

MEMO TO THE CPMT
January 19, 2018

Information Item I- 1: Requirements for Submission of the Statement of Economic Interest by CPMT members and FAPT Parent Representatives

ISSUE: That requirements for City representatives and citizen members (i.e., non-county employees) need to be clarified regarding submission of the Statement of Economic Interest form so that the CSA program is in compliance with the VA Code.

BACKGROUND:

CSA program staff obtained email clarification from Scott Reiner, Executive Director of OCS, about the requirements for CPMT members to submit the Statement of Economic Interest form. He has obtained clarification from the Virginia Conflict of Interest of Ethics Advisory Council. On January 10, 2018, Lee Ann Pender facilitated a meeting with the Clerk of the Board, Cathy Chianese, and Janet Bessmer, CSA Manager to clarify the county's requirements and develop a procedure that is consistent with all of the state and local requirements.

RECOMMENDATION:

That the following procedures are adopted to clarify the code and policy requirements for our board members:

The Clerk of the Board shall notify any county employees who serve as CPMT members who are required by county policy to complete the statement and when submitted, will receive, retain and destroy these records as per the requirements specified by the Library of Virginia.

The CSA Manager will provide non-public agency employees (e.g., private providers and parent representatives) with information about the requirement and a link to the statement when they begin their appointment to the CPMT. Non- public agency employees are required to submit the statement at the beginning of their appointment one time only. The long-form of the statement shall be provided to the Clerk of the Board who will receive, retain and then destroy the form as per the requirements of the Library of Virginia.

CPMT members representing the Cities of Falls Church and Fairfax shall submit their statements as per the requirements of their jurisdiction. Their statements, if required by their jurisdiction, shall be submitted to the appropriate City entity who is required to follow the same record retention and destruction procedures defined by the Library of Virginia.

The CSA program manager will not receive any member's statements; however, each member will be asked to self-certify the status of their submission on an annual form provided and maintained for audit purposes by the CSA program.

ATTACHMENT: OCS Administrative Memo #18-02

STAFF:

Lee Ann Pender, DAHS
Cathy Chianese, Clerk of the Board
Janet Bessmer, CSA



COMMONWEALTH of VIRGINIA


OFFICE OF CHILDREN'S SERVICES

Administering the Children's Services Act

Scott Reiner, M.S.
Executive Director

Administrative Memo #18-02

To: CPMT Chairs
CSA Coordinators

From: Scott Reiner, Executive Director 

CC: Stephanie Bacote, Audit Manager

Date: January 16, 2018

Subject: Statement of Economic Interest Filings for FAPT and CPMT Members

OCS has recently received guidance from the Virginia Conflict of Interest and Ethics Advisory Council (the Council) regarding the required filing of the Statement of Economic Interest forms for members of the CPMT and FAPT within the local CSA programs. This memo is intended to clarify those requirements.

Non-salaried citizen members (i.e., parent and private provider representatives):

These members must file the "long-form" Statement of Economic Interests disclosure upon appointment to their positions as required by §2.2-5205 (CPMT) and §2.2-5207 (FAPT). This disclosure form, as specified in §2.2-3117 of the Code of Virginia, shall be made available by the clerk of the local governing body and the filing is made with the clerk, who is responsible for maintaining these filings as public records for five years. Citizen members of CPMT and FAPT are required to file only upon appointment and not annually as has been previously indicated in guidance from this Office. This is likely a change from current practice for many jurisdictions

Salaried employees of local governmental agencies:

If a local government employee who serves on the CPMT or FAPT is required to file by the local governing body, these members will generally file the Statement of Economic Interests disclosure, although there may be some exceptions for certain positions. The appropriate disclosure form shall be made available by the clerk of the governing body and the filing is made with the clerk, who is responsible for maintaining these filings as public records for five years. Local government employees required to file must do so annually, on or before February 1, in accordance with §2.2-3115.

Appropriate updates to the CSA User Guide will be made and distributed in the near future. Additional guidance on these requirements should be directed to the local attorney for your jurisdiction or to the Council at: <http://ethics.dls.virginia.gov/index.asp>.

Thank you for your attention to this matter.

MEMO TO THE CPMT

January 19, 2018

Information Item I- 2: Update on CSA Self-Assessment Audit Process

ISSUE: That our local CSA program will submit our Audit Self-Assessment by February 28th which will be followed by a validation visit from state auditors

BACKGROUND: The CPMT approved a process for completion and submission of the self-assessment. The CPMT's Governance workgroup has met twice and other workgroups have completed sections of the assessment. The Fraud Questionnaire was sent out as a survey monkey to staff and stakeholders. These results are currently under review by a workgroup as well. The Governance workgroup will summarize the results after reviewing all the information and provide a report to the CPMT at the February meeting.

ATTACHMENT: None

STAFF:

Janet Bessmer, CSA Manager

Memo to the CPMT
January 19, 2018

INFORMATION ITEM I- 4: December 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.

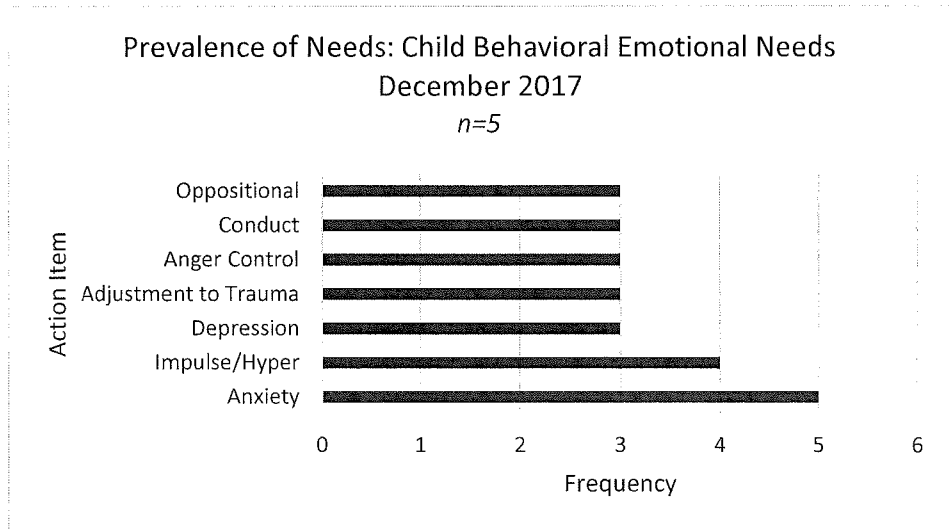
Residential Entry Report: Five youth entered long-term residential settings in December.

	December
Male	2
Female	3

AGE	December
10	1
14	1
16	2
17	1

Lead Agency	December
DFS Foster Care	3
Falls Church City	
FCPS MAS	
JDRDC	
CSB	2

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



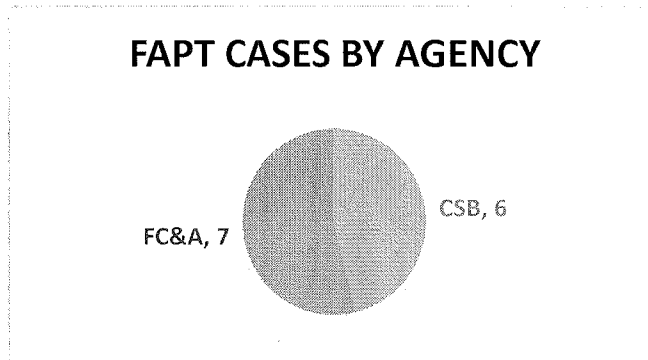
UR Summary:

- Anxiety and Impulse/Hyper were the most frequently cited actionable CANS scores
- There were no youth with actionable scores in Substance Use
- There were no youth identified as victims of sex trafficking; however, one youth was noted to be at high-risk for being trafficked and for gang abduction due to her previous gang activity
- This was a 3rd residential placement for one 10-year-old
- One youth entered RTC after his 3rd suicide attempt; he will age out of CSA services in March when he turns 18 suggesting a need for comprehensive transition services to ensure his safety after 18

FAPT Report:

In December of 2017, **13** youth/family meetings were held with the two standing FAPT teams. Of those **13** meetings:

- 7 referrals were from FC&A and 6 referrals were from CSB.
 - 8 were requests for *initial placements*, 6 of which had plans developed for a Residential Treatment Center, and 2 for short term Diagnostic/Stabilization placement
 - 5 were requests for *continuation of existing placements*, of which all had plans developed for a short-term (varying from 1-3 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 8 initial placement requests, 5 were actively receiving community based services in some form at the time of the FAPT
- 5 youth were in placement prior to coming to FAPT, 2 having been placed by their parents and 3 by FC&A



Of Note:

- There is a general lack of preparation being provided by case managers to both parents/caregivers and youth prior to FAPT meetings. There is often no clear understanding of what the meeting is about, or frequently a distinct misunderstanding (“this is where you go to get money for residential”). More education and training is needed for case managers on the importance of successful family and youth engagement in general and preparation for FAPT/MDT meetings specifically.

IACCT (Independent Assessment, Certification and Coordination Team) Report:

- In December, **10** IACCT Inquiry Forms were received:
 - 7 have been submitted to Magellan
 - Of the 3 not submitted:
 - 1 did not have legal status
 - 2 do not have active Medicaid yet
 - **0 of the 7** submitted (0%) have been certified/approved for Medicaid reimbursement as of this report

Of Note:

- Lack of communication with Magellan regarding completed IACCT assessments continues to be a major impediment, particularly with those youth who have active Medicaid and cannot be placed prior to completion of the IACCT process. Previously Fairfax CSA had been told we would be directly informed after every completed assessment as to the outcome; this has yet to happen. The FAPT coordinator followed up with the senior manager for clinical services at Magellan again in January and was informed that Fairfax will be notified in writing of every IACCT inquiry outcome for our Fairfax youth

STAFF:

Kim Jensen, Utilization Review Manager
Sarah Young, FAPT Coordinator



**Results-Based Accountability
Performance Plan
FY 2018, Quarter 2 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 Equivalentents (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 Quarterly ¹ 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 Q2 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	

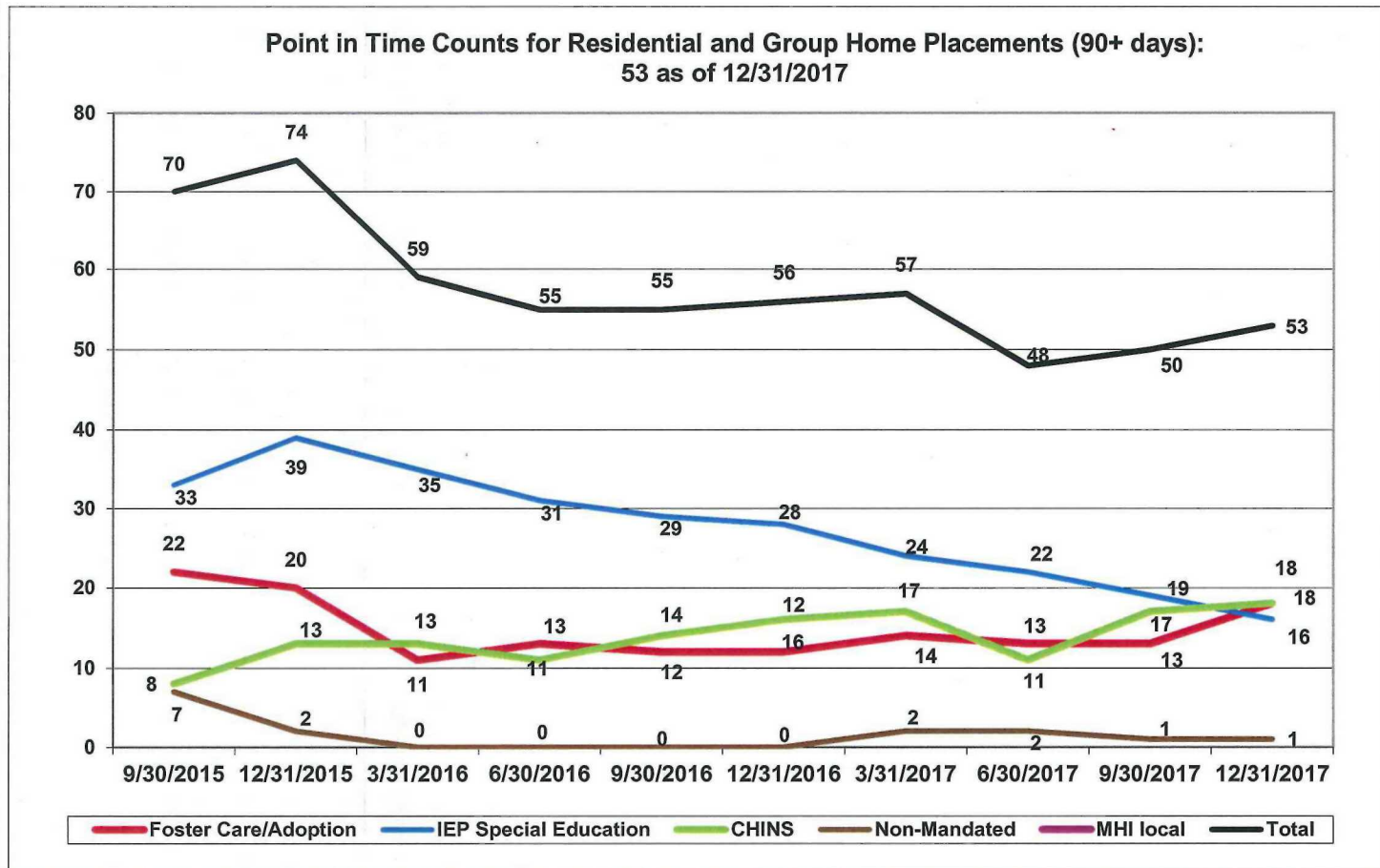
Results-Based Accountability Performance Plan Children's Services Act (CSA) System of Care

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 Q2			
How Well Measure	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	53

Graphs/Charts



Notes

Analysis: The total point in time count increased by 3 from the prior quarter. **Planned Action:** Continue to monitor.

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

FY 2018 Q2																																				
<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	1626 days for youth with developmental disabilities 138 days for youth with emotional /behavioral disabilities																																	
<u>Graphs/Charts</u>																																				
<p>Length of Stay (days in current placement): Residential and Group Home Placements by Disability Type as of 12/31/2017</p> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <caption>Data for Length of Stay Chart</caption> <thead> <tr> <th>Quarter</th> <th>Children with Developmental Disability (Days)</th> <th>Children with Emotional/Behavioral Problems (Days)</th> </tr> </thead> <tbody> <tr> <td>9/30/2015</td> <td>1016</td> <td>250</td> </tr> <tr> <td>12/31/2015</td> <td>1043</td> <td>289</td> </tr> <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> </tbody> </table>				Quarter	Children with Developmental Disability (Days)	Children with Emotional/Behavioral Problems (Days)	9/30/2015	1016	250	12/31/2015	1043	289	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
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<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=38) was 138 days at the end of the 4th quarter. The length of stay for youth with primary needs from developmental disabilities (n=15) was 1626 days. Planned Action: Continue to monitor.</p>																																				

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

FY 2018 Q2																																				
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<u>Graphs/Charts</u>	<div style="text-align: center;"> <p>Average LOS for the Exiting Placements - # of Days</p> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <caption>Data for Average LOS for the Exiting Placements - # of Days</caption> <thead> <tr> <th>Date</th> <th>Children with Developmental Disability</th> <th>Children with Emotional/Behavioral Problems</th> </tr> </thead> <tbody> <tr><td>9/30/2015</td><td>4251</td><td>237</td></tr> <tr><td>12/31/2015</td><td>55</td><td>173</td></tr> <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>948</td><td>197</td></tr> </tbody> </table> </div>			Date	Children with Developmental Disability	Children with Emotional/Behavioral Problems	9/30/2015	4251	237	12/31/2015	55	173	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	948	197
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<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=12) was 197 days at the end of the 2nd quarter. The length of stay for youth with primary needs from developmental disabilities exiting placement (n=1) was 948 days. Planned Action: Continue to monitor.</p>																																			

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

FY 2018 Q2																																																						
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	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	18																																																			
	2.2.3	Number of youth exiting long-term congregate care settings	13																																																			
<u>Graphs/Charts</u>																																																						
<p>Entry and Exit into Long-term RTC and GH 53 placements as of 12/31/2017</p> <table border="1" style="display: none;"> <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>Sept '16</td><td>3</td><td>2</td></tr> <tr><td>Oct '16</td><td>6</td><td>3</td></tr> <tr><td>Nov '16</td><td>4</td><td>8</td></tr> <tr><td>Dec '16</td><td>5</td><td>8</td></tr> <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>6</td><td>7</td></tr> <tr><td>Nov '17</td><td>5</td><td>4</td></tr> <tr><td>Dec '17</td><td>7</td><td>2</td></tr> </tbody> </table>				Month	Entries RTC/GH	Exits RTC/GH	Sept '16	3	2	Oct '16	6	3	Nov '16	4	8	Dec '16	5	8	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	6	7	Nov '17	5	4	Dec '17	7	2
Month	Entries RTC/GH	Exits RTC/GH																																																				
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June '17	6	5																																																				
July '17	7	4																																																				
Aug '17	3	12																																																				
Sept '17	11	7																																																				
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Nov '17	5	4																																																				
Dec '17	7	2																																																				
<u>Notes</u>																																																						
<p>Analysis: There were 13 exits and 18 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 Q2			
<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.	
	2.1.2	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	93% / 94%
	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	0%
<u>Graphs/Charts</u>			
	<p>Notes</p> <p>Analysis: 93% (13 of 14) of youth were maintained in the community 6 months after initiation of ICC services. 94% (29 of 31) 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

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	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% / 92% UMFS 90% / 95%																																																								
	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	0%																																																								
<u>Graphs/ Charts</u>	<div style="text-align: center;"> <p>Wrap Fairfax ICC Outcomes FY 2018 Q2</p> <table border="1" style="display: none;"> <caption>Wrap Fairfax ICC Outcomes FY 2018 Q2</caption> <thead> <tr> <th>Date</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>9/30/16</td><td>0%</td><td>78%</td><td>87%</td></tr> <tr><td>12/31/16</td><td>50%</td><td>92%</td><td>96%</td></tr> <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> </tbody> </table> </div> <div style="text-align: center; margin-top: 20px;"> <p>UMFS ICC Outcomes FY 2018 Q2</p> <table border="1" style="display: none;"> <caption>UMFS ICC Outcomes FY 2018 Q2</caption> <thead> <tr> <th>Date</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>9/30/16</td><td>100%</td><td>100%</td><td>100%</td></tr> <tr><td>12/31/16</td><td>100%</td><td>95%</td><td>94%</td></tr> <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> </tbody> </table> </div>			Date	Return from RTC by 3 mos	Prevent RTC at 6 months	Prevent RTC at 12 months	9/30/16	0%	78%	87%	12/31/16	50%	92%	96%	3/31/17	100%	94%	80%	6/30/17	100%	100%	100%	9/30/17	100%	78%	87%	12/30/17	0%	100%	92%	Date	Return from RTC by 3 mos	Prevent RTC at 6 months	Prevent RTC at 12 months	9/30/16	100%	100%	100%	12/31/16	100%	95%	94%	3/31/17	0%	100%	89%	6/30/17	0%	100%	92%	9/30/17	0%	100%	100%	12/30/17	0%	90%	95%
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<u>Notes</u>	<p>Analysis: Wraparound Fairfax: 100% (n=4) of youth were maintained in the community 6 months after initiation of ICC services. 92% (11 of 12) of youth remained in the community 12 months after the initiation of ICC services.</p> <p>UMFS: 90% (9 of 10) of youth were maintained in the community 6 months after initiation of ICC services. 95% (18 of 19) 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 Q2																																																										
<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	4 complaints/ 1 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 delinquency petitions	0																																																							
<u>Graphs/ Charts</u>	<div style="text-align: center;"> <p>Foster Care Entry: Relief of Custody Data As of 12/31/17</p> <table border="1" style="margin-top: 10px;"> <caption>Foster Care Entry: Relief of Custody Data (As of 12/31/17)</caption> <thead> <tr> <th>Quarter</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>July - Sept '15</td> <td>1</td> <td>1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Oct - Dec '15</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> </tr> <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>2</td> <td>1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Oct - Dec '16</td> <td>3</td> <td>1</td> <td>0</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>0</td> <td>3</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> </tbody> </table> </div>			Quarter	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	July - Sept '15	1	1	1	0	Oct - Dec '15	1	0	0	0	Jan - Mar '16	3	0	0	0	Apr - June '16	5	0	0	0	July - Sept '16	2	1	1	0	Oct - Dec '16	3	1	0	0	Jan - Mar '17	2	0	0	1	Apr - June '17	2	0	0	3	July - Sept '17	3	1	1	1	Oct - Dec '17	4	1	0	0
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<u>Notes</u>	<p>Analysis: 4 Relief of Custody (ROC) complaints were received this quarter; 1 was filed and 3 are pending. Planned Action: Continue to monitor.</p>																																																									

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

FY 2018 Q2																																													
<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	55%																																										
<u>Graphs/Charts</u>	<p style="text-align: center;">Monthly Utilization and Reimbursement for Medicaid-enrolled RTC/GH Placements</p> <table border="1"> <caption>Monthly Utilization and Reimbursement for Medicaid-enrolled RTC/GH Placements</caption> <thead> <tr> <th>Month</th> <th>Medicaid Reimbursement (%)</th> <th>Medicaid Placements (%)</th> </tr> </thead> <tbody> <tr><td>12/31/14</td><td>85%</td><td>68%</td></tr> <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>79%</td></tr> </tbody> </table>			Month	Medicaid Reimbursement (%)	Medicaid Placements (%)	12/31/14	85%	68%	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%	79%
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<u>Notes</u>	<p>Analysis: 79% (42 of 53) placements are in Medicaid-enrolled programs, of which 55% (23 of 42) 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=4), Ineligible Level B due to income (n=3), Clinical denial (n=2), Pending (n=7). Planned Action: Continue to monitor.</p>																																												