

# **Policy Manual**

**for the**

# **Children's Services Act**



**Office of Children's Services**  
Empowering communities to serve youth

**Date of Issue: July 2015**  
**Revisions: July 2016; January 2018; January 2019; January 2022**



## Preface

The Children's Services Act (CSA) codifies a system of care designed to ensure the coordination across state and local child-serving agencies in the Commonwealth of Virginia for the provision of services to children and families. Implementation of the Act requires understanding of laws, policies, and best practices across a multitude of partner agencies and organizations. The purpose of this Policy Manual is to provide practitioners a single reference to the policies adopted by the State Executive Council for Children's Services in accordance with its statutory responsibility to establish interagency programmatic and fiscal policies which support the purposes of the Act. While the Manual includes description of certain requirements established by the Code of Virginia, there is no attempt to include all statutory requirements of the CSA. Those included were deemed appropriate to provide basic foundation and/or context for CSA implementation that is not otherwise captured by the policies.

CSA statutes, listed by topical area, are as follows:

<a href="#">§ 2.2-2648</a>	State Executive Council for Children's Services; membership; meetings; powers and duties
<a href="#">§ 2.2-2649</a>	Office of Children's Services established; powers and duties
<a href="#">§ 2.2-5200</a>	Intent and purpose; definitions
<a href="#">§ 2.2-5201</a>	State and local advisory team; appointment; membership
<a href="#">§ 2.2-5202</a>	State and local advisory team; powers and duties
<a href="#">§ 2.2-5203</a>	Duties of agencies represented on state and local advisory team
<a href="#">§ 2.2-5204</a>	Community policy and management team; appointment; fiscal agent
<a href="#">§ 2.2-5205</a>	Community policy and management teams; membership; immunity from liability
<a href="#">§ 2.2-5206</a>	Community policy and management teams; powers and duties
<a href="#">§ 2.2-5207</a>	Family assessment and planning team; membership; immunity from liability
<a href="#">§ 2.2-5208</a>	Family assessment and planning team; powers and duties
<a href="#">§ 2.2-5209</a>	Referrals to family assessment and planning teams
<a href="#">§ 2.2-5210.</a>	Information sharing; confidentiality
<a href="#">§ 2.2-5211</a>	State pool of funds for community policy and management teams
<a href="#">§ 2.2-5211.1</a>	Certain restrictions on reimbursement and placements of children in residential facilities
<a href="#">§ 2.2-5212</a>	Eligibility for state pool of funds
<a href="#">§ 2.2-5213</a>	State trust fund
<a href="#">§ 2.2-5214.</a>	Rates for purchase of services; service fee directory

Statutes with specific relevance to implementing the CSA include, but are not limited to, the following:

- [§ 2.2-4345](#) Exemptions from competitive sealed bidding and competitive negotiation for certain transactions; limitations
- [§ 2.2-3703](#) Public bodies and records to which chapter inapplicable; Freedom of Information Act

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## 1 Intent and Purpose

Passage of the Children's Services Act ("CSA") by the 1992 General Assembly dramatically altered the administrative and funding systems providing services to at-risk and troubled youth and their families. The CSA was initially codified as the "Comprehensive Services Act for At-Risk Youth and Families" and was renamed effective July 1, 2015.

The CSA establishes a collaborative system of services and funding that is child-centered, family-focused and community-based to assess and meet the strengths and needs of troubled and at-risk youths and their families in the Commonwealth.

The purpose of this law is to:

1. Ensure that services and funding are consistent with the Commonwealth's policies of preserving families and providing appropriate services in the least restrictive environment, while protecting the welfare of children and maintaining the safety of the public;
2. Identify and intervene early with young children and their families who are at risk of developing emotional or behavioral problems, or both, due to environmental, physical or psychological stress;
3. Design and provide services that are responsive to the unique and diverse strengths and needs of troubled youths and families;
4. Increase interagency collaboration and family involvement in service delivery and management;
5. Encourage a public and private partnership in the delivery of services to troubled and at-risk youths and their families; and
6. Provide communities flexibility in the use of funds and to authorize communities to make decisions and be accountable for providing services in concert with these purposes.

*Statutory Authority: § 2.2-5200 of the Code of Virginia.*

## 2 State Level Management Structure

### 2.1 State Executive Council for Children's Services

#### 2.1.1 Purpose

The State Executive Council for Children's Services (the "Council" or "SEC") is established as a supervisory council, within the meaning of COV § 2.2-2100, in the executive branch of state government, to oversee the administration of the CSA in accordance with the powers and duties granted by statute in COV § 2.2-2648(D).

*Statutory Authority: § 2.2-2648 of the Code of Virginia.*

#### 2.1.2 Membership, Terms and Appointment

(a) Membership. The Council shall consist of:

- One Member of the House of Delegates to be appointed by the Speaker of the House;
- One Member of the Senate to be appointed by the Senate Committee on Rules;
- The Commissioner of the Department of Health;
- The Commissioner of the Department of Behavioral Health & Developmental Services;
- The Commissioner of the Department of Social Services;
- The Superintendent of Public Instruction;
- The Executive Secretary of the Virginia Supreme Court;
- The Director of the Department of Juvenile Justice;
- The Director of the Department of Medical Assistance Services;
- A juvenile and domestic relations district court judge, to be appointed by the Governor and serve as an ex officio non-voting member;
- The Chair of the State and Local Advisory Team established in § 2.2-5201;
- Five local government representatives chosen from county boards of supervisors or a city council and a county administrator or city manager to be appointed by the Governor;
- Two private provider representatives from facilities that maintain membership in an association of providers for children's or family services and receives funding as authorized by the CSA, to be appointed by the Governor, who may appoint from nominees recommended by the Virginia Coalition of Private Provider Associations;
- A representative who has previously received services through the Children's Services Act, to be appointed by the Governor with recommendations from entities including the Departments of Education and Social Services and the Virginia Chapter of the National Alliance on Mental Illness; and
- Two Parent Representatives, appointed by the Governor.

(b) Terms.

1. The parent representatives shall be appointed by the Governor for a term not to exceed three years and neither shall be an employee of any public or private program that serves children and families.
2. The Governor's appointments shall be for a term not to exceed three years and shall be limited to no more than two consecutive terms, beginning with appointments after July 1, 2009.
3. Legislative members and ex officio members of the Council shall serve terms coincident with their terms of office.
4. Appointments to fill vacancies, other than by expiration of a term, shall be for the unexpired terms of the members vacating their membership. Vacancies shall be filled in the same manner as the original appointments.

*Statutory Authority: § 2.2-2648 of the Code of Virginia.*

## POLICY 2.1.3

### INDIVIDUAL PARTICIPATION IN STATE EXECUTIVE COUNCIL MEETINGS BY ELECTRONIC MEANS

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#### 2.1.3.1 Scope

- A. This policy shall apply to the any individual member of the State Executive Council for Children's Services (SEC) without regard to the identity of the member requesting remote (electronic) participation or the matters that will be considered or voted on at the meeting.
- B. This policy shall apply to any public meeting of the SEC or of any committees established by the SEC.

#### 2.1.3.2 Authority

§ 2.2-3708.2 of the *Code of Virginia*.

#### 2.1.3.3 Applicability

An individual member may participate in a meeting of the SEC or a public meeting of any committee established by the SEC through electronic communication from a remote location for the following reasons:

- A. A temporary or permanent disability or other medical condition prevents the member from attending the meeting in person; or
- B. A personal matter prevents the member from attending the meeting in person.

#### 2.1.3.4 Procedures

- A. *Notification*: The member requesting to participate through electronic communication from a remote location must notify the SEC chair or committee chair on or before the day of the meeting.
- B. *Quorum*: In order for any member to be approved to participate in a meeting of the SEC or a public meeting of any committees established by the SEC through electronic communication, a quorum of the SEC or a simple majority of the committee must be physically assembled at the primary or central meeting location identified in the public notice required for the meeting.
- C. *Technological requirement*: Arrangements shall be made for the voice of the remote participant to be heard by all persons at the primary or central meeting location.
- D. *Documentation*: The reason the member is unable to attend the meeting and the remote location from which the member participates shall be recorded in the meeting

minutes. The nature of the personal matter as provided in Section 2.1.3.3 shall also be included in the minutes.

- E. *Limitation:* Members may only participate through electronic communication due to personal matters pursuant to subsection B. of 2.1.3.2. above for no more than two meetings of the SEC or the committee each calendar year.
- F. *Approval Process:* Individual participation from a remote location shall be approved by the other members of the SEC or committee unless such participation would violate this policy or the provisions of the Virginia Freedom of Information Act (FOIA). If a member's participation from a remote location is challenged, then the other members of the SEC or committee shall vote whether to allow such participation. If the other members of the SEC or committee votes to disapprove of the member's participation because such participation would violate this policy, such disapproval will be recorded in the minutes with specificity.

## Office of Children's Services

### 2.2.1 Purpose

The Office of Children's Services ("OCS") serves as the administrative entity of the Council and to ensure that the decisions and policies of the Council are implemented in accordance with the powers and duties granted by statute in COV § 2.2-2649.

### 2.1.2 Support and Assistance to Localities

The director of OCS, in order to provide support and assistance to the Community Policy and Management Teams (CPMTs) and Family Assessment and Planning Teams (FAPTs) established pursuant to the CSA, shall:

1. Develop and maintain a web-based statewide automated database, with support from the Department of Information Technology or its successor agency, of the authorized vendors of the CSA services to include verification of the vendor's licensure status, a listing of each discrete CSA services offered by the vendor, and the discrete services rate determined in accordance with COV § 2.2-5214; and
2. Develop, in consultation with the Department of General Services, CPMTs, and vendors, a standardized purchase of services contract, which in addition to the general contract provisions when utilizing state pool funds will enable localities to specify the discrete service or services they are purchasing for the specified client, the required reporting of the client's service data, including types and numbers of disabilities, mental health and mental retardation diagnoses, or delinquent behaviors for which the purchased services are intended to address, the expected outcomes resulting from these services and the performance timeframes mutually agreed to when the services are purchased.
3. Provide for training and technical assistance in the provision of efficient and effective services that are responsive to the strengths and needs of at-risk youth and families, best practices and evidence-based practices related to CSA, and to help prioritize CSA coordinator responsibilities toward activities to maximize program effectiveness and minimize spending.
4. Develop and implement uniform data collection standards and collect data; develop and implement a uniform set of performance measures; develop, implement and distribute management reports; and report to the Council all expenditures associated with serving children who receive pool-funded services including expenditures for all services purchased with pool funding, treatment foster care and residential treatment funded by Medicaid, and payments through Title IV-E.

*Statutory Authority: § 2.2-2649 of the Code of Virginia.*

## State and Local Advisory Team (SLAT)

### 2.3.1 Purpose

The state and local advisory team ("SLAT") shall manage cooperative efforts among stakeholders at the state and local levels and in the private sector to advise the Council regarding CSA policies and to provide support to local community efforts in accordance with the powers and duties granted by statute in COV §§ 2.2-5202 and 2.2-5203.

### 2.1.3 Membership, Terms and Appointment

- (a) State-level membership. The team shall be appointed by and be responsible to the Council and shall include one representative from each of the following state agencies:
1. the Department of Health;
  2. the Department of Juvenile Justice;
  3. the Department of Social Services;
  4. the Department of Behavioral Health & Developmental Services;
  5. the Department of Medical Assistance Services; and
  6. the Department of Education.
- (b) Local-level and private-sector membership. The team shall also include the following:
1. a parent representative who is not an employee of any public or private program which serves children and families and who has a child who has received services that are within the purview of the Children's Services Act;
  2. a representative who has previously received services through the Children's Services Act, appointed with recommendations from entities including the Departments of Education and Social Services and the Virginia Chapter of the National Alliance on Mental Illness;
  3. a representative of a private organization or association of providers for children's or family services;
  4. a local CSA coordinator or program manager;
  5. a juvenile and domestic relations district court judge; and
  6. one member from each of five different geographical areas of the Commonwealth who is representative of one of the different participants of community policy and management teams.
- (c) Terms. The non-state agency members shall serve staggered terms of not more than three years. The Council will set the length of non-state agency members' terms.

*Statutory Authority: § 2.2-5201 of the Code of Virginia.*

#### 2.1.4 Conflict of Interests

SLAT members who do not represent a public agency must file a statement of economic interests as set out in COV § 2.2-3117 of the State and Local Government Conflict of Interests Act (COV § 2.2-3100 *et seq.*). Members that represent state or local public agencies must file such statements if required to do so pursuant to the State and Local Government Conflict of Interests Act.

*Statutory Authority: § 2.2-5201 of the Code of Virginia.*

#### 2.1.5 Governance

The members of SLAT shall annually elect a chairman from among the local government representatives who will be responsible for convening SLAT meetings. By-laws governing operations shall be developed and adopted by the SLAT and approved by the Council. Meetings are to take place on a regular basis, as determined by the SLAT members and set forth in the by-laws.

*Statutory Authority: §§ 2.2-5201, 2.2-5202, and 2.2-5203 of the Code of Virginia.*

## 2.4 Public Participation in Policy-making Actions

### 2.4.1 Purpose

The purpose of this policy is to promote public involvement in the development, amendment, or repeal of policies of the State Executive Council for Children's Services (SEC).

### 2.4.2 Authority

[Section 2.2-2648](#) D 4 of the *Code of Virginia* states that the SEC shall:

*"Provide for a public participation process for programmatic and fiscal guidelines and dispute resolution procedures developed for administrative actions that support the purposes of the Children's Services Act ([§ 2.2-5200 et seq.](#)). The public participation process shall include, at a minimum, 60 days of public comment and the distribution of these guidelines and procedures to all interested parties."*

[§ 2.2-2648](#) D 5 specifies that the SEC shall:

*"... consult with the Virginia Municipal League and the Virginia Association of Counties about state policies governing the use, distribution and monitoring of moneys in the state pool of funds and the state trust fund."*

In addition, [§ 2.2-2648](#) enumerates specific areas in which the SEC shall be responsible for the development and implementation of guidelines and practices for the Children's Services Act (CSA).

The Office of Children's Services (OCS) is established pursuant to [§ 2.2-2649](#) A as the administrative entity of the SEC.

### 2.4.3 Definitions

*"Basic law"* means provisions in the *Code of Virginia* that delineate the basic authority and responsibilities of an agency and/or governing body.

*"Commonwealth Calendar"* means the electronic calendar for official government meetings open to the public as required by [§ 2.2-3707](#) C of the Virginia Freedom of Information Act.

*"Fiscal impact analysis"* means a systematic review of the potential fiscal impact of a proposed policy which includes an analysis of the impact on CSA state pool funds and other state funding sources, CSA local matching funds requirements, local government administration of CSA, and any potential federal funding sources.

*"Legal review"* means a review of a proposed policy by the Office of the Attorney General to ensure that the proposed policy is in compliance with all relevant state and federal laws and regulations.

*"Notice Stage"* means the first stage of an SEC policy development where the SEC indicates the intent to initiate a policy-making action.

*"Notification list"* means a list of persons, maintained by OCS, to be notified of SEC policy-making actions.

*"Open meeting"* means any scheduled meeting of a unit of state government empowered by an agency's basic law to establish policies or decide cases related to a policy-making action.

*"Person"* means any individual, corporation, partnership, association, cooperative, limited liability company, trust, joint venture, government, political subdivision, or any other legal public or private entity and any successor, representative, agent, agency, or instrumentality thereof.

*"Policy"* means any requirement adopted by the SEC that governs the implementation of the CSA.

*"Policy-making action"* means the development, amendment, or repeal of a policy by the SEC.

*"Proposed Stage"* means the second stage of an SEC policy-making action where the SEC has drafted the proposed requirements for the operation of the CSA, OCS, or the SEC that is within the legal authority of the SEC under [§ 2.2-2648](#) of the *Code of Virginia* or which the SEC is directed to adopt by the General Assembly of Virginia.

*"Public comment"* means the mechanisms by which the SEC receives input from interested parties concerning policy-making actions.

*"Public hearing"* means a scheduled time at which members of the SEC meet for the purpose of receiving public comment on a policy-making action.

*"Public notice"* means informing the public of the policy-making activities of the SEC.

#### 2.4.4 Notification List and Public Notice

##### A. Notification List

1. The OCS shall maintain a list of persons who have requested to be notified of policy-making actions being considered by the SEC.
2. Any person may request to be placed on the notification list by making a request to OCS via e-mail at [csa.office@csa.virginia.gov](mailto:csa.office@csa.virginia.gov) or 804-662-9815. Notification of persons on the notification list shall be made by electronic means unless the person specifically indicates a preference for notification via First Class mail.
3. When electronic mail is returned as undeliverable on two occasions, at least 24 hours apart, that person will be deleted from the notification list. A single undeliverable message shall be insufficient cause to delete a person from the notification list.

**Adopted:** June 23, 2016

**Effective:** June 23, 2016

**Revised:** N/A

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4. When mail delivered by First Class mail is returned as undeliverable on two occasions, that person will be deleted from the list.
5. The OCS may periodically request those persons on the notification list to indicate the desire to remain on or be deleted from the list and their preferred method of notification.
6. All members of the SEC and the State and Local Advisory Team (SLAT) ([§2.2-5201](#)), all persons registered via the CSA website rosters as chairpersons of CSA Community Policy and Management Teams (CPMT, [§2.2-5205](#)) and CSA Coordinators shall be placed on the notification list without the necessity of a specific request.

B. Additional Public Notice

1. In addition to the use of the notification list, OCS shall use the following mechanisms for informing the public of proposed policy-making actions of the SEC:
  - a. Prominent display of current information about policy-making activities of the SEC on its website at [www.csa.virginia.gov](http://www.csa.virginia.gov). The information shall indicate the stage of the action and when the SEC is scheduled to meet to consider the policy-making action.
  - b. Include notice of policy-making activities on the published agendas of public meetings of the SEC and any related committee, work group, or task force meeting.

#### 2.4.5. Information to be Sent to Persons on the Notification List

- A. OCS shall send to persons on the notification list, and publish on its website, the following information:
  1. A notice of intent to develop policy (Initiation of the Notice Stage),
  2. A notice of the public comment period on a proposed policy-making action, including the specific proposed policy documents and/or information on how to electronically obtain a copy of the specific proposed policy documents, and information on how to submit public comments.
- B. The failure of any person to receive any notice of any documents shall not affect the validity of any policy if approved by the SEC.

#### 2.4.6 Public Comment

- A. In considering any policy-making action not exempted in Section 2.4.8, the SEC shall afford interested persons an opportunity to submit data, views, and arguments, either orally or in writing. Such opportunity to comment shall include an on-line public comment forum maintained on the CSA website.
  1. The SEC shall provide a copy of the Notice Stage document to all persons on the Notification List as described in Section 2.4.4 A.

2. Nothing herein shall prevent the SEC from developing and drafting policy-making actions prior to or during any opportunity it provides to the public to submit comments.
- B. The SEC shall accept public comments in writing after the issuance of public notice of a policy-making action in accordance with Section 2.4.4. Public comment in writing shall be accepted as follows:
1. For a minimum of thirty (30) calendar days following the issuance of the Notice Stage (see Section 2.4.7 B).
  2. For a minimum of sixty (60) calendar days following the preliminary approval of the proposed policy (see Section 2.4.7 C).
  3. For a minimum of sixty (60) calendar days following the approval of a re-proposed policy (see Section 2.4.7 E (1) (c)).
- C. The SEC may extend any of the comment periods listed in Section 2.4.6 B.
- D. Oral public comment on any policy-making action shall be accepted at all public meetings of the SEC and of any committee, work group, or task force established to consider the policy-making action. Notice of any open meeting shall be posted on the Commonwealth Calendar at least five (5) working days prior to the date of the meeting. The exception to this requirement is any meeting held in accordance with [§2.2-3707 D](#) of the *Code of Virginia* allowing for contemporaneous notice to be provided to participants and the public.
- E. Response to Public Comment

The OCS shall compile a summary description of and prepare a response to all public comments on the policy-making action. Such summary description shall be sent to members of the SEC and all members of the Notification List described in Section 4A, and published on the CSA website, at least five (5) business days before the meeting of the SEC at which final approval of the proposed policy will be considered.

In this summary description, the OCS shall indicate for each comment or group of comments that are of a similar nature whether the comment has been incorporated into the proposed policy or, if not, a brief explanation of the rationale for the action taken.

## 2.4.7 SEC Policy-making Process

### A. Petition for a Policy-making Action

1. Any person may petition the SEC to initiate a policy-making action. The petition shall state:
  - a. The petitioner's name and contact information; and
  - b. The substance and purpose of the policy-making action that is requested, including reference to any applicable SEC policies and/or reference to the legal authority of the SEC to take the action requested. However, the failure of a petitioner to include the legal authority shall not preclude consideration of the petition.
2. Petitioners shall submit a written petition to the Executive Director of the OCS. The petition shall be included in the documents provided in advance of the next scheduled meeting of the Executive Committee of the SEC. At this meeting, the Chair of the SEC, in consultation with the Executive Committee of the SEC and the Executive Director of the OCS, shall determine the disposition of the petition.
3. Disposition of such petitions may include:
  - a. Acceptance of the petition and initiation of a policy-making action.
  - b. A request for the petitioner to present the request for consideration to the full SEC.
  - c. Denial of the petition.
4. Within ten (10) days of disposition, OCS shall notify the petitioner in writing of the disposition including the rationale for the decision if the request is denied.
5. The disposition of all petitions for policy-making will be made known to the State Executive Council at its next scheduled meeting.
6. Nothing in this policy shall prohibit the OCS or the SEC from receiving information or from proceeding on its own motion for initiation of a policy-making action.

### B. Notice Stage

1. A determination to begin a policy-making action will be made by the Executive Director of the OCS, in consultation with the Chair and the Executive Committee of the SEC.<sup>1</sup>

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<sup>1</sup> §2.2-2649 B 1 of the *Code of Virginia* provides that the Director of OCS shall "Develop and recommend to the state executive council programs and fiscal policies that promote and support cooperation and collaboration in the provision of services to troubled and at-risk youths and their families at the state and local levels." Section B 2 further requires to OCS to "Develop and recommend to the Council state interagency policies governing the use, distribution and monitoring of moneys in the state pool of funds and the state trust fund."

2. At a minimum, the Notice Stage shall include (i) a summary of the intended policy-making action, a statement of the basis, purpose, and substance thereof; (ii) issues to be addressed therein; and (iii) a preliminary estimate of the fiscal impact of the policy-making action on both state and local governments.
3. Should the SEC approve the Notice Stage, it shall be issued via public notice and open for public comment as provided for in Section 2.4.6 B. The Executive Director of the OCS or designee shall be responsible for compiling, organizing, and presenting to the SEC public comments received.

C. Initiation of the Proposed Stage

1. The SEC shall consider the draft of the proposed policy-making action a maximum of six (6) months after the close of the public comment period of the Notice Stage.
2. The draft shall be made available via public notice no less than five (5) days prior to the scheduled meeting of the SEC at which the draft of the proposed policy-making action will be considered. When distributing the draft, the OCS shall also provide a summary of public comments with the agency's response as provided for in Section 2.4.6 E.

D. Approval of Proposed Stage for Public Comment

1. The SEC shall consider issuance of the proposed policy for public comment. At this time, the SEC may take one of three actions:
  - a. Approve the issuance of public notice of the proposed policy for a period of public comment not less than sixty (60) days.
  - b. Reject the proposed policy-making action.
  - c. Take other action to gather further information prior to proceeding on the proposed policy under 1 or 2 above. Such actions may include the appointment of an ad hoc work group, consultations with groups and/or individuals with interest in the proposed policy, or other steps the SEC may deem appropriate.

E. Proposed Stage Fiscal Impact Analysis and Legal Review

If the SEC approves the Proposed Stage, (i) the OCS shall complete a fiscal impact analysis and (ii) a legal review shall be conducted for consideration by the SEC.

1. Fiscal Impact Analysis
  - a. Before taking further action on a proposed policy-making action the SEC shall consider the potential fiscal impact of the policy. The OCS, in conjunction with local government representatives, shall provide a thorough analysis of the fiscal impact of the proposed policy-making action based on the best available information.

- b. In completing the fiscal impact analysis, OCS, with the input of the SEC shall:
  - i. Convene a group of potentially impacted parties to define the parameters, sources of data and analytic process to be utilized in completing the fiscal impact analysis. In accordance with §2.2-2648.5 of the Code of Virginia, input shall be solicited from the Virginia Municipal League (VML) and the Virginia Association of Counties (VACO). VML and VACO shall be provided a minimum of thirty (30) business days in which to provide comments. The fiscal impact analysis shall include whether there is an estimated impact on the Commonwealth, localities or other potentially impacted entities, such as private service providers and/or recipients of services and identify any parties particularly affected by the proposed policy. If no parties are particularly affected by the proposed policy, the analysis shall so state.
  - ii. The fiscal impact analysis shall be made available via public notice no less than five (5) business days prior to the scheduled meeting of the SEC at which the proposed policy-making action will next be considered.

## 2. Legal Review

- a. When the proposed policy-making action is posted for public comment, the OCS shall submit the proposed policy to the Office of the Attorney General to ensure statutory authority for the proposed policy-making action.
- b. Should the legal review of the proposed policy reveal non-compliance with relevant statutes and/or regulations, the SEC shall be so informed by legal counsel and shall make such revisions in the proposed policy as are necessary.

## F. Final Approval

1. No less than five (5) business days prior to the scheduled meeting of the SEC for consideration of approval of the policy-making action, the following shall be sent via public notice:
  - a. A draft of the proposed final policy with any deletions indicated with strike through notations and any new language underlined;
  - b. A summary of all changes and the rationale for the change;
  - c. A summary of all comments received and the agency's response as provided in Section 2.4.6 E; and
  - d. The fiscal impact analysis.

2. The SEC may take one of the following actions:
  - a. Approve the proposed policy and establish an implementation or effective date;
  - b. Reject the proposed policy;
  - c. Revise the proposed policy and initiate an additional period of public comment (re-proposed policy); or
  - d. Defer final action on the proposed policy in order to gather other specific information prior to taking additional action at a future meeting.

#### 2.4.8 Exemptions

- A. The provisions of this SEC Policy 2.4 shall not apply to policy-making actions that:
  1. Consist only of changes in style or form or are corrections of technical errors in existing SEC policies;
  2. Are necessary to conform to changes in Virginia statutory law or the appropriation act where no agency discretion is involved. However, notice of such policies shall be disseminated via public notice within ninety (90) days of the law's effective date;
  3. Are required by order of any state or federal court of competent jurisdiction where no agency discretion is involved; or
  4. Are necessary to meet the requirements of federal law or regulations, provided such policies do not differ materially from those required by federal law or regulation, and the Office of the Attorney General has so determined in writing. Notice of such policies shall be disseminated via public notice not less than thirty (30) days prior to the effective date of the policy.

## 3 Local Management

### Community Policy and Management Team

#### 3.1.1 Establishment, Appointment, and Membership

- (a) Each locality, or combination of localities, shall establish a Community Policy and Management Team ("CPMT") for the receipt and expenditure of funds pursuant to the CSA in accordance with the powers and duties granted by statute in COV § 2.2-5206.
- (b) CPMT members shall be appointed by the governing body or bodies of the participating localities establishing the CPMT and shall include, at a minimum, the following:
  1. One elected official or appointed official or his designee from the governing body of a locality that is a member of the team;
  2. The local agency heads or their designees from the following community agencies:
    - a. Community Services Board established pursuant to § 37.2-501,
    - b. Juvenile Court Services Unit,
    - c. Department of Health,
    - d. Department of Social Services, and
    - e. the local school division;
  3. A representative of a private organization or association of providers for children's or family services if such organizations or associations are located within the locality; and
  4. A parent representative.
- (c) The local governing body may appoint other members to the team including, but not limited to:
  1. A local government official;
  2. A local law-enforcement official; and
  3. Representatives of other public agencies.
- (d) Parent representatives who are employed by a public or private program that receives funds pursuant to this chapter or agencies represented on a community policy and management team may serve as a parent representative provided that they do not, as a part of their employment, interact directly on a regular and daily basis with children or supervise employees who interact directly on daily basis with children. Notwithstanding this provision, foster parents may serve as parent representatives.

*Statutory Authority: §§ 2.2-5204, 2.2-5205, and 2.2-5206 of the Code of Virginia.*

## **POLICY 3.2**

### **FAMILY ASSESSMENT AND PLANNING TEAM**

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#### **3.2.1 Purpose**

To define the establishment, appointment, and membership of Family Assessment and Planning Teams (FAPT) and to establish requirements of the policies to be adopted by Community Policy and Management Teams (CPMT) for the designation of Alternative Multidisciplinary Teams (MDT).

Alternative multidisciplinary teams provide a local Children's Services Act program to organize and operate flexibly while maintaining core statutory requirements and adherence to the system of care model.

#### **3.2.2 Authority**

- A. Section 2.2-2648.D of the *Code of Virginia (COV)* establishes powers and duties of the State Executive Council for Children's Services (SEC). Subsection (14) requires the SEC to "review and approve a request by a CPMT to establish a collaborative, multidisciplinary team process for referral and reviews of children and families according to §2.2-5209."
- B. COV Section 2.2-5207 requires that "each community policy and management team shall establish and appoint one or more family assessment and planning teams as the needs of the community require" and lists the required representatives on each FAPT. This section also provides additional information concerning responsibilities of conditions about FAPT membership.
- C. COV Section 2.2-5209 states that "the community policy and management team shall establish policies governing the referral of troubled youths and families to the family assessment and planning team or a collaborative, multidisciplinary team process approved by the Council."

#### **3.2.3 Definitions**

*"Community Policy and Management Teams (CPMT)"* is the entity that develops, implements, and monitors the CSA local program through policy development, quality assurance, and oversight functions.

*"Family Assessment and Planning Team (FAPT)"* implements the CSA by recommending services for children and families. The team considers every child and family's strengths and challenges to address their specific needs as best they *can*. Families are included in all FAPT assessment, service planning, and decision making.

"*Multidisciplinary Team (MDT)*" is an alternate to a "standard" FAPT that provides an option to local CSA programs to provide review and recommendations for an identified group or type of cases and can complete all of the statutory duties of a standard FAPT, including a recommendation of services for authorization by the CPMT.

"*State Executive Council for Children's Services (SEC)*" is the supervisory body established in the *Code of Virginia* to oversee the administration of the Children's Services Act (CSA).

"*Office of Children's Services (OCS)*" serves as the administrative entity of the executive branch of state government and the SEC to ensure that the decisions and policies of the Council are implemented in accordance with the powers and duties granted by statute in the Code of Virginia.

"*Parent Representative*" is an individual who is a parent and serves in the required role as a member of the FAPT. The parent representative should ideally be a person with "lived experience" and whose child has received services within the purview of, or similar to those provided through, the Children's Services Act. A foster parent may serve as a parent representative.

### **3.2.4 Establishment, Appointment, and Membership**

- A. Each CPMT shall establish and appoint one or more family assessment and planning teams ("FAPT") as the needs of the community require to act and perform the powers and duties granted by statute in COV §2.2-5208.
- B. Each FAPT shall include the following representatives of the following community agencies who have authority to access services within their respective agencies:
  - 1. Community services board;
  - 2. Juvenile court services unit;
  - 3. Department of social services;
  - 4. School division;
  - 5. If requested by the chair of the CPMT, a representative of the Department of Health;
  - 6. A parent representative; and
  - 7. At the discretion of the CPMT, a representative of a private organization or association of providers for children's or family services and other public agencies.
- C. Parent representatives employed by a public or private program that receives funds through the CSA or agencies represented on a FAPT may serve as a parent representative provided that they do not, as a part of their employment, interact directly on a regular and daily basis with children or supervise employees who interact

directly on a regular basis with children. Notwithstanding this provision, foster parents may serve as parent representatives.

- D. Parent representatives serving on the FAPT or members representing private service providers shall abstain from decision-making involving individual cases or agencies in which they have either a personal interest, as defined in §2.2-3101 of the State and Local Government Conflict of Interests Act, or a fiduciary interest.

### **3.2.5 Alternate Multidisciplinary Team**

- A. As provided for in COV §2.2-2648 (14), the SEC shall review, and may approve, requests from CPMTs to establish a collaborative, multidisciplinary team ("MDT") (see COV §2.2-5209) to meet the requirements of the CSA.
- B. Requests for such approval shall be in writing and made available for review by the OCS and the SEC.
- C. The CPMT shall develop and approve written policy governing the membership and operation of the MDT. The CPMT shall make these policies available for review to OCS before referral to the SEC for consideration. The policies must specify:
  - 1. The purpose of the MDT, including the types of cases/circumstances that will be considered.
  - 2. How the MDT procedures and practices align and integrate with those of the CPMT's member agencies.
  - 3. Whether the MDT shall be a standing team that meets regularly or if it will operate on an ad hoc basis. If on an ad hoc basis, under what circumstances will the MDT be convened and through what procedure. Examples of regular, standing MDTs include teams for children in residential care, truancy cases, or foster care prevention.
  - 4. The minimum number of agency representatives to constitute the MDT (from among the FAPT-required agencies). This specification shall identify the agencies that shall be represented on the MDT and processes for soliciting additional input from other agencies, as needed MDTs may include additional members as needed.
  - 5. How the MDT will include family engagement practices and be family-driven (See SEC Policy 3.3).
  - 6. The process through which funding approval requests will be submitted directly from the MDT to the CPMT.

7. Alternate multidisciplinary teams must meet all relevant statutory and policy requirements of the CSA.
- D. Specific requirements for MDT members (i.e., those delineated in Section 3.2.4.C. and 3.2.4.D of this policy) shall apply.

## **POLICY 3.3**

### **FAMILY ENGAGEMENT**

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#### **3.3.1 Purpose**

To guide local Community Policy and Management Teams (CPMT) under the Children's Services Act (CSA) concerning effective engagement with children and families seeking and receiving services. Effective family engagement is a core component in the system of care and is essential for achieving positive outcomes for children, families, and communities.

#### **3.3.2 Authority**

- A. Section 2.2-5200.A. of the *Code of Virginia (COV)* defines the intention to the CSA "to create a collaborative system of services and funding that is child-centered, family-focused and community-based ..." emphasizing the key role of children and families as partners in the CSA process.
- B. COV Section 2.2-2506 states that the CPMT "shall manage the cooperative efforts in each community to serve better the needs of troubled and at-risk youth and their families..." This responsibility includes the duty to: "Develop interagency policies and procedures to govern the provision of services to children and families in its community. (§2.2-5206 (1))
- C. COV Section 2.2-2508 (2) specifies that the Family Assessment and Planning Team (FAPT) shall "Provide for family participation in all aspects of assessment, planning, and implementation of services."
- D. COV Section 2.2-2508 (3) specifies that the FAPT shall: "Provide for the participation of foster parents in the assessment, planning, and implementation of services when a child has a program goal of permanent foster care or is in a long-term foster care placement."... "The opinions of the foster parents shall be considered by the family assessment and planning team in its deliberations."
- E. COV Section 2.2-2649 (4) requires the Office of Children's Services (OCS) to "provide training and technical assistance to localities in the provision of efficient and effective services that are responsive to the strengths and needs of troubled youth and their families." COV Section 2.2-2649 (10) requires OCS to identify, disseminate, and provide annual training for CSA staff and other interested parties on best practices and evidence-based practices related to the CSA program.

### 3.3.3 Definitions

*"Community Policy and Management Team (CMPT)"* is the entity that develops, implements, and monitors the local CSA program through policy development, quality assurance, and oversight functions.

For this policy's purpose, *"Family"* is broadly defined to include the youth and all persons the youth considers/defines as part of their family and who may be involved with or affected by the services provided. The family includes, but is not limited to, birth parents, fictive kin, adoptive parents, foster parents, grandparents, siblings (including half- and adult siblings), legal custodians, natural supports, and any other primary or secondary caretakers, including prospective caretakers in the case of children in the custody of a child-servicing agency.

*"Family engagement"* is a relationship-focused approach to establish and maintain full participation of families in the CSA process to make decisions leading to successful long-term outcomes. Families must be included as critical stakeholders to promote the safety, permanency, and well-being of youth and their families. Family engagement acknowledges, respects, and incorporates the family's unique history and experiences, including cultural, linguistic, and other essential aspects of self-identity into all decision-making processes.

*"Family Assessment and Planning Team (FAPT)"* implements the CSA by recommending services for children and families. When making a decision, the team will take into consideration every child and family's unique strengths and challenges when addressing their specific needs as best they can. Families are included in all FAPT assessment, service planning, and decision making.

*"System of Care"* is the collaborative framework used in CSA to address youth and families' needs, ideally generating optimal solutions to complex situations. The System of Care places the youth and family in the central role in service planning.

### 3.3.4 Values Statements

- A. Family participation in CSA must go beyond simply inviting family members to attend FAPT meetings and informing them about the decisions made in the FAPT process. The decision-making process must be family focused.
- B. The underlying values of CSA and the System of Care include the following beliefs:
  - 1. All families have strengths;
  - 2. Families are the experts on themselves;
  - 3. Families deserve to be treated with dignity and respect;

4. Families can make well-informed decisions about themselves and their children;
5. Family voice and choice is a trauma-informed approach to service engagement;
6. Families are shaped by their rich and unique histories and cultural backgrounds. This includes the entirety of those elements that shape individual members' identities and the family as a whole. Such elements include but are not limited to race, ethnicity, culture, religion, language, sexual orientation, gender identity, disability status, and history of personal and collective trauma.
7. Outcomes improve when families are involved in decision-making; and
8. A team that genuinely includes youth and family is often more capable of creative and high-quality decision-making than individuals or groups of professionals alone.

### **3.3.5 CSA Family Engagement Best Practices**

- A. CPMTs must have written policies for FAPT processes that describe how they ensure family and youth involvement in the assessment, planning, delivery, and review of services.
  1. Policies should make allowances for family members who cannot attend meetings held during regular business hours. Local CSA programs should consider holding FAPT meetings at non-traditional hours, prioritizing maximum family engagement.
  2. Local CSA programs should explore and, where feasible, arrange audio, video, and other Access and Functional Needs component platforms for virtual participation, when appropriate.
- i. All communication with youth and family, whether oral or in writing, will be provided, as feasible, in the youth and family's language of choice, and be mindful of various dialects and literacy needs.
  1. CSA programs and participating agencies should identify resources and arrange for translation services where needed.
  2. CSA program policies and practices should incorporate a review process to assure that all communication materials are easily understandable and accessible to families. This should include minimal use of jargon and technical language.
  3. The Office of Children's Services will provide a list of resources to assist localities with this requirement.

- C. The CPMT is responsible for equitable, consistent, efficient, and effective CSA services to children and their families. Redundant or duplicative processes should be streamlined, both within the CSA program and across child-serving agencies, to promote family engagement.
  - 1. For example, processes that require a youth and family to repeatedly "tell their story," which may be a traumatic trigger, should be eliminated to the greatest extent possible.
- D. Youth and family shall be given accurate information regarding the CSA process, their role and rights during the process, and how decisions are made regarding service delivery. This information includes an explanation of the affiliations and roles of the various participant in the process.
  - 1. Training, along with general information regarding the eligibility for CSA and the CSA decision-making process, should be available for all interested stakeholders.
- E. CPMTs are responsible for implementing procedures to assess and measure the quality of family engagement protocols and processes. These include, but are not limited to, periodic surveys of youth and families to better understand the CSA process from their perspectives. Local CSA programs should strive to stay aware of the success of their family engagement efforts and areas for improvement.
- E. CSA program staff and agency participants should hold themselves to the highest standards of respect for and responsiveness to all aspects of diversity, including differences in race, economic status, culture, disability status, gender identity, and other areas when interacting with youth and family.
- F. Local CSA programs should engage in outreach regarding the CSA process to marginalized youth and families, including, but not limited to, non-English speakers, those experiencing housing insecurity, and those experiencing poverty. In doing so, the CPMT should form partnerships with diverse and representative families, businesses, and community organizations.

### **3.3.6 Role of the Office of Children's Services (OCS)**

- A. Following its statutory responsibilities (OCS) will provide training and technical assistance to local CSA programs regarding family engagement. Such training and technical assistance can take place through a variety of formats and delivery mechanisms.
  - 1. OCS shall review family engagement practices in local CSA programs as a component of its interactions with local CSA programs. OCS will compile periodic state-level reports summarizing family engagement practices, activities, and available resources.
  - 2. OCS shall provide tools (e.g., a model family survey, program self-assessment frameworks) for use by local CSA programs in evaluating and improving their family engagement policies and practices.

## **Dispute Resolution Process (Adopted December 19, 2013)**

### **3.4.1 Appealable Actions; Parties; Venue; Written Decisions**

- (a) Administrative actions that may be appealed through the dispute resolution process are:
1. Denial, in whole or in part, by the OCS of financial reimbursement for expenditures incurred by a community policy and management team pursuant to COV § 2.2-2648(D)(20); and
  2. Request by the OCS for the recoupment of prior reimbursement provided to a CPMT, pursuant to COV § 2.2-2648(D)(20).
- (b) Only a CPMT can file an appeal. Appeals are not available to clients of CSA services or to any subgroup of the CPMT, including any member agency or individual member.
- (c) All hearings and meetings related to appeals shall be held in the Richmond, Virginia area. Informal hearings may be held at an alternate location as agreed to by all parties.
- (d) The terms of any final case decision by the OCS or the Council, as signed by it, rendered at the informal or formal stages of the Appeal Process shall be served upon the CPMT by mail unless service otherwise made is duly acknowledged by them in writing. The signed originals shall remain in the custody of the OCS as public records; and they, or facsimiles thereof, together with the full record or file in every case shall be made available for public inspection or copying except (i) so far as the OCS may withhold the same in whole or part for the purpose of protecting individuals mentioned from personal embarrassment, obloquy, or disclosures of a private nature including statements respecting the physical, mental, moral, or financial condition of such individuals or (ii) for trade secrets or, so far as protected by other laws, other commercial or industrial information imparted in confidence.
- (e) The CPMT shall be entitled to be represented by counsel at all hearings and meetings related to appeals.

### **3.1.2 Appeal Process**

- (a) Written finding. Upon receipt by the CPMT of a formal written notice from the Executive Director of OCS which communicates a finding by the Executive Director requiring action pursuant to subsection 3.4.1(a), and the basis for such finding, a local CPMT shall have the right to appeal such finding and action.
- (b) Request for Reconsideration. Within 45 calendar days of issuance of the formal written notice from the Executive Director, a CPMT appealing such finding and action may file a written Request for Reconsideration with the Executive Director stating its intention to appeal the finding and action and the reasons why the CPMT claims the finding and action are not appropriate. If the formal written notice from the Executive Director is delivered to the CPMT by regular mail, 3 calendar days shall be added to the time in which the CPMT must respond. The Request for Reconsideration shall also include a request for the informal conference pursuant to subsection 3.4.2(c). The CPMT may waive its right to the informal conference and submit a Notice of Appeal requesting a formal hearing before the Council pursuant to subsection 3.4.2(d). The Notice of Appeal shall include a statement of the

finding and/or action by the Executive Director being appealed and a brief statement of the reasons why the CPMT claims the finding and/or action are not appropriate.

(c) Informal conference.

1. The informal conference shall be held within 15 business days of the Executive Director's receipt of the Request for Reconsideration unless both parties agree in writing to hold the informal conference at a later date.
2. The purpose of the informal conference is to allow the CPMT to present, and the Executive Director to consider, any additional facts and reasons providing the basis for the CPMT's appeal of the written findings and action by the Executive Director.
3. The CPMT shall have the right to (i) receive reasonable notice thereof, (ii) appear in person and to be represented by counsel, (iii) have other witnesses appear for the informal presentation of factual data, argument, or proof related to the matter, (iv) have notice of any contrary fact basis of information in the possession of the OCS that can be relied upon in making an adverse decision, and (v) be informed, briefly and generally in writing, of the factual or procedural basis for a decision in any case prior to the commencement of the informal conference.
4. The OCS may, in its decision, rely upon public data, documents or information only when OCS has provided all parties with advance notice of its intent to consider such public data, documents or information. This requirement shall not apply to OCS's reliance on administrative precedent.
5. The Executive Director shall have the right to have counsel for the informal conference.
6. The CPMT shall be have the right and option to submit any documentation to support its case prior to, during, and/or at any time subsequent to the informal conference and prior to the rendering of the Executive Director's written determination.
7. Within 30 business days following the conclusion of the informal conference, or the receipt by the Executive Director of all relevant documents or exhibits, whichever is later, the Executive Director shall render a final decision. The parties may agree in writing to extend this period of time.
8. In the event the Executive Director who issued the written notice of finding and action is unable to conduct the informal conference or issue a written determination following the informal conference due to sickness, disability, or termination of their official capacity with the OCS, the timeframe provisions herein shall commence from the date that either alternate OCS personnel are assigned to the matter or a new proceeding is conducted, if necessary, whichever is later. The OCS shall provide notice within five calendar days to the CPMT of any such inability or incapacity of the Executive Director that necessitates a replacement or a new proceeding.
9. The CPMT may contest the final decision of the Executive Director by submitting to the OCS a written Notice of Appeal requesting a formal hearing before the Council within 30 calendar days of the issuance of the Executive Director's final decision. If the Executive Director's final decision is delivered to the CPMT by regular mail, 3 calendar days shall be added to time in which the CPMT must respond. If the OCS does not receive such a Notice of Appeal within this time period, the CPMT shall be deemed to accept the final decision of the Executive Director and shall immediately

comply therewith. The Notice of Appeal shall include a statement of the finding and/or action by the Executive Director being appealed and a brief statement of the reasons why the CPMT claims the finding and/or action are not appropriate.

(d) Formal hearing.

1. Within 5 business days of receipt by the Executive Director of the Notice of Appeal submitted by a CPMT, the Executive Director shall contact the CPMT chair to schedule a mutually agreeable date for the formal hearing and to establish guidelines for the receipt of documentation supporting the Notice of Appeal.
2. In all such formal proceedings all parties shall be entitled to be accompanied by and represented by counsel, to submit oral and documentary evidence and rebuttal proofs, to conduct such cross-examination as may elicit a full and fair disclosure of the facts, and to have the proceedings completed and a decision made. The burden of proof shall be upon the CPMT. The presiding officer at the proceedings may (i) administer oaths and affirmations, (ii) receive probative evidence, exclude irrelevant, immaterial, insubstantial, privileged, or repetitive proofs, rebuttal, or cross-examination, rule upon offers of proof, and oversee a verbatim recording of the evidence, (iii) hold conferences for the settlement or simplification of issues by consent, (iv) dispose of procedural requests, and (v) regulate and expedite the course of the hearing.
3. The Council shall conduct the formal hearings and the Chair of the Council shall serve as presiding officer. The decision of the Council shall be final and shall be made in writing in the form of a Final Order of Disposition. The Final Order of Disposition shall include:
  - a. written findings of fact;
  - b. conclusions of law or policy;
  - c. rationale for its conclusion, including the identification of any documents or policies upon which the conclusion was made; and
  - d. the corrective action plan and/or any repayment plan.
4. Timetable for decision
  - a. The decision of the Council shall be rendered within 30 calendar days of the formal hearing. If the Council fails to render a decision within 30 calendar days of the date of the formal hearing, the decision is deemed to be in favor of the CPMT.
  - b. The provisions of subsection 4(a) notwithstanding, if a quorum of the Council is unable to be met at the time the Council makes its decision due to a member's sickness, disability, or termination of their official capacity with the Council, then the timeframe provisions of subsection 4(a) shall be reset and commence from the date that either new board members are assigned to the matter or a new proceeding is conducted if needed, whichever is later. The OCS shall provide notice within five business days to the CPMT of any incapacity of the Council members that necessitates a replacement or a new proceeding.

### **3.3 Records Management (Adopted August 28, 1998)**

Each CPMT shall ensure collection of child-specific documentation to demonstrate compliance with the CSA. Such documentation shall include, at a minimum, the following:

- Case Manager designation
- Parent consent to release information
- Assessment data, including completed CANS
- Parental co-payment assessed
- Service Plan
- Desired outcomes and time frames
- Identification of services
- FAPT or MDT recommendations
- Parent/Guardian participation and consent to service plan
- CPMT authorization
- Signed vendor contract
- Vendor treatment plan(s)
- Vendor progress report(s)
- Utilization review data
- Updated Service Plan(s)

## **POLICY 3.6**

### **MANDATORY UNIFORM ASSESSMENT INSTRUMENT**

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#### **3.6.1 Purpose**

To provide consolidated guidance to local Children's Services Act (CSA) programs regarding the requirements for the utilization of the Child and Adolescent Needs and Strengths (CANS), the mandatory uniform assessment instrument used with all children and families receiving services through the CSA.

The specifications in this policy represent the minimum state CSA requirements for use of the CANS. Individual localities may adopt, through local policy, additional requirements regarding administration of the CANS at their discretion.

#### **3.6.2 Authority**

- A. Section 2.2-2648.D.11 of the Code of Virginia (COV) requires "a mandatory uniform assessment instrument and process to be used by all localities to identify levels of risk of Children's Services Act youth."
- B. Section 2.2-5210 of the COV specifies "utilizing a secure electronic database, the CPMT and the family assessment and planning team shall provide the Office of Children's Services with client specific information from the mandatory uniform assessment and information in accordance with subdivision D 11 of § 2.2-2648."
- C. Section 2.2-5212 A of the COV states "in order to be eligible for funding for services through the state pool of funds, a youth, or family with a child, ... shall be determined through the use of a uniform assessment instrument and process by the policies of the community policy and management team to have access to these funds."
- D. The 2018 Appropriation Act (Chapter 2, Item 282 B 8) states "The State Executive Council shall require a uniform assessment instrument."
- E. State Executive Council Policy 3.6 (adopted in December 2007 and updated in May 2008) establishes: "The Child and Adolescent Needs and Strengths Assessment (CANS) shall be the uniform assessment instrument for children and youth receiving services funded though the state pool. Use of the CANS shall be effective July 1, 2009."

### 3.6.3 Definitions

*“Child and Adolescent Needs and Strengths (CANS)”* means the Virginia versions of the Child and Adolescent Needs and Strengths assessment instrument, developed by John S. Lyons, Ph.D., as modified for CSA use. The Virginia CSA versions include the Standard and DSS-Enhanced CANS, each having two age versions (Birth to Four and Ages 5+) and each having a Comprehensive Version and a Reassessment version.

*“CANVaS 2.0”* means the online software application for the Virginia CANS created in accordance with COV §2.2-5210 to permit local governments to submit data from the mandatory uniform assessment to OCS.

*“CANS Certification”* means completion of the CANS training requirements, passing a certification examination and subsequent granting of a certificate on any CSA Virginia version of the CANS as required by the Praed Foundation.

*“Comprehensive CANS”* means a CANS full assessment, including the four child functioning domains, caregiver domain(s) and eight modules. The modules are rated only if prompted by a rating on specific trigger items.

*“Designated Super User / Report Administrator (DSU/RA)”* means a local staff person designated to serve as the Local Administrator for the CANVaS 2.0 system. DSU/RAs may be trained Super Users who are designated to serve in the role or other staff as determined by the locality. DSU/RAs serve as gatekeepers to CANVaS, have access to local CANS data including reports and are the locality's primary contact with OCS regarding CANS.

*“Discharge CANS”* means a Comprehensive version of the CANS, denoted as a “Discharge CANS” in the CANVaS 2.0. system, completed within 90 days prior to, at the time of, or 90 days following either the child and family's exit from CSA funded services or a final review by the Family Assessment and Planning Team (FAPT).

*“DSS-Enhanced CANS”* means the version of the Virginia CANS modified to include additional features for local Department of Social Services (DSS) use, including the ability to rate multiple caregivers and a Child Welfare module.

*“Initial CANS”* means a Comprehensive version of the Virginia CANS completed to determine eligibility for CSA-funded services in accordance with COV §2.2-5212.

*“Reassessment CANS”* means a Reassessment version of the Virginia CANS completed at regularly defined intervals as determined by local requirements, but no less than annually, for a child and family served by CSA. The Reassessment version does not contain the eight modules found in the Comprehensive version.

“*Standard CANS*” means the version of the Virginia CANS which does not include the additional features developed for the DSS-Enhanced CANS and is appropriate for use by public agency staff other than local DSS when administering the assessment.

“*User Agreement*” means the online document outlining the requirements for access and use of the CANVaS 2.0 site. Users shall indicate that they accept and honor these requirements.

### **3.6.4 CANS as the Mandatory Uniform Assessment Instrument**

- A. The Child and Adolescent Needs and Strengths assessment (CANS) shall be the uniform assessment instrument for children and youth receiving services funded through the state pool.
- B. All children receiving CSA state pool funded services shall have CANS assessments completed in accordance with the parameters specified in this policy.

### **3.6.5 Frequency of CANS Administration**

- A. Any child and family receiving CSA funded services shall be administered the CANS assessment.
- B. The Initial CANS is required to determine and/or support the child's eligibility for CSA consistent with the statutory requirement in COV §2.2-5212.
- C. The Initial CANS must be completed prior to the initiation of CSA-funded services described on a service plan (e.g., Individual Family Service Plan, Individualized Education Program, or Foster Care Plan), with an exception (14 days) for emergency services and placements as provided for in §2.2-5209.
- D. The CANS assessment is required annually. “Annually” is defined as within 60 calendar days of the anniversary date of the Initial CANS or subsequent Annual CANS, meaning the reassessment may fall 60 days prior to, on the date of, or 60 calendar days subsequent to the anniversary of the previous annual assessment date.
- E. The Reassessment version of the CANS may be used for the Annual assessment. Local governments shall have the discretion to use either the Comprehensive version or the Reassessment version of the CANS for the Annual assessment.
- F. The CANS completed within the time frame noted in D. above shall be referred to as the “Annual CANS.”
- G. Local policy adopted by the Community Policy and Management Team (CPMT) shall direct the frequency of reassessment of the CANS between the one year intervals of required Annual CANS unless otherwise required by another funding source (e.g. Medicaid).

H. The Discharge CANS shall be the Comprehensive version of the CANS.

- (1) Discharge CANS are required only when a child's CSA case is closed. A CPMT may opt to complete a Discharge CANS when transferring a case to another locality according to local written policy.
- (2) The Discharge CANS may be done 90 days prior to, at the time of, or within 90 days following either the completion of all CSA-funded services, or final FAPT review.
- (3) A Discharge CANS is not required in any of the following situations:
  - i. when a child and family receive CSA-funded services for less than 30 calendar days. An Initial CANS is required in such instances.
  - ii. at the time of transfer of services from one locality to another. The receiving locality will complete CANS as required per their local schedule.
  - iii. when one service ends, but the child and/or family continue to receive other CSA-funded services.

### **3.6.6 Use of the CANVaS 2.0 On-line Data System**

- A. Only employees of local government agencies (local department of social services, court services units, school divisions, community services boards/behavioral health authorities, and CSA offices) may create accounts in CANVaS 2.0 to carry out their job responsibilities in working with children and families.
- B. Prior to account creation, all users requesting access shall agree to the terms of the User Agreement required to access the CANVaS 2.0 site. The agreement addresses access, security and confidentiality, and closure (completion) of assessments within a specified time frame.

### **3.6.7 Required Certification by All CANS Assessors**

- A. Any individual who administers the CANS shall be appropriately certified on the use of the assessment. "Appropriately certified" means the individual has:
  - (1) completed one or more of the Virginia CSA training courses offered on the Praed Foundation CANS training and certification site;
  - (2) attained a score of 70 percent or higher on the certification exam;
  - (3) received a certificate granted by the Praed Foundation for the approved time frame of one year from date of certification; and
  - (4) administers the CANS only during the approved time frame of his or her certification.
- B. CANS completed by individuals who are not appropriately certified are not valid and shall not be used for any purpose, including service planning.

**Adopted:** December 13, 2018

**Effective:** January 1, 2019

**Revised:** N/A

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- C. Paper CANS score sheets may only be used if the individual administering the CANS is
- (1) appropriately certified, and
  - (2) the information from the score sheet is entered into CANVaS within 60 days by the assessor or an authorized data entry person.
- D. Sharing of specific information such as ratings of items on a certification vignette to enable another individual to pass the certification exam is prohibited. Individuals who share or receive such information may lose access to CANVaS 2.0 at the discretion of the Office of Children's Services.

### **3.6.8 Policy Review**

This policy will be subject to periodic review by the State Executive Council for Children's Services.

## 4 State Pool Funds

### Eligible Populations

#### 4.1.1 Children in Need of Services (CHINS) *(Adopted December 3, 2007; Revised July 1, 2008)*

State law mandates the provision of foster care services through the CSA state pool of funds (COV § 2.2-5211C subdivision B3). Two types of children and their families are eligible to receive foster care services (COV § 63.2-905):

- Children who are “abused or neglected” as defined in COV § 63.2-100; and
- “Children in need of services” as defined in COV § 16.1-228.

The FAPT or approved alternative MDT, in accordance with the policies of the CPMT, shall determine that a child is eligible for CSA funding as a “child in need of services” when the FAPT or MDT determines and documents that there are sufficient facts that ***a child meets all four of the following criteria***:

**1) *The child meets the statutory definition of a “child in need of services” (COV § 16.1-228).***

Specifically, “the child’s behavior, conduct, or condition presents or results in a serious threat to the well-being and physical safety of the child, or the well-being and physical safety of another person if the child is under the age of 14.”

This determination of facts shall be made in one of two ways:

- a. The FAPT and/or approved MDT shall determine that the child’s behavior, conduct, or condition meets this specific statutory definition and is of sufficient duration, severity, disabling and/or self-destructive nature that the child requires services.
- b. A court finds that a child falls within these provisions, based on “(i) the conduct complained of must present a clear and substantial danger to the child’s life or health or to the life or health of another person, (ii) the child or his family is in need of treatment, rehabilitation or services not presently being received, and (iii) the intervention of the court is essential to provide the treatment, rehabilitation or services needed by the child or his family.” *(COV § 16.1-228)*

**2) *The child has emotional and/or behavior problems* where either:**

- a. the child’s problems:
  - i. have persisted over a significant period of time or, though only in evidence for a short period of time, are of such a critical nature that intervention is warranted; and
  - ii. are significantly disabling and are present in several community settings, such as at home, in school or with peers; and
  - iii. require services or resources that are unavailable or inaccessible, or that are beyond the normal agency services or routine collaborative processes across agencies, or require coordinated interventions by at least two agencies.

or

- b. the child: is currently in, or at imminent risk of entering, purchased residential care; and
  - i. requires services or resources that are beyond normal agency services or routine collaborative processes across agencies; and
  - ii. requires coordinated services by at least two agencies.

**3) *The child requires services:***

- a. to address and resolve the immediate crises that seriously threaten the well-being and physical safety of the child or another person; and
- b. to preserve and/or strengthen the family while ensuring the safety of the child and other persons; and
- c. the child has been identified by the Team as needing:
  - i. services to prevent or eliminate the need for foster care placement. Absent these prevention services, foster care is the planned arrangement for the child.
  - or
  - ii. placement outside of the home through an agreement between the public agency designated by the CPMT and the parents or legal guardians who retain legal custody. A discharge plan for the child to return home shall be included.

**4) *The goal of the family is to maintain the child at home*** (for foster care prevention services) or return the child home as soon as appropriate (for parental agreements).

**4.2.5 Process for Determining Eligibility (*Adopted December 3, 2007*)**

The FAPT, or approved alternative multidisciplinary team, will determine eligibility relying on the expertise that each member brings to the team. The team is responsible for gathering, reviewing, and considering all relevant assessments. These assessments may include:

- Child and family sharing their assessment of their strengths, needs, and potential natural and community resources available;
- Community Services Board (*CSB*) assessing serious threat and emotional and/or behavior problems through a standard screening tool;
- Department of Juvenile Justice (*DJJ*) assessing that the alleged facts support a finding of serious threat as a “child in need of services;”
- DSS determining reasonable candidacy (*i.e., child is at risk of entering foster care*);
- CSA implementing its uniform assessment instrument; and
- Other psychological, psychiatric, psychosocial, and/or educational evaluations.

The team may designate the CSB as responsible for summarizing and presenting to the FAPT or approved MDT all relevant assessments when needed for a child who has significant mental health needs. The team will use a standard eligibility determination checklist to help provide consistent application in determining eligibility across all agencies and communities.

To assist in eligibility determination with a specific child, the team may require a recent (*e.g., within 30 days*) independent clinical evaluation of the child and family to provide additional assessment information. This assessment may include child and family circumstances, history, strengths and needs of the child and family, the seriousness of the threat, and the services and supports the family currently is using or has available. The CPMT or FAPT may choose to use a licensed mental health professional designated by the community services board and/or another licensed mental health professional designated by the CPMT for clinical evaluations.

#### 4.2.2 “Wrap Around Services for Students with Disabilities” (*Adopted January 10, 2011*)

The special education mandate cited in COV § 2.2-5211(B)(1) may be utilized to fund non-residential services in the home and community for a student with a disability when the needs associated with his/her disability extend beyond the school setting and threaten the student's ability to be maintained in the home, community, or school setting.

## **4.2 Payment for Services and Change of Legal Residence** ***(Adopted 1994)***

The CPMT jurisdiction where the child legally resides shall be responsible for payment for the services identified in the child/family's Individual Family Service Plan.

Issues of legal residence should be addressed by the legal services assigned to the CPMT. In the event that the child/family's legal residence changes, the following shall govern payment for services:

- The former CPMT jurisdiction is responsible for:
  - (a) providing written notification to the new CPMT jurisdiction of the fact that the child/family's residence has changed and
  - (b) forwarding child's/family's Individual Family Service Plan and other FAPT or MDT documents to the new CPMT jurisdiction; and
  - (c) informing service providers of changes in the child/family's residence.
  
- The former CPMT jurisdiction pays for services until 30 calendar days after the new CPMT receives written notification of the child/family's residence in the new CPMT locality.
  
- When the residence of the child/family transfers to a new CPMT jurisdiction, the receiving CPMT jurisdiction must review the current Individual Family Service Plan and adopt or revise and implement within 30 calendar days.
  
- CPMT jurisdictions are encouraged to:
  - a. Keep track of the child/family's residence status;
  - b. Notify receiving Community Policy and Management Teams as soon as they know of the child/family's pending move, to facilitate planning; and
  - c. To work cooperatively to resolve issues related to legal residence.

### **4.3 “Carve-Out” of Allocation for Development of New/Expanded Services (Adopted April 30, 2013)**

In any 12-month period two or more localities may submit a proposal to allocate (‘carve out’) a portion of their state and local pool fund allocations to defray one-time program start-up costs for new or expanded CSA services which are designed to meet the needs of children and families and to maintain children in their home community. The allocation shall not exceed, per jurisdiction, \$100,000 or 5% of their allocation in the fiscal year of application, whichever is smaller. Not more than \$2,000,000 in state general funds may be used for this purpose.

Programs for which these funds may be applied must be designed to:

- (a) provide CSA services for which a demonstrated need exists in the locality, based on assessment using the Service Gap Survey distributed by the OCS and align with the goals of the Commonwealth; and
- (b) become financially self-sustaining beyond the start-up phase. Services designed to be supported through “fee for service” arrangements may be considered financially self-sustaining.

The proposal for use of funds shall be submitted to and approved by the OCS and will include, but not be limited to:

- (a) description of the service,
- (b) support for the need,
- (c) cost assessment,
- (d) evaluation of public/private collaborations,
- (e) information related to financial sustainability of the program, and
- (f) expected outcomes and mechanism for providing program evaluation.

All fiscal accountability requirements of CSA shall be applicable to use of funds.

**Fiscal Impact:** Implementation of this policy has the potential fiscal impact of \$2,000,000.

Implementation of the policy shall therefore be dependent upon appropriation of necessary funds.

## 4.4 Restrictions on Pool Fund Usage

### 4.4.2 Reimbursement and Children Placed Outside Community and Across Jurisdictions

“Notwithstanding any provision of this chapter to the contrary or any practice or previous decision-making process of the State Executive Council, Office of Children’s Services, State and Local Advisory Team, any Community Policy and Management Team, any Family Assessment and Planning Team or any other local entity placing children through the Children’s Services Act (CSA), the following restrictions shall control:

1. “In the event that any group home or other residential facility in which CSA children reside has its licensure status lowered to provisional as a result of multiple health and safety or human rights violations, all children placed through CSA in such facility shall be assessed as to whether it is in the best interests of each child placed to be removed from the facility and placed in a fully licensed facility and no additional CSA placements shall be made in the provisionally licensed facility until and unless the violations and deficiencies relating to health and safety or human rights that caused the designation as provisional shall be completely remedied and full licensure status restored.”
2. “Prior to the placement of a child across jurisdictional lines, the family assessment and planning teams shall (i) explore all appropriate community services for the child, (ii) document that no appropriate placement is available in the locality, and (iii) report the rationale for the placement decision to the community policy and management team. The community policy and management team shall report annually to the Office of Children’s Services on the gaps in the services needed to keep children in the local community and any barriers to the development of those services.”
3. “Community policy and management teams, family assessment and planning teams or other local entities responsible for CSA placements shall notify the receiving school division whenever a child is placed across jurisdictional lines and identify any children with disabilities and foster care children to facilitate compliance with expedited enrollment and special education requirements.”

*Statutory Authority: § 2.2-5211.1 of the Code of Virginia*

### 4.4.3 Medicaid Funded Services

“Community Policy and Management Teams shall use Medicaid-funded services whenever they are available for the appropriate treatment of children and youth receiving services under the Children’s Services Act. Effective July 1, 2009, pool funds shall not be spent for any service that can be funded through Medicaid for Medicaid-eligible children and youth except when Medicaid-funded services are unavailable or inappropriate for meeting the needs of a child.”

*Statutory Authority: 2011 Appropriation Act, Chapter 890, Item 274 E.*

## 4.5 Fiscal Procedures

### 4.5.1 Protected Funds (Adopted 1994, Revised 1995, 1996, 1997)

Each year localities may protect a specific amount of the total state pool to provide services to the targeted non-mandated and other eligible populations. The amount that each locality is permitted to protect is determined by formula and is in no case less than \$10,000. Each locality will be notified of its protection level prior to the beginning of the fiscal year.

### 4.5.2 Pool Fund Reimbursement

- a) Final claims for reimbursements for prior year payments will not be accepted after the first quarter of the next fiscal year. *(Adopted June 30, 1995)*
- b) With the exception of the final year-end report referenced above, request for reimbursement of local pool expenditures must be submitted no later than thirty (30) days after the close of the quarter in which the expenditure was paid. Localities may continue to report as often as monthly, but must report at least every quarter. A report should be submitted at the end of the quarter even if it indicates no expenditures were made during that quarter. The state fiscal agent will be monitoring local compliance with this requirement and will advise local administrative officials if there is non-compliance. *(Adopted June 30, 1995)*
- c) Effective for the quarter ending September 30, 1995, localities that have not submitted their Quarterly Services Utilization report will have their pool reimbursements held in abeyance until the quarterly report is submitted. A notice will be mailed to the local fiscal agent advising that the reimbursement request is considered incomplete until the past due statistical data is received. The quarterly report will be mailed to the same address as the fiscal reports beginning with the September 30 report due on or before October 15. The CSA Evaluation staff will be sending each locality a revised minimal report format including a submission timetable and at that time will again remind localities of the fiscal impact of not submitting the statistical data. *(Adopted June 30, 1995)*
- d) Effective April 30, 1999 a locality may request a waiver to the September 30 final year-end report requirement, either by written request for an extension to the OCS prior to the September 30 cutoff date, or post September 30, only if local governments demonstrate mitigating circumstance beyond their control. *(Adopted April 30, 1999)*
- e) Expenditures and Refunds are reported according to the following expenditure reporting categories:
  - Foster Care - IV-E children in Licensed Residential Congregate Care ; pool expenditures for costs not covered by IV-E (i.e., non room-and-board)
  - Foster Care - all others in Licensed Residential Congregate Care
  - Residential Congregate Care – CSA Parental Agreements ; DSS Noncustodial Agreements
  - Non-Mandated Services/Residential/Congregate
  - Educational Services - Congregate Care
  - Treatment Foster Care – IV-E
  - Treatment Foster Care

- Treatment Foster Care – CSA Parental Agreements ; DSS Noncustodial Agreements
- Specialized Foster Care – IV-E ; Community Based Services
- Specialized Foster Care
- Family Foster Care – IV-E ; Community Based Services
- Family Foster Care Maintenance only
- Family Foster Care – Children receiving maintenance and basic activities payments; independent living Stipend/Arrangements
- Community - Based Services
- Community Transition Services – Direct Family Services to Transition from Residential to Community
- Special Education Private Day Placement
- Wraparound services for students with disabilities
- Psychiatric Hospitals/Crisis Stabilization Units
- Non-Mandated Services/Community-Based  
*(Adopted 1994, Revised 1995, 1996, 1997, 1998, 1999, 2000, 2009, 2012)*

- f) Each Pool Fund Reimbursement Request requires certification of compliance with CSA requirements per the following: “The expenditures and refunds reported herein were incurred in accordance with provisions of the CSA, and have not been reported on a previous claim. Documentation is maintained to support the expenditure and refund amounts reported, and to demonstrate that each expenditure and refund was made on behalf of a specific child (or list of specific children) and complies with the CSA Manual, COV and Appropriation Act requirements including utilization management and FAPT criteria.” *(Adopted 1995, Revised 1999)*

#### 4.5.3 Administrative Funds *(Adopted 1994)*

To receive administrative funds, each locality is required to appropriate a local match based on the match rate used in the pool formula. Inclusive of the state allocation and local match, every locality shall receive the larger of \$12,500 or an amount equal to two percent of the fiscal year 1994 pool allocations. No locality shall receive more than \$50,000 inclusive of the state allocation and local match.<sup>2</sup>

Each year, the Community Policy and Management Team must submit to the State Fiscal Agent budget plans for using administrative funds (state and local combined).

Upon receipt of the Administrative Funds Budget Plan, the State Fiscal Agent will process a single payment to the fiscal agent of the Community Policy and Management Team for the state's share of the administrative allocation. The local government should submit the administrative plan to the state fiscal agent by June 15<sup>th</sup> of the fiscal year to ensure payment.

If, during the course of the year, the Community Policy and Management Team elects to use its administrative funds in a manner other than proposed in the Budget Plan, it may do so without amending the plan, provided the funds are expended for administrative and coordinating expenses or direct services

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<sup>2</sup> With the allocation of an additional \$500,000 per year for administrative funds in the FY2017-2018 Appropriation Act, the minimum amount for localities increased to \$15,159 and the maximum to \$60,636.

to eligible youth and families. The decision on specific use of administrative funds rests with the Community Policy and Management Team.

The local fiscal agent must account for CSA administrative expenditures such that they are clearly identifiable as CSA administrative expenditures.

#### 4.5.4 Parental Contributions for Services (*Adopted February 23, 2000*)

Effective February 23, 2000, the CPMT shall consider the following criteria when determining whether parental contributions are appropriate:

- Parents of children in out-of-home placements should not be charged a payment for services in addition to the child support order. Instead, for **out-of-home care**, the CPMT shall implement existing state law and policy requiring referral of such cases to the Division of Child Support Enforcement (DCSE). The non-custodial parents of children in out-of-home care are to be referred to the DCSE for the collection of child support. (*Statutory authority: COV §63.2-1910*)
- Parents of children in **in-home care** should be charged a standard parental co-payment based both on the ability of each parent to pay and the cost of the service. Parents and legal guardians of children receiving in-home care are expected to contribute financially to the cost of services. Each local government shall develop policies to assess this fee. Local governments are encouraged to assess a fee based on a locally developed scale.

#### 4.5.5 Supplemental Set-Aside (*Adopted July 1, 1997*)

A CPMT may request a supplemental allocation at any time before the close of the program year. In order to be approved for a supplemental allocation, the CPMT must demonstrate each of the following:

- a) A known cost has been, or will be, incurred for a specific child or children in the MANDATED TARGET population.
- b) Any amount of the allocation for the non-mandated population (NON-MANDATED TARGET + OTHER ELIGIBLE in the Allocation Plan) which, 1) exceeds the protection level established for that year and 2) is not yet expended or obligated, may be re-allocated for use with the MANDATED TARGET population. For this purpose, obligations are unpaid purchase orders, contracts, or any other agreements, which bind the CPMT to pay for goods or services to be delivered to specific children, at a specified cost, over a defined period of time.
- c) Localities requesting supplemental funds must also demonstrate that they are in compliance with all provisions of the CSA including, but not limited to, instituting and operating effective cost control measures as recommended by the Council.
- d) Requests for supplemental allocations are filed electronically via the CSA web-site <http://www.csa.virginia.gov>. The requests will be reviewed, and the local fiscal agent will be notified upon approval. From the local government reporting web page, localities may also access an Excel spreadsheet from their latest CSA Data Set submission as well as a local Transaction History Report to assist them in filing their supplemental allocation requests.

- e) It is no longer necessary to submit a hard copy of the Request for Supplemental Allocation form to the OCS; however, a hard copy containing all necessary signatures should be maintained by the local CPMT.
- f) Documentation to support the supplemental allocation request may be requested by OCS following receipt of the supplemental allocation request. Staff from the OCS may also conduct a site visit to review information and supporting documentation prior to the approval of a supplemental request.
- g) Localities whose mandated expenditures have increased more than 10% over the previous year's total mandated expenditures will be required to complete the "Comment" portion of the Supplemental Allocation Request form. *(NOTE: Any locality submitting a Request for Supplemental Allocation may provide comments in this area that they feel will assist OCS in processing their request.)* These comments should provide additional information related to locality trends that are affecting CSA costs. It is not necessary to restate the financial information already submitted in other portions of the report.

## 4.6 Denial of Funds (Adopted June 23, 2011)

All of the requirements specific to the CSA are outlined in the Code of Virginia and the Appropriation Act. The statutory requirements and authority of the Council (§ 2.2.-2648), the State and Local Advisory Team (§ 2.2-5202), the OCS (§ 2.2-2649), the local Community Policy and Management Team (§ 2.2-5206), and the local Family Assessment and Planning Team (§ 2.2-5208) are described. Additional requirements are found in the CSA (§ 2.2-5200 et. seq.), the Appropriation Act and Council policy. Violations of any state or federal law or policy may result in denial of funds.

Denials of CSA state matching funds are based on a locality's failure to comply with, or violations of, statutory requirements and policy, whether they are specific to the CSA or are those promulgated by the participating agencies.

Any service which requires licensure can only be rendered by a provider licensed to provide that service in Virginia. State law requiring licensure of providers may be found at § 37.2-405. *(NOTE: This citation is specific to services licensed by the Virginia Department of Behavioral Health and Developmental Services. § 16.1-309.9 authorizes the Department of Juvenile Justice to regulate community-based facilities and services; §§ 63.2-217, 63.2-1732, 63.2-1733, 63.2-1734 authorize the State Board of Social Services and Child Day-Care Council to regulate facilities and agencies serving adults and children; § 22.1-323 authorizes the Board of Education to license private schools for students with disabilities.)*

Any state or local agency, or CPMT, that has cause to believe that the statutory requirements of CSA, including those relating to licensure, are not being met by a locality shall contact the Director of the OCS. State agencies are responsible for notifying the OCS when a provider loses a license, even if that provider is not currently billing for services. OCS will make reasonable efforts to notify localities.

Copies of local audits which include review of CSA funding must be provided to the OCS within three business days from presentation to the local governing body. If the local audit determines that services provided which affect CSA, for example Title IV-E, were inappropriate, the locality must inform the OCS.

Steps A-F outline the procedures followed to investigate suspected or determined non-compliance by a locality.

- A. The OCS will investigate the complaint by reviewing available data, including but not limited to, documentation submitted by the complainant, CSA data set and fiscal pool fund reporting reimbursement, local financial and program records, including CPMT and FAPT minutes, other information supplied by the locality and interviewing appropriate individuals, if necessary. The OCS may consult with the Office of the Attorney General and any other parties it deems appropriate.
- B. State and local agencies, including the one reporting the alleged inappropriate use of funds, shall supply any necessary and/or requested supporting documentation relevant to the allegation.
- C. If the OCS is unable to determine the validity of the report or determines there was no violation, the incident is closed with notification to the reporting state agency and the CPMT in question.

- D. If the OCS suspects non-compliance but has not yet made a determination of such, the OCS shall communicate with the Chief Administrative Officer of the locality and the CPMT Chair as appropriate to resolve the issue.
- E. If the OCS determines that a violation of state law or policy, or any federal law pertaining to the provision of any service funded in accordance with § 2.2-5211 has occurred, the OCS will notify the chief administrative officer of the local government and the CPMT chair within five business days. The OCS will request the locality immediately discontinue that practice and the locality should notify any affected providers. The OCS will also describe the actions it intends to take, if any. Such action may include but is not limited to, a corrective action plan developed in consultation with the locality and/or denial of state funding. Failure of the OCS to meet the timeline does not preclude the OCS from denying funds or recovering payments.
- F. If another state agency learns during the course of its work (routine reviews, audits, complaint investigations, etc.) of a violation of state law affecting the provision of services under the CSA, the agency shall contact the OCS.

If another agency discovers or learns of what it believes to be a possible violation of the CSA, the responsible agency staff person should contact the Executive Director of the OCS and explain what agency policy or federal or state law is involved, how the other agency believes the violation has occurred and the impact of, or relationship to, the CSA.

If the OCS becomes aware of a violation of another agency's laws, policies or requirements that affects the provision of services funded by the CSA, the Executive Director (or designee) will contact the appropriate staff person at the other agency. The OCS will provide any supporting documentation requested by the other agency.

The OCS may review payments and conduct audits for a period of time, three years before or after the date of the alleged noncompliance (not to exceed a total of three years), regardless of the date of discovery of the alleged noncompliance.

Should the OCS discover noncompliance, the OCS may request that the Auditor of Public Accounts (APA) determine whether to pursue an audit of a locality. This policy should not be construed to put any limitations on the APA or other parties that have responsibilities regarding the Commonwealth's or federal funds and their investigation of the use of those funds.

This policy takes effect July 1, 2011. Pursuant to § 2.2-2648, the OCS may deny funding to local governments not in compliance with the provisions of the CSA and federal and state law.

## 4.7 RESPONSE TO AUDIT FINDINGS WITH REGARD TO THE CHILDREN'S SERVICES ACT

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### 4.7.1 PURPOSE

To provide guidance to the Office of Children's Services (OCS) and improve consistency and transparency for localities when the OCS Executive Director is carrying out his or her duties under the State Executive Council for Children's Services (SEC) Policy 4.6 (Denial of Funds) in responding to OCS audit noncompliance findings by local Children's Services Act (CSA) programs.

### 4.7.2 AUTHORITY

Section 2.2-2648 of the *Code of Virginia* authorizes the SEC, paraphrased in relevant part, to do the following:

- (i) Establish interagency programmatic and fiscal policies which support the purposes of CSA (subdivision D (3))
- (ii) Provide for dispute resolution procedures for administrative actions that support the purposes of the CSA (subdivision D (4));
- (iii) Provide for the administration of necessary functions that support the work of the OCS (subdivision D (6));
- (iv) Establish and oversee the operation of an informal review and negotiation process with the OCS Executive Director and a formal dispute resolution procedure before the SEC, to include formal notice and an appeals process, should the Executive Director or SEC find, upon a formal written finding, that a community policy and management team (CPMT) failed to comply with any provision of CSA (subdivision D (19)); and
- (v) Deny state funding to a locality, in accordance with (iv) in this section, where the CPMT fails to provide services that comply with CSA and other applicable statutes or policies (subdivision D (20)).

Section 2.2-2649 of the *Code of Virginia* authorizes the OCS to:

- (i) Develop and provide for the consistent oversight for program administration and compliance with state policies and procedures (subdivision B (3));
- (ii) Provide an informal review and negotiation process pursuant to § 2.2-2648 D (19); and
- (iii) Implement, in collaboration with participating state agencies, policies, guidelines and procedures adopted by the State Executive Council (subdivision B (7)).

### 4.7.3 DEFINITIONS

*"Audit"* means a review by OCS employees of a local CSA program's policies, procedures, and practices through interview, observation, and the review of documentation to determine compliance, in whole or in part, with the requirements of a state or federal laws and regulations, including the applicable Appropriation Act provisions, or policies promulgated by the SEC or the participating agencies of the CSA, that govern or direct the operations of local CSA programs.

*"Audit cycle"* means the three-year period in which OCS conducts routinely scheduled audits of all localities in the Commonwealth.

*"Case specific finding"* means a noncompliance finding emerging from an expenditure of CSA state pool funds for an individual child and/or family.

*"Noncompliance finding"* means a finding made by the Executive Director of the Office of Children's Services that a CPMT, in its implementation of the CSA program, has not complied with the provisions of the Children's Services Act (§§ 2.2-5200 et seq.), the policies of the State Executive Council, any state or federal law pertaining to the provision of services pursuant to the CSA, the applicable provisions of the Appropriation Act, or any policies promulgated by the participating state agencies (as identified in § 2.2-2648(B)) pertaining to the services funded pursuant to the CSA. There are three levels of noncompliance findings as outlined herein. A finding of non-compliance shall provide the basis for the "formal written finding as described in § 2.2-2648 (D) (19)."

*"Participating agencies"* means any of the child-serving agencies required by § 2.2-5205 to serve on the Community Policy and Management Team and to implement the CSA in a locality.

*"Repeat or subsequent violation"* means a locality, in two successive audit cycles, violates the same policy, regulatory, or statutory requirement (e.g., failure to complete the CANS assessment). Repeat or subsequent findings will typically occur on the next regularly scheduled audit.

### 4.7.4 NONCOMPLIANCE LEVEL FINDINGS

The subsection delineates three levels of noncompliance findings as defined above. The parameters and examples provided in each level are not exhaustive but illustrative and shall guide OCS in determining into which level any noncompliance finding is categorized based on the noncompliance finding's similarity to the general parameters and specific examples provided below.

#### 4.7.4.1 Level Three Noncompliance Finding

- A. *General Parameters:* Audit findings in this category are case specific and occur when CSA state pool funds have been reimbursed when the expenditure is not authorized by statute, regulation, or policy.
- B. *Examples of Level Three Specific Noncompliance Findings:*
1. The child and/or family are ineligible for CSA funding per §§ 2.2-5211 and 2.2-5212 of the *Code of Virginia* or documentation of eligibility (e.g., an Individualized Education Program [IEP] or a Child in Need of Services [CHINS] eligibility determination) was not available for review during the audit.
  2. Use of CSA funding for services for which another appropriate federal or state funding source was available.
  3. Services were not recommended by a Family Assessment or Planning Team (FAPT) or Multidisciplinary Team (MDT) in accordance with § 2.2-5208 (8) and/or an Individual and Family Service Plan (IFSP) was not developed, except where a local CPMT policy allows such expenditures to be exempt from FAPT or IFSP requirements (e.g., “maintenance only” foster care or IEP-mandated placements) in accordance with § 2.2-5208 (4).
  4. The funding of services was not authorized by the CPMT as required by § 2.2-5206 (9).
  5. Violations of statutes, regulations, or policies of the participating agencies in the provision of services, such as:
    - a. Payment for Enhanced Foster Care Maintenance when the Virginia Department of Social Services’ (VDSS) Virginia Enhanced Maintenance Assessment Tool (VEMAT) policy was not followed;
    - b. Title IV-E funding was denied due to error; or
    - c. The local DSS used an unapproved/unlicensed foster home placement.
  6. Services were within the scope of responsibility of another agency as specified in the statutes, regulations, policies, and/or guidance of a participating agency (e.g., services to students with disabilities provided in the public school setting; administrative costs of a local DSS such as paternity testing, routine drug screening of biological parents where the VDSS has allocated funds for that purpose, or legal services related to prosecuting child abuse and neglect; case management by a local DSS for youth committed to the Department of Juvenile Justice (DJJ));
  7. The service provider did not meet licensing requirements for the specific service (e.g., behavioral health providers or other providers [LCPA, day care] requiring licensure by VDSS).

8. The use of a non-Medicaid provider, when the child and/or family were Medicaid eligible, and there is no substantiation that a Medicaid provider was unavailable or inappropriate in accordance with Item 285, section D. of the Appropriation Act.
9. Failure to refund to CSA recoveries made against previously claimed costs (e.g., child support collections, Title IV-E recoveries, SSI, or retroactive Medicaid payments for services).
10. Failure to correct erroneous expenditure reports that require adjustments to CSA match rate categories.
11. Claiming reimbursement for expenditures after September 30 which were incurred in the previous fiscal year in violation of SEC Policy 4.5.2.

#### 4.7.4.2 Level Two Noncompliance Finding

- A. *General Parameters:* Findings in this category are case specific and involve a violation of an applicable statute, regulation, or policy but, had the requirements been followed, would have been eligible for reimbursement through state pool funds. Findings may be mitigated by corrective action already implemented on a case-specific basis (e.g., FAPT or CPMT action was not timely made but was taken in a reasonable time thereafter).
- B. *Examples of Specific Level Two Noncompliance Findings:*
  1. Assessments with the mandatory uniform assessment instrument (i.e., CANS) are not completed in accordance with § 2.2-2648 (11), 2.2-5212 (A), and SEC Policy 3.6.
  2. The CPMT did not have the child-specific documentation required under SEC Policy 3.5 (Records Management) or to demonstrate eligibility for CSA funded services per § 2.2-5212 and/or SEC Policy 4.1.
  3. There was missing, incomplete, or inaccurate financial documentation (e.g., purchase orders, invoices, or vendor contracts) but enough documentation to determine that the service was eligible for state pool fund reimbursement per SEC Policy 3.5 and Audit Standards promulgated by Virginia Department of Accounts Agency Risk Management and Internal Control Standards (ARMICS).

#### 4.7.4.3 Level One Noncompliance Finding

- A. *General Parameters:* Audit findings in this category are **not** case specific but represent failure to meet administrative and operational standards required statutory, regulatory, or policy requirements.
- B. *Examples of Specific Level One Noncompliance Findings:*
  1. The CPMT's policies and/or practices do not comply with § 2.2-5206 and Item 285 of the Appropriation Act.

2. The CPMT does not have documentation of long-range community planning and utilization management activities per § 2.2-5206 (4).
3. CMPT and FAPT membership does not meet statutory requirements per §2.2-5205 and § 2.2-5207.
4. Statements of Economic Interest for designated CPMT and FAPT members are not completed in compliance with § 2.2-5205 and § 2.2-5207.
5. The CPMT's fiscal controls (e.g., separation of purchasing and payment authority) do not meet the Audit Standards promulgated by Virginia Department of Accounts Agency Risk Management and Internal Control Standards (ARMICS).
6. CSA-related information technology security controls (e.g., users sharing accounts or passwords) do not meet Information Technology policy SEC-501 promulgated by the Virginia Information Technology Agency (VITA).
7. The locality failed to properly reconcile CSA reimbursement requests with other fiscal systems per Audit Standards promulgated by Virginia Department of Accounts Agency Risk Management and Internal Control Standards (ARMICS).

#### 4.7.5 REVIEW OF FINDINGS BY OCS

The OCS Executive Director shall review (i) the audit report; (ii) any response, including corrective actions and quality improvement plans from the locality, (iii) the recommendation of the auditor(s); and (iv) any OCS internal staff review prior to responding to the noncompliance finding. After such review, the OCS Executive Director shall issue a written response describing the findings made and action to be taken.

#### 4.7.6 RESPONSES TO NONCOMPLIANCE FINDINGS

##### 4.7.6.1 Response to Level Three Noncompliance Findings

The OCS Executive Director shall (i) require a corrective action plan and (ii) recover the noncompliant state pool fund reimbursements upon the first and any repeat or subsequent Level Three Noncompliance Finding.

##### 4.7.6.2 Response to Level Two Noncompliance Findings

- A. *First Level Two Noncompliance Finding:* The OCS Executive Director shall require the locality to submit a corrective action plan on the first instance of Level Two Noncompliance Finding.
- B. *Repeat Level Two Noncompliance Finding:* The OCS Executive Director shall (i) require a corrective action plan and (ii) recover the state pool funds on any repeat or subsequent Level Two Noncompliance Finding as follows:

1. On repeat or subsequent findings of noncompliance, state pool funds will be recovered in proportion to the percentage of the audit sample found to be noncompliant (i.e., if 20% of the number of cases in the audit sample are found non-compliant, recovery will be 20% of the total amount found in violation for that issue), with a minimum recovery of 10% of the amount of funds found as noncompliant.
2. On a third repeat finding of noncompliance, state pool funds will be recovered at 100% of the amount found in noncompliance.

#### **4.7.6.3 Response to Level One Noncompliance Findings**

- A. *First Level One Noncompliance Finding:* The OCS Executive Director shall require the locality to submit a corrective action plan on the first instance of Level One Noncompliance Finding.
- B. *Repeat or subsequent Level One Noncompliance Finding:* The OCS Executive Director shall temporarily deny state pool fund reimbursements on any repeat or subsequent instance of a Level One Noncompliance finding until a corrective action plan is submitted and implemented. (For noncompliance findings related to required membership on FAPT or CPMT, documentation of reasonable and ongoing efforts to meet the requirements will be considered as implementation of corrective action.)
- C. *Corrective Action Plan Compliance:* Once a local CSA program is substantially in compliance with all applicable requirements of a Level One Noncompliance Finding resulting in suspension of state pool fund reimbursements, all funds will be retroactively released and new requests for reimbursement will be approved.

#### **4.7.7 APPEAL OF OCS RESPONSE**

The CPMT may appeal the findings and action taken by the Executive Director of OCS in accordance with SEC Policy 3.4 (Dispute Resolution Process).

#### **4.7.8 ANNUAL REPORT TO THE STATE EXECUTIVE COUNCIL**

The OCS Executive Director shall annually report to the SEC a summary of the year's audits, audit findings, and any remedial actions taken.

#### **4.7.9 POLICY REVIEW**

This policy will be subject to annual review by the SEC Finance and Audit Committee to determine whether there are necessary modifications that should be recommended to the findings in each Noncompliance Finding Level.

## 5. Data Reporting

### 5.6 CSA Data Set

5.6.1 Service Placement Types *(Adopted 6/12/2008; Rev June 2010; Rev March 2011; Technical edits December 2011, July 2016, July 2021)*

#### **COMMUNITY-BASED SERVICES (50% of local base match rate)**

**Community-Based Services:** Community services provided to youth while living at home, in the home of extended family, in a regular foster family home, or in an independent living arrangement. This category includes community services provided to the youth's planned permanent caregiver in the family home or home community. (It does not include payments for family foster care basic or enhanced maintenance, family foster care basic activities, independent living stipends, or independent living arrangements. These payments are reported under the categories specific to those services.)

**Community Transition Services:** Community transition services provided directly to the planned permanent caregiver (e.g., parents, relatives and foster families) of youth in congregate/residential placements for the primary purpose of preparing the planned permanent caregiver and youth for the youth's discharge and transitioning from a residential/congregate care setting to the family's home. The settings for these services are primarily in the planned permanent caregiver's home and home community, but may also be in the residential care setting or its local community if provided directly to the planned permanent caregiver with the primary purpose of helping transition the youth home.

**Intensive In-home Services:** Services provided to youth and their families when the youth are living at home. Intensive in-home services are provided typically, but not solely, in the residence of a youth who is at risk of being removed from the home or who is being transitioned home from an out-of-home placement. These services may include crisis intervention/treatment; individual and family counseling; life, parenting, and communication skills; and 24-hour per day emergency response. By delivering the service in the home, clinicians are able to address family system issues and support parents in effective behavioral techniques.

**Intensive Care Coordination:** Services conducted by an intensive care coordinator, as defined under the State Executive Council guidelines, for youth who are at risk of entering or who are placed in residential care. (Community-based services provided concurrent to Intensive Care Coordination are to be reported in the community-based services category.)

#### **EDUCATION SERVICES & FOSTER CARE SERVICES (Local base match rate)**

**Special Education Private Day Placement:** Educational services for students with disabilities receiving special education and related services in a private day school in accordance with the placement decision in the IEP. *(Non-IEP services provided to a youth in a private day placement are to be reported as Community-based services or as Wrap-Around Services for Students with Disabilities, as determined appropriate by the FAPT.)*

**Wrap-Around Services for Students with Disabilities:** Non-IEP services in the IFSP and approved by the FAPT provided to a student with a disability and/or the student's family which are necessary to keep the student out of a more restrictive placement. Wrap-around services are non-residential and are provided outside of the school setting in the home and community when the needs associated with the student's disability extend beyond the school setting and threaten the student's ability to be maintained in the home, community, or school setting. The wrap-around services may be provided to a student who is placed in a public school setting, a private day school, or being transitioned back to the community from a residential educational program or from a juvenile correction center.

**Family Foster Care Basic Maintenance and Activities Payments:** Payments for basic maintenance for foster care youth who are living in a local agency foster home. The families are receiving foster care maintenance payments consistent with Title IV-E definitions (i.e. room, board, daily basic supervision, school supplies, youth's personal incidentals, the basic clothing allowance, child care and/or travel costs) and the youth do not meet requirements for Title IV-E funding. *(Community-based services provided directly to the child and/or biological/adoptive family should be reported in the Community Based Services category. Educational placements and non-instructional services in the public schools provided to these children should be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities. The Foster Care Supplemental Clothing Allowance is reported as a Community Based Service in this expenditure category.)*

**Family Foster Care Enhanced Maintenance:** Payments in this category are for foster care youth in a local agency foster home and include the enhanced maintenance payment (currently determined by the VEMAT) for additional daily supervision as well as the basic maintenance payment and the youth do not meet requirements for Title IV-E. *(Community-based services provided directly to the child and/or biological/adoptive family should be reported in the appropriate expenditure category (either Community Based Services or the Foster Care Maintenance as detailed in the CSA Pool Fund Expenditure Categories and Definitions document). Educational placements and non-instructional services in the public schools provided to these children should be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities.)*

**Specialized Foster Care:** This category has been retired.

**Treatment Foster Care:** Payment for services and treatment of children who are living in a foster home where a trained foster parent provides care through a licensed child placing agency or local agency's defined treatment foster care program. The package of services included in the treatment payment rate may include: assessment; development of the case plan; home visits; referral to services; direct provision of services, treatment, and counseling for children, parents, and/or substitute care providers in their own homes or outside of their homes; respite care; parent support services; 24 hour supervision and crisis intervention; casework, case management and supervision; placement of the child; preparing and participating in judicial determination; recruitment and training. This category includes all services, including any community-based

services, provided to these children while they are living in the treatment foster home, except as provided below. *(Community-based services provided directly to the child and/or biological/adoptive family should be reported in the appropriate expenditure category, either Community Based Services or the Treatment Foster Care as detailed in the CSA Pool Fund Expenditure Categories and Definitions document. Educational placements and non-instructional services in the public schools provided to these children should be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities.)*

**Independent Living Stipend:** The standard statewide payment rate made for the care and support of a youth over age 16 placed in independent living status. Covered costs are not limited to but generally include: room and board, rent, household equipment, utilities, clothing, personal care and transportation. Payment cannot be made from Title IV-E funds, but is made from CSA pool funds. Payments may be made directly to the youth or, if the youth is living with an individual to whom the youth pays rent, the costs may be paid to that individual. The method of payment must be in a written agreement signed by the youth. *(Community based services provided to these youth or their families, while the children are receiving an independent living stipend, are to be reported in the community-based services category. Educational placements and non-instructional services in the public schools provided to these children should be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities.)*

**Independent Living Arrangement:** Payment for foster care youth at least 16 years of age who have been placed by the local DSS board or licensed child-placing agency in a living arrangement in which the child does not have daily substitute parental supervision (e.g., college dormitory, individual apartment, apartments licensed by child placing agencies). This category does not include apartments located in one complex where daily substitute parental supervision is provided and the programs are licensed as group homes. It does not include group homes or residential facilities. *(Community-based services provided to the youth or planned permanent caregiver should be reported in the community-based services category. Private educational placements are to be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities.)*

**Psychiatric Hospital/Residential Crisis Stabilization Unit:** Placement of youth outside of their family home for acute care in an acute care psychiatric unit of a licensed medical hospital or licensed free-standing psychiatric hospital or a crisis stabilization unit for 24 hours or more (i.e., for crisis stabilization of harmful behaviors to self or others and/or serious mental health issues). This category includes all services provided to the youth while staying in the psychiatric hospital/crisis unit. Residential Crisis Stabilization length of stay should not exceed 15 days per incident. *(Community-based services provided directly to the youth and/or planned permanent caregiver in the family's home should to be reported in the Community-based Services category.)*

**Congregate Care Educational Services for Medicaid Funded Placements:** Educational services provided to youth who are placed in a residential setting for non-educational purposes or who have an IEP written for residential educational services. The youth is Medicaid eligible and placed in a Medicaid facility, but Medicaid funds cannot be used to pay for the educational services.

**Congregate Care Educational Services for Non-Medicaid Funded Placements:** Educational services provided to youth who are placed in a residential setting for non-educational purposes, or who have an IEP written for residential educational services. The youth is not eligible for Medicaid or is not placed in a Medicaid funded placement because appropriate Medicaid programs are not available to meet the youth's needs.

**RESIDENTIAL/CONGREGATE CARE (25% above local base match rate)**

**Temporary Care Facility and Services:** Placement of children outside of their family homes in licensed facilities or emergency shelters that serve groups of youth and are specifically approved to provide a range of services, as needed, on an individual basis not to exceed 90 days. Includes all services provided to children while they are living in the temporary care facility, except as specified. *(Community and community transition services provided directly to the child and/or family for the primary purpose of discharging and transitioning the child home from residential care should be reported in the appropriate community-based services category. Educational services provided in this setting should be reported in the Educational Services – Congregate Care category. Does not include secure detention facilities.)*

**Group Home:** Placement of children outside of their family homes in licensed residential programs that are characterized by a supervised homelike environment in a single family residence that serves groups of children (up to 8 youth) who have behavioral/emotional difficulties and/or physical or mental disabilities. Includes placement of children in apartments located in one complex where daily substitute parental supervision is provided and the programs are licensed as residential programs. Group homes may provide social, life or vocational skills training. They may provide emergency placements. Includes all services provided to children while living in the group home, except as specified. *(Community based services provided directly to the youth and/or planned permanent caregiver in the home where the youth will be living are to be reported in the Transition Services Category. Transition services provided directly to the planned permanent caregiver for the primary purpose of discharging and transitioning the child home from residential care are to be reported in the Community Transition Services category. Educational services provided in the group home setting are to be reported in either the Educational Services – Congregate Care category.)*

**Residential Facility:** Placement of youth outside of their family homes in licensed residential care programs that provide 24-hour supervised care to groups of youth (e.g., secure residential treatment facilities, campus-style residential programs, group homes on the campus of a residential facility, group homes that serve more than nine youth). Programs may provide intensive treatment services such as medication management, nursing care, occupational therapy, crisis stabilization, assessment, social skills training, group therapy, individual therapy,

family therapy, etc. This category includes services provided to youth while living in the residential program (e.g., outpatient, respite care, crisis stabilization, assessment, child behavioral aides) and includes services that are provided in the residential facility and residential facility community to the youth's family. This category does not include secure detention facilities. *(Community based services provided directly to the youth and/or planned permanent caregiver in the home where the youth will be living are to be reported in the Transition Services category. Transition services provided directly to the planned permanent caregiver for the primary purpose of discharging and transitioning the child home from residential care are also to be reported in the Community Transition Services category. Educational services provided in the group home setting are to be reported in either the Educational Services – Congregate Care category.)*

## 6. Service Standards

### 6.6 Intensive Care Coordination (*Adopted April 30, 2013*)

a) **Definition of Intensive Care Coordination**

Intensive Care Coordination shall include facilitating necessary services provided to a youth and his/her family designed for the specific purpose of maintaining the youth in, or transitioning the youth to, a family-based or community based setting. Intensive Care Coordination Services are characterized by activities that extend beyond regular case management services that are within the normal scope of responsibilities of the public child serving systems and that are beyond the scope of services defined by the Department of Medical Assistance Services as "Mental Health Case Management."

b) **Population to be Served by Intensive Care Coordination**

Youth shall be identified for Intensive Care Coordination by the Family Assessment and Planning team (FAPT). Eligible youth shall include:

1. Youth placed in out-of-home care<sup>1</sup>
2. Youth at risk of placement in out-of-home care<sup>2</sup>

<sup>1</sup>Out-of-home care is defined as one or more of the following:

- Level A or Level B group home
- Regular foster home, if currently residing with biological family and due to behavioral problems is at risk of placement into DSS custody
- Treatment foster care placement, if currently residing with biological family or a regular foster family and due to behavioral problems is at risk of removal to higher level of care
- Level C residential facility
- Emergency shelter (when placement is due to child's MH/behavioral problems)
- Psychiatric hospitalization
- Juvenile justice/incarceration placement (detention, corrections)

<sup>2</sup>At-risk of placement in out-of home care is defined as one or more of the following:

- The youth currently has escalating behaviors that have put him or others at immediate risk of physical injury.
- Within the past 2-4 weeks the parent or legal guardian has been unable to manage the mental, behavioral or emotional problems of the youth in the home and is actively seeking out-of-home care.
- One of more of the following services has been provided to the youth within the past 30 days and has not ameliorated the presenting issues:
  - Crisis Intervention
  - Crisis Stabilization
  - Outpatient Psychotherapy

- Outpatient Substance Abuse Services
- Mental Health Support

NOTE: Intensive Care Coordination cannot be provided to individuals receiving other reimbursed case management including Treatment Foster Care-Case Management, Mental Health Case Management, Substance Abuse Case Management, or case management provided through Medicaid waivers.

c) **Providers of Intensive Care Coordination**

Providers of ICC shall meet the following staffing requirements:

- 1) Employ at least one supervisory/management staff who has documentation establishing completion of annual training in the national model of "High Fidelity Wraparound" as required for supervisors and management/administrators (such documentation shall be maintained in the individual's personnel file);
- 2) Employ at least one staff member who has documentation establishing completion of annual training in the national model of "High Fidelity Wraparound" as required for practitioners (i.e., Intensive Care Coordinators). Such documentation shall be maintained in the individual's personnel file.

Intensive Care Coordination shall be provided by Intensive Care Coordinators who possess a Bachelor's degree with at least two years of direct, clinical experience providing children's mental health services to children with a mental health diagnosis. Intensive Care Coordinators shall complete training in the national model of "High Fidelity Wraparound" as required for practitioners. Intensive Care Coordinators shall participate in ongoing coaching activities.

Providers of Intensive Care Coordination shall ensure supervision of all Intensive Care Coordinators to include clinical supervision at least once per week. All supervision must be documented, to include the date, begin time, end time, topics discussed, and signature and credentials of the supervisor. Supervisors of Intensive Care Coordination shall possess a Master's degree in social work, counseling, psychology, sociology, special education, human, child, or family development, cognitive or behavioral sciences, marriage and family therapy, or art or music therapy with at least four years of direct, clinical experience in providing children's mental health services to children with a mental health diagnosis. Supervisors shall either be licensed mental health professionals (as that term is defined in 12 VAC35-105-20) or a documented Resident or Supervisee of the Virginia Board of Counseling, Psychology, or Social Work with specific clinical duties at a specific location pre-approved in writing by the applicable Board. Supervisors of Intensive Care Coordination shall complete training in the national model of "High Fidelity Wraparound" as required for supervisors and management/administrators.

d) **Training for Intensive Care Coordination**

Training in the national model of "High Fidelity Wraparound" shall be required for all Intensive Care Coordinators and Supervisors including participation in annual refresher training. Training

and ongoing coaching shall be coordinated by the OCS with consultation and support from the Department of Behavioral Health and Developmental Services.

## **6.7 Treatment Foster Care (*Adopted June 20, 2014*)**

Effective July 1, 2015, when purchasing foster care services through a licensed child placing agency, Community Policy and Management Teams shall ensure that levels of foster care services are appropriately matched to the individual needs of a child or youth in accordance with the SEC approved "Guidelines for Determining Levels of Care for Foster Care Services with Licensed Child Placing Agencies."

## **6.8 Community-based Behavioral Health Services (*Adopted July 31, 2013*)**

The Council, pursuant to the authority granted it by COV §2.2-2648, shall provide for the establishment of interagency programmatic and fiscal policies which support the purposes of the CSA, and shall deny state funding to a locality which fails to provide services that comply with such interagency programmatic and fiscal policies, the CSA, any other state law or policy, or any federal law pertaining to the provision of services. For purposes of determining the use of Pool Funds for the purchase of community-based behavioral health services, the OCS shall apply the regulations established by the Department of Medical Assistance Services ("DMAS") regarding the appropriateness of such services. This policy and the term "community-based behavioral health services" shall apply and refer to the following DMAS-regulated services: Intensive In-Home, Therapeutic Day Treatment, and Mental Health Support Services. The CPMT may request an exception to this policy through the OCS when the CPMT believes there are exceptional circumstances that warrant exception to this policy and/or a Medicaid enrolled provider of a needed service is not available<sup>3</sup> for Medicaid-eligible children and youth. Such requests shall be made in writing and shall state the reason(s) and describe the circumstances supporting the CPMT's claim.

This policy shall be effective October 1, 2013 for new individual family services plans and shall be effective July 1, 2014 for all individual family services plans. Localities shall be subject to denial of funds policies for failing to comply with this policy beginning July 1, 2014. This policy shall revoke any previous guidance or statement of policy issued by the OCS or the Council regarding the use of CSA state Pool Funds to pay for these community-based behavioral health services, including, but not limited to such guidance issued July 19, 2011 by the OCS.

For Medicaid eligible children and youth: It is the intent of federal and state agencies governing the use of Medicaid funds to provide a full array of behavioral health services to meet 100% of the behavioral health needs of Medicaid-eligible clients. Thus, state Pool Funds shall not be used to purchase community-based behavioral health services for a Medicaid-eligible client. Children and youth in crisis<sup>1</sup> shall be referred to emergency services.<sup>2</sup> It is not the intent of this policy to prevent the use of Pool Funds to purchase non-behavioral health services necessary to meet the social, educational, or safety needs of Medicaid eligible children, youth and families.

For children and youth not eligible for Medicaid: It is the intent of the Council to ensure access to appropriate community-based behavioral health services for all children and youth served under the CSA and to ensure the delivery of community-based behavioral health services to all children and youth regardless of whether services are funded by Medicaid or Pool Funds. For children and youth for whom community-based behavioral health services will be purchased with Pool Funds, the FAPT shall maintain

documentation that the child or youth meets the criteria established by DMAS regulations for the specific community-based behavioral health service to be provided. This documentation shall include the signature and written approval of a licensed mental health professional. The licensed mental health professional shall state his/her credentials on such signed written approval and shall not be a supervisor of or the provider of the service for which approval is given. State Pool Funds may be used to purchase an independent clinical assessment conducted in accordance with DMAS requirements for such assessment.

<sup>1</sup> “crisis” means a deteriorating or unstable situation often developing suddenly or rapidly that produces acute, heightened emotional, mental, physical, or behavioral distress; or any situation or circumstance in which the individual perceives or experiences a sudden loss of his ability to use effective problem-solving and coping skills.

<sup>2</sup> “emergency services” means unscheduled crisis intervention, stabilization, and referral assistance provided over the telephone or face-to-face, if indicated, available 24 hours a day and seven days per week. Emergency services also may include walk-ins, home visits, detention, and preadmission screening activities associated with the judicial process. “Emergency services” does not include ongoing treatment services such as “community-based behavioral health services.”

<sup>3</sup> “unavailable” means: a) there is not a Medicaid-eligible provider of the needed service within a reasonable geographic distance (e.g., up to 30 miles in urban areas or up to 60 miles in rural areas); or b) there is a waiting list that prevents the delivery of services within a reasonable time frame.