

**Comprehensive Services Act for
At-Risk Youth & Families**

Strategic Vision & Actions



Office of Comprehensive Services
March 31, 2006



Strategic Vision

Comprehensive Services Act for At-Risk Youth & Families

Statutory Mission

The mission of the Comprehensive Services Act for At-Risk Youth and Families (*CSA*) is to create a collaborative system of services and funding that is child-centered, family-focused, community-based and cost-effective when addressing the strengths and needs of troubled and at-risk youths and their families in the Commonwealth.



OCS Vision for CSA

The mission of the Office of Comprehensive Services (*OCS*) is to facilitate a collaborative system of care that improves outcomes for troubled and at-risk youth and their families that is child centered, family focused, community based and cost effective. OCS envisions CSA as a national model in providing effective and innovative systems of care statewide for children with emotional and behavioral problems and their families.

We strive for CSA to be highly regarded as a leader in:

- Improving outcomes for children and their families;
- Partnering with families and all CSA stakeholders to implement best practices and technology to continually improve the performance of CSA;
- Facilitating the highest quality technical assistance and training to strengthen the capacity of communities to implement CSA; and
- Maintaining high standards for sound fiscal accountability and responsible use of taxpayer funds.

OCS strives to maintain an enthusiastic, creative and knowledgeable staff empowered to work with CSA stakeholders to sustain the highest quality system of care for Virginia's children and their families.

CSA Values

Family focused: Ensure families and caretakers are partners in decision-making on the assessment, design, delivery and management of services.

Strength based: Ensure that the design and provision of services respond to the unique and diverse strengths, needs and potential of children and their families, and build upon natural family and community supports.

Continuum of care: Provide access to a continuum of assessment, early intervention, treatment, and transition services and supports in communities.

Community based: Provide appropriate services in the least restrictive environment, striving to preserve and strengthen families, and enabling children to remain in their homes and communities, balanced with the need to protect the welfare of children and maintain public safety.

Integrated care: Provide integrated services and funding for children and their families with designated care management to ensure multiple services are coordinated across agencies and evolve over time to meet the changing strengths and needs of children and their families.

Culturally & linguistically responsive: Provide services and supports that are responsive to the culture and language of the child and family.

Collaborative: Support open communication, active participation, and collaboration among CSA stakeholders across all sectors and at all levels on program and fiscal policy development, service delivery and management. Encourage public-private partnerships in service delivery.

Strong state leadership: Ensure policies, uniform guidelines, services, funding and practices support systems of care in communities that can be tailored to meet the unique strengths, resources, and needs of children, families and communities.

Flexible funds: Provide communities flexible funds, authorize them to make decisions and to be accountable for providing services in concert with the CSA.

Fiscally accountable: Ensure funds are spent effectively, efficiently and equitably, maximizing the use of all federal, state, local & private funding streams.

Outcome & quality improvement: Improve program quality using customer feedback, child and family outcomes, and program and fiscal data.

State Executive Council Strategic Directions

Develop policies that ***improve access*** to care for all at-risk and troubled youth and their families.

Promote open communication, ownership, and active participation among all CSA participants: parents and their children, local and state decision makers and governments, and private agencies.

Maximize and efficiently utilize all available funding streams - local, state, federal and private - that are aligned with and complementary to Comprehensive Services Act principles.

Develop and ***implement a quality improvement program*** that uses customer feedback, client outcomes, and program and fiscal data to improve the operation and management of CSA, OCS, and SEC.

Develop program efficiencies and support ***that minimize CSA administrative processing*** and expenses at all levels: state, local, and private agencies.



State and Local CSA Structure

The CSA System is comprised of several entities at the state and community levels that work collaboratively to implement CSA.

State CSA Structure

The **State Executive Council (SEC)** is the statutorily based supervisory council that provides leadership and oversees the development and implementation of state interagency program and fiscal policies. Its mission is to direct a cost-effective collaborative system of services for youths that is child centered, family focused and community based. (§2.2-2648)

The **Office of Comprehensive Services for At Risk Youth & Families (OCS)** serves as the administrative entity of the SEC and ensures that its decisions are implemented. It works collaboratively with all CSA stakeholders to increase the capacity of communities across the Commonwealth to successfully implement CSA. (§2.2-2649)

The **State and Local Advisory Team (SLAT)** is statutorily required to advise the SEC by managing cooperative efforts at the state level and to provide support to community efforts. It works collaboratively with OCS to recommend interagency program and fiscal policies, assess the impact of proposed policies, regulations and guidelines; and provide best practices, training and technical assistance. It operationalizes SEC decisions in the respective agencies and associations. (§2.2-5202 - §2.2-5203)

Community CSA Structure

In each community, teams of professionals and family members collaboratively decide how to provide services and funding for children and their families.

The **Community Policy and Management Teams (CPMTs)** have the statutory authority and accountability for managing the cooperative effort and developing interagency policies that govern CSA in the community. They coordinate the locality's long-range, community-wide planning that ensures the development of needed resources and services. CPMTs are comprised of a parent, local government official, agency heads from local child serving agencies (*community services boards, courts service units, health, social services, and public schools*) and a private provider. Community agency representatives are authorized to make policy and funding decisions for their agencies. (§2.2-5204 - §2.2-5206)

The **Family Assessment and Planning Teams (FAPTs)** are established by CPMTs to provide for family participation, assess the strengths and needs of children and their families, develop individual family services plans, and make recommendations to the CPMTs. It is comprised of a parent and representatives from local child serving agencies (*community services boards, courts service units, social services, and public schools*). It may include a local health department and private provider representatives. (§2.2-5207 - §2.2-5210)

CSA Coordinators are hired by many, but not all, communities to manage local CSA implementation, including program, fiscal, and administrative responsibilities. (*Appropriations Act, Item 200.C.3*)

*OCS Goals & Priorities (April 2006 – June 2007) ** DRAFT***

I. *Involve families* more proactively throughout CSA.

- Institutionalize ways to engage families in decision-making on CSA teams. (*Annie E. Casey Foundation initiative.*)
- Work collaboratively with VA-INFO, the new statewide family network.
 - Assist with statewide training conference for families & professionals in July.

II. *Improve the capacity of communities* to effectively implement CSA, while reducing administrative burdens.

- Tailor technical assistance to developmental levels of communities. Develop high quality technical assistance tools to assist communities in:
 - Strengthening CSA vision and community teams;
 - Assessing community strengths and needs;
 - Planning and developing creative wrap around and evidenced based services;
 - Improving utilization management;
 - Maximizing and pooling available resources; and
 - Collaborating regionally.
- Develop training opportunities
 - Hire Training/Technical Assistance Coordinator, if funded.
 - Design and implement CSA orientations for key stakeholder groups.
 - Begin designing CSA Academy to help communities take CSA to next level.
 - Provide targeted training:
 - CAFAS Training – May 3rd and 4th
 - Juvenile & Domestic Relations Judges Session - Fall.
- Improve utilization management (*UM*) processes
 - Hire two UM consultants under OCS' direction and supervision, if approved.
 - Implement new UM process for non-Medicaid children in residential care collaboratively with eligible communities and private providers by July 1.
 - Work with statewide group of UM staff from localities to share best practices.
- Begin developing one system of care through identifying strategies for:
 - Tackling the issue of mandated and nonmandated children;
 - Bridging and building upon strengths of mental health & CSA systems of care;
 - Resolving the custody relinquishment issue.
- Begin expanding community services and the appropriate use of residential care.
 - Provide support for JLARC's study (*HJR 60*).
 - Implement Senate Finance's community incentive grants \$750,000, if approved by the General Assembly.

III. *Manage a strong financial infrastructure* and continue to maximize all available resources.

- Project, budget, and manage CSA state pool funds.
- Provide support for the Joint Legislative Subcommittee on CSA (*SJR 96*)
- Monitor issues impacting partner agencies that can fiscally impact CSA:
 - Federal Medicaid changes
 - Federal IV-E Eligibility (*Rosales*)
 - Federal IV-E DSS Case Review
 - Adoption Subsidies

IV. *Enhance communication with all CSA stakeholders.*

- Hire Policy/Legislative person to provide additional staff support for SLAT workgroups, if funded.
- Continue regional meetings with CSA stakeholders across the state (*eg, CPMTs, CSA Coordinators, private providers, family representatives*).
- Continue to develop strong partnerships with key stakeholder groups:
 - Four state child serving agencies (*DJJ, DMHMRSAS, DOE, and DSS*) and their local associations.
 - CSA Coordinators Network.
 - Private providers.
 - Judges.
- Improve electronic communications
 - Implement an electronic newsletter.
 - Develop list serves for key stakeholder groups (*eg, CPMTs, CSA Coordinators, family representatives, localities involved in state sponsored utilization management*).
 - Improve the technical assistance and family pages on OCS' website.
 - Implement a calendar on OCS' website to post major events by partners.
 - Meet with stakeholders to determine ways to enhance the service fee directory.

V. *Provide management information tools for decision making.*

- Identify CSA outcomes and performance measures.
- Develop quality on-line management reports for CPMTs.
 - Explore feasibility of linking CSA, Medicaid & Title IV-E expenditures by child.
- Continue to analyze CSA data set information.