

FREDERICK COUNTY CPMT AGENDA

August 27, 2018

1:00 PM

107 N Kent St

Winchester, VA

1st Floor Conference Room

Agenda

- I. Introductions
- II. Adoption of August Agenda
- III. Consent Agenda-See Memo for details
 - A. Approve June Minutes
 - B. Approve Budget Request Forms
- IV. Executive Session
 - A. As Needed
- V. Committee Member Announcements
 - A. As Needed
- VI. CSA Report Jackie Jury
 - A. July Financial Report
 - B. CSA Updates
 - 1. HFW ICC Expansion Grant Update
 - 2. Hallmark discussion
 - 3. Private Provider Rep Application
- VII. Old Business Jackie Jury
 - A. Audit Update
 - B. Vendor Contracts
 - 1. Rates over 3% increase
 - 2. Requested for Contract Modifications
- VIII. New Business Jackie Jury
 - A. Administrative Memo #18-08
 - B. Parental Agreement Policy Revision
- IX. Review Assigned Tasks
- X. Next Meetings
 - A. CPMT September 24, 2018, 1st Floor Conference Room- See Memo for future dates
 - B. Joint FAPT/CPMT October 23, 2018, 1:00 p.m. CSA Conference Room
- XI. Adjourn

****Instructions for Closed Session:**

- Motion to convene in Executive Session pursuant to 2.2-3711(A)(4) and (15), and in accordance with the provisions of 2.2-5210 of the Code of Virginia for proceedings to consider the appropriate provision of services and funding for a particular child or family or both who have been referred to the Family Assessment and Planning Team and the Child & Family Team Meeting process, and whose case is being assessed by this team or reviewed by the Community Management and Policy Team
- Motion to return to open session-
- Motion that the Frederick County CPMT certify that to the best of each member's knowledge, (1) only public business matters lawfully exempted from open meeting requirements, and (2) only such public business matters were identified in the motion by which the closed meeting was convened were heard, discussed, or considered in the closed meeting.
- Roll Call Affirmation
- Motion to Approve cases discussed in Executive Session

CPMT Meeting Minutes: Monday July 23, 2018

The Community Policy and Management Team (CPMT) Committee met on July 23, 2018 at 1:00 p.m. in the first-floor conference room at Frederick County Government Offices Administration Building, 107 North Kent Street, Winchester, VA 22601.

The following members were present:

- Mark Gleason, Northwestern Community Services Board
- Dr. Colin M. Greene, Lord Fairfax District Health Department
- Dana Bowman, Children Service of Virginia
- Peter Roussos, Court Services Unit
- Tamara Green, Frederick County DSS

The following members were not present:

- Michele Sandy, Frederick County Public Schools
- Jay Tibbs, Frederick County Government
- Dawn Robbins, Parent Representative

The following non-members were present:

- Jacquelynn Jury, CSA Coordinator
- Annie Kennedy, CSA Account Specialist
- Brittany Arnold, CSA Account Specialist

Call to Order: _____ called the meeting to order at _____pm.

Adoption of July Agenda: _____ made a motion to adopt the June agenda; _____ seconded; CPMT approved.

Consent Agenda: The following items were put in the Consent Agenda for CPMT's approval:

- June 23rd CPMT Minutes
- Budget Request Forms – Confidential Under HIPAA

Adoption of June Minutes: _____ made a motion to approve the June minutes as distributed with non-substantial changes; _____ seconded; the CPMT approved.

Adoption of Budget Request Forms: _____ made a motion to approve the Budget Request Forms; _____ seconded; the CPMT approved.

Adoption to Convene to Closed Executive Session: On motion duly made by _____ and seconded by _____, the CPMT voted unanimously to go into Closed Executive Session to discuss cases confidential by law as permitted by Section §2.2-3711 (A) (4) and (15) and in accordance with the provisions of 2.2-5210 of the Code of Virginia.

- Account of Closed Session:
 1. Case Review

Adoption of Motion to Come Out of Closed Executive Session:

_____ made a motion to come out of Closed Executive Session and reconvene in Open Session; _____ seconded; the CPMT approved.

Adoption of Motion: The Frederick County CPMT certifies that to the best of each CPMT member's knowledge (1) the only public business matters lawfully exempted from open meeting requirements and (2) only such public business matters were identified in the motion by which the closed meeting was convened were heard, discussed, or considered in the closed meeting.

Peter Roussos	Aye
Tamara Green	Aye
Dr. Colin Greene	Aye
Dana Bowman	Aye
Mark Gleason	Aye

Committee Member Announcements:

CSA Report: Fiscal Year 2018 Pool Reimbursement: June net expenditures were \$_____ with a local match of \$_____. Of the _____ - youth served to date, _____ are in congregate care and _____ are in a TFC.

Non-mandated Budget: The CSA Coordinator summarized the non-mandated budget for FY18 stating that \$_____ has been encumbered with \$_____ being spent.

Office Updates: _____

Old Business: _____

New Business: _____

Review Assigned Tasks: _____

Next Meeting: The next CPMT meeting is Monday, August 27th at 1:00 p.m. in the First Floor Conference Room in the Frederick County Government Offices Administration Building. Joint FAPT/CPMT meeting will be held Tuesday, July 24, 2018 in the CSA conference room on the 2nd Floor of the County Administration building from 1pm-2pm.

Adjournment: _____ made a motion to adjourn; _____ seconded; the CPMT approved. The meeting was adjourned at _____pm.

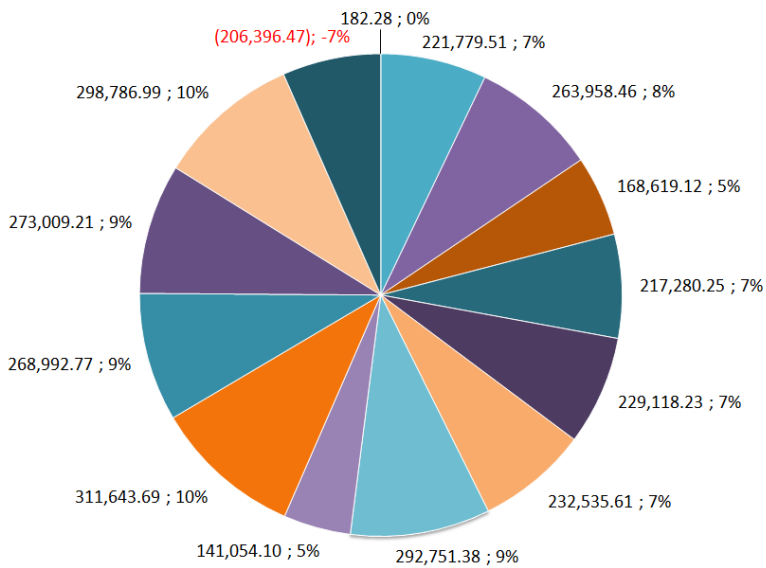
Minutes Completed By: Brittany Arnold



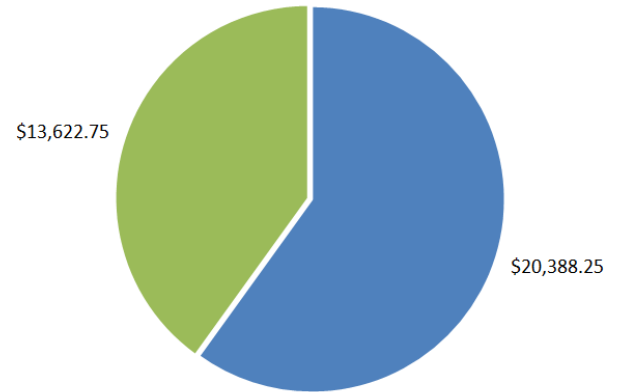
Frederick County CSA Update | July 2018

YTD Total Expenditures
of Reports
Submitted: 13

% Used of Total Allocation

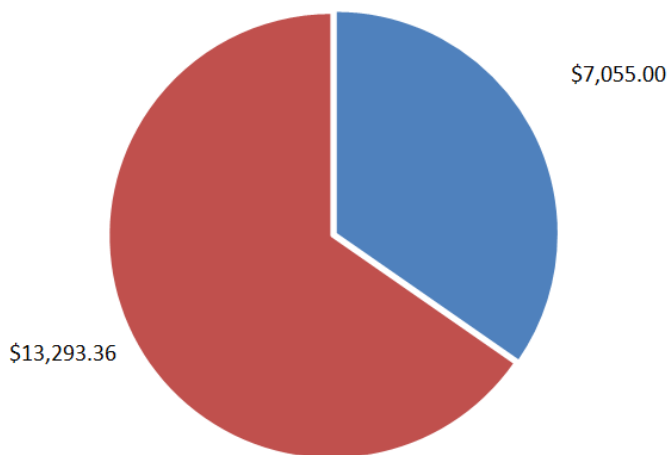


NonMandated Used



Encumbered: \$00.00

SpEd Wrap Used



Encumbered: \$00.00

Expenditure Breakdown:

- YTD Total Net: \$2,919,711.60
- YTD Local Net: \$TBD

Actual Balances as of 8/24/18:

- Total w/o Wrap: \$TBD
- Non-Mandated: \$13,622.75
- SpEd Wrap: \$13,263.36

CSA Updates:

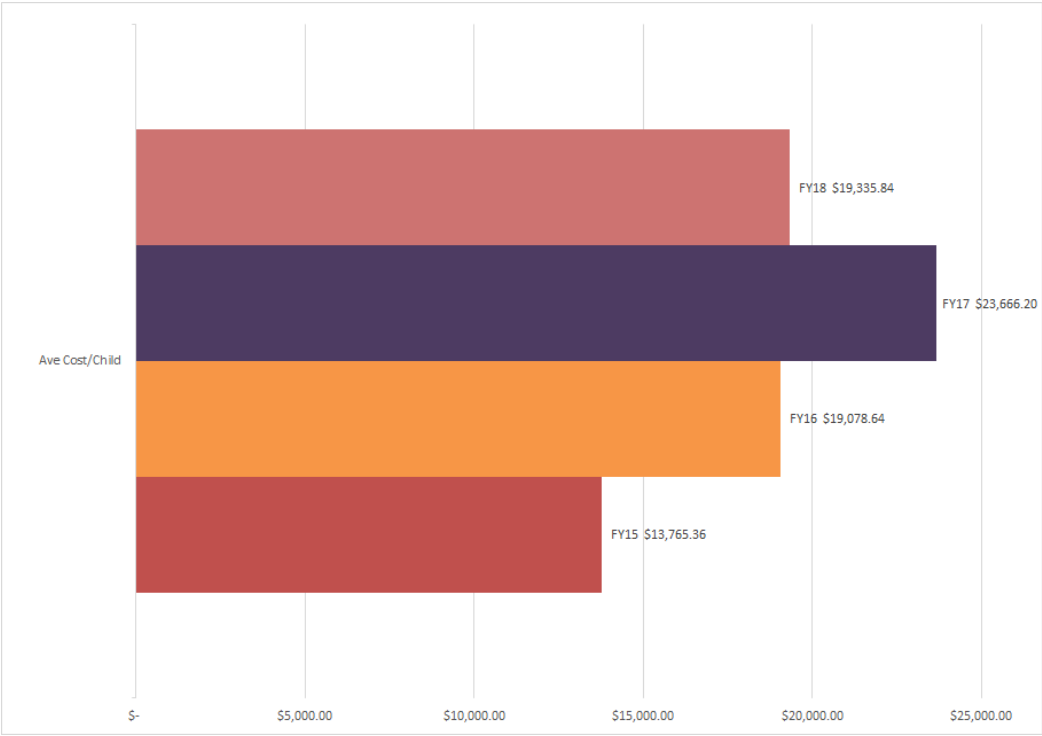
HFW Wrap ICC Expansion Grant

- 12 of 25 Referral (Prior Month)
- 7 from Frederick County

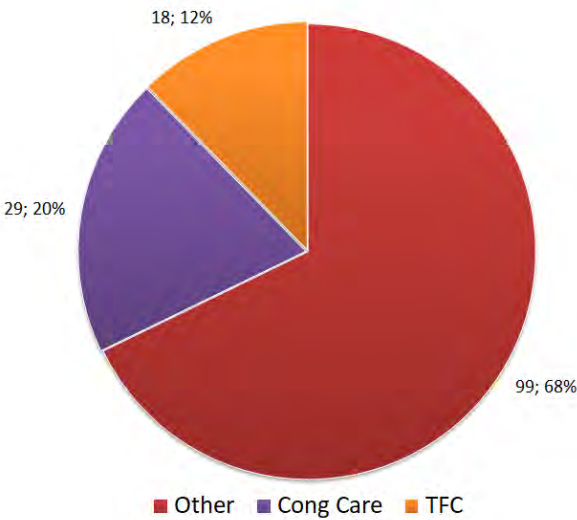
Supplemental Allocation Request

- Total Requested: \$475,471.13
- 100% Released
- Currently completing 2nd Request

Average Cost Per Child



Placement Environment



Unduplicated Child Count Served to Date:

151

Youth in Congregate Care to Date: 29

Youth in TFC to Date: 18



COMMONWEALTH of VIRGINIA

OFFICE OF CHILDREN'S SERVICES *Administering the Children's Services Act*

SCOTT REINER, M.S.
Executive Director

August 16, 2018

Mr. Jay Tibbs, CPMT Chair and
Deputy County Administrator
107 North Kent Street
Winchester, VA 22601

Dear Mr. Tibbs

Please find enclosed the final report for the audit completed of the Frederick County Children's Services Act (CSA) Program. A quality improvement plan (QIP) addressing the observations outlined in this report is required. You will receive, via email, a QIP template that can be used to facilitate this process. The completed quality improvement plan must be received by this office no later than Monday, October 1, 2018. We also encourage you to provide the Office of Children's Services with updates indicating the status of the implementation of corrective actions as they occur.

On behalf of the Office of Children's Services, we would like to express our sincere appreciation to the Frederick County CPMT for their patience, cooperation, and assistance throughout the audit process. Please feel free to contact our office if you have any questions, concerns, and/or require additional information pertaining to this audit.

Respectfully,

A handwritten signature in blue ink that reads "Annette E. Larkin".

Annette E. Larkin, MBA
Program Auditor

Cc Scott Reiner, Executive Director
Kris Tierney, County Administrator
Frederick County
Michele Sandy, Former CPMT Chair
Sharon Kibler, CPMT Fiscal Agent
and Assistant Director of Finance
Jackie Jury CSA Coordinator
Stephanie S. Bacote, OCS Audit Manager

***CHILDREN'S SERVICES ACT
PROGRAM AUDIT***

Frederick County

Audit Report No. 12-2018

August 16, 2018



Office of Children's Services
Empowering communities to serve youth

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EXECUTIVE SUMMARY

The Office of Children's Services has completed an audit of the Frederick County Children's Services Act (CSA) program. Frederick County CSA program provided services and/or funding to 138 at-risk youth and families in fiscal year (FY) 2017. The audit included a review and evaluation of management oversight, operational, and fiscal practices. Based upon established statewide CSA performance measures reported as of FY 2017, significant achievements for the Frederick County CSA program included:

- 100% of youth exiting foster care were placed in a permanent living arrangement, which is 17.6% above the statewide average and exceeds the established state target by 14%.
- 60% percent of youth had a decrease in the Child and Adolescent Needs and Strengths (CANS) scores within the child behavior/emotional needs domains, which is 11.3% above the statewide average.

However, there are additional opportunities to effect quality improvement in other areas of the CSA program. The audit concluded that there were deficiencies in compliance and internal controls particularly in reference to governance and fiscal practices. Conditions were identified that could adversely affect the effectiveness and efficient use of resources and compliance with statutory requirements. The following significant issues were identified:

- The CPMT has not documented a formal plan to substantiate coordination of long-range planning as required by the Code of Virginia (COV) § 2.2-5206.
- Frederick County CSA program did not fully take advantage of available fiscal resources that could be utilized to provide non-educational treatment services to students with disabilities. Only \$4,007.50 of the \$20,348.36 Special Education (SPED) WRAP allocation has been expended as of April 30, 2018 and as of July 16, 2018, \$6,835.00 has been expended.

The Office of Children's Services appreciates the cooperation and assistance provided on behalf of the CPMT and other CSA staff. Formal responses from the CPMT to the reported audit observations are included in the body of the full report.



Stephanie S. Bacote, CIGA
Program Audit Manager



Annette E. Larkin, MBA
Program Auditor

INTRODUCTION

The Office of Children's Services has completed a financial/compliance audit of the Frederick County Children's Services Act program. The audit was conducted in conformance with the International Standards for the Professional Practice of Internal Auditing (Standards). The standards require planning and performance of the audit pursuant to stated audit objectives in order to provide a reasonable basis for audit observations, recommendations, and conclusions. The audit was completed on August 15, 2018 and covered the period May 1, 2017 through April 30, 2018.

The objectives of the audit were:

- To determine whether adequate internal controls have been established and implemented over CSA expenditures.
- To determine the adequacy of training and technical assistance by assessing local government CSA staff knowledge and proficiency in implementing local CSA programs.
- To assess whether operations have maintained high standards for sound fiscal accountability and ensured responsible use of taxpayer funds by evaluating fiscal activities of the local CSA program.
- To assess the level of coordination among local government CSA stakeholders and efforts to improve CSA performance by evaluating the local CSA program's operational and utilization review practices.

The scope of the audit included youth and their families who received CSA funded services during the last two (2) months of FY2017 and the first ten (10) months of FY2018. Audit procedures included reviews of relevant laws, policies, procedures, and regulations; interviews with various CSA stakeholders; flowcharts of operational and fiscal processes; various tests and examination of records; and other audit procedures deemed necessary to meet the audit objectives.

BACKGROUND

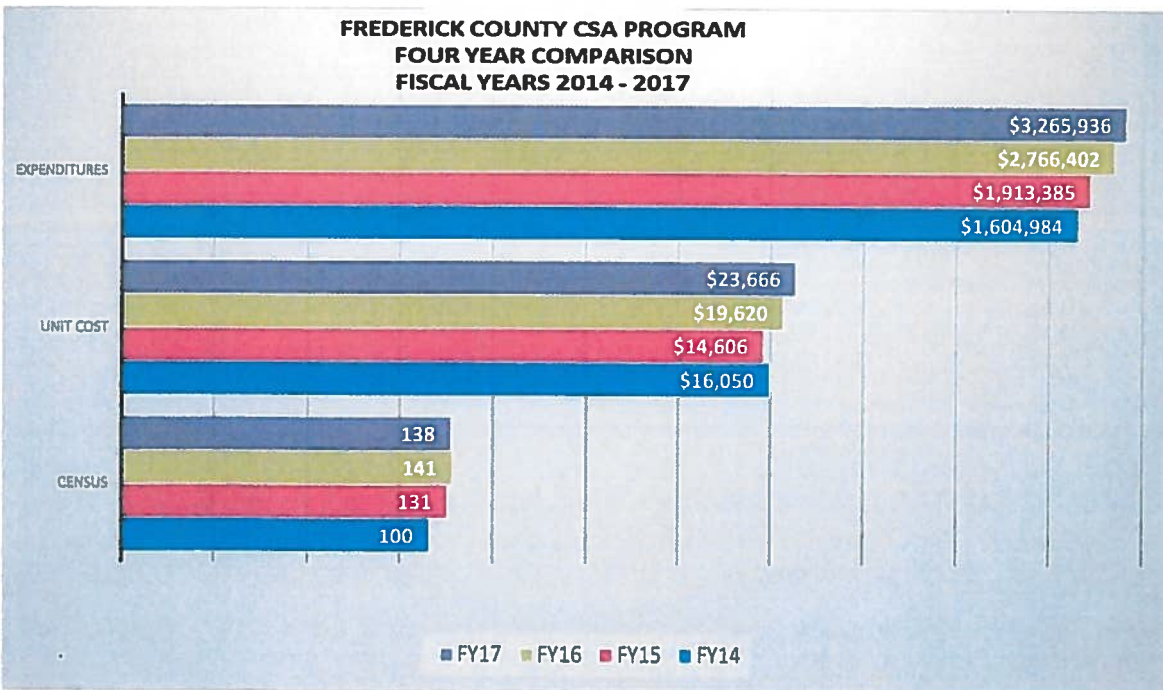
Frederick County was established in 1738 from Orange County, which encompassed present day Shenandoah, Clarke, Warren, and Frederick Counties and five (5) West Virginia counties. The county seat is the City of Winchester. According to the US Census Bureau Quick Facts, Frederick County estimated population in 2017 was 86,484 and median household income from 2012-2016 was \$68,929.

The Children's Services Act (CSA) is a law enacted in 1993 that establishes a single state pool of funds to purchase services for at-risk youth and their families. The state funds, combined with local community funds, are managed by a local interagency team, referred to as the Community Policy and Management Team (CPMT) that plans and oversees services to youth. The CPMT is supported by a Family Assessment and Planning Team (FAPT) and Multidisciplinary Teams (MDT) responsible for recommending appropriate services to at-risk children and families, a CSA Coordinator, and a CSA Account Specialist. Expenditure demographics for fiscal 2014 to 2017 are depicted below.

CSA Pool & Census Data by FY for the Frederick County (2014-2017)

FY	Census	Census Change	Census % Change	Pool Expenditures	Expenditures \$ Change	Expenditures % Change	Unit Cost	Unit Cost % Change
14	100	531	5%	\$ 1,604,984	\$ 141,342	10%	\$ 16,050	4%
15	131	31	31%	\$ 1,913,385	\$ 308,401	19%	\$ 14,606	-9%
16	141	10	8%	\$ 2,766,402	\$ 853,017	15%	\$ 19,620	34%
17	138	-3	-2%	\$ 3,265,936	\$ 499,534	18%	\$ 23,666	21%

Note: Changes recorded for FY 14 are based on difference from fiscal year 2014 to 2013



OBSERVATIONS AND RECOMMENDATIONS

A) CPMT GOVERNANCE

Observation #1:

Criteria:

Compliance and Internal Controls

The CPMT has not documented a formal plan to substantiate coordination of long-range planning that includes an assessment of current risks, strengths and needs of the existing system, as well as establishing and documenting measurable criteria for evaluating the effectiveness of the local CSA program. The ability and likelihood of the CPMT to adequately monitor and provide oversight of the local CSA program is an essential component of the organizational governance. The absence of formal planning, coordination, and program evaluation to ensure that the goals and objectives of the program are met ultimately impacts the CPMT efforts to better serve the needs of youth and families in the community and to maximize the use of state and community resources.

Recommendations:

As required by CSA statute § 2.2-5206, the CPMT should develop, document, and implement a long-range plan to guide the locally administered CSA program. The process should include development of formal risk assessment process and measurable criteria to be used for evaluating program accountability and effectiveness.

Client Comment:

“Frederick County CPMT acknowledges the need for a formal strategic plan to establish long term goals, measure the effectiveness of the program, and ensure it functions efficiently. Throughout the upcoming fiscal year, the CPMT will develop a strategic plan to be completed by June 30, 2019.”

B) FISCAL ACTIVITIES

Observation #2:

Criteria:

Internal Control

Frederick County CSA program did not fully take advantage of available fiscal resources that could be utilized to provide non-educational treatment services to students with disabilities. Frederick County CSA Program initially received a total allocation of \$24,714 for fiscal year 2018 for “Special Education (SPED) Wrap-around” funding to provide community-based services to students with educational disabilities. In January 2018, OCS rescinded the allocation as no funds had been expended to date. However, the CPMT expressed an intent to spend \$20,348.36 and the OCS re-allocated the funds requested. As of April 30, 2018, only \$4,007.50 (20%) has been

expended and as of July 16, 2018, \$6,835.00 (34%) of the funds allocated has been expended. Underutilization of available funding creates a lost opportunity to address the needs and improve overall treatment outcomes for at-risk youth and families in Frederick County.

Recommendations:

Frederick County CPMT should optimize every opportunity available to increase and utilize funding to support the provision of services to at-risk youth and families in the Frederick County community, to include but not limited to utilizing SPED wrap-around funds.

Client Comment:

“Frederick County CPMT acknowledges that the SPED wrap-around funds were not utilized in full during FY18. The CSA office has trained case management staff on the eligibility criteria for youth to receive services from this pool of funds and will continue to do so. As a matter of savings to the county, however, the FAPT will determine if a youth is eligible for services under another mandate type prior to utilizing SPED wrap-around funds due to its higher match rate.”

CONCLUSION

Our audit concluded that there were deficiencies in compliance and internal controls over the Frederick County CSA program, particularly in reference to governance and fiscal practices. Conditions were identified that could adversely affect the effective and efficient use of resources, as well as compliance with statutory requirements. An exit conference was conducted on Wednesday July 23, 2018, to present the audit results to the Frederick County CPMT. Persons in attendance representing the Frederick County CPMT were as follows:

Tami Green, Social Services
Peter Roussos, Court Service Unit
Dr. Colin Greene, Health Department
Mark Gleason, Community Service Board,
Dana Bowman, Private Provider
Jackie Jury, CSA Coordinator
Annie Kennedy, CSA Account Specialist
Brittany Arnold, CSA Account Specialist

Representing the Office of Children's Services was Annette Larkin, Program Auditor. We would like to thank the Frederick County CPMT and related CSA staff for their cooperation and assistance on this audit.

REPORT DISTRIBUTION

Scott Reiner, Executive Director
Office of Children's Services

Jay Tibbs, CPMT Chair
Frederick Deputy County Administrator

Kris Tierney, County Administrator
Frederick County

Michele Sandy, Former CPMT Chair,

Sharon Kibler, CPMT Fiscal Agent

Jackie Jury, CSA Coordinator

SEC Finance and Audit Committee



CSA Financial/Compliance Program Audit Quality Improvement Plan

Audit Client Name:	Frederick County
Audit/File Number	12-2018
Audit Report Date:	August 16, 2018
Quality Improvement Plan Date:	10/1/2018

Instructions: A separate form must be completed for each audit condition included in the final report.

QUALITY IMPROVEMENT PLAN DETAILS					
Observation No.	Task Description	Responsible Party	Target Date	Self Reporting Status	
				In Progress	Completed
1) CPMT Governance	The CPMT will develop a Strategic Plan to include "an assessment of current risks, Strengths and needs of the existing system, as well as establishing and documenting measurable criteria for evaluating the effectiveness of the local CSA program.	CPMT	6/30/2019	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Please check if attachments are included. If tasked described is not complete, please explain: The strategic planning process will be initiated at the September CPMT meeting, beginning with determining the most efficient way Frederick County address this need.					
PLAN APPROVAL					
SIGNATURE:			Title:		Date:
PRINTED NAME:					

For OCS Program Auditor Use Only			
<input type="checkbox"/> Check if action plan is acceptable	Date received:	Reviewed by:	Date:
Action implemented: <input type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	Date verified:	Verified by:	



CSA Financial/Compliance Program Audit Quality Improvement Plan

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Instructions: A separate form must be completed for each audit condition included in the final report.

QUALITY IMPROVEMENT PLAN DETAILS					
Observation No.	Task Description	Responsible Party	Target Date	Self Reporting Status	
				In Progress	Completed
2) Fiscal Activities	<p>The CPMT will review the current practices of utilizing SPED Wrap funds and make modifications if necessary.</p> <p>The FAPT and case managers will be trained on the eligibility and use of SPED Wrap funds.</p>	CPMT/FAPT/CSA Coordinator	1/31/2019	<input type="checkbox"/>	<input type="checkbox"/>
<div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> Please check if attachments are included. </div> <div style="border: 1px solid black; padding: 5px;"> If tasked described is not complete, please explain: CPMT review of the process of utilization beginning during the September CPMT meeting. A training for FAPT will be planned during an available time slot by January and case manager training will be ongoing during orientation sessions. </div>					
PLAN APPROVAL					
SIGNATURE:			Title:		Date:
PRINTED NAME:					

//////////////////////////////////////

For OCS Program Auditor Use Only			
<input type="checkbox"/> Check if action plan is acceptable	Date received:	Reviewed by:	Date:
Action implemented:	Date verified:	Verified by:	
<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory			

Proposed Policy Text Revisions based on Audit Feedback

Under 3.5.1.6 Emergency Funding Request Exceptions:

The authority to approve expenditures for cases involving only the payment of foster care maintenance is delegated by CPMT to the Director of the Frederick County Department of Social Services. ~~Special Needs Maintenance~~ payments to DFS foster families shall be approved by the DSS Director based on a rate scale approved by ~~CPMT~~ the Virginia Department of Social Services.

Mandated Eligibility through Court Involvement

- Children or youth determined by the court to be a CHINS-~~Services~~.

Mandated Eligibility through ~~CHINS-Services~~ Parental Agreement

- Children or youth who meet criteria for a CHINS-~~Services~~ but require out of home placement through an agreement between the local board or public agency designated by the CPMT and the parents or guardians where legal custody remains with the parents or guardians. These cases cannot be case managed by the LDSS.

Frederick County CSA Initial Referral Form

Case Manager Assigned:
Person Completing Referral (if different from above):
Date Referral Completed:

Agency:
FAPT Date:

1. CHILD'S INFORMATION

Child's Name:

Sex: ☐ Male ☐ Female

Address:

Social Security Number:

Age:

D.O.B:

Race:

School:

Grade:

IEP: ☐ Yes ☐ No

Identified Disability:

Current DSM-V Diagnosis:

Current Medications:

Name:

Dosage:

Purpose:

CANS completed: ☐ Yes ☐ No

Date entered into CANVAS:

Does youth have Medicaid? ☐ Yes ☐ No

Medicaid #:

Does youth have Private Insurance? ☐ Yes ☐ No

Insurance Co Name:
ID#:

Is Child Adopted? ☐ Yes ☐ No

If Yes, from where?

Adoption Subsidy Agreement? ☐ Yes ☐ No

Is Child eligible for Title IV-E federal funds? ☐ Yes ☐ No

2. BACKGROUND INFORMATION

Were Developmental Milestones met on time?

Child's History of Behaviors- include dates of occurrence:

Circumstances that Led to this Referral- include dates of occurrence:

3. TREATMENT PLANNING

****TIP-** To add rows to any chart, click anywhere in the chart, then hover your mouse just to the left of the chart in between rows.

Complete Chart Below to identify Child's Strengths and Successes:

CANS Strengths (0's & 1's):	Impact of Strength in Child's Life:

Complete Chart Below to Identify Treatment Goals:

CANS Need (2's & 3's):	Impact of Need in Child's Life:	Service(s) Being Requested to Address Needs:

Identify Long Term Goals for the benefit of the Child:

Identify Short Term Goals for the benefit of the Child (Relates to addressing the most Urgent Needs above):

- 1.
- 2.
- 3.

4. FAMILY INFORMATION

Child's Mother:

Mother's Address:

Phone:

E-Mail:

SS#:

D.O.B:

Race:

In Household: ☐ Yes ☐ No

Residential Stability:

Employer:

Employment Stability:

Medicaid? ☐ Yes ☐ No

Medicaid #:

Private Insurance? ☐ Yes ☐ No

Insurance Co Name:

ID#:

Child's Father:

Father's Address:

Phone: E-Mail:
SS#: D.O.B: Race:
In Household: ☐ Yes ☐ No

Residential Stability:

Employer: Employment Stability:

Medicaid? ☐ Yes ☐ No Medicaid #:

Private Insurance? ☐ Yes ☐ No Insurance Co Name:
ID#:

Other Legal Guardian: (Relationship:)

Address:
Phone: E-Mail:
In Household: ☐ Yes ☐ No

Residential Stability:

Employer: Employment Stability:

Who has custody of Child(ren)?

Siblings/Other Household Members:

Name:	DOB:	Relationship to Child:	Concerns:

5. CURRENT AND/OR PAST AGENCY INVOLVEMENT

DSS:

Date(s) of Involvement:

Reason for Involvement:

Family Services Specialist Name:

Phone: E-Mail:

SCHOOL:

Date(s) of Involvement:

Reason for Involvement:

Last school attended: Grade:

Contact Name: Contact Position:
Phone: E-Mail:

NORTHWESTERN CSB:

Date(s) of Involvement:

Reason for Involvement:

Case Manager Name:

Phone:

E-Mail:

Mental Health Therapist Name:

Phone:

E-Mail:

Psychiatrist Name:

Phone:

E-Mail:

COURT:

Date(s) of Involvement:

Reason for Involvement:

Past/Current charges:

Future Court Date:

Parent Criminal History:

Probation Officer Name:

Phone:

E-Mail:

PRIVATE PROVIDERS:

Provider Name:

Dates of Service:

Reason for Involvement:

Reason for Termination:

LEGAL REPRESENTATION:

Date(s) of Involvement:

Reason for Involvement:

GAL Name:

Agency Name:

Phone:

E-Mail:

6. Other Income/Funding

Does anyone in the family receive the following benefits?

Social Security: ☐ Yes ☐ No ☐ APPLIED Who?

Child Support: ☐ Yes ☐ No Which Parent: Amount:

Food Stamps (SNAP): ☐ Yes ☐ No
TANF: ☐ Current ☐ within last 24 months
Daycare Assistance:
Natural/Family Assistance (What/Amount):

Frederick County FAPT Follow Up Report

Child Name: Report Date: FAPT Date:
DOB: Age:
Primary Mandate Type: ____
Date of Last CANS: Date entered into CANVAS:

1. DOCUMENTS INCLUDED IN PACKET (Include if New Since Last FAPT):

- ☐ Recent Vendor Report
- ☐ Recent CANS
- ☐ Recent Social History
- ☐ Recent Assessment/Evaluation (ie-Psychological, Psychiatric, Parental Capacity, PsychoSexual, Substance Abuse, etc.)
- ☐ Current IEP
- ☐ Recent Educational Testing
- ☐ Record of Court Involvement

2. SERVICES UTILIZED IN THE PAST:

**TIP- To add rows to any chart, click anywhere in the chart, then hover your mouse just to the left of the chart in between rows.

Dates of Service:	Service Provider:	Outcome:

3. CURRENT PLACEMENT INFORMATION (if not in home):

Child's Placement:
Date of Placement:
Target Discharge Date:

4. CHANGES IN OTHER FUNDING SOURCES:

IV-E: ☐ Yes ☐ No
Medicaid: Mother ☐ Yes ☐ No Father ☐ Yes ☐ No Child ☐ Yes ☐ No
GAP: Mother ☐ Yes ☐ No ☐ Applied Father ☐ Yes ☐ No ☐ Applied

5. PROGRESS UPDATE (Include progress about ALL CSA services)

6. TREATMENT PLANNING:

Complete Chart Below to identify Child's Strengths and Successes:

CANS Strengths (0's & 1's):	Impact of Strength in Child's Life:

Complete Chart Below to Identify Treatment Goals:

Frederick County FAPT Follow Up Report

CANS Need (2's & 3's):

Impact of Need in Child's Life:

**Service(s) Being Requested
to Address Needs:**

Identify Barriers to Meeting Treatment Goals:

Identify Plans to Address Barriers:

****Submit to CSA Office with Budget Request Form and updated documentation****



Lutheran Family Services Rate Sheet

Fiscal Year 2019 (rates good through June 30, 2019)

Family Psychotherapy - Family Only	\$95.00
Family Psychotherapy with Client	\$95.00
Individual Psychotherapy 16-37 Minutes	\$75.00
Individual Psychotherapy 38-52 Minutes	\$85.00
Individual Psychotherapy 53-60 Minutes	\$95.00
Outpatient Assessment	\$125.00
Social Skills Group	\$550.00
Assessment	\$100.00
10 sessions @ \$45.00/session	\$450.00



New Horizons Professional ABA Services

**Rate Sheet for
Frederick County**

**FEE SCHEDULE
2018**

Consult and Assessment: \$ 120.00 per hour → increased 100%

Includes screening and intake consultation and evaluation

Educational Instruction: \$70.00 per hour → New

Educational Instruction includes Academic and Vocational Instruction, ABA therapy, Communication Instruction, Social Skills Training, Community Based Instruction, Job Coaching

In-home Support Services: \$ 70.00 per hour → increased 16.7%

In-home support services are an intensive program that may include parent training, behavioral management, ABA therapy, intensive behavioral intervention (virtual residential). Parent and care giver training in ABA practices.

BCBA Behavioral Consultation and Supervision: \$185.00 per hour → increased 208.33%

On an as-needed basis, this service provides for a sub-contracted Board Certified Behavioral Analyst to provide behavior consultation, plan development, and supervision.

*- formerly
did not subcontract
was included in
normal 60.7/hr
rate for services*




COMMONWEALTH of VIRGINIA

Scott Reiner, M.S.
Executive Director

OFFICE OF CHILDREN'S SERVICES *Administering the Children's Services Act*

Administrative Memo #18-08

To: CPMT Chairs
CSA Report Preparers
CSA Coordinators
CSA Fiscal Agents

From:  Maris Adcock, Business and Finance Manager

Date: July 30, 2018

Subject: FY2018 CSA Program Expenditure Year End

CSA 2018 Program Year-End is September 30, 2018:

This is a reminder that all requests for reimbursement of expenditures incurred between July 1, 2017 and June 30, 2018 must to be submitted to CSA's Local Expenditure Data and Reimbursement System (LEDERS) and approved by the locality CSA Fiscal Agent in LEDERS before midnight, September 30, 2018.

The LEDRS system will be available for processing year-end reimbursement requests until midnight September 30. This year, September 30 falls on a Sunday. It is highly recommended that you not delay processing and submitting your final FY2018 program year-end reimbursement requests. In the event there are any coding or validation errors or a need for approval of a supplemental funding request, early processing will provide more time to resolve those issues.

It is recommended that all FY2018 expenditure reimbursement requests be posted and approved in LEDRS before Close of Business on Friday, September 28. The Office of Children's Services (OCS) will close at 5:00 P.M. on Friday, September 28. OCS staff will not be available to assist if there are any errors or supplemental requests on the 29th or the 30th of September.

Year-End Reimbursement Processing:

During the months of July, August and September, LEDRS can accept expenditures incurred in multiple fiscal years. During the month of July and August, a locality can only submit one LEDRS file each month. In the month of September, a locality can submit up to five (5) LEDRS files.

In the months of July, August, and September, LEDRS separates the submitted data into FY2018 and FY2019 based on the payment date, as well as the purchase order fiscal year to determine the program service year and the month of service. The expenditure reimbursement data from the locality comes in a single submission. Therefore, a locality should review both FY2018 and FY2019 data reimbursement requests before the Fiscal Agent approves the July, August, and September LEDRS submissions.

Reminder: All 2018 reimbursement requests must be approved by the local CSA fiscal agent in LEDRS before midnight September 30, 2018. Late submissions will not be accepted for reimbursement as addressed in SEC Policy 4.5.2. Waivers to the September 30 reporting requirement must be submitted in writing and will be considered only if local governments demonstrate mitigating circumstances beyond their control.

Please direct any questions to:

Maris Adcock

maris.adcock@csa.virginia.gov

804-662-7451

Thank you for your cooperation.



Frequently Asked Questions

on the

*Interagency Guidelines on Foster Care Services for Specific Children in Need of Services
Funded through the Comprehensive Services Act*

1. Why and how were the Interagency Guidelines developed?

The Guidelines resolved the long-standing problem of custody relinquishment, which refers to the practice of parents giving up legal custody of a child to the Department of Social Services (DSS) in order to access mental health treatment that the parent can no longer afford for the child. Typically, these are children who have chronic and severe emotional/behavioral problems that have drained the family over time both financially and emotionally. Prior to the adoption of the Guidelines, in some areas of Virginia the Code was interpreted that the only means of access to services, particularly for residential treatment, was for the parent to relinquish custody of the child to the local DSS to make the child “mandated” under the Comprehensive Services Act (CSA).

An earlier attempt to serve these children and families was made in 1994 when the Code [SB557 1994 session](#) was revised to permit “agreements between the local board or agency designated by the community policy and management team, where the parent or guardian retains legal custody.” ([COV 63.2-905](#)) The law provided a mechanism for children to access mandated services under the statutory definition of foster care services, but did not require the parent to relinquish custody.

However, these agreements, which came to be known as “Non-Custodial Foster Care Agreements”, were problematic. Typically, the local department for social services was assigned case management responsibility. Both federal and state law required that DSS serve these children as they did foster children in such ways as determination of Title IV-E eligibility, referral to the Division of Child Support Enforcement, documentation of the child’s services in the state official foster care record (OASIS) and submission of service plans to the court and periodic review of the plan by the Court.

Consequently, even though parents retained legal custody, many stated that it still felt like their children were in foster care and complained of the stigma of DSS and court involvement when they were trying to obtain mental health treatment for their children. Additionally, the law did not require local governments to offer non-custodial agreements and so, in some areas they were not an option. However, it should always be noted that local governments often served these children and families through other funding streams, VDSS funds such as Promoting Safe and Stable Families, non-mandated funding, Mental Health Initiative, etc.

The issue of custody relinquishment was the subject of a legislative study published in 2004 ([Custody Relinquishment Report](#)) and in December 2006, the Attorney General rendered an opinion ([AG Opinion on Custody Relinquishment](#)) regarding the provision of mental health services to children and families under the Comprehensive Services Act. This opinion and a subsequent JLARC follow-up study, published in March, 2007 ([JLARC Report](#)) triggered the development of the Guidelines.

An interagency workgroup of over 40 stakeholders was created in early April 2007 by the Executive Director of the Office of Comprehensive Services. This group worked exhaustively over several months to develop and clarify the guidelines. A period of public review and comment was held from May 18, 2007 until July 20, 2007. Comments included the need for a standardized way of determining eligibility under the Guidelines and for a template of a Parental Agreement. Two subgroups were formed which developed these documents, which along with the Guidelines, were submitted to the State Executive Council in October 2007. The SEC authorized the Guidelines, but allowed an additional thirty day comment period. The Guidelines became effective on December 3, 2007. In July of 2008, the Guidelines were revised to reflect a statutory change which removed the requirement for a court review for families served through CSA parental agreements.

2. What is the statutory authority for provision of services under the Interagency Guidelines?

The Guidelines were adopted by the State Executive Council as policy for services provided through the Comprehensive Services Act. In accordance with the Code of Virginia §2.2-2648, the SEC has the responsibility to “provide for the establishment of interagency programmatic and fiscal policies...which support the purposes of the Comprehensive Services Act...” ([COV 2.2-2648](#))

3. Are Children in Need of Supervision (CHINSup) the same as the CHINS referred to in the Interagency Guidelines?

No. The Code provides definitions for these two similarly-named categories of children at [COV 16.1-228](#)

4. Are youth who are delinquent eligible for foster care services under the Interagency Guidelines?

Refer to pages 1-2 of the Guidelines for a listing of who is not eligible. Children who are “solely” delinquent are not eligible. However, a delinquent youth may present with significant mental health issues and need treatment. This is a FAPT decision and should be made on a case by case basis. One of the eligibility criteria is that the family must be willing to work to keep the child in the home for foster care prevention services or to have the child returned home as soon as possible if placed through a parental agreement.

4. Are all services provided under the Interagency Guidelines, including parental agreements, considered foster care prevention?

No. The Code of Virginia provides for three separate and distinct types of “foster care services.” ([COV 63.2-905](#))

Foster care services are defined as “the provision of a full range of casework, treatment and community services, including but not limited to independent living services, for a planned period of time to a child...when the child

- has been identified as needing services to prevent or eliminate the need for foster care placement,
- has been placed through an agreement between the local board or the public agency designated by the community policy and management team and the parents or guardians where legal custody remains with the parents or guardian or
- has been committed or entrusted to a local board or licensed child placing agency.” §63.2-905 (*formatting added.*)

The first bullet refers to the provision of foster care prevention services. Foster care prevention services are offered in the home and community. The second bullet refers to either Non-custodial Foster Care Agreements or CSA Parental Agreements, which provide out-of home services to the child. The third bullet refers to children placed in the custody of either a local DSS or a licensed child placing agency. These three categories do not overlap or supersede one another; each is “mandated” in its own right.



**Final Interagency Guidelines on
Foster Care Services for Specific “Children in Need of Services”
Funded through the Comprehensive Services Act (CSA)**

Effective December 3, 2007

Revised; effective July 1, 2008

Statutory mandate to provide foster care services to “children in need of services”

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

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

There are three separate and distinct situations when these children and their families are provided mandated foster care services (§63.2-905). The children:

- Have been identified as needing services to prevent or eliminate the need for foster care placements; or
- Have been placed through an agreement between the parents or legal guardians and the local department of social services (LDSS) or the public agency designated by the Community Policy and Management Team (CPMT) where legal custody remains with the parents or guardians; or
- Have been committed or entrusted to a LDSS or licensed child placing agency by the court.

Purpose of guidelines; Children for whom guidelines apply

This document proposes interagency guidelines on the provision of foster care services mandated through CSA for “children in need of services” and their families in the first two situations. Specifically, the guidelines apply when “children in need of services:”

- Remain in their homes and have been identified as needing services to prevent or eliminate the need for foster care placements; or
- Have been placed outside of their homes through an agreement between the parents or legal guardians and the LDSS or the public agency designated by the CPMT where legal custody remains with the parents or legal guardians.

Parents or legal guardians do not have to relinquish custody of their children in order to obtain necessary services.

Children for whom guidelines do not apply

This document does not address, nor propose any changes in policy, for the children listed below. Please refer to current law and policies regarding services for these children. Unless children meet the eligibility criteria as outlined in these guidelines, the proposed guidelines do not apply. For children who fit multiple categories, their circumstances should be considered individually to

determine the most appropriate route for services. Thus, these guidelines do not apply to children who are solely:

- “Children in need of services” and who meet the third statutory situation above. Specifically, children who are in “foster care” through commitment or entrustment to a LDSS or licensed child placing agency by the court.
- Children who are abused or neglected, as defined in §63.2-100, and receive foster care services, including:
 - foster care prevention services as described in CSA and VDSS policy (*VDSS will update Appendix H of the CSA manual to reflect that the six month limitation and extensions are no longer required*),
 - services to children who have been committed or entrusted to the LDSS or licensed child placing agency by the court (*including children placed in the care and custody of LDSS through a “relief of care and custody” petition granted by the court*);
 - placement through a noncustodial agreement between the LDSS and the parent or legal guardian who retain legal custody.
- Children in need of supervision, delinquents, or truants referred by the court.
- Children who are eligible for special education services through CSA (§2.2-5211C subdivisions B1 and B2.)
- Children who are eligible for nonmandated services through CSA, as identified in the CSA target populations (§2.2-5211C subdivisions B4 and B5). These children are:
 - “Placed by a juvenile and domestic relations district court, in accordance with the provisions of §16.1-286, in a private or locally operated public facility or nonresidential program, or in a community or facility-based treatment program in accordance with the provisions of subsections B or C of §16.1-284.1; and
 - “Committed to the Department of Juvenile Justice and placed by it in a private home or in a public or private facility in accordance with §66-14.”
- “Children in need of services,” children with mental health needs, or children who need residential care who do not otherwise meet the eligibility guidelines in this document.

Proposed eligibility criteria

The Family Assessment and Planning Team (*FAPT*), or approved alternative multi-disciplinary team, in accordance with the policies of the CPMT, 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” (§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 alternative multi-disciplinary team designated by the CPMT 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.” (§16.1-228)

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

a. the child’s problems:

- 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
- are significantly disabling and are present in several community settings, such as at home, in school or with peers; and
- 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
- requires services or resources that are beyond normal agency services or routine collaborative processes across agencies; and
- 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:

- services to prevent or eliminate the need for foster care placement¹. Absent these prevention services, foster care is the planned arrangement for the child.

or

- 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).*

Process for determining eligibility

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:

¹ Foster care placement is defined as “placement of a child through (i) an agreement between the parents or guardians and the local board or the public agency designated by the community policy and management team where legal custody remains with the parents or guardians or (ii) an entrustment or commitment of the child to the local board of licensed child-placing agency.” (§ 63.2-100)

- 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 FAPT, or approved alternative multidisciplinary team, all relevant assessments when needed for a child who has significant mental health needs. The team will use the standard eligibility determination checklist (*Attachment A*) 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.

Proposed services for “children in need of services” eligible for foster care services

Services for “children in need of services” and their families should be provided through a collaborative system of care that is child-centered, family-focused and community-based (§2.2-5200). The CPMT should use established policies and procedures, including:

- referrals and reviews by the FAPT or approved multi-disciplinary team;
- immediate access to CSA state pool funds for emergency services; and
- utilization management of services (§2.2-5206).

The team should engage families in participating in all aspects of assessment, planning and implementation of services (§2.2-5208). Services may include a full range of casework, treatment and community services for a planned period of time (§63.2-905).

The team and family should assess the strengths and needs of the child and family (§2.2-5208) before exploring service options. They should then collaboratively design the complement of services and supports required to meet the unique needs of the child and family (§2.2-5208), building upon the strengths, resources and natural supports of the child and family. Teams should strive to preserve and strengthen families and provide appropriate services in the least restrictive environment that protect the welfare of children and maintain public safety (§2.2-5200). Services may be provided directly, provided through referral to other community resources, or purchased through approved providers. The duration of services should be for a planned period of time based on the needs of the youth and family. Services must be documented in the Individual Family Services Plan (IFSP).

The FAPT or approved multidisciplinary team, in collaboration with the family, develops an IFSP that provides the complement of services and supports tailored to the strengths and needs of the child and family (§2.2-5208). They determine the most appropriate, least restrictive, cost effective services for the child and family which accomplish the following purposes:

- resolves the immediate crises that seriously threaten the well being and physical safety of the child or another person; and
- preserves, stabilizes and strengthens the family situation so the child may live in the home; and
- these services are provided either:
 - in the home to prevent or eliminate foster care placement (*no parental agreement is required*) ; or
 - outside of the home in a group or residential setting through an agreement between the public agency designated by the CPMT and the legal guardian who retains legal custody (*a parental agreement is required*).

Placements outside of the home

If community services and supports have been explored and determined not to be in the best interest nor meet the needs of the child, the team collaboratively with the family should explore placements outside of the home with extended family. They shall then explore placements in family-like homes or group or residential settings to serve the child if these are the most appropriate and least restrictive services. Before placing the child across jurisdictional lines, the team shall:

- explore all appropriate community services for the child;
- document that no appropriate placement is available in the locality; and
- report the rationale for the placement decision to the CPMT (§2.2-5211.1.2).

For all children placed out-of-state using CSA funds, the team shall follow the requirements of the Virginia Interstate Compact for the Placement of Children (http://www.dss.virginia.gov/family/interstate_res.html).

When the FAPT, or approved multidisciplinary team, and the legal guardian agree on an out-of-home placement that is the most appropriate and least restrictive service, the local public agency designated by the CPMT and the legal guardian must enter into an agreement. This agreement requires the legal guardian who retains custody to agree to place the child and the CPMT to agree to provide funding in accordance with the CPMT's policies and procedures. A discharge plan for returning the child home as quickly as appropriate must be included as part of the IFSP.

The public agency designated by the CPMT and the legal guardian shall develop an agreement that provides for:

- Family participation in all aspects of assessment, planning and implementation of services;
- Services to be provided as delineated in the individual family services plan;
- Payments to cover the cost of care by the family, their private health insurance, public or private agency resources, and CSA state pool funds;
- Legal guardian applying for Medicaid, FAMIS, and/or other public or private resources if it may assist in funding services;
- Provisions for utilization management of the care provided;
- Provisions for resolving disputes regarding placements; and
- Conditions and method for termination of the agreement.

An updated standard template for CSA Parental Agreements is attached (*Attachment B*).

If disagreements arise over the appropriate placement of the child, the team and legal guardian should examine the reasons for the disagreement and explore alternatives for resolving the issues. The legal guardian has expertise on the strengths and needs of the child and family, while the team is responsible for identifying the most appropriate service options. Ultimately, it is the legal guardian's decision on whether to choose to accept the services developed with and recommended by the team. The CPMT has final authority for the expenditure of CSA funds that comply with federal and state requirements on services recommended by the team. Neither the legal guardian nor the CPMT is required to enter into an agreement if either party disagrees on the appropriate placement of the child. The FAPT or multi-disciplinary team shall provide the legal guardian information on the process for appealing recommendations by the FAPT as established through the CPMT's policies.

If a child is placed outside of the home and school division, the team shall notify the receiving school division if the child has disabilities to expedite enrollment and special education requirements, based on policies established by the CPMT (§2.2-5211.1.2). The team should also immediately begin implementing the discharge planning to return the child home as soon as it is safe and appropriate.

Case Management

The team, in adherence to CPMT policies, shall designate a person responsible for monitoring and reporting progress in implementing the IFSP to the team and responsible local agencies as appropriate (§2.2-5208). The team is responsible for providing family participation, developing a plan, referring the youth and family to services, and designating a person responsible for monitoring and reporting on progress (§2.2-5208).

Case management services may be provided by local departments of social services (*LDSS*) or another public agency designated by the CPMT.

- If a LDSS enters into an agreement with the legal guardian to place the child outside of the home in "24 hour substitute care", the LDSS is the case manager with "placement and care" responsibility for the child, and the legal guardian retains custody, the child is considered "in foster care" by the federal government and all federal and state requirements must be met (45 C.F.R. §1355.20; see *Virginia Department of Social Services Foster Care Policy Manual at <http://www.dss.state.va.us> under "Children", "Foster Care"*). VDSS' approved Non Custodial Foster Care Agreement (*the updated form may be found at <http://spark.dss.virginia.gov/divisions/dgs/warehouse.cgi>*) is used. Federal IV-E funds can only be claimed if LDSS has placement and care responsibility and the child is determined to be Title IV-E eligible by the LDSS.
- If another public agency designated by the CPMT enters into an agreement where the legal guardian agrees to place the child outside of the home, this public agency has case management responsibility for the child, and the legal guardian retains custody, the child is not considered "in foster care." No federal foster care requirements apply. The attached CSA Parental Agreement template is used. Federal Title IV-E funds may not be used to pay for any maintenance or administrative costs (*e.g., room and board, day care, transportation for visits with family, and payment for case management*).

Pooling resources to fund services and supports

The team, or entity determined by the CPMT, shall explore all available family, community, private insurance, and public resources that may assist in funding the services and supports in the IFSP. CSA statute requires that the LDSS, local school division, CSB, court service unit and DJJ shall continue to be responsible for providing services identified in the IFSP that are within the agency's scope of responsibility and that are funded separately from the state pool (§2.2-5211D).

All efforts should be made to maximize and pool resources across agencies and sectors. The CPMT shall use Medicaid funds whenever available for appropriate CSA services for the child and family (*Appropriation Act #279E*). The team shall use the process established by the CPMT to assess the ability, and provide for, appropriate financial contributions to the cost of services by the parents or guardian, using a standard sliding fee scale based upon ability to pay (§2.2-5208.5).

After assessing all appropriate federal, state, private and community resources, the team shall recommend to the CPMT expenditures from the local allocation of the state pool of funds (§2.2-5208). The CPMT shall use established policies and processes for authorizing and monitoring the team's requests for funding (§2.2-5206).

Utilization management

Ongoing utilization management (§2.2-2648.D15) shall be conducted to assess the effectiveness and appropriateness of foster care services based on the plan established by the CPMT following guidelines of the State Executive Council. Frequency of reviews should be based on the strengths and needs of the individual child and family and the restrictiveness of the services. Children who require intensive and/or restrictive services should be reviewed frequently.

Due process protections

The policies and procedures of the CPMT's due process system for CSA, including appeals, are applicable to children and families eligible for services and supports under these guidelines. The Comprehensive Services Act Manual (*Section 3.6*) requires each CPMT to establish a local due process system that has the following minimum parameters:

- Notice to families at point of entry to FAPTs;
- Opportunity for the family/child to be heard and communicate their position; and
- Timelines for the review of requests and CPMT responses.

This review process system shall not take the place of any other review process pursuant to existing state or federal law (*e.g., special education, foster care, and the courts*).

CHINS and CSA Parental Agreements

New Coordinator Academy

March 2018

Carol Wilson

Office of Children's Services

Why do we have CSA Parental Agreements?

- CSA Parental Agreements were created as a way to solve a problem.
- Problem: How do we help parents of children with severe emotional/behavioral problems access residential treatment without requiring parents to go to court, work with the LDSS, or even relinquish custody?
- Children with emotional/behavioral needs were considered either not eligible for CSA or non-mandated.

Problem

- Parents might be told that the only way CSA could fund residential treatment was for the parent to relinquish legal custody, have the court determine the child to be in need of services and placed in foster care. This would put the child in the "mandated" CSA population.
- An alternative was the non-custodial agreement which permitted parents to retain legal custody; however non-custodials were problematic.

Problem

- Non custodials were problematic because
 - Filing a petition and court involvement including review were still required
 - For all practical purposes, and from a federal standpoint, the child was in foster care
 - Statutory language “permitted” non-custodials, which localities interpreted to mean they did not have to offer this option

Problem

- Issue of custody relinquishment came to the attention of the General Assembly
- Posed question to the Attorney General regarding whether or not CSA should be responsible for providing mental health services to children

Problem

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- Posed question to the Attorney General regarding whether or not CSA should be responsible for providing mental health services to children

Answer

- Opinion rendered in December 2006 which strongly stated that no parent in the Commonwealth of Virginia should ever have to relinquish custody to obtain mental health treatment for a child

<http://www.oag.state.va.us/Opinions%20and%20Legal%20Resources/OPINIONS/2006opns/05-095-Fralin.pdf>

Answer

- Opinion rendered in December 2006 which strongly stated that no parent in the Commonwealth of Virginia should ever have to relinquish custody to obtain mental health treatment for a child

<http://www.oag.state.va.us/Opinions%20and%20Legal%20Resources/OPINIONS/2006opns/05-095-Fralin.pdf>

CSA Parental Agreement

- CSA Parental Agreement is a contract between the parents/guardians and the agency designated by the CPMT. The CPMT has fiscal responsibility.
- Terms include the rights and responsibilities of the parent/guardian, what is expected of the agency, financial terms and length of agreement



CSA Parental Agreement

- Parties must agree that out of home placement is:
 - In the child's best interests,
 - Most appropriate and least restrictive setting to meet child's needs; and
 - Mutually agreed upon by the FAPT and the parents/legal guardians.

CSA Parental Agreements are voluntary agreements.

CSA Parental Agreements

- Only used for short-term out of home placements for treatment purposes
- May not be used for other types of placements such as respite
- Placements may be in:
 - Residential facilities (PRTFs)
 - Group homes
 - Treatment Foster Care (use cautiously)

CSA Parental Agreement

- CSA Parental Agreement
 - Parent retains legal custody.
 - Voluntary agreement! Focus is on treatment of child, not parent's ability to care for or provide a safe home for child.
 - Parent/guardian is actively involved in all phases of assessment, decision-making, service delivery and review.
 - Goal is always to return home.
 - Parent places child, not agency. Parent may remove at any time, per the terms of the individual agreement.
 - Residence of parent/guardian matters.
 - Determine fiscal responsibility of all parties.

CSA Parental Agreement

- Parent changes residence to another locality-what happens?
- Parent moves out of state-what happens?



Length of Stay

- Length of Stay
 - Short- term! Set target date. If child is still in need of treatment on that date, review plan.
 - Placement may not last indefinitely.
 - CSA requires utilization review.

Inappropriate Use

- CSA Parental Agreements are not appropriate if child and family are receiving services because of abuse and/or neglect.
 - Voluntary
 - Parent retains legal custody
 - No court involvement
 - May not be used as an alternative to foster care placement when abuse/neglect is present
- CSA Parental Agreements are not a substitute for foster care placement.
 - Focus is treatment, not protection or permanency
 - Child does not have same federal and state protections as a child in foster care

Problems

- Problems arise when CSA Parental Agreements are not used appropriately:
 - Court is involved
 - Child is in need of permanency
 - No target date set for termination
 - No agreement on what constitutes successful completion of treatment
 - Used for child not in intended population (i.e., behavioral/emotional needs)
 - Parent moves to another locality or state

3.1.3.4 Mandated Eligibility through CHINS-Services Parental Agreement

- Children or youth who meet criteria for a CHINS-Services but require out of home placement through an agreement between the local board or public agency designated by the CPMT and the parents or guardians where legal custody remains with the parents or guardians. These cases cannot be case managed by the LDSS.
- The use of a Parental Agreement is intended for youth with behavioral/emotional needs that require out of home placement. It is not appropriate for cases of abuse/neglect, or where protection or permanency is a concern.

3.1.3.4.1 Parental Agreement Requirements

- The parents/guardians of youth placed through a Parental Agreement must participate in weekly family therapy, preferably in person or through video conferencing. A Parental Agreement may be void and an extension shall not be allowed if parents/guardians do not meet this requirement unless otherwise determined by FAPT.
- Parents/guardians may be required to participate in additional services as recommended by FAPT to facilitate discharge and transition home. Failure to participate may result in immediate discharge and termination of the Parental Agreement.
- Parents/guardians of youth placed out of the home through a Parental Agreement shall be referred to the Division of Child Support Enforcement for the collection of child support. Parents/guardians may appeal the decision of the court through the DCSE appeals process.

3.1.3.4.2 Parental Agreement Terms and Limitations

- The Parental Agreement is a voluntary agreement between the local CPMT, the agency providing the case management (CSB, CSU, or FCPS), and the parent/guardian of the youth.
- CSA Parental Agreements are limited to short-term out of home placements. "Focus is on the treatment of the child, not parent's ability to care for or provide a safe home for a child." (taken from New Coordinator Academy "CHINS and CSA Parental Agreements" March 2018 presentation slide 31.)
- If a youth is eligible for services under a Parental Agreement, treatment out of the home is limited to six months. If the FAPT determines that the youth is still in need of treatment at the end of six month, FAPT may recommend to CPMT an extension of the Parental Agreement for an additional length of time individualized for each child, but no longer than 90 days.

The term of a Parental Agreement shall not exceed 270 days unless authorized by CPMT upon recommendation of FAPT.