

AGENDA
State Executive Council
The Comprehensive Services Act for At Risk Youth & Families
March 19, 2015
Virginia Department of Taxation,
1957 Westmoreland Street
Richmond, VA

- 9:30 a.m.** **Welcome & Chair Remarks – Dr. Bill Hazel**
 ➤ **Action Item** – Approval of December 2014 Minutes
- 9:40** **Public Comment**
- 9:50** **Workgroup Report - Non-CSA Parental Placements into Residential Treatment Programs**
 ➤ **Action Item** - Acceptance of Recommendations
- 10:40** **SEC Retreat Report – Group 4**
- 10:50** **Proposed Workgroup – Increasing Public Awareness of and Access to Multidisciplinary Planning**
 ➤ **Action Item** – Approve Charter
- 11:00** **Executive Director's Report – Susan Clare**
 • **General Assembly Reports**
 • **First Reading of the FY16 Training Plan**
 • **2015 General Assembly Actions**
- 11:15** **SEC Committee Reports**
 • **Executive Committee**
 • **Outcomes Committee**
- 11:35** **SLAT Report – Karen Tompkins**
- 11:45** **Member Updates**
- 12:00 p.m.** **Adjournment**

Meeting Schedule for 2015: April 20 (CSA Conference/Roanoke), June 18, September 17 and December 17

DRAFT

**STATE EXECUTIVE COUNCIL (SEC)
COMPREHENSIVE SERVICES ACT FOR AT RISK YOUTH AND FAMILIES
Richmond/Henrico Rooms
1604 Santa Rosa Road
Richmond, VA
Thursday, December 18, 2014**

SEC Members Present:

The Honorable William A. (Bill) Hazel, Jr., M.D., Secretary of Health and Human Resources
The Honorable Jennifer Wexton, Member, Senate of Virginia
Michael Farley, CEO, Elk Hill
The Honorable Richard "Dickie" Bell, Member, Virginia House of Delegates
John Eisenberg for Steven Staples, Ed.D., Superintendent of Public Instruction, Virginia Department of Education
The Honorable Patricia O'Bannon, Member, Henrico County Board of Supervisors
Janice Schar, Parent Representative
Joseph Paxton, County Administrator, Rockingham County, Virginia
Debra Ferguson, Ph.D., Commissioner, Department of Behavioral Health and Developmental Services
Lelia Hopper for Karl Hade, Executive Secretary of the Supreme Court of Virginia
Margaret Schultze, Commissioner, Virginia Department of Social Services
Bob Hicks for Dr. Marissa Levine, Commissioner, Virginia Department of Health
Greg Peters, President and CEO, UMFS
The Honorable Anita Filson, Juvenile and Domestic Relations District Court Judge, 25th Judicial District
The Honorable Catherine Hudgins, Member, Fairfax County Board of Supervisors
Jeanette Troyer, Parent Representative
The Honorable Robert "Rob" Coleman, Vice-Mayor, City of Newport News
Cindi Jones, Director, Department of Medical Assistance Services

SEC Members Absent:

Mary Bunting, City Manager, Hampton, Virginia
Andrew Block, Director, Department of Juvenile Justice

Other Staff/SLAT Members Present:

Pam Kestner, Special Advisor on Families, Children and Poverty, Health & Human Resources
Eric Reynolds, Assistant Attorney General, Office of the Attorney General
Ron Belay, Chair, State and Local Advisory Team
Susan Cumbia Clare, Executive Director, Office of Comprehensive Services (OCS)
Scott Reiner, Assistant Director, OCS
Carol Wilson, Program Consultant, OCS
Marsha Mucha, Administrative Staff Assistant, OCS

Call to Order and Approval of Minutes

Secretary Hazel called the meeting to order at 9:30 a.m. A quorum was present.

The minutes of the September 18, 2014 meeting were approved without objection.

Taskforce Report on Non-CSA Parental Placements into Residential Treatment Programs

Secretary Hazel explained that, if there were no objections, the Taskforce recommendations would be reviewed first with public comment to follow. He noted that there had been a great deal of discussion swirling around the topic and he reminded those in attendance of the facts in evidence and the need to find a solution to this problem.

Secretary Hazel also reiterated that the SEC was not taking action on the Taskforce recommendations or proposed policy at today's meeting but, rather would be deciding whether or not to disseminate the proposed policy for a 60-day public comment period.

The recommendations were presented to the SEC's Executive Committee and that Committee endorsed moving forward with the presentation at today's meeting. At its December 5 meeting, the State and Local Advisory Team (SLAT) discussed the estimated local fiscal impact. Mr. Belay, SLAT Chairman, provided members with an analysis of that estimated local fiscal impact.

Lelia Hopper, a member of the Taskforce, presented the recommendations and provided background on the existing issue and the appointment of the Taskforce. She reported that the Taskforce appointed by the SEC at its September 2014 meeting met on October 30, 2014. Members of the Taskforce included: SEC members, Joe Paxton, Michael Farley, Mary Bunting and Lelia Hopper. Also serving on the Taskforce were Paul McWhinney (VDSS) and Karen Kimsey (DMAS). Melanie Bond, Chesapeake CSA Coordinator and Brad Burdette, Director of the Appomattox DSS Office served as advisors to the Taskforce. Susan Clare, Executive Director and Scott Reiner, Assistant Director from OCS facilitated the meeting.

Ms. Hopper walked members and guests through the process proposed by the Taskforce as well as additional Taskforce recommendations. The Taskforce recommends a proposed policy effective date of July 1, 2015 for all non-CSA Level C RTF admissions and re-admissions occurring July 1, 2015 or later. The Taskforce also recommends establishing a workgroup to develop guidelines for implementation of the proposed policies should the SEC accept the recommendations of the Taskforce.

The SEC reviewed and considered each of the five paragraphs of the proposed policy. A motion was made by John Eisenberg, seconded by Greg Peters and carried to strike paragraph five from the proposed policy which allowed for the local school division to provide education within the private facility. Further discussion concerned whether or not parental responsibilities should be included in the policy and if the timeline included in the policy allowed for an orderly transition from residential treatment services to community-based services should that be FAPT's determination.

Public Comments

Public comments were received on the above topic from:

- Bill Elwood representing the Virginia Coalition of Private Provider Associations (VCOPPA) and the Virginia Association of Independent Specialized Education Facilities (VAISEF)

DRAFT

- Amy Woolard representing Voices for Virginia's Children (VOICES)
- Catherine Pemberton representing the Virginia League of Social Services Executives (VLSSE)
- Michael Asip representing the Virginia Council of Administrators of Special Education (VCASE)
- Doug Bilski representing the Chesterfield County Community Services Board (CSB)
- Tracy Gordon representing Prince William County
- Jennifer Faison representing the Virginia Association of Community Services Boards (VACSB)
- Jim Gillespie representing the Fairfax – Falls Church CSA
- Janet Areson representing the Virginia Municipal League (VML)
- Sue Rowland representing Roanoke County
- Beau Blevins representing the Virginia Association of Counties (VACo)

Action Taken

A motion was made by Joe Paxton and seconded by Catherine Hudgins to move forward with establishment of an SEC workgroup as recommended by the Taskforce and described in Attachment B. The workgroup would consider a policy implementation date and address areas of concern around the timeframes for:

- FAPT review of cases and development of an IFSP for the youth within 14 days of the CSB receipt of referral from FAPT
- Locality responsibility for the RTF placement beginning day 15 post admission through the date of discharge when the IFSP is implemented

The Workgroup would report at the SEC's April 2015 meeting. The SEC would then decide concerning dissemination of the proposed policy for a 60-day public comment period.

Discussion of the motion addressed the potential delay in implementation of policy. Lelia Hopper asked whether or not the SEC should set a proposed policy implementation date of July 1, 2016 or not specify a date to the Workgroup. After additional discussion, members voted not to specify an implementation date but leave that consideration to the Workgroup. The original motion carried.

Adjournment

There being no further business the meeting was adjourned at 12:05 p.m.

**REPORT TO THE SEC
on the
State Executive Council Retreat
June 20, 2014
Elk Hill Farm**

RETREAT OBJECTIVES

1. Understand access barriers to publicly funded behavioral health services for CSA eligible and target populations.
2. Identify policy and/or statutory changes necessary to remove barriers that hinder access to publicly funded behavioral health services for CSA eligible and target populations.
3. Identify value statements and/or guiding principles to facilitate implementation of best practices to ensure access to behavioral health services for CSA eligible and target populations.

FOUNDATION SET FOR SMALL GROUP DISCUSSIONS

In accordance with the SEC's strategic goal to "support implementation of a unified system of care that ensures equal access to quality services for at risk youth across the Commonwealth," small groups were asked to examine issues that have been identified as barriers to quality care, specifically as it relates to behavioral health services. Margaret Nimmo-Crowe, Executive Director, Voices for Virginia's Children provided background regarding the challenges faced by children and families in accessing services and the costs, to children, families, and communities, for failure to provide appropriate services. Eric Reynolds, Esq., reviewed statutory language highlighting how children and youth in need of behavioral health services are included in the CSA eligible population and specifically in the population for whom services are mandated.

SMALL GROUP REPORTS

GROUP 1

Submitted by Karen Kimsey

Problem Statement: An increasing number of youth are being placed in residential settings without CSA involvement and without funding for educational services.

Group Facilitator: Karen Kimsey, Dept. of Medical Assistance Services

Summary of Key Issues/Contributing Factors:

- DMAS establishes three processes by which the Certificate of Need for Residential services can be completed. Two of the three processes are outside of the CSA process and do not provide funding for educational services.

- There is a perceived “urgency” to such placements which may contribute to taking the most direct route to a Certificate of Need and Medicaid authorization, often bypassing CSA
- There is inconsistency in parent and service provider access to CSA across localities making it difficult to gain timely entry to the CSA system in some localities
- Many youth entering residential placement do so as a result of an acute crisis with no prior involvement with CSA or public child serving entities
- There is potential fiscal incentive to localities to “avoid” CSA involvement (e.g., no local match on Medicaid, no local expense for educational services)

Ideal Outcomes:

- System of Care would provide for access to comprehensive service planning and case management regardless of funding source and point of entry
- A common set of medical necessity criteria and associated levels of care regardless of funding source and locality
- A coordinated, consistent and timely point of entry to the public service system for families
- Children would not be placed in settings without appropriate resources to cover educational service costs

Recommendations:

- DMAS should adopt regulatory, policy, and/or procedural changes so that all authorizations for Level C residential placements are “pending” until the FAPT/CPMT can review the case and develop a CSA response (may or may not be to place the child in residential care)
- CSA should implement policy to ensure timely access by a family to the FAPT to include eligibility determinations, completion of the CANS, determination (with the family) of the services needed by the child and development of an IFSP.
- Increase family and public awareness about CSA on the local level to reduce youth being placed in residential care without CSA involvement.
- Provide for 100% state funding for educational costs in Level C residential placements for children not involved with the CSA system (or who are placed despite CSA recommendation for an alternative, community based service).

GROUP 2

Submitted by Suzanne Gore and Jeff Aaron

Problem statement

(revised):

There is an inadequately resourced system that too often intervenes too late and in ways that are inequitable, inconsistent and not well coordinated resulting in too many kids ending up in facilities.

Group Facilitator: Suzanne Gore, Dep. Secretary- HHR

Key areas of need:

- ➔ *Early identification of problems/early intervention*
- ➔ *Fairness, consistency, coordination of services*
- ➔ *Alternatives to facility placements whenever possible*

Recommended areas of focus for SEC:

1. Early Intervention
 - a. Evaluate fiscal incentives to provide evidence-based intervention and preventative services.
 - b. Outreach efforts supporting access to services and resources and the elimination of stigma associated with having a MH diagnosis.
2. Access to Services
 - a. Clarify roles and responsibilities of state, local, community, family and private providers in our SOC. This would include identifying a "front door" to services/funding.
 - b. Evaluate the use of nonmandated CSA funds and apply standards to be used for all localities.
 - c. Outreach efforts supporting access to services and resources and the elimination of stigma associated with having a MH diagnosis.
 - d. Develop policies to support consistency of referrals for services. Do not penalize localities that already have an effective system, but help localities that do not have the support/training.
3. Identification/implementation of what works
 - a. Evaluate tools and implementation strategies to support a global strengths-based screening for all children (or develop policies that encourage localities to do so).
 - b. Identify and implement outcome measures for our SOC and use results to drive continuous improvement (or develop policies that encourage localities to do so).
 - c. Schedule presentations from localities that have implemented a SOC with a focus on providing prevention services and access to services/funding.

Specific Recommendations:

- Encourage specific services or approaches by adjusting the rate for matching funding for nonmandated CSA funds
 - ➔ More favorable match rates for early intervention programs, for those that use outcome measures to guide intervention strategies, etc, as was done to encourage community-based intervention
- With new DJJ leadership, seek opportunities to focus on decreasing rates and durations of incarceration, use savings to promote community-based interventions
- Schedule presentations to the SEC from localities that have implemented a system of care with focus on providing prevention services and access to services/funding.

GROUP 3

Submitted by Margaret Schultze

Problem statement

(revised): CSA needs to better serve youth who are either truant or delinquent to prevent out-of-home placement (e.g. foster care, residential facility, detention or commitment).

Group Facilitator: Margaret Schultze, VDSS Commissioner

How system would look if problem was totally resolved:

- Children are not served by label: i.e., "delinquent" "truant" "abused/neglected" "CHINS", "CHINSup;" all children and youth should have positive outcomes.
- Broader choice of dispositional alternatives for Judges; currently may order foster care for truancy or failure to follow treatment plan; or CA asks for detention as consequence to behavior
- Earlier intervention with children and families
- No wrong door to services
- Well-trained collaborative workforce who implement cross-system approach
- Reduction in court involvement and foster care/out of home placement
- Recognition that a child may be in need of services *not* through CSA
- Strategies for interventions matched to needs (do not default to foster care if foster care is not needed)

Recommendations:

- SEC should provide clarification regarding eligibility of these youth (truant and delinquent) for CSA funding either as a "child in need of services" in need of "foster care services" (including community-based). Guidance to FAPT/CPMT/LDSS/DJJ should be provided regarding the inclusion of a child's "condition" in the CHINS language. Guidance should come from agency heads as a consistent message from "above."
- Support creation of Children's Cabinet.
- Encourage the creation of dispositional alternatives (statutory change?) that would allow access to services for CHINS youth without requirement of "foster care services" and/or create a disposition such as shelter care on the continuum that a Judge could order as alternative.
- Support expansion of foster care until 21 with maximization of IV-E dollars.

GROUP 4

Submitted by Dr. Hazel and Joe Paxton

Problem statement: There is need to ensure appropriate representation of stakeholder interests in SEC decision-making processes.

Group Leaders: Dr. Bill Hazel (HHR Secretary, SEC Chair)
Joe Paxton (County Administrator, SEC Local Government Representative)

How system would look if problem was totally resolved:

The SEC would have good understanding of the full impact of proposed policies on all stakeholders, and very importantly, the fiscal impact on local governments. While the APA provides a number of elements that are desirable but lacking in current CSA policy development, there are many aspects of the APA that would hinder timely and effective policy adoption and implementation.

Desirable components of the APA to replicate include:

- Structured way to “get the word out” about proposed policy changes (i.e., similar to posting to the Town Hall)
- Structured process for public comment (NOTE: The *Code of Virginia*, §2.2-2648 (D)(4), requires the SEC to ensure public participation processes including a 60 day public comment period), and
- Structured assessment of fiscal impacts of proposed policies (i.e., DPB provides analysis under the APA)

Recommendations:

- The SLAT, per its statutory role to advise the SEC, should perform the function of conducting comprehensive analysis of the impacts of proposed policies on stakeholder groups and should deliver a “vetting package” to the SEC.
- There is need to recognize impacts on “funders” (both state and local) as well as the impacts on both public and private “service providers,” e.g., local agencies responsible for child services and private providers.
- The SLAT will likely need to organize small groups to complete the desired analyses and prepare reports for the SEC. Such groups should include individuals outside of the SLAT’s membership as needed and as appropriate.
- A representative of VACo or VML should serve as liaison between the SLAT and local government officials and should, beginning immediately, be invited to “sit at the table” of SLAT meetings to actively engage in discussions of the team and to serve in the capacity of an informal, non-voting stakeholder representative.
- VACo and/or VML should participate in workgroups of the SLAT as needed and appropriate to assess fiscal impact of proposed policies.
- Effective immediately the SLAT chair should invited to sit at the table of SEC meetings to actively engage in its discussions.
- The above recommendations can be implemented without change to statute, policy, or bylaws and should be implemented immediately to enable assessment of their effectiveness before changes are sought to statute, policy, and/or bylaws.

State Executive Council Workgroup

Increasing Public Awareness of CSA and Access to Multidisciplinary Planning

Background

The State Executive Council conducted a retreat on June 20, 2014 to accomplish the following objectives:

1. Understand access barriers to publicly funded behavioral health services for CSA eligible and target populations.
2. Identify policy and/or statutory changes necessary to remove barriers that hinder access to publicly funded behavioral health services for CSA eligible and target populations.
3. Identify value statements and/or guiding principles to facilitate implementation of best practices to ensure access to behavioral health services for CSA eligible and target populations.

Three of the four small groups that convened during the retreat identified the need and/or made specific recommendations to the SEC regarding increasing public awareness of local CSA teams and improving family access to local CSA teams for service planning. In addition, a taskforce appointed by the SEC to make recommendations regarding non-CSA parental placements into residential treatment facilities recommended that the SEC take action to improve public awareness of and access to local CSA teams to reduce such placements.

Purpose

The purposes of this workgroup will be to:

1. Identify and recommend actions by which the SEC can improve family and public awareness about CSA on the local level, and
2. Identify and recommend actions by which the SEC can ensure a coordinated, consistent, and timely point of entry to the public service system for families in every community across the Commonwealth.

Membership

The SEC directs the Office of Comprehensive Services to solicit the participation of representatives of the following stakeholder groups and to establish and facilitate the work of this workgroup:

- Parents
- CSA coordinators
- Local child-serving agency representatives: social services, schools, court service units, and community services boards
- Private providers
- State child-serving agency representatives: DSS, DOE, DBHDS, DJJ
- DMAS and/or Magellan
- Appointed/elected local government officials and/or VML/VACO
- VOICES for Virginia's Children
- Virginia Poverty Law Center and/or Legal Aid Justice Center

Report

The workgroup will provide its final recommendations to the SEC no later than June 2015.



OFFICE OF COMPREHENSIVE SERVICES

ADMINISTERING THE COMPREHENSIVE SERVICES ACT FOR AT-RISK YOUTH AND FAMILIES

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The CSA establishes local multidisciplinary teams responsible to work with families to plan services according to each child's unique strengths and needs and to administer the community's CSA activities.

The Office of Comprehensive Services (OCS) is the administrative entity responsible for ensuring effective and efficient implementation of the CSA across the Commonwealth.

Guiding principles for OCS include:

- Child and family directed care,
- Equitable access to quality services,
- Responsible and effective use of public funds,
- Support for effective, evidence-based practices, and
- Collaborative partnerships across state, local, public, and private stakeholders.



IMPACT OF THE INCENTIVE MATCH RATE SYSTEM

Annual Report to the Governor and General Assembly, December 2014

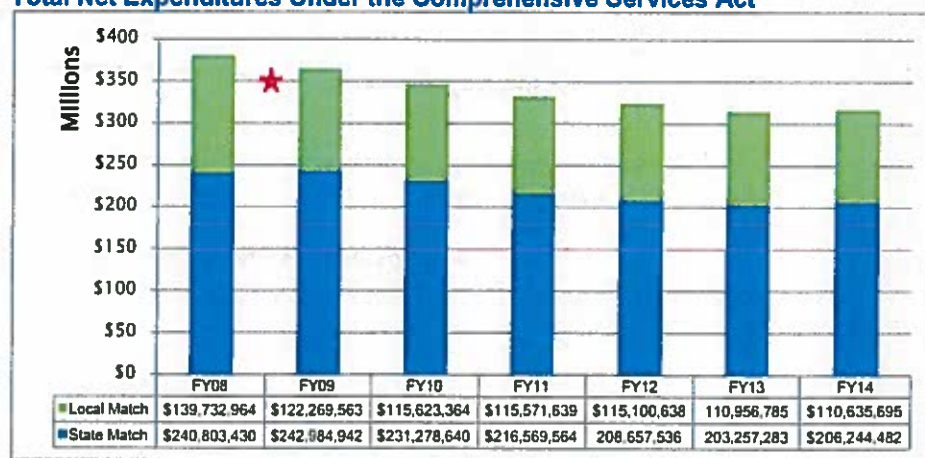
In accordance with the Appropriation Act, Item 283 (C)(3)(c)

Funding for services to children and families under the Comprehensive Services Act (CSA) is a shared responsibility of state and local governments. The incentive-based match rate system was designed to change practices so as to reduce reliance on residential care, serve children in their homes, and invest funds for the development of community based services. The incentive match rate system encourages the delivery of services consistent with the statutory purposes of the CSA, i.e., to:

- preserve and strengthen families;
- design and provide services that are responsive to the unique and diverse strengths and needs of troubled youth and families and;
- provide appropriate services in the least restrictive environment, while protecting the welfare of children and maintaining the safety of the public.

Under the incentive match rate system, a locality's share of residential services is 25% above its base match rate; the locality's share of community-based services is 50% below its base match rate.

Total Net Expenditures Under the Comprehensive Services Act



Implementation of the incentive match rate system

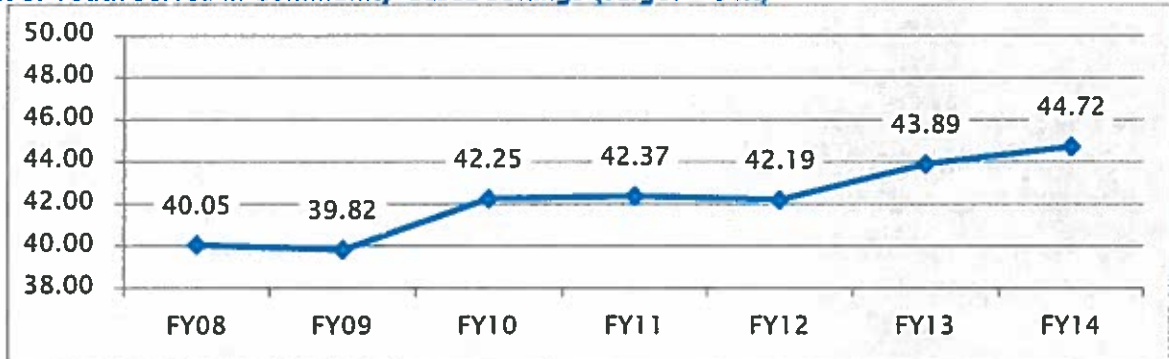
Effective Match Rate

	FY08	FY09	FY10	FY11	FY12	FY13	FY14
Effective Local Match Rate	35.80%	33.48%	33.33%	34.79%	35.55%	35.31%	34.91%
Effective State Match Rate	64.20%	66.52%	66.67%	65.21%	64.45%	64.69%	65.09%

The "effective match rate" reflects the impact of the mix of services at various match rates on the average match rate for all funded services.

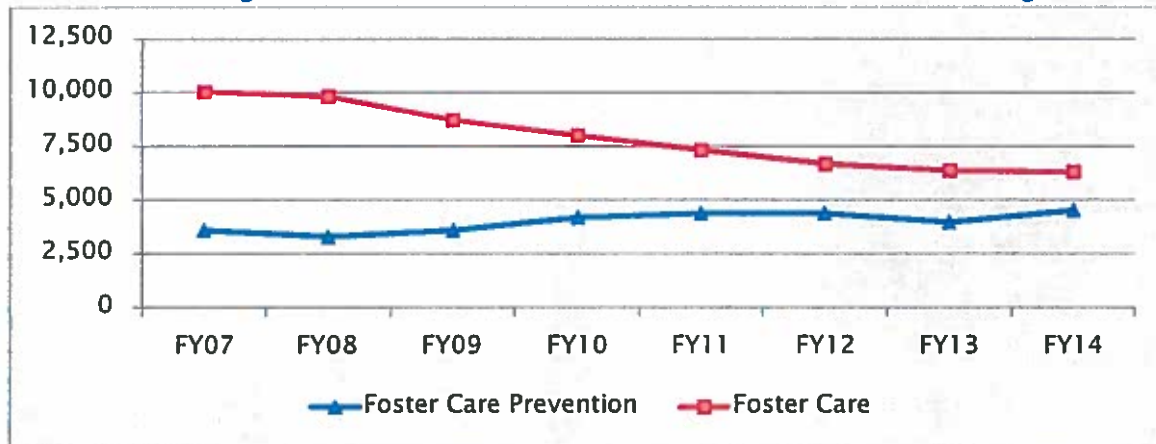
IMPACT OF THE INCENTIVE MATCH RATE SYSTEM ON THE CARE AND TREATMENT OF YOUTH

Percent of Youth Served in Community-Based Settings (Target = 50%)



This metric reflects youth who have been served within their families and communities, i.e., have not required out-of-home placement.

Number of Youth Receiving Foster Care and Foster Care Prevention Services Funded Through CSA



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**Office of
Comprehensive
Services**

Empowering communities to serve youth

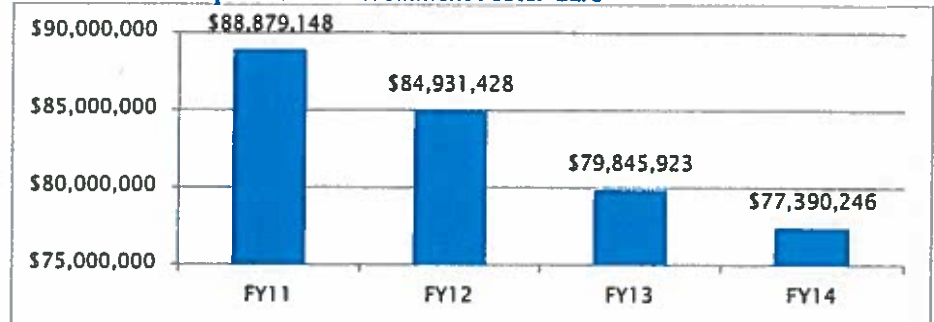
TREATMENT FOSTER CARE SERVICES UNDER THE CSA

Annual Report to the General Assembly, December 2014

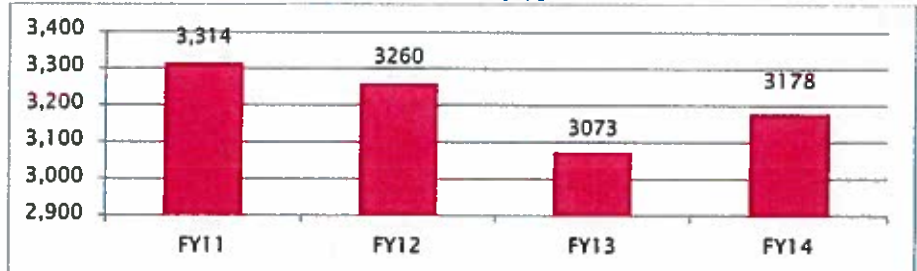
In accordance with Appropriation Act, Item 283 (L)(1)

Treatment foster care (TFC) is a community-based program where services are designed to address the special needs of children. Services to the children are delivered primarily by treatment foster parents who are trained, supervised, and supported by agency staff. Treatment is primarily foster family based and is planned and delivered by a treatment team. Treatment foster care focuses on a continuity of services, is goal-directed and results oriented, and emphasizes permanency planning for the child in care.

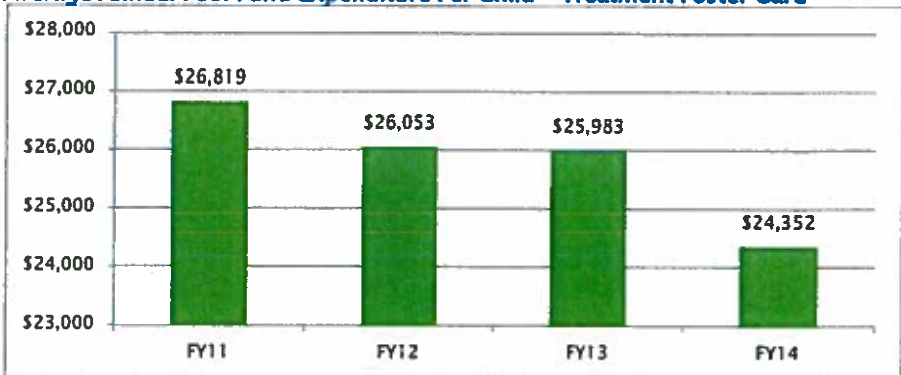
Total Pool Fund Expenditures – Treatment Foster Care



Number of Youth Served – Treatment Foster Care

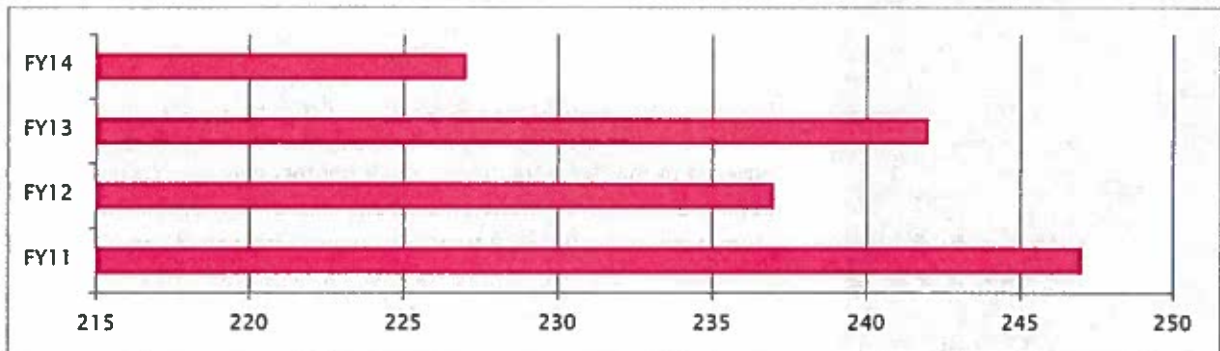


Average Annual Pool Fund Expenditure Per Child – Treatment Foster Care



TREATMENT FOSTER CARE SERVICES

Average Length of Stay (Number of Days) Per Child



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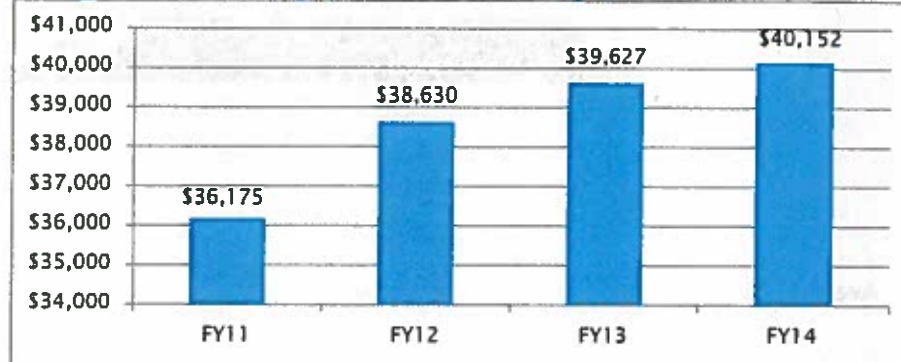
SPECIAL EDUCATION SERVICES UNDER THE CSA

Annual Report to the General Assembly, December 2014

In accordance with Appropriation Act, Item 283 (L)(2)

Children and youth with disabilities placed for purposes of special education in approved private school educational programs are included in the CSA target population and are eligible for funding (Code of Virginia §2.2-5211).

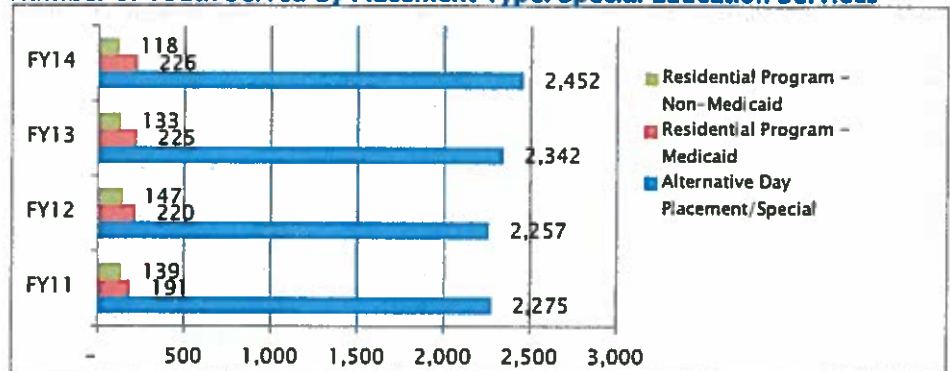
Average Annual CSA Expenditure Per Child – Special Education Services



Net CSA Expenditures by Placement Type – Special Education Services

	2012	2013	2014
Private Day School	\$ 78,724,431.00	\$ 85,521,888.84	\$ 92,737,763.00
Residential Program - Medicaid	\$ 5,783,148.00	\$ 6,439,137.83	\$ 7,487,249.00
Residential Program - Non-Medicaid	\$ 9,746,140.00	\$ 9,263,609.98	\$ 6,538,126.00
	\$ 94,253,719.00	\$ 101,224,636.65	\$ 106,763,138.00

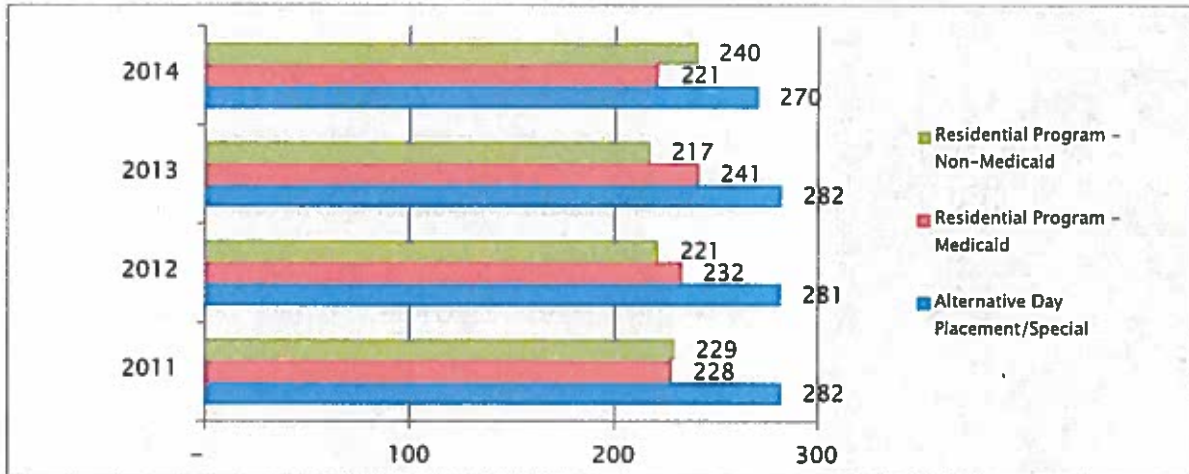
Number of Youth Served by Placement Type: Special Education Services



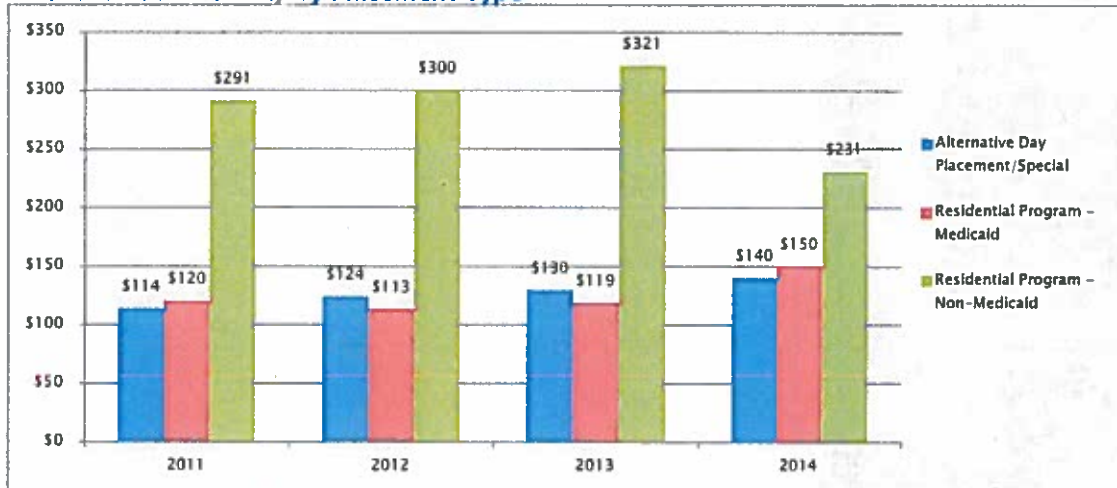
FY14 total unduplicated count of youth who received services in accordance with an Individualized Education Program (IEP) requiring private school placement = 2659.

SPECIAL EDUCATION SERVICES FUNDED UNDER THE COMPREHENSIVE SERVICES ACT

Average Length of Stay (Number of Days) by Placement Type



Average Cost Per Child Per Day by Placement Type



Costs reflect CSA expenditures only, i.e., do not include Medicaid expenditures for treatment services.

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UTILIZATION OF RESIDENTIAL CARE UNDER THE CSA

Annual Report to the Governor and General Assembly, December 2014
In accordance with Appropriation Act, Item 283 (B)(2)(d)

Since 2008 several significant strategies have been successful in decreasing the placement of children and youth into residential care. Strategies included implementation of the *Children's Services System Transformation* initiative and implementation of an incentive match rate system designed to encourage serving children and youth in community-based settings.

Total Net Expenditures for Residential Care

	FY11	FY12	FY13	FY14
Temporary Care Facility	\$ 1,285,219.00	\$ 1,596,438.00	\$ 1,077,147.22	\$ 960,815.00
Group Home	\$ 25,499,277.00	\$ 21,292,433.00	\$ 19,026,707.72	\$ 17,823,470.00
Residential Treatment Facility	\$ 26,871,773.00	\$ 7,342,541.00	\$ 23,153,523.55	\$ 20,486,591.00
TOTALS	\$ 53,656,269.00	\$ 50,231,412.00	\$ 43,257,378.49	\$ 39,270,876.00

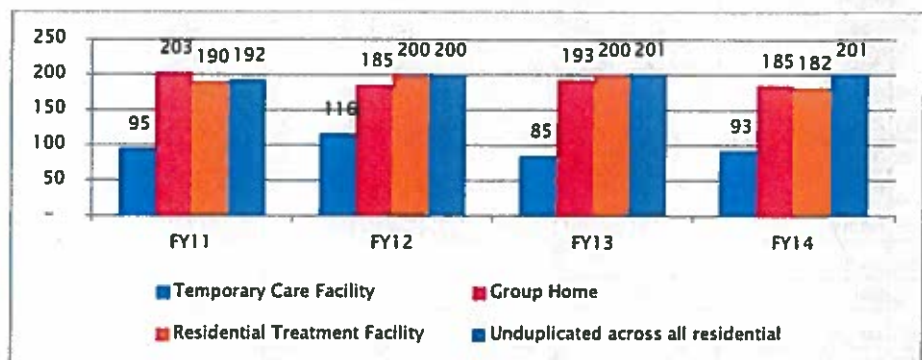
Number of Youth Served in Residential Care

	FY11	FY12	FY13	FY14
Temporary Care Facility	190	187	145	162
Group Home	1,089	909	802	861
Residential Treatment Facility	<u>1,276</u>	<u>1,233</u>	<u>1,176</u>	<u>1,171</u>
TOTAL UNDUPLICATED YOUTH COUNT	2,244	2,065	1,888	1,932

Total reflects the unduplicated count of youth across all residential settings. Number excludes youth placed for purposes of special education.

Average Length of Stay (Number of Days) Per Youth In Residential Care

Number reflects the average number of days per youth within the fiscal year (July 1 - June 30).



Utilization of Residential Care by Locality

See following pages

UTILIZATION OF RESIDENTIAL CARE UNDER THE CSA

FIPS	Locality	FY12				FY13				FY14			
		Youth	Days	Avg LOS	Expenditure	Youth	Days	Avg LOS	Expenditure	Youth	Days	Avg LOS	Expenditure
1	Accomack	3	467	156	\$110,955	9	1,426	158	\$153,145	9	1,952	217	\$216,326
3	Albemarle	48	9,477	197	\$1,519,082	56	10,351	185	\$1,355,600	50	15,615	312	\$1,198,920
5	Alleghany	9	1,778	198	\$138,467	8	1,750	219	\$138,358	6	1,982	330	\$212,943
7	Amelia	3	917	306	\$73,464	6	2,196	366	\$56,592	0	0	0	\$0
9	Amherst	12	2,816	235	\$261,497	5	1,022	204	\$143,976	11	3,698	336	\$209,254
11	Appomattox	7	1,291	184	\$163,330	9	1,815	202	\$160,914	7	1,136	162	\$73,153
13	Arlington	46	12,411	270	\$1,655,244	46	10,771	234	\$1,081,469	61	14,955	245	\$1,470,110
15	Augusta	17	3,457	203	\$214,390	13	2,556	197	\$139,959	16	4,366	273	\$222,546
17	Bath	0	0	0	\$0	0	0	0	\$0	0	0	0	\$0
19	Bedford County	10	1,260	126	\$124,144	7	1,610	230	\$194,119	5	764	153	\$82,985
21	Bland	3	931	310	\$34,928	4	1,102	276	\$36,013	3	805	268	\$16,334
23	Botetourt	5	1,342	268	\$185,771	8	1,088	136	\$136,591	9	2,715	302	\$197,354
25	Brunswick	1	365	365	\$29,703	0	0	0	\$0	3	744	248	\$29,950
27	Buchanan	22	6,429	292	\$567,574	17	4,174	246	\$416,285	24	6,017	251	\$425,923
29	Buckingham	5	1,646	329	\$128,624	3	653	218	\$116,813	6	1,611	269	\$179,144
31	Campbell	13	2,089	161	\$227,356	18	4,564	254	\$583,913	9	1,693	188	\$337,598
33	Caroline	12	3,228	269	\$215,355	10	2,410	241	\$336,778	12	2,636	220	\$416,506
35	Carroll	12	2,669	222	\$333,870	3	625	208	\$98,248	4	810	203	\$124,447
36	Charles City	0	0	0	\$0	0	0	0	\$0	0	0	0	\$0
37	Charlotte	6	970	162	\$84,943	2	428	214	\$34,189	5	953	191	\$68,821
41	Chesterfield	21	2,386	114	\$469,121	21	1,855	88	\$306,242	31	2,418	78	\$587,975
43	Clarke	3	659	220	\$152,018	0	0	0	\$0	1	277	277	\$1,418
45	Craig	4	1,100	275	\$41,018	1	366	366	\$1,071	3	324	108	\$30,690
47	Culpeper	19	5,572	293	\$782,367	22	6,060	275	\$839,310	24	8,073	336	\$752,498
49	Cumberland	5	716	143	\$88,209	2	106	53	\$9,743	2	606	303	\$64,680
51	Dickenson	14	2,314	165	\$212,289	19	3,194	168	\$394,558	10	1,833	183	\$108,603
53	Dinwiddie	10	1,070	107	\$146,428	9	1,097	122	\$167,203	10	1,617	162	\$161,597
57	Essex	3	168	56	\$6,998	6	1,132	189	\$86,348	9	1,842	205	\$94,994
61	Fauquier	9	2,499	278	\$348,795	11	2,803	255	\$305,135	15	3,897	260	\$244,929
63	Floyd	3	394	131	\$33,678	4	910	228	\$69,955	7	1,460	209	\$69,618
65	Fluvanna	25	5,594	224	\$740,410	19	4,192	221	\$720,041	30	6,235	208	\$865,412
67	Franklin County	23	4,898	213	\$276,824	24	6,314	263	\$308,054	28	8,412	300	\$314,853
69	Frederick	12	2,971	248	\$193,475	9	1,998	222	\$206,290	16	3,090	193	\$321,587
71	Giles	8	1,584	198	\$80,582	5	1,066	213	\$252,887	6	1,973	329	\$230,034
73	Gloucester	2	406	203	\$48,819	4	1,037	259	\$127,409	4	302	76	\$13,069
75	Goochland	3	824	275	\$81,371	2	660	330	\$49,814	2	464	232	\$26,042
77	Grayson	10	1,975	198	\$157,903	7	1,725	246	\$132,702	9	1,976	220	\$121,959
79	Greene	1	279	279	\$35,230	2	574	287	\$22,867	2	501	251	\$35,779
83	Halifax	24	6,762	282	\$833,975	21	5,577	266	\$669,486	13	3,979	306	\$434,148
85	Hanover	23	4,724	205	\$989,884	22	4,857	221	\$844,437	11	5,791	526	\$566,100
87	Henrico	13	2,451	189	\$222,829	17	3,298	194	\$338,131	17	4,278	252	\$326,420
89	Henry	7	1,488	213	\$149,892	10	2,487	249	\$285,499	6	1,618	270	\$210,085
91	Highland	0	0	0	\$0	0	0	0	\$0	1	92	92	\$13,291
93	Isle of Wight	1	190	190	\$45,640	1	65	65	\$3,213	2	250	125	\$46,726
95	James City	2	730	365	\$61,823	1	366	366	\$58,277	6	1,377	230	\$137,819
97	King & Queen	0	0	0	\$0	0	0	0	\$0	0	0	0	\$0
99	King George	23	7,141	310	\$520,320	20	5,607	280	\$266,657	21	5,807	277	\$274,094
101	King William	1	99	99	\$18,857	2	77	39	\$14,856	4	820	205	\$81,510
103	Lancaster	10	2,447	245	\$284,364	10	2,597	260	\$483,811	9	3,415	379	\$329,563
105	Lee	4	188	47	\$30,390	6	1,481	247	\$41,762	8	1,217	152	\$28,430
107	Loudoun	26	4,048	156	\$695,226	16	1,622	101	\$310,088	16	1,838	115	\$297,762

UTILIZATION OF RESIDENTIAL CARE UNDER THE CSA

FIPS	Locality	FY12				FY13				FY14			
		Youth	Days	Avg LOS	Expenditure	Youth	Days	Avg LOS	Expenditure	Youth	Days	Avg LOS	Expenditure
109	Louisa	17	5,461	321	\$381,446	9	1,397	155	\$231,848	10	1,453	145	\$155,129
111	Lunenburg	5	1,491	298	\$39,447	7	2,453	350	\$209,929	6	2,580	430	\$141,643
113	Madison	14	3,080	220	\$389,128	18	4,888	272	\$678,029	20	5,836	292	\$534,204
115	Mathews	1	361	361	\$16,080	0	0	0	\$0	1	13	13	\$2,249
117	Mecklenburg	5	1,006	201	\$77,544	8	1,597	200	\$192,496	9	3,030	337	\$276,581
119	Middlesex	0	0	0	\$0	0	0	0	\$0	0	0	0	\$0
121	Montgomery	7	1,829	261	\$284,960	6	1,104	184	\$133,394	5	1,455	291	\$20,660
125	Nelson	5	948	190	\$65,352	3	525	175	\$3,032	8	983	123	\$14,646
127	New Kent	4	626	157	\$90,598	6	551	92	\$89,181	5	1,361	272	\$97,202
131	Northampton	5	550	110	\$74,899	7	1,946	278	\$134,342	1	148	148	\$22,748
133	Northumberland	1	1	1	\$22,908	0	0	0	\$0	0	0	0	\$0
135	Nottoway	16	4,284	268	\$431,717	17	4,309	253	\$587,099	10	2,541	254	\$576,335
137	Orange	12	2,438	203	\$489,984	12	2,243	187	\$445,575	10	2,054	205	\$439,843
139	Page	7	1,302	186	\$391,495	7	1,888	270	\$218,494	7	710	101	\$72,853
141	Patrick	0	0	0	\$0	0	0	0	\$0	0	0	0	\$0
143	Pittsylvania	8	1,656	207	\$292,600	13	2,537	195	\$263,381	10	2,648	265	\$231,309
145	Powhatan	5	1,280	256	\$85,324	5	898	180	\$80,330	13	2,105	162	\$237,128
147	Prince Edward	0	0	0	\$0	2	437	219	\$33,797	2	411	206	\$28,872
149	Prince George	4	759	190	\$80,528	0	0	0	\$0	2	564	282	\$49,824
153	Prince William	131	25,948	198	\$4,786,870	102	22,205	218	\$3,967,545	109	11,031	101	\$2,407,696
155	Pulaski	37	6,728	182	\$746,303	48	8,601	179	\$1,326,564	28	3,481	124	\$588,114
157	Rappahannock	15	4,441	296	\$459,556	17	4,233	249	\$298,758	12	4,027	336	\$283,702
159	Richmond County	2	396	198	\$5,842	1	194	194	\$28,424	1	541	541	\$28,488
161	Roanoke County	8	2,340	293	\$256,387	9	2,196	244	\$157,849	15	5,104	340	\$289,501
163	Rockbridge	12	2,952	246	\$251,883	9	2,692	299	\$191,156	14	3,229	231	\$338,757
165	Rockingham	26	6,677	257	\$991,197	33	7,839	238	\$817,955	31	7,785	251	\$1,051,737
167	Russell	21	2,738	130	\$382,550	16	3,836	240	\$299,247	11	2,348	213	\$165,966
169	Scott	3	793	264	\$159,607	3	373	124	\$10,903	5	673	135	\$93,691
171	Shenandoah	14	2,959	211	\$184,793	15	3,402	227	\$229,079	14	2,481	177	\$109,816
173	Smyth	2	225	113	\$29,122	4	368	92	\$41,541	3	668	223	\$6,945
175	Southampton	5	694	139	\$90,034	3	488	163	\$63,058	2	410	205	\$66,986
177	Spotsylvania	46	7,649	166	\$1,211,145	45	6,989	155	\$512,821	48	12,377	258	\$1,173,396
179	Stafford	32	7,767	243	\$703,414	25	3,981	159	\$349,145	18	3,559	198	\$260,969
181	Surry	1	150	150	\$60,726	1	366	366	\$142,828	1	365	365	\$71,323
183	Sussex	1	365	365	\$321	5	1,177	235	\$84,980	0	0	0	\$0
185	Tazewell	3	944	315	\$122,709	4	1,098	275	\$115,050	8	1,972	247	\$183,965
187	Warren	8	1,361	170	\$170,049	5	287	57	\$47,485	8	1,162	145	\$100,963
191	Washington	24	4,361	182	\$238,873	19	4,090	215	\$177,943	16	4,211	263	\$193,473
193	Westmoreland	6	956	159	\$184,334	9	2,077	231	\$307,477	11	3,846	350	\$316,418
195	Wise	9	2,525	281	\$214,162	12	2,814	235	\$192,479	20	4,019	201	\$413,652
197	Wythe	18	4,874	271	\$422,386	16	3,808	238	\$299,225	15	3,092	206	\$163,841
199	York	3	633	211	\$60,972	3	420	140	\$97,125	5	1,198	240	\$144,329
510	Alexandria	58	8,389	145	\$1,004,320	12	1,161	97	\$370,928	8	412	52	\$73,053
515	Bedford City	3	975	325	\$42,033	1	149	149	\$21,899	0	0	0	\$0
520	Bristol	29	6,596	227	\$347,692	32	8,951	280	\$317,480	34	9,267	273	\$226,197
530	Buena Vista	5	567	113	\$41,714	4	737	184	\$50,867	5	1,487	297	\$74,649
540	Charlottesville	58	10,900	188	\$1,429,979	51	10,854	213	\$1,372,473	44	6,894	157	\$765,809
550	Chesapeake	7	749	107	\$95,648	15	1,594	106	\$193,833	14	1,232	88	\$239,410
570	Colonial Heights	2	116	58	\$23,434	0	0	0	\$0	0	0	0	\$0
580	Covington	12	3,265	272	\$212,187	5	1,329	266	\$77,333	6	2,101	350	\$103,785

UTILIZATION OF RESIDENTIAL CARE UNDER THE CSA

FIPS	Locality	FY12				FY13				FY14			
		Youth	Days	Avg LOS	Expenditure	Youth	Days	Avg LOS	Expenditure	Youth	Days	Avg LOS	Expenditure
590	Danville	22	4,659	212	\$598,963	16	3,059	191	\$503,034	20	3,621	181	\$549,839
620	Franklin City	2	69	35	\$10,240	4	658	165	\$60,745	1	11	11	\$1,364
630	Fredericksburg	8	1,393	174	\$203,304	7	1,134	162	\$113,398	6	270	45	\$63,437
640	Galax	4	532	133	\$86,712	4	1,356	339	\$90,310	1	152	152	\$30,670
650	Hampton	0	0	0	\$0	0	0	0	\$0	0	0	0	\$0
660	Harrisonburg	30	8,330	278	\$748,343	22	6,263	285	\$584,015	25	5,989	240	\$832,566
670	Hopewell	10	1,789	179	\$247,726	7	2,214	316	\$281,426	9	1,103	123	\$50,450
678	Lexington	2	177	89	\$566	2	225	113	\$30,760	2	626	313	\$85,875
680	Lynchburg	63	7,777	123	\$621,631	54	7,994	148	\$650,352	62	6,431	104	\$778,746
683	Manassas City	9	1,736	193	\$124,080	4	501	125	\$24,628	5	717	143	\$75,783
685	Manassas Park	0	0	0	\$0	1	15	15	\$400	1	60	60	\$15,170
690	Martinsville	0	0	0	\$0	1	366	366	\$50,660	0	0	0	\$0
700	Newport News	5	736	147	\$164,057	4	741	185	\$142,912	6	1,014	169	\$109,942
710	Norfolk	72	9,879	137	\$1,250,618	60	7,054	118	\$899,563	40	4,048	101	\$791,670
720	Norton	0	0	0	\$0	4	230	58	\$44,185	5	1,472	294	\$84,685
730	Petersburg	28	4,510	161	\$682,894	21	4,007	191	\$666,865	22	6,091	277	\$834,459
735	Poquoson	1	365	365	\$57,088	1	366	366	\$56,505	2	332	166	\$59,357
740	Portsmouth	4	1,213	303	\$103,905	4	1,092	273	\$107,535	4	1,446	362	\$110,743
750	Radford	5	1,119	224	\$133,166	8	1,404	176	\$207,734	11	2,421	220	\$477,423
760	Richmond City	93	20,049	216	\$2,208,009	81	15,638	193	\$1,234,387	108	20,975	194	\$1,383,018
770	Roanoke City	63	14,573	231	\$1,259,642	61	16,384	269	\$1,501,897	55	3,566	65	\$924,919
775	Salem	4	832	208	\$59,989	7	1,108	158	\$60,933	5	1,137	227	\$26,131
790	Staunton	10	1,653	165	\$90,952	8	1,263	158	\$104,177	7	1,553	222	\$78,273
800	Suffolk	7	874	125	\$117,134	9	1,164	129	\$93,548	7	1,336	191	\$187,936
810	Virginia Beach	125	28,968	232	\$3,854,973	114	23,438	206	\$2,796,167	118	34,004	288	\$2,962,896
820	Waynesboro	3	232	77	\$25,666	8	1,108	139	\$141,669	12	2,715	226	\$205,415
830	Williamsburg	3	345	115	\$58,875	3	514	171	\$38,469	1	199	199	\$27,382
840	Winchester	10	1,235	124	\$213,552	4	1,127	282	\$173,959	5	1,494	299	\$105,198
####	Greensville/Empo	2	527	264	\$26,881	4	753	188	\$80,051	3	711	237	\$58,433
####	Fairfax/Falls Church	220	33,420	152	\$5,320,762	204	32,189	158	\$4,553,910	201	18,914	94	\$3,247,240
Totals		2,065	413,317	200	\$50,231,412	1,888	380,111	201	\$43,257,378	1,932	387,506	201	\$39,270,876

OFFICE OF COMPREHENSIVE SERVICES

ADMINISTERING THE COMPREHENSIVE SERVICES ACT FOR AT-RISK YOUTH AND FAMILIES



REGIONAL AND STATEWIDE TRAINING REGARDING CSA

Annual Report to the General Assembly, December 2014

In accordance with Appropriation Act, Item 283 (B)(6)

The Comprehensive Services Act (CSA, §2.2-2648 et seq) was enacted in 1993 to create a collaborative system of services and funding for at-risk youth and families.

The CSA establishes local multidisciplinary teams responsible to work with families to plan services according to each child's unique strengths and needs and to administer the community's CSA activities.

The Office of Comprehensive Services (OCS) is the administrative entity responsible for ensuring effective and efficient implementation of the CSA across the Commonwealth.

Guiding principles for OCS include:

- Child and family directed care,
- Equitable access to quality services,
- Responsible and effective use of public funds,
- Support for effective, evidence-based practices, and
- Collaborative partnerships across state, local, public, and private stakeholders.



Office of
Comprehensive
Services

Empowering communities to serve youth

The mission of the Office of Comprehensive Services (OCS) is to facilitate 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 of Virginia. To support this mission, OCS develops and implements annually a robust training plan. In accordance with the 2014 training plan, the following activities were implemented:

- The 3rd Annual Commonwealth of Virginia CSA Conference, *"Embracing Virginia's System of Care: Commitment Matters"* was provided for an audience of 535 participants. Individual training sessions are summarized on pages 5 through 8 of this report.

Participant Summary*:

119 out of 131 localities were represented

State agency participants	46
Local CSA Staff (Coordinator/UR Specialist/Other)	109
Family Assessment and Planning Team Members	147
Community Policy and Management Team Members	134
Private Providers (registrants & sponsors)	65
Other: Advocate, Parent, Child Organization	15

Note: Not all participants identified the category they represented

- Forty-four regional and stakeholder trainings were provided to 2,219 participants. Training topics, dates, and participant numbers are summarized on pages 2 through 4 of this report.
- Online training materials were made available through the Commonwealth of Virginia's Knowledge Center.
- Site-based technical assistance was provided per requests of local and regional CSA stakeholders.
- Online "Ask OCS Help Desk" was maintained.

FUNDS EXPENDED FOR REGIONAL AND STATEWIDE TRAINING

3 rd Annual CSA Conference	\$ 35,000
On-line Training/Certification: Uniform Assessment Instrument	\$ 22,000
New CSA Coordinators Academy	\$ 4,246
CANS Super User Training	\$ 5,430
OCS Staff Development	\$ 1,123
TOTAL*	\$ 67,799

**Total does not include costs for mileage, lodging, and training materials for training sessions conducted by the Office of Comprehensive Services.*

OUTREACH TRAINING FOR REGIONAL AND STAKEHOLDER CONSTITUENTS FISCAL YEAR 2014

(Participant evaluations of training sessions are available for review at the Office of Comprehensive Services)

TOPIC (Trainer, Agency/Organization)	PARTICIPANT GROUP	DATE(S)	NUMBER OF PARTICIPANTS
Technical Assistance Focus Group (Graham, OCS)	Carroll County CSA	07/09/13	16
Pool Fund Reimbursement Categories and Utilization Management (Savage & Fisher, OCS)	Eastern Region (Portsmouth)	07/12/13	45
High Fidelity Wraparound: Engagement Chantilly (University of Maryland)	Center of Excellence HFW Training Cohort II	07/23/13	43
High Fidelity Wraparound: Introduction Blacksburg (University of Maryland)	Center of Excellence HFW Training Cohort II	07/24 – 07/26/13	43
CSA for Aspiring Leaders of Special Education (Clare, OCS)	VDOE	07/30/13	31
CSA for Parents and Advocates (Clare, OCS)	ARC of Virginia	08/08/13	8
High Fidelity Wraparound and CSA – Richmond (Fisher, OCS)	FAPT/CPMT/CSA Coordinators/ UM-UR specialists	08/08/13	62
High Fidelity Wraparound and CSA – Portsmouth (Fisher, OCS)	FAPT/CPMT/CSA Coordinators/ UM-UR specialists	08/12/13	43
High Fidelity Wraparound and CSA – Harrisonburg (Fisher, OCS)	FAPT/CPMT/CSA Coordinators/ UM-UR specialists	08/16/13	26
High Fidelity Wraparound and CSA – Bristol (Pegram, OCS)	FAPT/CPMT/CSA Coordinators/ UM-UR specialists	08/21/13	16
High Fidelity Wraparound: Engagement Blacksburg (University of Maryland)	Center of Excellence HFW Training Cohort III	08/27/13	43
High Fidelity Wraparound and CSA – Lynchburg (Fisher, OCS)	FAPT/CPMT/CSA Coordinators/ UM-UR specialists	08/27/13	35
High Fidelity Wraparound and CSA – Fairfax (Pegram, OCS)	FAPT/CPMT/CSA Coordinators/ UM-UR specialists	09/05/13	67
Technical Assistance Focus Group (Graham, OCS)	Isle of Wight County CSA	09/10/13	24
Webinar: Use of State Pool Funds for CB-BH Services (Wilson & Reiner, OCS)	CPMT & FAPT Members/ CSA Coordinators	09/27/13	26

Webinar: Use of State Pool Funds for CB-BH Services (Wilson & Reiner, OCS)	CPMT & FAPT Members/ CSA Coordinators	10/01/13	33
Webinar: Use of State Pool Funds for CB-BH Services (Wilson & Reiner, OCS)	CPMT & FAPT Members/ CSA Coordinators	10/09/13	29
FAPT and CPMT Roles and Responsibilities (Fisher, OCS)	Carroll County CSA	10/10/13	14
Structural Supports of CSA: Stakeholder Roles in Building a Strong CSA Foundation (Larkin & Bacote, OCS)	Carroll County CSA	10/10/13	14
CAN CSA Pay? (Fisher, OCS)	Fluvanna County CSA	10/22/13	21
High Fidelity Wraparound and CSA (Fisher, OCS)	Petersburg/Dinwiddie CSA	10/23/13	21
CSA Roles and Responsibilities for DSS Directors (Clare, OCS)	New Local DSS Directors Learning Experience	10/30/13	14
CPMT and FAPT Roles and Responsibilities (Fisher, OCS)	Northern Shenandoah Valley CSA	11/05/13	31
High Fidelity Wraparound: Implementation – Central Virginia (Pegram & Fisher, OCS)	Center of Excellence HFW Training Cohort I	11/06/13	29
New CSA Coordinators Academy (OCS Staff and Various Presenters)	New CSA Coordinators	11/13 – 11/15/13	18
Court Teams and CSA as Partners in a System of Care (Clare & Reiner, OCS)	Statewide Court Improvement Program Conference	12/12/13	~500
CSA: Shared State-Local Responsibility (Clare, OCS)	VACo – New County Supervisors Conference	01/04/14	~70
High Fidelity Wraparound: Implementation – Western Virginia (Pegram, OCS)	Center of Excellence HFW Training Cohort III	01/15/14	31
CSA for New Special Education Directors (Clare, OCS)	VDOE	01/07/14	17
Webinar: Using CANS for Effective Service Planning – Part 1 (Wilson, OCS)	CSA Coordinators/FAPT Members/ Agency Case Mgrs.	02/28/14	108
CSA Overview/Blending and Braiding of Funds (Clare, OCS)	Western Tidewater Best Practices Court Conference	02/28/14	125
CSA for Aspiring Leaders of Special Education (Clare, OCS)	VDOE	03/06/14	40

Mental Health Services for Youth and Families (Clare, OCS w/DMAS & Magellan)	13 th Annual Northern Virginia CSA Symposium	03/12/14	80
Keynote Address: The CSA after 20 Years: How the System Continues to Best Serve Children and Families Through Partnership with Private Providers (Clare, OCS)	Annual VAISEF Conference	04/10/14	86
CSA 101: The Process Explained, OCS Resources, and Q & A (Nemeyer & Clare, OCS)	Annual VAISEF Conference	04/10/14	86
CSA Roles and Responsibilities (Wilson & Antell, OCS)	Grayson County CSA	04/16/14	13
Webinar: Using CANS for Effective Service Planning – Part 2 (Wilson, OCS)	CSA Coordinators/FAPT Members/Agency Case Mgrs.	04/25/14	48
Getting the Most Out of CSA for Youth Served by DSS (Reiner & Wilson, OCS)	VLSSE Conference	05/08/14	33
High Fidelity Wraparound: Introduction – Lynchburg (Youth and Family Training Institute)	Center of Excellence HFW Training Cohort IV	05/21 – 5/23/14	35
New CANS Super User Training (John Lyons, Ph.D.)	New CANS Super Users/Statewide	06/02/14	52
Experienced CANS Super User Training (John Lyons, Ph.D.)	Existing CANS Super Users/Statewide	06/03/14	35
High Fidelity Wraparound: Introduction – Reston (Youth and Family Training Institute)	Center of Excellence HFW Training Cohort V	06/02 – 06/04/14	34
High Fidelity Wraparound: Local Coaches and Supervisors – Reston (Youth and Family Training Institute)	Center of Excellence HFW Training	06/05 – 06/06/14	15
High Fidelity Wraparound: Introduction – Richmond (Youth and Family Training Institute)	Center of Excellence HFW Training Cohort VI	06/09/ – 06/11/14	59

Total Number of Participants Trained – Regional Training Sessions: 2,219

**3rd ANNUAL CSA CONFERENCE
BREAKOUT TRAINING SESSIONS
MARCH 23 – 25, 2014**

Participant evaluations for training sessions are available for review at the Office of Comprehensive Services

TOPIC	TRAINER	NUMBER OF PARTICIPANTS
Pre-conference Workshop: Seminar for CSA Coordinators	Karen Reilly-Jones, CSA Coordinator Chesterfield-Colonial Heights	85
Keynote Session:	Linda Fisher Thornton Leading in Context LLC	535
Compassion Fatigue and Burnout	J. Patrick Slifka, LCSW, Director of Training Stephan Stark, VP, Planning and Development National Counseling Group	56
Developmentally-Informed Responses to Youth in the Juvenile Justice System	Jeffrey Aaron, PhD, Facility Director Commonwealth Center for Children and Adolescents	60
Outcomes vs. Processes: What are you measuring?	Betsy Clark, MSW, CSA Coordinator Denise Galloway, Deputy Director/Dept. of Human Services City of Hampton, VA	27
Practical Application: Applying the Highest Ethics in Our Agencies	Linda Fisher Thornton Leading in Context LLC	12
Supporting Students Experiencing Homelessness: What Family Assessment and Planning Teams Need to Know	Patricia Popp, PhD, State Coordinator Project Hope-VA Pam Kestner, MSW, Homeless Outcomes Coordinator Office of the Secretary of Health and Human Resources	27
Where do "U" Fit in UM	Mills Jones, CSA Coordinator Goochland County, VA	59
Bringing Systems of Care to Scale in Virginia	Janet Lung, Director Office of Child and Family Services, VDBHDS	21

Engaging Families Before, During and After a Crisis	Peggy Sinclair, CPMT Parent Rep. Audrey Brown, Parent Liaison, UMFS Cate Newbanks, FACES of Virginia Families	29
Strengthening Team Development and Rapport	FAPT and CPMT Members City of Alexandria, VA	38
Understanding and Working with Children Exposed to Trauma	Valerie Koeppel, MEd, Director Dan Karlow, MS, National Training Coord. Youth Advocate Programs Roanoke, VA	55
Promoting Evidence-Based Practices in Children's Mental Health	Amy Atkinson, Executive Director Virginia Commission on Youth Margaret Nimmo Crowe, Exec. Director Voices for Virginia's Children	82
Strategies for a Family-Driven and Youth Guided Approach in Policy and Practice	Stephany Melton Hardison, MSW, Director of Children & Youth Policy & Programs, NAMI Virginia Amanda Long, MSW, Virginia Family Network Youth Coordinator NAMI Virginia	33
AIM FORWARD: A Trauma Informed Model for Recovery	Allison Sampson, PhD Vice President of Clinical Operations Providence Service Corporation	~75
CSA Program Audits: Self-Assessment Workshop	Stephanie Bacote, Program Auditor Annette Larkin, Program Auditor Office of Comprehensive Services	41
Prevalence, Identification and Entry into Domestic Minor Sex Trafficking (Parts 1 and 2)	Elizabeth Scaife, Director of Training Shared Hope International Courtney Gaskins, Dir. Program Services Youth for Tomorrow	63
What You Need to Know About Special Education	Patricia Haymes Virginia Department of Education.	24

Two Roads Converge: Navigating Issues at the Intersection of Juvenile and Domestic Court and Comprehensive Services Act	Hon. Anita Filson, Judge, J & DR Court Hon. Frank Somerville, Judge, J & DR Court Hon. Philip Trompeter, Judge, J & DR Court Lelia Hopper, Director, Court Improvement Program, Office of the Executive Secretary Supreme Court of Virginia	58
Blending and Braiding Funds to Support a System of Care	Susan Clare, Executive Director Scott Reiner, Assistant Director Office of Comprehensive Services	24
CHINS and CSA Parental Agreements	Carol Wilson, Policy Analyst Office of Comprehensive Services	25
Trauma Past, Trauma Present: Relevance of Trauma to Stakeholders Serving Court Involved Youth	Allison Sampson, PhD Vice President of Clinical Operations Providence Service Corporation	~75
Unraveling the Mysteries of Medicaid	Brian Campbell, Senior Policy Analyst—Behavioral Health Steve Ankiel, Program Manager—Division of Long Term Care VA Dept. of Medical Assistance Services	23 37
What's New in Child Welfare	Alex Kamberis, Assistant Director, Division of Family Services VA Department of Social Services	27
Challenging CSA Cases: A Dialogue and Brainstorming Session	Anna Antell, Program Consultant Brady Nemeyer, Program Consultant Office of Comprehensive Services	18
Interface of Managed Behavioral Health Services with CSA Services	Latanya Hairston, Foster Care and Adoption Assistance Coordinator VA Department of Social Services Jim Forrester, EdD, Director System of Care, Magellan of Virginia Stacy Gill, MSW Clinical Director, Magellan of Virginia Varun Choudhry, MD Medical Director, Magellan of Virginia	

When Attachment Issues Come to School: Understanding and Applying Attachment Principles to Reach and Teach Difficult Children	Stephen Armstrong, EdD, Clinical Counselor Timber Ridge School	5
When Good People Do Nothing	Michael Gasper, MSW, Executive Director Abigail Shreiner, MSW, Policy Planning and Community Relations Manager Extra Special Parents	13

Total Cumulative Count of Individuals Trained in Breakout Sessions: 1598

NOTE: conference participants had the opportunity to participate in up to six breakout sessions in addition to the Keynote Session

Office of Comprehensive Services

Report of Training Activities

Period Covered: July 1, 2014 – June 30, 2015

Topic (Presenter)	Organization/Group/Audience	Date	Participants
Technical Assistance Training (CANS and Service Planning) (Carol Wilson)	Pittsylvania County CSA	07/01/14	24
Technical Assistance Training (Policies, Roles/Responsibilities) (Brady Nemeyer/Anna Antell)	Harrisonburg-Rockingham CSA	7/24/2014	13
HFW Family Support Partner Training - Arlington, VA (Youth and Family Training Institute)	HFW FSP	9/8/14-9/10/14	21
HFW Supervisors Training - Richmond, VA (Youth and Family Training Institute)	ICC Providers	9/29/2014	41
CSA Overview (Brady Nemeyer)	Magellan Care Managers	10/15/2014	48
High Fidelity Wraparound: Introduction (Days 4 - 5) - Bristow, VA (Youth and Family Training Institute)	ICC Providers (Cohorts 4 - 6)	10/15/14-10/16/14	28
High Fidelity Wraparound: Bridge - Bristow, VA (Youth and Family Training Institute)	ICC Providers (Cohorts 1 - 3)	10/17/2014	21
CSA Roles and Responsibilities for DSS Directors (Susie Clare/Scott Reiner)	New Local DSS Directors Learning Experience	10/22/14	19
FAPT and CPMT Roles and Responsibilities (Brady Nemeyer)	Highland County CSA	10/27/2014	13
High Fidelity Wraparound: Introduction (Days 4 - 5) - Richmond, VA (Youth and Family Training Institute)	ICC Providers (Cohorts 4 - 6)	10/27/14-10/28/14	28
High Fidelity Wraparound: Bridge - Bristow, VA (Youth and Family Training Institute)	ICC Providers (Cohorts 1 - 3)	10/29/2014	45
High Fidelity Wraparound: Introduction (Days 4 - 5) - Richmond, VA (Youth and Family Training Institute)	ICC Providers (Cohorts 4 - 6)	10/30/14-10/31/14	28
Where We Are Headed With the Comprehensive Services Act (Susie Clare/Scott Reiner/Brady Nemeyer)	VCOPPA Annual Meeting	11/8/2014	50
"The Doctor Is In" - HHR Session (Susie Clare)	Virginia Association of Counties Annual Meeting	11/10/2014	15
High Fidelity Wraparound: Introduction (Days 4 - 5) - Rocky Mount, VA (Youth and Family Training Institute)	ICC Providers (Cohorts 4 - 6)	11/12/14-11/13/14	22
High Fidelity Wraparound: Bridge - Rocky Mount, VA (Youth and Family Training Institute)	ICC Providers (Cohorts 1 - 3)	11/14/2014	12
Demystifying CSA (Scott Reiner)	Statewide CASA Conference (Hampton, VA)	11/14/2014	40
CSA Update (Susie Clare)	Virginia Commission on Youth	11/17/2014	50
ICC Overview (Anna Antell/Rachelle Buller)	James City County FAPT/CPMT	11/18/2014	18
Leadership for Navigating the CSA Process (Susie Clare)	New DOE Special Education Directors	1/6/2015	47
Webinar: Supporting Family Support Partners (Anna Antell with UMFS, NAMI and DBHDS)	ICC Provider Agencies	2/24/2015	39
CSA Overview (Antell)	Family Support Partners @ UMFS	3/10/2015	5
New CSA Coordinators Academy (Staff plus invited speakers)	Newly hired CSA Coordinators	3/10/15-3/12/15	25
CSA for Aspiring Leaders of Special Education (Susie Clare)	VDOE	3/12/2015	27
Leading from the Middle - Professional Development Workshop for CSA Coordinators (Terrie Glass)	CSA Coordinators	4/19/2015	
4th Annual CSA Conference	All CSA Stakeholders	4/20/15-4/21/15	
CSA Overview (Scott Reiner)	Lynchburg Best Practices Court Conference	5/18-19/2015	
High Fidelity Wraparound: Introduction (Days 1 - 2) Cohort 7 - Richmond, VA (YFTI, Anna Antell)	ICC Providers	5/20/2015	
High Fidelity Wraparound Refresher - Richmond, VA (YFTI)	ICC Providers	5/21/2015	
High Fidelity Wraparound Refresher - Richmond, VA (YFTI)	ICC Providers	5/30/2015	
CSA Overview (Brady Nemeyer)	Tazewell County Best Practices Court	6/15-8/16/2015	
High Fidelity Wraparound: Introduction (Days 3 - 4) Cohort 7 - Richmond, VA (YFTI, Anna Antell)	ICC Providers	6/17/2015	
High Fidelity Wraparound Refresher - Rocky Mount, VA (YFTI)	ICC Providers	6/18/2015	
High Fidelity Wraparound Refresher - Charlottesville, VA (YFTI)	ICC Providers	6/18/2015	

DRAFT --- TRAINING PLAN --- DRAFT
Fiscal Year 2016

Developed in accordance with 2014 Appropriation Act, Item 279, Section B.6

The mission of the Comprehensive Services Act (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. One important mechanism for achieving this mission is through development and implementation of a robust training plan. The Code of Virginia requires that the Office of Comprehensive Services (OCS) “provide for training and technical assistance to localities in the provision of efficient and effective services that are responsive to the strengths and needs of troubled and at-risk youths and their families.” In accordance with provisions of the biennial Appropriation Act, the Office of Comprehensive Services presents an annual training plan to the State Executive Council for approval. This document outlines the OCS FY2016 Training Plan for the period of July 1, 2015 – June 30, 2016.¹

I. GOALS

A. TO INCREASE KNOWLEDGE, SKILLS, AND COMPETENCIES OF INDIVIDUALS HOLDING CSA SPECIFIC ROLES AND RESPONSIBILITIES TO ENSURE EFFECTIVE IMPLEMENTATION OF THE CSA.

Objectives:

- To enhance effectiveness and positive outcomes for youth and families by ensuring that the core requirements of CSA and the principles of a system of care are known to individuals who serve key roles within the structures of CSA.
- To assure that basic competencies in CSA practice are applied to local operations.
- To enhance the levels of knowledge and skills of core members of local CSA team members.
- To support, encourage and motivate key CSA participants to realize the mission and vision of the CSA and the system of care through collaboration and excellence in practice.

Target Audiences:

- CSA Coordinators; CPMT members; FAPT members; Fiscal Agents; Utilization Review Specialists; External Auditors.

Topics:

- CSA Mission and Vision/CSA as a System of Care
- Building effective multi-disciplinary teams/collaboration
- Overview and prioritization of local CSA Coordinator responsibilities (§2.2-2649)
- Provision of effective and efficient services (§2.2-2649)
 - Use of data and data analytics to assess service patterns and improve outcomes
 - Understanding High Fidelity Wraparound and Intensive Care Coordination
 - Utilization Management and Utilization Review (*Appropriation Act*)
- Controlling costs and utilizing alternative funding streams and revenues (*Appropriation Act*)
 - Blending & Braiding Funds – Developing a Fiscal Plan
 - Accessing the full array of Medicaid services (*Appropriation Act, with DMAS*)
- Use of state pool funds: eligibility and decision points

¹ Where appropriate, specific statutory requirements addressed through this training plan are indicated.

- FAPT determination of CHINS: parental agreements and foster care prevention
- Understanding mission, purpose, and outcomes of child-serving agencies
 - Foster care services and the CSA (*Appropriation Act, with DSS*)
 - Requirements regarding IDEA and the use of CSA funds for special education services (*Appropriation Act, with DOE*)
- Guidelines for Therapeutic Foster Care and negotiating contracts with TFC providers (*Appropriation Act*)
- Building community services/public-private partnerships (*Appropriation Act*)
- CSA program audits: compliance monitoring and program improvement; self-assessment process
- Navigating cross-jurisdictional issues: Fostering Connections; transfers; out-of state placement
- Administrative and fiscal issues: Local statutory responsibilities (*Appropriation Act*)
- Financial and data reporting requirements of CSA (supplemental funding requests, pool fund reimbursement, data set, and client based expenditures; understanding service categories, match rates)
- Engaging families, empowering client/family voice and choice
- Contracting: regional contracts, negotiating terms, performance-based contracts
- Specifications for Audits for Counties, Cities, and Towns

Primary implementation methods:

- CSA Annual Conference
- New Coordinators Academy
- On-line and Webinar training
- Information developed and disseminated through the CSA website

B. TO INCREASE KNOWLEDGE, SKILLS, AND COMPETENCIES OF CHILD SERVING ENTITIES TO MAXIMIZE USE OF CSA PROCESSES AND FUNDING TO EFFECTIVELY SERVE YOUTH AND FAMILIES.

Objective:

- To ensure that the key partners in the CSA gain specific and targeted knowledge and competencies to incorporate CSA into their primary areas of professional responsibility.

Target Audiences:

- Executive managers, supervisors, and direct service staff in local departments of social services, court service units, community services boards, and school divisions; state level managers in child-serving agencies; juvenile and domestic relations court judges; guardians ad litem; LDSS attorneys; elected and appointed local government officials; private service providers.

Topics:

- Becoming a Medicaid provider (*Appropriation Act, with DMAS*)
- Foster care services and the CSA (*Appropriation Act, with DSS*)
- Requirements regarding IDEA and the use of CSA funds for special education services (*Appropriation Act, with DOE*)
- Vision and mission of CSA
- Accessing CSA funded services
- CANS certification and Super Users training
- Using CANS for service planning

Primary Implementation Methods:

- Stakeholder venues/conferences
- Virtual learning opportunities developed and disseminated in conjunction with partner agencies

Supporting Activities:

- Coordinate with stakeholder organizations to plan and deliver topical CSA training within agency-specific conferences and training sessions.
- Work with the State and Local Advisory Team (SLAT), the State Executive Council (SEC), selected partner agencies, and other affiliated organizations (e.g., VML/VACO, VCOPPA) to identify "recommended" and "mandatory" CSA-related training to be incorporated into agency training requirements and plans.

C. TO ENHANCE CSA OUTCOMES FOR YOUTH, FAMILIES AND COMMUNITIES BY ADOPTION OF EFFECTIVE, EVIDENCE-BASED PRACTICES.

Objectives:

- To provide opportunities for CSA stakeholders to learn about and develop competencies in effective, evidence-based models pertaining to the service needs of the CSA population.

Target Audiences:

- All CSA stakeholders

Topics:

- Best practices and evidence-based practices related to the CSA (*Appropriation Act*)
 - Introduction to Systems of Care
 - High Fidelity Wraparound (HFW)
 - Facilitator training
 - Family and youth support partner training
 - Local coaching and clinical supervisors training
 - Trauma-informed services within an overall System of Care (in collaboration with DSS and DBHDS)
 - Family engagement – families and youth as partners
 - Evidence-based practices in children's services

Primary implementation methods:

- CSA Annual Conference
- Collaborative training efforts with partner agencies
- On-line and Webinar training
- Information developed and disseminated through the CSA website

II. TRAINING AND TECHNICAL ASSISTANCE METHODOLOGIES

A. DELIVER OCS SPONSORED TRAINING OPPORTUNITIES

Activities:

- Conduct Annual CSA Conference
- Conduct Pre-conference CSA Coordinator session at annual CSA Conference
- Conduct New CSA Coordinator Academy

B. DELIVER CSA RELATED TRAINING WITHIN STAKEHOLDER VENUES/CONFERENCES

Projected Activities:

- In collaboration with sponsoring entities, conduct training in a variety of venues. Examples include but are not limited to:
 - Dept. of Education: Aspiring Leaders of Special Education Academy (annually)
 - Dept. of Education: New Directors of Special Education Academy (annually)
 - Dept. of Social Services: New Local Directors Learning Experience (at least annually)
 - VA League of Social Service Executives: Conference (annually)
 - VA Association of Counties: Annual Conference
 - VA Association of Independent Special Education Facilities: Annual Conference
 - Office of Executive Secretary of the Supreme Court: Court Improvement Programs Annual Conference
 - Office of Executive Secretary of the Supreme Court: Mandatory JDR Judges Conference (annually)
- Through collaboration with stakeholder agencies and organizations, identify and schedule venues.
- Through collaboration with stakeholder agencies and organizations, the State and Local Advisory Team (SLAT), and the SLAT Training Workgroup, identify training needs and appropriate training venues/opportunities.

C. DELIVER TARGETED, HIGH-QUALITY TECHNICAL ASSISTANCE

Objective:

- To respond to stakeholder identified needs for information that will enhance the effectiveness of CSA activities, minimize and/or respond to audit findings, and support overall system of care implementation

Activities:

- Maintain the "OCS Help Desk" on the CSA website to facilitate prompt, accurate and consistent responses to requests for specific guidance
- Provide targeted on-site training and technical assistance to meet needs identified by OCS, localities, and/or regions
- Provide targeted assistance to facilitate CPMT corrective action/program improvement activities
- Provide on-site and remote technical assistance on frequently asked questions/common issues
- Provide information through the Resource Library of the CSA website (FAQ's, Fact Sheets)

D. DEVELOP AND OFFER VIRTUAL LEARNING OPPORTUNITIES

Objective:

- Maximize participation and accessibility of CSA-related training through an array of delivery platforms and designing training to meet diverse learning styles and venues

Activities:

- Maintain training site for CANS certification
- Administer the CSA Knowledge Center (KC) to include user account management for local users
- Plan and deliver webinars on "hot topics" (e.g., new policy guidelines), best practices, common focal issues raised by CSA stakeholders
- Develop and implement on-line and other distance learning programs to include:
 - educational opportunities through the Knowledge Center
 - ongoing availability of archived training materials from the annual conferences, webinars, and other sources
 - use of the CSA website to make available materials from national and other sources of best-practices information

E. PROMOTE AVAILABILITY OF LIVE AND VIRTUAL TRAINING OPPORTUNITIES

Objective:

- Build participation levels and ensure that various stakeholders are aware of relevant training opportunities provided by both OCS and partner agencies

Activities:

- Maintain the on-line Training Calendar which provides information about upcoming training events and information on how to enroll in those events
- Support the work of the SLAT Training Committee to collect, provide to OCS and disseminate information on upcoming training events
- OCS will utilize various communication mechanisms (CSA listserve, CSA website, e-mail lists) to inform stakeholders of relevant upcoming training events

III. EVALUATION

Objective:

- To provide accountability and continuous quality improvement for OCS training activities

Activities:

- Identify and assess measurable objectives for all CSA training activities
- Design course outlines, content, materials, activities, methods of instruction, and evaluation criteria for CSA training activities that reflect the principles of adult learning and best practices in instructional design
- Collect and report information regarding participants (e.g., number, primary professional affiliation) at "in-person" CSA training events

- Collect and summarize evaluations of OCS training activities and utilize feedback to refine and improve training activities
- Provide quarterly reports to the State Executive Council summarizing OCS training activities
- Complete and submit an annual report to the General Assembly regarding OCS training activities

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Proposed CSA Outcomes Model

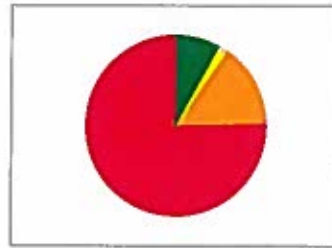
Working Draft – December 2014

Measure		Program Level Outcomes	Source	Comments
Is the child living with a family / achieving stability?	% of foster care children in family-based placements		OCS / DSS Executive Scorecard	
	% of children who exit from foster care to a permanent arrangement		OCS / DSS Executive Scorecard	
	% of total CSA served children receiving community-based services		OCS Executive Scorecard	
Is the child being served in the community?	Average length of stay in residential placements for children placed through CSA		OCS Executive Scorecard	
	Improvement in functioning over time		OCS CANs Life Functioning Domain Change Score Data (VaCSI)	Initial CANs compared to final (most recent) CANs (Change Scores)
Is the child experiencing improved functioning?				Measure includes those receiving ICC as an intervention prior to possible placement in residential care. Effective July 1, 2014, also reflects implementation of High Fidelity Wraparound as an evidence-informed practice.
Is the community utilizing Intensive Care Coordination as an approach to reducing residential placements or length of stay in residential placements?				

Sorted Alphabetically

FIPS	Locality	% ICC	% CBS	LOS	CANS Change	% Family FC	Permanency	Avg.	Quartile
		1	1	3	4	4	4	2.60	2
		1	2	3	2	1	4	2.17	3
		1	4	3	2	1	4	2.50	2
		1	3	1	2	4	4	1.75	4
		3	2	1	2	1	4	1.80	4
		3	3	2	2	4	4	2.80	1
		2	1	2	3	4	1	2.17	3
		4	2	3	2	4	1	2.67	1
		4	2	4	4	4	4	3.33	1
		1	2	3	3	1	4	2.00	3
		1	1	2	2	4	4	2.00	3
		1	3	2	3	1	4	2.00	3
		1	3	3	4	4	4	3.00	1
		1	2	2	3	1	4	2.17	3
		1	4	1	4	1	4	2.20	3
		1	3	2	3	4	4	2.83	1
		1	3	2	2	1	4	1.80	4
		1	3	3	3	4	4	3.00	1
		4	4	4	2	4	4	3.00	1
		1	4	3	4	4	4	3.33	1
		1	3	4	2	4	4	2.50	2
		1	4	2	2	4	4	2.60	2
		4	4	1	1	4	4	2.80	1
		1	4	2	2	1	4	2.33	3
		1	4	4	3	4	4	3.20	1
		1	2	3	1	4	4	2.50	2
		3	2	3	1	4	4	2.83	1
		2	2	3	3	1	4	2.20	3
		1	3	2	3	4	4	2.83	1
		1	3	1	2	1	4	1.60	4
		1	4	2	3	1	4	2.20	3
		4	3	2	3	4	1	2.83	1
		1	3	2	2	4	4	2.40	2

Indicator	Distribution	Localities	%
ICC	4	10	7.94%
	3	2	1.59%
	2	19	15.08%
	1	95	75.40%
		126	100.00%



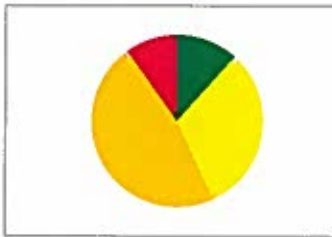
% CBS		24	18.32%
	3	47	35.88%
	2	41	31.30%
	1	19	14.50%
		131	100.00%



LOS	4	18	14.52%
	3	41	33.06%
	2	46	37.10%
	1	19	15.32%
		124	100.00%



CANS Change	4	15	11.54%
	3	41	31.54%
	2	61	46.92%
	1	13	10.00%
		130	100.00%



% Family Based Foster Care		70	54.69%
	3	0	0.00%
	2	0	0.00%
	1	58	45.31%
		128	100.00%



Permanency	4	42	63.64%
	3	0	0.00%
	2	0	0.00%
	1	24	36.36%
		66	100.00%



Rank	Quartile Rank		
	1	39	29.77%
	2	28	21.37%
	3	46	35.11%
	4	18	13.74%
		131	100.00%

