

## ORANGE COUNTY CPMT MINUTES

JANUARY 28, 2014

At a regular meeting of the Orange County Community Policy and Management Team (CPMT) held on Tuesday, January 28, 2014, beginning at 12:00 p.m., in the Meeting Room of the Sedwick Building, 146 Madison Road, Orange, Virginia. Present: Barbara Ferrier, Rebecca Sitnik, Letitia Douthit, Robert Lingo, Dr. Cee Ann Davis, Vickie Baker, Joseph Nagel. Also present: Suzanne Sullivan, Office on Youth Accounting Clerk

RE: ADOPTION OF AGENDA

Amendments were made to the order of the agenda in order to complete necessary voting business due to members having to leave. Mrs. Ferrier moved, seconded by Mrs. Baker, all were in favor, motion passed.

RE: READING AND APPROVAL OF PREVIOUS MINUTES

Meeting Minutes November and December were not voted upon. They will be reviewed at the next monthly meeting.

RE: NEW BUSINESS

RE: 2014 FAPT AND CPMT APPOINTMENTS

Motion was made by Mrs. Baker to accept appointments for 2014, second by Mr. Lingo. All were in favor.

RE: ANNUAL POLICY AND PROCEDURE REVIEW

The proposed Orange County CSA Policy and Procedure Manuals were passed out to all members present in order for them to review and make necessary recommendations for additions, deletions, and/or corrections. Mrs. Douthit will email a digital copy to members not in attendance at this meeting.

RE: CLOSED SESSION

Mrs. Ferrier moved that we enter closed session pursuant to Virginia Code Section 2.1-344, seconded by Dr. Davis. At this time, cases in regards to the youth on the case agenda were reviewed and discussed.

Mrs. Ferrier then moved to exit closed session, all were in favor.

Mrs. Ferrier made a motion to approve all funding for the cases that were discussed and approved during closed session, seconded by Mr. Lingo, all were in favor.

RE: REQUEST FOR REDUCED MONTHLY CO-PAY

A discussion was held among the members present in regards to the current co-pay policy and amounts. The current request was tabled until further discussion and research can be done on the current policy and verification of the need to lower the co-pay is verified.

RE: PUBLIC APPEARANCES

None at this time

RE: REPORT OF AGENCIES

None at this time

RE: UNFINISHED BUSINESS

The membership provided information for the annual GAP Survey. Mrs. Douthit will submit the survey for the membership.

RE: COMMITTEES

None at this time

RE: INFORMATION ITEMS

Mrs. Douthit provided the members present a copy of the Orange CSA Audit Draft Report.

RE: ADJOURNMENT

There being no further business to discuss, Mrs. Ferrier moved, seconded by Mrs. Sitnik and carried, to adjourn the meeting at 1:55 PM. All were in favor.

Respectfully Submitted  
Alisha Vines – CPMT Chairman  
04/11/2014

**Community Policy and Management Team  
Policy and Procedures**

**Purpose & Duties**

Policy No.: C1

Effective: 08/28/2012

Revised:

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The purpose of the Orange County Community Policy and Management Team (“CPMT”) is to exercise all those powers and duties set forth the Virginia Comprehensive Youth Services Act for At-Risk Youth and Families (the “CSA”) (§ 2.2-5200 *et seq.* VA Code Ann.), including:

- A. Develop interagency policies and procedures to govern the provision of services to children and families in its community;
- B. Develop interagency fiscal policies governing access to the State pool of funds by the eligible populations including immediate access to funds for emergency services and shelter care;
- C. Establish policies to assess the ability of parents or legal guardians to contribute financially to the cost of services to be provided and, when not specifically prohibited by federal or State law or regulation, provide for appropriate parental or legal guardian financial contribution, utilizing a standard sliding fee scale based upon ability to pay;
- D. Coordinate long-range, community-wide planning that ensures the development of resources and 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 VA Code Ann.;
- E. 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 State Executive Council for Comprehensive Services for At-Risk Youth and Families (the “Council”) and a process to review the teams' recommendations and requests for funding;
- F. Establish quality assurance and accountability procedures for program utilization and funds management;
- G. Establish procedures for obtaining bids on the development of new services;

- H. Manage funds in the interagency budget allocated to the community from the state pool of funds, the trust fund, and any other source;
- I. Authorize and monitor the expenditure of funds by each family assessment and planning team or a collaborative, multidisciplinary team process approved by the Council;
- J. Submit grant proposals that benefit its community to the State trust fund and enter into contracts for the provision or operation of services upon approval of the participating governing bodies;
- K. Serve as its community's liaison to the Office of Comprehensive Services for At-Risk Youth and Families, reporting on its programmatic and fiscal operations and on its recommendations for improving the service system, including consideration of realignment of geographical boundaries for providing human services;
- L. Collect and provide uniform data to the Council as requested by the Office of Comprehensive Services for At-Risk Youth and Families in accordance with § 2.2-2648(D)(16) VA Code Ann.;
- M. Review and analyze data in management reports provided by the Office of Comprehensive Services for At-Risk Youth and Families in accordance with § 2.2-2648(D)(18) VA Code Ann. to help evaluate child and family outcomes and public and private provider performance in the provision of services to children and families through the Comprehensive Services Act program. Every team shall also review local and statewide data provided in the management reports on the number of children served, children placed out of state, demographics, types of services provided, duration of services, service expenditures, child and family outcomes, and performance measures. Additionally, teams shall track the utilization and performance of residential placements using data and management reports to develop and implement strategies for returning children placed outside of the Commonwealth, preventing placements, and reducing lengths of stay in residential programs for children who can appropriately and effectively be served in their home, relative's homes, family-like setting, or their community;
- N. Administer funds pursuant to § 16.1-309.3 VA Code Ann.;
- O. Have authority, upon approval of the participating governing bodies, to enter into a contract with another community policy and management team to purchase coordination services provided that funds described as the State pool of funds under § 2.2-5211 VA Code Ann. are not used;

- P. Submit to the Department of Behavioral Health and Developmental Services information on children under the age of 14 and adolescents ages 14 through 17 for whom an admission to an acute care psychiatric or residential treatment facility licensed pursuant to § 37.2-403 *et seq.* VA Code Ann., exclusive of group homes, was sought but was unable to be obtained by the reporting entities. Such information shall be gathered from the family assessment and planning team or participating community agencies authorized in § 2.2-5207 VA Code Ann. Information to be submitted shall include:
- a. The child or adolescent's date of birth;
  - b. Date admission was attempted; and
  - c. Reason the patient could not be admitted into the hospital or facility;
- Q. Establish policies for providing intensive care coordination services for children who are at risk of entering, or are placed in, residential care through the Comprehensive Services Act program, consistent with guidelines developed pursuant to § 2.2-2648(D)(22) VA Code Ann.; and
- R. To the extent permitted by the CSA, the CPMT may delegate responsibility for the above functions.

Community Policy and Management Team  
Policy and Procedures

CPMT's Philosophy & Code of Ethics

Policy No.: C2

Effective: 08/28/2012  
Revised:

A. Philosophy

The Orange County CPMT believes that all children and communities deserve to be safe. We believe in family, child, and youth-driven practices. We believe that children do best when raised in families. We believe that all children and youth need and deserve a permanent family. We believe in partnering with others to support child and family success in a system that is family focused, child-centered, and community-based. (See also Appendix C2 *Virginia Children Services Practice Model*)

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B. Code of Ethics

*Ethic - rules of behavior based on ideas about what is morally good and bad*  
(Merriam-Webster online dictionary, retrieved January 9, 2014)

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**Excellence:** Orange County CPMT is committed to the highest standard of services and makes every effort to ensure the most effective use of our resources on behalf of the children and families we serve.

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**Integrity:** Orange County CPMT brings honesty, professionalism and ethics to our work environment.

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**Accountability:** Orange County CPMT is committed to shared responsibility for our actions and for achieving community outcomes.

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**Collaboration:** Orange County CPMT values teamwork and strive to reach our goals by building partnerships with core agencies, families, and private vendors.

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**Fiscal Responsibility:** Orange County CPMT is committed to the efficient use of our fiscal and community resources to achieve better outcomes for the children and families of Orange County.

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**Transparency:** Orange County CPMT promotes open access to information, participation and decision making amongst CPMT members.

**Diversity:** Orange County CPMT embraces diversity and treats all people with fairness and compassion.

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**Community Policy and Management Team  
Policy and Procedures**

**Membership**

Policy No.: C3

Effective: 08/28/2012

Revised:

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**(A) Composition and Terms of Appointment**

The members of the CPMT are appointed by the Orange County Board of Supervisors in accordance with § 2.2-5205 VA Code Ann. Agency heads appointed to the CPMT shall serve as long as they hold their offices. The terms for the other members of the CPMT shall extend for a period of two years. Terms may be held consecutively with no limit on terms served.

**(B) Powers and Responsibilities**

Pursuant to § 2.2-5200 *et seq.* VA Code Ann., members of the CPMT are authorized to make policy and funding decisions for the CPMT. All members of the CPMT shall be considered full voting members.

**(C) Immunity**

Pursuant to § 2.2-5205 VA Code Ann., members of the CPMT are immune from any civil liability for decisions made about appropriate services for a family or the proper placement or treatment of a child or youth who comes before the CPMT, unless it is proven that such person acted with malicious intent.

**(D) Meetings, Rules and Officers**

The CPMT shall elect from its membership a Chair and a Co-Chair who shall serve annual terms. The CPMT shall have authority to establish its own rules of procedure and by-laws. Regular meetings shall be held at least monthly, at a date, time, and place determined by the CPMT.

**(E) Quorum**

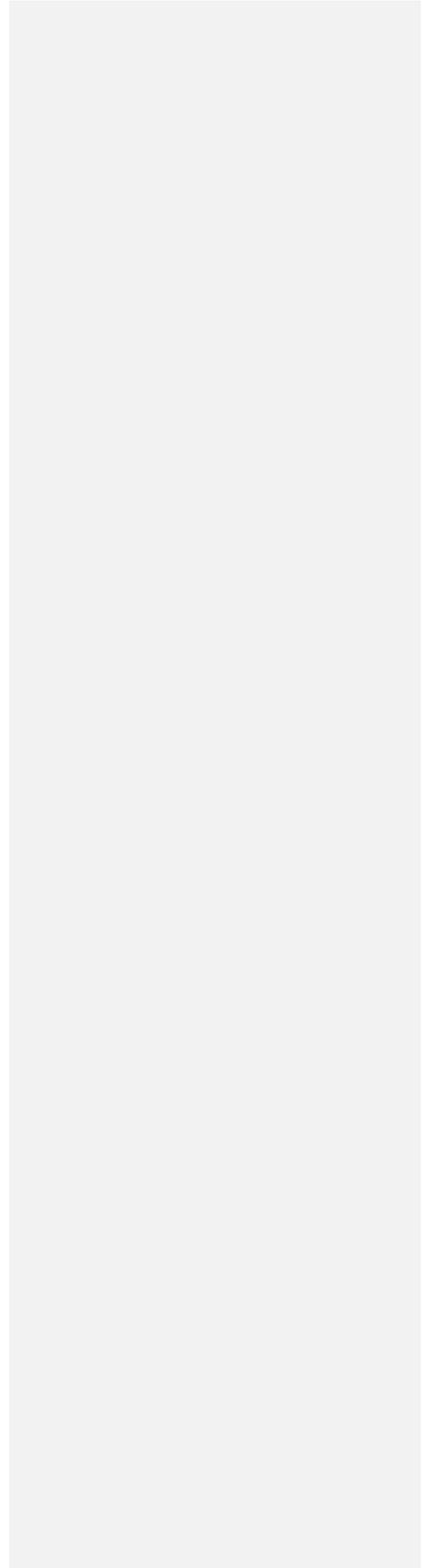
Provided that at least one member of the Executive Committee is present, 50% of the CPMT's members shall constitute a quorum for all CPMT meetings.

**(F) Attendance**

Attendance is expected at all CPMT meetings. CPMT members ***are required*** to personally attend at least 75% of the regularly scheduled meetings held within a calendar year.

**(G) Vacancies**

Vacancies on the CPMT shall be filled by appointment by the Orange County Board of Supervisors.



**Community Policy and Management Team  
Policy and Procedures**

**Eligible Population**

Policy No.: C4

Effective: 08/28/2012

Revised:

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A. Eligible Population

Pursuant to § 2.2-5212(A) VA Code Ann., in order to be eligible for funding for services through the State pool of funds, a youth, or family with a child, shall meet one or more of the criteria specified in subdivisions 1 through 4 of this subsection, and shall be determined through the use of a uniform assessment instrument and process and by policies of the CPMT to have access to these funds.

1. The child or youth has emotional or behavior problems that:
  - a. 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;
  - b. Are significantly disabling and are present in several community settings such as at home, in school or with peers; and
  - c. Require services or resources that are unavailable or inaccessible or that are beyond normal agency services or routine collaborative processes across agencies or require coordinated interventions by at least two agencies.
2. The child or youth has emotional or behavior problems, or both, and currently is in, or is at imminent risk of entering, purchased residential care. In addition, the child or youth 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 or youth requires placement for purposes of special education in approved private school educational programs.
4. The child or youth has been placed in foster care through a parental agreement between a local social services agency or public agency designated by the CPMT team and his parents or guardians, entrusted to a local social services agency by his parents or guardian or has been committed to the agency by a court of competent jurisdiction for the purposes of placement as authorized by § 63.2-900 VA Code Ann.

Pursuant to § 2.2-5212(B) VA Code Ann., for purposes of determining eligibility for the State pool of funds, "child" or "youth" means (i) a person less than 18 years of age and (ii) any individual through 21 years of age who is otherwise eligible for mandated services of the participating State agencies including special education and foster care services.

## B. Mandatory Population

Pursuant to § 2.2-5211(B), the State pool shall consist of funds that serve the target populations identified in subdivisions 1 through 5 of this subsection in the purchase of residential and nonresidential services for children. References to funding sources and current placement authority for the targeted populations of children are for the purpose of accounting for the funds in the pool. It is not intended that children be categorized by individual funding streams in order to access services. The target population shall be the following:

1. Children placed for purposes of special education in approved private school education programs, previously funded by the Department of Education through private tuition assistance;
2. Children with disabilities placed by local social services agencies or the Department of Juvenile Justice in private residential facilities or across jurisdictional lines in private, special education day schools, if the individualized education program indicates such school is the appropriate placement while living in foster homes or child-caring facilities, previously funded by the Department of Education through the Interagency Assistance Fund for Non-educational Placements of Handicapped Children;
3. Children for whom foster care services, as defined by § 63.2-905 VA Code Ann., are being provided to prevent foster care placements, and children placed through parental agreements, entrusted to local social service agencies by their parents or guardians or committed to the agencies by any court of competent jurisdiction for purposes of placement in suitable family homes, child-caring institutions, residential facilities or independent living arrangements, as authorized by § 63.2-900 VA Code Ann.; *(Please also see Appendix C4 - Final Interagency Guidelines on Foster Care Services for Specific "Children in Need of Services" Funded through the Comprehensive Services Act (CSA))*
4. Children placed by a juvenile and domestic relations district court, in accordance with the provisions of § 16.1-286 VA Code Ann., 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 VA Code Ann.;
5. Children committed to the Department of Juvenile Justice and placed by it in a private home or in a public or private facility in accordance § 66-14 VA Code Ann.

## C. Non-Mandatory Population

In addition to the mandated target population described in Section B, the non-mandated target population includes, but may not be limited to, children meeting both the criteria set out in Section A and any of the following:

1. School Truancy;
2. Mental health services transition plans for incarcerated juvenile; and
3. Child in need of Supervision.

**Community Policy and Management Team  
Policy and Procedures**

**Purchase of Service**

Policy No.: C5

Effective: 08/28/2012

Revised:

A. General Principles

1. All at-risk youth and families must go through the Family Assessment and Planning Team (FAPT) process for referral and assessment.
2. Any services to be purchased under the CSA shall be recommended by the FAPT and approved by the CPMT.
3. Services purchased by the CPMT will use one or more of the following:
  - a. Contract;
  - b. Purchase of Service (POS) module;
  - c. Individual Family Service Plan (IFSP);
  - d. A ~~verbal~~ or written agreement (Letter of Intent for Funding) process.

B. Procedures

1. Case Manager submits a request to the CSA Coordinator for review of case. (Form C5) Case Manager develops a services assessment, Child and Adolescent Needs and Strengths (CANS) assessment and a proposed service plan for FAPT consideration.
2. The FAPT reviews case materials and meets with the Case Manager and family to jointly develop an IFSP which identifies the goals and various services to be provided to the family as well as the available vendors, costs and hours of service.
3. The FAPT IFSP recommendations are forwarded by the CSA Coordinator to the CPMT for approval.

C. Foster Care – Maintenance Only

Notwithstanding the above provisions, youth in the custody of the Department of Social Services and placed in family foster care who require payments only for maintenance services including childcare shall not be referred to the FAPT, but are required to complete a CANS assessment annually. These youth will access pool funds directly.

**Community Policy and Management Team  
Policy and Procedures**

**Emergency Services**

Policy No.: C6

Effective: 08/28/2012

Revised:

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“Emergencies” are defined as those crisis situations in which the Case Manager and his/her supervisor, in consultation with the family when possible, are in agreement that the child or youth is in need of immediate placement or the family is in need of immediate services in order to prevent an out-of-home placement of the child, or youth, or in the event of a Family Engagement Meeting. Emergencies shall be addressed in accordance with the following procedures:

1. When an emergency occurs, the Case Manager must contact the CSA Coordinator, or their designee, who will initiate the emergency funding request process.
  - a. The Case Manager is responsible for providing the CSA Coordinator, via e-mail, all of the necessary information to make an informed decision.
  - b. The CSA Coordinator will contact a member of the Executive Committee, starting with the Chairman, and in the absence of the Chairman, the Vice-Chairman and then the County-appointed official to discuss the emergency circumstances.
  - c. The approval of emergency services requires at least two (2) members of the Executive Committee agreeing to requested services.
  - d. The CSA Coordinator will notify the Case Manager immediately of the Executive Committee decision.
  - e. All emergency approved cases will be placed on the next available FAPT and CPMT meeting schedule for a complete review, except that if no FAPT meeting is scheduled within 14 days of the onset of emergency services, a special meeting shall be called within 14 days to ensure that a timely FAPT review may be completed..
  
2. The CSA Coordinator shall have the authority to approve some services up to \$1,000 per week. The Case Manager shall send an e-mail explaining the situation to the CSA Coordinator for informational purposes and documentation in the case file. The types of emergency placements that can be approved by the CSA Coordinator for up to 14 days include, but are not limited to:

- a. Community-based services when the service is therapeutic in nature and specifically required to prevent the immediate possibility of an out of home placement.
  - b. Residential Treatment Facility placements that are Medicaid funded that require an immediate removal from their current placement and their behaviors warrant that level of restrictive care.
  - c. New cases requiring a placement in a shelter until an appropriate placement can be determined.
3. A FAPT review must occur within 14 days following the onset of services in an emergency.
  4. If the child/family does not have a Case Manager, the agency taking the emergency action assumes the role of lead agency and assigns a Case Manager until there is a FAPT review.

If the child/family has a Case Manager within another agency/department, the agency taking the emergency action shall notify that Case Manager of the emergency authorization as soon as possible.

**Community Policy and Management Team  
Policy and Procedures**

**Invoice Processing Procedures**

Policy No.: C7

Effective: 08/28/2012

Revised:

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All invoices for payment shall be processed according to the following procedures:

- A. The CSA Coordinator shall review and approve all invoices for payment. Invoice amounts exceeding monthly planned IFSP amounts will not be paid without prior approval of CSA Coordinator or approval of at least two (2) members of the Executive Committee.
- B. The CSA Coordinator shall processes invoices and un-encumber any funds that may have been encumbered and not expended for that month.
- C. Problems with billing shall be resolved by the CSA Coordinator and the Case Manager.
- ~~E~~.D. Monthly reconciliations shall be completed by the Office on Youth Accounting Clerk for the Orange CSA accounts.

**Community Policy and Management Team  
Policy and Procedures**

**Fee Assessment**

Policy No.: C8

Effective: 08/28/2012

Revised:

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To meet the requirements of the § 2.2-5206(3) VA Code Ann. and § 16.1-286 VA Code Ann., and to enhance the partnership with parents, the CPMT has approved procedures for the active involvement of parents and/or other legally responsible parties in the planning, delivery, and financing of services for their children. This legislation calls for parental participation in both the treatment aspects of services and financial responsibility for payment for certain services.

All families accessing **CSA POOL FUNDS** shall be assessed fees for services in accordance with the policies and procedures set forth in the Orange County CSA Parental Co-Pay Policy (Form C8).

When a child or youth is receiving services to be funded, in whole or in part, by CSA Pool Funds, the Case Manager assigned to the child or youth shall determine whether such services are eligible for coverage by private insurance, or by Medicaid. If a child or youth may be eligible for Medicaid, the Case Manager shall ensure that a screening process is conducted. The Case Manager shall subsequently ensure that any eligible child or youth has been enrolled into Medicaid.

In the event a parent or legal guardian believes the monthly co-payment is unjust or inappropriate, he/she may file a letter of appeal to the assigned Case Manager. The Case Manager will forward the letter, along with supporting documentation, to the CSA Coordinator who will then make arrangements to schedule the parent to speak before the CPMT to request the fee to be reduced or waived. The decision of the CPMT will be final and will be presented to the parent in writing.

**Co-Pay Collection Guidelines:**

The following guidelines for the Orange CSA parental co-pays shall be followed:

(A) Parental co-pay packet will be completed by the parent(s) of the children participating in the Orange County CSA program. The Case Manager assigned to the child or youth will be responsible for the accurate completion of the required financial forms (Form C8).

(B) The CSA Coordinator will be responsible for ensuring the forms are turned in prior to or during the child or youth's initial FAPT meeting. Once the completed forms are received,

the CSA Coordinator will provide a copy of the forms to the Office on Youth (OOY) Accounting Clerk for collection purposes.

(C) Upon receipt of the completed forms (Form C8), the Accounting Clerk will send a preliminary letter to the parents of the child(ren) explaining the process for payment of monthly co-pays. The Accounting Clerk will open a collection file for each family and will retain a copy of all written correspondence with the families in their respective files.

(D) Monthly summary reports will be provided to the CSA Coordinator by the Accounting Clerk as documentation of payment on each account.

(E) In the event a family is not current on their payment plan, the CSA Coordinator will contact the person responsible for the account and advise them that the co-pay is due immediately and that continued late payments could jeopardize funding for future services.

(F) In the event an account remains delinquent, the Account Clerk will begin the collection process through the Orange County Treasurer's Office. Delinquent amounts may be referred to the Individual Set-Off Debt Collection Program administered by the Virginia Department of Taxation (which could result in Virginia Individual Income Tax refunds being used to satisfy the debt to the CPMT), and the CPMT may also pursue other legal remedies available for collection of delinquent amounts.

**Community Policy and Management Team  
Policy and Procedures**

**Closed Meeting Procedures**

Policy No.: C9

Effective: 08/28/2012

Revised:

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- A. In any motion to enter closed meeting, a member must:
1. Specify the purpose(s) for the closed meeting;
  2. Reasonably identify the substance of the matters to be discussed, and; and
  3. Specify the Code section for the exemption. (Meeting minutes must include the statute permitting the closed meeting.)
- B. No closed meeting shall begin until the CPMT votes in open session to approve the motion.
- C. The CPMT may permit non-members to attend the closed meeting if such persons are deemed “necessary” or if their presence will “reasonably aid” the CPMT in its consideration of the subject matter of the closed session.
- D. Immediately following the closed meeting, the chairperson must call for a certification from all members that, to the best of their knowledge, the CPMT discussed only matters lawfully exempted from statutory open session requirements; and only public business matters identified in the motion to convene the closed meeting.
- E. If any member of the CPMT believes that there was a departure from the standards of this statement during the closed meeting that member must so state before the roll call vote, and must indicate the substance of the departure which that member believes has occurred.
- F. A vote shall be taken in open session to approve the funding amount for cases discussed in closed session.

**Community Policy and Management Team  
Policy and Procedures**

**Complaint and Appeals**

Policy No.: C10

Effective: 08/28/2012

Revised:

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The CPMT will ensure that due process for complaints and appeals are followed. In cases not before a court or subject to appeal under applicable statutes, the youth and family will have the right to appeal the decision of the FAPT to the CPMT. Appeals shall be made in writing to the Chairperson of the CPMT within 30 calendar days of the FAPT decision. The appellant shall include in the written appeal to the Chairperson all information and concerns which he or she requests that the CPMT to consider in the review of the FAPT decision, and the appellant shall not be present for such review. The CPMT shall review the FAPT decision and render a decision within 45 calendar days of receipt of the notice of appeal.

**Community Policy and Management Team  
Policy and Procedures**

**Non-Discrimination**

Policy No.: C11

Effective: 08/28/2012

Revised:

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The CPMT and the FAPT shall not discriminate on the basis of race, ethnicity, sex, age, and religion, socioeconomic status, handicapping conditions or national origin.

**Community Policy and Management Team  
Policy and Procedures**

**Confidentiality**

Policy No.: C12

Effective: 08/28/2012

Revised:

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- A. All federal, State and local laws relating to confidentiality shall be observed, including, but not limited to, § 2.2-5210 VA Code Ann.
- B. The CPMT, FAPT and other staff from agencies involved in team deliberations shall strictly abide by all applicable confidentiality requirements and shall be required to sign a confidentiality form annually. All information about specific youth and families obtained by CPMT and FAPT members in the discharge of their responsibilities shall be confidential under all applicable laws, mandates, and licensing requirements.
- C. Appropriate releases of information shall be completed and shall be the responsibility of the Case Manager.
- D. Pursuant to § 2.2-5210 VA Code Ann., proceedings held to consider the appropriate provision of services and funding for a particular child, or youth, or family or both who have been referred to the FAPT and whose case is being assessed by this team or reviewed by the CPMT shall be confidential and not open to the public, unless the child, or youth, and family who are the subjects of the proceeding request, in writing, that it be open. All information about specific children, youths and families obtained by the team members in the discharge of their responsibilities to the team shall be confidential.

**Community Policy and Management Team  
Policy and Procedures**

**Freedom of Information Act (FOIA)**

Policy No.: C13

Effective: 08/28/2012

Revised:

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CPMT meetings are held in accordance with the Virginia Freedom of Information Act (FOIA), § 2.2-3700 et seq. VA Code Ann, subject to the confidentiality provisions of § 2.2-5210 VA Code Ann. Generally, records generated by the CPMT are subject to the provisions of FOIA, however, certain records may not be subject to disclosure due to applicable FOIA exemptions. Exempted records include, but are not limited to, medical records exempted from FOIA requirements pursuant to § 2.2-3705.5 VA Code Ann.

**Community Policy and Management Team  
Policy and Procedures**

**Amendments**

Policy No.: C14

Effective: 08/28/2012

Revised:

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The terms and provisions of these policies and procedures of the CPMT may be amended at any regular meeting of the CPMT by approval of 2/3 of those present and voting; provided that notice of the proposed amendment is given at the regularly scheduled meeting of the CPMT immediately preceding the regular meeting at which the vote on the proposed amendment will take place.

**Community Policy and Management Team  
Policy and Procedures**

**Utilization Management and Review**

Policy No.: C15

Effective: November 1, 2013

Revised:

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The Orange County CSA Utilization Management and Review system is an integrated, multi-agency attempt to provide quality child-centered, family-focused, cost-effective services to at-risk youth and their families in the least restrictive environment.

The system addresses:

- Accountability
- Assessment of appropriate resources
- Utilization of community-based resources prior to CSA funded services
- Service to clients in the least restrictive environment
- Service to clients in the community, as appropriate
- Provision of service coordination and/or case management for all cases
- Development of case rates for appropriate, specialized services
- Development and monitoring appropriate outcome indicators for all cases

The desired outcomes of the Orange CSA system are:

- Improvement in child and family functioning
- Improvement in school performance
- Improve parental self-sufficiency
- Reduction in abuse and neglect
- Reduction in costs
- Reduction in out-of-home placements
- Reduction of out-of-community placements
- Reduction of recidivism

Orange County CSA strives to meet the individual needs of families served through our program. This means utilizing traditional and non-traditional programming as not all children and families respond to the same treatments in the same way. It is important to the teams that each family is involved in service planning and views the services to be both helpful and supportive.

The wrap list and descriptions that follow offers an incomplete guide to facilitate wrap planning. Individualizing services should creatively combine all types of resources for children and families, formal and in-formal, traditional and non-traditional.

### **Wrap Service List**

(The list below is taken from the CSA Utilization Management Guidelines – revised June 2009, Section 8.1)

#### **THERAPEUTIC**

Early interventions  
Counseling and Therapy Services  
Home Based Services  
Day Treatment  
Therapeutic Nursery Program  
Non-residential Emergency Services

#### **INSTRUCTIONAL**

Regular Classroom  
Resource Room  
Self-Contained Classroom  
Special and Alternative School  
Homebound  
Related Services  
Life Skills Training  
Social Skills Training

#### **HEALTH CARE**

Health Promotion  
Primary Care and Screening  
Acute Medical Care  
Chronic Medical Care  
Dental Care

#### **VOCATIONAL**

Career Education  
Vocational Assessment  
Job Survival Skills Training  
Vocational Skills Training  
Work Experiences  
Job Finding, Placement and Retention Services  
Supported Employment  
Sheltered Workshops

#### **SUSTENANCE SERVICES**

Housing  
Food  
Clothing Financial Services [e.g., food stamps, AFDC,  
Medicaid, fuel assistance, WIC, SSI]

#### **RECREATIONAL/SOCIAL**

Neighborhood Programs  
After School Programs  
Summer Camps  
Special Recreational projects  
Self-help and Support Groups  
Community Service  
Individual Skills Training

#### **FAMILY**

Respite Care  
Parent Education and Family Support  
Mediation  
Family and Parent Counseling  
Home Aid Services  
Relatives, Friends, Spiritual Affiliations  
Shelter  
Therapeutic Camp

#### **SUPERVISORY/PROTECTIVE**

Diversion  
Probation  
Intensive Supervision Services  
Outreach Detention  
Post-dispositional Detention  
Child Protective Services  
Individual Supervisory/Support Staff  
Maundering

#### **OPERATIONAL**

Assessment  
Service Planning  
Case Management  
Advocacy  
Transportation  
Legal Services

**Community Policy and Management Team  
Policy and Procedures**

**Utilization Management and Review Process**

Policy No.: C16

Effective: November 1, 2013

Revised:

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I. Utilization Management (UM) is a set of steps taken by purchasers of health and human services to manage the provision and cost of services purchased. It begins with the initial case assessment, and includes determining desired outcomes, identification of services required and level of need, recognizing mitigating circumstances, developing a service plan, finding a vendor, plan implementation, review of results and finally adjusting goals and services to address case changes. These steps are summarized as follows:

A. Collect Assessment Data

Assessment material may consist of completed IFSP or Foster Care Plan, an agency social history or comprehensive intake assessment and always includes the CANS. Whatever the instrument, the child's multiple life domains (behavior, school, family, peers, service history, etc.) are assessed.

*Responsibility:* Case Manager

B. Identify Desired Outcomes

An outcome is a measurable result within a set time frame that is specific, observable and child and family oriented. Both long and short-term outcomes need to be established and should follow logically from assessment data in Step 1.

*Responsibility:* Case Manager, Child, Family, FAPT

C. Identify Services Needed for Child and Family

Service needs are established by determining what types of activities can be used to achieve the outcomes identified in Step 2.

*Responsibility:* Case Manager, Child, Family, FAPT

D. Consider Mitigating Circumstances

Determine whether or not any unique and challenging circumstances exist which would justify selecting particular services or placements.

*Responsibility:* Case Manager, Child, Family, FAPT

E. Finalize the Service Plan

Use all of the collected data and make service placement decisions. An effective CSA service plan:

1. Is child-centered, family-focused, and community based;
2. Is aimed at the least restrictive, most appropriate environment;
3. Is what the family wants; and
4. Is necessary to achieve outcomes – begins step-down/transition planning.

The service plan (IFSP) is written by the FAPT.

*Responsibility:* Case Manager, Child, Family, FAPT

F. Negotiate Collaboratively with Vendor

Clarify with the vendor the services, needs, and expectations. Consider the situation as a partnership between purchaser, child/family and the vendor. Know what the vendor can offer and purchase the services necessary to meet the desired outcomes.

*Responsibility:* Case Manager, CSA Coordinator, CPMT

G. Implement Service Plan

Reach final agreement on a comprehensive treatment plan with the vendor.

*Responsibility:* Case Manager, CSA Coordinator

Pursuant to § 2.2-5208(5) VA Code Ann., oversight of the utilization management process is provided by the FAPT, subject to review by CPMT pursuant to § 2.2-5206(13) VA Code Ann.

II. Utilization Review (UR) is a formal assessment of the necessity, efficiency, and appropriateness of the services and treatment for an individual. It is used to determine how well a program is achieving the outcomes established for the case it serves.

The elements required in the Utilization Review process and frequencies are determined by the child's current placement in accordance with the state endorsed model. (Appendix F5)

Elements for children are:

1. Verification of date services initiated.
2. Verification of delivery of service(s).
3. Verification of quality of service(s).
4. Progress in meeting identified, specific short-term outcomes and goals in Individual Family Services Plan (IFSP) or the IEP as appropriate.
5. Progress in working toward identified, specific long-range outcomes.
6. Current medication status, as applicable.
7. Educational process.
8. Verification of school attendance.
9. Written materials outlining all modifications vendor has made to IFSP.
10. Current CANS and any other case related documents. (Ex. court orders, foster care plan, IEP, etc.)
11. Participation of family/legal guardian in client interventions and in other services included in the IFSP or the IEP, as appropriate.
12. Strategies to engage families if they are not currently participating.
13. Steps to be taken if progress toward meeting outcomes is not being made. (May include changing services and/or vendors or reconsidering outcomes.)
14. Steps to be taken if outcomes are being met.
  - a. Continue services necessary to meet outcomes and goals.
  - b. Develop plan and time line to transition the child to less restrictive setting.
15. Date for next utilization review.

\*The review must be a combination of site visits, telephone calls, and paper reviews.

\*The review worksheet (Form C16-A) will help case managers document the completion of their reviews and insure that all required elements are present and receive the required review. This worksheet must be completed quarterly.

\*CSA Coordinator will maintain a documentation inventory for all necessary paperwork in order to maintain compliance. (Form C16-B)

*Responsibility:* Case Manager, CSA Coordinator

### III. Update Service Goals

Utilization review should provide information upon which to base adjustments relative to the service plan.

Adjustments may include:

1. Continue to follow the current plan;
2. Change length of time for current service(s) and objective(s);
3. Change service objective(s);
4. Change aspects of the environment;
5. Change placement or provider;
6. Change treatment modality at same level of need.

*Responsibility:* Case Manager, Parents, FAPT, and CSA Coordinator

### IV. CPMT Review of Cases

The Orange County CPMT will review each case on their agenda during their monthly meetings and a review sheet (Form C16-C) will be completed. In the event CPMT has suggestions or questions, a copy of the review form will be returned to the case manager for them to address the comments.

*Responsibility:* CPMT and CSA Coordinator

## **Family Assessment and Planning Team Policy and Procedures**

### **Purpose and Overview**

Policy No.: F1

Effective: 08/28/2012

Revised:

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Pursuant to § 2.2-5208 VA Code Ann., the Family Assessment and Planning Team (FAPT), in accordance with § 2.2-2648 VA Code Ann., shall assess the strengths and needs of troubled children, 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.

A. Every such FAPT, in accordance with policies developed by the CPMT, shall:

1. Review referrals of children, youths and families to the team;
2. Encourage family participation in all aspects of assessment, planning, and implementation of services;
3. Encourage participation of foster parents in the assessment, planning and implementation of services. The Case Manager shall notify the foster parents of the time and place of all assessment and planning meetings. Also, foster parents shall be given the opportunity to speak at the meeting or submit written testimony if unable to attend. The opinions of the foster parents shall be considered by the FAPT in its deliberations;
4. Develop an Individual Family Services Plan (IFSP) for youth and families reviewed by the FAPT that provides for appropriate and cost-effective services; (Forms F1-Part A,B,C)
5. Identify children or youths who are at risk of entering, or are placed in, residential care through the CSA program that can be appropriately and effectively served in their homes, relatives' homes, family-like settings, and communities. For each child or youth entering or in residential care, in accordance with the policies of the CPMT developed pursuant to § 2.2-5206(17) VA Code Ann., the FAPT or approved alternative multidisciplinary team, in collaboration with the family, shall
  - (i) Identify the strengths and needs of the child, or youth, and his<sup>1</sup> family through conducting or reviewing comprehensive assessments, including but not limited to information gathered through the mandatory uniform assessment instrument,
  - (ii) Identify specific services and supports necessary to meet the identified needs of the child, or youth, and his family building upon the identified strengths,
  - (iii) Implement a plan for returning the youth to his home, relative's home, family-like setting, or community at the earliest appropriate time that addresses his

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<sup>1</sup> The term "his" is intended to include "her."

needs, including identification of public or private community-based services to support the youth and his family during transition to community-based care, and (iv) Provide regular monitoring and utilization review of the services and residential placement for the child, or youth, to determine whether the services and placement continue to provide the most appropriate and effective services for the child, or youth, and his family;

6. Where parental or legal guardian financial contribution is not specifically prohibited by federal or State law or regulation, 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; (Form C8)
7. Refer the child, or youth, and family to community agencies and resources in accordance with the Individual Family Services Plan;
8. Recommend to the CPMT expenditures from the local allocation of the State pool of funds; and
9. Designate a person who is responsible for monitoring and reporting, as appropriate, on the progress being made in fulfilling the Individual Family Service Plan developed for each child, or youth, and family, such reports to be made to the team or the responsible local agencies.

#### B. Philosophy

The Orange County FAPT believes that all children, youths and communities deserve to be safe. We believe in family, child, and youth-driven practices. We believe that children do best when raised in families. We believe that all children and youth need and deserve a permanent family. We believe in partnering with others to support child and family success in a system that is family focused, child-centered, and community-based. (See also Appendix C2 *Virginia Children Services Practice Model*)

# Family Assessment and Planning Team Policy and Procedures

## Membership

Policy No.: F2

Effective: 08/28/2012

Revised:

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### A. Composition and Terms of Appointment

Pursuant to § 2.2-5207 VA Code Ann., the Orange County FAPT shall include representatives of the following community agencies (lead agencies) who have authority to access services within their respective agencies:

1. Rappahannock - Rapidan Community Services Board established pursuant to [§ 37.2-501](#) VA Code Ann.;
2. 16<sup>th</sup> District Court Service Unit;
3. Orange County Department of Social Services (DSS); and
4. Orange County Public Schools.
5. FAPT also shall include a parent representative.
6. The FAPT may include a representative of the Department of Health at the request of the chair of the local CPMT.
6. The FAPT may include a representative of a private organization or association of providers for children's or family services and of other public agencies.
7. The CSA Coordinator shall serve as a non-voting, ex-officio member of the FAPT.

The terms for FAPT members, other than those listed as lead agencies above; extend for a period of two (2) years. Terms may be held consecutively with no limit on terms served.

### B. Minimum Guidelines and Qualifications

Agency team members shall serve at the discretion of the agency head. Any changes in FAPT members will be reported by the agency head to the CSA Coordinator at least 30 calendar days prior to the changes.

1. If employed by one of the agencies listed in the Membership Policy F2A, and appointed to the FAPT, the member must be an approved representative of that agency and shall have the authority to access services, depending on availability of resources, within their respective agencies.
2. The member must be prepared to serve as the Case Manager for cases referred by their agency, if necessary.
3. The member must agree to accept and follow the policies and procedures adopted by the CPMT.

4. Other members may be appointed to the FAPT at the discretion of the CPMT after consultation with FAPT.
5. Vacancies on FAPT will be filled by each individual agency. Agencies will notify the CSA Coordinator of any changes.

### **C. FAPT Member Characteristics**

1. All those serving on a FAPT shall demonstrate the following characteristics:
  - a. Commitment to the philosophy of the CSA;
  - b. Respect for the beliefs and traditions of individuals coming from a wide variety of cultural, religious and ethnic heritages;
  - c. Experience in coordination and provision of services across agencies;
  - d. Knowledge about services offered within their agencies and authority from their agencies to access those services;
  - e. Willingness to participate in training and skill development programs as required;
  - f. Flexibility in their work schedule in order to accommodate needs of families; and
  - g. Willingness to maintain the ethics of confidentiality.
2. All mandated members, or their approved alternates, should be in attendance at regularly scheduled or emergency meetings.

### **D. Parent Representative**

- a. Pursuant to § 2.2-5207 VA Code Ann., parent representatives who are employed by a public or private program that receives funds pursuant to this chapter or agencies represented on a FAPT may serve as parent representative provided that they do not, as a part of their employment, interact directly and on a regular basis with potentially eligible children or youths, or supervise employees who do so. Notwithstanding this provision, foster parents may serve as parent representatives.
- b. Parent representatives may not be parents of children or youths that are currently receiving CSA funded services or have received CSA funded services within the past year.
- c. Orange County residents interested in serving as the parent representative on the FAPT shall complete the Office on Youth Volunteer application and submit to the CSA Coordinator for presentation at the next FAPT meeting.
- d. The FAPT will review the parent representative application and make its recommendation to the CPMT. All applicable reference and background checks will be completed prior to the presentation of a potential candidate to CPMT.
- e. CPMT will review the potential candidate and, if deemed appropriate, the parent representative applicant will be contacted by the CSA Coordinator.

### **E. Immunity**

Pursuant to § 2.2-5207 VA Code Ann., members of the FAPT will be immune from any civil liability for decisions made about the appropriate services to a family or proper placement or treatment of a child or youth who comes before the team, unless it is proven that such a person acted with malicious intent.

## **F. Officers, Meetings and Rules**

The FAPT will have a Chairperson and Vice-Chairperson that rotate between Lead Agencies each year. (See Form F2) Meetings will be held at least once per month at dates and times determined by the FAPT.

Meetings will generally be conducted informally with decisions reached by consensus. Should consensus not be achieved, the most recent version of *Robert's Rules of Order* will be invoked. Any voting member may also request *Robert's Rules of Order* be used in conjunction of business of the FAPT.

## **G. Quorum**

Fifty-percent of the FAPT's members shall constitute a quorum for all FAPT meetings.

## **H. Attendance**

Attendance is expected at all FAPT meetings. FAPT members ***are required*** to personally attend, or send an approved designee, to at least 75% of the regularly scheduled meetings held within a calendar year.

The Chairperson of the CPMT will be notified by the FAPT Chairperson or the CSA Coordinator of failure on the part of any member or agency to attend or provide representation at regularly scheduled meetings and/or any consistent pattern of inadequate representation.

## **Family Assessment and Planning Team**

### **Policy and Procedures**

#### **Duties and Responsibilities of the CSA Coordinator**

Policy No.: F3

Effective: 08/28/2012

Revised:

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#### **A. CSA Coordinator Responsibilities**

The CSA Coordinator will receive all referrals for FAPT reviews. Prior to scheduling the case for review, the Coordinator will verify that the parent/guardian has signed the Consent to Exchange Information. The Coordinator will, as needed, work with the person referring the case to research placement/service alternatives.

1. The CSA Coordinator will schedule referrals for review by the FAPT.
2. The CSA Coordinator will provide FAPT members, in a timely manner, a schedule of cases to be reviewed. The schedule will list each case, which agency referred the case, and the approximate time the case will be heard. The name of the child or youth will be provided so that team members can research agency files for pertinent information.
3. The CSA Coordinator will verify that all persons present have signed a current Confidentiality Agreement.
4. The CSA Coordinator or FAPT Chairperson will record all FAPT recommendations on the IFSP and will confirm that all participants have signed the IFSP.
5. The CSA Coordinator will maintain pertinent records for each case, including, but not limited to:
  - a. Original referral form;
  - b. Original consent for the release of confidential information;
  - c. Copies of any evaluations, reports, etc.;
  - d. IFSP;
  - e. FAPT approval sheets itemizing monthly expenditures for each child or youth; and
  - f. Case Notes of the meeting.
6. The CSA Coordinator will attend all CPMT meetings and will provide the CPMT with:
  - a. Written information relevant to requests for funding; and
  - b. Updates on the status of cases on which funds are being expended, and on other cases as requested.

7. The CSA Coordinator will report any CPMT action on funding requests to the Case Manager within 48 hours. The CSA Coordinator is then responsible for passing this information on to the vendor.
8. The CSA Coordinator will serve as a liaison between the FAPT and CPMT and will work with the FAPT to ensure that appropriate action is taken on all CPMT decisions, concerns or requests.
9. The CSA Coordinator will schedule active cases for review, taking into consideration:
  - a. FAPT recommendations for review dates based on current assessments;
  - b. Issues or concerns identified in monthly progress reports; and
  - c. CPMT policies based on current OCS recommendations.
10. The CSA Coordinator will attend all CPMT meetings and, as secretary to CPMT, record the minutes of the cases on the agenda~~General session~~ and maintain copies of same.
11. The CSA Coordinator, in collaboration with FAPT and CPMT, will coordinate an orientation for all new FAPT and CPMT members. The CSA Coordinator will work with the CPMT and the FAPT to identify and coordinate ongoing training as necessary.
12. The CSA Coordinator shall maintain such records as are necessary to document that all expenditures from CSA Funds have been made on behalf of a specific child or youth. It is necessary to maintain the actual name of the child or youth in the office of the CSA Coordinator as an identifier so that expenditures can be traced to a specific child or youth during an audit.
13. The CSA Coordinator shall sign and authorize expenditure of funds for the purchase of services, service agreements, Intent for Funding letters, Rate Certificates and contracts and will, on a monthly basis, submit a request for reimbursement of the State-share of expenses from the State Fiscal Agent for the appropriate funds. Vendor contracts shall be updated annually by the Director of the Office on Youth and/or Government Representative. All other documents mentioned in this subsection will be forwarded to the vendor within five (5) business days of the CPMT approval by the CSA Coordinator.
14. On a monthly basis, the CSA Coordinator will generate a written report to the Orange County Board of Supervisors and CPMT detailing the year-to-date expenditures and projections.
15. Within 30 days of receipt of a written referral from a CPMT from another locality, the IFSP, and proof that the child or youth is legally residing in Orange County, the FAPT will assess the existing IFSP and adopt or amend and implement the revised plan.
16. The County Orange Treasurer shall serve as the fiscal agent for the CSA Program. Responsibility for maintaining CSA records for the County has been assigned to the CSA Coordinator.

B. General Definition of Work:

The CSA Coordinator is designated by the CPMT to: assist case managers; assist the respective chairperson in coordinating FAPT and CPMT teams; conduct and/or coordinate training, schedule meetings, prepare agendas and other documentation, and complete other duties for FAPT and CPMT as deemed necessary.

a. Typical Tasks:

1. Coordinates and facilitates CPMT and FAPT meetings.
2. Revises forms used by FAPT and CPMT as needed to be consistent with current policy and procedures;
3. Maintains an awareness of services and providers in the area;
4. Works with CPMT to develop an annual plan that outlines service gaps and recommendations for expanding programming options;
5. Keeps timely and accurate case records;
6. Performs all financial and accounting functions related to the CSA program; and
7. Other related duties.

**Family Assessment and Planning Team  
Policy and Procedures**

**Responsibilities, Duties, and Authority of FAPT Members or Designees**

Policy No.: F4

Effective: 08/28/2012

Revised:

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**A. FAPT Members Responsibilities**

1. All team members will attend and participate in the FAPT meetings. If any team member cannot attend a regularly scheduled meeting, the approved alternate from the same agency will, if possible, attend the meeting.
2. Team members will serve as a liaison to facilitate the exchange of information between the FAPT and his/her agency. This includes providing agency information to the FAPT and providing pertinent information from the FAPT to pertinent staff in his/her agency.
3. To facilitate this information exchange, team members will research agency records to determine whether their agency has any pertinent information about the case to be staffed. If pertinent information is discovered, the team member will bring the information to the meeting and share it with the team or, if unable to attend the meeting, will provide the information to their replacement or to another team member.
4. If his/her agency is responsible for following-up with any of the FAPT recommendations, the team member will be responsible for making sure someone from his/her agency is assigned to do the follow-up and is responsible for reporting back to the Case Manager and/or FAPT about the status of the recommendation.
5. All team members are responsible for keeping any information exchanged at a FAPT meeting confidential and all team members will sign a Confidentiality Agreement annually.
6. Team members will participate as representatives of their agency and will act according to, and within, the guidelines of their agency.
7. All new members will participate in an orientation which will include a review of policies, procedures and guidelines.

**B. FAPT Duties**

Pursuant to § 2.2-5208 VA Code Ann., the FAPT shall assess the strengths and needs of troubled children, youths and families who are screened and determined by the lead agency as appropriate for referral primarily using the eligibility criteria set forth in § 2.2-5212 VA Code Ann and FAPT Policy F7. The agency making the referral will be considered the lead agency. The team will identify and determine the compliment of services required to meet the unique needs of each referral.

1. Review referrals of children, youths and families referred to the team.

2. Encourage family participation in all aspects of assessment, planning and implementation of services.
3. Review the IFSP which has been submitted by the Case Manager prior to staffing and develop outcomes for the child, or youth, and family.
4. Refer the child, or youth, and family to community agencies and resources in accordance with the IFSP.
5. Recommend to the CPMT expenditures from the State pool of funds.
6. Designate the Case Manager as being responsible for monitoring and reporting on the progress being made in fulfilling the IFSP and for ensuring that reviews by the team are scheduled.
7. Designate Team member and alternate to take notes of all FAPT meetings.

### C. Extent of FAPT Authority

The FAPT will have the authority to review the service needs of children, youths and families who are referred. When integrating the development of an IFSP with the service plan of a child or youth who is receiving services, the following considerations must be applied:

#### **1. The IFSP and the IEP**

The Individualized Education Plan (IEP) is developed in accordance with the right of the child or youth to receive a Free and Appropriate Public Education, as defined by federal statute and regulation. The services identified by the IEP team must be provided to the child or youth. Local policies governing access to the CSA pool funds by the eligible populations will ensure access to funds for students whose IEP's call for services that must be funded through the CSA pool funds. While the FAPT recommendations may be incorporated in the IFSP, State and federal requirements for IEPs must still be met.

#### **2. The IFSP and the Court**

In any matter appropriately before a Court wherein the FAPT has recommended a level of treatment and services needed by the child, or youth, and family, the court may make such other disposition as is authorized or required by law, and services ordered pursuant to such disposition may qualify for funding from the pool under § 2.2-5211 VA Code Ann.

#### **3. The IFSP and the Foster Care Plan**

The Foster Care Service plan is developed in accordance with § 16.1-281 VA Code Ann. The Foster Care Service Plan provides safeguards to ensure that a permanent plan is developed for every child or youth in foster care. Local policies governing access to CSA pool funds by the eligible populations will ensure access to funds for children or youths in foster care whose Foster Care Service Plan calls for services that must be funded through the CSA pool fund. While the FAPT recommendations may be incorporated in the IFSP, State and federal requirements for service plans must still be met.

The FAPT brings to all its deliberations the philosophy of the CSA. Accordingly, the recommendations of the FAPT should be implemented. FAPT recommendations for services by specific agencies must be consistent with those agencies' mandates. FAPT procedures and recommendations cannot supersede State or federal statutes. The IFSP is legally binding to the extent the FAPT has offered specific services to the child or youth in connection with the IFSP.

The FAPT is obligated to authorize such services, to the extent feasible. If the child, youth, or parents fails to cooperate in obtaining such services, the FAPT cannot compel such cooperation.

**Family Assessment and Planning Team  
Policy and Procedures**

**Duties and Responsibilities of the Case Manager**

Policy No.: F5

Effective: 08/28/2012

Revised:

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The Case Manager will be responsible for:

- A. Monitoring the progress being made on the IFSP. This includes checking with other service providers to determine:
  1. Whether services recommended in the plan are being provided; if not, why;
  2. What measurable progress is the child, or youth, and family making toward achieving the objectives in the IFSP; if not, why;
  3. What new strengths or needs have been uncovered; and
  4. What, if any, additional services are needed.
- B. Attending all FAPT meetings at which their case is scheduled for review and providing a progress report at the meeting.
- C. Reviewing the service plan with the parents/guardians of the child or youth and reporting to the FAPT any concerns the parents/guardians may have with the plan.
- D. Contacting the CSA Coordinator to schedule a review of the case if one is not scheduled or if a change in circumstances requires an earlier review date.
- E. Assessing the family's financial situation and its ability to make co-payments in accordance with CPMT Policy C8 and the Orange County CSA Parental Co-Pay Policy (Form C8).
- F. The Case Manager with the help of the CSA Coordinator will ensure that services are secured, and that those services are consistent with the recommendation of the FAPT. This responsibility includes identifying appropriate providers, sending applications to providers, arranging interviews and, once accepted, determining the appropriate services to be delivered by the provider. The provider should be listed in the CSA Service Fee Directory located at <http://www.csa.state.va.us/sfd/provnamesearch.cfm> if appropriate.
- G. The completion of the Child and Adolescent Needs and Strengths (CANS) uniform assessment tool is required prior to an initial FAPT review with reassessments determined based on the needs of the child, or youth, and family and the intensity of services as described in the Frequency of Administration of the CANS document. Appendix F5
- H. Utilization Review (UR) procedures for children or youths must be completed in compliance with the UM/UR plan.
- I. Virginia Enhanced Maintenance Assessment Tool (VEMAT) – Ensuring completion of a timely VEMAT assessment when appropriate and immediate delivery to the CSA Coordinator

upon completion.

- J. The Case Manager and/or the CSA Coordinator shall authorize invoices for payment. The Case Manager will review the monthly invoice for services to ensure that the services received match those for which the provider is requesting payment. These invoices will be sent to the CSA Coordinator. To ensure prompt payment to the providers, the Case Manager should review the invoices and return them to the CSA Coordinator as soon as possible.
- K. Case Managers must notify CSA Coordinator when services end prior to the original ending date so that billing can be adjusted.
- L. When a child or youth has been served through CSA pool funds and the lead agency Case Manager receives notice that the family has changed their legal residence to another locality, the lead agency Case Manager will inform the CSA Coordinator within two (2) working days. The CSA Coordinator will work with the lead agency Case Manager to complete the case transfer process. When possible the Case Manager will attempt to provide notification and coordination of case services prior to the relocation to ensure a smooth transition of services.
- M. Before a child or youth is placed out-of-state, the Case Manager shall seek and gain approval of such placement from the Interstate Compact Office in the Virginia Department of Social Services.
- N. Following the FAPT meeting, the Case Manager will continue to have periodic meetings and/or consultations with the parent(s) and vendors to review progress on the IFSP.

**Family Assessment and Planning Team  
Policy and Procedures**

**Lead Agency**

Policy No.: F6

Effective: 08/28/2012

Revised:

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The Lead Agency is defined, for our purposes, as the organization that is bringing the case before FAPT and CPMT.

Duties of Lead Agency include, but are not limited to:

- A. Designates the Case Manager who is responsible for: coordinating, monitoring and reporting the progress being made in fulfilling the IFSP and following UR procedures when required.
- B. Provides families with appropriate notice of meetings and actions related to them; every effort should be made by the Case Manager to include parent(s)/guardian in the FAPT meetings. When the business of the FAPT is conducted without parental participation, a Letter of Participation form must be signed by the parent/guardian and should be included in the case file. Case Manager is responsible for insuring that parent(s)/guardian receive a copy of the FAPT report and the IFSP.
- C. Have parents sign release of information form.

## **Family Assessment and Planning Team**

### **Policy and Procedures**

#### **Eligible Populations**

Policy No.: F7

Effective: 08/28/2012

Revised:

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#### **A. Eligible Population**

Pursuant to § 2.2-5212(A) VA Code Ann., in order to be eligible for funding for services through the State pool of funds, a youth, or family with a child, shall meet one or more of the criteria specified in subdivisions 1 through 4 of this subsection, and shall be determined through the use of a uniform assessment instrument and process and by policies of the CPMT to have access to these funds.

1. The child or youth has emotional or behavior problems that:
  - a. 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;
  - b. Are significantly disabling and are present in several community settings such as at home, in school or with peers; and
  - c. Require services or resources that are unavailable or inaccessible or that are beyond normal agency services or routine collaborative processes across agencies or require coordinated interventions by at least two agencies.
2. The child or youth has emotional or behavior problems, or both, and currently is in, or is at imminent risk of entering, purchased residential care. In addition, the child or youth 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 or youth requires placement for purposes of special education in approved private school educational programs.
4. The child or youth has been placed in foster care through a parental agreement between a local social services agency or public agency designated by the CPMT team and his parents or guardians, entrusted to a local social services agency by his parents or guardian or has been committed to the agency by a court of competent jurisdiction for the purposes of placement as authorized by § 63.2-900 VA Code Ann.

Pursuant to § 2.2-5212(B) VA Code Ann., for purposes of determining eligibility for the State pool of funds, “child” or “youth” means (i) a person less than 18 years of age and (ii) any individual through 21 years of age who is otherwise eligible for mandated services of the participating State agencies including special education and foster care services.

#### **B. Mandatory Population**

Pursuant to § 2.2-5211(B), the State pool shall consist of funds that serve the target populations identified in subdivisions 1 through 5 of this subsection in the purchase of residential and nonresidential services for children. References to funding sources and current placement authority for the targeted populations of children are for the purpose of accounting for the funds in the pool. It is not intended that children be categorized by individual funding streams in order to access services. The target population shall be the following:

1. Children placed for purposes of special education in approved private school education programs, previously funded by the Department of Education through private tuition assistance;
2. Children with disabilities placed by local social services agencies or the Department of Juvenile Justice in private residential facilities or across jurisdictional lines in private, special education day schools, if the individualized education program indicates such school is the appropriate placement while living in foster homes or child-caring facilities, previously funded by the Department of Education through the Interagency Assistance Fund for Non-educational Placements of Handicapped Children;
3. Children for whom foster care services, as defined by § 63.2-905 VA Code Ann., are being provided to prevent foster care placements, and children placed through parental agreements, entrusted to local social service agencies by their parents or guardians or committed to the agencies by any court of competent jurisdiction for purposes of placement in suitable family homes, child-caring institutions, residential facilities or independent living arrangements, as authorized by § 63.2-900 VA Code Ann.; *(Please also see Appendix C4 - Final Interagency Guidelines on Foster Care Services for Specific “Children in Need of Services” Funded through the Comprehensive Services Act (CSA))*
4. Children placed by a juvenile and domestic relations district court, in accordance with the provisions of § 16.1-286 VA Code Ann., 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 VA Code Ann.;
5. Children committed to the Department of Juvenile Justice and placed by it in a private home or in a public or private facility in accordance § 66-14 VA Code Ann.

#### C. Non-Mandatory Population

In addition to the mandated target population described in Section B, the non-mandated target population includes, but may not be limited to, children meeting both the criteria set out in Section A and any of the following:

1. School Truancy;
2. Mental health services transition plans for incarcerated juvenile; and
3. Child in need of Supervision.

**Family Assessment and Planning Team  
Policy and Procedures**

**Access to CSA Pool Funds**

Policy No.: F8

Effective: 08/28/2012

Revised:

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A child or youth in need of services or anticipated in need of services requiring pool funds must be assessed by the FAPT in order to be considered eligible.

**Foster Care – Maintenance Only**

Notwithstanding the above provision, youth in the custody of the Department of Social Services and placed in family foster care who require payments only for maintenance services including childcare shall not be referred to the FAPT but are required to complete a CANS assessment annually. These children and youths will access pool funds directly. (Form F8)

## **Family Assessment and Planning Team**

### **Policy and Procedures**

#### **Accessibility to FAPT**

Policy No.: F9

Effective: 08/28/2012

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Ease in accessing a FAPT is essential in providing effective and timely service delivery to youth and families.

The CSA Coordinator serves as the designated point of contact for all referrals to the FAPT. Copies of approved forms, policies, procedures, and guidelines can be obtained from the CSA Coordinator.

FAPT meeting times and locations may be staggered to facilitate a family's access to the meetings.

In accordance with the Americans with Disabilities Act, reasonable accommodations will be provided to individuals to assure access to the FAPT. Reasonable accommodations will include, but are not limited to, facility accessibility, communication media, and adaptive or assistive devices.

#### **A. Lead Agency Referral**

1. The FAPT shall accept referrals for children and youths, defined by CSA as the "eligible population", and made by any lead agency representative.
2. Judges may request a FAPT assessment on a court case by requesting an agency involved in the case to refer the child or youth/family to the FAPT for service needs assessment and recommendations.
3. Case Managers shall contact CSA Coordinator with the case to be reviewed and they will work together to schedule a review date and time that are conducive to the family and the Case Manager's schedule.

#### **B. Parent Referral**

1. Parents interested in obtaining CSA funding for their child or youth/family should contact their lead agency Case Manager to discuss their needs.
2. Parents that do not have a lead agency Case Manager can contact the CSA Coordinator to discuss their situation. The CSA Coordinator will attempt to determine what lead agency is most appropriate to case manage the case.

**Family Assessment and Planning Team  
Policy and Procedures**

**Operational Procedures**

Policy No.: F10

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Operational procedures will facilitate timely review of a case, decision making, scheduling, response to family needs, recording information, reporting on the progress being made in fulfilling the IFSP and communicating with the CPMT. In accordance with the philosophy of the CSA, operational procedures shall make provisions for participation of the child, or youth, and family.

**A. Scheduling**

The CSA Coordinator serves as the designated point for all referrals to the FAPT. The Coordinator will:

1. Receive all referrals for case reviews. A case will not be scheduled until the Coordinator has received the Consent to Exchange Information form, Initial or Review FAPT report, parental co-payment form (where appropriate), and a copy of the CANS assessment;
2. Review all referrals to ensure that release forms and referral material is in order;
3. Make every effort to schedule a case to be reviewed within two weeks of referral with priority being given to the following:
  - a. Emergencies; and
  - b. Time frames related to court dates.
4. Ensure that the FAPT is aware of any special circumstances regarding each staffing;
5. Maintain a Case File.

**B. Meeting Procedures**

1. Meetings will be held on a day and at a time to be determined by the FAPT and CSA Coordinator. Pressing situations requiring a response prior to the next regularly scheduled meetings will be handled by contacting the CSA Coordinator.
2. The Chairperson or designee will be responsible for facilitating the meetings, and at the request of the CPMT or CSA Coordinator, they may be asked to attend CPMT meetings.
3. The Chairperson and Vice-Chairperson will serve a one year term beginning July 1 of each year. Members will rotate in turn as Chairperson.
4. The CSA Coordinator will be responsible for ensuring that all appropriate forms are completed.
5. Case Managers will be responsible for obtaining necessary release of information forms from the family, and for inviting all appropriate collateral individuals and agencies. All required paperwork shall be submitted to the CSA Coordinator the Monday prior to the

meeting. All information concerning agenda items will be provided to FAPT members at the meeting.

6. Cases will be presented before the FAPT by the Case Manager. Information presented to the FAPT will include: presenting problem and current circumstances, family situation and relevant history, prior services delivered and documentation that services are not available through other resources or that services received have had no positive results.

### **C. Inclement Weather Policy**

In the event of inclement weather, scheduled FAPT meetings are automatically canceled and rescheduled under the following circumstances:

1. In the event Orange County School are on a delay (one or two hour), the FAPT meeting will be delayed by the same amount of time.
  - a. Ex: Orange County schools are on a one-hour delay – FAPT will begin at 10:00 AM instead of 9:00 AM.
2. In the event that Orange County Schools are closed due to weather or unforeseen circumstances, FAPT will be postponed to the next day that school is in session.
  - a. Ex: FAPT is scheduled for Wednesday and school is out due to snow – the children miss school on Thursday and return on Friday, FAPT will be held that Friday.

**\*\*It is the responsibility of the Case Manager to inform families of this weather policy.**

**Family Assessment and Planning Team  
Policy and Procedures**

**Parent Participation**

Policy No.: F11

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Families are to be fully involved in planning for their children whenever possible. Except where there are extenuating circumstances, meetings should not be conducted unless at least one parent is present. When the business of FAPT is conducted without a parent present, a Parental Letter of Participation (Form F11-A) shall be noted in the FAPT Case Notes and will be included in the child's case file. The child's parent should be notified early enough to ensure that they will have an opportunity to attend the meeting. If the parent indicates a desire to attend the meeting, efforts should be made to schedule the meeting at a time and place the parent can attend.

▪ **Parent Rights**

The parent of a child staffed by the FAPT, upon request, shall be afforded an opportunity to inspect and review FAPT records addressing the assessment, planning and implementation of services (unless otherwise prohibited by law). If the parent believes that information in a record is incomplete, inaccurate or not pertinent, not timely nor necessary to be retained, the parent may request the FAPT to amend the record pursuant to § 2.2-3806(5) VA Code Ann. If the request is not granted, the parent may file a statement, which shall be made part of the record. (Form F11-B)

▪ **Parent Procedures**

1. Families are to be encouraged to participate fully in FAPT meetings. Persons with parental rights and persons with legal custody must be notified and invited to attend meetings. Others may be invited at the discretion of the parent(s) and other FAPT members. The parent(s) and/or Case Manager may invite other family members, support persons, or other persons who have information to contribute to the FAPT review. Although a child or youth may ask for services through people other than their parents (e.g., Case Manager, therapist, Guardian ad Litem), a parent with legal custody may decide whether their minor child will attend the meeting. \*A child or youth who has reached the age of majority (18 years of age) may choose whether his parents attend the meetings, provided that the IFSP does not contemplate participation by the parents.
2. Case Managers are responsible for notifying families of FAPT meetings. Documentation of the efforts made to involve family members must be included as a record of the case file.
3. In order to participate meaningfully in a team review, the family members must have adequate information about resources and services. Family members will have the opportunity to ask questions and request information from other team members about all services discussed. (Form F11-C)

4. Reasonable accommodation shall be provided pursuant to the Americans with Disabilities Act of 1990, 42 U.S.C. §12101, *et seq.* For example, reasonable accommodation will be provided for family members who are not proficient in English or who are deaf or hard of hearing. Any individual requesting reasonable accommodation must provide sufficient advance notice of the reasonable accommodation required. The lead agency that has been identified as providing case management services to the family will be responsible for arranging and paying for reasonable accommodation while following local agency policies and procedures. The FAPT meeting may be postponed if reasonable accommodation cannot be obtained.
5. A parent or legal guardian will sign the IFSP. When present, the child or youth involved will also sign. The IFSP cannot be implemented without the consenting signature of a custodial parent and/or agency or individual legally serving in the place of the parent, unless otherwise ordered by the court, upheld by the appropriate appeals process, or authorized by law, or where a child or youth over the age of 14 exercises his or her right to treatment without parental consent. The lack of a consenting signature of a parent on an IFSP will not interfere with procedures to provide immediate access to funds for emergency services.
6. The family has the right to record the FAPT meeting by electronic recording or by transcript at their own expense. The family must give the Case Manager sufficient notice of their intent to record the meeting so that the Case Manager may determine if there is a need for the FAPT to make a recording of the proceedings and to arrange for appropriate equipment.
7. FAPT meetings are anticipated to be conducted in a spirit of partnership and collaboration. There may, however, be situations where, because of significant disagreement, a parent/family member wishes to bring an attorney to the FAPT meeting. In such a case, the following procedures will apply: The County Attorney or other attorney representing DSS must also be present at the meeting. The CSA Coordinator will postpone the meeting until the County Attorney or other attorney representing DSS can be present. The attorney for the parent shall have no greater right to participate in the FAPT meeting than the parent would otherwise have. There shall be no deviation from the normal process of the FAPT meeting due to the presence of an attorney or any other invited participant. The FAPT meeting is not investigative for adversarial purposes. An attorney may not use the meeting as a contested hearing or as a forum for cross-examination.
8. Any parent or guardian dissatisfied with the action of the FAPT may, within 30 days of the FAPT decision, file a written request for review of the FAPT action by the CPMT pursuant to the procedures set forth in CPMT Policy C10. The CPMT will hold a review within 45 calendar days of the day the CPMT received the written request. The CPMT may uphold or alter the FAPT decision and the CPMT decision is final and binding. The CSA Coordinator will send a written notice to the parent/guardian advising them of the CPMT decision.
9. This review process shall not take the place of any other review process pursuant to existing State or federal law.

**Family Assessment and Planning Team  
Policy and Procedures**

**Standards for Case Assessments and Service Plans**

Policy No.: F12

Effective: 08/28/2012

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The FAPT will employ a strength-based, child centered, family focused approach to review and assess all approved referrals of children, youths and families. The review will include an assessment of:

- A. Strengths of the child, or youth, and family;
- B. Presenting problems;
- C. History of services and interventions provided to the child, or youth, and family;
- D. The child, or youth, and family's social history;
- E. The educational history of the child or youth;
- F. The child, or youth, and family's health history;
- G. The child, or youth, and family's mental health history; and
- H. Delinquency/court involvement history.

Based on the assessment, the FAPT will identify a complement of services needed to meet the unique needs of the child, or youth, and family and will develop an IFSP that provides appropriate services in the least restrictive and most cost effective setting possible, using Medicaid or any other community or local agency resources before requesting access to CSA Pool funds.

▪ **The IFSP will include the following:**

1. Short-term and long-term goals or objectives for the child, or youth, and family and time lines for accomplishing the goals or objectives.
2. A listing of specific strategies for reaching the specified goals or objectives which will include:
  - a. The type of services to be provided;
  - b. The projected duration of services;
  - c. A designation of individuals responsible for implementing the services or strategies; and
  - d. A time frame for review of the plan.
3. Designation of a Case Manager.
4. Referrals to community agencies and services, when appropriate.

▪ **Completed IFSP's**

1. IFSP's should be integrated with any other existing services plans for the child, or youth, and family whenever feasible.
2. A copy of the IFSP will be provided to the parent, Case Manager, and to all agencies and vendors indicated to provide services under the plan.
3. The CSA Coordinator will submit the IFSP with written recommendations to the CPMT regarding expenditures from the budget.
4. All IFSP's developed by the FAPT shall be reviewed per guidelines set forth in the Utilization Management and the CSA guidelines.

\*\*The IFSP for any child or youth in a Residential or Treatment out-of-home placement shall be reviewed at least every three months.

## **Family Assessment and Planning Team**

### **Policy and Procedures**

#### **Emergency Services**

Policy No.: F13

Effective: 08/28/2012

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“Emergencies” are defined as those crisis situations in which the Case Manager and his/her supervisor, in consultation with the family when possible, are in agreement that the child or youth is in need of immediate placement or the family is in need of immediate services in order to prevent an out-of-home placement of the child, or youth, or in the event of a Family Engagement Meeting. Emergencies shall be addressed in accordance with the following procedures:

1. When an emergency occurs, the Case Manager must contact the CSA Coordinator, or their designee, who will initiate the emergency funding request process.
  - a. The Case Manager is responsible for providing the CSA Coordinator, via e-mail, all of the necessary information to make an informed decision.
  - b. The CSA Coordinator will contact a member of the Executive Committee, starting with the Chairman, and in the absence of the Chairman, the Vice-Chairman and then the County-appointed official to discuss the emergency circumstances.
  - c. The approval of emergency services requires at least two (2) members of the Executive Committee agreeing to requested services.
  - d. The CSA Coordinator will notify the Case Manager immediately of the Executive Committee decision.
  - e. All emergency approved cases will be placed on the next available FAPT and CPMT meeting schedule for a complete review, except that if no FAPT meeting is scheduled within 14 days of the onset of emergency services, a special meeting shall be called within 14 days to ensure that a timely FAPT review may be completed..
2. The CSA Coordinator shall have the authority to approve some services up to \$1,000 per week. The Case Manager shall send an e-mail explaining the situation to the CSA Coordinator for informational purposes and documentation in the case file. The types of emergency placements that can be approved by the CSA Coordinator for up to 14 days (until the next scheduled FAPT meeting) include, but are not limited to:
  - a. Community-based services when the service is therapeutic in nature and specifically required to prevent the immediate possibility of an out of home placement.
  - b. Residential Treatment Facility placements that are Medicaid funded that require an immediate removal from their current placement and their behaviors warrant that level of restrictive care.

- c. New cases requiring a placement in a shelter until an appropriate placement can be determined.
3. A FAPT review must occur within 14 days following the onset of services in an emergency.
  4. If the child/family does not have a Case Manager, the agency taking the emergency action assumes the role of lead agency and assigns a Case Manager until there is a FAPT review.

If the child/family has a Case Manager within another agency/department, the agency taking the emergency action shall notify that Case Manager of the emergency authorization as soon as possible.

**Family Assessment and Planning Team  
Policy and Procedures**

**Outcome and Evaluation of Services**

Policy No.: F14

Effective: 08/28/2012

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The CPMT and/or FAPT will meet annually to review:

- A. Key performance data to include group data by step-down process regarding whether children or youths are moved to a less restrictive setting when treatment goals are met;
- B. Incorporating data from the Office of Comprehensive Services Community Services Gaps Survey; and
- C. Examining group data (by provider) to monitor quality and cost of service.

The CSA Coordinator will assist the CPMT and FAPT to accomplish this process by providing all data and reports necessary and in all requirements of the State for reporting purposes.

**Family Assessment and Planning Team  
Policy and Procedures**

**Non-Discrimination**

Policy No.: F15

Effective: 08/28/2012

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The CPMT and the FAPT shall not discriminate on the basis of race, ethnicity, sex, age, and religion, socioeconomic status, handicapping conditions or national origin.

**Family Assessment and Planning Team  
Policy and Procedures**

**Confidentiality**

Policy No.: F16

Effective: 08/28/2012

Revised:

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A. All federal, State and local laws relating to confidentiality shall be observed, including, but not limited to, § 2.2-5210 VA Code Ann.

B. The CPMT, FAPT and other staff from agencies involved in team deliberations shall strictly abide by all applicable confidentiality requirements and shall be required to sign a confidentiality form annually. All information about specific children, youths and families obtained by CPMT and FAPT members in the discharge of their responsibilities shall be confidential under all applicable laws, mandates, and licensing requirements.

C. Appropriate releases of information shall be completed and shall be the responsibility of the Case Manager.

D. Pursuant to § 2.2-5210 VA Code Ann., proceedings held to consider the appropriate provision of services and funding for a particular child, youth or family or both who have been referred to the FAPT and whose case is being assessed by this team or reviewed by the CPMT shall be confidential and not open to the public, unless the child, or youth, and family who are the subjects of the proceeding request, in writing, that it be open. All information about specific children, youths and families obtained by the team members in the discharge of their responsibilities to the team shall be confidential.

**Family Assessment and Planning Team  
Policy and Procedures**

**Freedom of Information Act (FOIA)**

Policy No.: F17

Effective: 08/28/2012

Revised:

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**A. Freedom of Information Act (FOIA)**

Records generated by local FAPT's are not subject to FOIA due to exemption pursuant to § 2.2-3073(3) VA Code Ann. FAPT meetings are conducted in accordance with the confidentiality provisions of § 2.2-5210 VA Code Ann.

**Family Assessment and Planning Team  
Policy and Procedures**

**Amendments**

Policy No.: F18

Effective: 08/28/2012

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The terms and provisions of these policies and procedures of the FAPT may be amended at any regular meeting of the FAPT by approval of 2/3 of those present and voting; provided that notice of the proposed amendment is given at a regularly scheduled meeting of the held at least 25 days prior to the the regular meeting at which the vote on the proposed amendment will take place. Once approved by FAPT and prior to taking effect, all amendments must be approved by the CPMT.