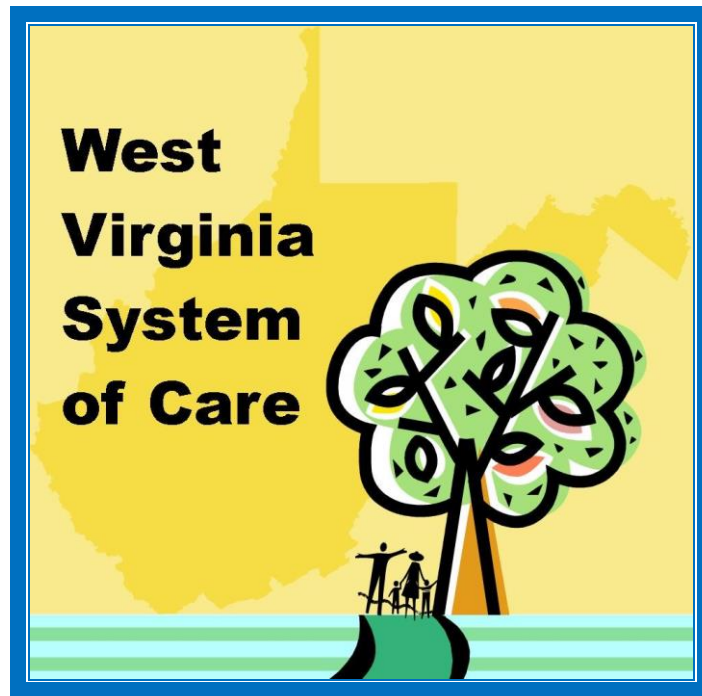


WV System of Care End of Year Report
July 1, 2016-June 30, 2017



WV System of Care is a public/private/consumer partnership dedicated to building the foundation for an effective community-based continuum of care that empowers children at risk of out-of-home care and their families.

(Youth in State's Custody who are Out-of-State in Group Residential Facilities, Psychiatric Residential Treatment Facilities, and Specialized Foster Care)

Prepared by Tammy Pearson, WV System of Care Director

Table of Contents

Introduction	Pg. 3
History, Target Population, Purpose, Data Collection	Pg. 4
Executive Summary	Pg. 5
Youth Out-of-State	Pgs. 6-10
Number of Youth Out-of-State	Pg. 6
Monthly Count	Pg. 7
Levels of Care	Pg. 8
Length of Stay	Pg. 9
Demographic Hi-Lights	Pg. 10
Review of Youth	Pgs. 11-13
Out-of-State Reviews	Pg. 11
Regional Clinical Reviews	Pgs. 12-13
Conference Calls	Pg. 13
Next Steps	Pg. 13
Regional Reports	Pgs. 14-22
Region I	Pgs. 15-16
Region II	Pgs. 17-18
Region III	Pgs. 19-20
Region IV	Pgs. 21-22

Introduction

A System of Care is a coordinated and organized framework for system reform with a set of core values and principles. It is comprehensive, individualized, and culturally competent, and includes meaningful partnerships with families and youth.

System of Care Principles

1. Family-Driven: This means families have a primary decision-making role in the care of their own children, as well as the policies and procedures governing care for all children in their community and state.

2. Youth-Guided: This means young people have the right to be empowered, educated and given a decision-making role in their own lives as well as in the policies and procedures governing care for all youth in their community and state.

3. Culturally & Linguistically Competent:

This means that children and families of diverse cultures and language proficiency have comparable access to services; that service providers learn about and demonstrate respect for family culture (including attitudes and beliefs about services, child rearing, expression of symptoms, coping strategies, and help-seeking behavior); and that diverse families achieve successful outcomes from services.

4. Array of Community-Based Services: This means there is a broad and diverse array of community-based services and supports that are consistent with the system of care approach and improve outcomes.

5. Best Practice in Service Delivery: This means creating or expanding an individualized, strength-based approach to service planning and delivery practices that have been shown to be effective and/or evidence-based.

6. Quality Assurance: This means that meaningful outcomes are measured, and play an important role in improving the quality of care to children and their families at a system level, service level and family/child level.

7. Government Accountability:

This means that all agencies that serve children, youth and families take the lead for System of Care goals and are responsible for policy, funding, system management and oversight to achieve them.

8. Interagency Collaboration:

This means that interagency structures, agreements and partnerships are maintained that coordinate funding, resources and data to build the System of Care.

History

The West Virginia Commission to Study Residential Placement of Children was created by an act of the 2005 Legislature (HB 2334; **Section 49-2-125 of WV Code**) to achieve systemic reform for youth at risk of out-of-home residential placement, and to establish an integrated system of care for these youth and their families.

As a result of this Study the Regional Clinical Review Process was developed and implemented in 2007. The Regional Clinical Review Process is a coordinated effort to provide a comprehensive, objective, clinical review of designated youth. The process has several steps to assure that the review is objective and thorough and includes a standardized assessment tool utilized in all reviews. The participants in this process include the legal guardian, a regional clinical coordinator, an individual reviewer, and a regional clinical review team.

In 2014, the State decided that all youth who were out-of-state should be reviewed in order to determine gaps in services, barriers to serving youth in state, and system issues. At the same time this review allowed for the team to make recommendations to assist the youth in returning to the state. Another review was completed in 2015 and it was determined that the process should be completed on a regular basis. This was being implemented late 2015 and early 2016.

Target Population

Youth who are in the legal custody of DHHR, ages 0 to 21 years old.

AND who are placed out-of-state or are at risk of being placed out-of-state for residential treatment or specialized foster care. Youth in parental custody are also reviewed as appropriate.

Purpose

This report along with other available data will be used to guide decisions and develop strategies to better serve WV youth.

Data Collection

Data is collected in a number of ways.

Youth Who are Out-of-State, Returning or are At Risk of Going Out-of-State

For youth currently in the custody of the West Virginia Department of Health and Human Resources (WVDHHR), who are currently Out-of-State or who are returning, information is collected from the WVDHHR Families and Children Tracking System (FACTS). FACTS is West Virginia's Statewide Automated Child Welfare Information System (SACWIS).

The information in this report was collected from the FACTS reports. The numbers are as accurate as possible. If any inaccuracy occurs it is due to one or more of the following issues related to data collection:

- Some youth do not appear on FACTS report in the month they actually enter an out-of-state facility or return to WV. Sometimes the data is delayed a month.
- Some youth, if discharged at the end of the month, do not appear on the FACTS report.
- Some youth move from one out-of-state placement to another. This move can be from one facility to another or can be to a different program within the same facility.

Information in regards to youth who are staffed at the Out-of-State Review and Regional Clinical Review Teams is sent to the WV System of Care Director.

Executive Summary

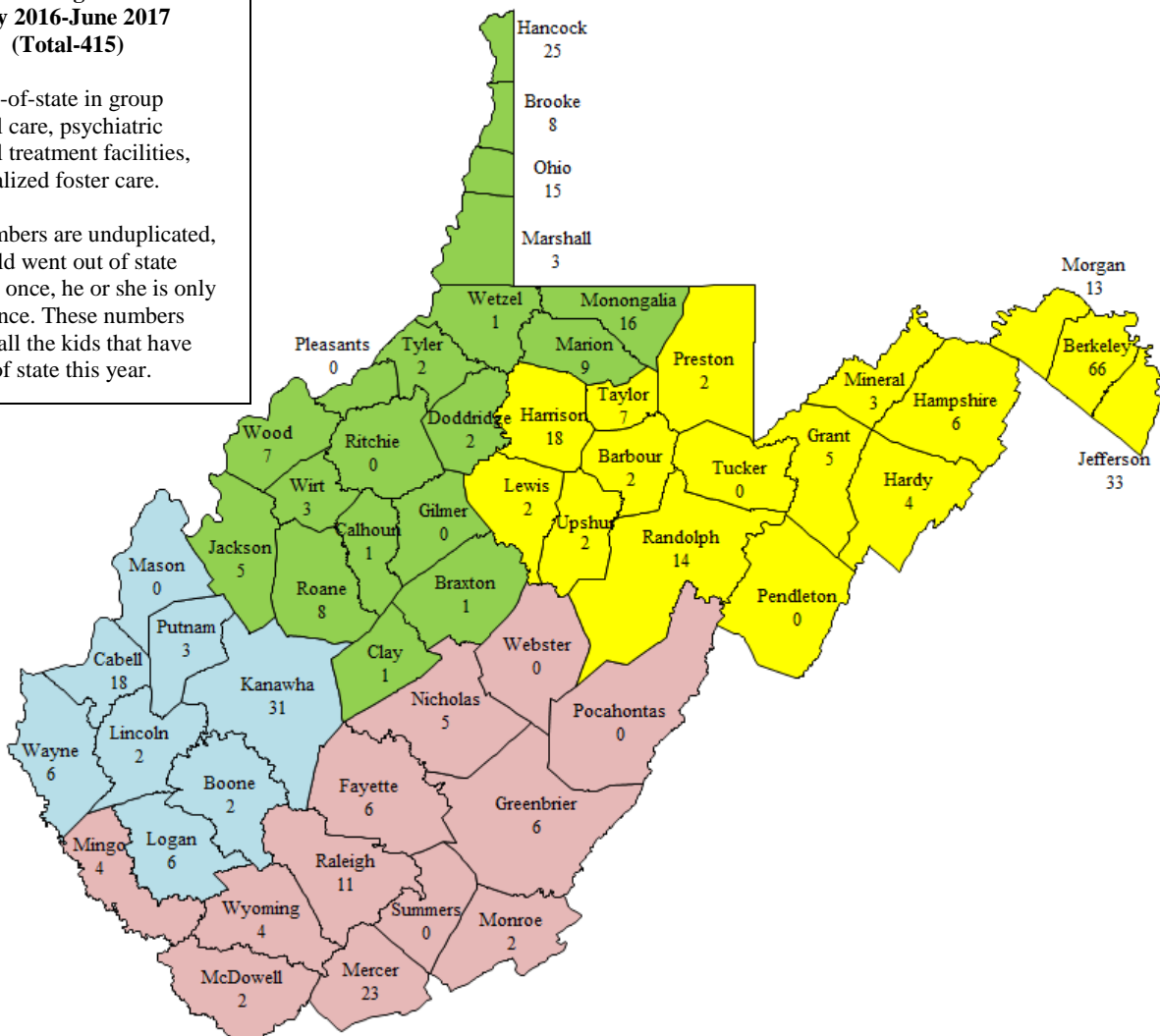
- WV System of Care is a public/private/consumer partnership dedicated to building the foundation for an effective community-based continuum of care that empowers children at risk of out-of-home care and their families.
- This year the WV System of Care has worked through three processes to identify gaps in services, barriers to serving youth in the state and returning youth to the state. These processes have also prevented youth from being placed in out-of-state services, identified services appropriate for the youth and assisted in the planning for youth returning to the state. These three processes are the Regional Clinical Review Team, the Out-of-State Review Team and Conference Calls.
- The number of youth being placed out-of-state only slightly decreased this year. This year (July 2016-June 2017) 415 youth were placed out of state. Last year 425 youth were placed out-of-state.
- Overall there was a 22 % decrease from 2012-2013 to 2016-2017.
- The demographics of youth being placed out-of-state remains the same. There are more males than females and the youth are usually age 15-17 years old but there has been an increase in the number of youth between the ages of 11-14 in the last year.
- Out of the 415 youth out-of-state last year, 75% were reviewed through an out-of-state review team.
- There were 58 youth reviewed through a Regional Clinical Review that were at risk of being placed out-of-state last year. Recommendations were followed 86% of the time.
- Through these teams some of the gaps in services identified include limited services for youth with an intellectual disability including Autism; younger youth age 10 or younger requiring intense treatment; and a lack of treatment foster care.

Youth Out-of-State

Out of State Youth All Regions July 2016-June 2017 (Total-415)

Youth out-of-state in group residential care, psychiatric residential treatment facilities, and specialized foster care.

These numbers are unduplicated, so if a child went out of state more than once, he or she is only counted once. These numbers represent all the kids that have been out of state this year.



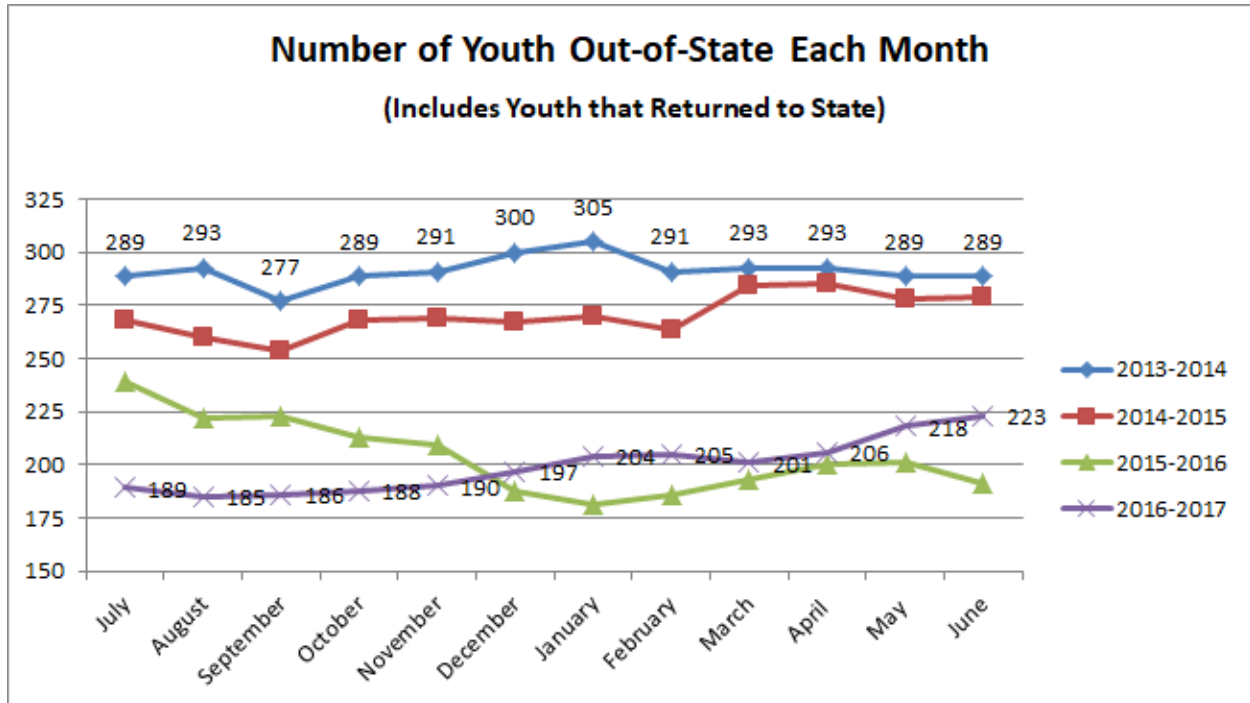
Annual Numbers

	2016-2017	2015-2016	2014-2015	2013-2014	2012-2013
State Total	415	425	477	492	533

Monthly Count

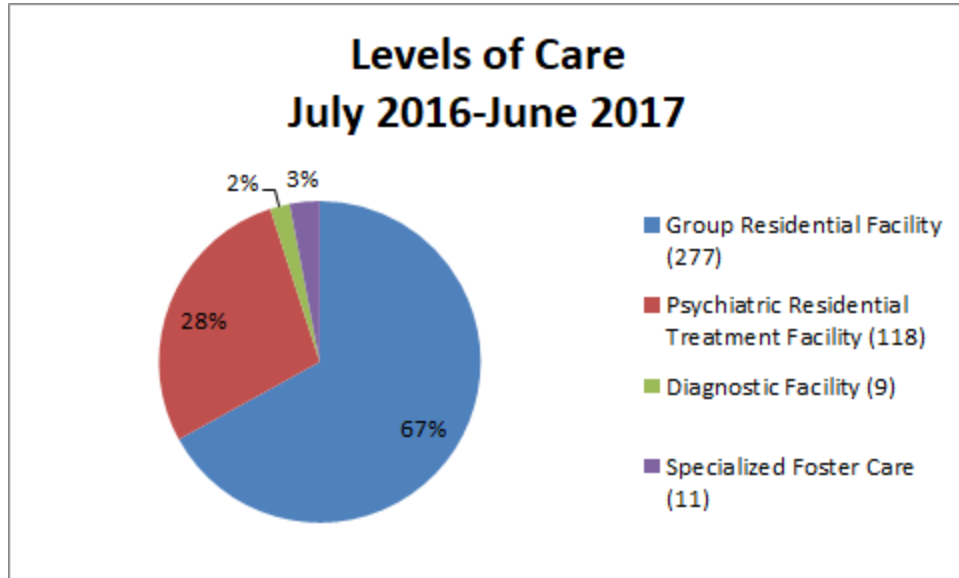
The overall average number of youth out-of-state each month has decreased. The average number of youth out-of-state each month was:

- **2016-2017=199**
- 2015-2016=204
- 2014-2015=270
- 2013-2014=292



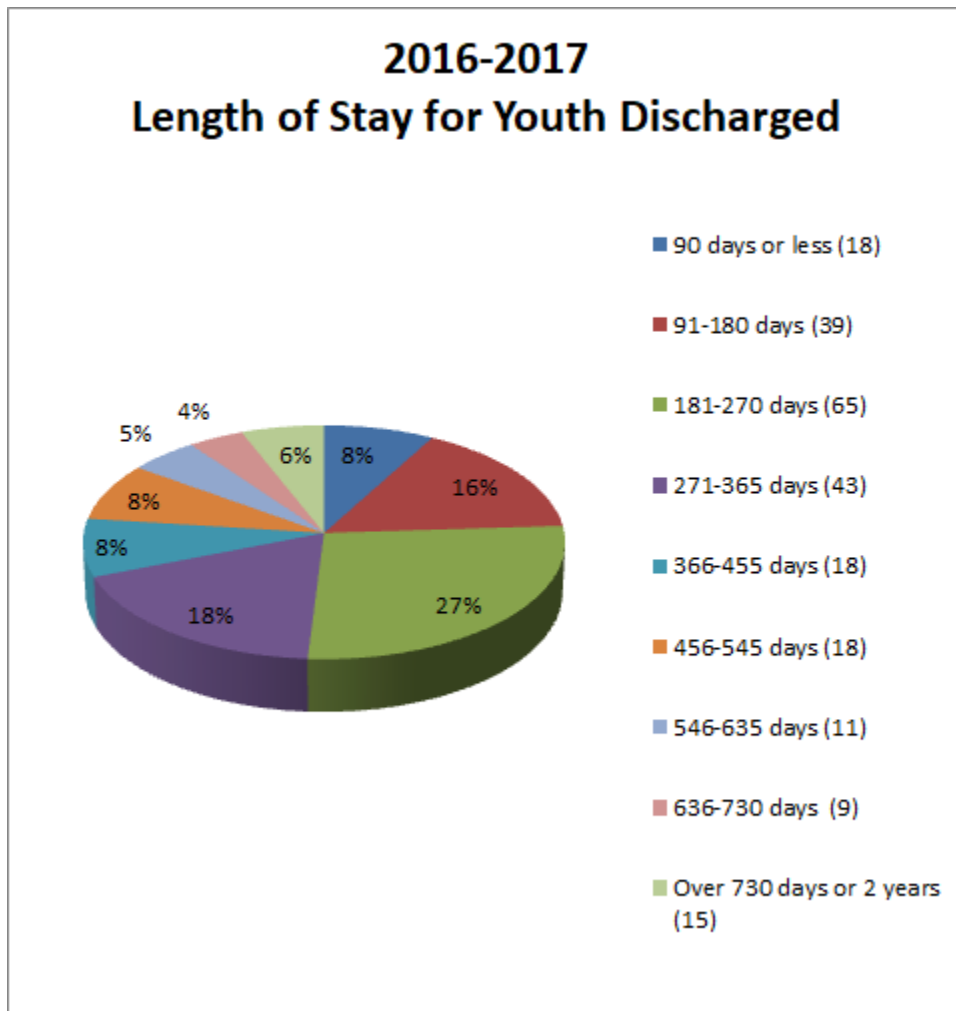
Levels of Care

The information below indicates the current level of care of the youth or the level at discharge. The majority (67%) of youth were in a group residential facility. Last year 61% of the youth were placed in group residential care.



Length of Stay

There were 236 youth that returned to WV. The average length of stay was 332 days. This is being skewed by youth who remain out for over 1 year.



Demographic Highlights of Youth

- From July 2016-June 2017 a total of 415 youth were out-of-state. Last year 425 youth were out-of-state.
- This year 310 males (75%) were placed out-of-state and 105 females (25%).
- The youth were the following ages when placed out-of-state (not current age):
 - 10 years old or younger- 24 youth (6%). This is a decrease from last year when 41 youth (10%) were placed out-of-state.
 - 11-14 years old-148 youth (36%)
 - 15-17 years old-219 youth (53%)
 - 18 or older-24 youth (6%)
- At the time of this report (December 20, 2017), 236 youth had been discharged. The youth were the following ages when discharged:
 - 10 years old or younger-5 youth (2%)
 - 11-14 years old-48 youth (20%)
 - 15-17 years old-146 youth (62%), increase from last year's 52%
 - 18 or older-37 youth (16%), decrease from last year's 23%
- Youth were placed at the following facility types:
 - 61% in a group residential
 - 33% at a psychiatric residential treatment facility
 - 3% in specialized foster care
 - 3% in a diagnostic facility
- 165 youth or 70% were out-of-state 1 year or less.
- 92 or 22% of youth had been out-of-state at least twice since 2007.
- 57 youth or 14% of youth had moved from one out-of-state facility to another without returning to the state first since 2007.

Review of Youth

This year the Regional Clinical Review and Out-of-State Review processes remained the same but the team structures was modified to meet the current needs of the youth being reviewed. Each region has one team. This team participates in conference calls, Regional Clinical Review Teams and Out-of-State Review Teams. These teams consist of community members that represent group residential facilities, psychiatric residential treatment facilities and acute care hospitals, treatment foster care, Safe at Home and Children's Mental Health WRAP, community mental health centers, and agencies working with youth with intellectual disabilities. Individuals with expertise in certain areas may be called upon occasionally.

This year a conference call process was established. Many times youth need to be quickly reviewed by the team. The youth may have already been through a Regional Clinical Review Team, diagnostic evaluation, or other formal assessment processes. If there is clear picture on what the child needs then a conference call can occur.

Out-of-State Reviews

In the summer and fall of 2014, many of the youth were reviewed through the Out-of-State Review process. This was done in order to collect information regarding the gaps in services, identify system issues and barriers and make recommendations to assist the youth in returning to WV.

This process was considered to be beneficial and was completed a second time in the spring of 2015. In 2015-2016, this process will be implemented on a regular basis. (Please refer to the Comprehensive Review of West Virginia Children/Adolescents in Out-of-State Placements for more information on gaps in services).

- Out of the 415 youth out-of-state July 2016-June 2017, 311 or 75% of the youth were reviewed. Out of the 311 youth, 123 youth were reviewed July 2016-2017.
- Some of the gaps in services identified included:
 - No psychiatric residential treatment facilities (PRTF's) for youth age 14 or younger that address severe mental health issues. This year Highland Hospital did open a PRTF for younger youth but youth still are being placed out-of-state.
 - No psychiatric residential treatment facilities (PRTF's) services for youth who are already age 18 or older are available in state.
 - Limited group residential services for youth who are age 18 or older.
 - Very limited services for youth with an intellectual disability.
 - There are no in state level 3 facilities that are able to handle youth who are aggressive and have an intellectual and developmental disabilities (IDD) diagnosis.
 - No in-state programs for Intellectual and Developmental Disability /Sex Offenders.
 - Most of the Group Residential Facilities in-state are trauma-informed and offer trauma-based therapy. There are no programs in-state that addresses trauma ONLY for youth age 12 or older. There is a program (BRIDGES-PRTF) that offers the service for younger youth.
 - There are no in-state residential programs that address trauma with youth who have a diagnosis of intellectual and developmental disabilities (IDD).
 - Lack of treatment foster care. Treatment Foster Care pilot successfully completed and more treatment foster care contracts have been awarded.
 - Youth in parental custody may end up in state's custody because they cannot obtain the needed services for youth. Can only obtain psychiatric residential treatment facilities (PRTF) level services. Children's Mental Health Wraparound for youth in parental custody were implemented in October of 2016.

Regional Clinical Review Team

The clinical review process is a coordinated effort designed to provide a comprehensive, objective, clinical review of designated youth. The process has several steps to assure that the review is objective and thorough and includes a standardized assessment tool utilized in all reviews. The participants in this process include the youth/family/legal guardian, a regional clinical coordinator, an individual reviewer and a regional clinical review team. Information provided during the Clinical Review process is confidential and protected by Federal and State statute. The targeted populations for these reviews are youth currently in out-of-state residential facilities or youth who are at risk of out-of-state placement. The role of this review process is to identify what the youth's current treatment and permanency needs are and serve as a resource to the youth's individual Multidisciplinary Team (MDT) in guiding decision making. Full reviews as described above can occur or an update review may take place after the youth has had a full review.

- Out of the 415 youth out-of-state July 2016-June 2017, 103 or 25% of the youth had been reviewed through a Regional Clinical Review Team at some point in their life.
- **Youth who are at risk of being placed out-of-state.** If a youth is reviewed before placement then the team can help suggest possible community services or other in-state services to keep the youth in WV. Some youth are never placed out-of-state. **Between July 2016 and June 2017, 58 youth were reviewed who were at risk of going out of state; 2 youth were already placed out-of-state.**

Recommendations	Were Recommendations Followed?
34 youth were to remain in state	For the youth recommended to remain in-state, 29 out of 34 or 85% remained in the state at least for 4 months.
18 youth were to be placed out-of-state	For the youth recommended to be placed out-of-state, 11 out of 18 or 61% were placed out-of-state, even though they may not have gone to one of the facilities recommended. Although the recommendations were not followed, the youth remained in-state and this is a positive outcome.
4 youth were recommended to remain in or go out if necessary	For the youth recommended to remain in state <u>or</u> be placed out-of-state, the following occurred: 2 remained in state and 2 were placed out-of-state.*
2-Return to Team	Two youth were to return to the team for further recommendations but did not. Both youth remained in the state

*(**Recommendations Followed:** The recommendations are considered to have been followed if the criteria below are met. Youth Go Out-of-State-If the youth goes Out-of-State within 3 months, the recommendation was considered to have been followed. Youth Remain In State- If the youth remained in for at least 4 months, the recommendation was considered to have been followed.)

- **Youth who are already placed out-of-state.** In these cases the team may need to assist with discharge planning and recommend services to successfully return the youth to WV. **Between July 2015 and June 2016, 2 youth were reviewed who were already out-of-state**

Recommendations	Were Recommendations Followed?
Both youth were recommended to return to services in WV. *	Neither youth were able to do that.

*(**Recommendations Followed**-The recommendations are considered to have been followed if the criteria below are met. Youth Remain Out-of-State- If the youth remained Out-of-State for at least 4 months, the recommendation was considered to have been followed. Youth Return to State- If the youth returns to the state within 3 months, the recommendation was considered to have been followed.)

Conference Calls

Not all youth require an extensive review as the Regional Clinical Review. Often youth have been reviewed many times, have many assessments, and the youth's needs are clear. Conference calls are usually scheduled at least every 2 weeks but can be pulled together quickly to brainstorm services and placement ideas for the youth. A formal set of recommendations are sent to the youth's MDT.

- A total of 39 conference calls were completed this year. Twenty (20) of those were in regards to the youth placed out-of-state this year.

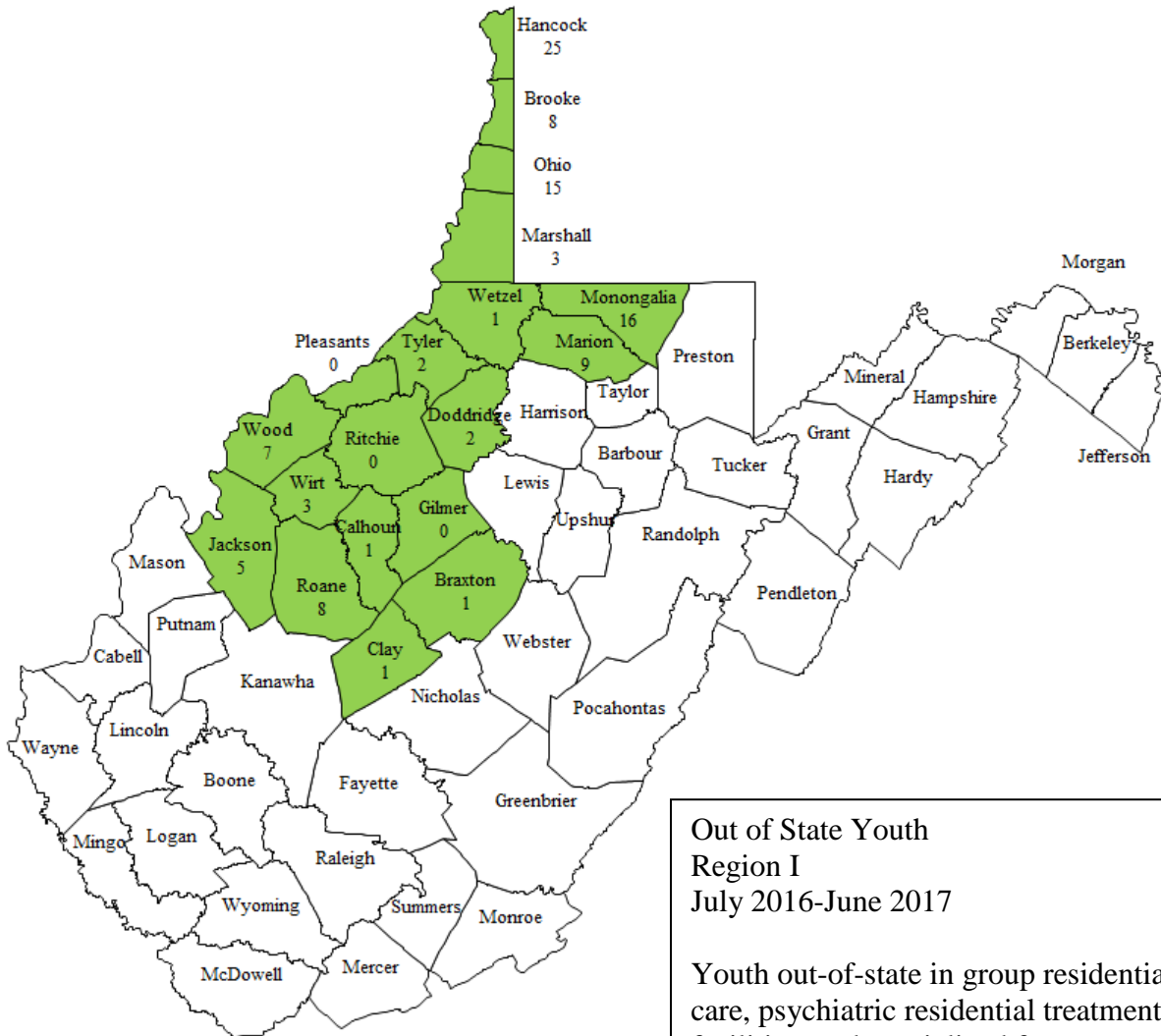
Next Steps

Next year, 2017-2018, the Statewide Review Team Coordinator and the Regional Clinical Coordinators will work both with providers and DHHR to ensure barriers to placing youth in-state are eliminated. Teams will be assessed and revised to meet the needs of the youth in each specific region.

Data specific to youth as they are placed will be collected and reported to determine the continued needs of the youth in West Virginia.

Regional Reports

Region I July 2016-June 2017



Out of State Youth Region I July 2016-June 2017

Youth out-of-state in group residential care, psychiatric residential treatment facilities, and specialized foster care.

These numbers are unduplicated, so if a child went out of state more than once, he or she is only counted once. These numbers represent all the kids that have been out of state this year.

2016-2017=107

2015-2016=104

Region I July 2016-June 2017

Demographics:

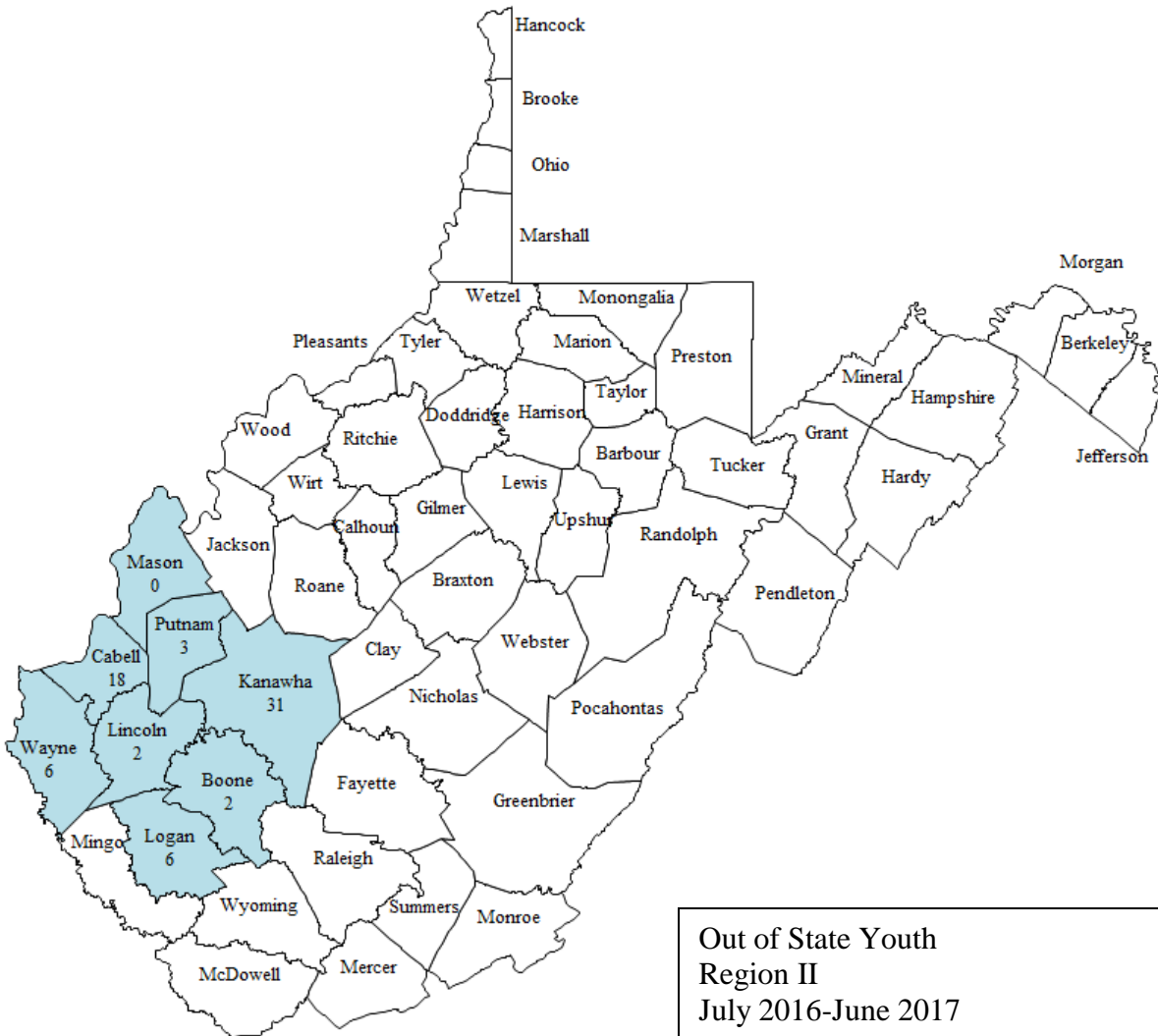
- 107 youth were placed out-of-state last year. The previous year 104 youth were placed out-of-state.
- 80 or 75% of the youth were male and 27 or 25% were female.
- Youth were the following ages at placement:
 - 10 or younger-7 or 7%
 - 11-14 years old-39 or 36%
 - 15-17 years old-53 or 50%
 - 18 or older-8 or 7%
- **The level of care youth were placed are as follows:**
 - Psychiatric Residential Treatment Facility-24 or 22%
 - Group Residential -73 or 68%
 - Diagnostic-8 or 8%
 - Specialized Foster Care-2 or 2%

Reviews:

- 15 youth were reviewed through a Regional Clinical Review Team (July 2016-June 2017).
- All youth but two were at risk of going out of state.
 - 8 youth were recommended to remain in the state for services.
 - 5 youth were recommended to go out-of-state to receive services
 - 2 youth were recommended to return from out-of-state.
 - Recommendations were followed 60% of the time.
- 39 youth were reviewed through the Out-of-State Review Team this year
- 14 youth were reviewed through a Conference Call.

Region II

July 2016-June 2017



Out of State Youth Region II July 2016-June 2017

Youth out-of-state in group residential care, psychiatric residential treatment facilities, and specialized foster care.

These numbers are unduplicated, so if a child went out of state more than once, he or she is only counted once. These numbers represent all the kids that have been out of state this year.

2016-2017=68 youth
2015-2016=65 youth

Region II

July 2016-June 2017

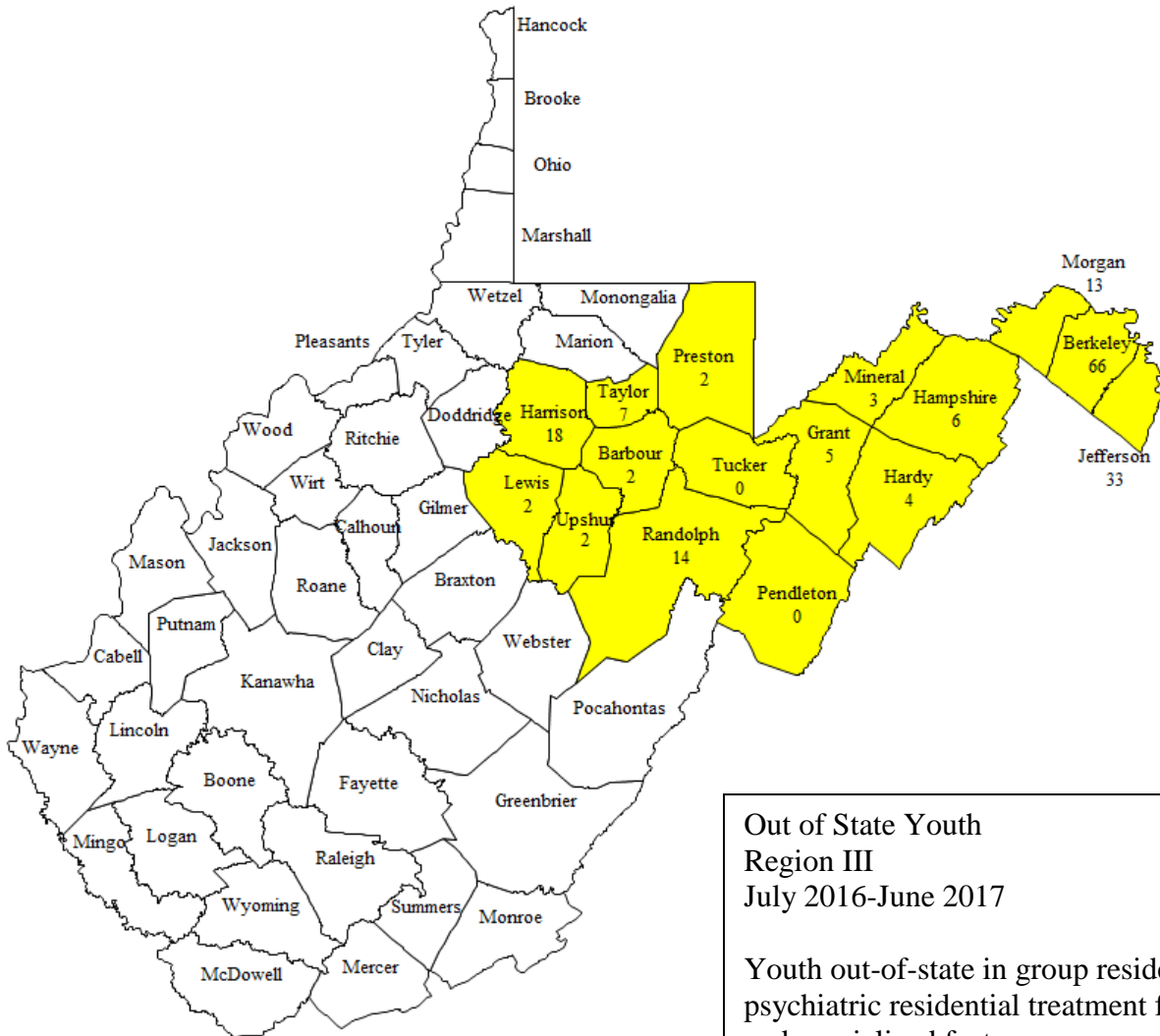
Demographics:

- 68 youth were placed out-of-state last year. The previous year 65 youth were out-of-state.
- 52 or 76% of the youth were male and 16 or 24% were female.
- Youth were the following ages at placement:
 - 10 or younger-6 or 9%, decrease from last year's 23%
 - 11-14 years old-28 or 41%, large increase from last year's 26%
 - 15-17 years old-30 or 44%
 - 18 or older-4 or 6%
- **The level of care youth were placed are as follows:**
 - Psychiatric Residential Treatment Facility-35 or 52%
 - Group Residential Non-31 or 46%
 - Diagnostic-1 or 1%
 - Specialized Foster Care-1 or 1%

Reviews:

- 36 youth were reviewed through a Regional Clinical Review Teams (July 2016-June 2017). All youth were at risk of going out of state.
 - 20 youth were recommended to remain in the state for services.
 - 12 youth were recommended to go out-of-state to receive services.
 - 4 youth was recommended to remain in the state for services or go out if services could not be secured in-state.
 - Recommendations were followed 81% of the time.
- 24 youth were reviewed through the Out-of-State Review Team.
- 7 youth were reviewed through a Conference Call.

<p style="text-align: center;">Region III July 2016-June 2017</p>
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Out of State Youth
Region III
July 2016-June 2017

Youth out-of-state in group residential care, psychiatric residential treatment facilities, and specialized foster care.

These numbers are unduplicated, so if a child went out of state more than once, he or she is only counted once. These numbers represent all the kids that have been out of state this year.

2016-2017=177 youth
2015-2016=175 youth

Region III

July 2016-June 2017

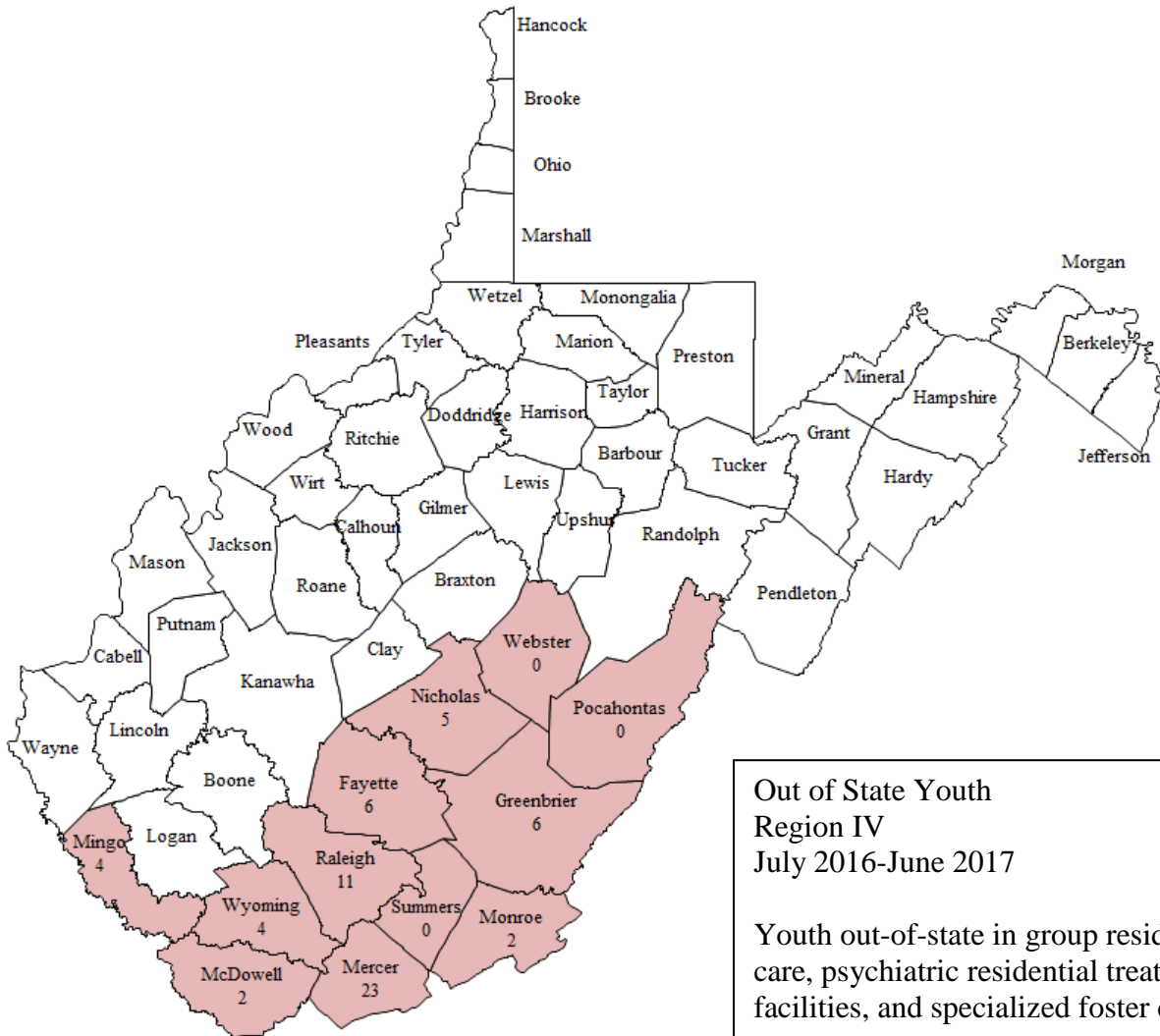
Demographics:

- 177 youth were placed out-of-state last year. There were 175 youth placed the previous year.
- 131 or 74% of the youth were male and 46 or 26% were female.
- Youth were the following ages at placement:
 - 10 or younger-5 or 3%, decrease from last year's 13%
 - 11-14 years old-64 or 36%, decrease from last year's 43%
 - 15-17 years old-96 or 54%
 - 18 or older-12 or 7%
- **The level of care youth were placed are as follows:**
 - Psychiatric Residential Treatment Facility-32 or 18%
 - Group Residential -142 or 80%
 - Diagnostic-None
 - Specialized Foster Care-3 or 2%

Reviews:

- 3 youth was reviewed through a Regional Clinical Review Team (July 2016-June 2017). The youth were at risk of going out of state.
- 2 youth were recommended to remain in the state for services.
- 1 youth was recommended to go out-of-state to receive services.
- Recommendations were followed 67% of the time.
- 35 youth were reviewed through the Out-of-State Review Team.
- 8 youth were reviewed through a Conference Call.

Region IV July 2016-June 2017



Out of State Youth Region IV July 2016-June 2017

Youth out-of-state in group residential care, psychiatric residential treatment facilities, and specialized foster care.

These numbers are unduplicated, so if a child went out of state more than once, he or she is only counted once. These numbers represent all the kids that have been out of state this year.

2016-2017=63 youth
2015-2016=81 youth

Region IV

July 2016-June 2017

Demographics:

- 63 youth were placed out-of-state last year. There were 81 youth out of state the previous year. Region IV is the only Region to show a decrease last year. They had the lowest number of youth out-of-state.
- 47 or 75% of the youth were male and 16 or 25% were female.
- Youth were the following ages at placement:
 - 10 or younger-6 or 10%
 - 11-14 years old-17 or 27%, decrease from last year's 36%
 - 15-17 years old-40 or 63%, increase from last year's 49%
 - 18 or older-None
- **The level of care youth were placed are as follows:**
 - Psychiatric Residential Treatment Facility-28 or 45%
 - Group Residential-31 or 49%
 - Diagnostic-None
 - Specialized Foster Care-4 or 6%

Reviews:

- 4 youth were reviewed through a Regional Clinical Review Team (July 2016-June 2017).
- 4 youth were at risk of going out of state.
 - 2 youth were recommended to remain in the state for services.
 - 2 youth were recommended to return to the team for further recommendations but did not. The two youth did remain in the state.
 - Recommendations were followed 100% of the time.
- 25 youth were reviewed through the Out-of-State Review Team.
- 8 youth were reviewed through a Conference Call.