

**FY 2023 PERFORMANCE PLAN**

<b>Children’s Services Act (CSA) and Family Assessment and Planning Team (FAPT)</b>		CFSD	Shari Lyons, x1675
Program Purpose	Stabilize children with their families through funding clinically and fiscally responsible services		
Program Information	<ul style="list-style-type: none"> <li>• The Children’s Services Act (formerly known as the Comprehensive Services Act for At-risk Youth and Families (CSA)) is a Virginia statute that establishes a single state pool of funds from the Departments of Social Services, Behavioral Health and Developmental Services, Education and Juvenile Justice to purchase services.</li> <li>• CSA is intended to create a collaborative system of services and funding that is child-centered, family-focused and community-based when addressing the strengths and needs of youth and families.</li> <li>• CSA is administered by the Virginia Office of Children’s Services (formerly the Office of Comprehensive Services) (OCS). In Arlington, it is staffed by Child and Family Services (CFSD), and DHS serves as the fiscal agent for CSA.</li> <li>• The Community Policy and Management Team (CPMT) is the Arlington County governing body that oversees CSA funding. All services approved by the Family Assessment and Planning Team (FAPT) must be approved by CPMT for authorization and funding.</li> <li>• The Family Assessment and Planning Team (FAPT) is a multidisciplinary team. Partners joining DHS staff on the FAPT are Arlington Public Schools, Arlington County Juvenile and Domestic Relations Court Services, private agency providers, and parent representatives.</li> <li>• Each month, the FAPT meets weekly and as needed, reviewing up to eight cases per meeting.</li> <li>• The primary focus of the meetings is to determine clinically appropriate services eligible for funding through CSA. Services authorized by FAPT are: <ul style="list-style-type: none"> <li>○ Therapeutic and Arlington County licensed foster care services</li> <li>○ Congregate care services (including residential, group home, temporary care facility, and educational placements)</li> <li>○ Community services (including private day school, intensive in-home, community transition services, tutoring and mentoring)</li> </ul> </li> <li>• The FAPT uses the Child and Adolescent Needs and Strengths (CANS) tool to assess the child and family’s strengths and needs; this helps determine whether or not the requested service meets clinical criteria for CSA funding. The CANS tool is maintained in a state database known as CANVaS. The case manager is responsible for completing the tool in the database, printing, and signing the document.</li> <li>• The Individualized Family Service Plan (IFSP) documents the services requested, and is subject to FAPT review and CPMT approval of funding.</li> </ul>		
Service Delivery Model	<ul style="list-style-type: none"> <li>• In FY 2023, FAPT reviews were primarily conducted virtually. Families were offered the opportunity to participate in the reviews onsite if they preferred.</li> <li>• In FY 2024, reviews will continue to be provided virtually unless in-person reviews are requested by the family based on the priority population. The program will assess efficacy and to determine ongoing service delivery.</li> </ul>		

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**PM1: How much did we do?**

Staff	2.65 FTEs including: <ul style="list-style-type: none"> <li>○ 0.30 FTE Supervisor</li> <li>○ 0.85 FTE CSA Coordinator</li> <li>○ 1 FTE Utilization Review Coordinator (50% of 2 FTEs)</li> <li>○ 0.5 FTE CFSD staff (~4% of 13 staff)</li> </ul> Administrative support is also provided by a temporary position (40 hrs/wk)				
Customers and Service Data		<b>FY 2020</b>	<b>FY 2021</b>	<b>FY 2022</b>	<b>FY 2023</b>
	Total # of FAPT Client Reviews	267	294	176	208
	Total # of Clients Authorized for CSA Funding	172	173	149	160
	Expenditures for Services*				
	Therapeutic Foster Care Services	\$159,403	\$65,186	\$225,964	\$52,453
	Congregate Care Services	\$735,945	\$751,801	\$1,163,319	\$1,732,572
	Private Day Educational Placements	\$3,803,726	\$3,331,689	\$3,574,882	\$3,698,983
	Community Services	\$434,863	\$471,499	\$689,661	\$675,820
	*Expenditures for services are reflected in the fiscal year in which they were paid.				

**PM2: How well did we do it?**

2.1	Compliance with CANS completion policy
2.2	Length of home-based services and congregate care placements
2.3	Alignment between level of need and level of service requested per the CANS

**PM3: Is anyone better off?**

3.1	Percentage of youth demonstrating increased emotional/behavioral stability per the CANS
3.2	Percentage of youth served in the community

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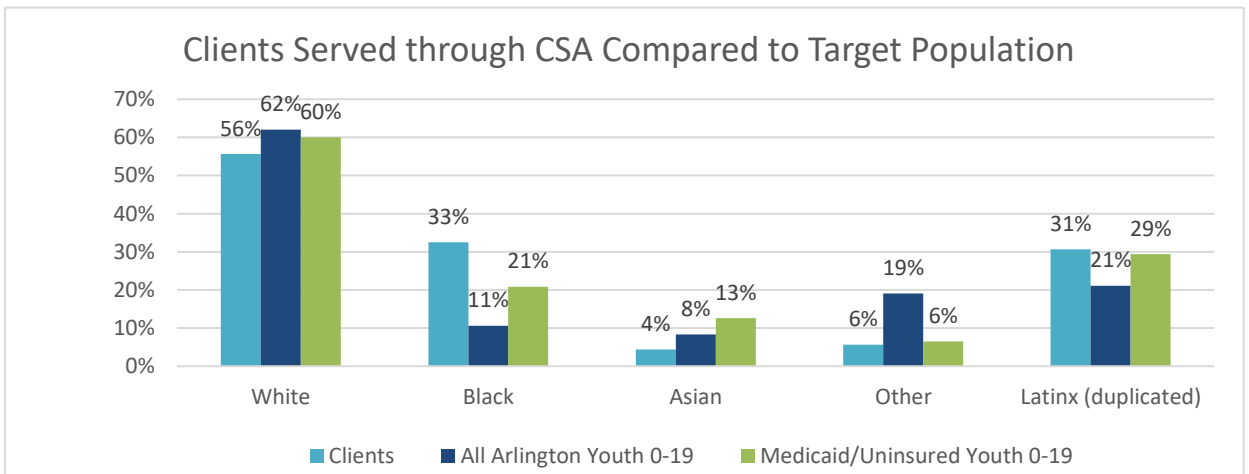
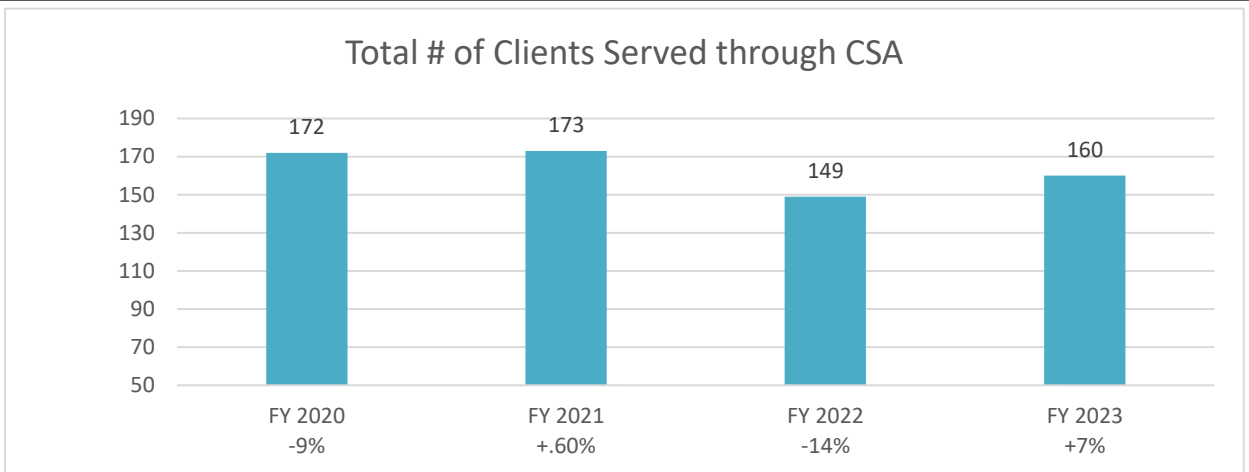
**CSA Family Assessment and Planning Team (FAPT)**

Measure

1

Total # of Clients Served through CSA

Data



Data Summary

- In FY 2023, there were 160 youth that received CSA funded services.
- The program data for race and ethnicity is collected from the DMC data system.

**What is the story behind the data?**

- The number of children served by the CSA has increased from 149 in FY 2022 to 160 in FY 2023.
- CSA is designed to serve youth that either need services funded only by this program, and/or have no additional resources to pay for services.
- CSA’s primary referral sources include child welfare and schools (Special Education).
- In FY 2023, there were more youth that accessed CSA that had no insurance or other funding sources. Additionally, youth with insurance are being court ordered to service providers that do not accept their insurance and have to use CSA funds. These factors contributed to the increase in the number of youth utilizing CSA funds this year.
- In FY 2023, the acuity of youth who required CSA services and provider workforce challenges continued to increase. Therefore, duration of services and expenditures for congregate and residential care continued to increase in FY 2023.

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- Clients are disproportionately linked to court services and child welfare which are large utilizers of CSA funds. The disproportionality is reflective of the implicit biases of child serving systems.
- Youth that identified as White are under-represented in comparison to the total number of Arlington youth ages 0-19 and the population of youth with Medicaid or without insurance. They are also under-represented in the child welfare and juvenile legal systems.
- Youth that identified as Black were overrepresented based on the population of Arlington youth and youth with Medicaid or without insurance. However, in child welfare, black youth made up 55% of children in foster care at the end of FY 2023. These children are also disproportionately linked to court services.
- In FY 2023, staff completed site visits at congregate care providers with a racial equity lens to ensure clinical integrity and quality of services.
- In FY 2023, data collection was modified to improve ease of access to all data including racial equity data.

**Recommendations**

**Target Dates**

- Review data on a monthly basis to assess for assess barriers and racial inequities in service approvals.
- Continue to collaborate with other child serving systems to review racial equity data.

- FY 2024, Q2
- Ongoing

**Forecast**

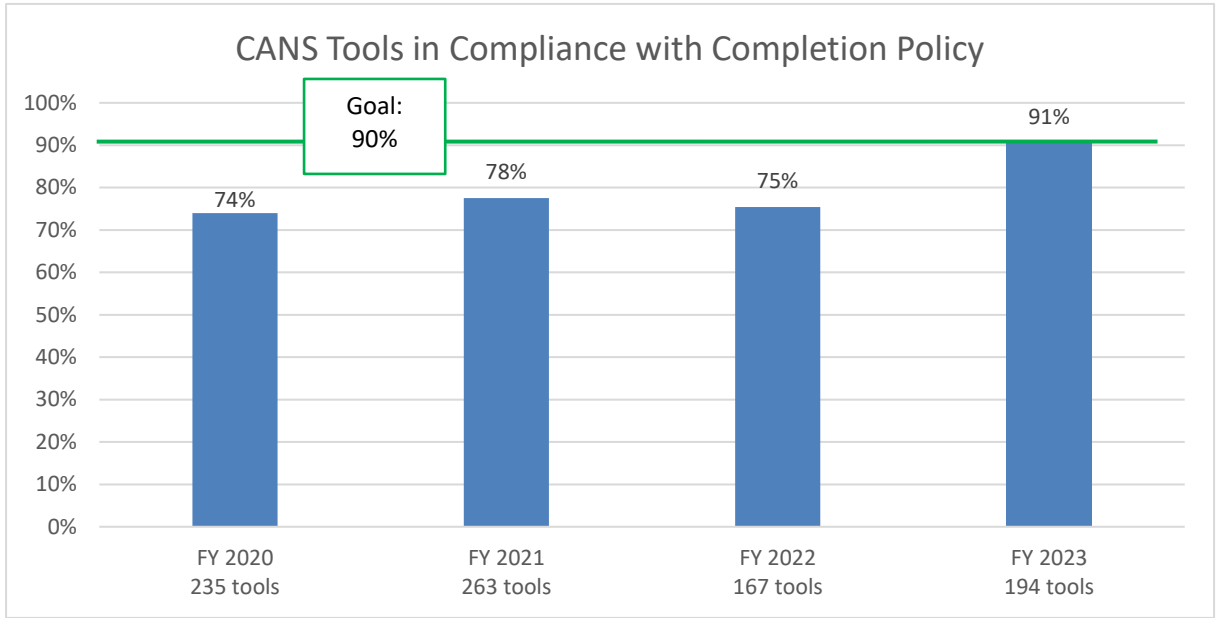
- For FY 2024, it is projected that the clients served will increase by 10%

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**CSA Family Assessment and Planning Team (FAPT)**

**Measure** 2.1 Compliance with CANS Completion Policy

**Data**



**Data Summary**

- In FY 2023, 91% (176/194) of CANS were current—dated within the last 90 days, or more recently when clinically indicated.
- The CSA Coordinator evaluates all CANS assessment tools after each FAPT meeting and records the results in Excel. CANS assessments are not required for MHI reviews, which are excluded from this measure.

**What is the story behind the data?**

- In FY 2023, the CSA team continued sending reminders for discharge CANS and CANS updates that are due.
- In FY 2023, the new CSA Coordinator continued to provide heightened oversight of the FAPT packet to ensure that all documentation is completed prior to the scheduled review.
- In FY 2023, the utilization review process changed that included reviewing for CANS compliance. At System of Care weekly team prep meetings, service alignment, utilization concerns and potential red flags are discussed to ensure FAPT meetings flow as smoothly as possible and make sense to the any youth and/or family present. CANS completions are discussed during these meetings.
- In FY 2023, the chart review process resumed to ensure CANS assessments are current and on time.

**Recommendations**

- Continue chart review process to ensure CANS assessments are current and on time.
- A data key to ensure accuracy of CANS ratings by clinicians will be developed.
- Provide CANS assessment refresher training for clinicians that need assistance with scoring.

**Target Dates**

- Ongoing
- FY 2023, Q4
- FY 2023, Q2

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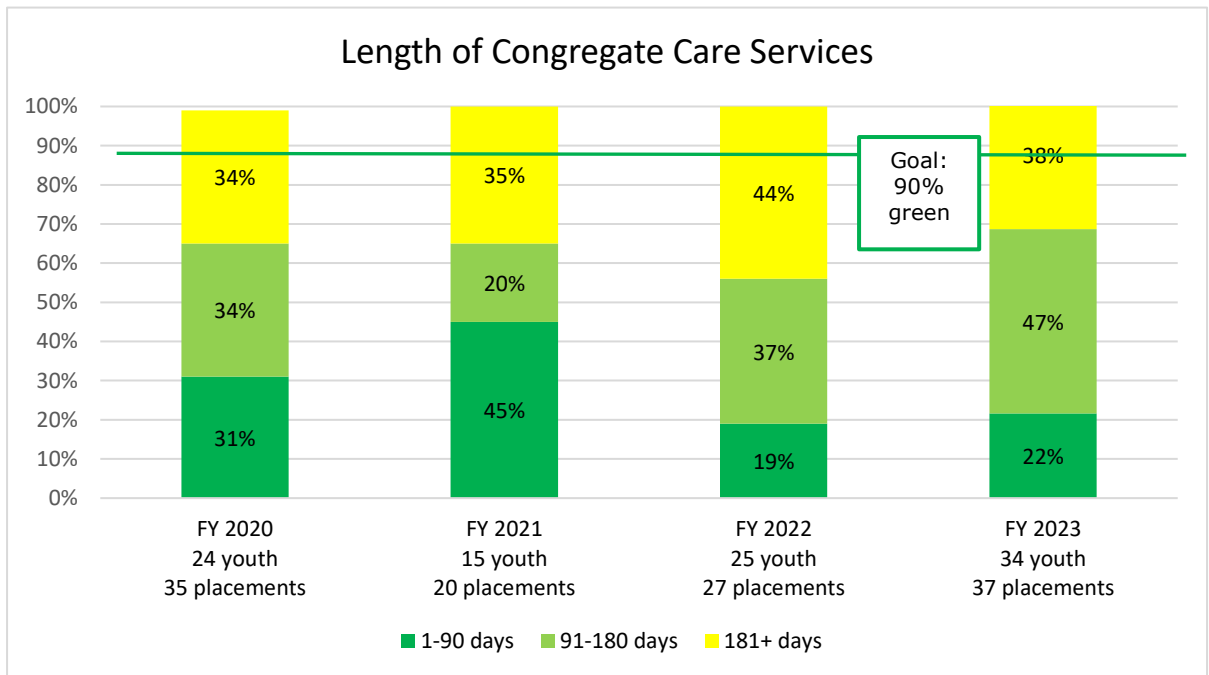
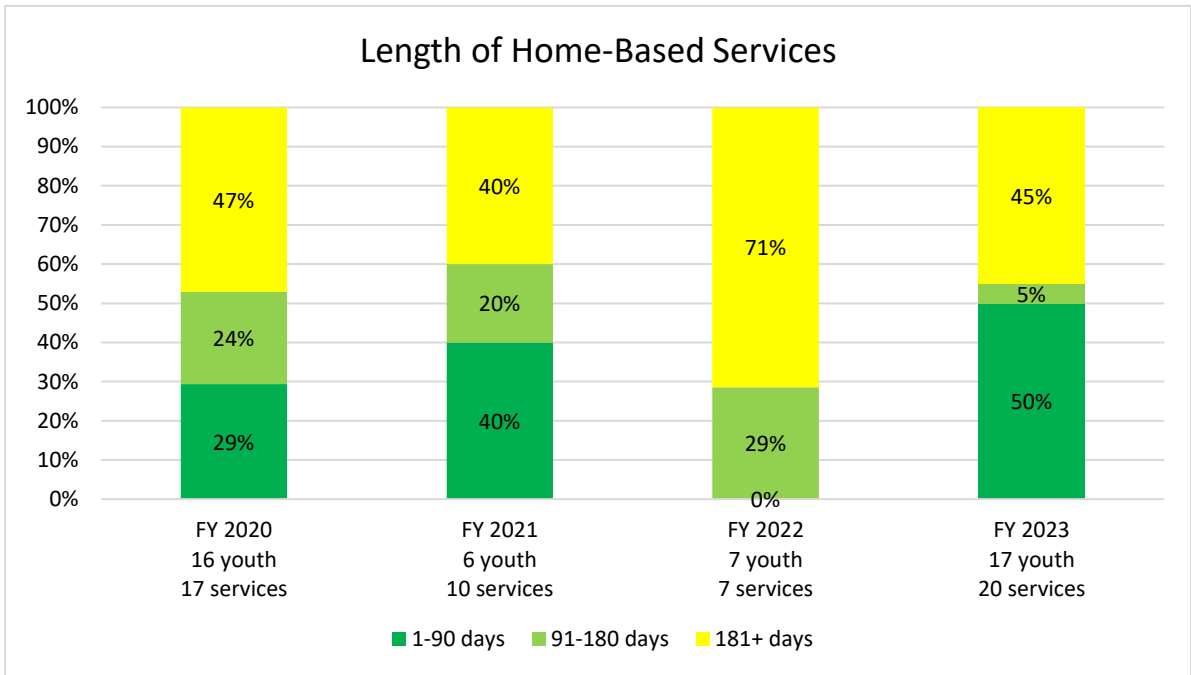
### Forecast

- In FY 2024, it is projected that 90% of CANS assessments will be current.

CSA Family Assessment and Planning Team (FAPT)

Measure 2.2 Length of home-based services and congregate care placements

Data



Data Summary

- Home-based services are behavioral health interventions provided in the child’s natural or foster home setting to stabilize behavior and minimize risks for out-of-home placements. Services may involve crisis intervention, case management, and behavior planning or modification.

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- Congregate care services are behavioral health interventions provided in a licensed residential and/or group home setting.
- For cases completing home based services in FY 2023:
  - 50% (10/20) completed services within 90 days
  - 5% (1/20) completed services between 91 and 180 days
  - 445 (9/20) extended beyond 180 days
- For cases completing congregate care services in FY 2023:
  - 22% (8/37) completed services within 90 days
  - 47% (16/37) completed services between 91-180 days
  - 38% (13/37) extended beyond 180 days
- Service start and end dates are tracked in SharePoint and updated monthly by the CSA Coordinator. Only clinical services are tracked and reported in this measure.
- Youth can receive both in-home services and congregate care services within the same fiscal year.

### What is the story behind the data?

- In FY 2023 the percentage of home-based services completed within 180 days increased from 29% to 55%. The percentage of congregate care placements completed within 180 days increased from 56% to 69%.
- In FY 2023, agencies did not have the capacity to serve children the same way they had in the past. They were understaffed, had significant waitlists, and some programs closed. This created a gap for children which perpetuated lengths of stay in higher levels of care.
- Staff continue to utilize alternative funding sources to support home-based services.
- In FY 2023, the continued high acuity of children’s behavioral and mental health needs has led to a continuing need for longer services in the community or in congregate care to meet their complex needs.
- In FY 2023, 32 congregate care placements were court ordered, an increase from 9 in FY 2022. The length of service is also ordered by the court for these placements. This may have caused some of the increase in stay as most times there are familial concerns taken into account and not just clinical needs.
- In FY 2023, there continued to be children coming for services who were involved with multiple systems (i.e., court, child welfare, mental health). These youth had a variety of needs that required multi-system involvement and navigation for family reunification.
- In FY 2023, a new electronic data collection process was put in place to track all clinical services provided to children and families.
- In FY 2023, a public website for interested agencies was published to show how to become a vendor.
- In FY 2023, a new vendor on-boarding process was initiated and an Emergency Purchase Authority started to process emergency court-ordered services.

### Recommendations

- Continue quarterly vendor meet and greets to explore available services.
- Built out the public website to provide information more information about site visits and reviews for vendors
- Continue to explore strategies to expand vendor pool and update our service provider list.

### Target Dates

- Ongoing
- FY 2024, Q3
- Ongoing



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<ul style="list-style-type: none"><li>• Finalize Emergency Purchase Authority policy.</li><li>• Consider modifying measure to assess community-based services instead of in-home services.</li></ul>	<ul style="list-style-type: none"><li>• FY 2024, Q3</li><li>• FY 2024 Q4</li></ul>
<b>Forecast</b>	
<ul style="list-style-type: none"><li>• By the end of FY 2024, it is anticipated that 60% of families will complete community-based services within 180 days and 60% of families will complete congregate care services within 180 days.</li></ul>	

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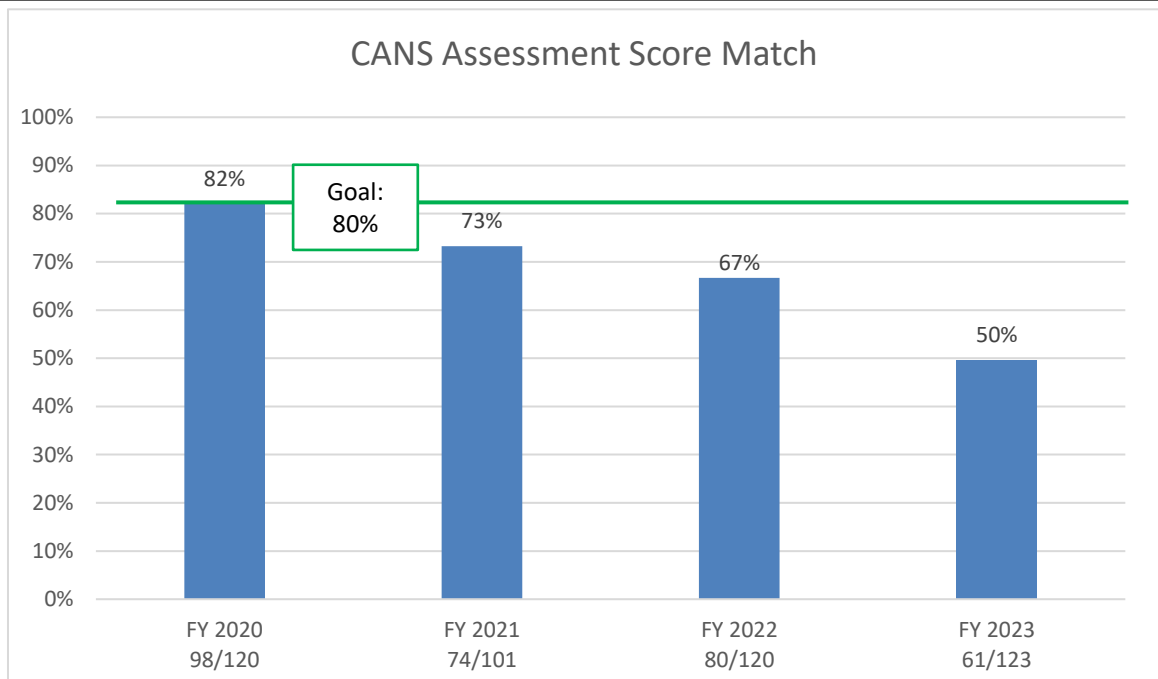
**CSA Family Assessment and Planning Team (FAPT)**

Measure

2.3

Alignment between level of need and level of service requested per the CANS

Data



Data Summary

- In FY 2023 50% (61/123) of service requests received aligned with the CANS ratings of need.
- The FAPT uses CANS algorithms to assess if requested services are aligned with the level of need based on CANS scores. These algorithms establish baseline criteria/CANS scores for targeted services. Results are tracked in Excel.
- This measure excludes non-clinical service requests and MHI cases. In FY 2023, 71 requests were excluded.

**What is the story behind the data?**

- CANS alignment continues to be reviewed prior to FAPT meetings and discussed in FAPT for all cases.
- The most common cause of misalignment is CANS scores indicate that the child needs a lower level of care than what is being requested.
- Misalignment often occurs when youth are placed in services that have been court ordered – for example, a youth may be assessed to need community-based services, but be ordered into group home care. The length of service is also ordered by the court for these placements. In FY 2023, 32 congregate care placements were court ordered, an increase from 9 in FY 2022.
- Families experience additional stressors that are not currently rated on the CANS assessment, resulting in low scores that did not reflect the families’ actual level of need. The CANS does not include measures related to domains of lived experience such as racial trauma and LGBTQIA.
- In FY 2023, CFSD leadership met with the JDRC judges regularly to discuss court ordered placements, CSA funding, court notices, etc.

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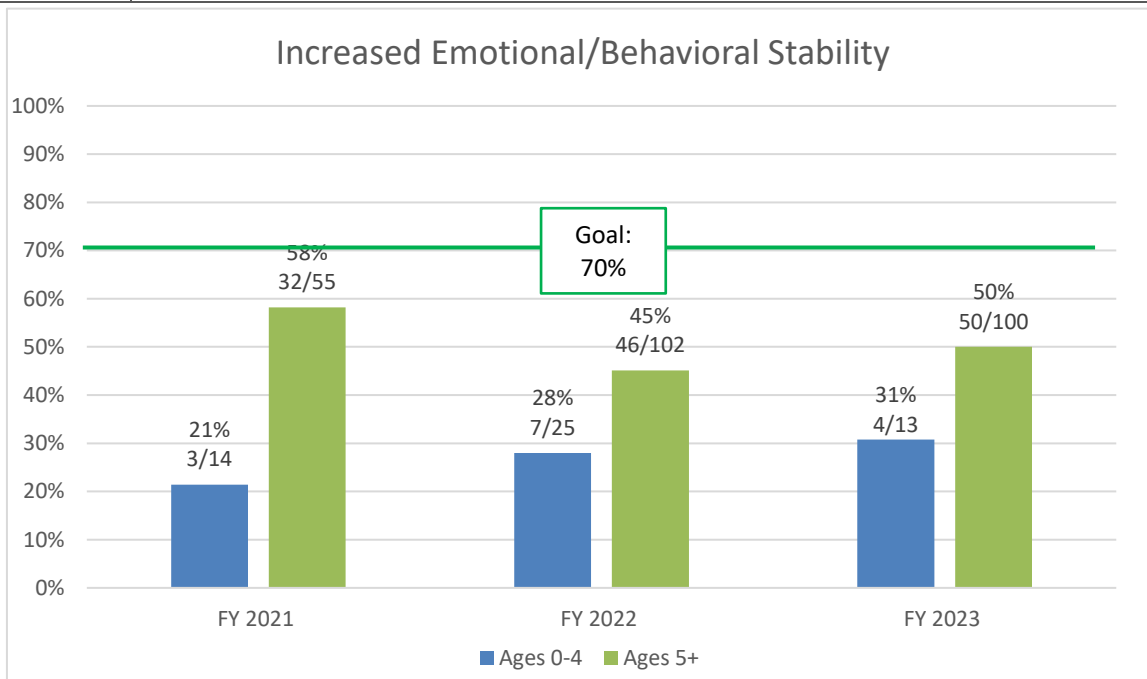
<b>Recommendations</b>	<b>Target Dates</b>
<ul style="list-style-type: none"> <li>• Continue to collaborate with OCS to reassess the alignment tool and discuss missing measures that assess for lived experiences.</li> <li>• Revamp CANS training for case managers and FAPT representatives.</li> <li>• Continue to review CANS alignment prior to FAPT review and explore how to best discuss this in meeting with families.</li> <li>• Implement trainings for FAPT members and staff to ensure accurate and consistent ratings.</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing</li> <li>• FY 2024, Q3</li> <li>• Ongoing</li> <li>• FY 2024, Q3</li> </ul>
<b>Forecast</b>	
<ul style="list-style-type: none"> <li>• In FY 2024, it is anticipated that 60% of CANS and service requests will be aligned.</li> </ul>	

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CSA Family Assessment and Planning Team (FAPT)

Measure 3.1 Percentage of youth demonstrating increased emotional/behavioral stability per the CANS

Data



Data Summary

- In FY 2023, CANS scores were collected for 175 youth that had at least two CANS assessments.
- In FY 2023, 4/13 (31%) youth ages 0-4 demonstrated increased emotional/behavior stability between the two assessments and 50/100 (50%) youth ages 5+ demonstrated increased emotional/behavior stability between the two assessments.
- In FY 2023, there was 48% (54/113) overall increase in emotional/behavioral stability, an increase from 42% in FY 2022. There were 62 youth that did not have an assessed need in this area.
- These scores are extracted from a database maintained by the Office of Children’s Services.

What is the story behind the data?

- In FY 2023, the percentage of youth who improved their emotional/behavioral health needs increased slightly for children ages 0-4 and children ages 5+.
- In FY 2022, the average for the state of Virginia for demonstrated improvement in emotional/behavioral stability was 42%.
- In FY 2023, 10 youth remained stable between their two assessments and 62 youth did not have assessed emotional behavior needs.
- In FY 2023, there were 47 youth that demonstrated an increase in emotional/behavioral need scores, indicating that their symptoms worsened between the two assessments. Many of the cases had child welfare involvement, and often experienced high levels of stress and trauma.
- CSA has continued to increase flexibility in familial support in many child welfare cases to increase stability. For example, authorization of transportation services for family

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reunification purposes allows the family to maintain consistent contact and attend doctor’s appointments, court hearings, family visitations, etc.

- When youth enter foster care, there may not be a lot of information at the time the initial assessment is completed which is why the score may not accurately reflect that initial presentation. During service provision, more information regarding needs may be obtained.
- Youth with complex needs are more likely to need more interventions for a longer period.
- For youth who have multiple behavioral incidents, risk management investigations may be completed to identify challenges and provide technical assistance to help the youth stabilize. In FY 2023, three internal risk management investigations for community based and residential vendors to address incidences of behavioral challenges, and to identify systemic challenges.

<b>Recommendations</b>	<b>Target Dates</b>
<ul style="list-style-type: none"> <li>• Continue to provide CANS trainings at least annually to ensure inter-rater reliability.</li> <li>• Continue site visits for residential vendors and begin visits for non-residential vendors.</li> <li>• Explore disaggregating race and ethnicity from CANS data.</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing</li> <li>• FY 2024, Q4</li> <li>• FY 2024 Q4</li> </ul>
<b>Forecast</b>	
<ul style="list-style-type: none"> <li>• In FY 2024, it is projected that 50% of youth will demonstrate an increase in emotional/behavioral stability.</li> </ul>	

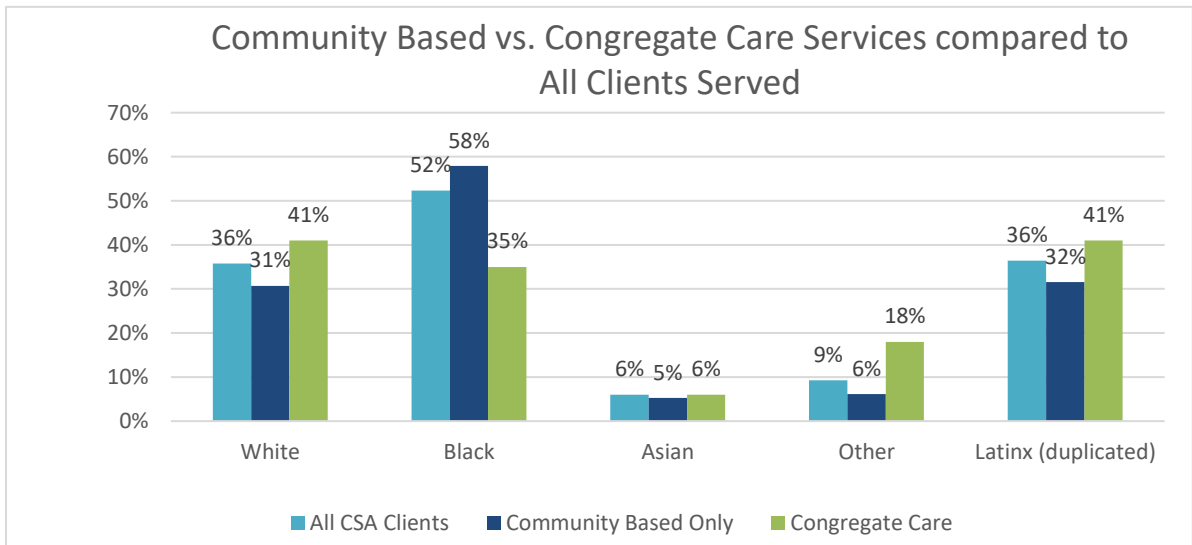
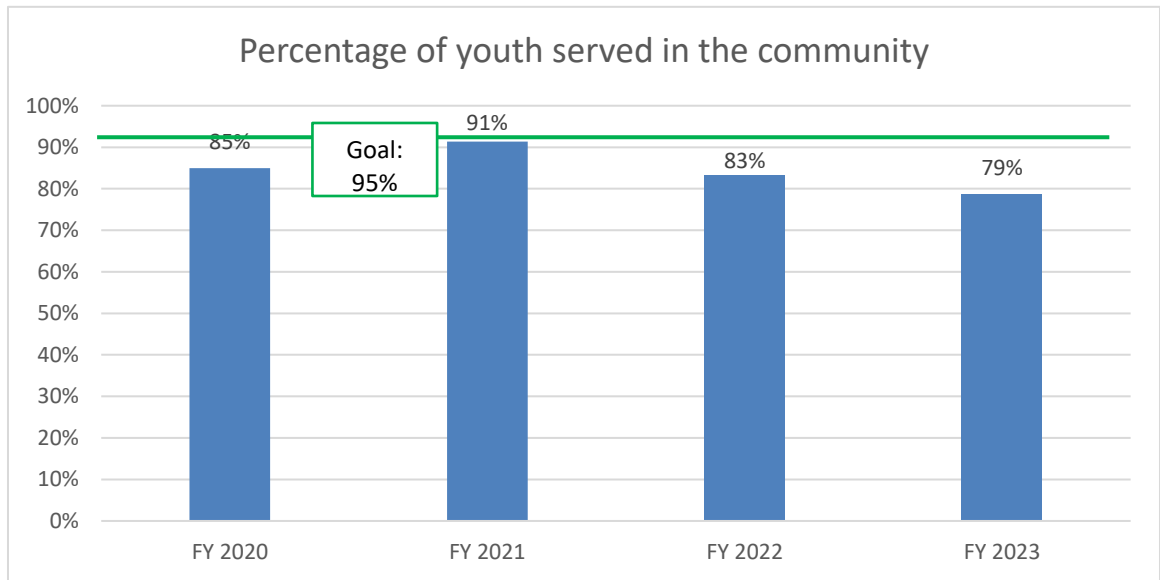
**CSA Family Assessment and Planning Team (FAPT)**

Measure

3.2

Percentage of youth served in the community

Data



Data Summary

- In FY 2023, 79% of youth (126/160) who received service authorizations through CSA funding were authorized only for services in the community, which is a slight decrease in percentage of youth served in FY 2022 (83%).
- In FY 2023, 21% of youth (34/160) who received service authorizations through CSA funding were authorized for Congregate Care Services, which is a slight increase in percentage of youth served in FY 2022 (17%).
- Congregate care services include residential treatment facilities, group homes, respite care, and services to facilitate transition out of congregate care.
- Community services include ICC, intensive in-home therapy, outpatient therapy, WRAP around services, foster care maintenance, TFC, and independent living.

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**What is the story behind the data?**

- The CSA System of Care team focuses on serving children in the least restrictive environment, identifying and reducing disparities and widening the service array.
- In FY 2023 there continues to be an increase in acuity seen in youth mental health nationally, which has led to youth needing higher levels of care or more intense community-based services. If the community-based services are not available, that could lead to a congregate care placement.
- Due to staff shortages, there continues to be a deficit in available community-based services as well as increase in wait times for those still available. This is a statewide trend.
- In FY 2023, there were ongoing case specific conversations to improve creative service planning.
- In FY 2023, the utilization review specialists continued to oversee utilization for a designated set of children, rather than overseeing specific components of care for all children. This allows the specialists to build a holistic understanding of each child’s needs and work consistently to better integrate their care.
- In FY 2023, the electronic record was developed and implemented to capture integral data outcomes to include demographic data and service provision.

**Recommendations**

**Target Dates**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• Develop training to accompany the service review guides that were created.</li> <li>• Develop training that reviews roles and responsibilities for FAPT case managers to help navigate service options.</li> <li>• Continue vendor meet and greets where vendors talk about their services. This meeting will be open to the community.</li> </ul> | <ul style="list-style-type: none"> <li>• FY 2024, Q3</li> <li>• FY 2024, Q3</li> <li>• Ongoing</li> </ul> |
|---|---|

**Forecast**

In FY 2024, it is anticipated that 80% of youth will be served in the community.