

October 6, 2008

The first meeting of the Joint Subcommittee Studying the Comprehensive Services Program for At-Risk Youth and Families was held on October 6, 2008 in Richmond. Senator Emmett W. Hanger, Jr. was elected chairman and Delegate Philip A. Hamilton was elected Vice-chairman. Following introductory remarks by the chairman, presentations were heard.

Update on Activities of the Office of Comprehensive Services

Charlotte McNulty, Executive Director of the Harrisonburg-Rockingham Comprehensive Services Board gave the update on behalf of the Office of Comprehensive Services. Kim McGaughey, former Director of the Office of CSA, has taken another position, so Ms. McNulty is acting as interim Co-Director. Ms McNulty updated the subcommittee on implementations of the legislative actions from the 2008 General Assembly session. She first spoke about the 50% reduction in locality match rates for community based services that went into effect on July 1 of this year. The office of CSA conducted 6 regional trainings on the match rate changes in July and August, with a total of 219 attendees. There was some discussion on the service placement type definitions that were changed in conjunction with the match rate changes. Delegate Hamilton pointed out that there was frustration in some of the localities, where they felt they were being required to implement changes with definitions that weren't entirely clear. It was agreed that there should be ample training for localities to explain the new definitions.

Ms McNulty also discussed implementation of the data set changes, which were part of the regional trainings, and implementation of the Indiana assessment tool, the Child and Adolescent Needs and Strengths (CANS). Through various trainings, so far 355 users have been certified in using the tool. Finally, Ms McNulty updated the subcommittee on the work of various CSA workgroups.

Update on Children's Mental Health Services

Next, Raymond R. Ratke, Special Advisor for Children's Services, gave an update on children's mental health services. He spoke of the Council on Reform's (CORE) role in leading reform in this area. The four critical reform areas are (i) to adopt a state-wide philosophy of care and practice model, (ii) to implement a training program based on the practice model, (iii) to increase family-based placements (as opposed to congregate care), and (iv) to improve the use of data as a management tool. Currently, they are in Phase I of the reform effort, which involves working with 13 localities in these areas, before going statewide in Phase II. He gave an overview of the reform process and spoke of some success they have seen already in the reduction of congregate care in Phase I localities. He also gave a timeline for reform going forward, which includes a plan to take the reform statewide in January of 2009.

Discussion of Study Plan

Following presentations, the joint subcommittee discussed the study plan for the remainder of the 2008 interim. All agreed that it would be valuable to get input from localities at various locations. Members tentatively agreed on three future meetings in Northern Virginia, Portsmouth, and Roanoke, in order to hear from both local CSA workers and local government representatives.