

MEMO TO THE CPMT

April 27, 2018

Information Item I- 1: Results of CSA Audit Self-Assessment Process

ISSUE: That our local CSA program will submit our Audit Self-Assessment by March 30th which will be followed by a validation visit from state auditors

BACKGROUND: The CPMT's Governance Group met regularly to review the ratings and reports from various workgroups who have completed sections of the assessment. Quality Improvement Plans for areas identified in the self-assessment were developed and submitted along with the self-assessment workbook.

Some of the issues identified are:

1. Vacancy in the parent representative position for one FAPT
2. Alignment of the parental contribution collections process with the state policy
3. Increasing staff awareness to mechanisms for reporting suspected fraud through newsletter articles, training, and notices on Service Summaries
4. Updating the Quality Assurance Plan for additional monitoring of eligibility and compliance
5. Maximizing Title IVE funding for eligible services

After submission of the Self-Assessment, the state will schedule an on-site validation visit.

ATTACHMENT:

Letter to OCS,
Quality Improvement Plans

STAFF:

Janet Bessmer, CSA Manager



County of Fairfax, Virginia

To protect and enrich the quality of life for the people, neighborhoods and diverse communities of Fairfax County

March 29, 2018

Scott Reiner,
Executive Director
The Office of Children's Services
1604 Santa Rosa Road, Suite 137
Richmond, VA 23229

Dear Mr. Reiner:

The Fairfax-Falls Church Community Policy and Management Team has completed our triennial self-assessment process of our local CSA program. Although we have generally found our program to be in compliance with the requirements for CSA, we have identified one area related to Title IV-E utilization for a foster care maintenance service (e.g., child care) that has required corrective action on our part.

Our local Department of Family Services administers the Title IV-E process and is considered by state IV-E reviewers to be a model program regarding documentation with a very low error rate. In order to support foster parents by providing immediate access to high quality child care, foster care workers regularly utilized the process developed for provision of subsidized child care through our local Office for Children. Our Title IV-E program was advised by state reviewers that our process for payment of child care providers through the Office for Children made IV-E reimbursement unavailable. Local IV-E staff were successful in obtaining clarification from the state reviewers that changes to our internal payment process effective July 1, 2017 will now allow us to seek Title IV-E reimbursement for eligible children for these child care services.

In addition to corrective action for these child care services, we are also working with state reviewers to allow IV-E reimbursement for transportation services that are required for foster care maintenance. Transportation of children to visitation with parents and to the base school under the best interest determination process are IV-E reimbursable; however, for those children whose foster parents are unable to meet those transportation needs, our county does not have appropriate, available transportation providers that can be funded by Title IV-E according to state IV-E reviewers. Transportation services continue to be provided using CSA funding despite our extensive efforts to access IV-E reimbursement. The County will continue to explore

Fairfax County is committed to nondiscrimination on the basis of disability in all county programs, services and activities. Reasonable accommodations will be provided upon request. For information, call the CSA Program at 703-324-7938 or TTY 711.

Fairfax-Falls Church Children's Services Act for At Risk Children, Youth and Families
12011 Government Center Parkway, 4th floor
Fairfax, Virginia 22035
Ph: 703-324-7938, FAX: 703-653-1369; TTY 711
www.fairfaxcounty.gov

alternatives that will allow use of IV-E funds for transportation that is safe and appropriate for eligible foster care children.

Our self-assessment workbook is attached with all of our ratings and Quality Improvement Plans. Our CSA program staff will anticipate scheduling the on-site follow up validation visit from OCS auditors in the near future. Thank you.

Sincerely,



Tisha Deeghan, CPMT Chair
Deputy County Executive for Human Services

Cc: Stephanie Bacote, OCS Program Audit Manager
Deborah Laird, County Attorney, Fairfax
Nannette Bowler, Director, Department of Family Services

Fairfax County is committed to nondiscrimination on the basis of disability in all county programs, services and activities. Reasonable accommodations will be provided upon request. For information, call the CSA Program at 703-324-7938 or TTY 711.

Fairfax-Falls Church Children's Services Act for At Risk Children, Youth and Families

12011 Government Center Parkway, 4th floor

Fairfax, Virginia 22035

Ph: 703-324-7938, FAX: 703-653-1369; TTY 711

www.fairfaxcounty.gov

accordance with the target dates established).					
5. Provide periodic reports to the CPMT and the OCS regarding quality improvement status.	Reports provided to CPMT and documented in minutes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Completed By: Janet Bessmer	Date: 2/25/2018
------------------------------------	------------------------

SECTION VI: QUALITY IMPROVEMENT PLAN QUALITY IMPROVEMENT PLAN WORKSHEET SUPPLEMENT

Instructions: A separate worksheet should be completed for each deficiency identified in the assessment process.

QUALITY IMPROVEMENT PLAN DETAILS						
Condition No.	Quality Improvement Task	Responsible Party	Target Date	Self-Reporting Status		
				In Progress	Completed	Date Completed
1	Increase staff awareness of fraud reporting procedures	SOC Training Committee and CSA Management Team members	6/30/2018	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Click here to enter a date.
<input checked="" type="checkbox"/> Please check if attachments are included.						

If quality improvement task is not complete, please explain:
 Fraud reporting procedures have been added to the Service Summaries that case managers review. Additional training will be included in mandatory CSA sessions and newsletter articles will be developed so that staff have regularly reminders of how concerns are reported and what steps are taken to follow up on those concerns.

QUALITY IMPROVEMENT PLAN APPROVAL		
Signature: <i>Janet Bessmer</i>	Title: CSA Manager	Date: 2/25/2018
Print Name: Janet Bessmer		

SECTION VII: CERTIFICATION

- Certification Worksheet
- Statement of Acknowledgement and Certification

Quality Improvement Plan Details						
Condition No.	Quality Improvement Task	Responsible Party	Target Date	Self-Reporting Status		
				In-Progress	Completed	Date Completed
2 (page 12-13, 32 and 61 of audit workbook)	Implement changes to payment process for FC maintenance child care payments to ensure maximum utilization of IV-E funds.	DFS Foster Care, IV-E supervisor, Office for Children CCAR program	Sept 30, 2018	X		

Please check if attachments included.

If quality improvement task is not complete, please explain:

State IVE reviewers have approved our current process for reimbursing child care providers through our local Office for Children to allow IVE reimbursement for FY18. In addition, results of IV-E state reviews will be provided to the CPMT on a regular basis as part of the budget reporting. Changes to the organizational affiliation and management structure of budget and fiscal staff will support oversight of utilization of funding streams.

--	--	--	--	--	--	--

Quality Improvement Plan Details

Condition No.	Quality Improvement Task	Responsible Party	Target Date	Self-Reporting Status		
				In-Progress	Completed	Date Completed
3 (page 35)	Report to DBHDS for youth who are not admitted to in-state facility	UR Manager	April 30, 2018	X		

Please check if attachments included.

If quality improvement task is not complete, please explain:

Review duties of UR manager when reviewing requests for child-specific contracts and ensure that the form is submitted in the few instances when a youth is not accepted to an in-state program. The UR manager will review whether any placements in FY 18 should have been reported to DBHDS and complete the form. This process will be added to their responsibilities.

Quality Improvement Plan Details						
Condition No.	Quality Improvement Task	Responsible Party	Target Date	Self-Reporting Status		
				In-Progress	Completed	Date Completed
4 (pages 41, 44 of workbook)	Enhance CANS compliance procedures for maintenance only cases, FPM only cases, and case closing submissions	CSA Manager	April 30, 2018	X		
Please check if attachments included.						
If quality improvement task is not complete, please explain: Several actions are necessary to ensure full compliance with existing CANS requirements. 1) Revise procedures so that Family Partnership Meeting requests must be accompanied by a full CANS; 2); Implement revised QA plan with additional managerial oversight for CANS; 3) Develop additional CANS compliance monitoring for fc maintenance only cases and at case closure.						
Quality Improvement Plan Details						
Condition No.	Quality Improvement Task	Responsible Party	Target Date	Self-Reporting Status		
				In-Progress	Completed	Date Completed
5	Recruit Parent Representative for Fairfax FAPT. CPMT has four parent representatives and one of the FAPTs has had a long-term representative. Attached is our description of efforts to fill the one vacant parent rep position.	CSA Manager, CPMT Nominating Committee	April 27, 2018	X		
X	Please check if attachments included.					
If quality improvement task is not complete, please explain:						

Two candidates have been interviewed and are nominated for CPMT approval at their April meeting to fill the two vacant positions.

Quality Improvement Plan Details

Condition No.	Quality Improvement Task	Responsible Party	Target Date	Self-Reporting Status		
				In-Progress	Completed	Date Completed
6 (page 47)	ICC Supervision documentation – Although supervision did occur weekly, the proper documentation was not maintained as per the contract.	ICC Supervisor, CSB Manager	April 30, 2018	X		

Please check if attachments included.

If quality improvement task is not complete, please explain:

The CSB is in the process of hiring a new ICC Supervisor. Requirements for documentation of supervision will be reviewed and monitored for compliance. These requirements are specified in our contract for ICC services and will be included in contract monitoring activities.

Quality Improvement Plan Details

Condition No.	Quality Improvement Task	Responsible Party	Target Date	Self-Reporting Status		
				In-Progress	Completed	Date Completed
7 (page 52)	Use of Record Destruction From RM-3	CSA Manager oversight of Admin Asst.	March 15, 2018		X	March 1, 2018

Please check if attachments included.

If quality improvement task is not complete, please explain:

Closed records have been destroyed as per the approved Library of Virginia schedule. However, the form was not being completed. The form will be generated to cover those years that were not documented properly. The form will then be submitted to the Library of Virginia as per policy.

Quality Improvement Plan Details

Condition No.	Quality Improvement Task	Responsible Party	Target Date	Self-Reporting Status		
				In-Progress	Completed	Date Completed
8 (Page 65 of workbook)	Align collections of Parental Contributions with state policy	CSA Manager; DAHS Finance Staff	April 15, 2018	X		
Please check if attachments included.						
<p>If quality improvement task is not complete, please explain: CPMT has approved changes to our policy manual to reflect the referral of delinquent accounts to the State Attorney General's office. Our Contribution Agreement needs to include language making the state a party to the agreement.</p>						

Memo to the CPMT
April 27, 2018

INFORMATION ITEM I- 2: February/March Residential Entry and FAPT Report

Issue:

Local CSA policy requires that the FAPT shall report the placement of children across jurisdictional lines and the rationale for the placement decisions to the CSA Program Manager who shall inform the CPMT at its next scheduled meeting.

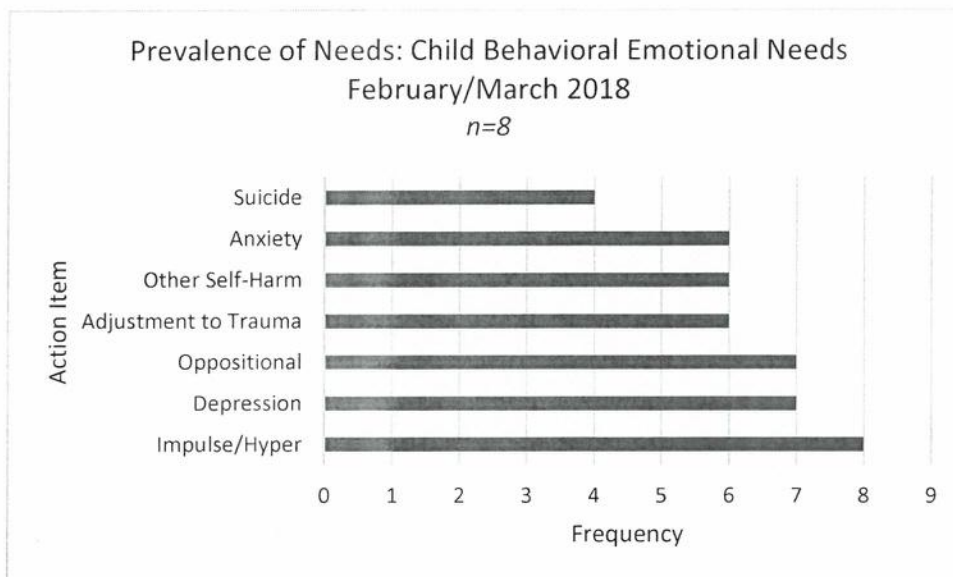
Residential Entry Report: Eight youth entered long-term residential settings in February and March.

	Feb	Mar
Male	1	2
Female	5	0

AGE	Feb	Mar
10	1	1
14	3	
15		1
17	2	

Lead Agency	Feb	Mar
DFS Foster Care	3	
Falls Church City		
FCPS MAS		
JDRDC	1	
CSB	2	2

	Initial	Re-admit	Lateral	Step Up	Step Down
DFS Foster Care		2		1	
FCPS MAS					
JDRDC	1				
CSB	2		1	1	
Falls Church City					

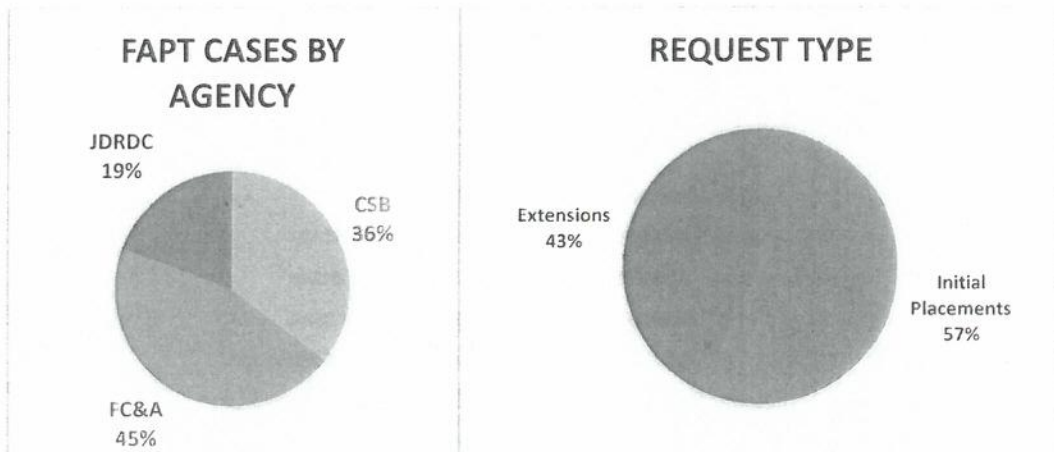


UR Summary:

FAPT Report:

In February and March of 2018, **31** youth/family meetings were held with the two standing FAPT teams. Of those **31** meetings:

- **14** referrals were from FC&A, **11** referrals were from CSB and **6** were from JDRDC
 - **16** were requests for *initial placements*, **12** of which had plans developed for a Residential Treatment Center, **2** for JDRDC programs (Beta and BPH), **1** for a 90-day diagnostic program and **1** with community based services only.
 - **15** were requests for *continuation of existing placements*, all of which had plans developed for a short-term (varying from 2 weeks to 3 months) extension of the current placement; community-based services including ICC, home-based and outpatient services were also included to assist with discharge in these cases.
- Of the **16** initial placement requests, **10** were actively receiving community based services in some form at the time of the FAPT meeting
- **6** youth were in placement prior to coming to FAPT; 5 had been placed by parents and 1 by FC&A



Of Note:

- FAPT members are noticing an increase in the number of participants who do not attend in person. While phone participation is possible, it is not uncommon to now have meetings where only one attendee is in person, and multiple others are on the phone. This lessens the effectiveness of the meeting; phone connections are not as clear, there are frequent delays in the message being received, repeating information is needed multiple times, and it can take significant time to get all participants conferenced in prior to beginning the meeting. If a youth is in placement, it is understood that he/she and the facility may need to be on the phone given distance. Likewise, if a parent is at work and is unable to leave for enough time to include travel to the meeting location this is understandable. The FAPTs would like for it to be the expectation that all other team members participate in person, with the exception of emergencies that may arise.

IACCT (Independent Assessment, Certification and Coordination Team) Report

- In January and February, **29** IACCT Inquiry Forms were received:
 - **25** have been submitted to Magellan
 - Of the **4** not submitted:
 - 1 youth does not have active Medicaid yet
 - 1 youth left placement prior
 - 1 family withdrew the request for a FAPT meeting
 - 1 youth did not have an RTC placement supported by FAPT
 - Of the **25** submitted:
 - 9 have been completed and certified by Magellan
 - 6 have been labeled “in process” by Magellan
 - 5 requests were withdrawn due to RTC placement not supported by FAPT
 - 3 have status unable to be verified by Magellan
 - 1 request was “discharged from process” due to lack of family engagement
 - 1 request was “discharged from process” by Magellan due to youth being on runaway status

Of Note:

- Communication with Magellan regarding status of referrals is still challenging though some infrequent updates are being received

STAFF:

Kim Jensen, Utilization Review Manager

Sarah Young, FAPT Coordinator

Results-Based Accountability Performance Plan FY 2018, Quarter 3 Report to CPMT

SUMMARY	
<u>Name of Work</u>	Children’s Services Act (CSA) for At-Risk Youth – Systems of Care
<u>Agency</u>	Human Services within the Department of Family Services (DFS)
<u>Contact (Name, Phone, Email)</u>	Patricia E. Arriaza, Management Analyst III, 703-324-8241, patricia.arriaza@fairfaxcounty.gov
<u>Human Services Results</u>	<input type="checkbox"/> Connected Individuals <input type="checkbox"/> Economic Self-Sufficiency <input checked="" type="checkbox"/> Healthy People <input type="checkbox"/> Positive Living for Older Adults and Individuals with Disabilities <input type="checkbox"/> Sustainable Housing <input checked="" type="checkbox"/> Successful Children and Youth
<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.
<u>Customers</u>	At-risk youth between the ages of 0 to 21 and their families as defined by VA § 2.2-5212
<u>Total Customers</u>	Youth served: 1, 428 (FY17) ; 1,494 (FY16); 1,343 (FY15); 1,200 (FY14); 1,199 (FY13); 1,251 (FY12)
<u>Total Staff Year Equivalents (SYE)</u>	10 in FY 2017; 10 in FY 2016; 10 in FY 2015; 10 in FY 2014; 10 in FY 2013; 9 in FY 2012
<u>Total Budget</u>	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 FY 2013: \$39.8 million for CSA pooled funding; \$844,872 for program administration

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

Summary of Annual and Quarterly¹ Performance Measures	
<u>How Much Was Done?</u>	
1.1	Total Youth Served Annually
1.2.1	Annual CSA Pool-fund Expenditures
1.2.2	Annual CSA Expenditures by Service Type
<u>How Well Was It Done?</u>	
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

¹ Quarterly performance measures highlighted in green.
FY 2018 Q3 CSA Systems of Care Report

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

2.4	Fiscal Accountability Outcome Goal 1: Fairfax-Falls Church CSA leverages state and local fiscal resources to serve youth and families efficiently	
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 alternative to CSA or locality funding	
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	
<u>Is Anyone Better Off?</u>		<u>Headline Measure (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.	
3.3.1	Percent of positive change in CANS outcomes by domain level of need	

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

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	

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

FY 2018 Q3																																																																									
<u>How Well Measure</u>	Number	Title	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 placed in a long-term congregate care setting	47																																																																						
<u>Graphs/Charts</u>																																																																									
<p>Point in Time Counts for Residential and Group Home Placements (90+ days): 47 as of 3/31/2018</p> <table border="1" style="margin: 10px auto; border-collapse: collapse; text-align: center;"> <caption>Point in Time Counts for Residential and Group Home Placements (90+ days)</caption> <thead> <tr> <th>Category</th> <th>3/31/2016</th> <th>6/30/2016</th> <th>9/30/2016</th> <th>12/31/2016</th> <th>3/31/2017</th> <th>6/30/2017</th> <th>9/30/2017</th> <th>12/31/2017</th> <th>3/31/2018</th> </tr> </thead> <tbody> <tr> <td>Foster Care/Adoption</td> <td>35</td> <td>31</td> <td>29</td> <td>28</td> <td>24</td> <td>22</td> <td>19</td> <td>18</td> <td>17</td> </tr> <tr> <td>IEP Special Education</td> <td>11</td> <td>13</td> <td>14</td> <td>16</td> <td>17</td> <td>13</td> <td>17</td> <td>17</td> <td>16</td> </tr> <tr> <td>CHINS</td> <td>13</td> <td>11</td> <td>12</td> <td>12</td> <td>14</td> <td>11</td> <td>13</td> <td>17</td> <td>13</td> </tr> <tr> <td>Non-Mandated</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>2</td> <td>2</td> <td>1</td> <td>0</td> <td>1</td> </tr> <tr> <td>MHI local</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>59</td> <td>55</td> <td>55</td> <td>56</td> <td>57</td> <td>48</td> <td>50</td> <td>53</td> <td>47</td> </tr> </tbody> </table>				Category	3/31/2016	6/30/2016	9/30/2016	12/31/2016	3/31/2017	6/30/2017	9/30/2017	12/31/2017	3/31/2018	Foster Care/Adoption	35	31	29	28	24	22	19	18	17	IEP Special Education	11	13	14	16	17	13	17	17	16	CHINS	13	11	12	12	14	11	13	17	13	Non-Mandated	0	0	0	0	2	2	1	0	1	MHI local	0	0	0	0	0	0	0	0	0	Total	59	55	55	56	57	48	50	53	47
Category	3/31/2016	6/30/2016	9/30/2016	12/31/2016	3/31/2017	6/30/2017	9/30/2017	12/31/2017	3/31/2018																																																																
Foster Care/Adoption	35	31	29	28	24	22	19	18	17																																																																
IEP Special Education	11	13	14	16	17	13	17	17	16																																																																
CHINS	13	11	12	12	14	11	13	17	13																																																																
Non-Mandated	0	0	0	0	2	2	1	0	1																																																																
MHI local	0	0	0	0	0	0	0	0	0																																																																
Total	59	55	55	56	57	48	50	53	47																																																																
<u>Notes</u>	<p>Analysis: The total point in time count increased by 6 from the prior quarter. Planned Action: Continue to monitor.</p>																																																																								

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

FY 2018 Q3																																	
<u>How Well Measure</u>	Number	Title	Value																														
	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	1716 days for youth with developmental disabilities 159 days for youth with emotional /behavioral disabilities																														
<u>Graphs/Charts</u>	<div style="text-align: center;"> <p>Length of Stay (days in current placement): Residential and Group Home Placements by Disability Type as of 3/31/2018</p> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <caption>Data for Length of Stay Graph</caption> <thead> <tr> <th>Date</th> <th>Children with Developmental Disability (Days)</th> <th>Children with Emotional/Behavioral Problems (Days)</th> </tr> </thead> <tbody> <tr> <td>3/31/2016</td> <td>1096</td> <td>315</td> </tr> <tr> <td>6/30/2016</td> <td>1156</td> <td>312</td> </tr> <tr> <td>9/30/2016</td> <td>1182</td> <td>236</td> </tr> <tr> <td>12/31/2016</td> <td>1261</td> <td>131</td> </tr> <tr> <td>3/31/2017</td> <td>1412</td> <td>138</td> </tr> <tr> <td>6/31/2017</td> <td>1503</td> <td>147</td> </tr> <tr> <td>9/30/2017</td> <td>1492</td> <td>118</td> </tr> <tr> <td>12/31/2017</td> <td>1626</td> <td>138</td> </tr> <tr> <td>3/31/2018</td> <td>1716</td> <td>159</td> </tr> </tbody> </table> </div>			Date	Children with Developmental Disability (Days)	Children with Emotional/Behavioral Problems (Days)	3/31/2016	1096	315	6/30/2016	1156	312	9/30/2016	1182	236	12/31/2016	1261	131	3/31/2017	1412	138	6/31/2017	1503	147	9/30/2017	1492	118	12/31/2017	1626	138	3/31/2018	1716	159
Date	Children with Developmental Disability (Days)	Children with Emotional/Behavioral Problems (Days)																															
3/31/2016	1096	315																															
6/30/2016	1156	312																															
9/30/2016	1182	236																															
12/31/2016	1261	131																															
3/31/2017	1412	138																															
6/31/2017	1503	147																															
9/30/2017	1492	118																															
12/31/2017	1626	138																															
3/31/2018	1716	159																															
<u>Notes</u>	<p>Analysis: Best practice indicates that youth with emotional/behavioral problems should be returned to a family setting within 6-9 months [180-270 days]. The length of stay in current placement for youth with primarily emotional/behavioral problems (n=32) was 159 days at the end of the 4th quarter. The length of stay for youth with primary needs from developmental disabilities (n=15) was 1716 days. Planned Action: Continue to monitor.</p>																																

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

FY 2018 Q3																																	
<u>How Well Measure</u>	Number	Title	Value																														
	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	N/A days for youth with developmental disabilities 204 days for youth with emotional /behavioral disabilities																														
<u>Graphs/Charts</u>	<div style="text-align: center;"> <h3>Average LOS for the Exiting Placements - # of Days</h3> <table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Data for Average LOS for the Exiting Placements - # of Days</caption> <thead> <tr> <th>Quarter</th> <th>Children with Developmental Disability</th> <th>Children with Emotional/Behavioral Problems</th> </tr> </thead> <tbody> <tr> <td>3/31/2016</td> <td>1325</td> <td>234</td> </tr> <tr> <td>6/30/2016</td> <td>1091</td> <td>246</td> </tr> <tr> <td>9/30/2016</td> <td>1037</td> <td>342</td> </tr> <tr> <td>12/31/2016</td> <td>381</td> <td>432</td> </tr> <tr> <td>3/31/2017</td> <td>536</td> <td>201</td> </tr> <tr> <td>6/30/2017</td> <td>1494</td> <td>204</td> </tr> <tr> <td>9/30/2017</td> <td>3252</td> <td>208</td> </tr> <tr> <td>12/31/2017</td> <td>855</td> <td>152</td> </tr> <tr> <td>3/31/2018</td> <td>0</td> <td>204</td> </tr> </tbody> </table> </div>			Quarter	Children with Developmental Disability	Children with Emotional/Behavioral Problems	3/31/2016	1325	234	6/30/2016	1091	246	9/30/2016	1037	342	12/31/2016	381	432	3/31/2017	536	201	6/30/2017	1494	204	9/30/2017	3252	208	12/31/2017	855	152	3/31/2018	0	204
Quarter	Children with Developmental Disability	Children with Emotional/Behavioral Problems																															
3/31/2016	1325	234																															
6/30/2016	1091	246																															
9/30/2016	1037	342																															
12/31/2016	381	432																															
3/31/2017	536	201																															
6/30/2017	1494	204																															
9/30/2017	3252	208																															
12/31/2017	855	152																															
3/31/2018	0	204																															
<u>Notes</u>	<p>Analysis: Best practice indicates that youth with emotional/behavioral problems should be returned to a family setting within 6-9 months [180-270 days]. The length of stay for youth with primarily emotional/behavioral problems exiting placement (n=16) was 204 days at the end of the 2nd quarter. Planned Action: Continue to monitor.</p>																																

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

FY 2018 Q3																																																			
<u>How Well Measure</u>	Number	Title	Value																																																
	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	10																																																
	2.2.3	Number of youth exiting long-term congregate care settings	16																																																
<u>Graphs/Charts</u>	<div style="text-align: center;"> <h3>Entry and Exit into Long-term RTC and GH 47 placements as of 3/31/2018</h3> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <caption>Monthly Entries and Exits into Long-term RTC and GH</caption> <thead> <tr> <th>Month</th> <th>Entries RTC/GH</th> <th>Exits RTC/GH</th> </tr> </thead> <tbody> <tr><td>Jan '17</td><td>2</td><td>3</td></tr> <tr><td>Feb '17</td><td>6</td><td>6</td></tr> <tr><td>Mar '17</td><td>8</td><td>5</td></tr> <tr><td>Apr '17</td><td>2</td><td>11</td></tr> <tr><td>May '17</td><td>4</td><td>8</td></tr> <tr><td>June '17</td><td>6</td><td>5</td></tr> <tr><td>July '17</td><td>7</td><td>4</td></tr> <tr><td>Aug '17</td><td>3</td><td>12</td></tr> <tr><td>Sept '17</td><td>11</td><td>7</td></tr> <tr><td>Oct '17</td><td>5</td><td>7</td></tr> <tr><td>Nov '17</td><td>5</td><td>4</td></tr> <tr><td>Dec '17</td><td>6</td><td>2</td></tr> <tr><td>Jan '18</td><td>2</td><td>4</td></tr> <tr><td>Feb '18</td><td>6</td><td>7</td></tr> <tr><td>March '18</td><td>2</td><td>5</td></tr> </tbody> </table> </div>			Month	Entries RTC/GH	Exits RTC/GH	Jan '17	2	3	Feb '17	6	6	Mar '17	8	5	Apr '17	2	11	May '17	4	8	June '17	6	5	July '17	7	4	Aug '17	3	12	Sept '17	11	7	Oct '17	5	7	Nov '17	5	4	Dec '17	6	2	Jan '18	2	4	Feb '18	6	7	March '18	2	5
Month	Entries RTC/GH	Exits RTC/GH																																																	
Jan '17	2	3																																																	
Feb '17	6	6																																																	
Mar '17	8	5																																																	
Apr '17	2	11																																																	
May '17	4	8																																																	
June '17	6	5																																																	
July '17	7	4																																																	
Aug '17	3	12																																																	
Sept '17	11	7																																																	
Oct '17	5	7																																																	
Nov '17	5	4																																																	
Dec '17	6	2																																																	
Jan '18	2	4																																																	
Feb '18	6	7																																																	
March '18	2	5																																																	
<u>Notes</u>	<p>Analysis: There were 16 exits and 10 entries this quarter. Planned Action: Utilize ICC as a resource for youth to support successful return to a community/family-based setting. Utilize Leland House and crisis stabilization services to meet youth with intensive needs in the community, even during a crisis.</p>																																																		

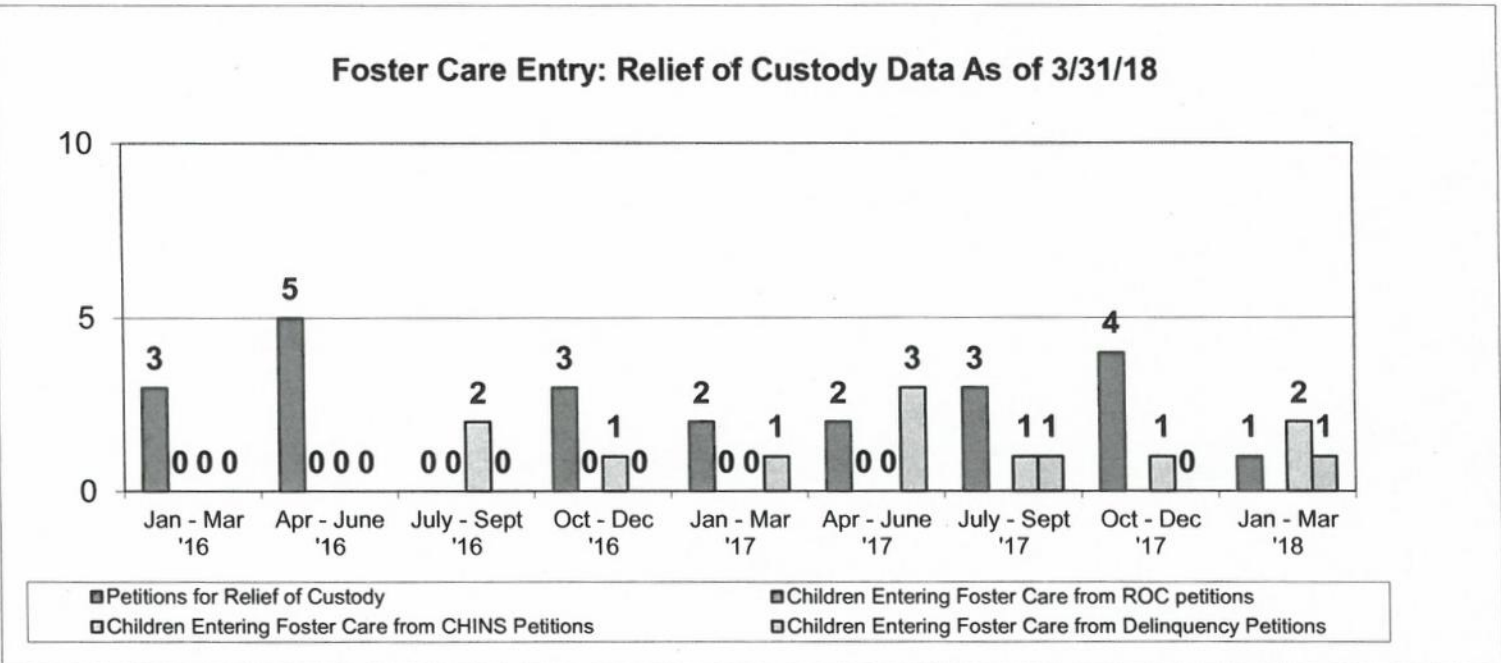
Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

FY 2018 Q3																																																					
How Well Measure	Number	Title	Value																																																		
	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.																																																			
	2.1.2	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	100% / 92%																																																		
	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	50%																																																		
Graphs/Charts	<p>ICC Outcomes - Prevent Residential</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Prevent RTC at 6 months</th> <th>Prevent RTC at 12 months</th> </tr> </thead> <tbody> <tr><td>9/30/15</td><td>94%</td><td>97%</td></tr> <tr><td>12/31/15</td><td>91%</td><td>100%</td></tr> <tr><td>3/31/16</td><td>94%</td><td>100%</td></tr> <tr><td>6/30/16</td><td>95%</td><td>96%</td></tr> <tr><td>9/30/16</td><td>85%</td><td>94%</td></tr> <tr><td>12/31/16</td><td>95%</td><td>92%</td></tr> <tr><td>3/31/17</td><td>93%</td><td>89%</td></tr> <tr><td>6/30/17</td><td>94%</td><td>93%</td></tr> <tr><td>9/30/17</td><td>92%</td><td>100%</td></tr> </tbody> </table> <p>ICC Outcomes - Return From Residential</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Return From Residential</th> </tr> </thead> <tbody> <tr><td>3/31/16</td><td>100%</td></tr> <tr><td>6/30/16</td><td>0%</td></tr> <tr><td>9/30/16</td><td>100%</td></tr> <tr><td>12/31/16</td><td>100%</td></tr> <tr><td>3/31/17</td><td>100%</td></tr> <tr><td>6/30/17</td><td>67%</td></tr> <tr><td>9/30/17</td><td>100%</td></tr> <tr><td>12/30/17</td><td>0%</td></tr> <tr><td>3/31/18</td><td>50%</td></tr> </tbody> </table>			Date	Prevent RTC at 6 months	Prevent RTC at 12 months	9/30/15	94%	97%	12/31/15	91%	100%	3/31/16	94%	100%	6/30/16	95%	96%	9/30/16	85%	94%	12/31/16	95%	92%	3/31/17	93%	89%	6/30/17	94%	93%	9/30/17	92%	100%	Date	Return From Residential	3/31/16	100%	6/30/16	0%	9/30/16	100%	12/31/16	100%	3/31/17	100%	6/30/17	67%	9/30/17	100%	12/30/17	0%	3/31/18	50%
	Date	Prevent RTC at 6 months	Prevent RTC at 12 months																																																		
9/30/15	94%	97%																																																			
12/31/15	91%	100%																																																			
3/31/16	94%	100%																																																			
6/30/16	95%	96%																																																			
9/30/16	85%	94%																																																			
12/31/16	95%	92%																																																			
3/31/17	93%	89%																																																			
6/30/17	94%	93%																																																			
9/30/17	92%	100%																																																			
Date	Return From Residential																																																				
3/31/16	100%																																																				
6/30/16	0%																																																				
9/30/16	100%																																																				
12/31/16	100%																																																				
3/31/17	100%																																																				
6/30/17	67%																																																				
9/30/17	100%																																																				
12/30/17	0%																																																				
3/31/18	50%																																																				
Notes	<p>Analysis: 100% (n=19) of youth were maintained in the community 6 months after initiation of ICC services. 92% (25 of 27) of youth remained in the community 12 months after the initiation of ICC services.</p> <p>Planned Action: Wraparound Fidelity Monitoring project will provide external fidelity review. ICC Stakeholder group continues to meet to address system implementation issues as needed.</p>																																																				

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

FY 2018 Q3																											
How Well Measure	Number	Title	Value																								
	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.																									
	2.1.2	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	Wrap Fairfax 100% / 77% UMFS 100% / 100%																								
	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	Wrap Fairfax 100% UMFS 0%																								
Graphs/ Charts	<p style="text-align: center;">Wrap Fairfax ICC Outcomes FY 2018 Q3</p> <table border="1"> <caption>Wrap Fairfax ICC Outcomes FY 2018 Q3</caption> <thead> <tr> <th>Time Point</th> <th>Return from RTC by 3 mos</th> <th>Prevent RTC at 6 months</th> <th>Prevent RTC at 12 months</th> </tr> </thead> <tbody> <tr> <td>3/31/17</td> <td>100%</td> <td>94%</td> <td>80%</td> </tr> <tr> <td>6/30/17</td> <td>100%</td> <td>100%</td> <td>100%</td> </tr> <tr> <td>9/30/17</td> <td>100%</td> <td>78%</td> <td>87%</td> </tr> <tr> <td>12/30/17</td> <td>0%</td> <td>100%</td> <td>92%</td> </tr> <tr> <td>3/31/18</td> <td>100%</td> <td>100%</td> <td>77%</td> </tr> </tbody> </table>			Time Point	Return from RTC by 3 mos	Prevent RTC at 6 months	Prevent RTC at 12 months	3/31/17	100%	94%	80%	6/30/17	100%	100%	100%	9/30/17	100%	78%	87%	12/30/17	0%	100%	92%	3/31/18	100%	100%	77%
	Time Point	Return from RTC by 3 mos	Prevent RTC at 6 months	Prevent RTC at 12 months																							
3/31/17	100%	94%	80%																								
6/30/17	100%	100%	100%																								
9/30/17	100%	78%	87%																								
12/30/17	0%	100%	92%																								
3/31/18	100%	100%	77%																								
<p style="text-align: center;">UMFS ICC Outcomes FY 2018 Q3</p> <table border="1"> <caption>UMFS ICC Outcomes FY 2018 Q3</caption> <thead> <tr> <th>Time Point</th> <th>Return from RTC by 3 mos</th> <th>Prevent RTC at 6 months</th> <th>Prevent RTC at 12 months</th> </tr> </thead> <tbody> <tr> <td>3/31/17</td> <td>0%</td> <td>100%</td> <td>89%</td> </tr> <tr> <td>6/30/17</td> <td>0%</td> <td>100%</td> <td>92%</td> </tr> <tr> <td>9/30/17</td> <td>0%</td> <td>100%</td> <td>100%</td> </tr> <tr> <td>12/30/17</td> <td>0%</td> <td>90%</td> <td>95%</td> </tr> <tr> <td>3/31/18</td> <td>0%</td> <td>100%</td> <td>100%</td> </tr> </tbody> </table>			Time Point	Return from RTC by 3 mos	Prevent RTC at 6 months	Prevent RTC at 12 months	3/31/17	0%	100%	89%	6/30/17	0%	100%	92%	9/30/17	0%	100%	100%	12/30/17	0%	90%	95%	3/31/18	0%	100%	100%	
Time Point	Return from RTC by 3 mos	Prevent RTC at 6 months	Prevent RTC at 12 months																								
3/31/17	0%	100%	89%																								
6/30/17	0%	100%	92%																								
9/30/17	0%	100%	100%																								
12/30/17	0%	90%	95%																								
3/31/18	0%	100%	100%																								
Notes	<p>Analysis: Wraparound Fairfax: 100% (n=1) of youth were maintained in the community 6 months after initiation of ICC services. 77% (7 of 9) of youth remained in the community 12 months after the initiation of ICC services.</p> <p>UMFS: 190% (n=18) of youth were maintained in the community 6 months after initiation of ICC services. 100% (n=18) of youth remained in the community 12 months after the initiation of ICC services.</p>																										

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

FY 2018 Q3																																																					
<u>How Well Measure</u>	Number	Title	Value																																																		
	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		1 complaints/ 1 filed / 0 entries																																																		
2.3.2	Number of children entering foster care from CHINS petitions		2																																																		
2.3.3	Number of children entering foster care from delinquency petitions		1																																																		
<u>Graphs/ Charts</u>																																																					
<div style="border: 1px solid black; padding: 10px;"> <h3 style="text-align: center; margin: 0;">Foster Care Entry: Relief of Custody Data As of 3/31/18</h3>  <table border="1" style="margin: 10px auto; border-collapse: collapse; font-size: small;"> <caption>Foster Care Entry: Relief of Custody Data As of 3/31/18</caption> <thead> <tr> <th>Period</th> <th>Petitions for Relief of Custody</th> <th>Children Entering Foster Care from ROC petitions</th> <th>Children Entering Foster Care from CHINS Petitions</th> <th>Children Entering Foster Care from Delinquency Petitions</th> </tr> </thead> <tbody> <tr><td>Jan - Mar '16</td><td>3</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>Apr - June '16</td><td>5</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>July - Sept '16</td><td>0</td><td>2</td><td>0</td><td>0</td></tr> <tr><td>Oct - Dec '16</td><td>3</td><td>0</td><td>1</td><td>0</td></tr> <tr><td>Jan - Mar '17</td><td>2</td><td>0</td><td>0</td><td>1</td></tr> <tr><td>Apr - June '17</td><td>2</td><td>0</td><td>3</td><td>0</td></tr> <tr><td>July - Sept '17</td><td>3</td><td>1</td><td>1</td><td>1</td></tr> <tr><td>Oct - Dec '17</td><td>4</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>Jan - Mar '18</td><td>1</td><td>2</td><td>1</td><td>1</td></tr> </tbody> </table> </div>				Period	Petitions for Relief of Custody	Children Entering Foster Care from ROC petitions	Children Entering Foster Care from CHINS Petitions	Children Entering Foster Care from Delinquency Petitions	Jan - Mar '16	3	0	0	0	Apr - June '16	5	0	0	0	July - Sept '16	0	2	0	0	Oct - Dec '16	3	0	1	0	Jan - Mar '17	2	0	0	1	Apr - June '17	2	0	3	0	July - Sept '17	3	1	1	1	Oct - Dec '17	4	1	0	0	Jan - Mar '18	1	2	1	1
Period	Petitions for Relief of Custody	Children Entering Foster Care from ROC petitions	Children Entering Foster Care from CHINS Petitions	Children Entering Foster Care from Delinquency Petitions																																																	
Jan - Mar '16	3	0	0	0																																																	
Apr - June '16	5	0	0	0																																																	
July - Sept '16	0	2	0	0																																																	
Oct - Dec '16	3	0	1	0																																																	
Jan - Mar '17	2	0	0	1																																																	
Apr - June '17	2	0	3	0																																																	
July - Sept '17	3	1	1	1																																																	
Oct - Dec '17	4	1	0	0																																																	
Jan - Mar '18	1	2	1	1																																																	
<u>Notes</u>																																																					
<p>Analysis: 1 Relief of Custody (ROC) complaint was received this quarter; 1 was filed. Planned Action: Continue to monitor.</p>																																																					

Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

FY 2018 Q3																																													
<u>How Well Measure</u>	Number	Title	Value																																										
	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	79%																																										
	2.5.2	Percentage of Medicaid placements receiving Medicaid reimbursement	57%																																										
<u>Graphs/Charts</u>	<div style="border: 1px solid black; padding: 10px;"> <h3 style="margin: 0;">Monthly Utilization and Reimbursement for Medicaid-enrolled RTC/GH Placements</h3> <table border="1" style="margin: 10px auto; border-collapse: collapse; font-size: small;"> <caption>Monthly Utilization and Reimbursement for Medicaid-enrolled RTC/GH Placements</caption> <thead> <tr> <th>Quarter</th> <th>Medicaid Reimbursement (%)</th> <th>Medicaid Placements (%)</th> </tr> </thead> <tbody> <tr><td>3/31/15</td><td>86%</td><td>63%</td></tr> <tr><td>6/30/15</td><td>76%</td><td>64%</td></tr> <tr><td>9/30/15</td><td>87%</td><td>64%</td></tr> <tr><td>12/31/15</td><td>91%</td><td>64%</td></tr> <tr><td>3/31/16</td><td>84%</td><td>63%</td></tr> <tr><td>6/30/16</td><td>86%</td><td>64%</td></tr> <tr><td>9/30/16</td><td>79%</td><td>68%</td></tr> <tr><td>12/31/16</td><td>83%</td><td>64%</td></tr> <tr><td>3/31/17</td><td>80%</td><td>70%</td></tr> <tr><td>6/30/17</td><td>73%</td><td>69%</td></tr> <tr><td>9/30/2017</td><td>49%</td><td>80%</td></tr> <tr><td>12/31/17</td><td>55%</td><td>82%</td></tr> <tr><td>3/31/18</td><td>57%</td><td>79%</td></tr> </tbody> </table> </div>			Quarter	Medicaid Reimbursement (%)	Medicaid Placements (%)	3/31/15	86%	63%	6/30/15	76%	64%	9/30/15	87%	64%	12/31/15	91%	64%	3/31/16	84%	63%	6/30/16	86%	64%	9/30/16	79%	68%	12/31/16	83%	64%	3/31/17	80%	70%	6/30/17	73%	69%	9/30/2017	49%	80%	12/31/17	55%	82%	3/31/18	57%	79%
Quarter	Medicaid Reimbursement (%)	Medicaid Placements (%)																																											
3/31/15	86%	63%																																											
6/30/15	76%	64%																																											
9/30/15	87%	64%																																											
12/31/15	91%	64%																																											
3/31/16	84%	63%																																											
6/30/16	86%	64%																																											
9/30/16	79%	68%																																											
12/31/16	83%	64%																																											
3/31/17	80%	70%																																											
6/30/17	73%	69%																																											
9/30/2017	49%	80%																																											
12/31/17	55%	82%																																											
3/31/18	57%	79%																																											
<u>Notes</u>	<p>Analysis: 79% (37 of 47) placements are in Medicaid-enrolled programs, of which 57% (21 of 37) are receiving Medicaid reimbursement of the residential costs. Reasons that youth in Medicaid-enrolled programs are not receiving funding are: Legal status (n=3), Over 21 (n=5), Ineligible Level B due to income (n=2), Clinical denial (n=1), Pending (n=5). Planned Action: Continue to monitor.</p>																																												