



Virginia
Commission on Youth

At-Risk Youth Served in Out-of-State Residential Placements

November 21, 2005

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At-Risk Youth Served in Out-of-State Residential Facilities

- In March 2005, the Commission on Youth directed staff to:
 - ❖ Determine the number of children receiving services in out-of-state residential treatment centers in lieu of being served in the Commonwealth;
 - ❖ Determine the reasons these children are being placed out of the Commonwealth, as well as the cost; and
 - ❖ Assess whether there is service ability in the Commonwealth to serve these children.



At-Risk Youth Served in Out-of-State Residential Facilities

Issues Identified in Study:

- Distance of child from community and family;
- Restrictive nature of residential placements;
- Decline of family functioning as a byproduct of placement;
- Economic and psychological costs to families;
- Expense of placements to the Commonwealth;
- Reliance upon such placements due to lack of available treatment programs in the Commonwealth; and
- Adequacy of Interstate Compact for the Placement of Children (ICPC) in determining the number of children being placed out-of-state.



At-Risk Youth Served in Out-of-State Residential Facilities

■ Study Activities

- Identify data sources regarding out-of-state placements – Department of Social Services (DSS), Office of Comprehensive Services (OCS), and local Comprehensive Services Act Coordinators.
- Review of cases with local OCS and DSS representatives to ascertain the rationale for such placements.
- Ascertain whether there is adequate documentation regarding out-of-state placements.
- Formulate final findings and recommendations for the study.

Identification of Data Sources

- Review the ICPC administered by DSS
- Review of data from DSS OASIS database systems
- Review of data from OCS Automated Data System
- Review of previously conducted surveys and studies
- Review of selected cases with CSA Coordinators and local Family, Assessment and Planning Teams (FAPT)



Questions to the Department of Social Services

- How many children were placed in residential placements during FY05?
 - Type of placement
 - Referring agency
 - Age of children
 - Virginia location of the child
 - Diagnosis
 - Average length of stay
 - Cost of placement
 - Name and state of placement
 - Reason for not being placed in Virginia
- How many Virginia children are currently placed in an out-of-state residential setting?
- How many children from other states and countries are currently in Virginia residential placements?



DSS OASIS Data on Out-of-State Placements for FY 04*

- Number of children served in out-of-state group homes and residential facilities – 108 children
 - ❖ Average Length of Stay – 1,475 days
 - ❖ Longest Length of Stay – 6,214 days
 - ❖ Shortest Length of Stay – 7 days
 - ❖ Average Age – 15.88 years
- Referral sources include private child-placing agencies, public agencies, Court Service Units, Judges, school divisions, parents, and state agencies.
- Specific ICPC data on out-of-state placements currently unavailable.

***Unduplicated data**



DSS OASIS Data on Out-of-State Placements for FY 04

States where Virginia's children are being served

- Florida
- Colorado
- Tennessee
- Ohio
- North Carolina
- South Carolina
- Pennsylvania
- District of Columbia
- Texas
- Georgia
- Alabama
- Michigan
- Massachusetts
- Maryland
- New York

Out-of-State Placements and the Comprehensive Services Act

- History of CSA
- Review of CSA data for out-of-state placements including:
 - ❖ Type of placements;
 - ❖ Referring agencies;
 - ❖ Demographics of children served; and
 - ❖ Cost of placements.

History of CSA

- 1990 Study of Children in Crisis found that:
 - Children bounced from agency to agency, with as many as 4 different state agencies (DOE, DSS, DJJ, & DMHMRSAS) involved in some cases.
 - Service duplication --14,000 cases across four agencies were found to represent no more than 5,000 children.
 - 16 different federal and state programs funded treatment. Costly residential care was the norm, even when less restrictive care would have been sufficient.
 - Total costs were increasing at about 20% each year.

Source: Secretary of Health and Human Resources Briefing for House Appropriations Committee, January 26, 2003.



History of CSA

- CSA was created to combat issues such as service delivery, fragmentation and absence of cooperative planning among child serving agencies, and an over-reliance of the use of hospitalization and residential placements for children.
- Effective July 1, 1993, eight previously categorical funding streams were combined into one pool of funds.
- Interagency state teams were created to coordinate policies and guidance for localities.
- Local interagency teams were created to develop and monitor treatment plans for children.

History of CSA

- The services provided by CSA reflect the Commonwealth's goals of preserving families and providing services in the least restrictive environment.
- Virginia places great importance on children remaining with their families whenever possible.
- When this is not possible, children are placed in settings as close to home as possible.
- CSA governs the placement and funding for many of the children in need of residential services.

History of CSA

- Since adoption of CSA in 1992, 16 studies of the program have been conducted.
- JLARC completed the most comprehensive study in 1998.
- Findings from the JLARC study included:
 - ❖ level of services often did not match level of treatment need;
 - ❖ charges and services provided by private vendors were not adequately reviewed;
 - ❖ localities sometimes circumvented interagency requirements;
 - ❖ federal funding was underutilized; and
 - ❖ state direction and oversight was lacking.

Source: Secretary of Health and Human Resources Briefing for House Appropriations Committee, January 26, 2003.



History of CSA

Expenditure Summary from Program Years 1994-2004

Year	Expenditures	Unduplicated Census	Unit Cost
1994	\$104,012,539	10,214	\$10,236
1995	\$125,648,063	12,028	\$10,446
1996	\$143,998,432	13,235	\$10,880
1997	\$156,899,217	14,282	\$10,986
1998	\$174,446,501	14,359	\$12,150
1999	\$196,772, 741	14,680	\$13,404
2000	\$204,670,798	14,757	\$13,869
2001	\$195,533,986	14,700	\$13,302
2002	\$227,813,290	14,889	\$15,301
2003	\$235,516,055	15,564	\$15,132
2004	\$259,342,292	14,590	\$17,774
2005*	\$273,055,037	16,269	\$16,784

*Estimated due to one locality not reporting



Out-of-State Placements CSA Data FY 04 & FY 05

- OCS began collecting data on out-of-state placements in FY 04.
- In FY 04 - Qtr 4, 235 children were served in out-of-state residential placements.*
 - Average Age - 14 years, 11 months
- In FY 05 – Qtr 4, 229 children were served in out-of-state residential placements.**
 - Average Age - 15 years, 9 months

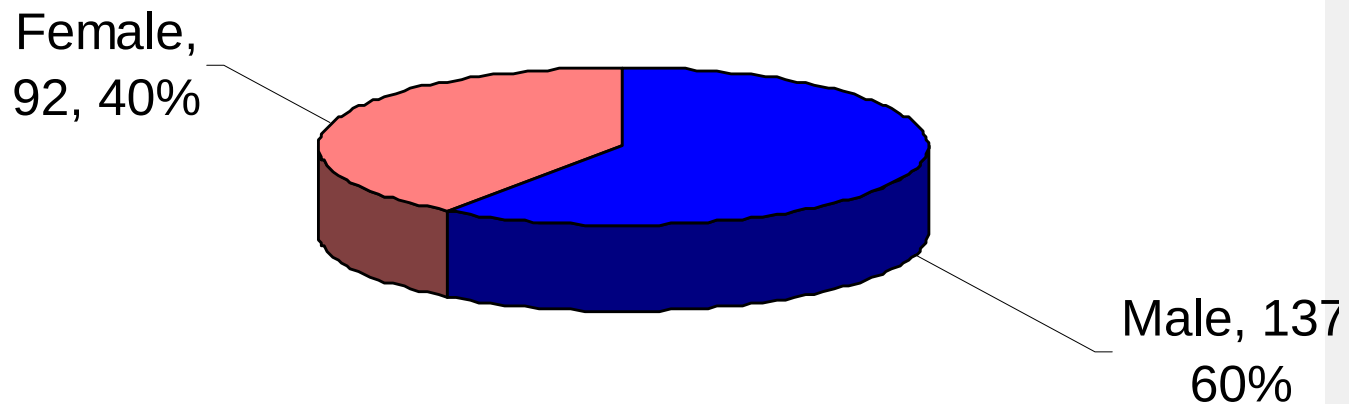
* Numbers represent duplicated cases.

** Information from one locality is not included.



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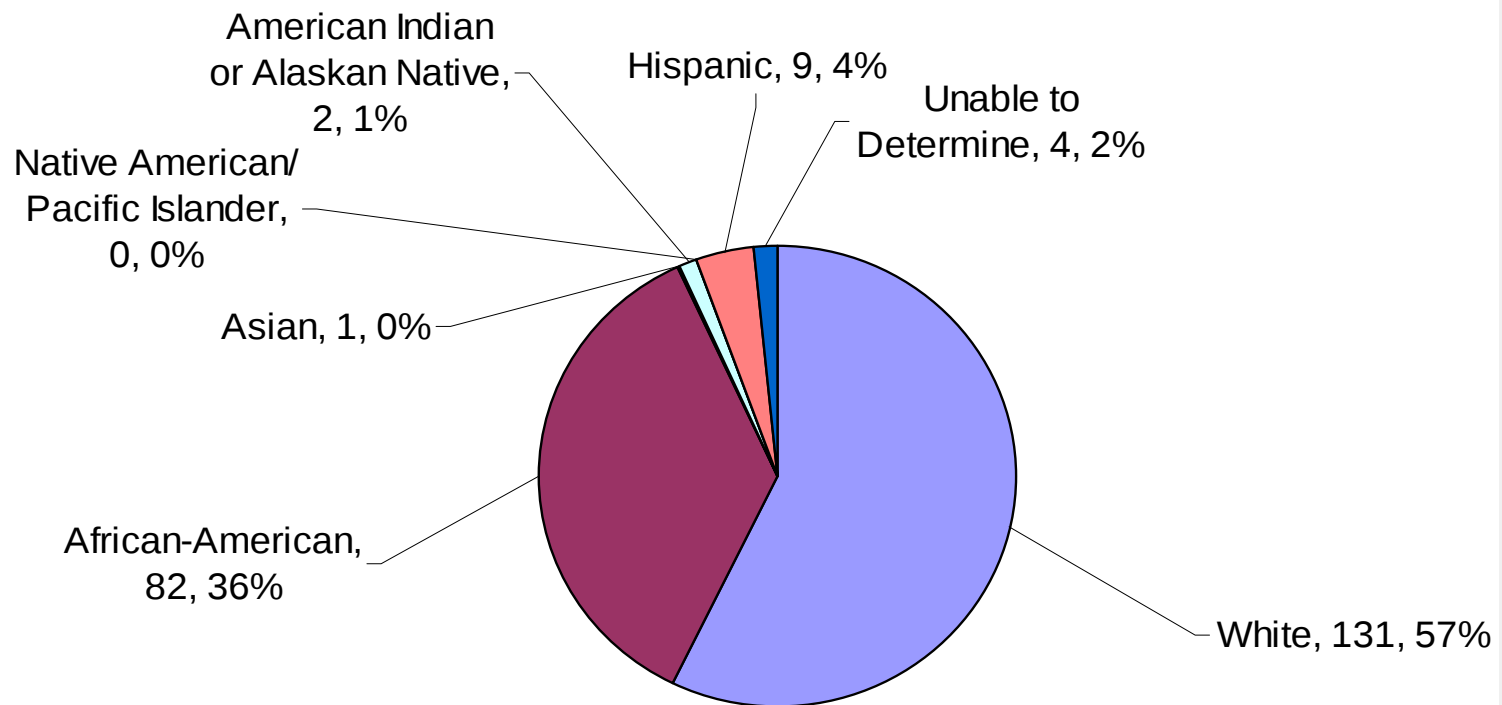
Out-of-State Placements CSA Data FY 05 – Qtr 4 Gender





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Out-of-State Placements CSA Data FY 05 – Qtr 4 Race

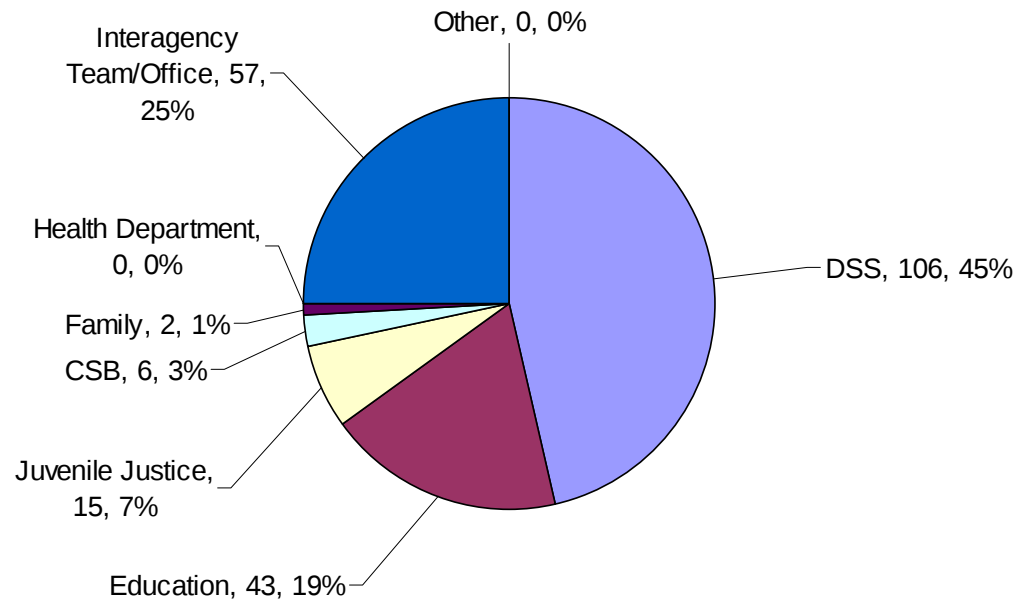


N=229 (cases are duplicated)
Information from one locality is not included.



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Out-of-State Placements CSA Data FY 05 – Qtr 4 Referral Source

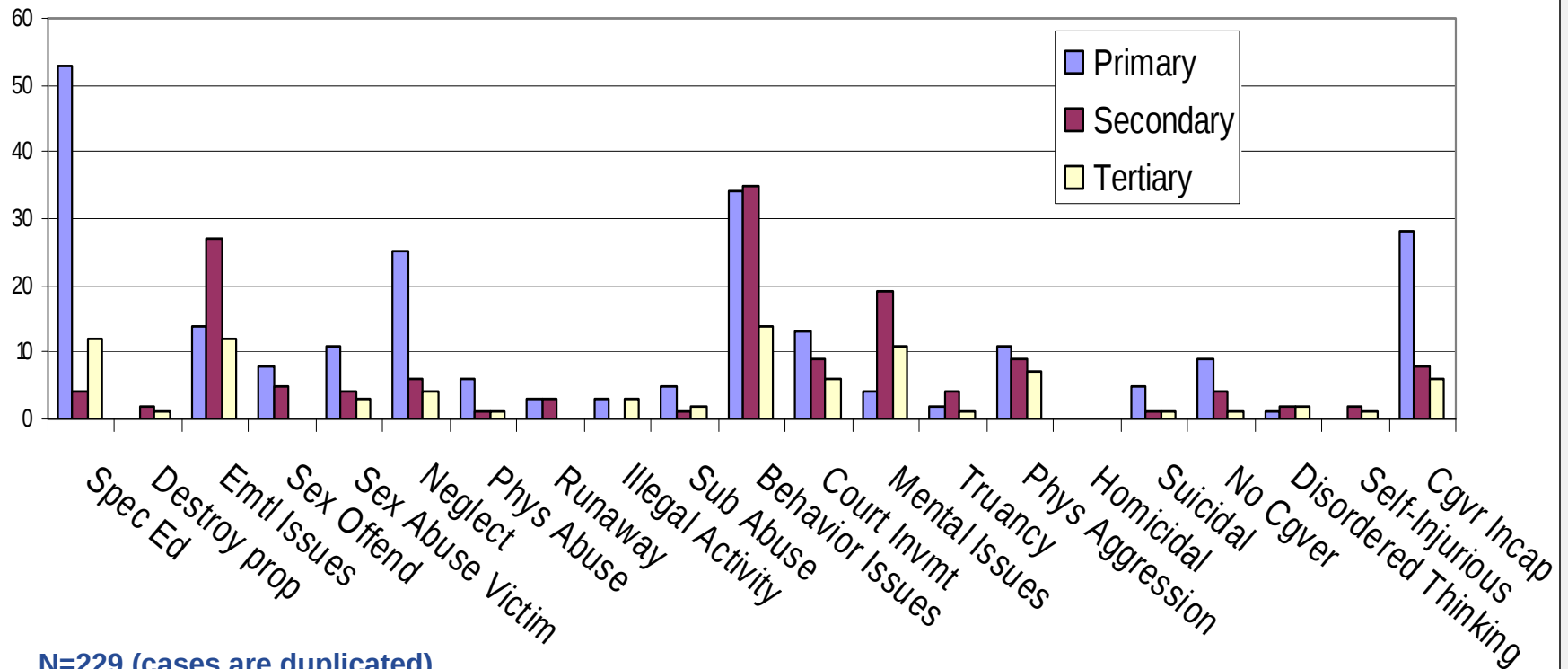


N=229 (cases are duplicated)
Information from one locality is not included.



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Out-of-State Placements CSA Data FY 05 – Qtr 4 Reasons for Service

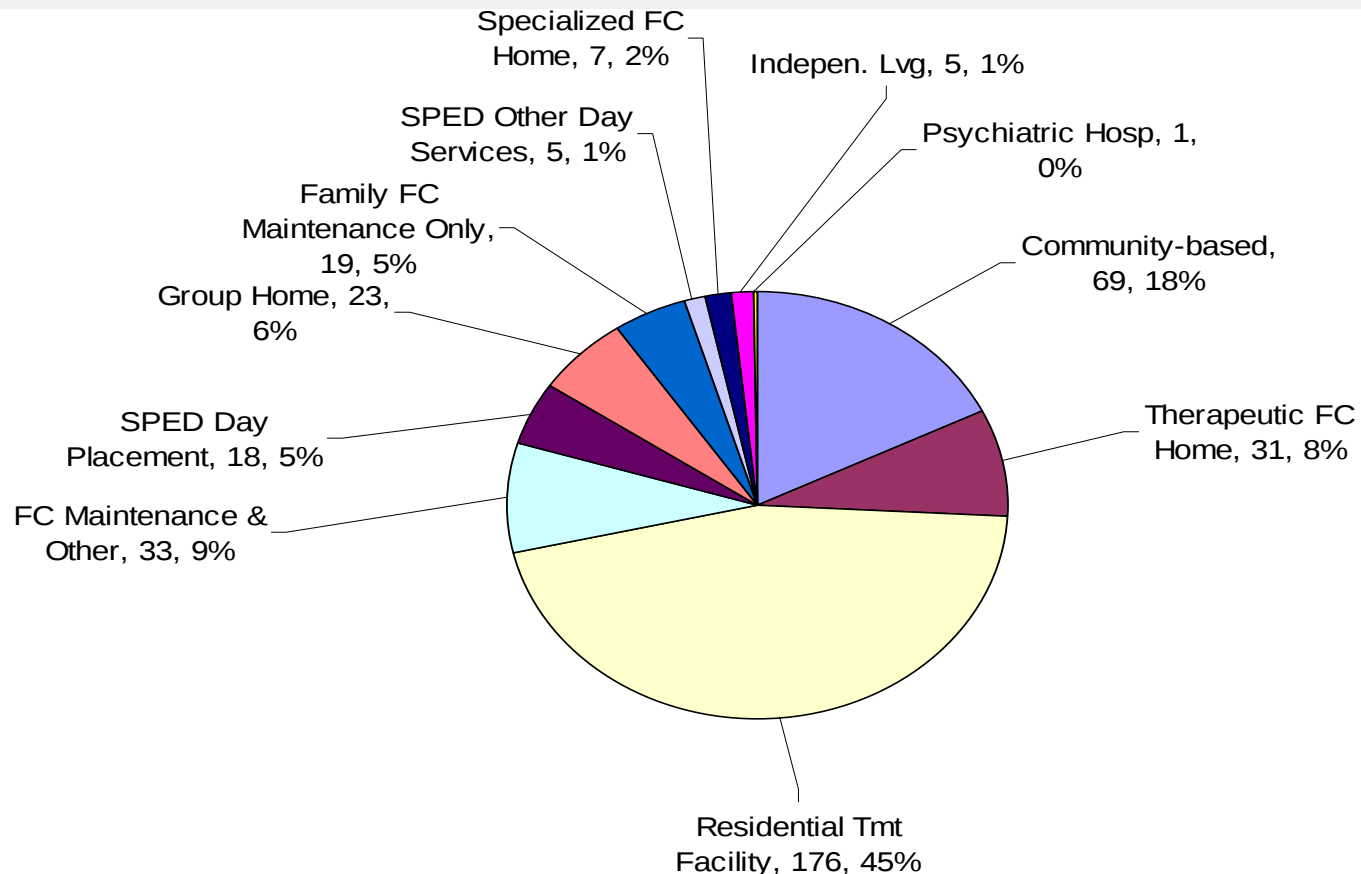


N=229 (cases are duplicated)
Information from one locality is not included.



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Out-of-State Placements CSA Data FY 05 – Qtr 4 Service/Placement Types

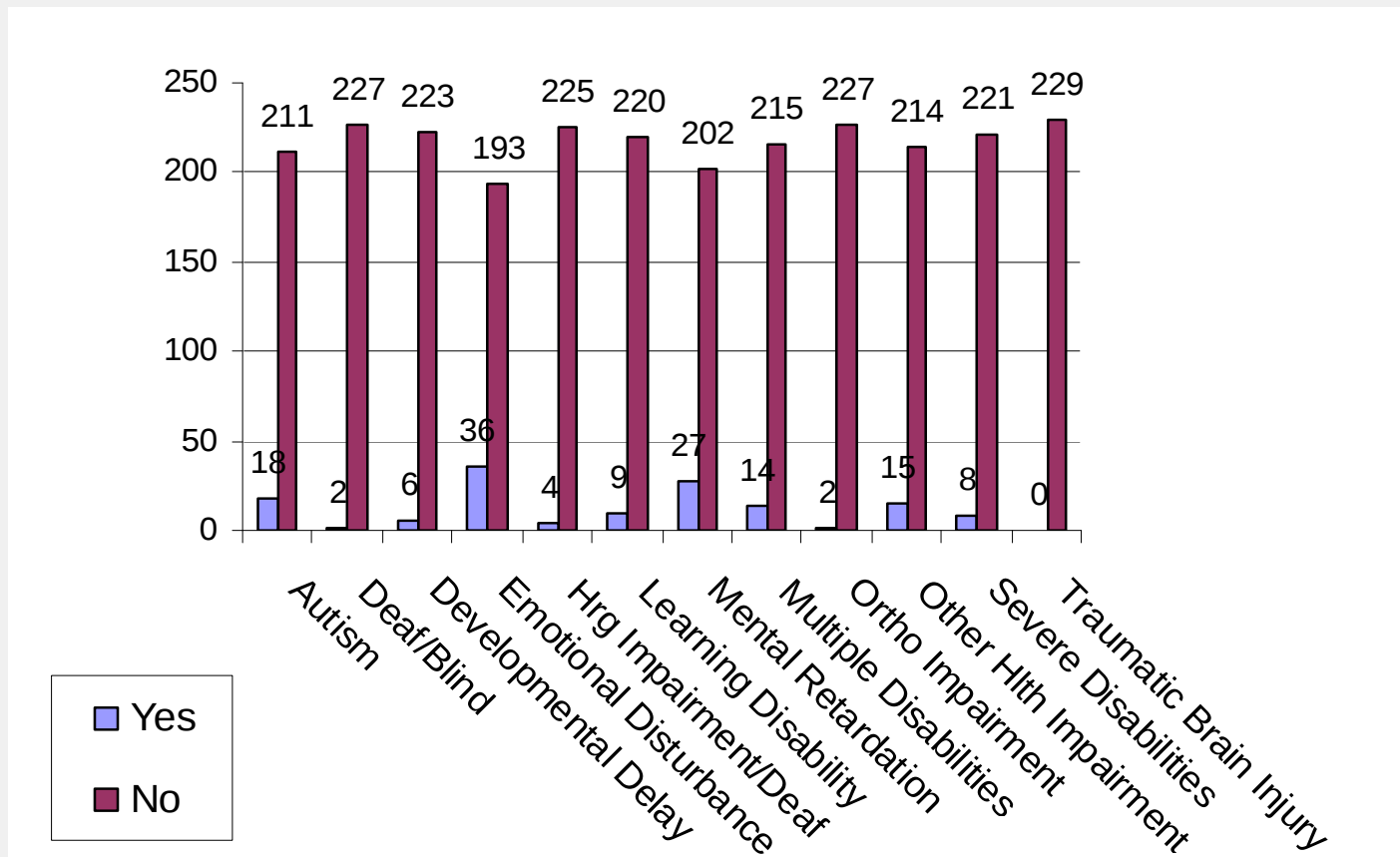


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Information from one locality is not included.



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Out-of-State Placements CSA Data FY 05 – Qtr 4 Special Ed Disability Types*

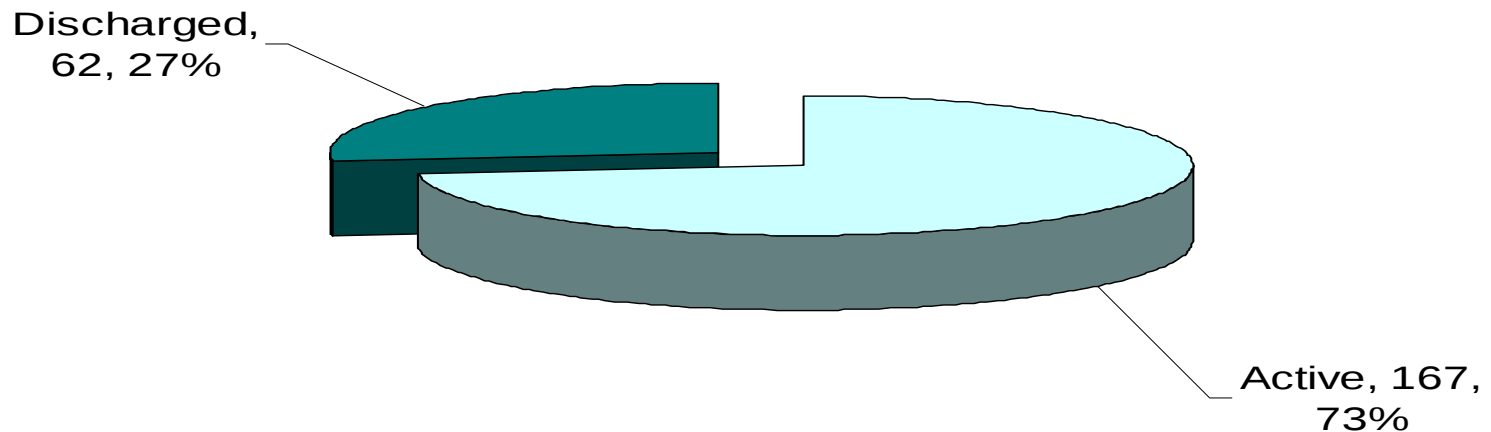


*Numbers represent duplicated cases and one locality not reporting.



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Out-of-State Placements CSA Data FY 05 – Qtr 4* Percentage of Active Cases



Average Date Opened to CSA – 5/26/01



Out-of-State Placements CSA Data FY 05 – Qtr 4* Expenditures

- FY05, Quarter 4 out-of-state placement expenditures for 130 of 131 localities.
- These expenditures represent 229 children identified as being served out-of-state at Quarter 4.
 - Actual Expenditures -- \$14,209,011
 - Average Expenditures per child -- \$62,201



Out-of-State Residential Placements CSA Data FY 04

- For purposes of this study, staff reviewed out-of-state placements for FY 04 for residential treatment facilities, group homes, therapeutic foster care, Special Education residential placements, and psychiatric hospitalization.



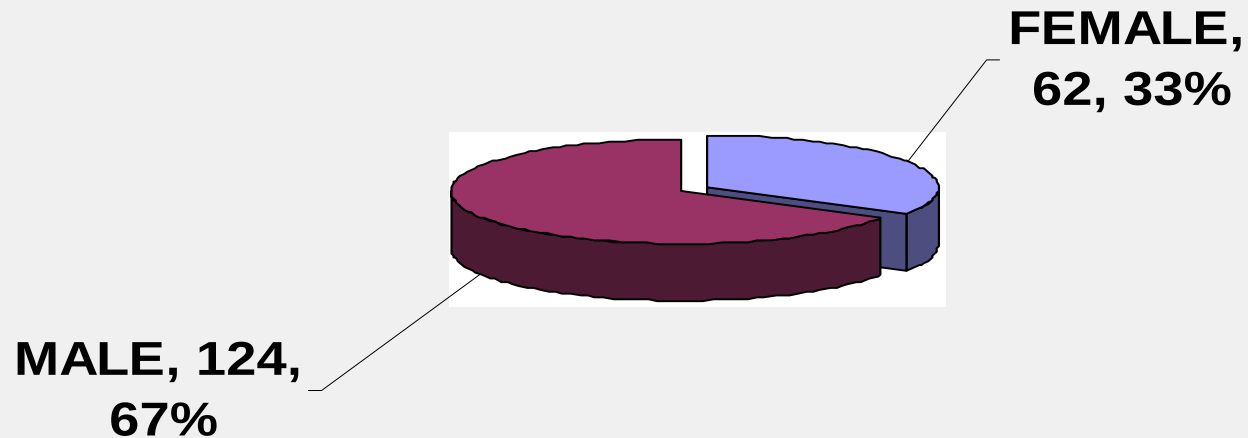
CSA Out-of-State Residential FY 04

- 186 children were served in out-of-state residential treatment facilities, group homes, therapeutic foster care, Special Education residential placements, or psychiatric hospitalization.
- 53 different localities placed a child in one of these residential facilities out-of-state.



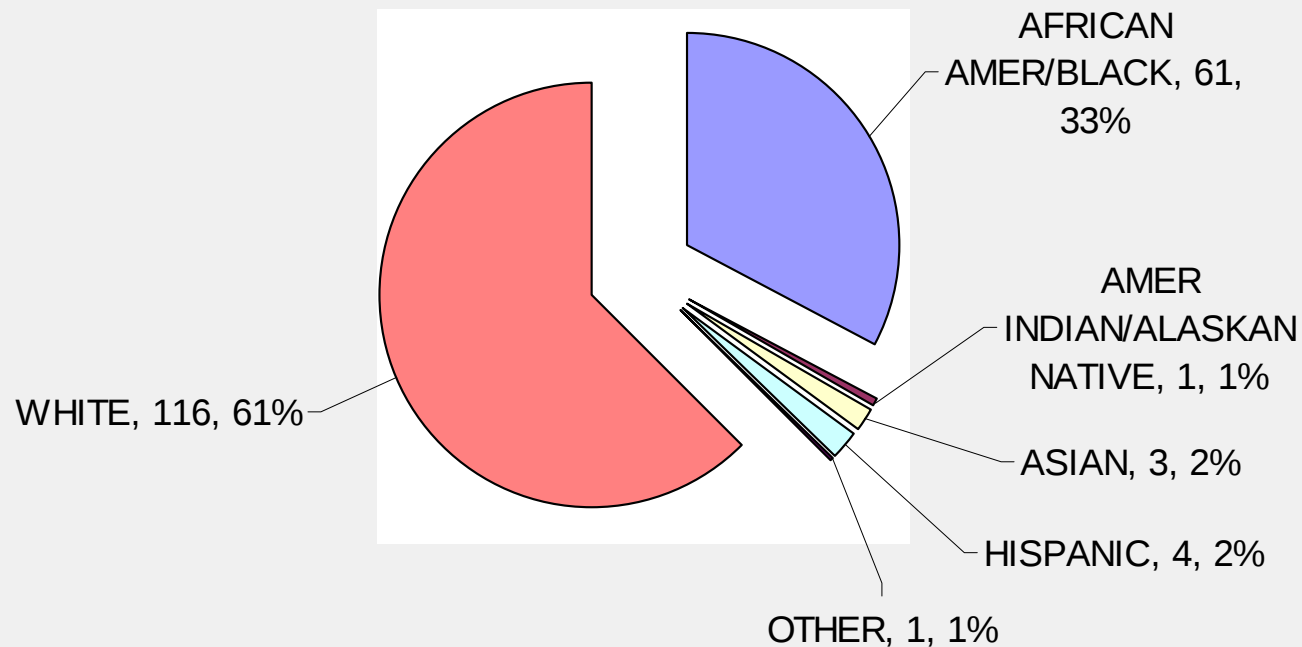
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CSA Out-of-State Residential Placements FY 04 -- Gender



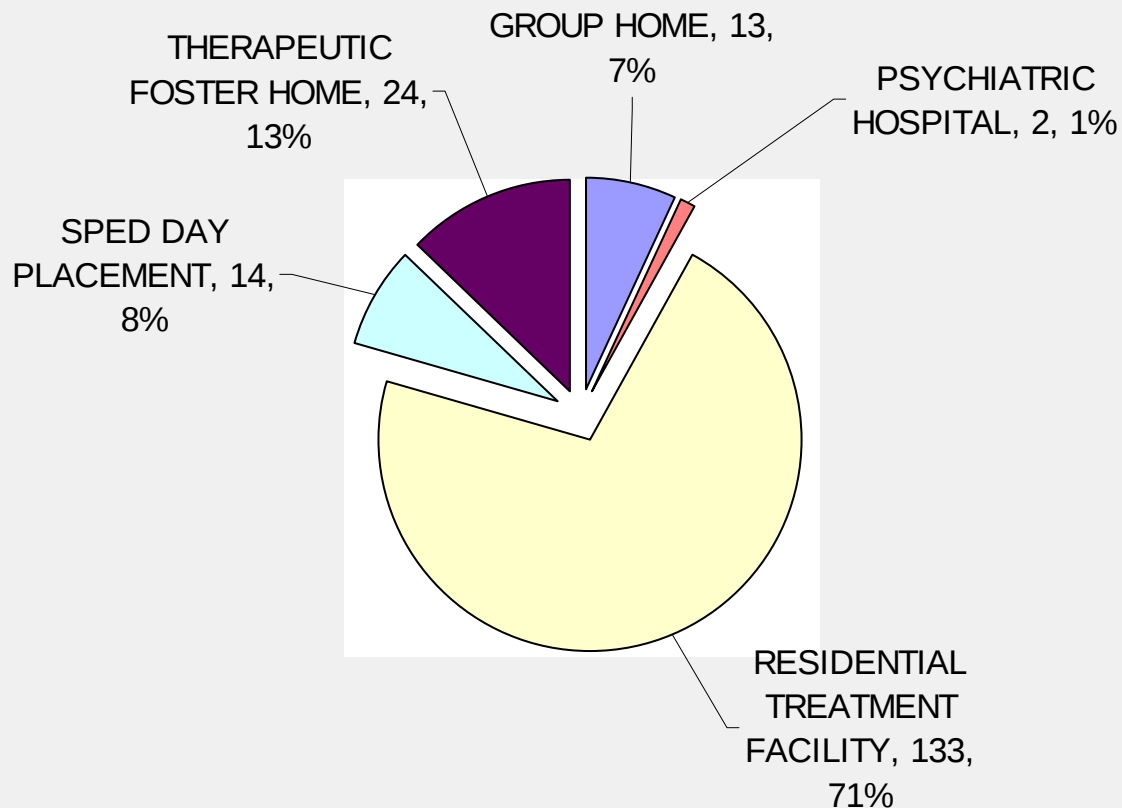


CSA Out-of-State Residential Placements FY 04 -- Race



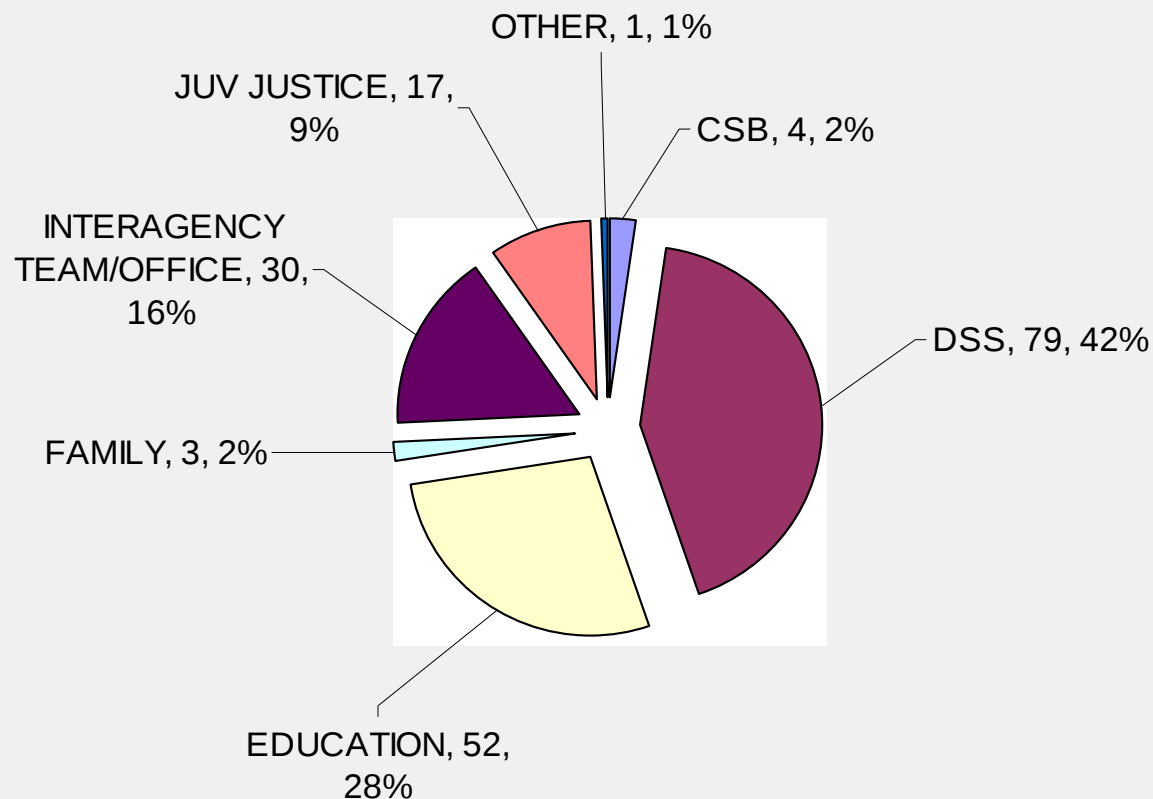


CSA Out-of-State Residential Placements FY 04 – Service Type





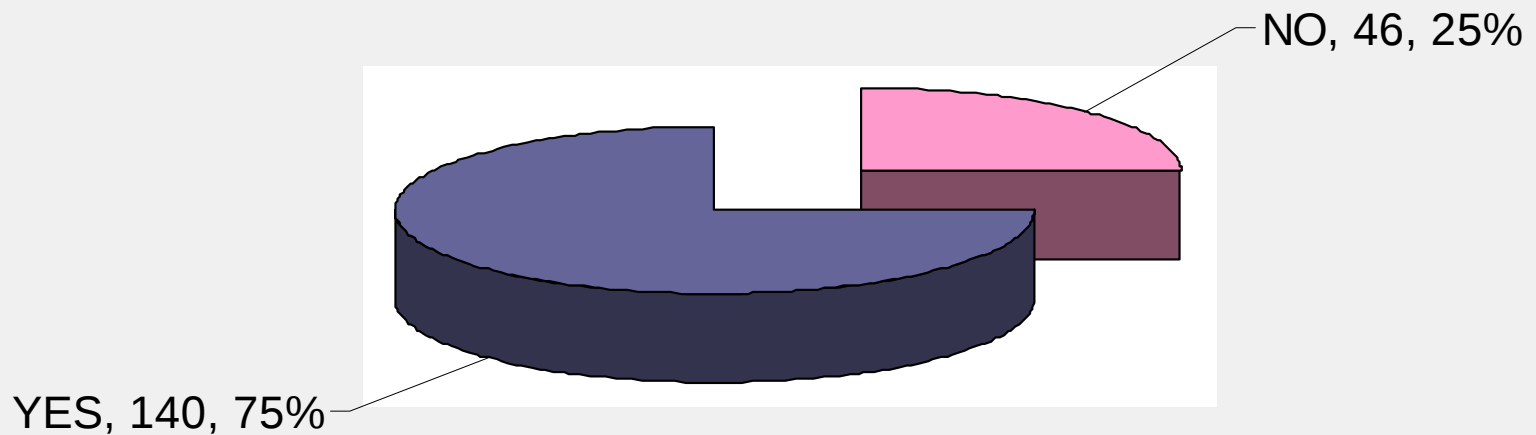
CSA Out-of-State Placements FY 04 Referral Source





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CSA Out-of-State Placements FY 04 Medicaid Enrolled

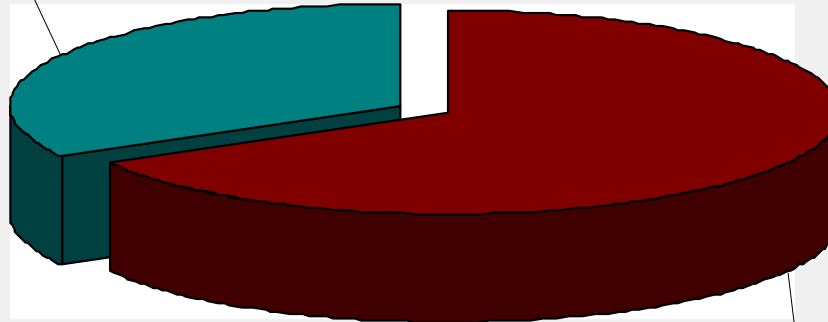




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CSA Out-of-State Placements FY 04 Medicaid Certified Facility Placements

YES, 62, 33%



NO, 124, 67%

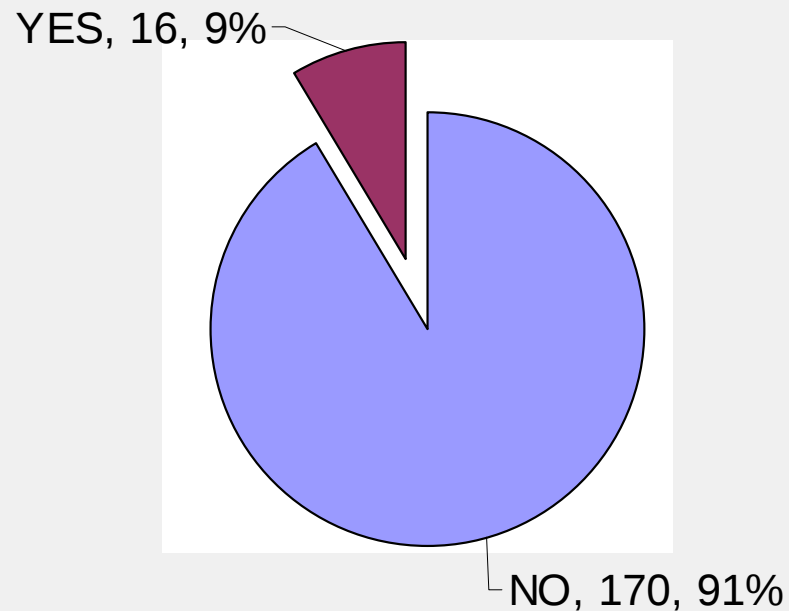


CSA Out-of-State Placements FY 04

- Total CSA expenditure for these children - \$12,942,183
- The average cost of serving these children - \$69,582
- The most expensive case - \$250,381
- 47 cases cost over \$100,000 to serve



CSA Out-of-State Placements FY 04 Assessed for Parental Co-pay*



* Exclusion for FC & IEP Cases



CSA Data on Out-of-State Placements Telephone Survey of CSA Coordinators November 2005

Issues Surrounding Out-of-State Placements

- Children being placed out-of-state have several severe co-occurring mental health and behavioral problems.
 - ❖ Bipolar Disorder
 - ❖ Severe Autism/Mental Retardation
 - ❖ Sex Offenders/Sexual Offending Behaviors
 - ❖ Conduct Disorders/Violent Behaviors/Self-Injurious
 - ❖ Substance Abuse/Polysubstance Abuse
 - ❖ ADHD
 - ❖ Post Traumatic Stress Disorders after incidents of abuse and neglect
 - ❖ Suicidal Behavior



CSA Data on Out-of-State Placements
Telephone Survey of CSA Coordinators
November 2005

Issues Surrounding Out-of-State Placements (cont.)

- These children may have accompanying physical limitations that require intense levels of care.
- A significant percentage of these children are Special Education placements.
- Others enter the system through the courts and the foster care systems as abuse and neglect cases, CHINS cases, or are alleged to have committed a delinquent act.
- These children frequently enter acute-care psychiatric facilities in Virginia via temporary detention order (TDO) in order to receive services.
- These children have multiple issues.



CSA Data on Out-of-State Placements Telephone Survey of CSA Coordinators November 2005

- Observations from localities – Service capacity issues
 - Many of these children currently being served out-of-state may have previously been served in state facilities.
 - There is a lack of Virginia facilities that serve intense-need children.
 - There is a lack of facilities serving children diagnosed with Mental Retardation.
 - There is a lack of facilities offering in-depth assessments.
 - Facilities in Virginia may refuse to treat the child due to the severity of problems and because of the child's severe behaviors.
 - There are limited facilities in the Commonwealth that employ best practices.
 - There are very few facilities for females, particularly those with severe behaviors.



CSA Data on Out-of-State Placements
Telephone Survey of CSA Coordinators
November 2005

- Observations from localities – Intense treatment needs
 - These children frequently require constant supervision.
 - Case workers exhaust all other placement options prior to sending the child out-of-state and after multiple in-state placements have proven unsuccessful.
 - If the child shows improvement, case workers attempt to bring the child back to Virginia into appropriate community-based “step-down” treatments.
 - The child’s treatment needs may escalate so as to warrant more restrictive and intense treatment settings.
 - Treatment programs in other states may be better designed to meet the service needs of these children.



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CSA Data on Out-of-State Placements Telephone Survey of CSA Coordinators November 2005

■ Observations from localities – Funding issues

- The rates for many of these out-of-state placements are competitive when compared with programs that currently exist in the Commonwealth.
- Many of Virginia's programs do not accept Medicaid – this is particularly true for facilities that serve children with more intense service needs.
- Conversely, some out-of-state facilities are becoming enrolled in Virginia Medicaid in order to treat these children.
- “Eighty-percent of local funding goes towards serving twenty-percent of the children.”
- Mandated children (foster care and special education cases) obtain services whereas non-mandated children frequently go without, based on the localities' resources.
- Noncustodial foster care, in some localities, is seen as a way to obtain services for children. Not always appropriately utilized.

CSA Data on Out-of-State Placements
Telephone Survey of CSA Coordinators
November 2005

- Observations from localities – Turf issues
 - Idea that children belong to single agency.
 - Agencies within a locality do not always know or share information about available services within or outside of the community – lack of information-sharing.



CSA Data on Out-of-State Placements
Telephone Survey of CSA Coordinators
November 2005

- There is an abundance of kids that are being served inside the Commonwealth.
- The placement itself is not expensive; instead it is the need of the child that is expensive.

Findings pertaining to DSS/ICPC

1. DSS last updated its services policy manual on ICPC in 1983.
 2. The different computer systems used by the Department and local departments of Social Services are not fully compatible.
 3. Parties placing children in out-of-state placements need consistent and comprehensive training on the Interstate Compact process.
 4. DSS cannot easily and readily obtain data on the children being served through the ICPC.
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Findings pertaining to DSS/ICPC (cont.)

5. ICPC can only access information regarding the number of requests for out-of-state placements, not actual placements.
6. Different systems among child-serving agencies in local and state governments use different child identifiers, so consistent and reliable data on children being served cannot be retrieved.
7. The ICPC office does not utilize a tracking system so that case information can be readily accessed.
8. There is confusion about which cases fall under the requirements of the Compact.

Recommendations – DSS

1. Request that DSS update its policy manual for the ICPC by June 30, 2006.
2. Request DSS, in conjunction with the Virginia Institute for Social Services Training Activities (VISSTA), develop a training manual for the ICPC progress. All local social services workers in the areas of foster care and adoption and their supervisors should be trained on the ICPC progress. This training should be ongoing and shall be included in the training of all new social services case workers in the areas of foster care and adoption.



Recommendations - DSS

3. Request DSS to monitor the placement of children served by ICPC through an automated reporting and tracking system. This will include information on children served by ICPC including those referred by other agencies. DSS, in developing this system, will determine whether this system should be linked to the OASIS system, as well as other existing data systems. DSS shall report on these activities to the Commission on Youth prior to the 2007 General Assembly Session.



Recommendations – DSS

4. Direct DSS to report annually to the General Assembly about the number of Virginia's children being served in out-of-state placements, including those being served in residential facilities. The report shall include information regarding the number of children receiving services in out-of-state residential treatment centers, the reasons these children are being placed out of the Commonwealth, and the cost.



Recommendations - DSS

5. Request that DSS review the state's ICPC system, including its management, staffing, caseloads, paper and electronic process, tracking systems, and databases to develop a more efficient, accountable ICPC system for all those who participate in the ICPC process. Further, DSS shall ensure that Virginia is in compliance with all state and federal laws and regulations. DSS shall report on these activities to the Commission on Youth prior to the 2007 General Assembly Session.



Findings Pertaining to the Office of Comprehensive Services (OCS)

1. OCS has excellent data on children being served out-of-state.
2. It would be helpful to have more information pertaining to the reason(s) for service, especially since the child's diagnosis is not accessible on OCS' automated data system.
3. Local CSA Coordinators and FAPT members are still not utilizing the service fee directory because it is not up-to-date and does not include recent licensure information.
4. Activities regarding the status of licensure for residential facilities (suspension, termination, or provisional licensing) are not included in the service fee directory.



Recommendations – OCS

5. Request the Secretary of Health and Human Resources, in conjunction with the State Executive Council (SEC), to investigate the feasibility of utilizing a unique child identifier across all child-serving agencies. Direct the SEC to coordinate with the data workgroup to evaluate the need to modify the reasons for service fields so that they are more helpful for ascertaining the reasons for service for program development. A report on these activities shall be made to the Commission on Youth prior to the 2007 General Assembly Session.



Recommendations – OCS

6. Request that the Office of Comprehensive Services to improve the information available in and revise the system through which provider information is placed in the Service Fee Directory. Request that OCS update the Directory and request that locality-specific, service-specific, and licensing information be included.
7. Request the SEC to coordinate with the data workgroup to evaluate the need to modify the reasons for service fields so that they are more helpful for ascertaining the reasons for service for program development.