

# 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 at-risk 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.

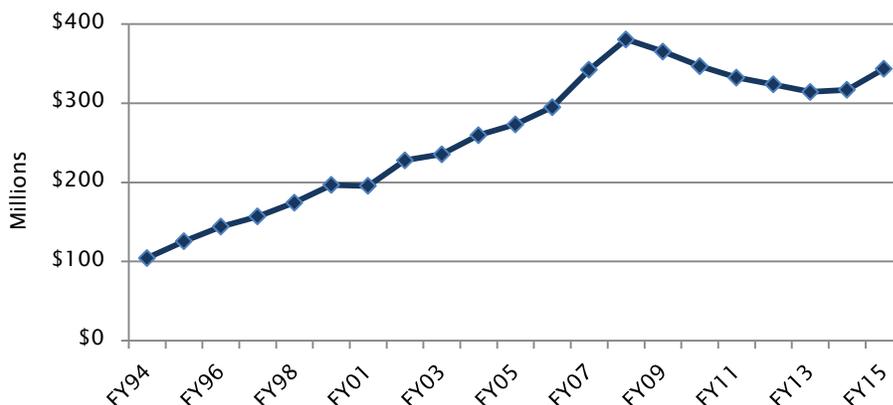


## PROGRESS REPORT ON THE CHILDREN'S SERVICES ACT

Biennial Report to the General Assembly, December 2015

In accordance with 2015 Appropriation Act, Chapter 665, Item 279 (H)

Exhibit 1. Total Expenditures Under the CSA, FY1994 – present



### Additional Contributions to CSA Funded Services

	FY14	FY15
Medicaid (Treatment Foster Care, Residential Care)	\$ 78,716,973	\$ 90,767,468
Title IV-E (Foster Care Maintenance)	\$ 49,940,930	\$ 53,230,757

These alternate funding sources are utilized for eligible youth and eligible services when available. Medicaid and Title IV-E include substantial federal financial contributions.

### State Funding Outside of the CSA State Pool

	FY14	FY15
Children's Mental Health Initiative Funds	\$ 5,648,128	\$ 5,648,128
Promoting Safe & Stable Families Funds*	\$ 5,568,262	\$ 5,632,642
Virginia Juvenile Community Crime Control Act Funds	\$10,102,980	\$ 10,379,926
<b>TOTAL</b>	<b>\$23,911,311</b>	<b>\$22,020,228</b>

\*approximately 75% Federal Funds

Exhibit 2. CSA Pool Fund Expenditures by Primary Mandate Type – FY2015

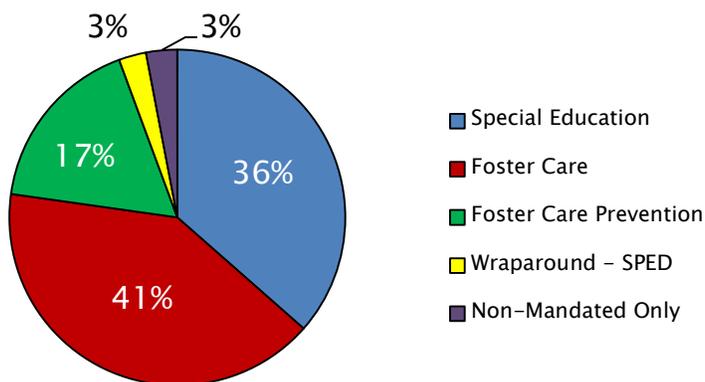


Exhibit 3. Average Annual CSA Pool Fund Expenditure per Child

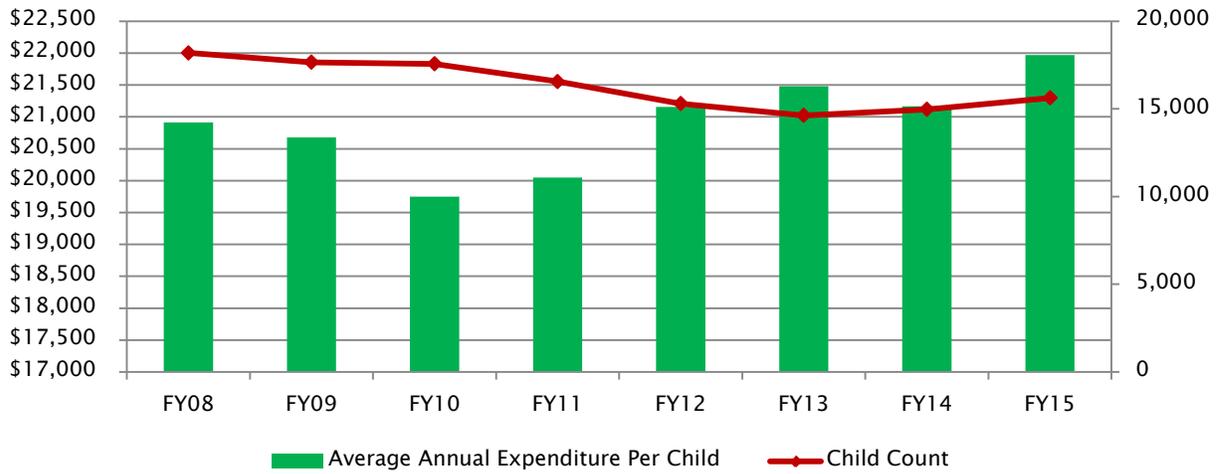
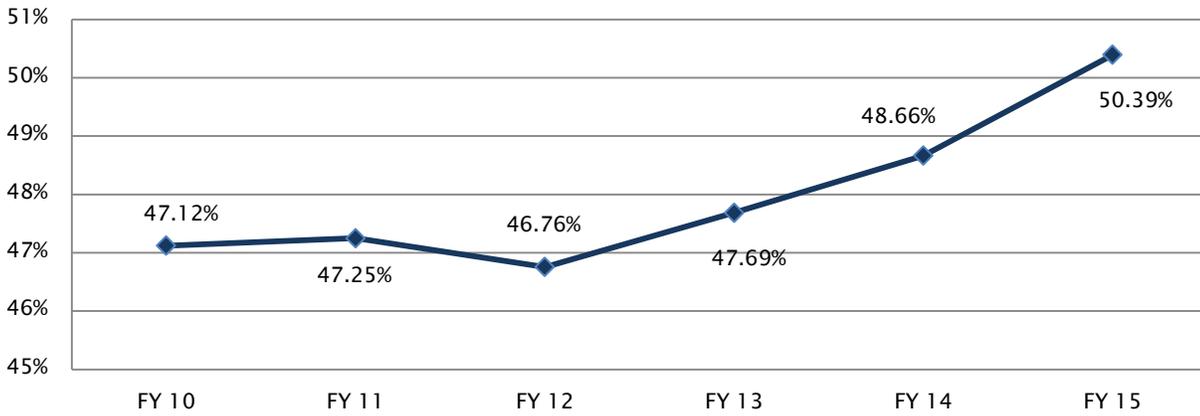
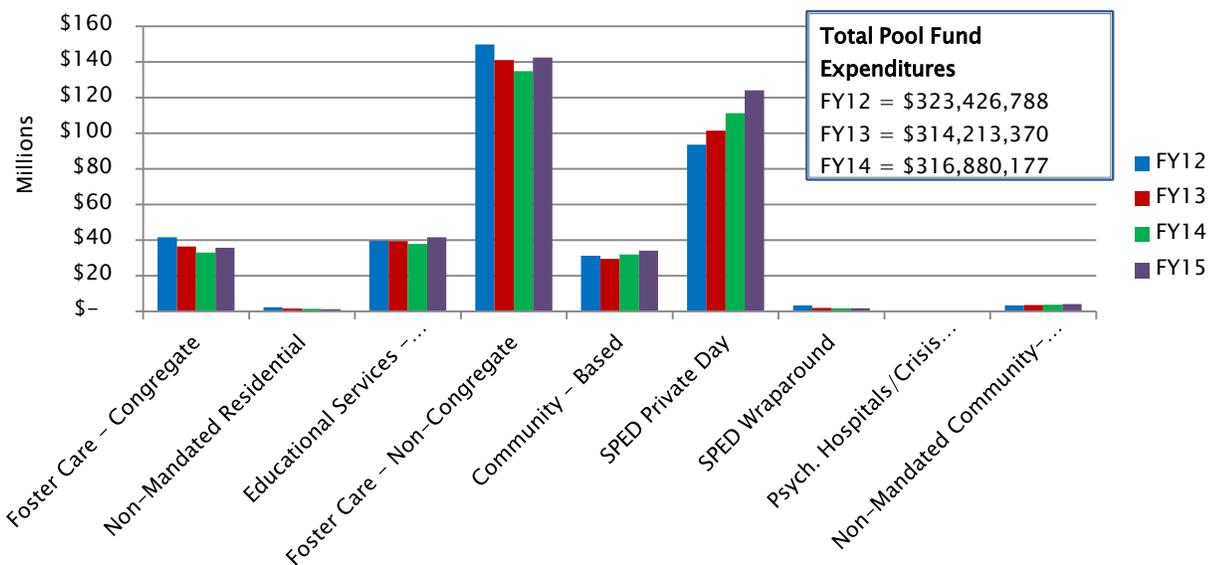


Exhibit 4. Percent of Children Served in Community-Based Settings (Target = 50%)



*Note: Prior year calculations for Percent of Children Served in Community-Based Settings has been revised to include all community-based services for children who did not receive residential treatment and/or treatment foster care during the reporting period.*

Exhibit 5. CSA Expenditures by Category - FY2012 - FY2015



# PROGRESS ON GOALS AND STRATEGIES OF THE FY14–FY16 BIENNIUM

(Goals and Strategies Developed in the December 2013 Biennial Report on CSA)

**GOAL 1:** Support implementation of a singular, unified system of care that ensures equal access to quality services for at risk youth across the Commonwealth.

## Strategy

1. Review and revise the policies of child serving agencies that govern the use of funds (e.g., CSA pool funds, Medicaid, Title IV–E, Promoting Safe and Stable Families, Virginia Juvenile Community Crime Control Act, Children’s Mental Health Initiative) to align:

- service criteria
- assessment
- authorization
- utilization review

## Progress

The State and Local Advisory Team (SLAT) has addressed this goal through examination of the requirements of the various funding streams available through state agencies and programs and their local operating agencies. A document entitled “Fund Streams Available to Local Governments for Child–Specific Purchased Services” describes the eligible populations, the process for accessing these funds, and the types of services that may be obtained through these funding sources. This document has been posted to the CSA website and the SLAT findings were reported to the State Executive Council (SEC).

The July 2013 SEC policy requiring consistent use of definitions, eligibility criteria, and service requirements across Department of Medical Assistance Services (DMAS) and CSA for community–based behavioral health services (Intensive In–Home, Mental Health Support Services, and Therapeutic Day Treatment) was a significant step in alignment of policies across agencies. The Office of Children’s Services (OCS) has worked with the Office of Family Services at VDSS to align policy guidance with regard to the use of CSA and other DSS–administered funds (e.g., Title IV–E) for children in the child welfare system resulting in greater consistency of practice. The OCS is presently working with DMAS as they review and revise the Medicaid regulations concerning residential treatment services for children and adolescents in areas of medical necessity criteria, service requirements, care coordination and discharge planning.

2. Ensure protected, i.e., “non-mandated,” allocations are utilized for youth who are included in the target population but who are not otherwise eligible for mandated services.

OCS has worked with the Department of Juvenile Justice (DJJ) to develop an approach which will incentivize the use of “non-mandated” allocations for youth at risk or already involved with the juvenile justice system through the implementation of evidence-based and evidence-informed interventions. As CSA allocations for serving the “non-mandated” population are presently utilized by many localities to support the funding required to serve the “mandated” or sum-sufficient population, this strategy requires allocation of additional General Funds to compensate for the use of “non-mandated” allocations to meet mandated funding needs. A budget proposal has been submitted for the FY16-18 biennium.

3. Assist local governments to address service gaps through state facilitated meetings between regional Community Policy and Management Team (CPMT) representatives and private providers.

The OCS held a statewide series of focus groups in late 2014 that included local CSA staff, local government representatives and private providers to address availability and access to services. A related survey was also conducted regarding access to CSA funded services. The issues identified were also addressed at the June 2014 SEC retreat which included participation from a broad group of stakeholders.

In FY 2013, the SEC adopted a revision to its “Carve Out Policy” which permits localities to allocate a portion of State Pool Funds for service development. Implementation of the policy requires allocation of additional General Funds. A budget proposal was submitted for the FY14-16 biennium, but was not approved.

4. Examine and address inadvertent fiscal incentives for residential placement, parental placement, and avoidance of Family Assessment and Planning Team/Multidisciplinary Team process.

The SEC initially addressed this issue by requesting that the SLAT review and develop findings and recommendations. The SLAT did not identify any significant issues in its report to the SEC. Subsequently, at the initiation of private providers of residential treatment, situations where children were entering such services (authorized and funded through Medicaid) without involvement in the CSA process were identified. Among the potential reasons cited for this were inadvertent fiscal incentives for avoidance of the FAPT/CSA process (e.g., no local financial contributions to cover

education costs, no local Medicaid match). The SEC

conducted extensive study of this issue and submitted a final report and recommendations to the General Assembly in September 2015. The issue remains unresolved at present. It will be revisited as the General Assembly responds to the recommendations and as DMAS examines its regulations for residential treatment, specifically the process by which children are assessed and authorized for admission and the role of the local CSA teams in that process.

5. Support cross-secretariat leadership (i.e., Health and Human Resources, Education, and Public Safety) on practice issues for the delivery and assessment of children's services at the state level.

Leadership, collaboration and coordination across Secretariats has been evidenced by:

- Cross-Secretariat discussion (Health and Human Resources, Public Safety and Homeland Security, Education) regarding prevention of juvenile justice system involvement and long-term school suspension and expulsion resulting from children's emotional and behavioral challenges through collaborative funding and interventions.
- Collaboration with the Departments of Juvenile Justice (DJJ) and Social Services (DSS) to develop enhanced continuity of care for children in foster care who are committed to the DJJ.
- OCS has been a partner in the Vision 21 grant, a cross-secretariat initiative to identify children and youth who are victims of crime and provide referral to trauma-informed care.
- OCS works on a regular basis with partners at the Department of Education (DOE) to ensure that CSA policy and practice is in alignment with state and federal (IDEA) requirements concerning educational services for children in the foster care and special education services under IDEA.
- OCS has been involved in the Interagency Partnership to End Youth Homelessness which includes representatives from across Secretariats.
- OCS has worked with the Virginia Commission on Youth in their two-year study of "The Use of Federal, State, and Local Funds for Private Educational Placements of Students with Disabilities." Final recommendations were adopted by the Commission in October 2015.

**GOAL 2: Support informed decision making through utilization of data to improve child and family outcomes and public and private performance in the provision of services.**

**Strategy**

1. Enhance collection, analysis, and utilization of appropriate client level data to enable comprehensive analysis of needs, services, providers, and outcomes.

**Progress**

Effective July 1, 2015, OCS implemented a standardized service name taxonomy for local data submissions to allow more accurate compilation and analyses of CSA funded services. Previously, no standardized service names were required.

The data analytics system provided to OCS by an outside vendor was determined not to be cost-effective and was discontinued in August 2015. Through partnership with DMAS, alternative data analytic tools are being developed for use by CSA.

The OCS continues to refine its web-based Client Data Reporting System (CBDRS) which is made available to localities to enable reporting of client level data for communities without their own electronic data systems.

In collaboration with the SEC Outcomes Committee, a standard set of CSA outcome measures has been identified and state and local level performance on those indicators will be reported beginning late 2015.

2. Improve availability of meaningful data via CSA statistics web page.

New CSA Data Set Reports were implemented in early 2015. These reports provide state level aggregate and locality specific information on children served through CSA funding including: number of children served; demographics; primary mandate type; service placement type; service expenditures, length of stay in services; and average per diem cost. The reports are available on the CSA public website ([www.csa.virginia.gov](http://www.csa.virginia.gov)).

3. Develop and implement training for users to sustain data systems.

User Manuals for the CBDRS system, the CSA Data Set and CSA Expenditure Reporting systems were developed and disseminated to local users of those systems and are available through the CSA website. Detailed information on submission of CSA data is incorporated into the new CSA User Guide, released in July 2015. Training on the use of CSA data

systems has been provided annually at the New CSA Coordinator Academy.

4. Enhance utilization of the Child and Adolescent Needs and Strengths Assessment (CANS) for service planning and identification of needs; explore utilization of CANS to establish need and amount of enhanced maintenance (additional daily supervision) for youth in foster care.

Training on use of the CANS for needs identification and service planning has been provided on an ongoing basis through a (recorded) two part webinar series offered by OCS, training at the annual New CSA Coordinator Academy and CSA conference, and at requested local training sessions.

An updated version of the CANS software has been under development and due for deployment in early 2016. AS a result of collaboration with state and local DSS partners, the new software will include value added capabilities for children in the child welfare system, and numerous new reporting features which will assist users in the service planning and utilization review process. Training will take place with the roll out of the enhanced software platform.

The DSS developed and implemented the Virginia Enhanced Maintenance Assessment Tool (VEMAT) for use in determining enhanced maintenance payments for children in foster care. This precluded the exclusive use of the CANS for this purpose. An OCS convened workgroup on levels of care in treatment foster care explored the use of the CANS and the VEMAT in the assessment of appropriate service levels and concluded that no single source of information should make that determination.

### **GOAL 3: Improve the operational effectiveness and accountability of CSA administration.**

#### **Strategy**

1. Enhance the engagement of CPMT representatives (including parents and private providers), juvenile judges, school superintendents, government administrators, and elected leaders in local administration of the CSA through increased opportunities for education regarding the CSA.

#### **Progress**

Each fiscal year the SEC has approved a comprehensive training plan submitted by the OCS. Training activities and participants are summarized annually in reports submitted to the General Assembly. In both FY14 and FY15, over 2000 (non-unique) individuals participated in CSA sponsored/provided training. A total of 45 individual training events were held in FY14 and 41 events in FY15.

The 3<sup>rd</sup> and 4<sup>th</sup> Annual CSA statewide conferences

were conducted with more than 550 local CSA team participants, private providers, and state stakeholders represented at each event. Participants in the annual conference from locality and stakeholder groups are summarized in the annual CSA Training Reports to the General Assembly. Materials from all four years of annual conferences have been posted to the CSA public website.

In addition to live, “in-person” training events, OCS has provided numerous distance learning webinars on current topics, issues and initiatives such as the new (July 2015) Treatment Foster Care Guidelines, the Use of the Child and Adolescent Needs and Strengths Assessment (CANS).

OCS, as a sub grantee for the Department of Behavioral Health and Developmental Services (DBHDS), has operated the High Fidelity Wraparound (HFW) Center of Excellence, training over 200 providers and 40 Family Support Partners in this evidence informed approach to the system of care.

2. Update CSA Manual for increased usability.

The *CSA Policy Manual* was completely reformatted and released in July 2015. The *Policy Manual* now includes concise, clearly organized information about SEC adopted policies and hyperlinks to relevant sections of the Code of Virginia. The document is available through the CSA public website.

A comprehensive *CSA User Guide* was developed and released in July 2015. This *Guide* includes information about all aspects of state and local implementation of the CSA, above and beyond that found in the *CSA Policy Manual*. It includes hyperlinks to the full array of CSA reference documents found on the CSA website as well as outside resource materials. The document is available through the CSA public website.

3. Enhance fiscal and data reporting requirements to reduce local

Conversion of existing data reporting applications is under development by the OCS Information

administrative burden and improve utilization of data for program evaluation and improvement.

Technology Team. In FY16, merger of the CSA Data Set and Expenditure submissions will occur. Work is underway to replace the current CSA Pool Fund Reimbursement System with one based on the combined data set/expenditure submission. These activities will reduce local administrative burden, increase consistency and accountability of CSA expenditures and data, and provide a sounder basis for outcomes analysis and reporting.

4. Enhance collaboration between SLAT and SEC through annual joint meeting for review of strategic planning initiatives.

A joint meeting of the SLAT and SEC for strategic planning will be held in early December 2015. SLAT members were active participants in the SEC Retreat held in June 2014.

5. Enhance communication across SEC members through reporting at SEC meetings regarding policy and program initiatives impacting upon children's services, e.g., Three Branch Institute, Magellan contract, SAMHSA grant.

The quarterly SEC meetings serve as a forum for members to share important initiatives regarding the system of care for children's services in the Commonwealth. Information has been presented about the role of Family Support Partners in High Fidelity Wraparound, the Three Branch Institute, and DMAS's contract with Magellan as its Behavioral Health Administrator, the SAMHSA System of Care grant (DBHDS), the transformation efforts at DJJ and other topics.

6. Develop and implement a system for program evaluation designed to assess state and local achievement of outcomes, implementation of best practices, and local need for technical assistance and training.

The SEC established an Outcomes Committee to guide this work.

In conjunction with the existing Performance Dashboard, a set of indicators to assess state and local performance has been identified. These indicators include:

- the percent of children served through the CSA that receive only community-based services (no congregate care services).
- the percent of children served in congregate care/residential settings who receive Intensive Care Coordination, an evidence informed service designed for children at-risk of and/or returning from residential placements.
- the percent of children in foster care who are in family-based (as opposed to congregate care) placements.
- the percent of children who exit foster care to a permanent living arrangement.

- changes (improvement/lack of improvement) in CANS life domain scores between initial and most recent assessment following initiation of CSA services.

These performance indicators are presently being analyzed at both the state and locality level for the FY14 and FY15 periods and will be published upon completion and will be utilized to identify “high-performing” localities in order to gather lessons learned about best practices. Localities with lower performance will be offered targeted training and technical assistance to help improve outcomes on these indicators.

In addition to these objective performance indicators the OCS/CSA audit program serves as a comprehensive approach to fiscal and programmatic evaluation of local CSA programs. The audits not only provide findings with regard to compliance with relevant statutes, policies, internal controls and risk management, but consultation and recommendations for improvement. Audit findings frequently result in requests for technical assistance from OCS.

The *CSA Audit Self-Assessment Workbook* has been revised and published. This serves as a road map to local CSA programs in monitoring their own activities, as well as the framework for CSA audit practices.

Local government feedback regarding the audit process is collected following each audit to enable continuous review and improvement of the process. This feedback is almost uniformly positive, despite the inherently “adversarial” nature of the audit process.

The status of the OCS Audit Plan for Fiscal Years 2013–2015 was updated in June 2015. As of that

date, the status of local audits was as follows:

- On-site audits: 37 scheduled; 26 completed or in in progress
- Self-assessments with validation: 82 scheduled, 21 complete or in progress

It is anticipated that audits of all 130 local CSA programs will be completed in FY16 and the Audit Plan for the subsequent cycle developed and published. OCS has requested funding for two additional audit staff in order to support a three-year audit cycle and enhanced ad hoc audit capabilities.

# GOALS AND STRATEGIES FOR THE FY16–FY18 BIENNIAL PLAN

## ENDORSED BY THE SEC AND SLAT – December 3, 2015

**GOAL 1:** Support implementation of a singular, unified system of care that ensures equal access to quality services for at risk youth across the Commonwealth.

<b>Strategy</b>	<b>Responsible Body</b>	<b>Target Completion Date</b>
1. Continue promotion of High Fidelity Wraparound/ Intensive Care Coordination as an evidence-based intervention through sustaining the activities of the HFW Center of Excellence on the expiration of federal grant funding (9/30/16) and continued collaboration with state and local partners to advance the practice of HFW and expand funding options for the intervention.	SEC, SLAT and OCS	Ongoing
2. Increase family participation in all aspects of the system of care by enhanced support for a child-centered, family-focused system by policy guidance and support of practices to increase family access and voice in the CSA process, including provision of ongoing training opportunities in this area.	SEC, SLAT and OCS	Ongoing
3. Review, clarify, and revise as necessary, relevant SEC policies that impact access to and quality of services (e.g., CSA eligibility as a Child in Need of Services, “Carve Out of Allocation for Development of New Services). Continue efforts to align SEC policies with those of other child-serving agencies as appropriate.	SEC	6/30/2017
4. Work with the Department of Education and other state and local stakeholders to examine and improve practices and develop greater collaboration with CSA regarding the placement of students with educational disabilities in the least restrictive environment. Review and recommend/adopt adjustments to SEC policy on the use of special education wraparound funds as appropriate.	SEC, SLAT OCS	6/30/2017
5. Work with/assist the Department of Medical Assistance Services (DMAS) and other appropriate agencies and groups to revise regulations governing residential treatment for children and adolescents to ensure consistent access, care coordination and improved outcomes.	OCS	6/30/2017

6. Support cross-secretariat leadership (i.e., HHR, Education, and Public Safety and Homeland Security) through the Governor’s Children’s Cabinet on policy, funding and practice issues to enhance outcomes for high-risk populations including youth involved in the juvenile justice system and those at-risk of long-term school suspension or expulsion due to emotional and/or behavioral problems.	SEC OCS	Ongoing
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**GOAL 2:** Support informed decision making through utilization of data to improve child and family outcomes and public and private provider performance in the provision of services through the Children’s Services Act.

<u>Strategy</u>	<u>Responsible Body</u>	<u>Target Completion Date</u>
1. Improve availability of meaningful data via statistics on the CSA web page and expand information via data “dashboards”. Work with local governments to define relevant data for inclusion, specifically common outcome metrics across the CSA service array.	SEC Outcome Committee, SLAT and OCS	Ongoing
2. Continue to enhance collection, analysis, availability and utilization of appropriate client, local and state level data to enable comprehensive analysis of needs, services, providers, and outcomes. Utilize data and predictive analytics as a basis for quality improvement activities. Explore opportunities for follow-up after receiving CSA services to determine long-term outcomes.	SEC Outcome Committee, SLAT and OCS	Ongoing
3. Enhance utilization and value of the Child and Adolescent Needs and Strengths Assessment (CANS) for service planning and identification of needs by release of and training on the new CANVaS 2.0 software platform which will include enhanced: <ul style="list-style-type: none"> <li>• child level reporting capabilities to allow needs and strengths identification, progress monitoring, and adjustments of service plans</li> <li>• assessment of a child’s experiences of trauma</li> <li>• ability (for children in the foster care system) to assess needs and strengths in the areas of safety, permanency and well-being and for concurrent permanency planning.</li> </ul>	OCS VDSS	6/30/2017

**GOAL 3: Improve the operational effectiveness and accountability of CSA administration.**

<b>Strategy</b>	<b>Responsible Body</b>	<b>Target Completion Date</b>
1. Develop and implement guidelines for the process of SEC promulgation of policies including stages and time frames for public notice, public comment, and evaluation of potential state and local fiscal impact	SEC	6/30/2017
2. Develop and adopt clear policy guidance regarding criteria for denial of CSA state pool funds in response to audit findings and subject to the SEC Dispute Resolution Policy	SEC and SEC Finance and Audit Committee	06/30/2017
3. Continue engagement of CPMT representatives (including parents and private providers), juvenile judges, school superintendents, government administrators, and elected leaders in local administration of the CSA through increased opportunities for education and dialogue.	SLAT and OCS	Ongoing
4. Enhance integration of fiscal and data reporting requirements and systems to reduce local administrative burden and improve accuracy and utility of data for program evaluation and improvement and fiscal operations.	OCS and SEC Finance and Audit Committee	6/30/2017
5. Continue implementation of a robust training plan including development and implementation of a group of e-learning courses to make training on core CSA policies and practices available “on-demand”, especially for newly hired staff of local child-serving agencies.	SLAT and OCS	Ongoing
6. Build/enhance a systemic culture of collaboration across state and local CSA stakeholders through technical assistance in team building, communication, consensus building, etc.	SLAT and OCS	Ongoing
7. Enhance collaboration between SLAT and SEC through periodic joint meetings for review of strategic planning initiatives.	SEC and SEC	Ongoing