

Revisiting the Origins of CSA

Why and How this Innovative Service Delivery System was Created and the Relevance of that History Today

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Today's Presentation

- Origin of CSA
- Early years of operation
- Changes since Inception
- Assessment of extent to which CSA has fulfilled its original goals and principles
 - Results of Recent Stakeholder Survey
 - Discussion of Current Strengths and Need for Improvement

Why Look to the Past?

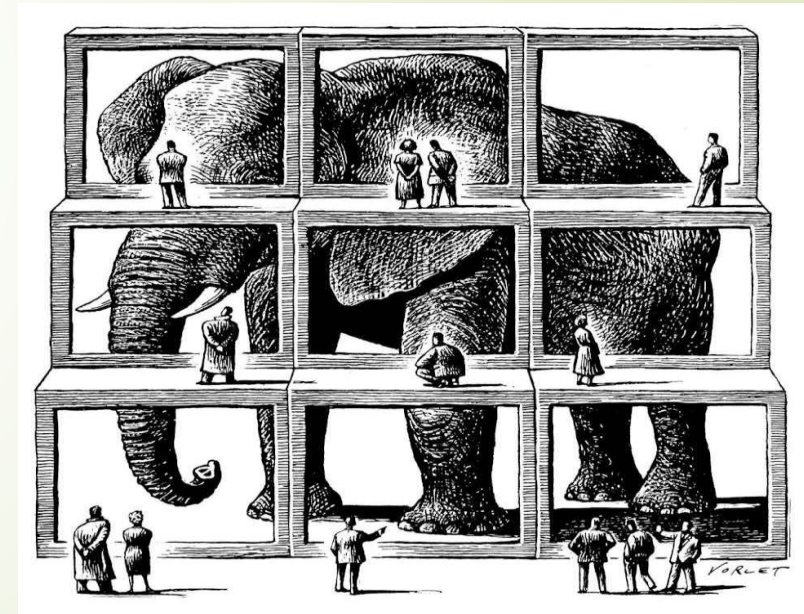


Will Examine Four Critical Themes

- Why CSA was able to be created at that time.
- Factors and forces that facilitated establishment of this.

Context Matters

- Virginia's long paradoxical history of conservatism and innovation.
- DPB residential placement study.
- First Lady Baliles interest in children.
- Virginia's first Black governor.
- Bi-partisan collaboration.



Faithfully Focusing on Principles/Values

- ➔ Recent introduction of System of Care model (Stroul and Friedman).
- ➔ Skillful guidance of state and local officials to enable stakeholders to put aside vested interests/organizational and focus on welfare of vulnerable children/families.



Persistence Pays Off

- Seven Years of Preliminary Work
 - Task forces
 - Pilot projects
 - Research on other systems of care
- Governor's Council on Community Services for Youth and Families



Balance is Required

- Appropriate attention to integrity and survival of participating organizations.
- Deal with tensions constructively.
- Considerable negotiation and compromise.
 - Local-State authority/roles.
 - Fiscal vs service goals.
 - Agency autonomy/convenience vs complexity of collaboration.
 - Regulation/accountability vs flexibility and unique local structure/culture.



What is CSA?

- Array of services.
- Funding mechanism.
- Local and state governance and management structure.

- ***Most important – CSA is a structure and process for stakeholders to plan services, resolve conflicts, and address challenges that impact this unique system of care.***

Howard Cullum's Bold Directive



Incremental Policymaking

- The original legislation remains fundamentally intact today.
- Throughout its “evolution” the legislation has promoted improvements to the system.
- Inherent flexibility has allowed for both programmatic and legislative modifications to meet unanticipated demands and changing conditions.
- The CSA altered the funding structure and service delivery model by setting forth in policy a new way of planning, coordinating, funding and delivering services.
- Virginia’s state and local agencies and communities, fundamentally redesigned the system of care for at-risk children.

Looking to the Future . . .

- CSA has achieved positive results, continued to receive political support, and developed over time to respond to changing demands and conditions.
- CSAA' implementation has not been without challenges.
- CSA's path forward might be somewhat uncertain and continue to change, however what is certain is that it's on a course to continue.
- *You are a part of that!*

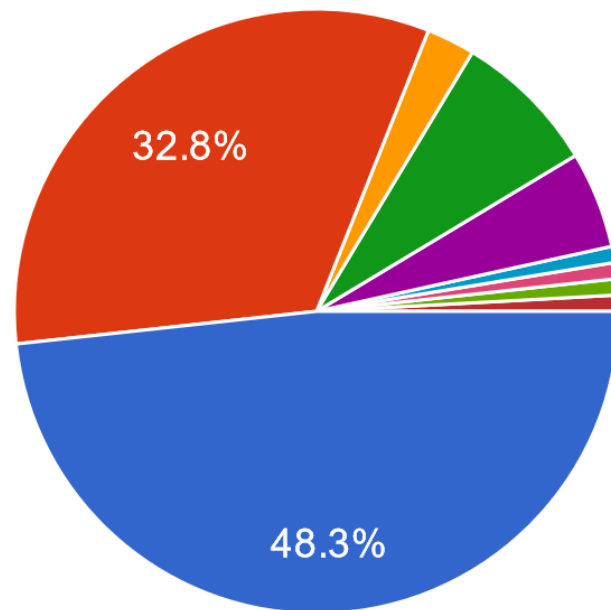
Taking Stock of 30 Years of CSA . . .

Key Stakeholders Input

- *Your* reflections on how well the CSA system of care has achieved its mission . . .
- To what extent has CSA achieved its original goals and remained consistent with the values and principles it embraced?
- What has helped in successfully implementing this ambitious statewide undertaking locally and at the state level?
- What are the obstacles and challenges faced that have impeded progress?
- What can be done to address these concerns and improve the ability to provide comprehensive, coordinated care for vulnerable children and families?

I am/we are a:

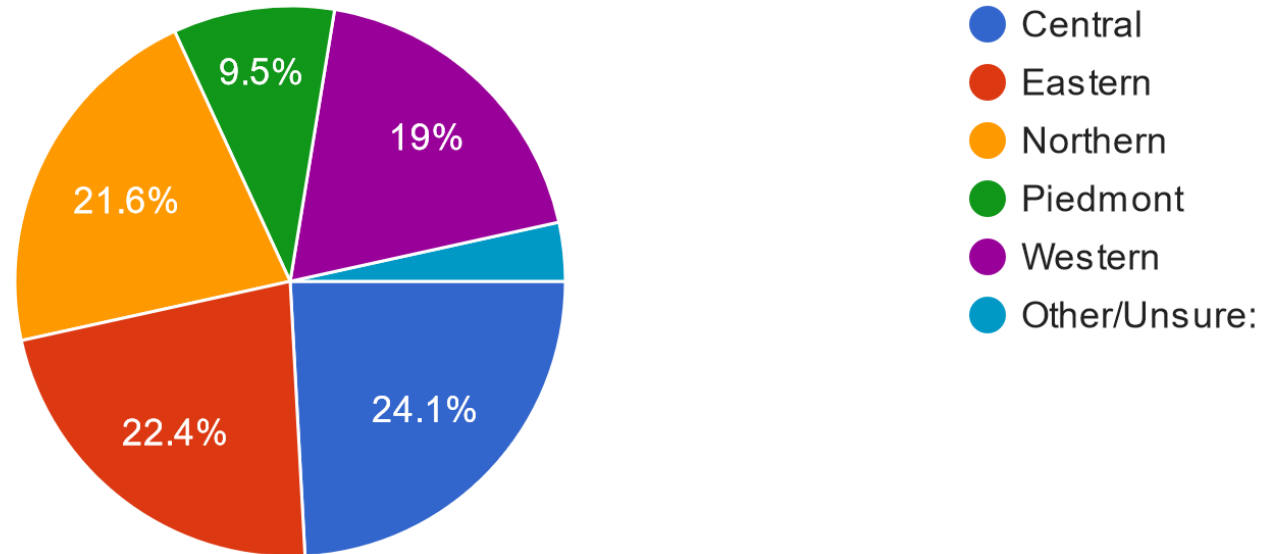
116 responses



- Local government CSA Coordinator/Manager
- Local government CPMT Member
- Local community Parent Representat...
- State agency representative engaged...
- Private provider serving children, yout...
- Community Action Agency providing s...
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- Local Community FAPT rep
- Department of Social Services FAPT...

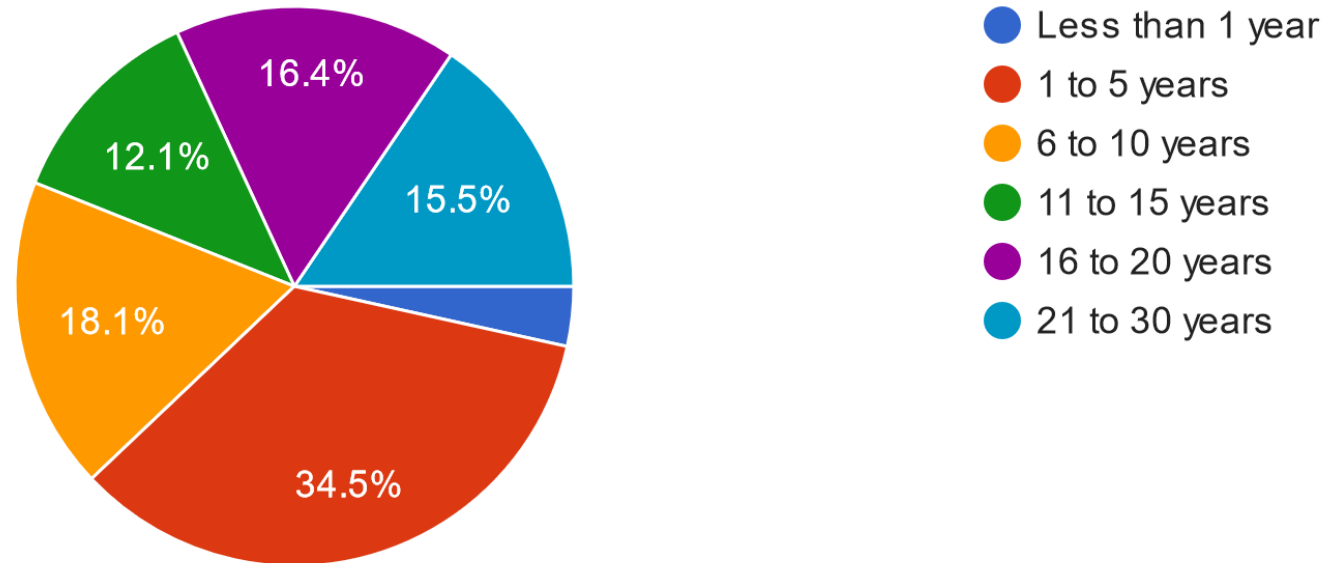
In which of the 5 regions in Virginia are you located?

116 responses

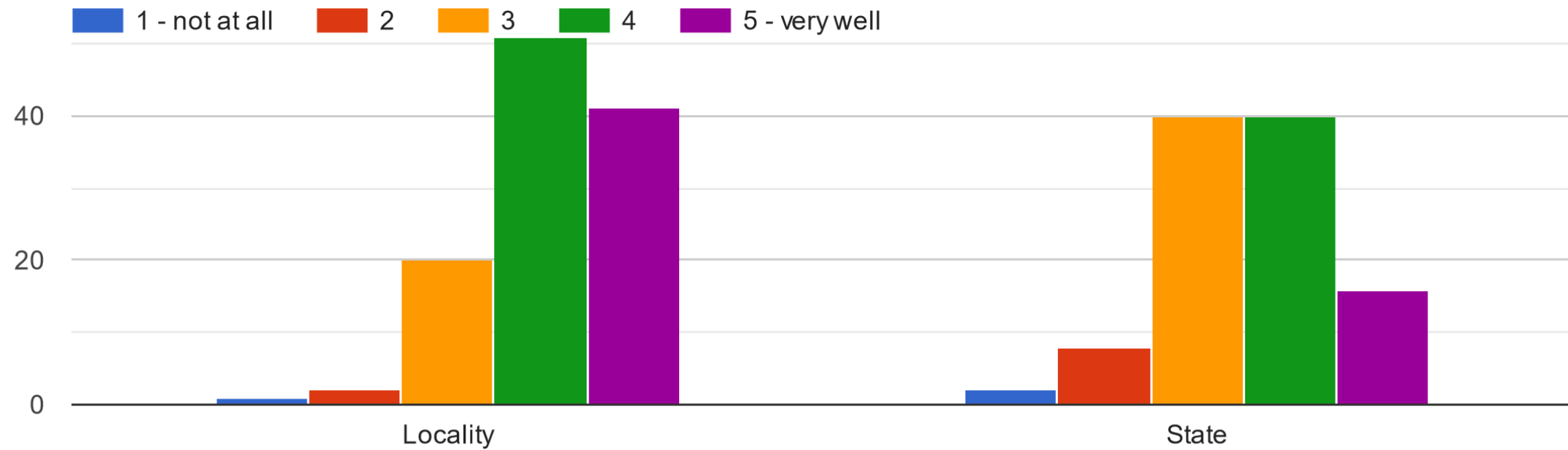


How long have you been engaged in the work within the CSA System of Care?

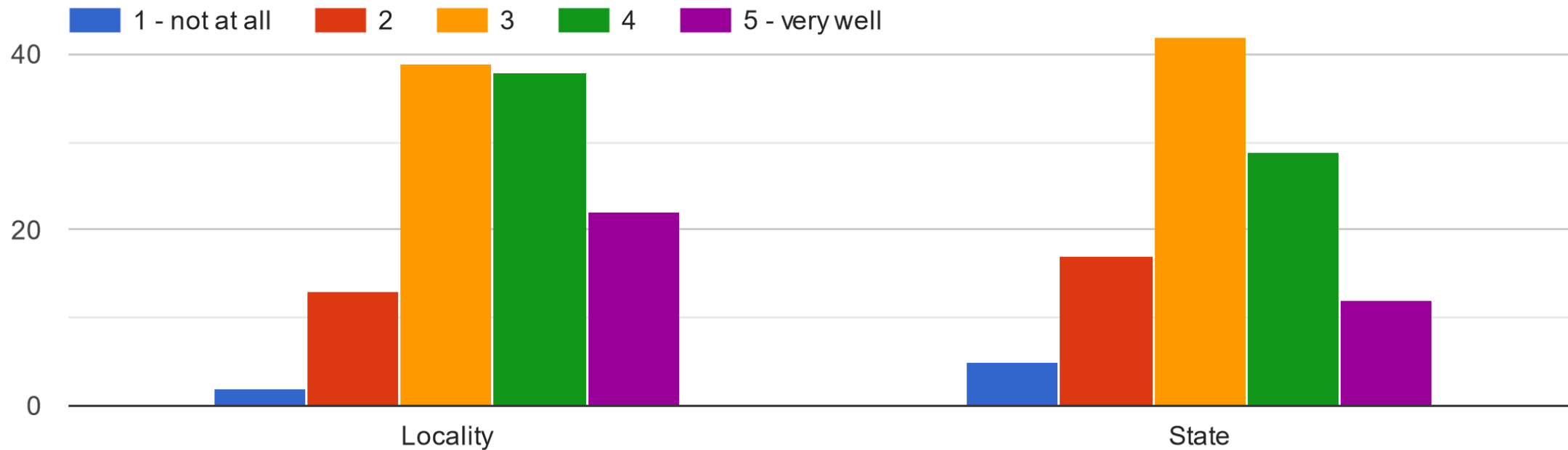
116 responses



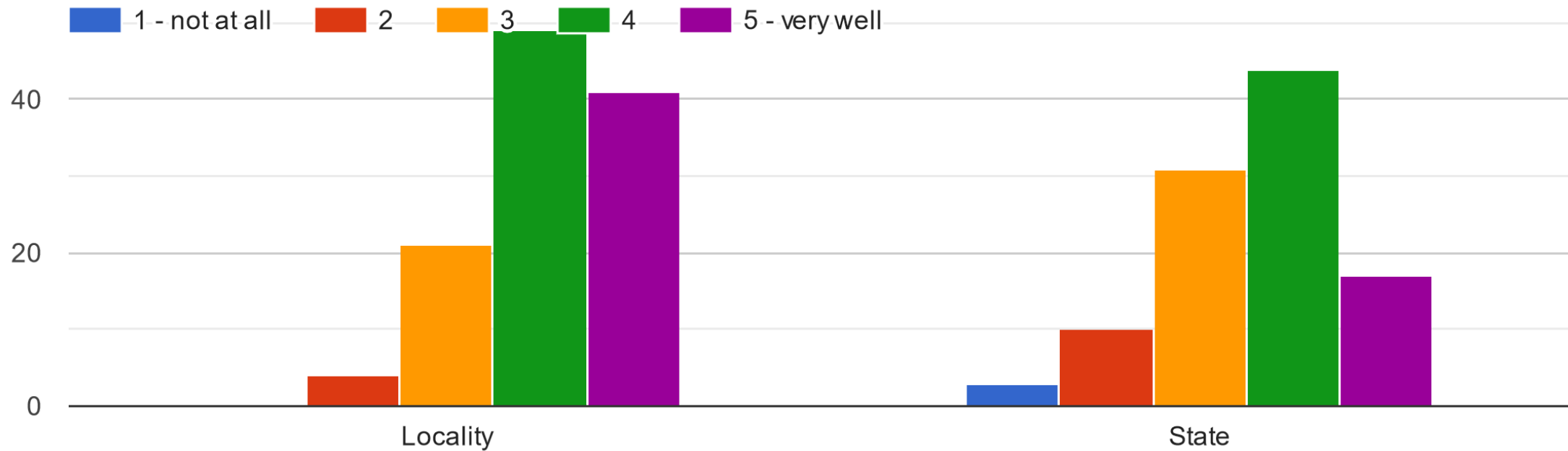
Services & Funding consistent with Commonwealth's policy of preserving families, providing appropriate services in least restrictive environmen...fare of children and maintaining safety of children.



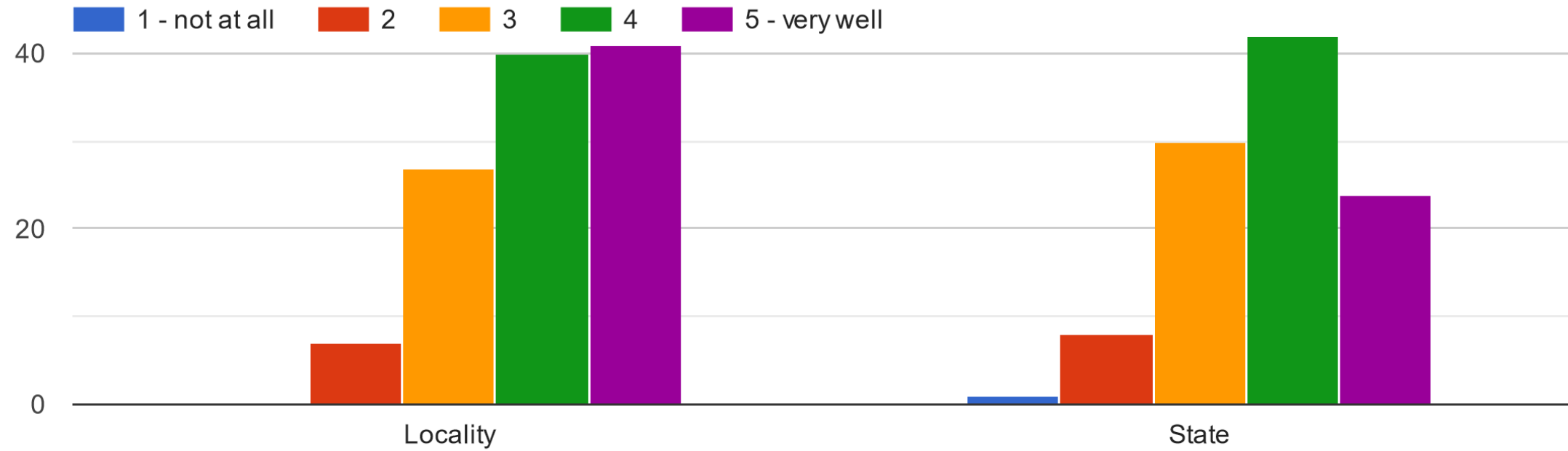
Intervene early with young children and their families at risk of emotional/behavioral problems.



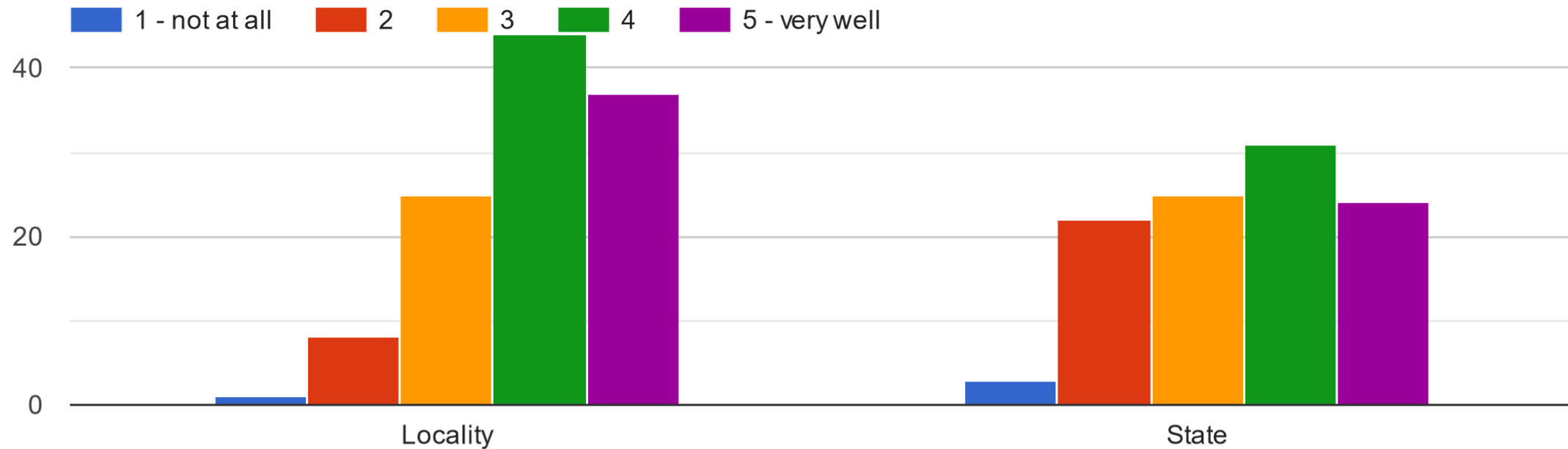
Increase inter-agency collaboration and family involvement service delivery and management.



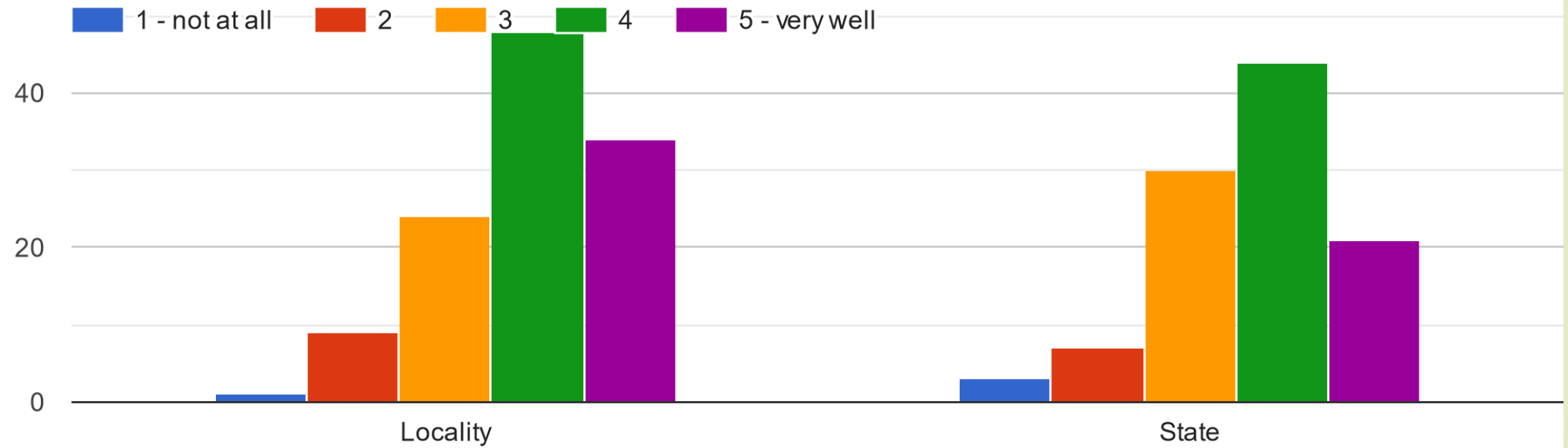
Encourage public/private partnership in delivery of services.



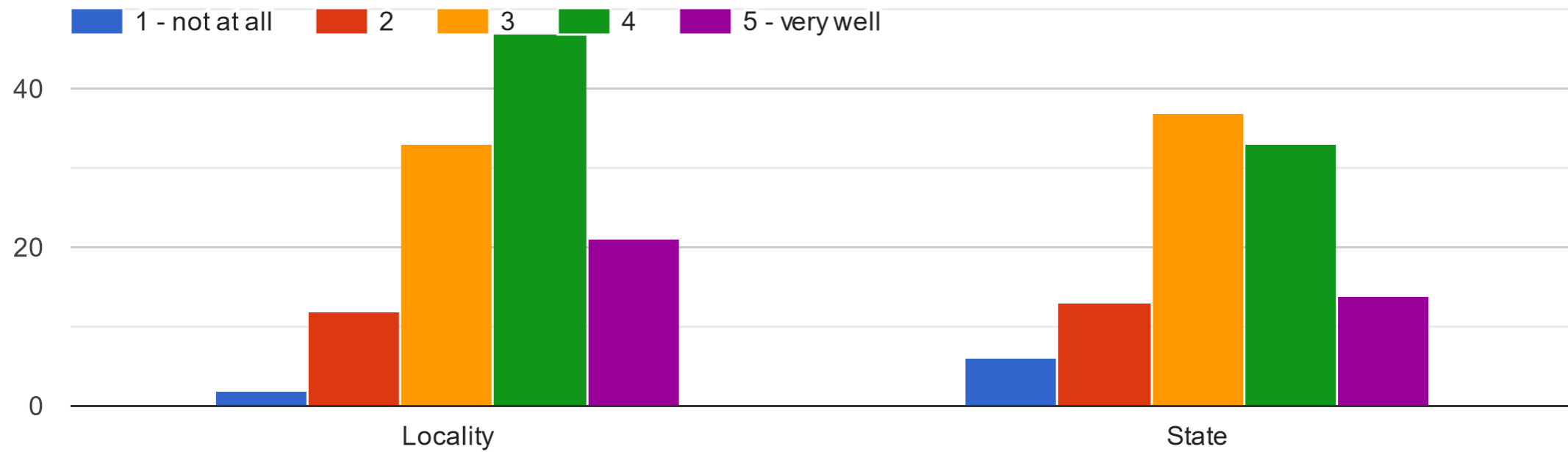
Provide communities flexibility in use of funds and to direct decisions, authority, and accountability to communities who know best the needs of their youth and families.



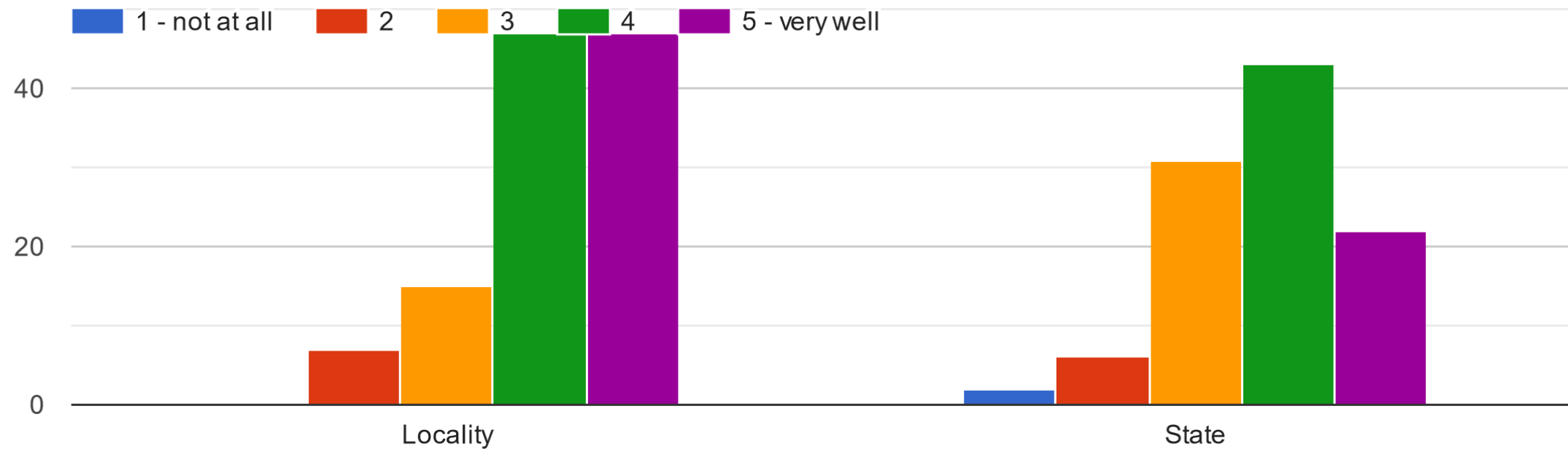
Services are family-driven and youth-guided, culturally and linguistically competent and take into account strengths as well as needs.



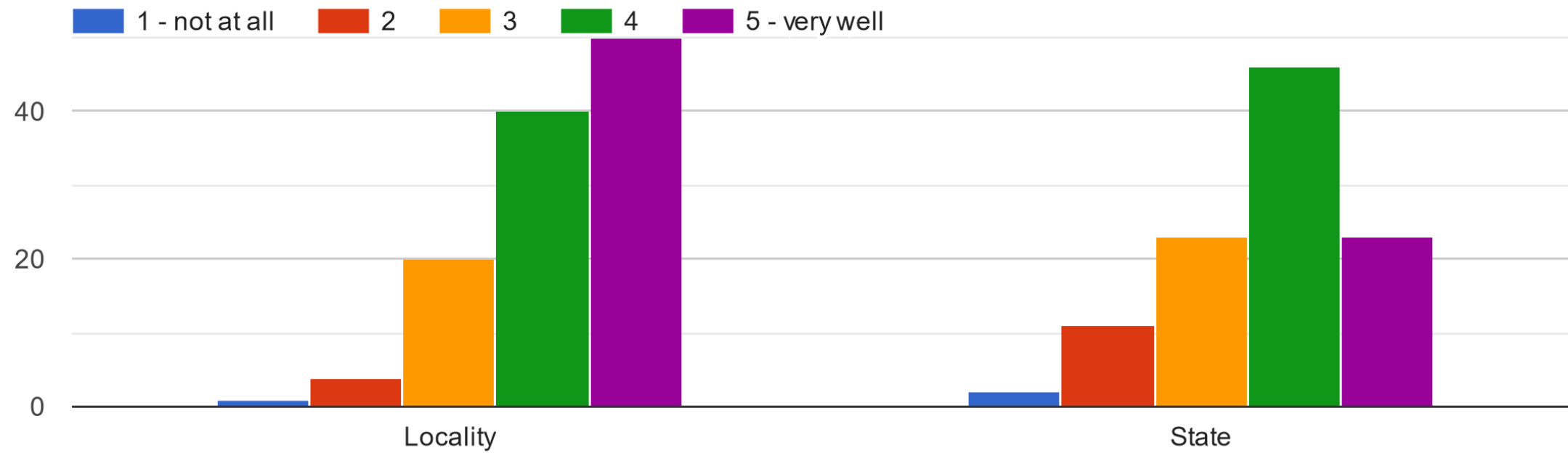
Provide access to a sufficient continuum of community-based assessment, treatment, and transition services and supports.



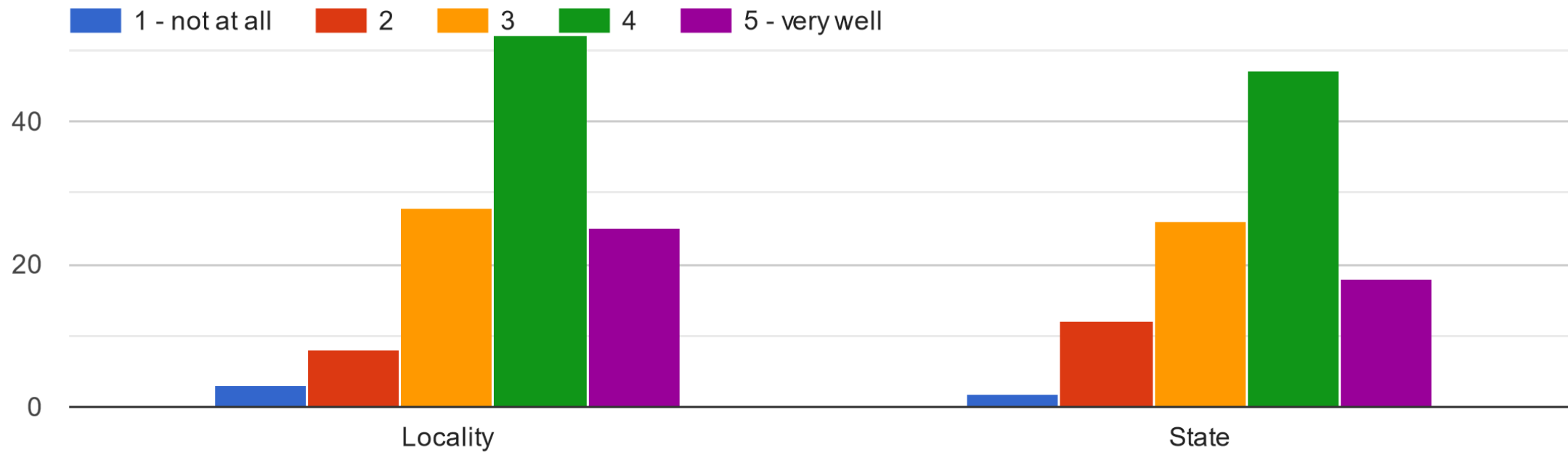
FAPT and CPMT members and their parent agencies collaborate effectively to ensure that children receive least restrictive, appropriate service.



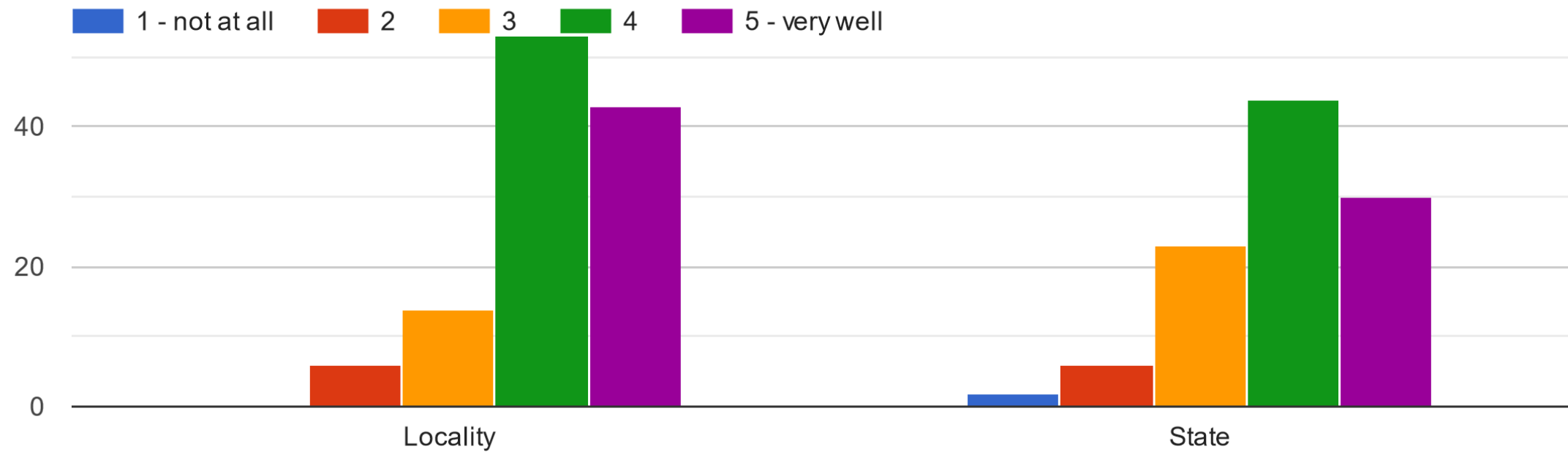
Funds are spent effectively and efficiently, maximizing the use of local, state, federal and private funding streams.



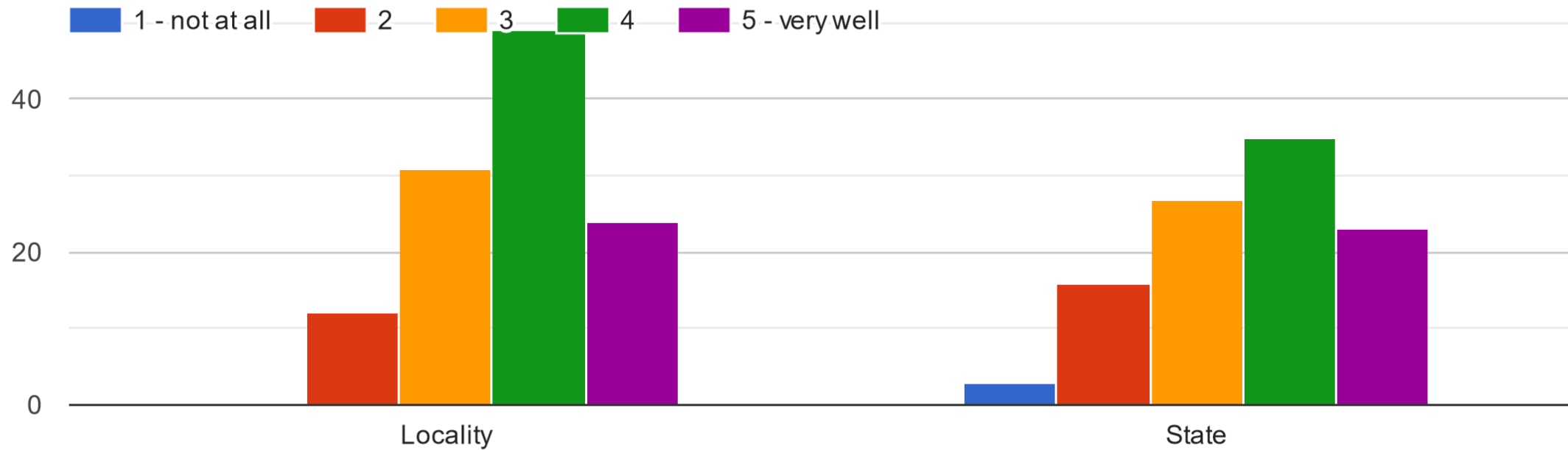
Data are collected and analyzed to measure outcomes and ensure that all parties, including local governance and management teams as well as providers are held accountable.



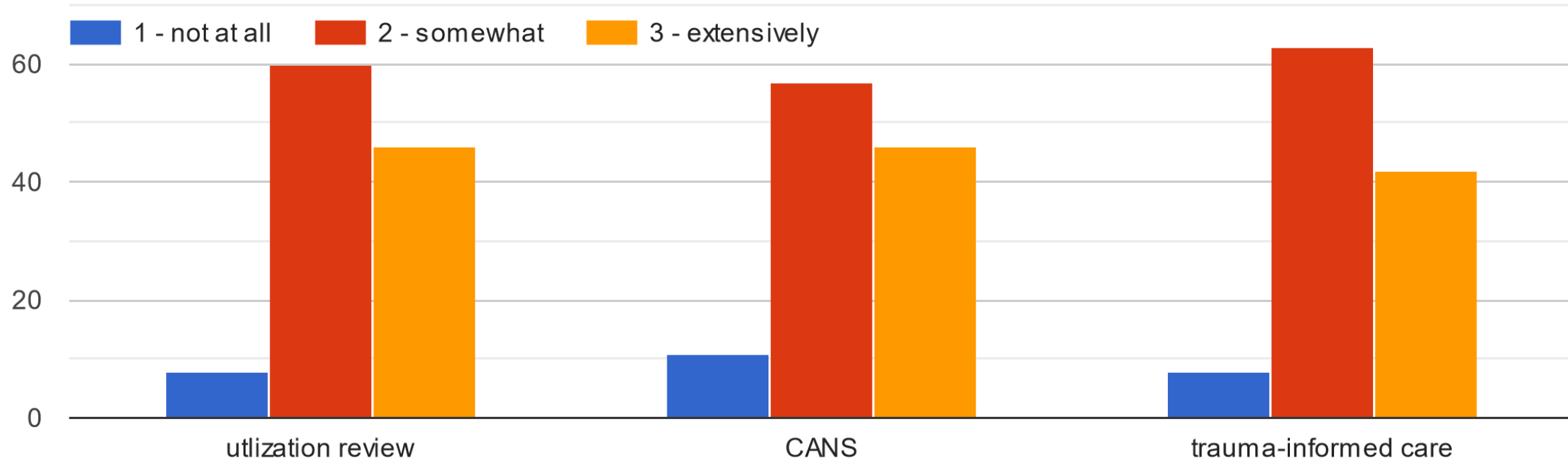
Fosters a culture of inclusion, diversity, equity and mutual respect for all consumers, providers, managers, and other stakeholders.



Provides sufficient education and training so all stakeholders have knowledge and skills needed to understand the CSA and fulfill its expectations and goals.

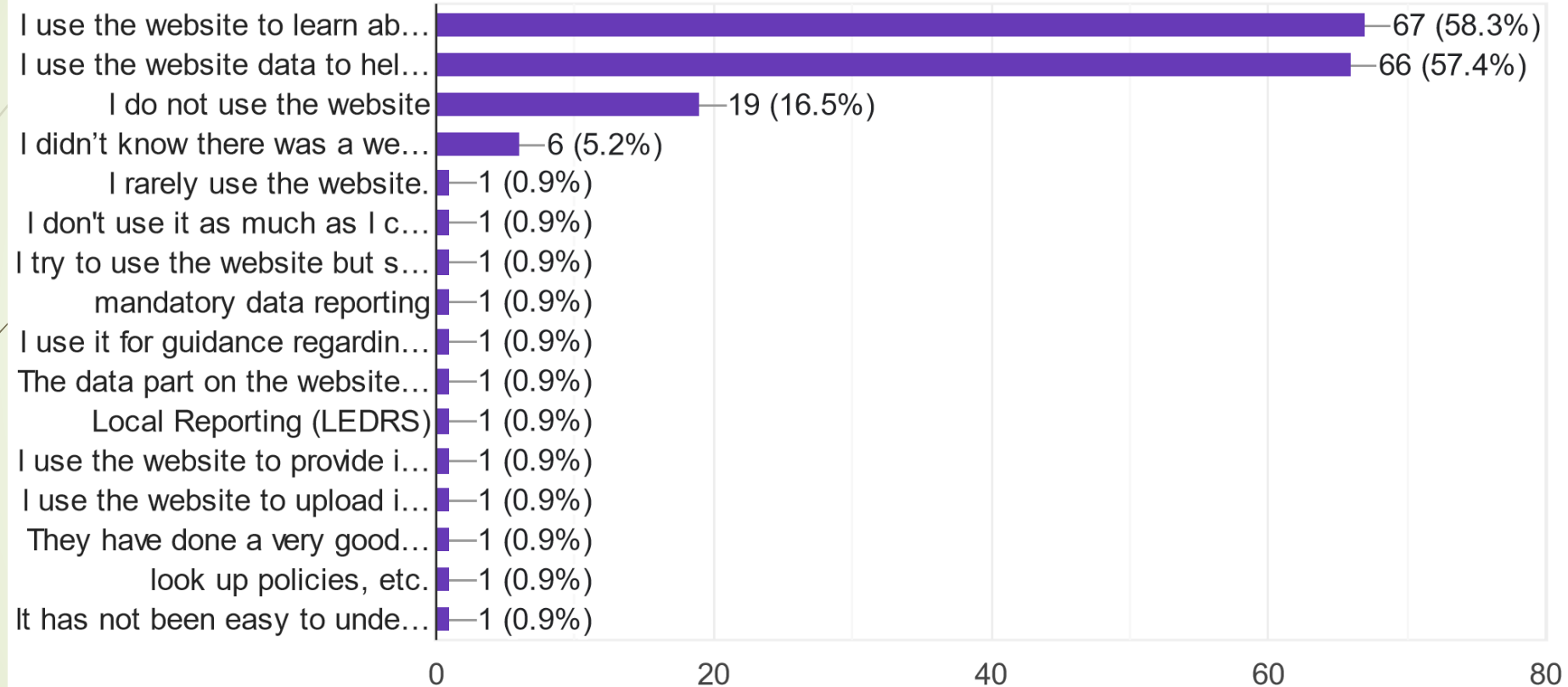


To what extent is CSA evidence-based driven using the following tools?



Regarding the resources, information, and data provided on the state's Office of Children's Services Website (check all that apply):

115 responses



Extent to Which CSA Goals and Principles Have Been Realized:

Survey Ratings < 3

- Lack of local resources/options impede ability to reduce cost of provide best/least restrictive services, e.g., especially rural areas.
- State-local partnerships: “Siloed thinking” - Inadequate local input and flexibility.
- Limited opportunity to provide early intervention. because consumed. with serving high acuity youth.
- Insufficient collaboration among state agencies.
- Significant gaps in service array.

Critical Concerns - Barriers

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- Lack of funding/resources.
- Unavailability of service providers, especially rural areas , but also others.
- Courts lack of understanding of CSA and youth service needs.
- Red tape impedes ability to respond promptly.
- Training focused more on audit compliance than system of care effective service delivery.
- Insufficient teamwork and communication at all levels.
- Workforce turnover and reduction.
- Cultural awareness & bias.
- Lack of understanding/use Families First Prevention Services Act.

Changes State Can Make to Better Address Goals

- Move private day and residential to DOE.
- Increase local funding, review match.
- More training, i.e., CPMT, FAPT, state leadership.
- More support (funding & training); use of evidence-based practices.
- Increase support for preventive services.
- Strategies for luring providers to localities.
- Competing Views: Greater local flexibility vs more uniformity.

Positive Directions & Strengths

- There is a regular Coordinator Academy that is well funded, consistent and offers fundamentals.
- OCS has CQI data now that is well done and gives localities feedback on their performance.
- The auditors are fair and focus on training/improvement. It's still hard because of the breadth of policy and requirements.
- OCS is offering monthly office hours for training and questions.
- Other state agencies may be driving some of the problems and poor alignment; it's not all OCS.
- The SLAT and Coordinators groups are more effective now.

Comments & Questions?