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PROGRAM INSTRUCTION

TO: State, Tribal and Territorial Agencies Administering or Supervising the Administration of IV-E of the Social Security Act

SUBJECT: Requirements for Participating in the Title IV-E Kinship Navigator Program

LEGAL AND RELATED REFERENCES: Title IV-E of the Social Security Act (the Act), as amended by Public Law (P.L.) 115-123, enacted February 9, 2018.

PURPOSE: To instruct title IV-E agencies on the requirements for participating in the Title IV-E Kinship Navigator Program.

INFORMATION: The Family First Prevention Services Act (FFPSA), enacted as part of Public Law (P.L.) 115-123, amended the Act to allow title IV-E agencies to receive funding for kinship navigator programs that meet certain criteria. The amendment at section 474(a)(7) of the Act authorizes title IV-E agencies to claim 50 percent Federal Financial Participation (FFP) for allowable kinship navigator program costs beginning no earlier than October 1, 2018. This program instruction provides instructions on how title IV-E agencies may participate in this new title IV-E program.

Title IV-E Kinship Navigator Program Requirements

To qualify for funding under the title IV-E Kinship Navigator program, the program implemented by a title IV-E agency must meet the requirements described in section 427(a)(1) of the Act, as follows:

“ (1) a kinship navigator program to assist kinship caregivers in learning about, finding, and using programs and services to meet the needs of the children they are raising and

their own needs, and to promote effective partnerships among public and private agencies to ensure kinship caregiver families are served, which program—

(A) shall be coordinated with other State or local agencies that promote service coordination or provide information and referral services, including the entities that provide 2–1–1 or 3–1–1 information systems where available, to avoid duplication or fragmentation of services to kinship care families;

(B) shall be planned and operated in consultation with kinship caregivers and organizations representing them, youth raised by kinship caregivers, relevant government agencies, and relevant community-based or faith based organizations;

(C) shall establish information and referral systems that link (via toll-free access) kinship caregivers, kinship support group facilitators, and kinship service providers to—

(i) each other;

(ii) eligibility and enrollment information for Federal, State, and local benefits;

(iii) relevant training to assist kinship caregivers in caregiving and in obtaining benefits and services; and

(iv) relevant legal assistance and help in obtaining legal services;

(D) shall provide outreach to kinship care families, including by establishing, distributing, and updating a kinship care website, or other relevant guides or outreach materials;

(E) shall promote partnerships between public and private agencies, including schools, community based or faith-based organizations, and relevant government agencies, to increase their knowledge of the needs of kinship care families and other individuals who are willing and able to be foster parents for children in foster care under the responsibility of the State who are themselves parents to promote better services for those families;

(F) may establish and support a kinship care ombudsman with authority to intervene and help kinship caregivers access services; and

(G) may support any other activities designed to assist kinship caregivers in obtaining benefits and services to improve their caregiving.”

Practice Criteria for Title IV-E Kinship Navigator Programs

Programs funded under the title IV-E Kinship Navigator Program must also meet practice criteria of promising, supported, or well-supported in accordance with HHS criteria and be approved by HHS (section 471(e)(4)(C) of the Act). The same practice criteria are being used for the new Title IV-E Prevention and Family Services and Programs and the Kinship Navigator Program. The practice criteria are provided in Attachment C.

The Title IV-E Prevention Services Clearinghouse is in the process of reviewing and rating services and programs for HHS approval. Attachment C includes an initial list of the services and programs, including kinship navigator programs that the Clearinghouse will evaluate under the HHS practice criteria. We expect the Title IV-E Prevention Services Clearinghouse to complete reviewing and rating the services and programs in Attachment C in the spring of 2019. We will

provide additional information regarding approved services and programs, and the selection of additional services and programs for evaluation in future issuances.

Child and Family Eligibility for Title IV-E Kinship Navigator Programs

Children in kinship care arrangements and their families are eligible for services under the Title IV-E Kinship Navigator Program, without regard to whether the child is currently, or is potentially, eligible for title IV-E foster care maintenance payments (section 474(a)(7) of the Act). There also is no requirement that the child be determined to meet the definition of a foster care candidate to be eligible for services.

A title IV-E agency has discretion to determine the scope of the population to be served through its Kinship Navigator program, including children being cared for by kin in foster care or legal guardianship arrangements, children at risk of entering foster care being cared for by kin, and children being cared for by kin outside of the child welfare system.

The statute does not define “kinship caregiver” for purposes of this program. Therefore, the title IV-E agency may serve families headed by a grandparent or other relative as well as tribal kin, extended family and friends, or other ‘fictive kin’ who are caring for children.

Geographic Scope of Services

A title IV-E agency is not required to operate the Kinship Navigator program in all counties and geographic locations in the state or tribal service area, but we encourage title IV-E agencies to implement the program as broadly as possible in order to make Kinship Navigator services available to as many families in need of those services as possible.

INSTRUCTIONS FOR TITLE IV-E KINSHIP NAVIGATOR PROGRAMS:

Title IV-E Plan Attachment for Kinship Navigator Program

To begin participation in the title IV-E Kinship Navigator Program, a title IV-E agency must submit an attachment to its title IV-E plan (see Title IV-E Plan Pre-Print Attachment XII found at Attachment B of this PI) that specifies the Kinship Navigator model it has chosen to implement, the date on which the provision of program services began or will begin, and that provides an assurance that the model meets the requirements of section 427(a)(1) of the Act. The selected program model must have been identified by the Title IV-E Prevention Services Clearinghouse as meeting promising, supported, or well-supported practice criteria.

The title IV-E agency must also provide a brief narrative describing:

- the target population and service area for the program;
- how the title IV-E agency plans to implement the kinship navigator program (e.g., directly or through contracted service providers);

- how the program is coordinated with other state or local agencies that promote service coordination or provide information and referral services; and
- how the development and operation of the program has been and will be informed by consultation with kinship caregivers and organizations representing them, youth raised by kinship caregivers, relevant government agencies, and relevant community-based or faith based organizations.

The title IV-E agency may submit the Pre-Print Attachment XII for a Kinship Navigator Program at any time. If the title IV-E agency with an approved Kinship Navigator Program elects to change its Kinship Navigator model or if the title IV-E agency expands the Kinship Navigator program to be statewide or in a different service area, the title IV-E agency must resubmit an updated attachment to the title IV-E plan. The title IV-E agency must submit the updated attachment no later than the end of the calendar quarter in which the stated program changes are to be in effect.

Federal Financial Participation

As provided for in Section 474(a)(7) of the Act, title IV-E funding is available for program services and administration for the Title IV-E Kinship Navigator Program, provided certain requirements are met, as delineated at Section 427(a)(1) of the Act. Title IV-E expenditures for the program are reimbursable at the 50 percent FFP rate and may begin for periods starting no earlier than October 1, 2018 once the Children’s Bureau (CB) approves the agency as operating a Kinship Navigator program that meets all program requirements.

Title IV-E agencies that elect to operate a Title IV-E Kinship Navigator program must submit a title IV-E plan Pre-Print Attachment XII (found at Attachment B of this PI). This submission must identify the date on which title IV-E costs for program operations involving provision of services to families began or will begin. Title IV-E claiming of Kinship Navigator program costs may not begin until the quarter in which such a submission is made. Once such an attachment is approved by the CB, title IV-E claims for allowable costs may be submitted for prospective and past periods no earlier than October 1, 2018 as identified in the title IV-E plan attachment. Please note that any prior quarter adjustment title IV-E claims are subject to the time limit for claiming as per federal regulations at 45 CFR 95.7 (i.e., the agency must submit the claim within 2 years after the calendar quarter in which the title IV-E agency made the expenditure).

All administrative costs must be allocable to the Title IV-E Kinship Navigator Program in accordance with an approved or pending public assistance cost allocation plan under Federal regulations at 45 CFR Part 95 Subpart E – Cost Allocation Plans (States) or an approved child welfare cost allocation methodology and a negotiated indirect cost rate (Tribes). Examples of activities constituting administrative costs are those for program policy development in compliance with Section 427(a)(1) of the Act and operational support activities centralized in the grantee department or in some other agency such as procurement; payroll; personnel functions; management, maintenance and operation of space and property; data processing and computer services; accounting; budgeting; auditing. Any expenditures incurred for the development, delivery or participation in training by eligible staff and the staff of State/Tribe licensed or

approved child welfare agencies providing title IV-E kinship navigator services to or on behalf of eligible clients are also reimbursable at the 50 percent FFP rate.

Administrative costs for the Title IV-E Kinship Navigator program may not begin until the quarter in which provision of services through a program model meeting the practice criteria has begun. Title IV-E agencies should note that Congress has provided special funding in FYs 2018 and 2019 under title IV-B to support the development, enhancement or evaluation of kinship navigator programs. See Program Instruction [ACYF-CB-PI-18-05](#) for further information on the kinship navigator funding made available in FY 2018. Guidance on how to apply for the FY 2019 title IV-B kinship navigator funding will be issued separately.

Financial Reporting

Expenditures and next quarter estimates for title IV-E Kinship Navigator Programs are reported on the CB-496 form. The revised form and specific instructions for reporting such costs can be found in ACYF-CB-PI-18-12.

Inquiries To: Children's Bureau Regional Program Manager

/s/
Jerry Milner
Acting Commissioner
Administration on Children, Youth and Families

Attachment A - Children's Bureau Regional Program Managers

Attachment B - Title IV-E Plan Pre-Print Attachment XII - Kinship Navigator Program

Attachment C - HHS Initial practice criteria and first list of services and programs selected for review as part of the Title IV-E Prevention Services Clearinghouse

Regional Program Managers – Children’s Bureau

1	<p>Region 1 - Boston Bob Cavanaugh bob.cavanaugh@acf.hhs.gov JFK Federal Building, Rm. 2000 15 Sudbury Street Boston, MA 02203 (617) 565-1020 States: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont</p>	6	<p>Region 6 - Dallas Janis Brown janis.brown@acf.hhs.gov 1301 Young Street, Suite 945 Dallas, TX 75202-5433 (214) 767-8466 States: Arkansas, Louisiana, New Mexico, Oklahoma, Texas</p>
2	<p>Region 2 - New York City Alfonso Nicholas alfonso.nicholas@acf.hhs.gov 26 Federal Plaza, Rm. 4114 New York, NY 10278 (212) 264-2890, x 145 States and Territories: New Jersey, New York, Puerto Rico, Virgin Islands</p>	7	<p>Region 7 - Kansas City Deborah Smith deborah.smith@acf.hhs.gov Federal Office Building, Rm. 349 601 E 12th Street Kansas City, MO 64106 (816) 426-2262 States: Iowa, Kansas, Missouri, Nebraska</p>
3	<p>Region 3 - Philadelphia Lisa Pearson lisa.pearson@acf.hhs.gov The Strawbridge Building 801 Market Street Philadelphia, PA 19107-3134 (215) 861-4030 States: Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia</p>	8	<p>Region 8 - Denver Marilyn Kennerson marilyn.kennerson@acf.hhs.gov 1961 Stout Street, 8th Floor Byron Rogers Federal Building Denver, CO 80294-3538 (303) 844-1163 States: Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming</p>
4	<p>Region 4 - Atlanta Shalonda Cawthon shalonda.cawthon@acf.hhs.gov 61 Forsyth Street SW, Ste. 4M60 Atlanta, GA 30303-8909 (404) 562-2242 States: Alabama, Mississippi, Florida, North Carolina, Georgia, South Carolina, Kentucky, Tennessee</p>	9	<p>Region 9 - San Francisco Debra Samples debra.samples@acf.hhs.gov 90 7th Street - Ste 9-300 San Francisco, CA 94103 (415) 437-8626 States and Territories: Arizona, California, Hawaii, Nevada, Outer Pacific—American Samoa Commonwealth of the Northern Marianas, Federated States of Micronesia (Chuuk, Pohnpei, Yap) Guam, Marshall Islands, Palau</p>
5	<p>Region 5 - Chicago Kendall Darling kendall.darling@acf.hhs.gov 233 N. Michigan Avenue, Suite 400 Chicago, IL 60601 (312) 353-9672 States: Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin</p>	10	<p>Region 10 - Seattle Paula Bentz paula.bentz@acf.hhs.gov 701 Fifth Avenue, Suite 1600, MS-73 Seattle, WA 98104 (206) 615-3662 States: Alaska, Idaho, Oregon, Washington</p>

Title IV-E Plan Pre-Print Attachment XII - Kinship Navigator Program

Instructions: This attachment to the Title IV-E Plan Pre-Print is to be used to participate in the Title IV-E Kinship Navigator Program, as authorized by section 474(a)(7) of the Act. The attachment may be submitted at any time and will remain in effect on an ongoing basis unless the agency makes a change in its program.

If the title IV-E agency with an approved Kinship Navigator Program elects to change its Kinship Navigator model or if the title IV-E agency expands the Kinship Navigator program to be statewide or in a different service area, the title IV-E agency must submit an updated attachment no later than the end of the calendar quarter in which the stated program changes are to be in effect.

I certify that _____
(Name of title IV-E Agency)

will implement a Title IV-E Kinship Navigator Program, that meets the requirements described in section 427(a)(1) of the Act and that has been approved by HHS as meeting the HHS practice criteria of promising, supported, or well-supported in accordance with section 471(e)(4)(C) of the Act. The agency has selected to implement the

_____,
(Name of the Kinship Navigator Program)

The date on which the title IV-E agency began implementation (no earlier than October 1, 2018) or will begin implementation is:

_____.

HHS Initial Practice Criteria and First List of Services and Programs Selected for Review as part of the *Title IV-E Prevention Services Clearinghouse*

The Family First Prevention Services Act requires HHS to conduct an independent systematic review of evidence to rate services and programs as promising, supported, and well-supported practices.

On June 22, 2018, HHS published a Federal Register Notice (FRN; [83 FR 29122](#)) requesting public comment on initial criteria and potential services and programs to be considered for systematic review in the *Title IV-E Prevention Services Clearinghouse* (*herein the Clearinghouse*). The initial criteria were intended to (a) determine eligibility of programs and services for review by the Clearinghouse, (b) prioritize eligible programs and services for review, (c) determine eligibility of studies aligned with prioritized programs and services, (d) prioritize eligible studies for rating, (e) rate studies, and (f) rate programs and services as promising, supported, and well-supported practices. The FRN also requested recommendations of potential services and programs to be considered for systematic review. The comment period closed on July 22, 2018. Over 360 responses were received, most containing multiple comments. Commenters included state and local administrators, service and program developers, foundations, non-profit organizations, researchers and evaluators, and other stakeholders.

This attachment includes revised initial criteria and the first dozen services and programs selected for systematic review. The Clearinghouse will select additional services and programs for review on a rolling basis. In developing these revised initial criteria and selecting the first dozen services and programs, HHS considered public comments on the FRN and input from federal partners, as well as other key stakeholders including the California Evidence-Based Clearinghouse.

Overall, public comments recommended adopting broad and inclusive criteria to determine services or programs and associated studies considered for review. Public comments and feasibility considerations informed several notable revisions to the initial criteria. For example, the revised initial criteria no longer consider target population/sample, implementation period, trauma-informed approach, magnitude of effects, and in-home delivery setting in determining eligibility, prioritization, or rating. When possible, the Clearinghouse will document and release additional information beyond that considered as part of the revised initial criteria. This additional information may include, but is not limited to details about: the extent to which the service or program is provided under an organizational structure or framework in accordance with principles of a trauma informed approach and/or represents a trauma specific intervention; intended target population of service or program; availability of culturally specific, location or population-based adaptation of service or program; service or program delivery setting; and study specific information such as effect sizes, power, and additional detail on study sample and subsample.

I. Revised Initial Criteria

The Clearinghouse will use the *Service or Program Eligibility and Prioritization Criteria* to identify and prioritize services and programs for review. Subsequently, the Clearinghouse will use the *Study Eligibility and Prioritization Criteria* to identify and prioritize our review of studies for each of the selected services and programs. The Clearinghouse will use the *Study Rating Criteria* to assess the design, execution, and impacts of studies. The Clearinghouse will use the *Service or Program Rating Criteria* to rate services or programs as “promising,” “supported,” “well-supported,” or “does not currently meet criteria.” A more detailed description of the revised initial criteria and procedures for systematic review and re-review along with definitions of key terminology will be included in the forthcoming Title IV-E Prevention Services Clearinghouse Procedures Handbook.

1. *Service or Program Eligibility Criteria.* Services or programs must, at a minimum, meet the following criteria to be eligible for review by the Clearinghouse [sections 471(e)(1) and 471(e)(4)(C) of the Social Security Act (the Act)]:
 - a. Types of Services and Programs. Eligibility will be limited to mental health and substance abuse prevention and treatment services and in-home parent skill-based programs as well as kinship navigator programs.
 - b. Book/Manual/Writings Available. Eligibility will be limited to services or programs that have a book, manual, or other available documentation that specifies the components of the practice protocol and describes how to administer the practice.

2. *Service or Program Prioritization Criteria.* Timing and resources may not allow for the Clearinghouse to conduct a detailed review of all services and programs that meet the *Service or Program Eligibility Criteria*. Services or programs will be prioritized for Clearinghouse review using the following criteria:
 - a. Target Outcomes. Services or programs that aim to impact target outcomes identified by the Clearinghouse will be prioritized for review [section 471(e)(4)(C) of the Act]. Target outcomes for mental health and substance abuse prevention and treatment services and in-home parent skill-based programs will include a wide array of outcomes that fall broadly under the following domains: child safety, child permanency, child well-being, and adult (parent and kin caregiver) well-being. Target outcomes for kinship navigator programs will include all outcome domains listed above as well as access to, referral to, and satisfaction with services and programs.
 - b. In Use/Active. Services or programs currently in use with a book, manual, or other documentation available in English will be prioritized.
 - c. Implementation and Fidelity Support. Services or Programs that have implementation training and staff support and/or fidelity monitoring tools and resources available to implementers in English will be prioritized.

Initially, the *Title IV-E Prevention Services Clearinghouse* will give particular consideration to services and programs recommended by state and local government

administrators in response to the FRN, included as part of existing evidence reviews, and/or evaluated by Title IV-E Child Welfare Waiver Demonstrations. The Clearinghouse will also give particular consideration to ensure services and programs from each category (i.e., mental health, substance abuse, in-home parent, or kinship navigator) are represented.

3. *Study Eligibility Criteria.* Studies examining each of the selected services and programs will be screened for eligibility for inclusion in the Clearinghouse using the following criteria:
 - a. *Source.* Eligibility will be limited to studies included in peer-reviewed journal articles and/or publicly available literature that may include, but is not limited to federal, state, and local government and foundation reports.
 - b. *Study Design.* Eligibility will be limited to study designs that assess effectiveness (i.e., impact) using quantitative methods and utilize an appropriate control. Eligible study designs include Randomized Controlled Trials (RCT), Quasi-Experimental Designs (QED), and other non-experimental designs that utilize an appropriate control.
 - c. *Target Outcomes.* Eligibility will be limited to studies that examine the impact of the service or program on at least one ‘target outcome.’ Target outcomes for studies of mental health and substance abuse prevention and treatment services and in-home parent skill-based programs will include a wide array of outcomes that fall broadly under the following domains: child safety, child permanency, child well-being, and adult (parent and kin caregiver) well-being. Target outcomes for studies of kinship navigator programs will include all outcome domains listed above as well as access to, referral to, and satisfaction with services and programs.
 - d. *Study Available in English.* Eligibility will be limited to studies available in English.

Initially, the *Title IV-E Prevention Services Clearinghouse* will give particular consideration to studies published or prepared in or after 1990.

4. *Study Prioritization Criteria.* Timing and resources may not allow for the Clearinghouse to conduct a detailed review of all studies determined within a selected service or program to be eligible according to the *Study Eligibility Criteria*. The order and depth of review for studies will be determined on the basis of study features that may include sample size, duration of sustained effects examined, and type of study design.
5. *Study Rating Criteria.* The Clearinghouse will rate studies using the following criteria:
 - a. *Study Design and Execution.* Building from the standards of existing evidence reviews such as the What Works Clearinghouse (WWC) and Home Visiting Evidence of Effectiveness (HomVEE), the Clearinghouse will assess studies on the basis of study design, overall and differential sample attrition, the equivalence of intervention and comparison groups at baseline (as applicable),

and when necessary, procedures accounting for clustering. In addition, the study must account for confounding factors and examine at least one “target outcome” (see *Study Eligibility Criteria*) using a measure that is reliable and achieves face validity. Inconsistencies in systematic administration, as noted in study text, will also be considered. Studies will be rated as “high,” “moderate,” or “low.” The study-level ratings will provide an indicator of the extent to which a study provides unbiased estimates of model impacts.

- b. Effects. The following effects, defined using conventional standards of statistical significance, will be examined in the full analysis sample for studies that achieve a “high” or “moderate” rating on Study Design and Execution:
 - i. Favorable Effects. Studies will be rated based on whether they demonstrate at least one meaningful favorable effect (i.e., positive significant effect) on a ‘target outcome.’
 - ii. Unfavorable Effects. Studies will be rated based on the number of unfavorable effects (i.e., negative significant effects) on either ‘target’ or non-target outcomes.
 - iii. Sustained Favorable Effect. Studies with at least one meaningful favorable effect on a ‘target outcome’ will be rated on whether or not they demonstrate a favorable effect sustained beyond the end of treatment. Studies will be classified as not demonstrating a sustained favorable effect (i.e., effects are demonstrated for less than 6 months), demonstrating a sustained favorable effect of 6 months or more (but less than 12 months), or demonstrating a sustained favorable effect of 12 months or more.

Initially, due to time and resource constraints, the Clearinghouse will use only effects resulting from analyses of the full study sample for rating. This decision may be reconsidered in the future.

6. *Service or Program Rating Criteria.* The Clearinghouse will rate a service or program as a ‘promising,’ ‘supported,’ or ‘well-supported’ practice if it meets the below criteria that collectively assess the strength of evidence for a practice and build from the *Study Rating Criteria* [section 471(e)(4)(C) of the Act].
 - a. *Promising Practice:* A service or program will be rated as a ‘promising practice’ if the service or program has at least one study that achieves a rating of ‘moderate’ or ‘high’ on Study Design and Execution and demonstrates a favorable effect on at least one ‘target outcome.’
 - b. *Supported Practice:* A service or program will be rated as a ‘supported practice’ if the service or program has at least one study carried out in a usual care or practice setting that achieves a rating of ‘moderate’ or ‘high’ on Study Design and Execution and demonstrates a sustained favorable effect of at least 6 months beyond the end of treatment on at least one target outcome.
 - c. *Well-Supported Practice:* A service or program will be rated as a ‘well-supported practice’ if the service or program has at least two studies with non-

overlapping analytic samples carried out in a usual care or practice setting that achieve a rating of ‘moderate’ or ‘high’ on Study Design and Execution. At least one of the studies must demonstrate a sustained favorable effect of at least 12 months beyond the end of treatment on at least one target outcome.

- d. *Does Not Currently Meet Criteria:* A service or program will be rated as ‘does not currently meet criteria’ if the service or program has been reviewed and does not currently meet the evidence criteria for ‘promising,’ ‘supported,’ or ‘well-supported’ practices.

In accordance with the Family First Prevention Services Act, a service or program will not be rated as a ‘promising,’ ‘supported,’ or ‘well-supported practice’ if there is an empirical basis, as evidenced by multiple unfavorable effects on target or non-target outcomes across reviewed studies that suggest the overall weight of evidence does not support the benefits of the service or program.

II. First Services and Programs Selected for Systematic Review

HHS received and carefully considered a high volume of recommendations for services and programs to review as part of the Clearinghouse. The recommendations have informed the first services and programs selected for review and will inform additional services and programs to be selected for review on a rolling basis. Building from recommendations received from the FRN, federal partners, and other key stakeholders, as well as new information gathered, the Clearinghouse will utilize the forthcoming procedures and revised initial criteria to identify and prioritize additional services and programs for review.

The first services and programs selected for systematic review met at least two of the following conditions: (1) recommendation from State or local government administrators in response to the FRN; (2) rated by the California Evidence-Based Clearinghouse; (3) evaluated by Title IV-E Child Welfare Waiver Demonstrations; (4) recipient of a Family Connection Discretionary Grant; and/or (5) recommendation solicited from federal partners in the Administration for Children and Families, Health Resources and Services Administration, the National Institutes of Health, the Centers for Disease Control and Prevention, the Office of the Assistant Secretary for Planning and Evaluation, and the Substance Abuse and Mental Health Services Administration. Findings from the review of the first dozen services and programs are scheduled for release in Spring 2019. This review will rate programs as “promising,” “supported,” “well-supported,” or “does not currently meet criteria.” The Clearinghouse will select additional services and programs for review on a rolling basis using the revised initial criteria.

Prevention Services and Programs Mental

Health:

Parent-Child Interaction Therapy

Trauma Focused-Cognitive Behavioral Therapy

Attachment C. HHS Initial Practice Criteria and First List of Services and Programs Selected for Review as part of the Title IV-E Prevention Services Clearinghouse

Multisystemic Therapy¹
Functional Family Therapy

Substance Abuse:

Motivational Interviewing
Multisystemic Therapy²
Families Facing the Future
Methadone Maintenance Therapy

In-Home Parent Skill-Based:

Nurse-Family Partnership
Healthy Families America
Parents as Teachers

Kinship Navigator Programs:

Children’s Home Society of New Jersey Kinship Navigator Model
Children’s Home Inc. Kinship Interdisciplinary Navigation Technologically-Advanced Model (KIN-Tech)

The Clearinghouse will release procedures for implementing the *Service or Program Eligibility and Prioritization Criteria* along with definitions of key terminology in the forthcoming Title IV-E Prevention Services Clearinghouse Procedures Handbook.

¹ Also included under the “Substance Abuse” category

² Also included under the “Mental Health” category