

OFFICE OF CHILDREN'S SERVICES

ADMINISTERING THE CHILDREN'S SERVICES ACT



PROGRESS REPORT ON THE CHILDREN'S SERVICES ACT

Biennial Report to the General Assembly, December 2023

In accordance with §2.2-2648.21, COV and Chapter 1, Item 284 (H)

The Children's 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 Children's 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.



Code of Virginia, §2.2-2648.21. *(The State Executive Council for Children's Services) shall: Biennially publish and disseminate to members of the General Assembly and community policy and management teams a state progress report on comprehensive services to children, youth and families and a plan for such services for the next succeeding biennium. The state plan shall:*

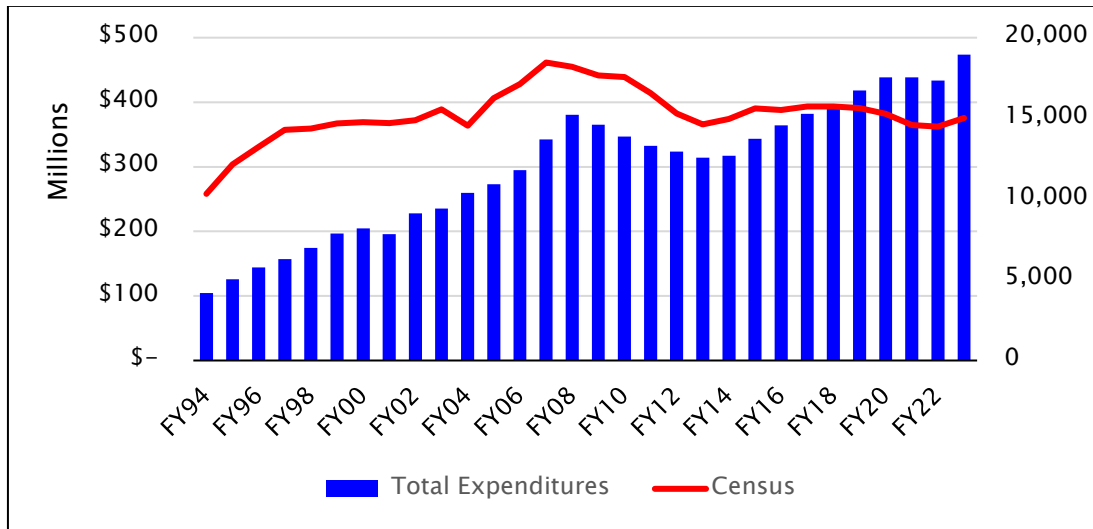
- a. Provide a fiscal profile of current and previous years' federal and state expenditures for a comprehensive service system for children, youth and families;*
- b. Incorporate information and recommendations from local comprehensive service systems with responsibility for planning and delivering services to children, youth and families;*
- c. Identify and establish goals for comprehensive services and the estimated costs of implementing these goals, report progress toward previously identified goals and establish priorities for the coming biennium;*
- d. Report and analyze expenditures associated with children who do not receive pool funding and have emotional and behavioral problems;*
- e. Identify funding streams used to purchase services in addition to pooled, Medicaid, and Title IV-E funding; and*
- f. Include such other information or recommendations as may be necessary and appropriate for the improvement and coordinated development of the state's comprehensive services system.*

Chapter 1, Item 284. H. *Pursuant to subdivision 21 of § 2.2-2648, Code of Virginia, no later than December 20 in the odd-numbered years, the State Executive Council shall biennially publish and disseminate to members of the General Assembly and Community Policy and Management Teams a progress report on services for children, youth, and families and a plan for such services for the succeeding biennium.*

The Code of Virginia and the Appropriation Act require that the State Executive Council for Children's Services (SEC) biennially publish and disseminate a progress report on services for children, youth, and families and a plan for such services for the ensuing biennium. As the administrative entity of the Council, the Office of Children's Services (OCS) is pleased to submit the following report, approved by the SEC. The biennial Strategic Plan for 2024 - 2025 and progress in meeting the goals and objectives of the 2022 - 2023 Plan can be found in this report.

CSA Expenditures and Utilization

Total Expenditures / Children Served through the CSA, FY1994 – FY2023



Annual CSA expenditures and the number of children served rose consistently from the Act’s inception in FY1994 through FY2008. After a decline over five years (FY2009–2013) in spending and children receiving services, except for the years spanning the COVID–19 pandemic (FY2021–2022), expenditures have increased significantly. In contrast, the CSA census (number of children served) has risen slightly and has been generally stable since FY2015. In FY2023, expenditures increased by 9.2% from the three prior years, and the census increased by 3.7%. The overall increased expenditures since FY2013 are overwhelmingly due to the rise in the number (and associated costs) of children receiving private day special education placements, accounting for most of the growth in expenditures and census. In FY2023, special education expenditures rose 9.8%, while all other categories increased by 4.4%.

For the first time in several years, costs for residential (congregate care) placements rose (by 13%), and the number of youth served in these settings rose (by 4%). This data pattern appears mainly attributable to a slight increase in length of stay, an 8% increase in daily rates (primarily for education services in the residential setting), and a 10% increase in daily costs for group home placements.

State and Federal Funding Not Included in the CSA State Pool

	<u>FY2022</u>	<u>FY2023</u>
Children’s Mental Health Initiative (DBHDS)	\$ 5,648,128	\$ 5,648,128
Promoting Safe & Stable Families ¹ (DSS)	\$ 8,462,224	\$ 10,443,139
Virginia Juvenile Community Crime Control Act (DJJ)	\$10,379,921	\$10,379,921
Title IV–E (Foster Care Maintenance) ² (DSS)	\$37,183,661	\$33,786,126
Social Services Block Grant ² (DSS)	\$ 9,419,998	\$ 9,419,998
Medicaid (Treatment Foster Care, Residential Care) ³	<u>\$91,054,382</u>	<u>\$73,449,678</u>
TOTAL	\$153,694,382	\$143,126,990

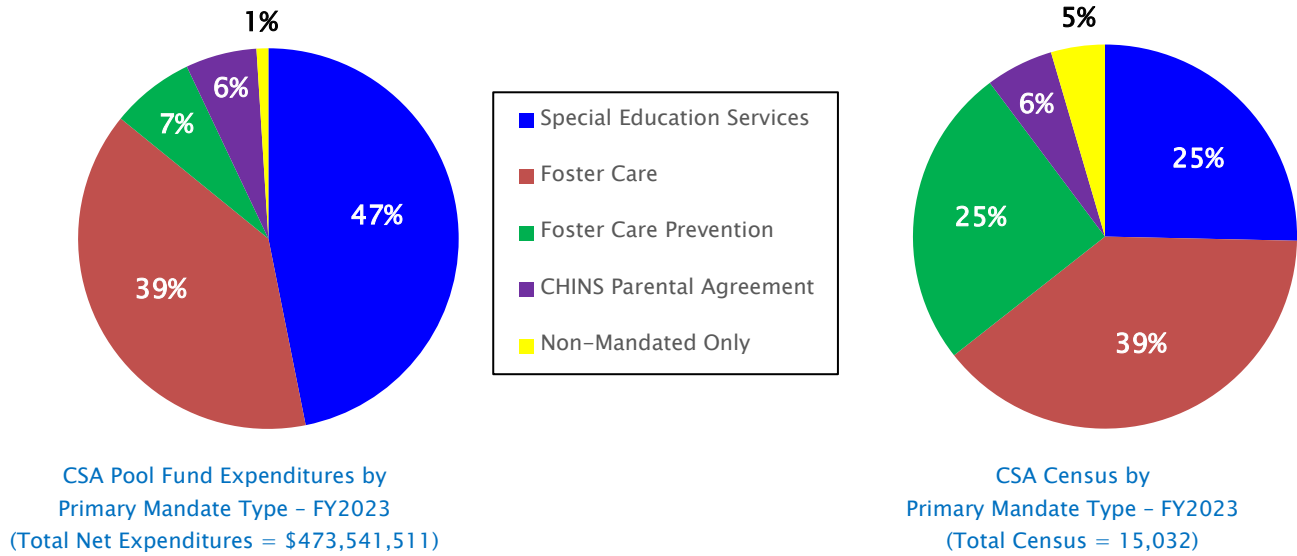
¹Federal FMAP rate varied between 61% (FY2023) and 64% (FY2024).

²Federal FMAP rate was approximately 56% through the period.

³Federal FMAP rate for Medicaid is typically 50%. Adjustments during the COVID–19 pandemic resulted in higher FMAP rates.

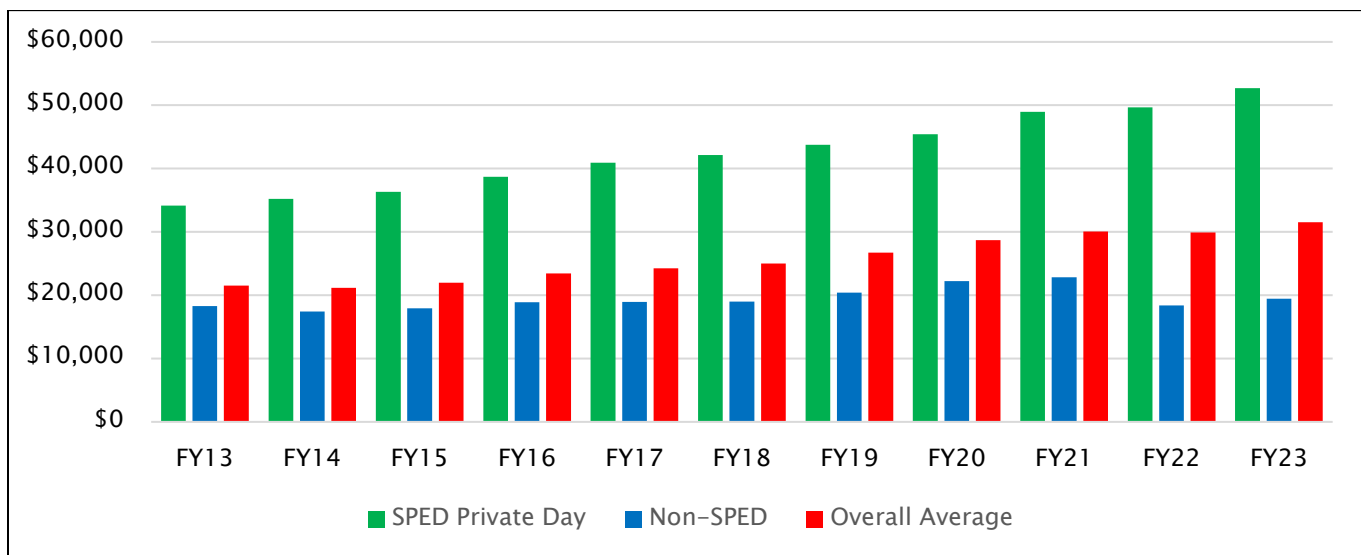
The table above reflects the contributions of funding sources other than CSA pool funds to addressing the needs of children and families⁴. These funds are “braided” with the “blended” CSA pool funds and are utilized for CSA and non-CSA-eligible youth and services, in whole or in part, when available to support needed services. Medicaid funds for behavioral health services to children other than residential and treatment foster care are not reported here and are available from the Department of Medical Assistance Services.

FY2023 CSA Expenditures and Mandate Types



The two graphs above show that special education services accounted for 47% of the total CSA expenditures in FY2023. However, children in this category accounted for only 25% of the total CSA primary mandates. (Note: Children may have more than one Primary Mandate Type). This disparity is because private day special education placements have an annual per-child cost of \$53,488 compared to an average of \$18,707 for all other categories of children (see graph below). Children eligible for CSA due to receiving foster care or foster care prevention services accounted for 64% of those eligible for CSA but only 46% of expenditures.

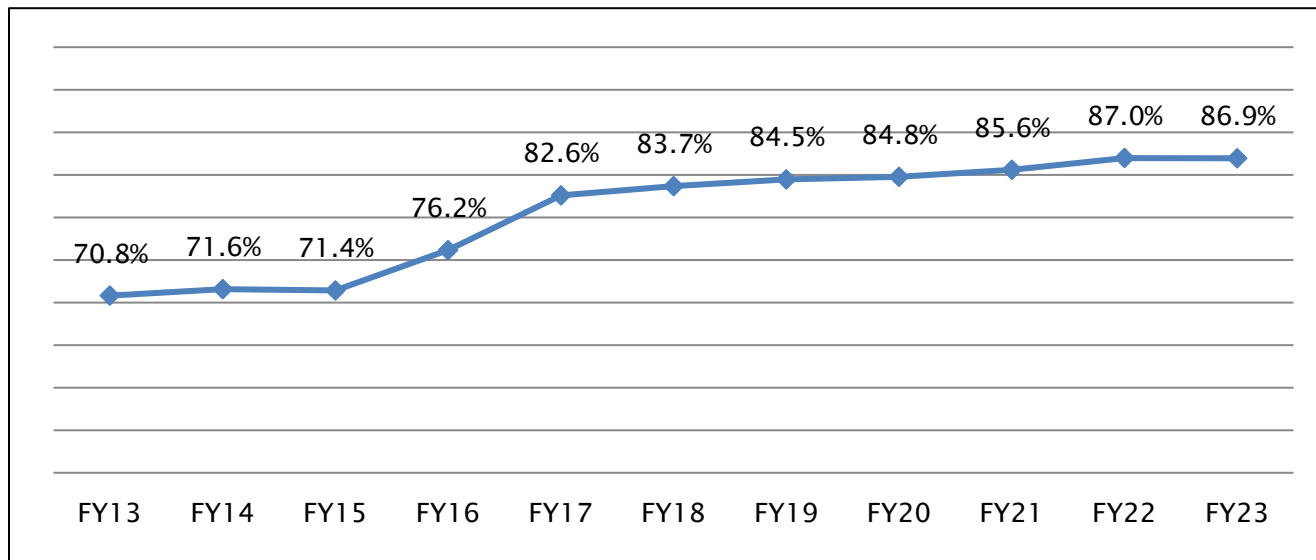
Average Annual per Child CSA Pool Fund Expenditures (FY2013 - FY2023)



⁴ Appendix A provides a description of these various funding sources.

Serving children in community-based (as opposed to residential or congregate care) settings is at the core of the CSA system of care philosophy. An extensive body of evidence indicates that long-term outcomes are improved when children are safely maintained in their families, schools, and communities. The avoidance, where possible, given clinical needs and other concerns, of placements in restrictive, congregate residential settings has long been a goal of the CSA. As seen in the chart below, performance on this indicator has continued to improve over time, although remaining essentially flat from FY2022 to FY2023.

Percent of Children Served in Community-Based Settings (FY2013 - FY2023)



Significant Accomplishments 2022 – 2023

The following is a summary of significant accomplishments related to the Goals and Objectives for the 2022 – 2023 Strategic Plan approved by the State Executive Council for Children’s Services in December 2021.

Area: Policy and Oversight

Objective 1: The SEC, with input from SLAT and others, will determine which CSA policies need greater uniformity, flexibility, and alignment (internally and across partners).

Two-year metric: Continue through the work of the SEC Policy Review Workgroup, prioritized revisions to CSA policies with an additional focus on the use of equity and trauma-informed lenses.

Status:

- *Updated and approved the Family Assessment and Planning Team policy (3.2).*
- *Revised and approved the Family Engagement Policy (3.3).*
- *Rescinded policies redundant with the Code of Virginia (2.1; 2.2; 2.3; 3.1; 4.4.1).*
- *Developed a plan for the review and update of all other existing policies.*
- *Released for public comment revisions to policies 2.4 (Public Participation in Policy-Making Actions), 3.4 (Dispute Resolution Process), and 4.2 (Payment for Services and Change of Legal Residence).*
- *Continued to consult with the State and Local Advisory Team (SLAT) and the state CSA Coordinator Network on the policy review process and content.*
- *At the request of the SEC, the SLAT reviewed the current three-tiered CSA match rate model and recommended no changes. The SEC affirmed this recommendation.*
- *CSA worked with VDSS to suspend the VDSS policy regarding the use of the Qualified Residential Treatment Program (QRTP) designation under the Family First Prevention Services Act.*
- *The Policy Review Workgroup has transitioned to collaborative efforts with the SLAT, CSA Coordinator Network, and other ad hoc members as germane to the policies under review.*

Area: Policy and Oversight

Objective 2: The SEC will identify and capitalize on the practice enhancements occurring throughout the CSA participating systems.

Two-year metric: The SEC will continue to engage in regular updates and discussions of the various system improvement initiatives to identify areas requiring additional alignment. Areas for collaboration will be identified and acted upon.

Status:

- *The SEC received a presentation on the Governor’s Safe and Sound Task Force at the June 2022 meeting. Multiple SEC agencies are involved in implementing the goals of this task force to eliminate the occurrence of youth in foster care being displaced and residing in unapproved or inappropriate placements such as local DSS offices, hotels, or hospital emergency departments.*

- *Multiple SEC agencies are involved in implementing the Governor’s Right Help, Right Now transformation of the behavioral health system.*
- *The OCS Senior Research Analyst on the OCS Data and Outcomes Dashboard and annual Service Gap Survey were made at the March 2023 and September 2023 SEC meetings. At the suggestion of the SEC, a local and regional level dashboard was added to the Service Gap Survey results.*
- *OCS has developed and implemented a topical index to its Administrative Memorandums to make it easier for users to locate relevant guidance related to the CSA program.*

Area: Leadership and Collective Action

Objective 1: The SEC and SLAT will define and support the development of core leadership competencies for local CSA leaders, Community Policy and Management Teams, and Family Assessment and Planning Teams.

Two-year metric: Develop and implement a comprehensive curriculum and related strategies to address identified core leadership and operational competencies and for building local capacity as developed by the workgroup of the State and Local Advisory Team (SLAT).

Status:

- *Multiple online courses corresponding with the Core Competencies have been developed and made available. Additional in-person training curricula continue to be offered upon request.*
- *A topical catalog of training and related resources is being developed and will be posted to the CSA website, as recommended by the SLAT.*

Area: Leadership and Collective Action

Objective 2: SEC will implement and support outcome-driven practices.

Two-year metric: OCS will complete a five-year CSA outcomes report at the state and local level and will develop and disseminate services-specific outcome reporting and tools for localities.

Status:

- *The statewide five-year outcomes report (2018–2022) is complete and has been disseminated.*
- *OCS is adding service placement type (SPT)-level data and other upgrades to its Data and Outcomes Dashboard. Several of these upgrades were suggested by the SEC and other stakeholders.*

Two-year metric: SEC member agencies will support the work of the Center for Evidence-Based Partnerships in Virginia (CEBP-Va).

Status:

- *The following SEC member agencies participate in the Governance Committee of the Center: OCS, DBHDS, VDSS, DMAS, VDH, and DJJ. Additional agency partners include the Department of Criminal Justice Services and the Department of Health Professions.*

- *The Center has several ongoing projects, including the development and maintenance of an online directory of providers who meet training and credentialing requirements for specific evidence-based interventions; fidelity monitoring for particular interventions on the Virginia Family First Prevention Services Act plan through VDSS); ongoing research and reporting on barriers and solutions to the implementation of EBPs; and the EBP Transformation Zones initiative in partnership with the National Implementation Research Network (University of North Carolina).*

Area: Empowering Families and Communities

Objective 1: SEC, SLAT, and additional partners will develop a guide for youth and families to build understanding about access to needed services.

Two-year metric: Complete development and distribution of the family and youth guide to CSA, including ancillary products (e.g., training curriculum, videos).

Status:

- *The "Family Guide to CSA" has been completed, distributed, and available on the CSA website.*
- *An online training for family representatives to Family Assessment and Planning Teams and Community Policy and Management Teams has been developed and is available through the Virginia Learning Center.*
- *A video overview of CSA for parents has been scripted and will be produced and released in early 2024.*

Area: Empowering Families and Communities

Objective 2: The SEC, through OCS, will build community capacity by preparing and assisting localities to successfully implement and sustain evidence-based practices.

Two-year metrics:

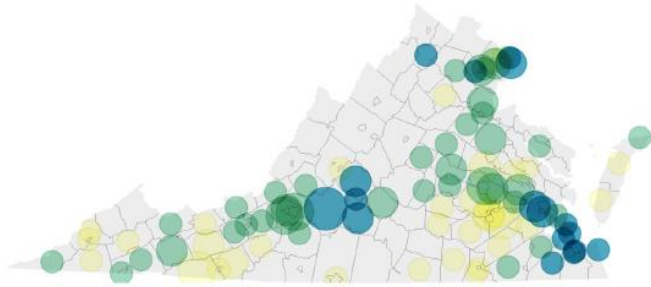
- Number of available EBPs for children/families
- Assessment of EBP availability/capacity across the Commonwealth
- Number of trained EBP providers
- Number of children/families receiving EPBs
- Number of and attendance at EBP-related training events

Status:

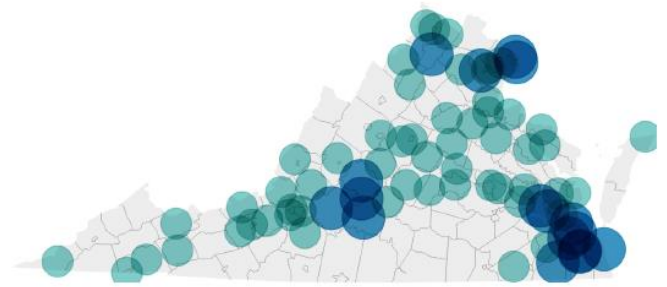
- *The following EBPs are available as of July 1, 2023 (specific supporting agencies listed):*
 - *Multisystemic therapy (MST) - (DSS, OCS, DMAS, DJJ)*
 - *Functional Family Therapy (FFT) -*
 - *Parent-Child Interaction Therapy (PCIT) - (DSS, OCS)*
 - *High-Fidelity Wraparound - Intensive Care Coordination) (HFW) - (OCS, DSS, DBHDS, DJJ)*
 - *Family Check-Up (FCU) - (DSS)*
 - *Brief Strategic Family Therapy (BSFT) - (DSS)*
 - *Homebuilders - (DSS)*
 - *Trauma-focused Cognitive Behavioral Therapy (TF-CBT) - (DBHDS)*
 - *Adolescent Community Reinforcement Approach (A-CRA) - (DBHDS)*
 - *Community Reinforcements and Family Training (CRAFT) - (DBHDS)*

- The availability of the EBPs listed and the number of trained EBP providers are not uniformly known. They may vary as qualified providers are employed or leave employment with specific agencies. The most carefully tracked EBPs are those associated with the Family First Prevention Services Act (FFPSA), including MST, FFT, FCU, BSFT, and PCIT. The providers can be found on the provider directory managed by the Center for Evidence-Based Partnerships at this location: www.EBPFinder.org. The maps below⁵ show BSFT, FCU, FFT, and MST availability.

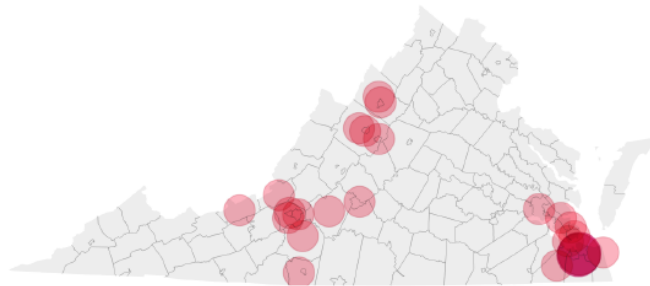
FFT Providers



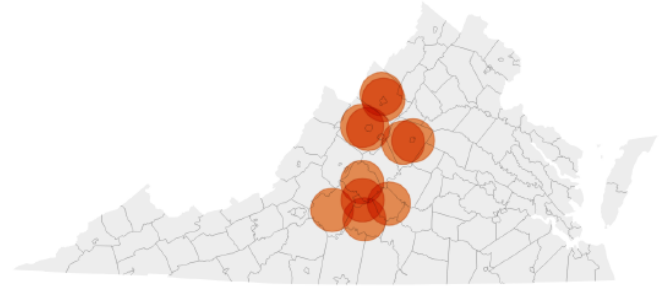
[MST Providers]



BSFT Providers

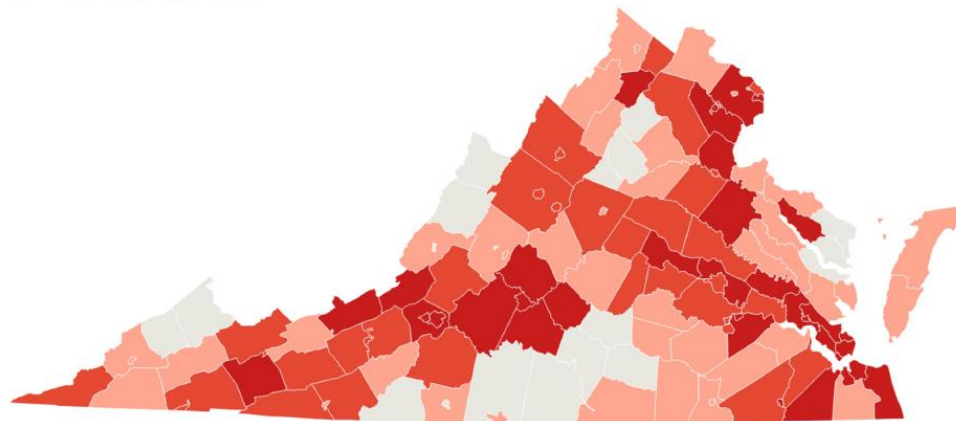


FCU Providers



EBP Saturation

Number of teams or sites, as of August 2023



⁵ Maps generated by the CEBP-VA as of August 11, 2023.

The availability of qualified High-Fidelity Wraparound providers can be found on the OCS website at www.csa.virginia.gov/Content/doc/ICC_Trained_Providers.pdf.

For the EBPs explicitly detailed in each agency’s funding model/service listings, the number of children and families served in FY2022 and FY2023 through each EBP is listed in the table below:

		Youth Served FY2022				
EBP	Funding Agencies*	DSS	OCS	DJJ	DBHDS	DMAS
Multisystemic Therapy	DSS, OCS, DJJ, DMAS	21	69	133	124	214
Functional Family Therapy	DSS, OCS, DJJ, DMAS	36	146	170	185	154
Parent-Child Interaction Therapy	DSS, OCS	0	0			
High Fidelity Wraparound (ICC)	OCS		560	25		
Adolescent Community Reinforcement Approach	DBHDS (CSB), DJJ					
Community Reinforcement and Family Training	DBHDS (CSB), DJJ					
Trauma-Focused Cognitive Behavioral Therapy	DBHDS (CSB), OCS, DJJ					
		Youth Served FY2023				
EBP	Funding Agencies*	DSS	OCS	DJJ	DBHDS	DMAS
Multisystemic Therapy	DSS, OCS, DJJ, DMAS	6	50	90		248
Functional Family Therapy	DSS, OCS, DJJ, DMAS	16	73	182		230
Parent-Child Interaction Therapy	DSS, OCS	0	6			
High Fidelity Wraparound (ICC)	OCS		635	22		
Adolescent Community Reinforcement Approach	DBHDS (CSB), DJJ					
Community Reinforcement and Family Training	DBHDS (CSB), DJJ					
Trauma-Focused Cognitive Behavioral Therapy	DBHDS (CSB), OCS, DJJ					

Note: Cells shaded in gray are not funded/reported by the specific agency.

- Data related to training is shown in the table below:

EBP Trained Practitioners	Agency Providing Training	Number Trained	Training Events
Multisystemic Therapy	DSS	5	2
Functional Family Therapy	DSS	7	3
Functional Family Therapy	DBHDS	27	10
Parent-Child Interaction Therapy	DSS	9	5
Parent-Child Interaction Therapy	DBHDS	56	19
High Fidelity Wraparound (ICC)	OCS	317	8
Adolescent Community Reinforcement Approach	DBHDS	50	9
Community Reinforcement and Family Training	DBHDS	36	2
Trauma-Focused Cognitive Behavioral Therapy	DBHDS	341	32

Note: There may be some duplication in the numbers trained as reported by different agencies may be overlapping.

Appendix A

Children's Mental Health Initiative

The Children's Mental Health Initiative (MHI) Fund was established by the General Assembly in FY 2000 to create a dedicated source of funding for mental health and substance abuse services for children and adolescents with serious emotional disturbances (SED) who are not mandated for the Children's Services Act (CSA). Funds are provided to the Community Services Boards based on a funding methodology.

Promoting Safe & Stable Families

The Virginia Department of Social Services administers the Promoting Safe and Stable Families Program (PSSF) which is designed to assist children and families resolve crises, connect with necessary and appropriate services, and remain safely together in their own homes whenever possible. This program helps more than 15,000 children and families each year. Services are provided to meet the following objectives:

- Prevent or eliminate the need for out-of-home placements of children
- Promote family strength and stability
- Enhance parental functioning
- Protect children
- Assess and make changes in state and local service delivery systems

PSSF funding is provided by the federal government with a required state match. Individual localities are allocated funds by the VDSS based on the submission of an approved plan to the VDSS. Additional information on the PSSF program can be found here: <https://www.dss.virginia.gov/family/pssf.cgi>.

Virginia Juvenile Community Crime Control Act

In 1995, the Virginia General Assembly passed the Virginia Juvenile Community Crime Control Act (VJCCCA) "to establish a community-based system of progressive intensive sanctions and services that correspond to the severity of offense and treatment needs." Administered by the Department of Juvenile Justice, all localities have access to a funding allocation to provide services to eligible youth involved in the juvenile court system. Services generally fall into the categories of public safety, post-dispositional/graduated sanctions, accountability, and competency development. Additional information on the PSSF program can be found here: <https://www.djj.virginia.gov/pages/community/community-diversion.htm#vjccca>.

Title IV-E

Title IV-E is a federal program designed to provide funding to states to ensure proper care for eligible children in foster care and to provide ongoing assistance to eligible children with special needs receiving adoption subsidies. The program is administered under Title IV-E of the Social Security Act and is funded by federal and state/local matching funds. Title IV-E funds are administered by the Virginia Department of Social Services and the local departments of social services. Additional information on Title IV-E can be found here: <https://www.dss.virginia.gov/family/iv-e.cgi>.

Social Services Block Grant

The Social Services Block Grant (SSBG) is a federal funding source that partially supports various services delivered through local departments of social services. The SSBG is administered by the Virginia Department of Social Services. Additional information on the SSBG can be found here: https://www.dss.virginia.gov/geninfo/reports/agency_wide/block_grants.cgi.

Medicaid

Medicaid is the federal program that assists states in providing health care (including behavioral health) to eligible children and adults. Medicaid funding is a shared federal and state responsibility. Medicaid funds support CSA for residential care (therapeutic group homes and psychiatric residential treatment facilities, treatment foster care case management, and various outpatient behavioral health services).

The 2024 – 2025 CSA Strategic Plan

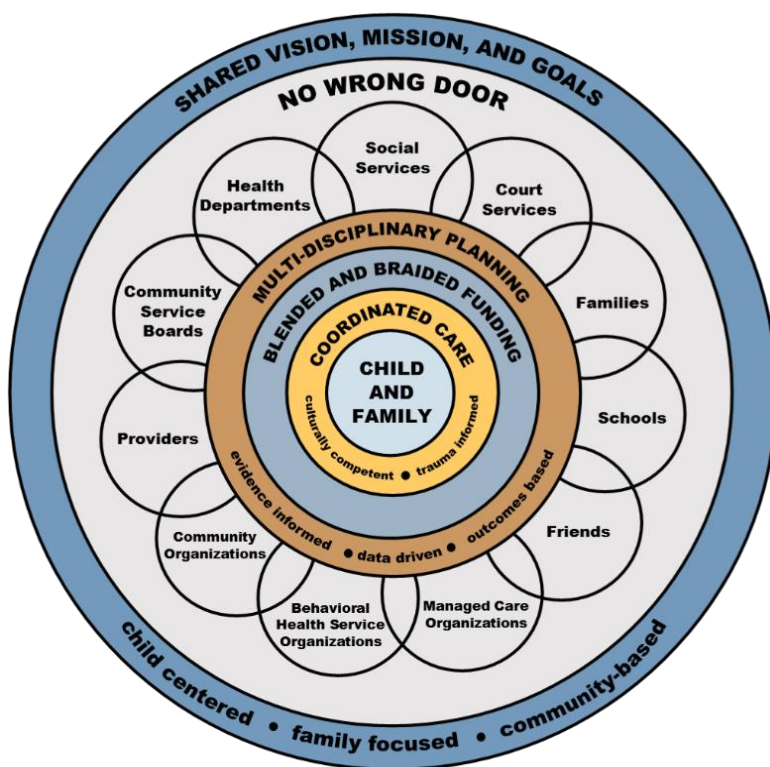
At its December 2023 meeting, the State Executive Council adopted a Strategic Plan for 2024 – 2025.

The Plan is found on the following pages.

Begin with the End in Mind . . .

By 2026, Virginia's Children's Services Act (CSA) will have worked with its state and local government partners, the provider community, and families to successfully expand and support access to effective services that meet the needs of children and families. The State Executive Council for Children's Services (SEC) and the Office of Children's Services are vital participants in this effort, providing leadership and resources to improve outcomes and operate a program that best utilizes public funds. This 2024-2026 Strategic Plan includes continued support for executing evidence-based approaches for serving youth and families by championing statewide, cross-agency initiatives. In this biennial plan, there is an increased focus on aligning policy and practice with an emphasis on creating a process by which stakeholders can provide input into the CSA policies. The empowerment of families and communities remains a focal point, with significant attention given to creating resources that build capacity and create clarity in navigating Virginia's system of care.

These goals will be realized through a collaborative system of care grounded in the CSA's founding principles, where practice reflects policy, and stakeholders at all levels embrace leadership and accountability. Strong partnerships are foundational to implementing the CSA and are the mechanism by which improved practices and outcomes are achieved.



STATE EXECUTIVE COUNCIL FOR CHILDREN'S SERVICES



STRATEGIC PLAN: 2024 – 2025

Empowering Communities to Serve Youth



POLICY & OVERSIGHT

Policy can either help or hinder alignment of shared efforts.

1. With input from the SLAT and other stakeholders, the SEC will complete a comprehensive review of the current CSA Policy Manual to allow for improved uniformity, flexibility, and alignment (internally and across partners).

Two-Year Metric: The SEC will systematically review the existing policy manual to ensure policies are uniform in format and aligned internally and with the policies and practices of CSA agency partners.

Two-Year Metric: The SEC will review current practices to ensure alignment with relevant policies.

2. The SEC will establish a process for soliciting/generating ideas for new/revised CSA policies and practices to enhance program effectiveness and efficiency.

Two-Year Metric: The SEC will work with stakeholders, including the SLAT, CSA Coordinator Network-Policy Committee, VACO, and VML, to develop a process for promoting policy revisions to enhance local CSA programs.

3. The SEC will provide oversight of local CSA programs through the receipt of regular reports on local CSA program audits and technical assistance activities, highlighting both problematic (specific localities and activities) and positive aspects (areas of excellence and innovation).

Two-Year Metric: The SEC will receive electronic notification of the publication of audits and review quarterly and annual audit summary reports prepared by the Office of Children's Services and recommend actions as appropriate.

Two-Year Metric: The SEC will receive quarterly updates on technical assistance activities.

Two-Year Metric: The SEC will develop a process to acknowledge areas of local excellence and best practices.



LEADERSHIP & COLLECTIVE ACTION

Promote alignment, leading by example, and collaborating on a shared vision and key outcomes.

1. The SEC, SLAT, and member entities will enhance the availability of and access to services for youth and families by supporting and championing statewide, cross-agency initiatives.

Two-Year Metric: The SEC and SLAT will support enhanced community capacity by supporting outcome-driven practices in localities.

Two-Year Metric: With the SLAT and OCS, the SEC will develop resources/tools to assist localities in implementing outcome-driven practices and decision-making.

Two-Year Metric: The SEC will receive updates from lead agencies to determine the most appropriate supportive actions from the SEC, the SLAT, and OCS.

Two-Year Metric: The SEC will receive annual updates on service needs assessments completed by participating agencies.

Two-Year Metric: The SEC and SLAT members should educate their respective agencies, highlighting policy issues and best practices.



EMPOWERING FAMILIES & COMMUNITIES

We honor the voices and choices of families and youth and build the capacity of the communities serving them.

1. The SEC will support family engagement and a child-centered, family-focused, trauma-informed, and community-based system of care through:

- Training and coaching by OCS and SEC member agencies on youth and family engagement for local CSA teams and other system partners.
- Continuing OCS' role as a key training partner for evidence-based and outcomes-driven practices.

Two-Year Metric: The SEC, in collaboration with the SLAT, OCS, and other stakeholders, will develop tools for youth and families, such as a family guide brochure, model intake form, and family experience video, to build understanding about access to needed services.

2. In collaboration with the SLAT and other partners, the SEC will work to increase parent participation at the state and local levels.

Two-Year Metric: The SEC and SLAT will explore the barriers and challenges to eliciting parent representation at the state and local levels and brainstorm ways to overcome these barriers.

Two-Year Metric: In collaboration with the SLAT and OCS, the SEC will support parent representative empowerment by developing focused training opportunities for parent representatives on the CPMT and FAPT.

Two-Year Metric: The SEC, in collaboration with the SLAT, OCS, and other stakeholders, will survey local CSA programs to determine how they evaluate family perceptions of and satisfaction with the CSA process.

Two-Year Metric: The SEC, in collaboration with the SLAT, OCS, and other stakeholders, will develop and disseminate a model "Youth and Family Engagement Survey" and recommend practices for gathering youth and family input from local CSA programs.