State and Local Advisory Team (SLAT) February 1, 2024 9:30 a.m. – 12:00

Office of Children's Servies 1604 Santa Rosa Road Richmond, VA 23229 Richmond/Henrico Rooms

AGENDA

<u>Note</u>: This is an in-person meeting To accommodate interested members of the public, the meeting will be viewable at:

> https://meet.goto.com/994172701 or via phone. 872-240-3212 Meeting Passcode: 994-172-701

•	Call to Order / Welcome / Opening Remarks	Mills Jones
•	Public Comment (In-person and remote)	
•	Approval of Minutes – November 2023 SLAT meeting	SLAT Members
•	Status Items Policy Update 	Kristi Schabo
•	 SEC Report December Meeting Update SEC Strategic Planning 	Mills Jones Kristi Schabo
•	 OCS Updates 2024 General Assembly Legislative and Budget Update CHINS/CSA Parental Agreement Workgroup Bench Card on Evidence-Based Programs 	

• Reports to the General Assembly

New Business

• Nominating Committee for FY 2024 Officers (chair and vice-chair)

• SLAT Member Reports

State Representatives

∘ VDH	Kyndra Jackson
o DJJ	Linda McWilliams
o DSS	Em Parente
○ DBHDS	Katharine Hunter
○ DMAS	Laura Reed
◦ DOE	Sabrina Gross
Local Representatives	
◦ LDSS	Amy Swift
 CSA Coordinator 	Mills Jones
◦ CSB	Sandy Bryant
◦ CSU	William Stanley
○ J&DR Court	Honorable Marilynn Goss
○ Parent	Cristy Corbin
ParentPrivate Provider	Cristy Corbin Shannon Updike
	•
 Private Provider 	Shannon Updike

• Closing Remarks / Adjourn

Mills Jones

Next SEC Meeting – Thursday, March 14, 2024

Next <u>SLAT</u> Meeting – Thursday, May 2, 2024

2024 SLAT Meetings

May 2 August 1 November 7

STATE AND LOCAL ADVISORY TEAM (SLAT) CHILDREN'S SERVICES ACT Richmond/Henrico Rooms 1604 Santa Rosa Road Richmond, VA 23229

MINUTES November 2, 2023

Members Present: Rebecca Vinroot, SLAT Chair, CPMT - DSS Representative; Mills Jones, SLAT Vice-Chair - CSA Coordinators Network; Katharine Hunter DBHDS; Cristy Corbin, Parent Representative; Em Parente, DSS (*virtually*); Lesley Abashian, CPMT – Local Government Representative; Laura Reed, DMAS (*virtually*); Kyndra Jackson, VDH (*virtually*); Shannon Updike, VCOPPA; The Honorable Marilynn Goss, Juvenile and Domestic Relations District Court Representative; Sandy Bryant, CPMT – CSB Representative (*virtually*); William Stanley, CPMT – CSU Representative

Members Absent: Susan Aylor, CPMT – School Representative; Sabrina Gross, DOE; Linda McWilliams, DJJ

CSA Staff Members Present: Mary Bell, Marsha Mucha, Scott Reiner, Kristi Schabo

Welcome/Opening

Rebecca Vinroot, SLAT Chair, called the meeting to order at 9:35 a.m. and welcomed everyone. Introductions were made.

Public Comment Period

There were no public comments.

Approval of Minutes

The minutes of the August 3, 2023 meeting were approved on a motion by Lesley Abashian, seconded by Mills Jones and carried.

Status Items

- <u>FAPT Retreat Resource Manual</u> Lesley Abashian reported that the workgroup, with support from OCS Program Consultant, Courtney Sexton, developed the document that SLAT members received today. The document includes examples of materials (i.e. agendas, etc.) and related resources, training options/activities in support of team building as a resource to assist with training of FAPTs. Members were asked to send feedback to Mrs. Abashian.
 <u>Policy Update</u> Kristi Schabo, Senior Policy and Planning Specialist for OCS presented three Notices of Intent to Develop/Revise SEC policies. The Notices of Intent were approved by the SEC at their September 14, 2023 meeting for a 45-day public comment period. The public comment period ended on October 30, 2023 with one comment received. The policies were:
 - Policy 2.4 Public Participation in Policy-Making Actions
 - Policy 3.4 Dispute Resolution Process
 - Policy 4.2 Payment for Services and Change of Legal Residence Mr. Reiner reported that since the policy review began, it has become necessary to make more substantive changes

Draft

to this policy, which the SEC will address at their December 14, 2023 meeting. These changes are necessary to provide additional clarification regarding the processes related to the transfer of CSA cases due to a child/family's change of legal residence.

Ms. Schabo reviewed each of the proposed changes/ additions to the policies. She further explained that next steps would entail a 60-day public comment period on the proposed/revised policies, if that action is approved by the SEC at their December 14, 2023 meeting.

SEC Report

Mrs. Vinroot reported that the SEC last met on September 14, 2023 and discussed/developed goals/metrics for the SEC Strategic Plan. She noted that SLAT members were provided with a copy of the document developed as a result of that work. Mrs. Vinroot asked that members submit feedback to her as the SEC will be voting on the Strategic Plan at their December 14, 2023 meeting.

She also reported that the revised SLAT bylaws were submitted to the SEC and approved at their September 14, 2023 meeting. A copy of the updated SLAT bylaws has been distributed to the SLAT membership.

The Safe and Sound Task Force has developed a Universal Referral Form for residential treatment facilities, which is one standard form can be used to send to multiple providers concerning a potential placement. Mrs. Vinroot noted that she has not had any feedback on the use of the form.

OCS Updates

Mr. Reiner reported on the following:

- <u>Legislative/Budget Update</u> The state budget has been adopted and the implementation of private day special education rate-setting repealed.
- <u>Summary of CSA Utilization and Expenditure Data FY 2023</u> Mr. Reiner reviewed several documents provided to the SLAT membership about CSA and CSA utilization and expenditures for the fiscal year ending June 30, 2023.
- <u>Upcoming CHINS/CSA Parental Agreement Workgroup</u> A workgroup will be convened after the first of the year to work on this project. SLAT members will be invited to participate.
- <u>*Time-to-Service Study*</u> The Study has been concluded. OCS is waiting on approval before it can be released.
- <u>Bench Cards</u> Both the SEC and the Center for Evidence-based Practices recommended the development of a "bench card" that juvenile and domestic relations district court judges could have available while on the bench. The cards will include a listing of evidence-based practices and will be available soon.
- <u>CSA Conference Recap</u> Mary Bell, CSA Program Coordinator, reported that CSA's 12th Annual Conference was held at the Hotel Roanoke and Conference Center, on October 17 and 18, 2023, with over 500 participants. Pre-conference sessions for CSA coordinators, members of FAPTs, and CPMTs were held on October 16, 2023. Next year's Conference will be held on October 16 and 17, 2024 with pre-conference sessions held on October 15, 2024.
- <u>Model Parental Co-Payment Policy</u> Kristi Schabo, CSA Senior Policy and Planning Specialist, reported that a model parental contribution policy has been developed including best practices and guidance to assist localities with developing their own parental contribution policies. The policy is being vetted by the Attorney General's Office for presentation at the SEC's December 14, 2023 meeting.

New Business - FY 2024 Officers

Mrs. Vinroot reported that this would be her last meeting as SLAT Chair. She noted that, per the SLAT bylaws, the SLAT Vice-Chair may assume the duties of the SLAT Chair in case of a vacancy. A Nominating Committee will be appointed at the February 2024 SLAT meeting to work on nominations for the upcoming year (beginning July 1, 2024). An election of officers will be held at the May 2024 SLAT meeting.

Mr. Reiner thanked Mrs. Vinroot for her service to the SLAT and wished her well in the future.

Member Updates

Members reported for their agencies and organizations on ongoing projects, new programs, conferences, and other ongoing activities. Members continue to work within their agencies and advocate through their associations for improvements to services and service delivery for the children, youth, and families of Virginia.

- VDH has been recruiting youth to serve on Virginia's Youth Advisory Council which encourages youth to become involved in the public health of their communities.
- VDSS is focusing on the "Kin First Now" initiative that invests in relative foster care placements of youth.
- VDSS Family Services participated in the CSA Office Hours in October 2023.
- DHBDS received funding in the state budget to provide for the expansion of school-based mental health services and the expansion of community-based crisis stabilization.
- DMAS behavioral health fee-for-service programs will be administered by Magellan as of November 1, 2023.
- DMAS has submitted a budget request for additional funding for youth behavioral health services (Project BRAVO, Phase 2).
- On behalf of the CSA Coordinators Network, Mills Jones thanked OCS for hosting the CSA Conference, the OCS Audit Team for their workshops at the Conference, and the recent OCS Office Hours with representatives from VDSS.
- Judge Goss reported that November 18, 2023, is National Adoption Day. This is an annual program for families to connect with the juvenile and domestic relations district courts in celebration of and to raise awareness of adoption.
- Cristy Corbin reported on activities of the Virginia Family Network and ways in which parents and youth can become informed and involved. She also thanked OCS for the family-focused content of the CSA Conference.
- The Virginia Association of Local Human Services Officials (VALHSO) held its Fall Conference in September.

Adjournment

There being no other business, the meeting adjourned at 11:30 a.m. on a motion by Lesley Abashian, seconded by Mills Jones and carried. The next meeting is scheduled for February 1, 2024.

Judicial Bench Card :

Evidence-Based Programs for Youth and Families





A Guide to Available Evidence-Based Programs in Virginia.

The term **evidence-based** means that the listed services in this guide have published studies that demonstrate that they reduce the need for (a) foster care, (b) hospitalization, and (c) other types of residential placement. Studies also suggest that they reduce negative behaviors (e.g., substance abuse) and strengthen family supports. Many include additional benefits to family members and their behavioral health, in addition to the impact shown for youth.

Evidence-Based Services currently available in Virginia:

- Brief Strategic Family Therapy (BSFT®)
- Family Check-Up (FCU)
- Functional Family Therapy (FFT)
- High Fidelity Wraparound (HFW or HiFi)
- Homebuilders (HB)
- Multisystemic Therapy (MST)
- Parent-Child Interaction Therapy (PCIT)

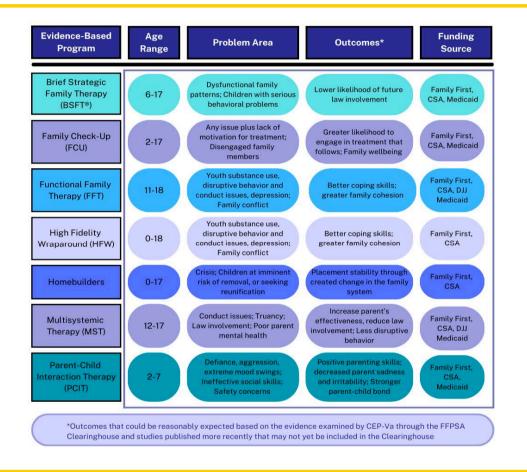
Available Payment Sources for Evidence-Based Programs

The Children's Services Act (CSA), through FAPT (Family Assessment and Planning Teams) recommended services, can pay for evidence-based programs. Additionally, a child that has an open Foster Care In-Home case (previously known as CPS Ongoing or Foster Care Prevention) is eligible to receive these services through the Family First Prevention Services Act. There are additional funding sources as described on the chart.

Center for Evidence-Based Partnerships in Virginia Virginia Commonwealth University www.cep-va.org



Bench Card: Evidence-Based Programs Available in Virginia



While Virginia continues to expand access to Evidence-Based Programs, not all programs are available in every jurisdiction. Probation Officers, LDSS staff, CSA Coordinators, and others who serve on area FAPTs and CPMTs (Community Policy Management Team) should be aware of available services.

EBPFinder.org may be used to locate select EBPs in Virginia by locality.



OFFICE OF CHILDREN'S SERVICES

ADMINISTERING THE CHILDREN'S SERVICES ACT



The Children's Services Act (CSA, §2.2-2648 et seq) was enacted in 1993 to create a collaborative system of services and funding for atrisk youth and families.

The CSA establishes local multidisciplinary teams responsible to work with families to plan services according to each child's unique strengths and needs and to administer the community's CSA activities.

The Office of Children's Services (OCS) is the administrative entity responsible for ensuring effective and efficient implementation of the CSA across the Commonwealth.

Guiding principles for OCS include:

- Child and family directed care,
- Equitable access to quality services,
- Responsible and effective use of public funds,
- Support for effective, evidence-based practices, and
- Collaborative partnerships across state, local, public, and private stakeholders.



UTILIZATION OF RESIDENTIAL CARE UNDER THE CSA

Annual Report to the Governor and General Assembly, December 15, 2023 In accordance with the Appropriation Act Chapter 1 Item 284 (B)(2)(d)

Item 284 B.2.d. Each locality shall submit to the Office of Children's Services information on utilization of residential facilities for treatment of children and length of stay in such facilities. By December 15 of each year, the Office of Children's Services shall report to the Governor and Chairmen of the House Appropriations and Senate Finance and Appropriations Committees on utilization rates and average lengths of stays statewide and for each locality.

Aside from acute hospitalization, residential (or congregate) care is the most intensive setting to meet the treatment requirements of children and youth with high levels of need due to psychiatric, emotional, and behavioral problems. Historically, there has been concern about the high utilization of such settings. Models such as the System of Care, which is the foundation of the Children's Services Act, establish a preference for treating youth in the context of their families and communities. Over the years, several strategies have been implemented to decrease the number of children and youth placed in residential care settings. These strategies included the Children's Services System Transformation initiative and a three-tiered incentive match rate system in CSA to encourage serving children and youth in community-based settings. In FY2023, the number of children served in residential care increased slightly (4 percent) after a relatively long downward trend (an overall decrease of 22 percent from FY2015 to FY2022). The major categories of residential placement are psychiatric residential treatment facilities (PRTFs), group homes that include therapeutic group homes (TGH) licensed by the Department of Behavioral Health and Developmental Services and children's residential facilities (CRF) licensed by the Department of Social Services, and temporary care facilities such as emergency shelters. In FY2023, the total CSA-funded cost of these services increased by 13 percent after several years of steady declines. FY2023 data indicate the number of youth in psychiatric residential treatment placements (PRTF) increased slightly (+2 percent), and group home (TGH and CRF) placements increased by 6 percent. At least some of these increases are likely related to lessened restrictions on admissions due to the end of the COVID-19 pandemic. Placements for the most challenging youth continue to be a concern for CSA and its partner agencies (VDSS, DBHDS, DMAS) and concern over the need for more costly out-of-state placements (often not eligible for Medicaid reimbursement) has been an issue of considerable attention.

Medicaid and CSA are the primary funding sources for PRTF and group home placements. The data in this report reflects only CSA expenditures.

	FY2020	FY2021	FY2022	FY2023
Temporary Care Facility	503,252	122,124	162,389	534,853
Group Home	16,472,475	15,115,258	16,830,272	19,276,939
Residential Treatment Facility	59,409,876	55,631,447	51,854,325	58,109,360
TOTALS	\$ 76,385,603	\$ 70,868,830	\$ 68,846,986	\$ 77,921,152

Total CSA Expenditures for Residential Placements (FY2020 - FY2023)

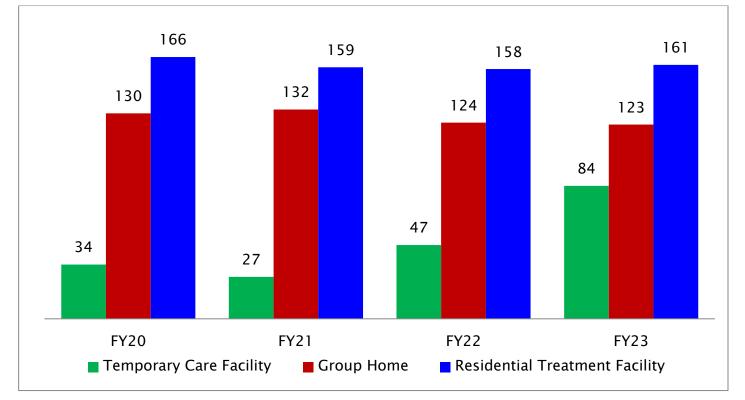
Note: Amounts do not include Title IV-E and Medicaid expenditures.

Number of Youth Served through CSA in Residential Placements (FY2020 - FY2023)

	FY2020	FY2021	FY2022	FY2023
Temporary Care Facility	49	21	19	21
Group Home	716	622	642	678
Residential Treatment Facility	1,901	1,764	1,523	1,548
Unduplicated Total	2,323	2,103	1,884	1,963

The total reflects the number of unduplicated youth across all residential settings, excluding special education placements.

Average Length of Stay (Days) per Youth in Residential Care (FY2020 - FY2023)



Note: Reflects the average number of days per youth within the fiscal year.

			UNDUPLICATED YOUTH COUNT/LOS/EXPENDITURES ACROSS ALL RESIDENTIAL PLACEMENT TYPES									
FIPS	Locality	FY2021				FY:	2022	FY2023				
		Youth	Avg LOS	Expenditures (\$)	Youth	Avg LOS	Expenditures (\$)	Youth	Avg LOS	Expenditures (\$)		
001	Accomack	4	179	86,950	3	212	107,861	8	177	359,308		
003	Albemarle	29	187	1,495,618	27	214	1,809,723	28	211	2,146,447		
005	Alleghany	5	168	207,766	6	164	139,151	4	172	69,982		
007	Amelia	2	304	66,312	5	155	170,218	6	127	205,397		
009	Amherst	11	122	199,617	15	120	225,059	11	96	144,067		
011	Appomattox	14	169	332,822	8	172	194,499	11	144	231,850		
013	Arlington	30	127	1,061,274	25	160	1,272,667	38	127	1,813,646		
015	Augusta	16	148	352,730	17	170	521,619	29	209	1,028,944		
017	Bath	2	92	28,483	0	0	0	3	26	36,947		
019	Bedford County	40	210	1,688,614	35	188	1,463,069	34	183	1,328,899		
021	Bland	2	103	21,924	2	88	16,965	4	254	172,661		
023	Botetourt	6	147	119,542	5	164	156,494	4	214	157,725		
025	Brunswick	4	256	215,025	4	158	128,561	5	194	217,371		
027	Buchanan	11	184	314,263	14	87	293,895	6	163	169,252		
029	Buckingham	4	146	64,786	7	84	180,005	8	197	419,730		
031	Campbell	25	200	976,628	27	187	1,102,689	16	204	615,890		
033	Caroline	7	147	105,133	9	170	207,660	7	192	229,512		
035	Carroll	38	193	1,389,035	33	210	1,280,157	31	209	1,259,097		
036	Charles City	3	248	55,932	2	73	33,102	0	0	0		
037	Charlotte	4	251	148,537	3	332	149,304	4	175	130,698		
041	Chesterfield	71	172	2,316,993	60	175	2,225,431	66	160	2,175,519		
043	Clarke	3	163	71,254	1	130	19,717	2	343	88,317		
045	Craig	2	235	95,300	1	184	39,560	1	181	23,247		
047	Culpeper	20	191	624,635	11	150	421,668	11	150	482,366		
049	Cumberland	4	81	35,972	4	209	159,811	4	204	83,142		
051	Dickenson	9	129	248,103	16	152	641,030	13	181	629,825		
053	Dinwiddie	12	220	450,299	10	239	496,329	11	155	400,056		
057	Essex	8	191	242,128	4	171	97,627	7	126	151,548		
061	Fauquier	37	101	589,423	20	183	713,707	18	210	750,110		
063	Floyd	8	149	272,867	7	148	185,785	9	228	559,394		
065	Fluvanna	9	220	380,949	7	110	178,082	3	67	49,216		
067	Franklin County	37	212	1,273,824	42	181	1,567,341	39	181	1,284,726		
069	Frederick	19	226	1,004,129	22	215	1,049,171	21	162	823,448		
071	Giles	5	145	123,210	6	182	176,628	7	203	291,900		
073	Gloucester	5	163	153,984	2	75	60,698	4	177	150,016		
075	Goochland	4	59	46,591	7	111	127,445	8	188	220,021		
077	Grayson	6	179	178,430	8	171	166,755	6	161	161,049		
079	Greene	13	139	442,080	12	173	315,795	12	157	347,327		
083	Halifax	12	236	703,620	11	236	545,135	14	145	510,396		
085	Hanover	42	201	1,235,015	37	193	965,273	34	217	1,341,453		

			UNDUPLICATED YOUTH COUNT/LOS/EXPENDITURES ACROSS ALL RESIDENTIAL PLACEMENT TYPES									
FIPS	Locality		FY2	2021		FY	2022	FY2023				
		Youth	Avg LOS	Expenditures (\$)	Youth	Avg LOS	Expenditures (\$)	Youth	Avg LOS	Expenditures (\$)		
087	Henrico	82	181	2,331,084	64	157	2,214,893	49	176	1,602,872		
089	Henry	24	193	904,094	24	187	793,073	28	189	1,196,485		
091	Highland	0	0	0	0	0	0	0	0	0		
093	Isle of Wight	4	164	95,848	6	153	97,451	4	165	106,582		
095	James City	19	116	279,931	11	150	334,208	11	162	358,213		
097	King & Queen	0	0	0	0	0	0	0	0	0		
099	King George	11	199	638,608	9	192	340,853	11	111	231,362		
101	King William	4	128	88,883	2	253	70,290	2	95	38,410		
103	Lancaster	3	229	88,654	3	196	69,895	2	157	35,882		
105	Lee	4	91	129,087	5	188	399,980	14	165	839,127		
107	Loudoun	41	185	1,955,085	34	149	1,689,791	32	206	2,023,336		
109	Louisa	22	173	743,307	22	224	975,682	22	213	1,128,832		
111	Lunenburg	6	245	286,220	7	143	184,139	10	217	401,020		
113	Madison	5	214	161,980	4	238	130,843	2	154	33,281		
115	Mathews	1	215	24,375	0	0	0	0	0	0		
117	Mecklenburg	16	198	529,109	9	152	241,015	10	148	268,071		
119	Middlesex	0	0	0	0	0	0	1	148	13,094		
121	Montgomery	22	129	450,114	13	165	520,420	11	121	214,684		
125	Nelson	6	193	123,583	9	132	216,404	7	162	248,210		
127	New Kent	3	176	91,424	6	194	198,697	6	174	157,011		
131	Northampton	2	202	111,059	2	154	71,568	1	341	68,605		
133	Northumberland	3	102	45,549	3	121	81,050	3	68	52,471		
135	Nottoway	4	277	162,554	4	200	133,950	3	142	70,314		
137	Orange	13	190	397,083	21	143	492,188	23	211	707,718		
139	Page	13	106	445,666	9	208	349,152	17	188	1,059,441		
141	Patrick	4	208	80,716	5	200	251,487	12	169	639,407		
143	Pittsylvania	35	146	1,122,207	30	196	1,268,680	25	166	895,965		
145	Powhatan	6	270	190,500	5	207	204,695	5	72	38,206		
147	Prince Edward	3	214	162,878	4	173	179,305	3	235	141,181		
149	Prince George	15	173	355,904	5	147	159,282	3	127	88,815		
153	Prince William	83	180	3,549,038	65	162	2,398,424	59	170	2,473,910		
155	Pulaski	18	141	681,581	15	127	445,391	15	147	444,014		
157	Rappahannock	6	229	382,076	9	123	330,946	5	241	744,728		
159	Richmond County	0	0	0	0	0	0	0	0	0		
161	Roanoke County	33	182	1,226,158	42	193	1,674,959	33	145	944,929		
163	Rockbridge	14	156	525,604	8	140	183,368	15	162	461,925		
165	Rockingham	43	222	1,415,085	46	203	2,081,958	49	170	1,895,017		
167	Russell	5	327	207,158	12	88	191,567	10	166	501,679		
169	Scott	4	118	128,360	5	54	50,618	5	109	89,123		
171	Shenandoah	31	194	1,417,036	21	210	1,311,138	24	155	991,222		

			UNDUP	LICATED YOUTH COU	JNT/LOS/	EXPENDIT	URES ACROSS ALL RE	SIDENTIA	L PLACEMI	ENT TYPES
FIPS	Locality		FY2	2021	FY2022			FY2023		
		Youth	Avg LOS	Expenditures (\$)	Youth	Avg LOS	Expenditures (\$)	Youth	Avg LOS	Expenditures (\$)
173	Smyth	21	173	460,515	23	158	565,816	21	226	958,986
175	Southampton	4	154	65,829	2	201	34,607	1	53	4,055
177	Spotsylvania	33	196	1,156,211	36	176	1,357,466	34	143	876,599
179	Stafford	22	170	742,092	18	209	651,933	16	157	434,920
181	Surry	1	203	31,981	1	365	51,518	1	334	47,958
183	Sussex	6	129	117,175	4	62	25,756	4	150	78,970
185	Tazewell	24	180	852,406	25	186	1,116,837	25	193	1,000,826
187	Warren	9	194	296,641	9	142	196,878	9	202	397,236
191	Washington	26	157	617,296	16	176	393,696	26	153	878,123
193	Westmoreland	7	154	200,578	4	310	275,795	6	123	250,782
195	Wise	8	103	118,762	6	121	88,339	4	89	41,321
197	Wythe	14	164	439,720	15	187	619,922	14	187	432,948
199	York	9	202	470,683	10	248	808,826	14	214	831,853
510	Alexandria	16	128	412,550	15	106	256,123	18	153	498,896
520	Bristol	17	192	452,389	11	222	433,828	12	214	624,010
530	Buena Vista	9	137	138,393	7	231	281,455	9	267	418,481
540	Charlottesville	19	118	628,749	10	171	263,084	8	152	205,547
550	Chesapeake	8	218	367,641	9	115	206,265	13	153	420,739
570	Colonial Heights	5	154	237,946	6	203	389,150	5	148	141,458
580	Covington	14	110	312,968	7	176	166,237	4	155	82,609
590	Danville	30	127	780,252	24	88	639,482	27	201	2,395,766
620	Franklin City	3	273	125,994	5	138	188,890	7	155	208,716
630	Fredericksburg	15	146	441,011	11	151	336,008	14	122	365,467
640	Galax	6	88	74,989	7	145	226,813	12	155	426,319
650	Hampton	0	0	0	0	0	0	1	320	234,095
660	Harrisonburg	22	143	720,246	14	192	456,189	26	157	1,039,683
670	Hopewell	5	125	87,260	2	67	16,380	8	199	271,701
678	Lexington	1	27	11,091	1	92	40,915	0	0	0
680	Lynchburg	49	146	947,187	44	110	733,181	52	162	1,335,803
683	Manassas City	7	132	172,003	8	259	390,037	7	237	292,353
685	Manassas Park	1	92	19,320	2	118	35,179	5	131	122,928
690	Martinsville	3	100	106,090	4	215	202,591	10	167	362,333
700	Newport News	17	145	407,799	16	117	251,398	15	180	422,368
710	Norfolk	57	181	1,859,411	60	159	1,811,418	65	121	1,391,108
720	Norton	1	45	8,756	1	5	900	0	0	0
730	Petersburg	15	164	394,979	8	110	173,893	12	146	527,031
735	Poquoson	0	0	0	1	304	71,198	2	215	104,052
740	Portsmouth	10	145	206,147	9	223	276,828	13	171	469,752
750	Radford	5	183	150,675	3	105	30,432	9	97	231,649
760	Richmond City	75	177	2,936,499	60	169	2,475,467	64	169	2,863,355
770	Roanoke City	49	194	1,845,667	54	159	2,001,034	39	181	1,527,983

CSA Annual Report to the Governor and General Assembly, Residential Care (FY2023)

			UNDUPLICATED YOUTH COUNT/LOS/EXPENDITURES ACROSS ALL RESIDENTIAL PLACEMENT TYPES										
FIPS	Locality	FY2021				FY2022			FY2023				
		Youth	Avg LOS	Expenditures (\$)	Youth	Avg LOS	Expenditures (\$)	Youth	Avg LOS	Expenditures (\$)			
775	Salem	14	163	425,981	12	177	380,413	15	168	409,060			
790	Staunton	14	234	464,409	13	248	422,713	8	195	237,716			
800	Suffolk	14	149	402,449	16	116	310,424	12	159	448,555			
810	Virginia Beach	87	191	3,672,114	76	198	3,283,059	67	188	3,626,612			
820	Waynesboro	10	182	325,445	11	107	213,610	12	179	424,537			
830	Williamsburg	3	155	129,620	3	221	149,306	4	224	178,416			
840	Winchester	20	181	669,376	14	179	546,599	15	153	551,413			
1200	Greensville/Emporia	2	106	26,080	3	135	74,069	4	180	127,342			
1300	Fairfax/Falls Church	105	129	4,738,603	94	148	5,547,404	115	128	6,530,656			

OFFICE OF CHILDREN'S SERVICES

ADMINISTERING THE CHILDREN'S SERVICES ACT



The Children's Services Act (CSA, §2.2-2648 et seq) was enacted in 1993 to create a collaborative system of services and funding for atrisk youth and families.

The CSA establishes local multidisciplinary teams responsible to work with families to plan services according to each child's unique strengths and needs and to administer the community's CSA activities.

The Office of Children's Services (OCS) is the administrative entity responsible for ensuring effective and efficient implementation of the CSA across the Commonwealth.

Guiding principles for OCS include:

- Child and family directed care,
- Equitable access to quality services,
- Responsible and effective use of public funds,
- Support for effective, evidence-based practices, and
- Collaborative partnerships across state, local, public, and private stakeholders.



IMPACT OF TIERED MATCH RATES FOR CSA

Annual Report to the Governor and General Assembly, December 1, 2023 In accordance with the Appropriation Act Chapter 1 Item 284 (C)(3)(c)

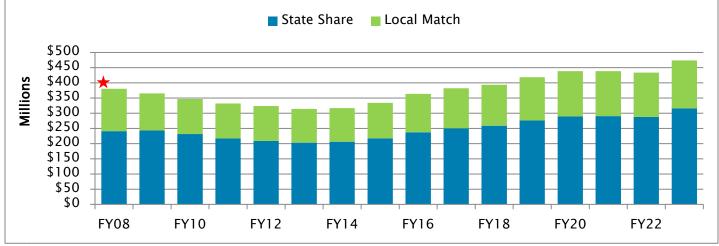
Item 284.3.a. Notwithstanding the provisions of C.2. of this Item, beginning July 1, 2008, the local match rate for community-based services for each locality shall be reduced by 50 percent.

b. Localities shall review their caseloads for those individuals who can be served appropriately by community-based services and transition those cases to the community for services. Beginning July 1, 2009, the local match rate for non-Medicaid residential services for each locality shall be 25 percent above the fiscal year 2007 base. Beginning July 1, 2011, the local match rate for Medicaid residential services for each locality shall be 25 percent above the fiscal year 2007 base. c. By December 1 of each year, The State Executive Council (SEC) shall provide an update to the Governor and the Chairmen of the House Appropriations and Senate Finance and Appropriations Committees on the outcomes of this initiative.

As established in Section 2.2–5211.C. of the *Code of Virginia* and the Appropriation Act, funding services to children and families through the Children's Services Act (CSA) is a shared responsibility of state and local government. Effective July 1, 2008, the Appropriation Act implemented a three-tiered, "incentive-based" local match rate model to encourage reduced residential care utilization, increase the proportion of children served in their homes and communities, and support investments in community-based services. This policy-driven match rate model promotes the delivery of services consistent with the statutory purposes of the CSA (see § 2.2–5200.A., *Code of Virginia*) to:

- preserve families;
- design and provide services that are responsive to the unique and diverse strengths and needs of troubled youth and families; and
- provide appropriate services in the least restrictive environment, while protecting the welfare of children and maintaining the safety of the public.

Before 2008, CSA utilized a single "base" match rate unique to each locality. These local base match rates were established in the early years of the CSA (1993–1998) utilizing a formula reflecting the amount contributed by the locality in previous years and growth in the rate based on the locality's ability to pay. Under the three-tiered (incentive) model, the local match rate for residential services is 25% above its base match rate, and for community-based services, it is 50% below its base match rate. Designated services (foster care and special education) remain at the base match rate. Local base match rates range from 16.98% to 53.09%, with the average local base match rate of 32.99%.



Total Net Expenditures for the Children's Services Act

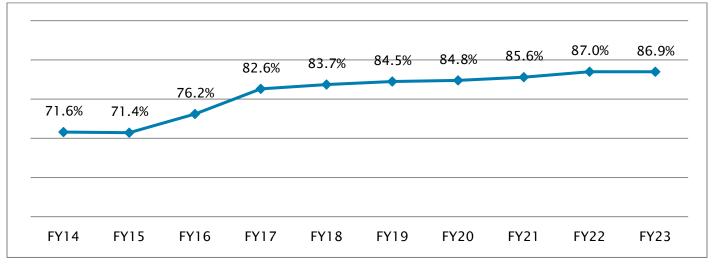
 \star Implementation of the three-tiered, "incentive" match rate model

Effective (Actual) Match Rates (Statewide Average)

	FY14	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23
Effective Local Match Rate	34.9%	34.9%	34.8%	34.4%	34.3%	34.0%	34.0%	33.8%	33.6%	33.3%
Effective State Match Rate	65.1%	65.1%	65.2%	65.6%	65.7%	66.0%	66.0%	66.2%	66.4%	66.7%

The effective match rate reflects the impact of the mix of services at the various tiered match rates on the overall match rate for all funded services.

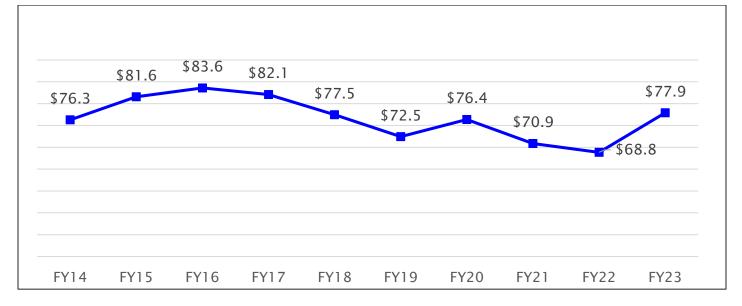
Percent of Youth Served Only in Community-Based Settings



Impact of the Three-Tiered (Incentive) Match Rate Model (FY2014 - FY2023)

The chart above reflects the percentage of youth in the yearly CSA census served <u>only</u> within their family and/or community (i.e., have not required a congregate-care placement).

The chart below shows expenditures for residential placements. The increase in these expenditures in FY2023 reflects a slight increase in the number of youth served in congregate care placements (+4 percent) and a larger increase in the average cost per placement (+9 percent).



CSA Congregate Care Expenditures (Millions) (FY2014 - FY2023)

Discussion

The intent of the three-tiered match rate model was two-fold. The first was to employ fiscal incentives to discourage the placement of children into restrictive, residential (congregate care) treatment settings when it was possible to safely utilize alternative, non-residential services that would adequately address the needs of the child, family, and community. The chart, Percent of Youth Served Only in Community-Based Settings, illustrates that this goal has been increasingly realized. Over the period shown, there has been a significant increase in the children served through the Children's Services Act who did not experience any congregate care placements during the reporting year (from 71.6% to 86.9%). Residential placements are typically among the more costly services funded through the CSA (second to private day special education placements). The three-tiered match rate system's associated goal was to control CSA expenditures that, at the time (FY2008), had grown to their highest historical point. In the years following the tiered match rate implementation, overall CSA expenditures fell significantly. Attributing this decrease solely to the match rate model is not definitive, as this period coincided with a significant economic recession. In FY2015, this trend reversed, with overall CSA annual expenditures rising, as shown in the chart Total Net Expenditures for the Children's Services Act. Beginning with FY2017 and continuing through FY2022, CSA residential expenditures declined noticeably despite a temporary uptick in FY2020. In FY2023, coinciding with the end of the COVID-19 pandemic, residential costs once again rose. However, this is more attributable to increased cost per child (from \$36,500 to \$39,700) rather than a larger percentage of youth placed in congregate care settings.

While the effective (actual) state (vs. local) match rate is higher than the base rate, the state:local match rate ratio has been virtually unchanged for several years. The effective local match has not declined further due to the significant rise in costs (and overall share of total CSA expenditures) associated with private special education day placements. Such educational placements are not subject to an incentive or disincentive through the three-tiered match rate model, creating less variability in the effective state vs. local match rates. Using fiscal incentives to impact special education placements is not permissible under the federal Individuals with Disabilities Education Act (IDEA).

Within its limits, the three-tiered match rate model appears to have achieved its goal of increasing the utilization of community-based versus congregate care services with an associated overall decrease in costs for services potentially impacted by the model.

OFFICE OF CHILDREN'S SERVICES

ADMINISTERING THE CHILDREN'S SERVICES ACT



The Children's Services Act (CSA, §2.2-5200 et seq) was enacted in 1993 to create a collaborative system of services and funding for atrisk youth and families.

The CSA establishes local multidisciplinary teams responsible to work with families to plan services according to each child's unique strengths and needs and to administer the community's CSA activities.

The Office of Children's Services (OCS) is the administrative entity responsible for ensuring effective and efficient implementation of the CSA across the Commonwealth.

Guiding principles for OCS include:

- Child and family directed care,
- Equitable access to quality services,
- Responsible and effective use of public funds,
- Support for effective, evidence-based practices, and
- Collaborative partnerships across state, local, public, and private stakeholders.



Regional and Statewide Training Regarding the Children's Services Act (CSA)

Annual Report to the General Assembly, December 1, 2023 In accordance with the Appropriation Act Chapter 1 Item 284 (B)(6)

Item 284.B.6. A report on all regional and statewide training sessions conducted during the fiscal year, including (i) a description of each program and trainers, (ii) the dates of the training and the number of attendees for each program, (iii) a summary of evaluations of these programs by attendees, and (iv) the funds expended, shall be made to the Chairmen of the House Appropriations and Senate Finance and Appropriations Committees and to the members of the State Executive Council by December 1 of each year.

The mission of the Office of Children's Services (OCS) is to facilitate a collaborative system of services and funding that is child-centered, family-focused, and community-based when addressing the strengths and needs of youth and their families in the Commonwealth of Virginia. OCS annually develops and implements a robust training plan to support this mission, including proposed training topics, audiences, venues, and formats. The FY2023 training plan saw a "post-pandemic" return to a higher level of in-person training events, the continued use of virtual delivery platforms, and asynchronous e-learning offerings. Virtual training approaches have proven effective in OCS's ability to reach larger numbers of participants across geographic regions. Training implementation in future years will likely include in-person and virtual events. The most recent CSA conference held in October 2023 was an in-person event.

In accordance with the FY2023 training plan, approved by the State Executive Council for Children's Services, the following activities were implemented:

- Thirty-two (32) local, regional, or statewide training sessions were provided to 2,240 (non-unique) participants. This report summarizes training topics, dates, and participant attendance numbers on pages 2 through 4.
- Twenty-one (21) online training courses were offered through the Virginia Learning Center and the Praed Foundation CANS (Child and Adolescent Needs and Strengths) training site, with a total enrollment of 7,053 (non-unique) participants. One (1) new course was introduced in FY2023.
- Over 550 individuals attended the 11th annual CSA Conference. This event was the first in-person annual conference after two consecutive virtual events. Evaluations indicated that participants greatly valued a return to a live, conference style training event.
- The online "OCS Help Desk" was maintained with approximately 800 individual requests answered.

Funds Expended for Regional and Statewide Training

Annual CSA Conference and Pre-Conference Sessions	\$ 41,636
New CSA Coordinator Academy	\$ 11,196
Online CANS Training/Certification	\$ 27,000
E-learning Course Development	\$ 3,272
Go-to-Meeting/Go-To-Webinar Subscription/Zoom Government	\$ 2,000
TOTAL*	\$ 85,104

Training for CSA Local, Regional, and Stakeholder Constituent Groups Fiscal Year 2023

(Participant evaluations of select training sessions are available for review at the Office of Children's Services)

TOPIC (Trainer)	n and "Live" Virtual Courses	DATE(S)	NUMBER OF PARTICIPANTS
High-Fidelity Wraparound Refresher Training (Anna Antell)	HFW Practitioners	7/12; 7/28; 8/10; 8/18/2022	152
CSA Overview (Scott Reiner)	DMAS MCOs	7/28/2022	794
CSA Supplement Training (Kristy Wharton)	All CSA Financial Stakeholders	9/1/2022	72
Strategic Planning (Anna Antell)	Shenandoah County CSA Stakeholders	9/7/2022	10
Office Hours for HFW Referral Sources (Anna Antell)	HFW Referral Sources	9/15/2022	20
Serving High-Acuity Youth: The Safe and Sound Task Force (Scott Reiner)	Suffolk/Isle of Wight CSA Stakeholders	9/16/2022	25
CANS and Service Planning (Anna Antell and Carol Wilson)	Southampton County CSA Stakeholders	9/19/2022	26
CPMT Roles and Responsibilities (Mary Bell and Courtney Sexton)	Spotsylvania County CPMT	9/29/2022	9
HFW Family Support Partner Training (Anna Antell)	HFW Family Support Partners	10/12; 10/14; 10/18; 10/20/2022	15
CSA Preconference: Adaptive Leadership (Erica Mann)	CSA Coordinators	10/31/2022	65
CSA Preconference: Strategic Planning for CPMTs (Carlson & Boyette)	CPMT Members	10/31/2022	59
11th Annual CSA Conference	All CSA Stakeholders	11/1 - 11/2/2022	559
Strategic Planning (Anna Antell)	Prince George County CSA Stakeholders	11/9/2022	10
Utilization Review (Courtney Sexton)	Hopewell FAPT Members	12/14/2022	5
High Fidelity Wraparound: Introduction (Virtual) (Anna Antell)	ICC Providers	1/25; 1/26; 2/2; 2/2; 2/8; 2/9/2023	29
CQI and Strategic Planning (Anna Antell and Carrie Thompson)	Lunenburg CPMT	2/13/2023	7
CSA CQI Dashboard (Carrie Thompson)	Virginia Beach CSA	3/8/2023	3
CANS and Service Planning (Anna Antell and Carol Wilson)	Prince George CSA	3/9/2023	21
CANS and Service Planning (Anna Antell and Carol Wilson)	Hopewell CSA	3/27/2023	11
HFW Supervisor Training (Anna Antell)	HFW Supervisors	3/29 - 3/30/2023	29
FAPT and CPMT Roles and Responsibilities (Mary Bell and Courtney Sexton)	Franklin County CSA	4/7/2023	21

In-perso	on and "Live" Virtual Courses	5	
TOPIC (Trainer)	PARTICIPANT GROUP	DATE(S)	NUMBER OF PARTICIPANTS
FAPT and CPMT Roles and Responsibilities (Mary Bell and Courtney Sexton)	Sussex County CSA	4/17/2023	10
High Fidelity Wraparound Coaching Cohort (Anna Antell)	HFW Practitioners	4/17 - 4/18/2023	10
CANS and Service Planning (Anna Antell and Carol Wilson)	Loudoun County CSA	4/20/2023	65
CANS and Service Planning (Anna Antell and Carol Wilson)	Henry/Martinsville CSA	4/26/2023	36
New CSA Coordinator Academy	Newly Hired Local CSA Coordinators	5/9 - 5/11/2023	21
FAPT and CPMT Roles and Responsibilities (Mary Bell and Courtney Sexton)	Hopewell CSA	5/18/2023	17
CSA Update (Mary Bell)	VCOPPA Annual Critical Issues Symposium	5/23/2023	45
CPMT Roles and Responsibilities (Anna Antell)	Pulaski County CSA	5/23/2023	9
CSA and DSS Kinship Placements (Carol Wilson)	Statewide CSA Coordinators Network	6/9/2023	62
New J & DR Judge Pre–Bench (Scott Reiner)	Newly Elected J & DR Judges	6/13/2023	9
CQI and Strategic Planning (Anna Antell and Carrie Thompson)	Suffolk CSA Stakeholders	6/21/2023	14
		Total	2,240

Online (A	synchronous) Courses		
TOPIC (Trainer)	PARTICIPANT GROUP	DATE(S)	NUMBER OF PARTICIPANTS
CSA for New LDSS Staff - Module 1	New LDSS Staff and Other Interested Parties	Continuous	399
CSA for New LDSS Staff - Module 2	New LDSS Staff and Other Interested Parties	Continuous	395
CSA for New LDSS Staff - Module 3	New LDSS Staff and Other Interested Parties	Continuous	378
CSA for New LDSS Staff - Module 4	New LDSS Staff and Other Interested Parties	Continuous	361
CSA for New LDSS Staff - Module 5	New LDSS Staff and Other Interested Parties	Continuous	355
CSA for Non-DSS Case Managers	Non-DSS CSA Case Managers	Continuous	26
CSA for FAPT Members	Local FAPT Members	Continuous	80
Special Education Wraparound Funding Under the CSA	All CSA Stakeholders	Continuous	39
CSA Continuous Quality Improvement	All CSA Stakeholders	Continuous	44
Can CSA Pay?	All CSA Stakeholders	Continuous	65
CPMT Training - Module 1	CPMT Members and Other Interested Parties	Continuous	68
CPMT Training - Module 2	CPMT Members and Other Interested Parties	Continuous	88
CPMT Training - Module 3	CPMT Members and Other Interested Parties	Continuous	63
CPMT Training - Module 4	CPMT Members and Other Interested Parties	Continuous	73
CPMT Training - Module 5	CPMT Members and Other Interested Parties	Continuous	98
CPMT Training - Module 6	CPMT Members and Other Interested Parties	Continuous	46
CSA Fiscal Overview	CSA Finance Staff and Other Interested Parties	Continuous	54
CSA for FAPT/CPMT Parent Representatives	All CSA Stakeholders	Continuous	31
CSA IT Security Training	All CSA Stakeholders	Continuous	181
CSA Parental Agreements	All CSA Stakeholders	Continuous	37
CANS Certification/Recertification Training	All Local CSA Case Managers	Continuous	4,172
		Total	7,053

OFFICE OF CHILDREN'S SERVICES

ADMINISTERING THE CHILDREN'S SERVICES ACT



The Children's Services Act (CSA, §2.2-2648 et seq.) was enacted in 1993 to create a collaborative system of services and funding for atrisk youth and families.

The CSA establishes local multidisciplinary teams responsible to work with families to plan services according to each child's unique strengths and needs and to administer the community's CSA activities.

The Office of Children's Services (OCS) is the administrative entity responsible for ensuring effective and efficient implementation of the CSA across the Commonwealth.

Guiding principles for OCS include:

- Child and family directed care,
- Equitable access to quality services,
- Responsible and effective use of public funds,
- Support for effective, evidence-based practices, and
- Collaborative partnerships across state, local, public, and private stakeholders.



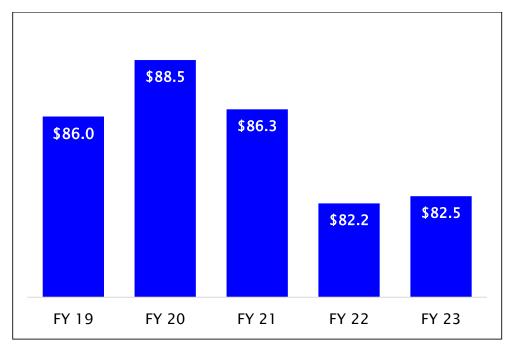
THERAPEUTIC FOSTER CARE SERVICES UNDER THE CSA

Annual Report to the General Assembly, December 1, 2023 In accordance with the Appropriation Act, Chapter 1, Item 284 (K)(1)

Item 284. K.1. The Office of Children's Services (OCS) shall report on funding for therapeutic foster care services including but not limited to the number of children served annually, average cost of care, type of service provided, length of stay, referral source, and ultimate disposition.

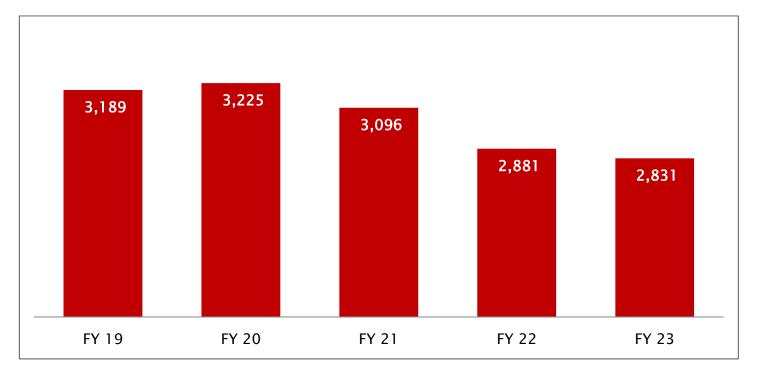
Therapeutic foster care (TFC)¹ is a community-based program that addresses a child's placement and service needs while the child is in the custody of a local department of social services (LDSS). Foster parents trained, supervised, and supported by a private agency (licensed childplacing agency, or LCPA) provide TFC. TFC is family-based, goaldirected, and results-oriented, emphasizing permanency planning for the child in care. All referrals for TFC are made by an LDSS. Total TFC costs may be offset partially by federal/state title IV-E revenues to cover maintenance costs (room and board) for eligible children in foster care. Title IV-E revenues and payments are handled through the Department of Social Services.

Therapeutic Foster Care Total CSA Expenditures (Millions) (FY2019 - FY2023)

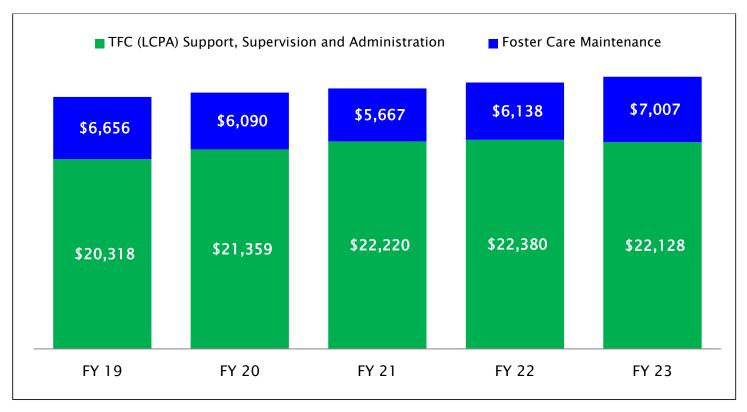


¹ The term "therapeutic" foster care is often used interchangeably with "treatment" foster care.

Therapeutic Foster Care Number of Youth Served (FY2019 - FY2023)

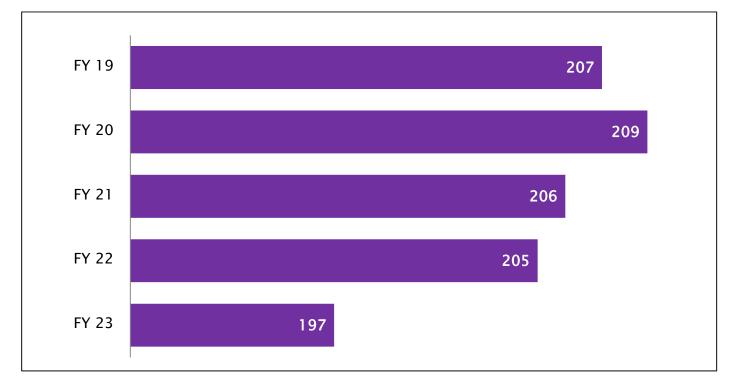


Therapeutic Foster Care Average Annual CSA Expenditure per Child (FY2019 - FY2023)



CSA Annual Report on Therapeutic Foster Care to the General Assembly (FY2023), page 2

Therapeutic Foster Care Average Length of Stay (Number of Days/Year) (FY2019 - FY2023)



Discussion

In FY2023, utilization of therapeutic foster care (TFC) continued a decrease in youth served over the past three years (12% since FY2020). TFC remains a primary resource to local departments of social services (LDSS) for foster care placements in Virginia. Approximately 44% of children in foster care were served through a TFC program (LCPA) this year. LCPAs are private agencies that, among other services, provide foster home placements through referrals from the local departments of social services. This utilization level reflects ongoing challenges in LDSS's ability to establish "agency foster homes" (foster families recruited and supported by the local department) and the needs of children in foster care and their foster families for higher support than typically provided in agency foster homes.

In FY2023, a TFC placement (excluding monthly maintenance and enhanced maintenance payments) averaged \$115 per day or approximately \$22,128 annually. While the foster care maintenance costs (e.g., room and board and daily supervision) are supported by CSA pool funds or the federal title IV-E program, TFC-specific costs (CSA Service Name = "Private Foster Care, Support, Supervision, and Administration") are paid exclusively from the CSA state pool and local matching funds.

Children remained in a TFC setting for an average of 197 days during FY2023, with an overall length of stay crossing multiple fiscal years (from entry to discharge) of 474 days.

OFFICE OF CHILDREN'S SERVICES

ADMINISTERING THE CHILDREN'S SERVICES ACT



The Children's Services Act (CSA, §2.2-2648 et seq) was enacted in 1993 to create a collaborative system of services and funding for atrisk youth and families.

The CSA establishes local multidisciplinary teams responsible to work with families to plan services according to each child's unique strengths and needs and to administer the community's CSA activities.

The Office of Children's Services (OCS) is the administrative entity responsible for ensuring effective and efficient implementation of the CSA across the Commonwealth.

Guiding principles for OCS include:

- Child and family directed care,
- Equitable access to quality services,
- Responsible and effective use of public funds,
- Support for effective, evidence-based practices, and
- Collaborative partnerships across state, local, public, and private stakeholders.



PROGRESS REPORT ON THE CHILDREN'S SERVICES ACT

Biennial Report to the General Assembly, December 2023 In accordance with §2.2–2648.21, COV and Chapter 1, Item 284 (H)

Code of Virginia, §2.2–2648.21. (The State Executive Council for Children's Services) shall: Biennially publish and disseminate to members of the General Assembly and community policy and management teams a state progress report on comprehensive services to children, youth and families and a plan for such services for the next succeeding biennium. The state plan shall: a. Provide a fiscal profile of current and previous years' federal and state expenditures for a comprehensive service system for children, youth and families;

b. Incorporate information and recommendations from local comprehensive service systems with responsibility for planning and delivering services to children, youth and families;

c. Identify and establish goals for comprehensive services and the estimated costs of implementing these goals, report progress toward previously identified goals and establish priorities for the coming biennium;

d. Report and analyze expenditures associated with children who do not receive pool funding and have emotional and behavioral problems;

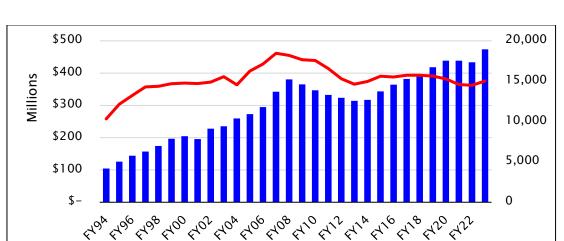
e. Identify funding streams used to purchase services in addition to pooled, Medicaid, and Title IV–E funding; and

f. Include such other information or recommendations as may be necessary and appropriate for the improvement and coordinated development of the state's comprehensive services system.

Chapter 1, Item 284. H. Pursuant to subdivision 21 of § 2.2–2648, Code of Virginia, no later than December 20 in the odd–numbered years, the State Executive Council shall biennially publish and disseminate to members of the General Assembly and Community Policy and Management Teams a progress report on services for children, youth, and families and a plan for such services for the succeeding biennium.

The Code of Virginia and the Appropriation Act require that the State Executive Council for Children's Services (SEC) biennially publish and disseminate a progress report on services for children, youth, and families and a plan for such services for the ensuing biennium. As the administrative entity of the Council, the Office of Children's Services (OCS) is pleased to submit the following report, approved by the SEC. The biennial Strategic Plan for 2024 – 2025 and progress in meeting the goals and objectives of the 2022 – 2023 Plan can be found in this report.

CSA Expenditures and Utilization



Total Expenditures / Children Served through the CSA, FY1994 - FY2023

Annual CSA expenditures and the number of children served rose consistently from the Act's inception in FY1994 through FY2008. After a decline over five years (FY2009–2013) in spending and children receiving services, except for the years spanning the COVID–19 pandemic (FY2021–2022), expenditures have increased significantly. In contrast, the CSA census (number of children served) has risen slightly and has been generally stable since FY2015. In FY2023, expenditures increased by 9.2% from the three prior years, and the census increased by 3.7%. The overall increased expenditures since FY2013 are overwhelmingly due to the rise in the number (and associated costs) of children receiving private day special education placements, accounting for most of the growth in expenditures and census. In FY2023, special education expenditures rose 9.8%, while all other categories increased by 4.4%.

Census

Total Expenditures

For the first time in several years, costs for residential (congregate care) placements rose (by 13%), and the number of youth served in these settings rose (by 4%). This data pattern appears mainly attributable to a slight increase in length of stay, an 8% increase in daily rates (primarily for education services in the residential setting), and a 10% increase in daily costs for group home placements.

State and Federal Funding Not Included in the CSA State Pool

	<u>FY2022</u>	<u>FY2023</u>
Children's Mental Health Initiative (DBHDS)	\$ 5,648,128	\$ 5,648,128
Promoting Safe & Stable Families ¹ (DSS)	\$ 8,462.224	\$ 10,443,139
Virginia Juvenile Community Crime Control Act (DJJ)	\$10,379,921	\$10,379,921
Title IV-E (Foster Care Maintenance) ² (DSS)	\$37,183,661	\$33,786,126
Social Services Block Grant ² (DSS)	\$ 9,419,998	\$ 9,419,998
Medicaid (Treatment Foster Care, Residential Care) ³	<u>\$91,054,382</u>	<u>\$73,449,678</u>
TOTAL	\$153,694,382	\$143,126,990

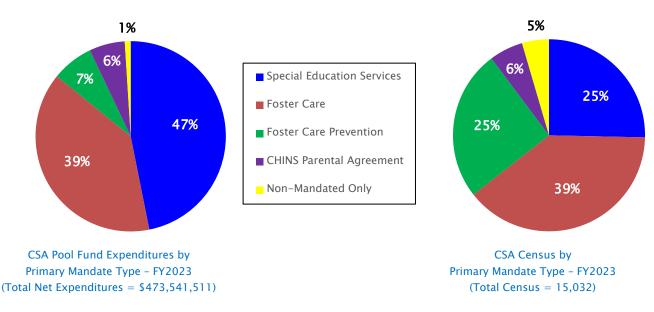
¹Federal FMAP rate varied between 61% (FY2023) and 64% (FY2024).

²Federal FMAP rate was approximately 56% through the period.

³Federal FMAP rate for Medicaid is typically 50%. Adjustments during the COVID-19 pandemic resulted in higher FMAP rates.

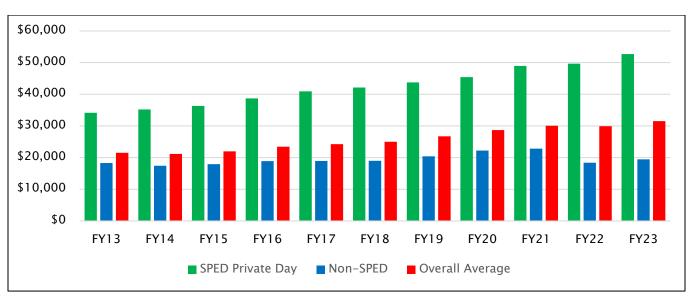
Biennial Report on the CSA to the General Assembly, State Executive Council, and CPMTs

The table above reflects the contributions of funding sources other than CSA pool funds to addressing the needs of children and families⁴. These funds are "braided" with the "blended" CSA pool funds and are utilized for CSA and non-CSA-eligible youth and services, in whole or in part, when available to support needed services. Medicaid funds for behavioral health services to children other than residential and treatment foster care are not reported here and are available from the Department of Medical Assistance Services.



FY2023 CSA Expenditures and Mandate Types

The two graphs above show that special education services accounted for 47% of the total CSA expenditures in FY2023. However, children in this category accounted for only 25% of the total CSA primary mandates. (Note: Children may have more than one Primary Mandate Type). This disparity is because private day special education placements have an annual per-child cost of \$53,488 compared to an average of \$18,707 for all other categories of children (see graph below). Children eligible for CSA due to receiving foster care or foster care prevention services accounted for 64% of those eligible for CSA but only 46% of expenditures.

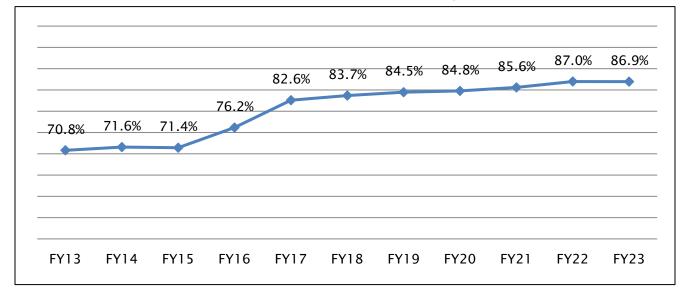


Average Annual per Child CSA Pool Fund Expenditures (FY2013 - FY2023)

⁴ Appendix A provides a description of these various funding sources.

Biennial Report on the CSA to the General Assembly, State Executive Council, and CPMTs

Serving children in community-based (as opposed to residential or congregate care) settings is at the core of the CSA system of care philosophy. An extensive body of evidence indicates that long-term outcomes are improved when children are safely maintained in their families, schools, and communities. The avoidance, where possible, given clinical needs and other concerns, of placements in restrictive, congregate residential settings has long been a goal of the CSA. As seen in the chart below, performance on this indicator has continued to improve over time, although remaining essentially flat from FY2022 to FY2023.



Percent of Children Served in Community-Based Settings (FY2013 - FY2023)

Significant Accomplishments 2022 - 2023

The following is a summary of significant accomplishments related to the Goals and Objectives for the 2022 – 2023 Strategic Plan approved by the State Executive Council for Children's Services in December 2021.

Area:	Policy and Oversight
Objective 1:	The SEC, with input from SLAT and others, will determine which CSA policies need
	greater uniformity, flexibility, and alignment (internally and across partners).
Two-year metric:	Continue through the work of the SEC Policy Review Workgroup, prioritized revisions to
	CSA policies with an additional focus on the use of equity and trauma-informed lenses.

Status:

- Updated and approved the Family Assessment and Planning Team policy (3.2).
- Revised and approved the Family Engagement Policy (3.3).
- Rescinded policies redundant with the Code of Virginia (2.1; 2.2; 2.3; 3.1; 4.4.1).
- Developed a plan for the review and update of all other existing policies.
- Released for public comment revisions to policies 2.4 (Public Participation in Policy–Making Actions), 3.4 (Dispute Resolution Process), and 4.2 (Payment for Services and Change of Legal Residence).
- Continued to consult with the State and Local Advisory Team (SLAT) and the state CSA Coordinator Network on the policy review process and content.
- At the request of the SEC, the SLAT reviewed the current three-tiered CSA match rate model and recommended no changes. The SEC affirmed this recommendation.
- CSA worked with VDSS to suspend the VDSS policy regarding the use of the Qualified Residential Treatment Program (QRTP) designation under the Family First Prevention Services Act.
- The Policy Review Workgroup has transitioned to collaborative efforts with the SLAT, CSA Coordinator Network, and other ad hoc members as germane to the policies under review.

Area: Policy and Oversight

- **Objective 2:**The SEC will identify and capitalize on the practice enhancements occurring throughout
the CSA participating systems.
- **Two-year metric:** The SEC will continue to engage in regular updates and discussions of the various system improvement initiatives to identify areas requiring additional alignment. Areas for collaboration will be identified and acted upon.

Status:

• The SEC received a presentation on the Governor's Safe and Sound Task Force at the June 2022 meeting. Multiple SEC agencies are involved in implementing the goals of this task force to eliminate the occurrence of youth in foster care being displaced and residing in unapproved or inappropriate placements such as local DSS offices, hotels, or hospital emergency departments.

- *Multiple SEC agencies are involved in implementing the Governor's Right Help, Right Now transformation of the behavioral health system.*
- The OCS Senior Research Analyst on the OCS Data and Outcomes Dashboard and annual Service Gap Survey were made at the March 2023 and September 2023 SEC meetings. At the suggestion of the SEC, a local and regional level dashboard was added to the Service Gap Survey results.
- OCS has developed and implemented a topical index to its Administrative Memorandums to make it easier for users to locate relevant guidance related to the CSA program.

Area: Leadership and Collective Action

- Objective 1:The SEC and SLAT will define and support the development of core leadership
competencies for local CSA leaders, Community Policy and Management Teams, and
Family Assessment and Planning Teams.
- **Two-year metric:** Develop and implement a comprehensive curriculum and related strategies to address identified core leadership and operational competencies and for building local capacity as developed by the workgroup of the State and Local Advisory Team (SLAT).

Status:

- Multiple online courses corresponding with the Core Competencies have been developed and made available. Additional in-person training curricula continue to be offered upon request.
- A topical catalog of training and related resources is being developed and will be posted to the CSA website, as recommended by the SLAT.

Area:Leadership and Collective ActionObjective 2:SEC will implement and support outcome-driven practices.Two-year metric:OCS will complete a five-year CSA outcomes report at the

Two-year metric: OCS will complete a five-year CSA outcomes report at the state and local level and will develop and disseminate services-specific outcome reporting and tools for localities.

Status:

- The statewide five-year outcomes report (2018–2022) is complete and has been disseminated.
- OCS is adding service placement type (SPT)-level data and other upgrades to its Data and Outcomes Dashboard. Several of these upgrades were suggested by the SEC and other stakeholders.
- Two-year metric:SEC member agencies will support the work of the Center for Evidence-BasedPartnerships in Virginia (CEBP-Va).

Status:

• The following SEC member agencies participate in the Governance Committee of the Center: OCS, DBHDS, VDSS, DMAS, VDH, and DJJ. Additional agency partners include the Department of Criminal Justice Services and the Department of Health Professions. • The Center has several ongoing projects, including the development and maintenance of an online directory of providers who meet training and credentialing requirements for specific evidence-based interventions; fidelity monitoring for particular interventions on the Virginia Family First Prevention Services Act plan through VDSS); ongoing research and reporting on barriers and solutions to the implementation of EBPs; and the EBP Transformation Zones initiative in partnership with the National Implementation Research Network (University of North Carolina).

Area:Empowering Families and CommunitiesObjective 1:SEC, SLAT, and additional partners will develop a guide for youth and families to build
understanding about access to needed services.

Two-year metric: Complete development and distribution of the family and youth guide to CSA, including ancillary products (e.g., training curriculum, videos).

Status:

- The "Family Guide to CSA" has been completed, distributed, and available on the CSA website.
- An online training for family representatives to Family Assessment and Planning Teams and Community Policy and Management Teams has been developed and is available through the Virginia Learning Center.
- A video overview of CSA for parents has been scripted and will be produced and released in early 2024.

Area: Empowering Families and Communities

Objective 2:The SEC, through OCS, will build community capacity by preparing and assisting
localities to successfully implement and sustain evidence-based practices.

Two-year metrics:

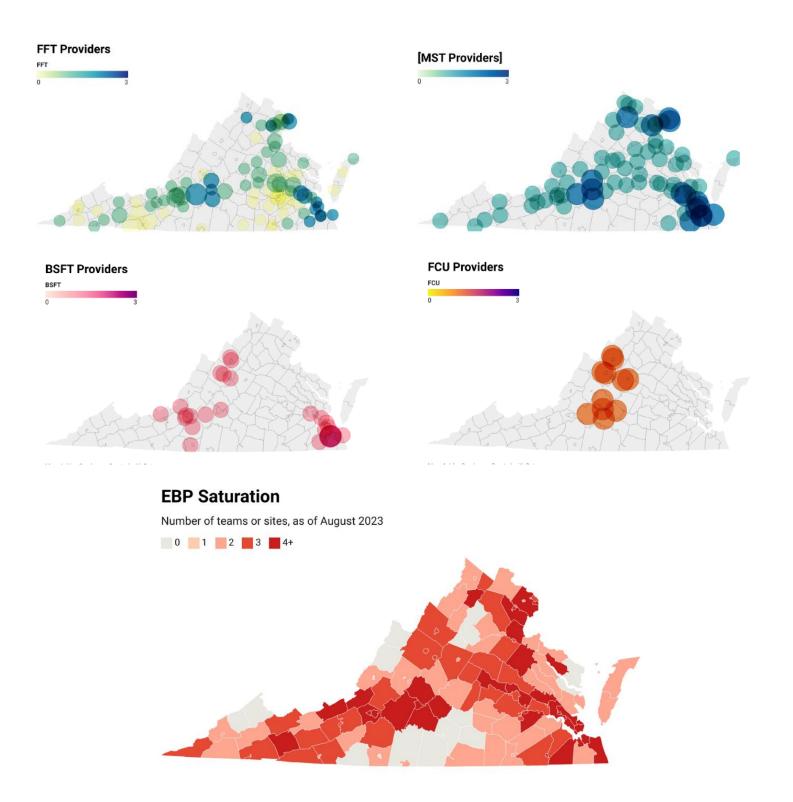
- \rightarrow Number of available EBPs for children/families
- \rightarrow Assessment of EBP availability/capacity across the Commonwealth
- \rightarrow Number of trained EBP providers
- → Number of children/families receiving EPBs
- \rightarrow Number of and attendance at EBP-related training events

Status:

- The following EBPs are available as of July 1, 2023 (specific supporting agencies listed):
 - Multisystemic therapy (MST) (DSS, OCS, DMAS, DJJ)
 - Functional Family Therapy (FFT) -
 - Parent-Child Interaction Therapy (PCIT) (DSS, OCS)
 - High-Fidelity Wraparound Intensive Care Coordination) (HFW) (OCS, DSS, DBHDS, DJJ)
 - Family Check–Up (FCU) (DSS)
 - Brief Strategic Family Therapy (BSFT) (DSS)
 - Homebuilders (DSS)
 - Trauma-focused Cognitive Behavioral Therapy (TF-CBT) (DBHDS)
 - Adolescent Community Reinforcement Approach (A–CRA) (DBHDS)
 - *Community Reinforcements and Family Training (CRAFT) (DBHDS)*

Biennial Report on the CSA to the General Assembly, State Executive Council, and CPMTs

• The availability of the EBPs listed and the number of trained EBP providers are not uniformly known. They may vary as qualified providers are employed or leave employment with specific agencies. The most carefully tracked EBPs are those associated with the Family First Prevention Services Act (FFPSA), including MST, FFT, FCU, BSFT, and PCIT. The providers can be found on the provider directory managed by the Center for Evidence–Based Partnerships at this location: <u>www.EBPFinder.org</u>. The maps below⁵ show BSFT, FCU, FFT, and MST availability.



⁵ Maps generated by the CEBP-VA as of August 11, 2023.

Biennial Report on the CSA to the General Assembly, State Executive Council, and CPMTs

The availability of qualified High-Fidelity Wraparound providers can be found on the OCS website at www.csa.virginia.gov/Content/doc/ICC_Trained_Providers.pdf.

For the EBPs explicitly detailed in each agency's funding model/service listings, the number of children and families served in FY2022 and FY2023 through each EBP is listed in the table below:

		Youth Served FY2022				
EBP	Funding Agencies*	DSS	OCS	DIJ	DBHDS	DMAS
Multisystemic Therapy	DSS, OCS, DJJ, DMAS	21	69	133	124	214
Functional Family Therapy	DSS, OCS, DJJ, DMAS	36	146	170	185	154
Parent-Child Interaction Therapy	DSS, OCS	0	0			
High Fidelity Wraparound (ICC)	OCS		560	25		
Adolescent Community Reinforcement Approach	DBHDS (CSB), DJJ					
Community Reinforcement and Family Training	DBHDS (CSB), DJJ					
Trauma-Focused Cognitive Behavioral Therapy	DBHDS (CSB), OCS, DJJ					
		Youth Served				
		FY2023				
EBP	Funding Agencies*	DSS	OCS	DJJ	DBHDS	DMAS
Multisystemic Therapy	DSS, OCS, DJJ, DMAS	6	50	90		248
Functional Family Therapy	DSS, OCS, DJJ, DMAS	16	73	182		230
Parent-Child Interaction Therapy	DSS, OCS	0	6			
High Fidelity Wraparound (ICC)	OCS		635	22		
Adolescent Community Reinforcement Approach	DBHDS (CSB), DJJ					
Community Reinforcement and Family Training	DBHDS (CSB), DJJ					
Trauma-Focused Cognitive Behavioral Therapy	DBHDS (CSB), OCS, DJJ					

<u>Note</u>: Cells shaded in gray are not funded/reported by the specific agency.

• Data related to training is shown in the table below:

EBP Trained Practitioners	Agency Providing Training	Number Trained	Training Events
Multisystemic Therapy	DSS	5	2
Functional Family Therapy	DSS	7	3
Functional Family Therapy	DBHDS	27	10
Parent-Child Interaction Therapy	DSS	9	5
Parent-Child Interaction Therapy	DBHDS	56	19
High Fidelity Wraparound (ICC)	OCS	317	8
Adolescent Community Reinforcement Approach	DBHDS	50	9
Community Reinforcement and Family Training	DBHDS	36	2
Trauma-Focused Cognitive Behavioral Therapy	DBHDS	341	32

<u>Note</u>: There may be some duplication in the numbers trained as reported by different agencies may be overlapping.

Appendix A

Children's Mental Health Initiative

The Children's Mental Health Initiative (MHI) Fund was established by the General Assembly in FY 2000 to create a dedicated source of funding for mental health and substance abuse services for children and adolescents with serious emotional disturbances (SED) who are not mandated for the Children's Services Act (CSA). Funds are provided to the Community Services Boards based on a funding methodology.

Promoting Safe & Stable Families

The Virginia Department of Social Services administers the Promoting Safe and Stable Families Program (PSSF) which is designed to assist children and families resolve crises, connect with necessary and appropriate services, and remain safely together in their own homes whenever possible. This program helps more than 15,000 children and families each year. Services are provided to meet the following objectives:

- Prevent or eliminate the need for out-of-home placements of children
- Promote family strength and stability
- Enhance parental functioning
- Protect children
- Assess and make changes in state and local service delivery systems

PSSF funding is provided by the federal government with a required state match. Individual localities are allocated funds by the VDSS based on the submission of an approved plan to the VDSS. Additional information on the PSSF program can be found here: <u>https://www.dss.virginia.gov/family/pssf.cgi</u>.

Virginia Juvenile Community Crime Control Act

In 1995, the Virginia General Assembly passed the Virginia Juvenile Community Crime Control Act (VJCCCA) "to establish a community-based system of progressive intensive sanctions and services that correspond to the severity of offense and treatment needs." Administered by the Department of Juvenile Justice, all localities have access to a funding allocation to provide services to eligible youth involved in the juvenile court system. Services generally fall into the categories of public safety, post-dispositional/graduated sanctions, accountability, and competency development. Additional information on the PSSF program can be found here: https://www.djj.virginia.gov/pages/community/community-diversion.htm#vjccca.

Title IV-E

Title IV-E is a federal program designed to provide funding to states to ensure proper care for eligible children in foster care and to provide ongoing assistance to eligible children with special needs receiving adoption subsidies. The program is administered under Title IV-E of the Social Security Act and is funded by federal and state/local matching funds. Title IV-E funds are administered by the Virginia Department of Social Services and the local departments of social services. Additional information on Title IV-E can be found here: https://www.dss.virginia.gov/family/iv-e.cgi.

Social Services Block Grant

The Social Services Block Grant (SSBG) is a federal funding source that partially supports various services delivered through local departments of social services. The SSBG is administered by the Virginia Department of Social Services. Additional information on the SSBG can be found here:

https://www.dss.virginia.gov/geninfo/reports/agency_wide/block_grants.cgi.

Medicaid

Medicaid is the federal program that assists states in providing health care (including behavioral health) to eligible children and adults. Medicaid funding is a shared federal and state responsibility. Medicaid funds support CSA for residential care (therapeutic group homes and psychiatric residential treatment facilities, treatment foster care case management, and various outpoatinet behavioral health services.

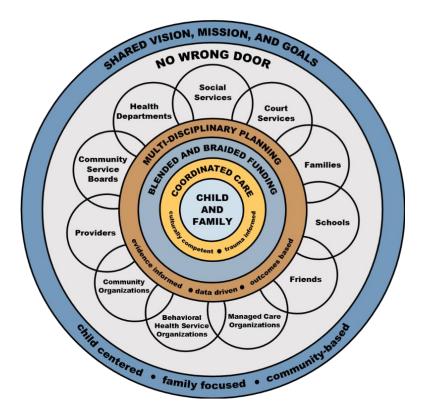
The 2024 - 2025 CSA Strategic Plan

At its December 2023 meeting, the State Executive Council adopted a Strategic Plan for 2024 - 2025. The Plan is found on the following pages.

Begin with the End in Mind ...

By 2026, Virginia's Children's Services Act (CSA) will have worked with its state and local government partners, the provider community, and families to successfully expand and support access to effective services that meet the needs of children and families. The State Executive Council for Children's Services (SEC) and the Office of Children's Services are vital participants in this effort, providing leadership and resources to improve outcomes and operate a program that best utilizes public funds. This 2024-2026 Strategic Plan includes continued support for executing evidence-based approaches for serving youth and families by championing statewide, cross-agency initiatives. In this biennial plan, there is an increased focus on aligning policy and practice with an emphasis on creating a process by which stakeholders can provide input into the CSA policies. The empowerment of families and communities remains a focal point, with significant attention given to creating resources that build capacity and create clarity in navigating Virginia's system of care.

These goals will be realized through a collaborative system of care grounded in the CSA's founding principles, where practice reflects policy, and stakeholders at all levels embrace leadership and accountability. Strong partnerships are foundational to implementing the CSA and are the mechanism by which improved practices and outcomes are achieved.



STATE EXECUTIVE COUNCIL FOR CHILDREN'S SERVICES



STRATEGIC PLAN: 2024 – 2025 Empowering Communities to Serve Youth



I. With input from the SLAT and other stakeholders, the SEC will complete a comprehensive review of the current CSA Policy Manual to allow for improved uniformity, flexibility, and alignment (internally and across partners).

<u>Two-Year Metric</u>: The SEC will systematically review the existing policy manual to ensure policies are uniform in format and aligned internally and with the policies and practices of CSA agency partners.

Two-Year Metric: The SEC will review current practices to ensure alignment with relevant policies.

2. The SEC will establish a process for soliciting/generating ideas for new/revised CSA policies and practices to enhance program effectiveness and efficiency.

<u>Two-Year Metric</u>: The SEC will work with stakeholders, including the SLAT, CSA Coordinator Network-Policy Committee, VACO, and VML, to develop a process for promoting policy revisions to enhance local CSA programs.

3. The SEC will provide oversight of local CSA programs through the receipt of regular reports on local CSA program audits and technical assistance activities, highlighting both problematic (specific localities and activities) and positive aspects (areas of excellence and innovation).

<u>Two-Year Metric</u>: The SEC will receive electronic notification of the publication of audits and review quarterly and annual audit summary reports prepared by the Office of Children's Services and recommend actions as appropriate.

<u>Two-Year Metric</u>: The SEC will receive quarterly updates on technical assistance activities.

<u>Two-Year Metric</u>: The SEC will develop a process to acknowledge areas of local excellence and best practices.

LEADERSHIP &
COLLECTIVE ACTION

Promote alignment, leading by example, and collaborating on a shared vision and key outcomes.

I. The SEC, SLAT, and member entities will enhance the availability of and access to services for youth and families by supporting and championing statewide, cross-agency initiatives.

Two-Year Metric: The SEC and SLAT will support enhanced community capacity by supporting outcome-driven practices in localities.

<u>Two-Year Metric</u>: With the SLAT and OCS, the SEC will develop resources/tools to assist localities in implementing outcome-driven practices and decision-making.

<u>Two-Year Metric</u>: The SEC will receive updates from lead agencies to determine the most appropriate supportive actions from the SEC, the SLAT, and OCS.

Two-Year Metric: The SEC will receive annual updates on service needs assessments completed by participating agencies.

Two-Year Metric: The SEC and SLAT members should educate their respective agencies, highlighting policy issues and best practices.

Ω_{-}	\Box
Δ	\sum
	$\sum \int$
Ý	<u> </u>

EMPOWERING FAMILIES & COMMUNITIES

We honor the voices and choices of families and youth and build the capacity of the communities serving them.

- 1. The SEC will support family engagement and a child-centered, family-focused, trauma-informed, and community-based system of care through:
 - Training and coaching by OCS and SEC member agencies on youth and family engagement for local CSA teams and other system partners.
 - Continuing OCS' role as a key training partner for evidence-based and outcomes-driven practices.

<u>Two-Year Metric</u>: The SEC, in collaboration with the SLAT, OCS, and other stakeholders, will develop tools for youth and families, such as a family guide brochure, model intake form, and family experience video, to build understanding about access to needed services.

2. In collaboration with the SLAT and other partners, the SEC will work to increase parent participation at the state and local levels.

<u>Two-Year Metric</u>: The SEC and SLAT will explore the barriers and challenges to eliciting parent representation at the state and local levels and brainstorm ways to overcome these barriers.

- <u>Two-Year Metric</u>: In collaboration with the SLAT and OCS, the SEC will support parent representative empowerment by developing focused training opportunities for parent representatives on the CPMT and FAPT.
- <u>Two-Year Metric</u>: The SEC, in collaboration with the SLAT, OCS, and other stakeholders, will survey local CSA programs to determine how they evaluate family perceptions of and satisfaction with the CSA process.
- <u>Two-Year Metric</u>: The SEC, in collaboration with the SLAT, OCS, and other stakeholders, will develop and disseminate a model "Youth and Family Engagement Survey" and recommend practices for gathering youth and family input from local CSA programs.