Results-Based Accountability Performance Plan FY 2019, Quarter 1 Report to CPMT

SUMMARY				
Name of Work	Children's Services Act (CSA) for At-Risk Youth – Systems of Care			
Agency	Human Services within the Department of Family Services (DFS)			
<u>Contact</u> (Name, Phone, Email)	Patricia E. Arriaza, Management Analyst III, 703-324-8241, patricia.arriaza@fairfaxcounty.gov			
<u>Purpose</u>	The Children's Services Act (CSA) for At-Risk Youth and Families is a law enacted in 1993 that establishes a single state pool of funds to purchase services for at- risk youth and their families. The state funds, combined with local community funds, are managed by local interagency teams who plan and oversee services to youth. The mission of the CSA is to create a collaborative system of services and funding that is child-centered, family-focused and community-based when addressing the strengths and needs of troubled and at-risk youth and their families in the Commonwealth.			
Customers	At-risk youth between the ages of 0 to 21 and their families as defined by VA § 2.2-5212			
Total Customers	Youth served: FY18: 1,311 ; FY17: 1,428 ; FY16: 1,494; FY15: 1,343; FY14: 1,200			
<u>Total Staff Year</u> Equivalents (SYE)	FY2018: 10; FY2017: 10; FY2016: 10; FY2015: 10; FY2014: 10			
Total Budget	FY 2018: \$38.6 million for CSA pooled funding; \$888,571 for program administration FY 2017: \$40.8 million for CSA pooled funding; \$903,305 for program administration FY 2016: \$41.9 million for CSA pooled funding; \$988,075 for program administration FY 2015: \$39.8 million for CSA pooled funding; \$947,889 for program administration FY 2014: \$38.0 million for CSA pooled funding; \$909,356 for program administration			

	Summary of Annual and Quarterly ¹ Performance Measures
	How Much Was Done?
1.1	Total Youth Served Annually
1.2.1	Annual CSA Pool-fund Expenditures
1.2.2	Annual CSA Expenditures by Service Type
•	How Well Was It Done?
2.1	Restrictiveness of Living Outcome Goal 1: Increase in percentage of youth participating in CSA who live in family settings.
2.1.1	Number of youth in a long-term congregate care setting
2.1.2	Percentage of youth participating in Intensive Care Coordination who are successfully prevented from entering residential or group home placement six months and twelve months after initiation of services
2.2	Restrictiveness of Living Outcome Goal 2: Children participating in CSA living in congregate care are returned as quickly as possible to a family setting.
2.2.1	Average number of days (length of stay) CSA participating children live in congregate care – measured in current setting and at post- discharge
2.2.2	Number of youth entering long-term congregate care settings
2.2.3	Number of youth exiting long-term congregate care settings
2.2.4	Percentage of youth participating in Intensive Care Coordination who are successfully returned from residential or group home placement within three months of initiation of services
2.3	Permanency Outcome Goal: Prevent entry into foster care for reasons other than maltreatment
2.3.1	JDRDC and DFS data on Relief of Custody Petitions: # ROC petitions filed/# children entering foster care from ROC petitions
2.3.2	Number of children entering foster care from CHINS petitions
2.3.3	Number of children entering foster care from delinquency petitions

2.4	Fiscal Accountability Outcome Goal 1: Fairfax-Falls Church CSA leverages state and local fiscal resources to families efficiently	serve youth and
2.4.1	Per capita cost per youth receiving CSA services	
2.4.2	Per capita cost per youth receiving residential/ group home services	
2.4.3	Annual per-child unit cost of residential/group home services	
2.5	Fiscal Accountability Outcome Goal 2: Fairfax-Falls Church is making maximum use of Medicaid as an alterna funding	tive to CSA or locality
2.5.1	Percentage of placements in Medicaid-enrolled facilities	
2.5.2	Percentage of Medicaid placements receiving Medicaid reimbursement	
2.6	Parent Satisfaction Survey	
2.6.1	Percent of parent survey respondents who are satisfied with CSA services	
	Is Anyone Better Off?	<u>Headline Measure</u> <u>(HM)</u>
3.1	Restrictiveness of Living Outcome Goal 1: Increase in percentage of children participating in CSA who live in family settings.	
3.1.1	Percentage of CSA youth who received only community-based services	
3.2	Permanency Outcome Goal: Prevent entry into foster care for reasons other than maltreatment.	
3.2.1	Percentage of children receiving CSA-funded services through the foster care prevention mandate who are successfully prevented from entering foster care	
3.2.2	Percentage of children with families participating in CSA-funded family partnership meetings through the foster care prevention mandate who are successfully prevented from entering foster care after the family partnership meeting	
3.3	Functional Outcome Goals: Child and Adolescent Needs and Strengths (CANS) outcomes improve for	
	children served by the CSA system of care from initial assessment to second assessment.	

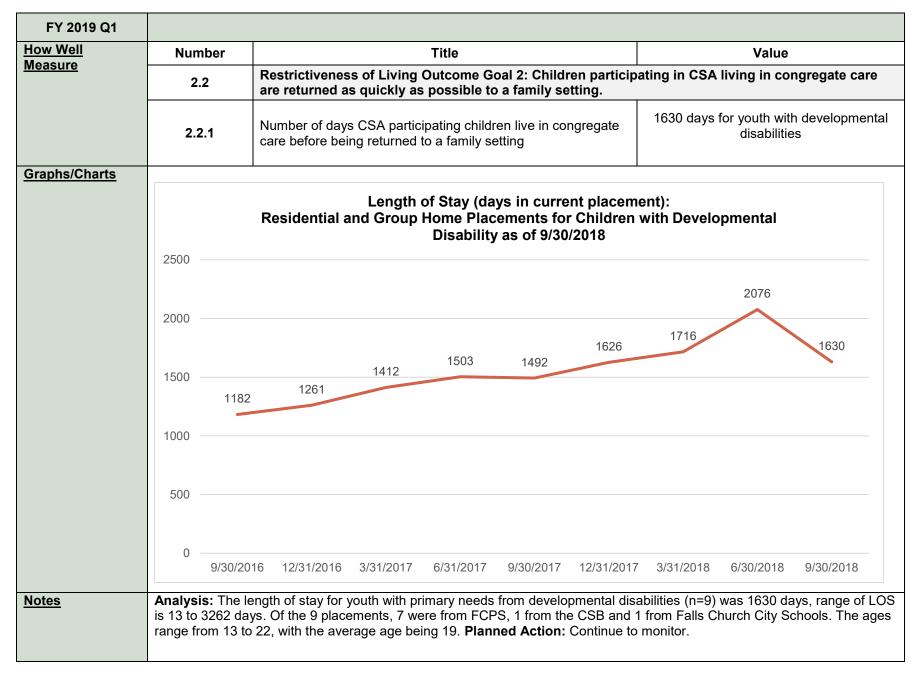
3.4	Functional Outcome Goal 1: Children participating in CSA-funded services will experience a decline in behaviors that place themselves or others at risk.	
3.4.1	Percent of positive change in Child Risk Behavior by actionable rating	
3.5	Functional Outcome Goal 2: Children participating in CSA-funded services will experience a decline in behavioral or emotional symptoms that cause severe/dangerous problems.	
3.5.1	Percent of positive change in Behavioral/Emotional Needs by actionable rating	
3.6	Functional Outcome Goal 3: Children participating in CSA-funded services will experience an increase in identified strengths that are useful in addressing their needs and developing resiliency.	
3.6.1	Percent of positive change in Strength Domain by actionable strength	
3.7	Functional Outcome Goal 4: Needs and issues of parents/caregivers of children participating in CSA-funded services that negatively impact their care-giving capacity will be reduced.	
3.7.1	Percent of positive change in Planned Permanency Caregiver functioning by actionable need	

FY 2019 Q1										
How Well Measure	Number				Titl	е				Value
	2.1	Restrictiveness of Living Outcome Goal 1: Increase in percentage of children participating in CSA who live in non-residential settings.								
	2.1.1	Number	of youth plac	ed in a long	-term congr	egate care s	setting			41
<u>Graphs/Charts</u>		Point i	Point in Time Counts for Residential and Group Home Placements (90+ days): 41 as of 9/30/2018							
	60 50	55	56	57	A8	50	53			
	40				40			47	43	41
	30 -	29	28	24						
	20 -	14	16	17	13	19 17	18 17 17	17 16	17 14	16
	10 -	12	12	14 2	11	13		13	11	13 10
		0 9/30/2016	0 12/31/2016	3/31/2017	6/30/2017	1 9/30/2017	1 12/31/2017	1 3/31/2018	1 6/30/2018	2 9/30/2018
	F	oster Care/A	doption 🗕	IEP Specia	I Education	CHINS	Non-N	landated 🗕	MHI local	Total
<u>Notes</u>	Analysis:	The total p	oint in time c	count decrea	ased by 3 fro	om the prior	quarter. Pla i	nned Actior	1: Continue to	o monitor.

FY 2019 Q1							
How Well	Number	Title	Value				
<u>Measure</u>	2.2	Restrictiveness of Living Outcome Goal 2: Children participating in CSA living in congregate care are returned as quickly as possible to a family setting.					
	2.2.1	Number of days CSA participating children live in congregate care before being returned to a family setting	214 days for youth with emotional /behavioral disabilities				
Graphs/Charts		Average LOS for Exiting Placements for Children Problems - # of Days	with Emotional/Behavioral				
	500						
	450	432					
	342 350						
	300						
	250	201 204 208	204 214 185				
	200 <u> </u>	1	52				
	100						
	50						
	0 9/1/207		/2017 3/1/2018 6/1/2018 9/1/2018				
<u>Notes</u>	6-9 months [18 (n=13) was 214 age being 15 ye	practice indicates that youth with emotional/behavioral problems 0-270 days]. The length of stay for youth with primarily emotional, days at the end of the 1st quarter (LOS ranged from 13 to 933 d ears. Of the 13 exits, 8 were from Foster Care and Adoption, 3 fro ad Action: Continue to monitor.	/behavioral problems exiting placement ays). Ages ranged from 9 to 19, with average				

Results-Based Accountability Performance Plan

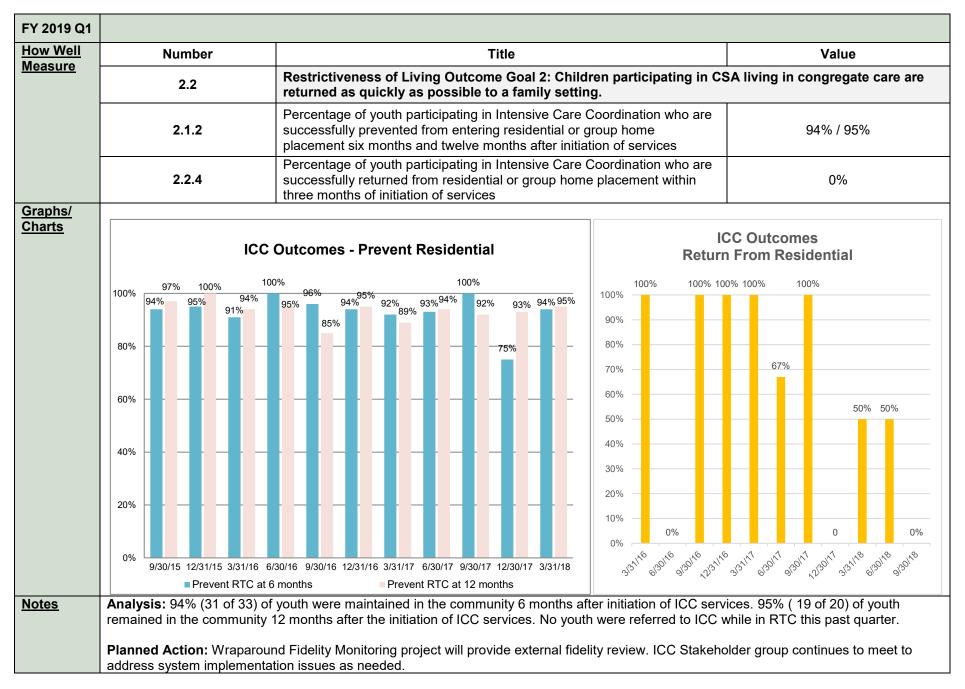
Children's Services Act (CSA) System of Care



FY 2019 Q1								
How Well	Number	Title Value						
<u>Measure</u>	2.2	Restrictiveness of Living Outcome Goal 2: Children participating in CSA living in congregate care are returned as quickly as possible to a family setting.						
	2.2.2	Number of youth entering long-term congregate care settings 14						
	2.2.3	Number of youth exiting long-term congregate care settings 13						
<u>Graphs/Charts</u>	Analysis: successfu	Entry and Exit into Long-term RTC and GH						

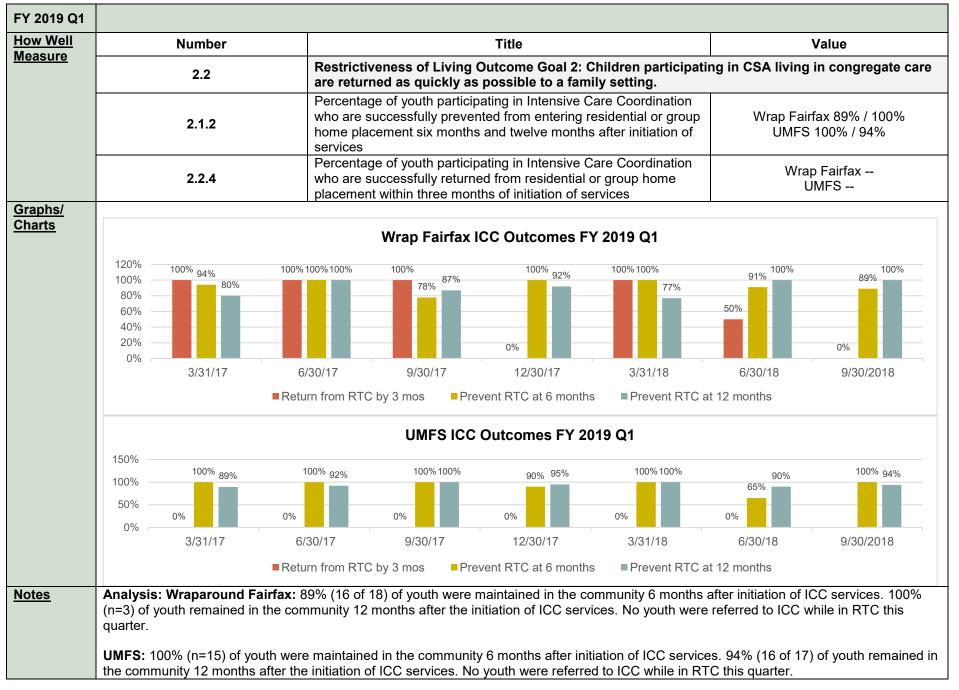
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Children's Services Act (CSA) System of Care



How Well	Number	Title	Value		
<u>Measure</u>	2.3	Permanency Outcome Goal: Prevent entry into foster care for reasons other than maltreatment			
	2.3.1	JDRDC and DFS data on Relief of Custody Petitions: # ROC petitions filed/# children entering foster care from ROC petitions	7 complaints/ 5 filed / 0 entries		
	2.3.2	Number of children entering foster care from CHINS petitions	1		
	2.3.3	Number of children entering foster care from delinguency petitions	0		
Graphs/ Charts					
	10 5 5 3 0 Jan - Mar '16 Apr - June '16 5 10 10 10 10 10 10 10 10 10 10 10 10 10	Children Entering Foster Care from R	DC petitions		

How Well	Number	Title	Value			
<u>Measure</u>	2.5	Fiscal Accountability Outcome Goal: Fairfax-Falls Church CSA leverages state and local fiscal resources to serve youth and families efficiently				
	2.5.1	Percentage of placements in Medicaid-enrolled facilities	54%			
	2.5.2	Percentage of Medicaid placements receiving Medicaid reimbursement	82%			
<u>Graphs/Charts</u>	100%	Monthly Utilization and Reimbursement for Medicaid-enrolled RTC/GH Placements				
	90% 87%		82%			
	70%	84% 83% 73% 79% 7 79% 80% 73% 79% 7 68% 70% 69%	73%			
	60% - 649	% 64% 55% ^{57%} 49%	54%			
	50%					
	40%					
	30% 9/30/1	15 12/31/15 3/31/16 6/30/16 9/30/16 12/31/16 3/31/17 6/30/17 9/30/2017 12/31/17 3/31/18 6/3 ————Medicaid Reimbursement ———Medicaid Placements	0/2018 9/30/2018			
<u>Notes</u>	reimbursement of the receiving funding are (n=14) because the c	Medicaid Reimbursement Medicaid Placements f 41) placements are in Medicaid-enrolled programs, of which 82% (18 of 22) are receiving e residential costs - 1 was denied and 3 are pending. Reasons that youth in Medicaid-enrolle E Legal status (n=3), Over 21 (n=1), Ineligible Level B due to income (n=1), Placed with non child is not able to be served in Va, court-ordered, parent initiated placement, or are placed is bursable. Planned Action: Continue to monitor.	ed programs are no n-Medicaid providers			