

**FAIRFAX-FALLS CHURCH COMMUNITY
POLICY AND MANAGEMENT TEAM**

CPMT Minutes 6/22/2018

CPMT Members

Attendees: Louise Armitage, Robert Bermingham, Nannette Bowler, Tisha Deeghan (Chair), Kelly Henderson, Teresa Johnson, Rick Leichtweis, Chris Leonard, MaryAnn Panarelli, Jane Strong, Nancy Vincent, Daryl Washington, Terri Williams

Absent: Gloria Addo-Ayensu, MD, Staci Jones Alexander, Katherine Caffrey, Deb Evans, Jessie Georges, Lee Ann Pender (Acting Director DAHS), Rebecca Sharp

SOC Attendees: Jim Gillespie, Desiree Gordon, Betty Petersilia, Tracey Davis

CSA Management Team: Barbara Martinez, Adam Cahuantzi, Jessica Jackson, Cyndi Barker, Kamonya Omatete

Stakeholders and CSA Program Staff Present: Janet Bessmer, Lisa Morton, Kristina Kallini, Sarah Young, Patricia Arriaza, Chris Metzbower, and Kim Jensen

A motion was made by Chris Leonard and seconded by Bob Bermingham to Approve the May 18th meeting minutes. The motion was approved by the committee of the whole.

ITEMS:

CSA Administrative Items:

Item A— 1: A motion was made by Rick Leichtweis and seconded by Louise Armitage to approve the FY19 CSA Local Agency- Annual Risk Assessment Survey. The motion was approved by the committee of the whole.

Healthy Minds Fairfax Administrative Items:

Item A —2: A motion was made by Nannette Bowler and seconded by Rick Leichtweis to Endorse a Plan to Promote and Support Behavioral Health Integration with Primary Care and Schools. The motion was amended to include having families more involved and more voice in the process. The motion was approved by the committee of the whole and with 1 opposed.

Contracts Items:

Item C — 1a: A motion was made by Rick Leichtweis and seconded by Jane Strong to approve a Child Specific Request for Bethany Christian Services. The motion was approved by the committee of the whole.

Item C — 1b: A motion was made by Rick Leichtweis and seconded by MaryAnn Panarelli to approve a Child Specific Request for Leading by Example. The motion was approved by the committee of the whole.

Item C — 1c: A motion was made by Bob Bermingham and seconded by Daryl Washington to approve a Child Specific Request for Oasis Behavioral Health. The motion was approved by the committee of the whole.

Item C — 1d: A motion was made by MaryAnn Panarelli and seconded by Rick Leichtweiss to approve a Child Specific Request for Devereux Pennsylvania. The motion was approved by the committee of the whole.

Item C — 1e: A motion was made by Bob Bermingham and seconded by Jane Strong to approve a Child Specific Request for Kids Peace in Schnecksville, Pennsylvania. The motion was approved by the committee of the whole.

Item C — 1f Child Specific Request for Havenwood Academy, Utah (Revisit). Bob Bermingham read the statement for going into executive session: **I MOVE THAT THE FAIRFAX-FALLS CHURCH COMMUNITY POLICY AND MANAGEMENT TEAM RECESS AND GO INTO EXECUTIVE SESSION FOR THE DISCUSSION AND CONSIDERATION OF MATTERS ENUMERATED IN VIRGINIA CODE ANNOTATED SECTIONS 2.2-5210 AND SECTION 2.2-3711 (A) (16) AND LISTED IN THE AGENDA OF THIS MEETING. REVIEW OF CHILD SPECIFIC CONTRACT REQUEST FOR HAVENWOOD ACADEMY PURSUANT TO FUNDING BY THE CHILDREN'S SERVICES ACT FOR AT-RISK YOUTH AND FAMILIES AS DIRECTED BY THE ARLINGTON COURT.** CPMT approved the contract as directed by court order entered by Judge Finch on May 30, 2018. However the CPMT believes there are programs providing EB treatments located within Virginia that can meet the needs of the child. Per policy, a public agency Case Manager shall be assigned. MaryAnn Panarelli made the motion and Chris Leonard 2nd. The motion was approved with 9 agreeing and 3 opposing. **I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE ONLY PUBLIC BUSINESS MATTERS LAWFULLY EXEMPTED FROM OPEN MEETING REQUIREMENTS UNDER THE VIRGINIA FREEDOM OF INFORMATION ACT AND ONLY SUCH PUBLIC BUSINESS MATTERS AS WERE IDENTIFIED IN THE MOTION CONVENING THE EXECUTIVE SESSION WERE HEARD, DISCUSSED OR CONSIDERED.**

Item C — 2: Kim Jenson and Barbara Martinez gave the Provider Serious Incident Report Summary. In the 2nd quarter of FY 2018, the issues raised to the attention of the CSA MT included: No new SIRS were brought to the CSA MT, Updates on monitoring Corrective Action Plans were provided, and Decision to no longer place at one facility was decided as a result of a fatality of a non-Fairfax youth at a local residential facility. In the 3rd quarter of FY2018, the issues raised to the attention of the CSA MT included: there was a request for a Corrective Action Plan of a home-based provider due to several concerns including training related to restraints, issues with professional boundaries, failure to report allegations of abuse and neglect to CPS, misrepresentation of staff credentials, and practicing outside of scope of expertise. The parental contribution payment was waived so that the family was not charged for these services. A new provider was identified and services were resumed. In the 4th quarter of FY2018, the issues raised to the attention of the CSA MT included: A home-based counselor was arrested and charged with inappropriately touching a youth in a CSA funded services. Supervisory staff of the home-based counselor dismissed the allegations prior to the arrest, and characterized the touching as "cultural," and "accidental." CSA MT did not feel the response from the agency was appropriate, and is in the process of requesting a Corrective Action Plan to address training needs regarding professional boundaries, mandated reporting requirements, and cultural

competence. A refund of CSA funds was requested from the agency, and no parental contribution payment was required per income assessment. VOLUME OF SIRS: There has been a significant increase in the volume of SIRS received by CSA due to increased monitoring and oversight at all levels. It is likely that these numbers will continue to rise because of continued efforts to increase oversight of youth receiving CSA funded services, particularly those in residential placements. This is creating a workload issue with DAHS-CPM staff and CSA UR staff. However, for FY19, there are plans to divert some UR resources to manage this increase and to develop protocols for increased monitoring and contract compliance.

- **CSA Information Items:**

Item I — 1: Terri Byers gave the Budget Report and Outcome of Fiscal Audit. Pooled expenditures through April 2018 equal \$26.1 million for 1,080 youth. This amount is a decrease from April last year of approximately \$1.3 million, or 4.69%. Pooled expenditures through April 2017 equal \$27.4 million for 1,252 youth. Due to the reorganization of expenditures to match LEDRS reporting categories, categories break out differently than before on the more detailed chart. Therefore, a general comparison to the previous year is presented below. Expenditure claims will be submitted to the State Office of Children's Services (OCS) through April.

Item I — 2: Kim Jenson and Sarah Young gave the Monthly Residential Entry Report. Four youth entered long-term residential settings in May. There was 1 from DFS and 3 from CSB. There was 1 initial request from DFS and 2 requests from CSB; there was 1 lateral request. In May of 2018, 13 youth/family meetings were held with the two standing FAPT teams. Of those 13 meetings: 7 referrals were from CSB and 6 referrals were from FC&A, 6 were requests for initial placements, all of which had plans developed for a Residential Treatment Center. 7 were requests for continuation of existing placements, 6 of which had plans developed for a short-term (varying from 10 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. 1 request for an extension of RTC was not supported and instead a plan of community based services only was developed. Of the 6 initial placement requests, 2 were actively receiving community based services at the time of the FAPT meeting, one of which was actively involved with ICC. In May of 2018, 16 IACCT Inquiry Forms were received: 10 have been submitted to Magellan, 3 have been completed and certified by Magellan, 6 have status unable to be verified by Magellan, 1 request was withdrawn due to the parents withdrawing request for RTC, 6 have not been submitted to Magellan: 4 youth do not have active Medicaid yet, 1 youth is not documented, 1 youth left placement prior to eligibility, and 1 youth (FC&A) was in placement prior to coming to FAPT.

Item I — 3: Janet Bessmer gave a report on the Update of the CPMT Bylaws. The proposed changes include: Updating the code sections referenced in Article I, Adding duties to Article IV to reflect the Code, Moving local government elected official or designee to Section 2: state mandated members, Revise/remove Director of Department of Administration for Human Services from Section 3, and Optional members: Correct/amend number of private service providers from 2 to 1.

Item I — 4: Janet Bessmer and Patricia Arriaza gave a report on the Legislative Update. Legislature – The budget to be signed on June 7th – it was increased in base pool for FY19 and FY20 to reflected projected growth. No changes to CSA statutes. Action items – OCS and Department of ED will convene a group to refine standard measures for private

education programs; OCS is working with a consultant to review rates for private special ed – preliminary report due in November, 2018; final in June 2019. By August, 2018 rates will be collected from providers. By July 1, 2019 rates will be limited to 2% from prior year for private day schools. A three-branch leadership team (members of legislative, judicial and executive to participate) has been established to help with changes to Title IV-E. States can fund prevention services, Must be evidence-based prevention services, the feds are leaving it up to each state to define “at risk of removal from home.” Placements for more than 12 consecutive months require approval of commissioner of Department of Social Services. A 14 day standard for eligibility will be allowed for emergency placements

- **Healthy Minds Fairfax Information Items:**

Item 1 — 5: Jesse Ellis gave a report on Three to Succeed Wellness and Resiliency Campaign. 12% of all 8th, 10, and 12th graders have a family member serving in the military, 18% have used alcohol in the past 30 days, 20% have been the victim of bullying, 57% have changed homes at least 3 times since kindergarten, 20% have had sexual intercourse and 22% report emotional abuse by a dating partner. Slightly more than a fourth of military youth (26%) report using alcohol or drugs in the past month. Alcohol use is most common; 18% used it in the past 30 days, compared to 15% of non-military youth. One in five military youth has had sexual intercourse. Among them, 8% first had sex before they were 15, compared to 5% of their non-military connected peers. Military youth are also slightly more likely than their peers to be involved in bullying. Twenty percent report being a victim of bullying, and 9% report being an aggressor (compared to 15% and 7% of their peers, respectively). More than one-third (35%) report high levels of stress, while 28% report depressive symptoms. Fifteen percent considered suicide in the past year, while 7% attempted suicide. These rates are all comparable to those of their non-military connected peers. Military connected youth in Fairfax County report they have parents who they can turn to for help (83%), Are involved in family decision making (71%), Have much in life to be grateful for (91%), and Accept responsibility for their actions (79%). Please refer to handout for information.

Item 1 — 6: Jim Gillespie gave a report on the Hospital Diversion Project

Evaluation Plan. The project proposes to create and promote a user-friendly referral process from the Fairfax Hospital Emergency Department to the existing "CR2" regional mobile response service. It would support a 14% increase in CR2 capacity in order to handle the anticipated increase in referrals from the Fairfax Hospital ED. The project is designed to be a "proof of concept" that a streamlined process for the ED to access mobile response services will result in more youth being able to remain safely with their families with the support of the mobile response intervention. There are five elements that will need to be implemented: Implement a user-friendly referral process from the Fairfax Hospital ED to CR2, CR2 consistently responds to referrals with a timely face-to-face visit at the ED, CR2 consistently does a timely face-to-face follow-up visit in the home, CR2 consistently conducts a risk/acuity assessment and develops a plan of care, and CR2 consistently facilitates transition to ongoing services and supports. For the first 6 months of the project analyze regional CR2 service statistics to determine whether Fairfax County's funding of a 14% capacity increase results in a corresponding increase in Fairfax youth served and Analyze the cost savings resulting from fewer hospitalizations and boarding stays compared to the cost of CR2 mobile response services.

- **NOVACO — Private Provider Items: N/A**

- CPMT Parent Representative Items: N/A
- Cities of Fairfax and Falls Church Items: N/A
- Public Comment: N/A

A motion was made by Bob Bermingham and seconded by Rich Leichtweis to adjourn at 2:45pm. The motion was approved by the committee of the whole.

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