



DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
Administration on Children, Youth and Families
330 C Street, S.W.
Washington, D.C. 20201

November 20, 2020

Dear Child Welfare Leaders:

Due to the circumstances related to the Coronavirus Disease 2019 (COVID-19) pandemic and nationwide public health emergency, the Children's Bureau (CB) has received requests for flexibility to meet federal requirements of the title IV-E prevention program authorized under the Family First Prevention Services Act (FFPSA), Pub. L. No. 115-123. We understand the substantial and unprecedented impact of this major crisis on children, families, and the child welfare community, and the importance of providing prevention services in a safe and timely manner. This letter addresses flexibility related to the title IV-E prevention program, allowing programs and services to be adapted to a virtual environment to provide needed support during this crisis.

Background. The President issued a [Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease Outbreak](#) on March 13, 2020. The Secretary of the United States Department of Health and Human Services (HHS) declared a public health emergency on January 31, 2020, pursuant to section 319 of the Public Health Service Act (42 U.S.C. 247d), in response to the COVID-19 pandemic. The public health emergency was most recently extended on October 2, 2020, effective October 23, 2020, and now extends through January [21], 2021, unless earlier terminated by the Secretary. Additionally the President has issued major disaster declarations for jurisdictions in response to the COVID-19 pandemic. All 50 states, the District of Columbia, and 4 territories have received major [disaster declarations](#).

Under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5121 et seq.) (Stafford Act), federal agencies that administer federal assistance programs may modify or waive administrative conditions of federal assistance programs under certain limited circumstances:

- There has been a declaration of a major disaster with respect to the applicable geographic areas;
- The applicant state or local authorities have requested the modification or waiver; and
- The modifications or waivers are with respect to administrative conditions for assistance as would otherwise prevent the giving of assistance under such programs if the inability to meet such conditions is a result of the major disaster ([42 U.S.C. 5141](#)).

Major disaster declarations are posted on the website for the Federal Emergency Management Agency (FEMA) at <https://www.fema.gov/disasters>. COVID-19 resources, including letters to child welfare leaders on flexibilities during this time, may be found at <https://www.acf.hhs.gov/cb/resource/covid-19-resources>.

As a result of requests from title IV-E agencies about challenges during the current emergency and meeting the FFPSA title IV-E prevention program requirements, I am notifying states and tribes of the following flexibility for the [Title IV-E Prevention Program and Services](#).

Pursuant to sections 471(e)(1) and 471(e)(5)(B)(iii) of the Social Security Act (42 U.S.C. 671(e)(1) and 671(e)(5)(B)(iii)), only services and programs provided in accordance with promising, supported, or well-supported practices as rated by the Title IV-E Prevention Services Clearinghouse (the Clearinghouse), or a state's designation based on an independent systematic review approved for transitional payments as part of the title IV-E prevention program 5-year plan by HHS are permitted. Some of the programs and services reviewed and rated by the Clearinghouse may not allow for virtual or remote implementation in accordance with their book, manual, or other available documentation. That is, implementation in a virtual environment would be considered an adapted program or service. Per the legislative requirements, CB previously provided guidance that the title IV-E prevention program must be administered in accordance with the version of the program or service reviewed and rated by the Clearinghouse (see [ACYF-CB-PI-18-09](#), [ACYF-CB-PI-18-10](#), and [ACYF-CB-18-11](#) for details) or approved for transitional payments (see [ACYF-CB-PI-19-06](#) for details). CB, in this IM, has identified that this requirement is an administrative condition that it may modify under the Stafford Act authority. Flexibility under the Stafford Act applies only to jurisdictions that have major disaster declarations and only during the time the title IV-E agency is unable to meet a requirement as a result of the major disaster.

Thus, during the major disaster period, CB will allow title IV-E agencies to adapt programs and services that have been approved as part of the title IV-E agency's Title IV-E Prevention Services Program Plan to a virtual environment to allow for children and families to receive necessary services without interruption and within public health guidelines. CB will only allow title IV-E agencies to adapt such programs and services to a virtual environment in situations where, absent the modification, such programs and services would not be available to families. In these cases, a virtual adaptation must be implemented in accordance with the version of program' or service's book, manual, or other available documentation that has been approved as part of the title IV-E agency's Title IV-E Prevention Services Program Plan. CB strongly urges states to administer programs as designed, without adaptation, whenever possible.

This flexibility will enable tribes and states with approved title IV-E prevention plans to safely provide prevention programs and services under those plans to children, families,

and communities served that otherwise would be unavailable due to office closures, stay-at-home orders, and other disaster related obstacles. Title IV-E agencies must continue to adhere to all other requirements as outlined in [ACYF-CB-PI-18-09](#). Consistent with section 471(e)(5)(B)(iii)(II) of the Social Security Act, title IV-E agencies must continuously monitor title IV-E prevention programs and services to ensure fidelity to the practice model. We encourage title IV-E agencies to do this through discussion and collaboration with the model purveyor, especially when adapting the model to a virtual environment. States should notify the cognizant regional office of any virtual adaptations adopted.

Send inquires to CB regional program managers. Contact information can be found here: <https://www.acf.hhs.gov/cb/resource/regional-program-managers>.

Thank you for your continued efforts to serve children and families.

Sincerely,

/s/

Jerry Milner
Associate Commissioner
Children's Bureau