support a well-qualified child welfare workforce**
- 5. Enhance current technology infrastructure to support FFPSA**

6. Seek assistance and partnership to develop and maintain evaluation and continuous quality improvement strategies as required by the Title IV-E Prevention Plan

In summation, the allotted transitional funds and implementation of these initiatives will allow the State to effectively develop a continuum of services that mitigates the reoccurrence of child maltreatment, reduces the number of children entering foster care and the trauma associated with removal, improving timely reunification and permanency, and assisting in placement of children and youth in the most appropriate settings. The State believes this will have an overall impact on improving the safety, permanency and well-being of children and on strengthening South Carolina's families.