## **2008 SESSION**

081847528 **HOUSE BILL NO. 503** 1 2 AMENDMENT IN THE NATURE OF A SUBSTITUTE 3 (Proposed by the House Committee on General Laws 4 on February 5, 2008) 5 (Patron Prior to Substitute—Delegate Hamilton) 6 A BILL to amend and reenact §§ 2.2-2648, 2.2-5206, and 2.2-5208 of the Code of Virginia, relating to 7 Comprehensive Services Act; intensive care coordination and service planning. 8 Be it enacted by the General Assembly of Virginia: 9 1. That §§ 2.2-2648, 2.2-5206, and 2.2-5208 of the Code of Virginia are amended and reenacted as 10 follows: § 2.2-2648. State Executive Council for Comprehensive Services for At-Risk Youth and Families; 11 membership; meetings; powers and duties. 12 A. The State Executive Council for Comprehensive Services for At-Risk Youth and Families (the 13 14 Council) is established as a supervisory council, within the meaning of § 2.2-2100, in the executive 15 branch of state government. B. The Council shall consist of one member of the House of Delegates to be appointed by the 16 17 Speaker of the House and one member of the Senate to be appointed by the Senate Committee on Rules; the Commissioners of Health, of Mental Health, Mental Retardation and Substance Abuse 18 19 Services, and of Social Services; the Superintendent of Public Instruction; the Executive Secretary of the 20 Virginia Supreme Court; the Director of the Department of Juvenile Justice; the Director of the Department of Medical Assistance Services; the chairman of the state and local advisory team established pursuant to § 2.2-5202; two local government representatives to include a member of a 21 22 23 county board of supervisors or a city council and a county administrator or city manager, to be 24 appointed by the Governor; a private provider representative from a facility that maintains membership in an association of providers for children's or family services and receives funding as authorized by the 25 Comprehensive Services Act (§ 2.2-5200 et seq.), to be appointed by the Governor, who may appoint 26 from nominees recommended by the Virginia Coalition of Private Provider Associations; and a parent 27 28 representative. The parent representative shall be appointed by the Governor for a term not to exceed 29 three years and shall not be an employee of any public or private program that serves children and 30 families. Appointments of legislative members shall be for terms coincident with their terms of office. 31 Legislative members shall not be included for the purposes of constituting a quorum. 32 C. The Council shall be chaired by the Secretary of Health and Human Resources or a designated deputy who shall be responsible for convening the council. The Council shall meet, at a minimum, 33 34 quarterly, to oversee the administration of this article and make such decisions as may be necessary to 35 carry out its purposes. Legislative members shall receive compensation as provided in § 30-19.12 and 36 nonlegislative citizen members shall receive compensation for their services as provided in §§ 2.2-2813 37 and 2.2-2825. 38 D. The Council shall have the following powers and duties: 39 1. Hire and supervise a director of the Office of Comprehensive Services for At-Risk Youth and 40 Families; 41 2. Appoint the members of the state and local advisory team in accordance with the requirements of 42 § 2.2-5201: 43 3. Provide for the establishment of interagency programmatic and fiscal policies developed by the 44 Office of Comprehensive Services for At-Risk Youth and Families, which support the purposes of the Comprehensive Services Act (§ 2.2-5200 et seq.), through the promulgation of regulations by the participating state boards or by administrative action, as appropriate; 4. Provide for a public participation process for programmatic and fiscal guidelines and dispute resolution procedures developed for administrative actions that support the purposes of the Comprehensive Services Act (§ 2.2-5200 et seq.). The public participation process shall include, at a 50 minimum, 60 days of public comment and the distribution of these guidelines and procedures to all 51 interested parties; 5. Oversee the administration of and consult with the Virginia Municipal League and the Virginia 52 53 Association of Counties about state policies governing the use, distribution and monitoring of moneys in 54 the state pool of funds and the state trust fund; 55 6. Provide for the administration of necessary functions that support the work of the Office of Comprehensive Services for At-Risk Youth and Families; 56

57 7. Review and take appropriate action on issues brought before it by the Office of Comprehensive Services for At-Risk Youth and Families, Community Policy and Management Teams (CPMTs), local 58 59 governments, providers and parents;

45 46 47 **48** 49 8. Advise the Governor and appropriate Cabinet Secretaries on proposed policy and operational
 changes that facilitate interagency service development and implementation, communication and
 cooperation;

9. Provide administrative support and fiscal incentives for the establishment and operation of local comprehensive service systems;

10. Oversee coordination of early intervention programs to promote comprehensive, coordinated
service delivery, local interagency program management, and co-location of programs and services in
communities. Early intervention programs include state programs under the administrative control of the
state executive council member agencies;

69 11. Oversee the development and implementation of a mandatory uniform assessment instrument and
70 process to be used by all localities to identify levels of risk of Comprehensive Services Act (CSA)
71 youth;

12. Oversee the development and implementation of uniform guidelines to include initial intake and
screening assessment, development and implementation of a plan of care, service monitoring and
periodic follow-up, and the formal review of the status of the youth and the family;

75 13. Oversee the development and implementation of uniform guidelines for documentation for76 CSA-funded services;

14. Review and approve a request by a CPMT to establish a collaborative, multidisciplinary team process for referral and reviews of children and families pursuant to § 2.2-5209;

79 15. Oversee the development and implementation of mandatory uniform guidelines for utilization management; each locality receiving funds for activities under the Comprehensive Services Act shall have a locally determined utilization management plan following the guidelines or use of a process
82 approved by the Council for utilization management, covering all CSA-funded services;

83 16. Oversee the development, implementation, and collection of uniform data collection standards,
84 and the development of outcome measures; including, but not limited to, expenditures, number of youth
85 served in specific CSA activities, length of stay for residents in core licensed residential facilities, and
86 proportion of youth placed in treatment settings suggested by a uniform assessment instrument for
87 CSA-funded services;

88 17. Establish and oversee the operation of an informal review and negotiation process with the 89 Director of the Office of Comprehensive Services and a formal dispute resolution procedure before the 90 State Executive Council, which include formal notice and an appeals process, should the Director or 91 Council find, upon a formal written finding, that a CPMT failed to comply with any provision of this 92 Act. "Formal notice" means the Director or Council provides a letter of notification, which 93 communicates the Director's or the Council's finding, explains the effect of the finding, and describes the 94 appeal process, to the chief administrative officer of the local government with a copy to the chair of 95 the CPMT. The dispute resolution procedure shall also include provisions for remediation by the CPMT 96 that shall include a plan of correction recommended by the Council and submitted to the CPMT. If the 97 Council denies reimbursement from the state pool of funds, the Council and the locality shall develop a 98 plan of repayment;

99 18. Deny state funding to a locality where the CPMT fails to provide services that comply with the
100 Comprehensive Services Act (§ 2.2-5200 et seq.), in accordance with subdivision 17; and

101 19. Biennially publish and disseminate to members of the General Assembly and community policy
 and management teams a state progress report on comprehensive services to children, youth and families
 and a plan for such services for the next succeeding biennium. The state plan shall:

a. Provide a fiscal profile of current and previous years' federal and state expenditures for a
 comprehensive service system for children, youth and families;

b. Incorporate information and recommendations from local comprehensive service systems withresponsibility for planning and delivering services to children, youth and families;

108 c. Identify and establish goals for comprehensive services and the estimated costs of implementing
 109 these goals, report progress toward previously identified goals and establish priorities for the coming
 110 biennium; and

111 d. Include such other information or recommendations as may be necessary and appropriate for the 112 improvement and coordinated development of the state's comprehensive services system<del>.</del>; *and* 

113 20. Oversee the development and implementation of mandatory uniform guidelines for intensive care 114 coordination services for children who are at risk of entering, or are placed in, residential care through the Comprehensive Services Act program. The guidelines shall: (i) take into account differences among 115 localities, (ii) specify children and circumstances appropriate for intensive care coordination services, 116 (iii) define intensive care coordination services, and (iv) distinguish intensive care coordination services 117 118 from the regular case management services provided within the normal scope of responsibility for the 119 child-serving agencies, including the community services board, the local school division, local social 120 services agency, court service unit, and Department of Juvenile Justice. Such guidelines shall address: (a) identifying the strengths and needs of the child and his family through conducting or reviewing 121

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122 comprehensive assessments including, but not limited to, information gathered through the mandatory 123 uniform assessment instrument; (b) identifying specific services and supports necessary to meet the 124 identified needs of the child and his family, building upon the identified strengths; (c) implementing a 125 plan for returning the youth to his home, relative's home, family-like setting, or community at the 126 earliest appropriate time that addresses his needs, including identification of public or private 127 community-based services to support the youth and his family during transition to community-based 128 care; and (d) implementing a plan for regular monitoring and utilization review of the services and 129 residential placement for the child to determine whether the services and placement continue to provide 130 the most appropriate and effective services for the child and his family.

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§ 2.2-5206. Community policy and management teams; powers and duties.

132 The community policy and management team shall manage the cooperative effort in each community 133 to better serve the needs of troubled and at-risk youths and their families and to maximize the use of 134 state and community resources. Every such team shall:

1. Develop interagency policies and procedures to govern the provision of services to children and 135 136 families in its community;

137 2. Develop interagency fiscal policies governing access to the state pool of funds by the eligible 138 populations including immediate access to funds for emergency services and shelter care;

139 3. Establish policies to assess the ability of parents or legal guardians to contribute financially to the 140 cost of services to be provided and, when not specifically prohibited by federal or state law or 141 regulation, provide for appropriate parental or legal guardian financial contribution, utilizing a standard 142 sliding fee scale based upon ability to pay;

143 4. Coordinate long-range, community-wide planning that ensures the development of resources and 144 services needed by children and families in its community including consultation on the development of a community-based system of services established under § 16.1-309.3; 145

146 5. Establish policies governing referrals and reviews of children and families to the family assessment and planning teams or a collaborative, multidisciplinary team process approved by the 147 148 Council and a process to review the teams' recommendations and requests for funding;

6. Establish quality assurance and accountability procedures for program utilization and funds 149 150 management; 151

7. Establish procedures for obtaining bids on the development of new services;

152 8. Manage funds in the interagency budget allocated to the community from the state pool of funds, 153 the trust fund, and any other source;

154 9. Authorize and monitor the expenditure of funds by each family assessment and planning team or a 155 collaborative, multidisciplinary team process approved by the Council;

156 10. Submit grant proposals that benefit its community to the state trust fund and enter into contracts 157 for the provision or operation of services upon approval of the participating governing bodies;

11. Serve as its community's liaison to the Office of Comprehensive Services for At-Risk Youth and 158 159 Families, reporting on its programmatic and fiscal operations and on its recommendations for improving 160 the service system, including consideration of realignment of geographical boundaries for providing 161 human services;

162 12. Collect and provide uniform data to the Council on, but not limited to, expenditures, number of 163 youth served in specific CSA activities, length of stay for residents in core licensed residential facilities, 164 and proportion of youth placed in treatment settings suggested by a uniform assessment instrument for 165 CSA-funded services; 166

13. Administer funds pursuant to § 16.1-309.3;

167 14. Have authority, upon approval of the participating governing bodies, to enter into a contract with 168 another community policy and management team to purchase coordination services provided that funds described as the state pool of funds under § 2.2-5211 are not used; and 169

170 15. Submit to the Department of Mental Health, Mental Retardation and Substance Abuse Services 171 information on children under the age of 14 and adolescents ages 14 through 17 for whom an admission 172 to an acute care psychiatric or residential treatment facility licensed pursuant to Article 2 (§ 37.2-403 et 173 seq.) of Chapter 4 of Title 37.2, exclusive of group homes, was sought but was unable to be obtained 174 by the reporting entities. Such information shall be gathered from the family assessment and planning 175 team or participating community agencies authorized in § 2.2-5207. Information to be submitted shall 176 include:

177 a. The child or adolescent's date of birth:

178 b. Date admission was attempted; and

179 c. Reason the patient could not be admitted into the hospital or facility; and

180 16. Establish policies for providing intensive care coordination services for children who are at risk 181 of entering, or are placed in, residential care through the Comprehensive Services Act program,

182 consistent with guidelines developed pursuant to subdivision D 20 of § 2.2-2648. 4 of 4

**183** § 2.2-5208. Family assessment and planning team; powers and duties.

184 The family assessment and planning team, in accordance with § 2.2-2648, shall assess the strengths
and needs of troubled youths and families who are approved for referral to the team and identify and
determine the complement of services required to meet these unique needs.

187 Every such team, in accordance with policies developed by the community policy and management188 team, shall:

**189** 1. Review referrals of youths and families to the team;

190 2. Provide for family participation in all aspects of assessment, planning and implementation of191 services;

192 3. Provide for the participation of foster parents in the assessment, planning and implementation of 193 services when a child has a program goal of permanent foster care or is in a long-term foster care 194 placement. The case manager shall notify the foster parents of a troubled youth of the time and place of 195 all assessment and planning meetings related to such youth. Such foster parents shall be given the 196 opportunity to speak at the meeting or submit written testimony if the foster parents are unable to 197 attend. The opinions of the foster parents shall be considered by the family assessment and planning 198 team in its deliberations;

**199** 4. Develop an individual family services plan for youths and families reviewed by the team that**200** provides for appropriate and cost-effective services;

201 5. Identify children who are at risk of entering, or are placed in, residential care through the 202 Comprehensive Services Act program who can be appropriately and effectively served in their homes, 203 relatives' homes, family-like settings, and communities. For each child entering or in residential care, in 204 accordance with the policies of the community policy and management team developed pursuant to subdivision 16 of § 2.2-5206, the family assessment and planning team or approved alternative multidisciplinary team, in collaboration with the family, shall (i) identify the strengths and needs of the 205 206 207 child and his family through conducting or reviewing comprehensive assessments, including but not limited to information gathered through the mandatory uniform assessment instrument, (ii) identify 208 209 specific services and supports necessary to meet the identified needs of the child and his family, building 210 upon the identified strengths, (iii) implement a plan for returning the youth to his home, relative's home, 211 family-like setting, or community at the earliest appropriate time that addresses his needs, including 212 identification of public or private community-based services to support the youth and his family during 213 transition to community-based care, and (iv) provide regular monitoring and utilization review of the 214 services and residential placement for the child to determine whether the services and placement 215 continue to provide the most appropriate and effective services for the child and his family;

6. Where parental or legal guardian financial contribution is not specifically prohibited by federal or
state law or regulation, or has not been ordered by the court or by the Division of Child Support
Enforcement, assess the ability of parents or legal guardians, utilizing a standard sliding fee scale, based
upon ability to pay, to contribute financially to the cost of services to be provided and provide for
appropriate financial contribution from parents or legal guardians in the individual family services plan;

221 6.7. Refer the youth and family to community agencies and resources in accordance with the 222 individual family services plan;

223 7.8. Recommend to the community policy and management team expenditures from the local224 allocation of the state pool of funds; and

8.9. Designate a person who is responsible for monitoring and reporting, as appropriate, on the progress being made in fulfilling the individual family services plan developed for each youth and family, such reports to be made to the team or the responsible local agencies.