

**Residentially Based Services (RBS) Reform Project
County Annual Report**

Demonstration Site: County of San Bernardino	Reporting Period: Calendar Year 2012
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Instructions: Pursuant to the legislative requirements for implementing RBS, each county participating in the RBS Demonstration Project shall prepare and submit an annual report. The report is to be developed in collaboration with the private nonprofit agency(ies) participating in the demonstration project. This County Annual Report (CAR) is to be prepared by the county as a single, comprehensive report for the reporting period. The report is prepared for each calendar year in which the RBS Reform Project is in operation and submitted by March 1 of the following year to the California Department of Social Services (CDSS) at RBSreform@dss.ca.gov.

Section A - Client Outcomes:

1. Complete the table below on the characteristics of the target population served in this reporting period.

Total Number Of Youth:	Average Age Of Youth:	Number Of Youth Who Are:	Number Of Youth Who Are:	Number Of Youth Placed By:
25	16 years	Male: 13 Female: 12	African-American: 6 Asian: 0 Caucasian: 17 Hispanic: 2 Other: 0	Probation: 5 Child Welfare: 20 Mental Health: 0 Other: 0

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2. **Complete and attach one excel document titled, “RBS Days of Care Schedule” for each RBS provider listing information for each youth enrolled in RBS since implementation of the project. This document captures information on the total days in care in residential, community-based bridge care, after-care and crisis stabilization, beginning with the youth’s initial enrollment in RBS.**
- a. **For those youth who were both active in RBS during the reporting period and enrolled in RBS long enough to meet or exceed the approved site target for average length of stay in group home residential placement, what percent exceeded the site target for average length of stay in group home residential placement and by an average of how many days?**

San Bernardino county set the average length of stay in the RBS residential setting to be 12 months. As of December 31, 2012, there were 5 youths out of the 25 enrolled in RBS during 2012 that met or exceeded the approved length of stay in the residential group home: 24%. On average their stay was approximately 506 days or 16.6 months with a range of 396 to 831 days.

- b. **For those youth who exited (for any reason) from the RBS program during the reporting period, what percent exceeded the approved site target for average length of stay in the full RBS program (residential plus community) and by an average of how many days?**

As of December 31, 2012 there were no exiting RBS youth that exceeded the full RBS program time period of 24 months.

- c. **What number and percent of youth stepped down from group home residential placement to a lower level of care during the reporting period? Of those youth who stepped down, what number and percent returned to group home residential care? For any youth who stepped down to a lower level of care and returned to group home residential care multiple times, describe the number of youth and the reasons for each movement up and down in level of care.**

As of December 31, 2012 there were 10 RBS youths that stepped down to a lower level of care or to their parents: 24.4%. Three of the 10 RBS youth returned to the group home after being in a lower level of care: 30%.

Youth one exited RBS successfully to a concurrent planning home (non-related family member placement). The child re-entered care after the placement was not successful and eventually re-entered RBS and returned to the residential setting. Two youths left the residential portion of RBS for the same ITFC/FFA home and returned 237 days (7 months) later at the request of the FFA parent.

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- d. Of those youth active in RBS during the reporting period, what number and percent exited from RBS due to graduation, emancipation, voluntary closure, and other (as defined by “Current Status Code” in the RBS Days of Care Schedule)? Of those exiting as “other”, describe the reasons for disenrollment.**

Six youths out of the twenty-five youths enrolled in RBS exited successfully in 2012. There were seven youths that exited before graduation for reasons other than emancipation: four of the youths were returned to Juvenile Hall, two youths were moved to a different group home, one youth ran away from the residential home.

- e. Of those youth who exited from RBS since implementation of the RBS program, what number and percent re-enrolled in RBS during this reporting period?**

As of December 31, 2012 there have been two out of forty-one youths that have exited RBS, and then re-entered RBS for 4.9 percent.

- f. What percent of youth utilized crisis stabilization services during the reporting period? Of those youth, what was the average number of episodes of crisis stabilization per youth? List the reasons why the crisis stabilization episode occurred:**

There has been no respite during the reporting period (2012).

In 2011, there was one youth that briefly utilized the respite portion of RBS. However, the residential provider did not have the conditional use permit and the youth was in respite for four days. The foster parent requested respite because of the youth's behaviors.

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Section B - Client Involvement:

- 1. Using the Child and Adolescence Needs and Strengths (CANS) data provided by Walter R. McDonald and Associates, Inc. (WRMA), address the following:**
 - a. Describe any trends indicated by the CANS data.**

Overall, the youths showed improvements at the second CANS (first follow up- typically 6 months later) and at the third CANS (second follow up – typically a year after the first CANS). However, there were some domains that the RBS program was unable to improve for the youths: Child Safety, Educational Progress, and Relationship Permanency. There was (non-statistical) significant progress in the domain of Mental Health and Family/Caregiver Needs and Strengths (until the 4th CANS). There was moderate improvement in the youths Risk Behaviors and Child Strengths across all four CANS, with most of the improvement occurring six months into the program (second CANS).

There were 22 youths active in 2012 that had a baseline CANS, and a follow up CANS. In addition, of the 22 youths, 12 had a third CANS and 5 had a fourth CANS. A comparison of the 22 youths first and second CANS, showed improvements in Functional Status, Mental Health, Risk Behaviors, Family/Caregiver Needs and Strengths. There were no changes in Child Safety, Educational Process and Relationship Permanence at the second CANS. For the 12 youths with a third CANS, the youths' improved in comparison to the first CANS on the following items: Mental Health, Risk Behaviors, Family/Caregiver Needs and Strengths, Child Strengths, Educational Progress. The youths did not improve on Functional Status, Child Safety or Relationship Permanence. For the five youths that had a fourth CANS, the youths improved on Mental Health, Risk Behaviors, Family/Caregiver Needs and Strengths, Child Strengths, Educational Progress. The youths did (non-statistically) significantly worse in Functional Status, Child Safety and Relationship Permanence. There were only five youths that had four CANS and there may have been safety and risk factors with members that contributed to the youths having poorer outcomes in those domains.

- b. Can any conclusions be made from the data? If yes, what are they? If no, why not?**

Yes [] No Explain:

The CANS scores range from 0 to 30, with lower score indicating a lower level of need. The RBS program improved the youths' mental health significantly with a baseline of 17.5 to the third follow up of 13.9. In addition, the Family/Caregiver Needs and Strengths had another significant improvement from baseline of 20.6 to the third CANS of 13.3. These improvements indicate that the program is effectively treating the youths with mental health issues and providing a safe environment for them. However, the

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difficulty in locating and engaging family or other significant adults has resulted in the youth not progressing in Relationship Permanence.

2. a. **Complete the table below on family and youth participation in child/family team meetings during the reporting period.**

Total Number Of Youth:	Total Number Of Youth With At Least One Supportive Adult During Any Part Of The Reporting Period:	Number Of Youth Participating In At Least 90% Of Their Child/Family Team Meetings:	Number Of Youth With At Least One Supportive Adult Participating In At Least 90% Of That Youth's Child/Family Team Meetings:
15	14	14	10

- b. **If youth did not participate, explain why not.**

One new female intake was in the program for a very limited time and was dis-enrolled as a result of a clearly established elopement pattern of behavior.

Section C - Client Satisfaction:

1. **Using the Youth Services Survey for Youth (YSS) and Youth Services Survey for Families (YSS-F) data provided by WRMA, specifically satisfaction measured in Items 1-15 of the YSS and YSS-F and outcomes measured in Items 16-22 of the YSS and YSS-F, address the following:**

- a. **Describe any trends in the data.**

There were fourteen youths with baseline YSS, nine youths with a follow up YSS, seven youths with a second follow up YSS and four youths with a third follow up YSS. Any youth active in the program during the months of May 2012 and November 2012 were surveyed. In addition, the YSS is a voluntary survey and four youths refused to complete follow up YSSs in 2012. Overall, the youth that were surveyed in the second and third follow ups increased their satisfaction from the baseline with the following items: satisfaction with services, child and family voice and choice and well-being

There were five baselines YSS-Fs and three follow-up YSS-Fs. The families completing the YSS-F were satisfied with the services at the baseline (score of 4.0) and were extremely satisfied with the services at the follow up (score of 5.0). The families were satisfied with the other two domains as well: for child and family voice and choice the baseline score was (3.6) and the follow up score was (4.3), and for Well-being, the baseline was (3.9) and the follow up was (4.7).

Note the YSS/YSS-F scores range from 1 to 5 with the higher the score, the more satisfied the youth/family member.

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- b. Can any conclusions be made from the data? If yes, what are they? If no, why not?**

Yes No Explain:

By design, San Bernardino County had low numbers of youths enrolled in RBS. In 2012 there were twenty-five active youths and of those youths fourteen had a baseline survey, nine had the 1st follow up survey, seven had the 2nd follow up survey and four had the 3rd follow up survey. Overall, the youths that remained in the program to be re-surveyed at least once were satisfied with San Bernardino county's RBS program with services, voice and choice and well-being.

However, it is difficult to draw conclusions with the YSS-F when only five family members completed the first one and three family members filled out the follow up YSS-F. The reasons behind the low numbers were the difficulties in locating and engaging the youths' family members and the implementation of the survey at semiannual intervals.

Section D - County and Provider Use of RBS Program:

- 1. a. During the reporting period, has the operation of the program significantly changed from the original design described in the approved plan? If yes, describe the change.**

Yes No Explain:

The bulk of the original design of RBS has been maintained through the entire implementation; however, there have been some elements modified for the sake of increasing efficiency or effectiveness. For Department of Behavioral Health (DBH), shifting the clinical therapist assignment from two clinicians each assigned 0.5 FTE to one clinician assigned 1.0 FTE was done to increase efficiency, as some of the tasks related to collaboration were redundant. The intake process was modified to increase both efficiency and effectiveness. The original program design included a screening meeting which was meant to be an introductory meeting with the youth and family. After attempting to initiate this meeting it was felt that the amount of meetings planned for initial intake was excessive, so the screening meeting was discontinued. The same activities are being done on an informal basis through the initial interview with the youth. Finally, an improvement on effectiveness was made when the RBS team modified their presentation to youth regarding the expected time frame (i.e., 12 months). The message, as it was provided, was given as a hard 12 month time period in residence. For some youth this had a negative impact of increasing their anxiety and making a transition more difficult. Therefore, the time period discussion was altered to allow for time in residence to be clearly based more upon need than a hard time frame.

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b. If yes, how has this adaptation impacted the effectiveness of the project?

All the modifications were minor, but each had a positive impact on the effectiveness of RBS. Having one DBH clinician more focused on RBS allowed for this staff to better understand and respond to the program. Discontinuing the screening meeting has allowed for a quicker intake process, which better meets the immediate needs of youth. Changing the discussion of the 12 month standard has allowed flexibility in the program and has allowed some youth to concentrate less on moving and more on stabilizing and progressing.

2. During the reporting period, have there been any significant differences from the roles and responsibilities delineated in the approved plan for the various county agencies and provider(s)? If yes, describe the differences.

Yes [] No Explain:

Although the intended roles and responsibilities of the various elements of RBS have not changed from the approved plan, the practical elements of operating RBS clearly indicate that expectations of how these roles and responsibilities would impact the children served were not entirely accurate. This appears to be true in regards to children coming into the program, getting services in the program, and transitioning out of the program.

The RBS program was envisioned to serve as a primary resource for both the Probation Department and Child and Family Services. However, RBS never fully served the Probation clientele at the expected levels in 2012. In 2012, approximately 20% of the youths enrolled in RBS were supervised by Probation and 80% were supervised by Children and Family Services. In comparison, in 2011, 43.7% of the youth were supervised by Probation and 56.2% of the youth were supervised by Children and Family Services.

Family Finding and Engagement was envisioned to be a primary service provided to enrolled youth, but in reality very few of the RBS youths participated in family finding and engagement as envisioned. This service requires a high degree of coordination between agencies and clear roles and responsibilities to be implemented well, all of which were being developed through the implementation of RBS. In addition to the difficulties inherent in coordinating Family Finding and Engagement, our RBS program targeted the most severe youth served, and this exacerbated the difficulty of finding potential permanency relations.

Lastly, Intensive Treatment Foster Care (ITFC) homes were envisioned as a primary transition option for enrollees. An ITFC home, in theory, would provide a solid family environment to which the child could transition. In reality, the high needs of RBS enrollees makes placement at an ITFC very difficult. Therefore, ITFC homes did not

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provide a significant number of community placements as envisioned in the RBS model. In 2012, two RBS youths were placed in ITFC homes.

3. Were RBS enrollments sufficient during the reporting period? If not, why not?

Yes No Explain: Full right now in 2013.

Provider occupancy has been a struggle, however, the occupancy improved in the last quarter of 2012. In the 1st quarter the occupancy average was 70%, the 2nd quarter the occupancy average was 71%, in the 3rd quarter the occupancy average was 84% and finally in the 4th quarter the occupancy average was 92%.

There has been an ongoing effort to ensure that RBS functions at full capacity. There was a brief period of time from approximately March 2012 to August 2012 where the RBS home remained at five beds capacity due to the behavior of one of the youth, RBS was unable to fill the bed and ensure safety. Therefore, with agreement from the provider the bed remained unfilled until such time as the youth moved into a community placement.

4. Describe how the county and provider(s) managed RBS staff resources during the reporting period (e.g., filling vacancies, redefining job qualifications, eliminating positions, etc.)

RBS has been prioritized by the participants, and the management of resources for RBS reflects this prioritization. Throughout the project there have been key staff who have transitioned out of RBS assignments or been unavailable for significant periods of time. In all situations the agency has shifted resources to support RBS during the transition. CFS social workers have increased their involvement, additional IRC staff have been made available, DBH clinicians have been reassigned to RBS, and the Regional Executive Director has significantly increased and maintained a high level of involvement when needed.

The largest increase in staff resources came from Children and Family Services. CFS found that the parameters surrounding the RBS program required more time/effort than what was previously expected. Therefore, CFS created an RBS coordinator position to fill this need. The duties of this new position allow for flexibility and for increased participation from CFS in the system of care for each youth. The coordinator attends all Care Coordination Team Meetings (CCT), Team Decision Making Meetings (TDM), Transitional Conferences (TC), and Multi-Disciplinary Team meetings (MDT) for RBS youth. The RBS coordinator acts as a liaison and trouble shooter between the provider, CFS, DBH, and the placing social workers. The RBS coordinator also acts as a conduit for possible RBS placements, incoming and outgoing RBS youth.

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Provider: As evidenced by low occupancy levels at the beginning of the reporting period, there were fewer clients available for services. Service team, which includes clinicians, and specialized support positions were not all filled at this time. As occupancy levels stabilized the support positions (Life Coach, Parent Partner) were able to be delineated and filled in accordance with the contract structure. Prior to that time, these tasks were covered by existing staff.

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Section E - County Payments to Nonprofit Agency(ies):

Note: The payments reported here are from the county records as recorded on a cash basis during the reporting period from January 1 to December 31, for all providers participating in the RBS demonstration project.

1. For Questions a through c, please complete the table below:
 - a. Report the total payments from all fund sources paid to the provider(s) for RBS during the period the report covers under each of the following:
 - Aid to Families with Dependent Children-Foster Care (AFDC-FC). (The amounts reported here should come from the amount reported under H1, amount claimed per fiscal tracking sheet. They will not be equal because H1 is cumulative for the project and F1 is only for the reporting year.)
 - Early, Periodic Screening, Diagnosis and Treatment (EPSDT).
 - Mental Health Services Act (MHSA).
 - Grants, loans, other. (Itemize any amounts reported by source.)
 - b. Provide the Average Months of Stay in Group Care for all children/youth enrolled in group home care during the reporting period.
 - c. Provide the Average Months of Stay in Community Care for all children/youth enrolled in community services (not in group home) during the reporting period.

	AFDC-FC	EPSDT	MHSA	Other	Total
Amount Paid for Residential	\$979,188	\$341,086	\$647,954	\$3,300	\$1,971,528
Amount Paid for Community	\$80,381	\$71,813	\$0.00	\$0.00	\$152,194
Total Amount Paid	\$1,059,569	\$412,899	\$647,954	\$3,300	\$2,123,722
Avg. Length of Stay in Residential	NA	NA	NA	NA	6.9 Months (210 days)
Avg. Length of Stay in Community	NA	NA	NA	NA	5.2 Months (158 days)
Avg. AFDC-FC Payment Per Youth in Residential	\$0.00	\$0.00	\$0.00	\$0.00	\$8,135
Avg. AFDC-FC Payment per Youth in Community	\$0.00	\$0.00	\$0.00	\$0.00	\$2,885

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- 2. Were any changes made to the Funding Model in order to manage payment shortfalls/overages, incentives, refunds during the reporting period? If yes, explain what the changes were and why they were needed.**

Yes No Explain:

There were no changes made to the funding model. However, there were modifications to the RBS rates. During 2012, the RBS rate in San Bernardino county increased to match the provider's increase in costs. The monthly rate increased from \$8,835 to \$9,329 in 2012. (E.G. January to February 2012 was \$8,835, April to June 2012 was \$9,146 and July 2012 onward was \$9,329.)

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Section F - Actual Costs of Nonprofit Agency(ies):

Note: The amounts reported here should be based on each provider's accounting records for RBS for the period from January 1 through December 31, and be on a basis consistent with the method used to report costs on the annual A-133 Financial Audit Report and SR3 document filed with CDSS.

1. a. **For residential costs, complete the table below displaying provider actual costs during the reporting period, compared to the RBS proposed budget included in the approved Funding Model. If there is more than one provider in the demonstration project, combine the individual provider data into one table for the project.**

Note: This chart follows the SR-3 financial report. Definitions are listed in the instructions (RBS Letter No. 04-11, dated August 16, 2011).

Actual Costs in RBS Residential:

Expenditures:	Proposed Budget for the Period	Actuals for the Period	Over/(Under) Budget
Total Salaries & Benefits	\$1,945,020	\$1,419,975	(\$525,045)
Total Operating Costs	\$422,300	\$546,323	\$124,023
Total Child Care & Supervision Costs	\$911,765	\$569,739	(\$342,026)
Total Mental Health Treatment Services Costs	\$591,450	\$426,793	(\$164,657)
Total Social Work Activity, Treatment & Family Support Costs	\$441,805	\$423,443	(\$18,362)
Total Indirect Costs	\$166,005	\$93,770	(\$72,235)
Total Expenditures	\$2,533,325	\$2,060,068	(\$473,257)

- b. **Does the difference between the actual provider costs and the proposed budget exceed 5 percent on any line item above? If yes, explain what caused the variance and whether this difference is expected to be temporary or permanent.**

<p>[X] Yes [] No Explain:</p> <p>Total Operating Costs over budget 29.4%</p> <p>Total Child Care & Supervision Costs under budget 37.5%</p> <p>Total Mental Health Costs under budget 27.8%</p> <p>Total Social Work/ Costs under budget 4.2%</p> <p>Total Indirect Costs under budget 43.5%</p> <p>Total Expenses under budget 18.7%</p> <p>Total Operating Expenses: Variance attributable to higher transportation costs (\$33K) and higher costs attributable to equipment and occupancy costs (\$87K).</p>

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Transportation costs are larger due to the high level of program activity and will continue. Equipment and occupancy costs are higher due to depreciation related to higher costs for facilities and office space. These costs will continue.

Total Child Care & Supervision Costs: Variance attributable to staff reductions in response to average occupancy during the year being well below the 96% budgeted occupancy level in the MOU. Actual occupancy in 2012 was 77.90%.

Total Mental Health Treatment Services Costs: Variance attributable to reality that TBS services have not been utilized (\$46K). This cost will not be part of the residential program but may be included in future community based costs. Also, Day Treatment services anticipated in this budget are not being utilized because of closure of the day treatment program for financial reasons. Individual mental health services are being utilized to replace these lost services. Lower occupancy also limits provider ability to offer individual services.

Total Indirect Costs: Variance attributable to a favorable year where provider administrative costs were lower due to vacant positions and some other income to offset administrative costs. This cost savings will not continue into future years.

2. a. **For community costs, complete the table below displaying provider actual costs during the reporting period, compared to the RBS proposed budget included in the approved Funding Model. If there is more than one provider in the demonstration project, combine the individual provider data into one table for the project.**

Note: This chart follows the SR-3 financial report. Definitions are listed in the instructions (RBS Letter No. 04-11, dated August 16, 2011).

Actual Costs in RBS Community:

Expenditures:	Proposed Budget for the Period	Actuals for the Period	Over/(Under) Budget
Total Salaries & Benefits	\$131,302	\$91,887	\$(39,415)
Total Operating Costs	\$38,137	\$23,467	\$(14,670)
Total Child Care & Supervision Costs	\$0.00	\$0.00	\$0.00
Total Mental Health Treatment Services Costs	\$0.00	\$0.00	\$0.00
Total Social Work Activity, Treatment & Family Support Costs	\$131,302	\$91,887	\$(39,415)
Total Indirect Costs	\$20,333	\$12,431	\$(7,902)
Total Expenditures	\$189,772	\$127,785	\$(61,987)

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- b. Does the difference between the actual provider costs and the proposed budget exceed 5 percent on any line item above? If yes, explain what caused the variance and whether this difference is expected to be temporary or permanent.**

Yes No Explain:

The community costs for RBS provider (Victor Treatment Center) does not include the AFDC-FC placement costs. There were 4 RBS youths in 2012 that were placed in Family Foster Agencies, Family Foster Home and Small Family Home. The RBS provider provided wraparound and other RBS services to the youths placed in the community. There were three additional RBS youths that were in their "aftercare/permanent" home in 2012 and one RBS that transitioned from the community in 2012 to an aftercare placement.

- 3. Were there extraordinary costs associated with any particular child/youth (i.e., outliers as defined in the Funding Model)? If yes, provide the amount of the cost and describe what it purchased.**

Yes No Explain:

There were costs related to enrichment activities that each youth incurred; however, it is uncertain if these were excessive as they were therapeutic in terms of identified changes in behavior as opposed to psychological need.

Provider: There were additional costs associated with client Enrichment Activities that were scheduled for our youth participants. Most activities were either free or included a minimal supply cost. However, specialized activities such as;

- Weekly horseback riding lessons (\$25 per week + Helmet and riding boots \$150)
- Music Lessons
- Cooking Classes - \$25 per month (3 youth)
- Bowling Leagues - \$75 per youth
- Basketball – 2 times per week \$75 per youth

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4. Has the county performed the fiscal audit required by the memorandum of understanding? If yes, describe any problems/issues with the provider's operations or implementation of the Funding Model that were disclosed by the fiscal audit performed. If no, when will that audit occur?

Yes No Explain:

In October 2012, there was a fiscal audit of Victor Treatment Center. There were overpayments and underpayments made to Victor Treatment Center because the County Welfare department was paying the incorrect rate. The monthly rate: January to February 2012 was \$8,835, April to June 2012 was \$9,146 and July 2012 onward was \$9,329. After all the overpayments/underpayments were examined the fiscal audit found a rate shortage of \$5,761.36 owed to Victor Treatment Center.

Section G - Impact on AFDC-FC Costs:

1. This is a cumulative report from the beginning of the project. Amounts reported are based on the amounts included in the claim presented to CDSS. Using the RBS claim fiscal tracking sheets, please complete the information below for all children served by RBS from the start of the project to the end of the reporting period:

RBS Payments for All Children Enrolled in RBS from the start of the project through the end of the Reporting Period:

	Total	Federal: All FMAPS	State: 40%	County: 60%
Total Children Served In RBS: <u>41</u>				
Federal Payments:				
Residential:	\$1,746,035.10	\$897,223.70	\$339,524.56	\$509,286.84
Community:	\$35,847.00	\$17,923.50	\$7,169.40	\$10,754.10
Total Federal Payments:	\$1,781,882.10			
Non-federal Payments:				
Residential:	\$772,545.33	\$0.00	\$309,018.13	\$463,527.20
Community:	\$71,633.00	\$0.00	\$28,653.20	\$42,979.80
Total Non-federal Payments:	\$844,178.33			
Total RBS Payments	\$2,626,060.43			

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Note: It is possible to have federal funds used in the Non-federal Payment (i.e., non-federal RBS children) category. These payments would be the federal share of any Emergency Assistance Funding used in the RBS program up to the first 12 months of a child's stay in RBS. The amounts reported would come from the non-federal fiscal tracking sheet, and are based on the instructions provided in RBS Letter No. 03-11, dated June 21, 2011.

2. Of the children reported in G1 above, please complete the information below for all children who successfully entered and exited RBS in 24 months, or remained in RBS for a full 24 months.

Note: When completing G2, it is important to understand how G2, G3, and G4 work to form the comparison to regular AFDC-FC costs. Section G4 is a comparison of cost for those children who have completed RBS (from G2) to the cost of regular foster care based on the target group base period (G3). In this context, a child "completing RBS" is one who has either entered the program and then exited after successfully completing his/her RBS program goal, or one who has entered the program and remained in the program longer than the base period (24 months). The comparison in Section G4 is done only for those children who have successfully completed the RBS program goal or are still in the program at the 24 month mark. The count of children for Section G2 and the related costs are only for those children who have completed the RBS program or remained in RBS longer than 24 months. For example, a child entering RBS who remains in the program for only 3 months and then is disenrolled would not be included in G2. A child entering RBS and still in the program at month 26 would be included in G2.

RBS Payments for all Children Entering and Exiting RBS in the 24 month Period or remaining in the program for longer than 24 months. (Include all children meeting this condition from the beginning of the project.): 8 Successful Exits/3 Exceeding 24 Months

Total Children Completing RBS: ____ 11 ____	Total	Federal: All FMAPS	State: 40%	County: 60%
Federal Payments:				
Residential:	\$521,740.94	\$288,502.69	\$93,295.30	\$139,942.95
Community:	\$30,845.00	\$15,515.54	\$6,131.78	\$9,197.67
Total Federal Payments:	\$552,585.94			
Non-federal Payments:				
Residential:	\$608,590.11	\$0.00	\$243,436.04	\$365,154.07
Community:	\$71,365.00	\$0.00	\$28,546.00	\$42,819.00
Total Non-federal Payments:	\$679,955.11			
Total RBS Payments:	\$1,232,541.05			

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- 3. Using the approved Attachment A from the Funding Model and the number of children reported in G2 (above), complete the information below regarding the expected base Foster Care costs for RBS target population children that otherwise would have been served in Foster Care.**

Note: Since Section G3 of the CAR is used to compare the base AFDC-FC rates had the RBS youth remained in regular foster care, the “Approved Base Rate Per Child” is the weighted average of AFDC-FC payments for Rate Classification Level (RCL) 12 and RCL 14 placements as described and approved in the Funding Model. The “Approved Base Months in Regular Foster Care” section is the approved comparison length for the RBS youth had they remained in regular foster care. For all RBS counties, the approved base months in regular foster care is 24 months, based on the demographic for the current length of stay in a group home for the target group. The “Applicable Federal Funds Rate” is the percentage of federal funds rate based on the federal medical assistance percentage (FMAP) used in the RBS claim. The CAR template has this FMAP funding rate pre-loaded at 50 percent because all of the RBS Funding Models used the pre-American Recovery and Reinvestment Act (ARRA) FMAP rate of 50 percent for approval purposes. However, because Section G1 of the CAR instructs counties to use financial costs based on the RBS Fiscal Tracking sheets, counties must use the ARRA rate in effect for that month and quarter. For the months through and including December 2010, the ARRA rate is 56.2 percent. For the months beginning January 2011, the ARRA rate will decline until it reaches 50 percent beginning July 2011. Details on the ARRA rates used in the RBS claim are in an RBS claim letter. In order to produce a correct comparison of costs between sections G1, G2, and G3, whatever federal funds rate is used in Section G1 should be the same rate used for G2 and G3.

Note: If zero have completed, enter zero for this reporting period comparison.

AFDC-FC Base for Comparison:				
	Approved Base Rate Per Child:	\$8,835		
	Number of Children Completing RBS:	11		
	Approved Base Months in Regular Foster Care:	24		
	Applicable Federal Funds Rate:	50%		
		(from H2, above)		
	Total	Federal	State	County
Base Payment for Target Group:	\$2,332,440	\$1,116,220	\$466,488	\$699,732

**Residentially Based Services (RBS) Reform Project
County Annual Report**

4. a. For those children who have completed the RBS program, using the information from G2 and G3 above, subtract G3 from G2 and complete the following information:

	Total	Federal	State	County
RBS Incremental Cost/(Savings)Based On Program Completion:	\$ (1,099,898.95)	\$ (613,634.06)	\$ (291,759.33)	\$ (140,550.80)

- b. What aspects of operating RBS contributed to the cost/savings compared to regular Foster Care?

The RBS program resulted in a savings of 1.1 million. Nine of the RBS youths transitioned to the community either in foster care placement or with parents/extended family members. Without RBS, the nine youth would have remained in an RCL 14 group home placement until they exited foster care. Two of the youths remained in the residential placement and exceeded the 24 months program duration.

5. Has EPSDT usage changed when compared with the typical usage by similar children/youth in traditional foster care? If yes, explain how it's different.

Yes No Explain:

There has been no change in the county's usage of EPSDT services for this population. The RBS youth are at a high level of severity requiring extensive mental health services, the provider has provided similar services under RBS as they would through other programs. There are no significant changes in the provisions of EPSDT for these youth.

6. Has MHSA usage changed when compared with the typical usage by similar children/youth in traditional foster care? If yes, explain how it's different.

Yes No Explain:

In San Bernardino County the MHSA programs for children and youth fall under two categories; (1) Crisis Response Services available 24/7, and (2) Full Service Partnerships (FSP) through three different programs with the C-1 MHSA program. RBS is one of the FSP programs. The other FSP programs are available to other foster youth. Those youth in RBS have a higher percentage of MHSA funds being utilized to help locate and provide a stable residence, as this is a more significant need for this population.

**Residentially Based Services (RBS) Reform Project
County Annual Report**

Section H - Lessons Learned:

1. Describe the most significant program lessons learned and best practices applied during the reporting period.

In terms of significant lessons learned and best practices there have been some reoccurring themes that were found throughout the program.

- 1) Developing a sense of pride and ownership in the program is critical, but difficult:
 - a. RBS was designed to take referrals from all regions within the county, but developing a strong connection with all social workers has not yet occurred.
 - b. One specialized unit had more involvement with RBS, clearly understood the potential benefits, has consistently made referrals and has had more children in RBS than other units. Given the high needs of children served by this unit, this outcome was great.
- 2) Every step must be taken carefully:
 - a. The complexity of RBS requires attention to details and each step in the referral, admission, team building, and treatment planning is necessary to ensure good practice.
 - b. Missed steps in this process have led to unfavorable results (e.g., poor communication and child's frustration)
- 3) Blending the expertise of all agencies serves the children better:
 - a. Regional Center staff involvement and provider modifications to services showed that RBS can successfully serve developmentally delayed youth.
 - b. Staff from multiple agencies are better able to problem solve for youth leaving RBS, as they bring different perspectives and resources.

2. Describe the most significant fiscal lessons learned and best practices applied during the reporting period.

The RBS rate needs to be coordinated with the RCL rate changes and COLAs.

Technical assistance will need to be provided by county mental health to assist traditional group home providers to properly bill and maximize the utilization of EPSDT services.

Economy of Scale needs to be taken into consideration when planning a program like RBS. In the original design the vendor was providing RBS in two 6-bed homes within the context of operating five 6-beds RCL 14 homes in a neighboring county, but these homes were closed and the inability to utilize shared resources has increased the importance of operating at capacity.

RBS DAYS OF CARE SCHEDULE
County Annual Report -- Section A, Question 2
(Revised June 2012)

COUNTY OF San Bernardino

List the youth who have been admitted to your RBS program since implementation and show how they have moved through the various stages of your program thus far (e.g. from the residential group care component, to "bridge" foster care, to reunification or another form of permanency).

Non-Profit Corp. Name: Victor Treatment Center **Program Number:** 0389.10.01 **Contact Person:** Kelly Cross
Period Covered: Activity through..... 12/31/2012 **Telephone Number:** 909-388-0174 **Date Completed:** 3/1/2013

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S
Youth Enrolled		RBS Residential Group Care				RBS Community-Based "Bridge" Foster Care						RBS Aftercare in Permanent Placement, including Reunification				CURRENT STATUS		
Use Youth's Foreign Client Key Only; List in order of Date of Admission	Date Entered	Date Exited	Total Days Upon Exit	If Still In Group Care, Total Days To Date	Date Entered	Date Exited	Total Days Upon Exit	If Still In "Bridge" Foster Care, Total Days To Date	Number of RBS "Bridge" Foster Care Placements To Date	Did Child Incur Episodes For Crisis Stabilization?	Date Entered	Date Exited	Total Days Upon Exit	If Still In Aftercare or a Permanent Care Total Days To Date	Use Current Status Codes Below	For CLOSED Cases ONLY, Total Days In RBS	For OPEN Cases ONLY, Total Days In RBS	
1		6/28/2010	4/26/2011	302	-		-	-	0	No			-	-	7	302	-	
2		6/28/2010	8/30/2010	63	-		-	-	0	No			-	-	6	63	-	
3		7/6/2010	1/4/2011	182	-		-	-	0	No	1/4/2011	4/25/2011	111	-	4	293	-	
4*		2/17/2012	4/25/2012	68	-		-	-	0	No			-	-	6	68	-	
5		7/12/2010	8/9/2011	393	-	8/9/2011	10/17/2011	69	-	1	Yes		-	-	6	462	-	
6		7/15/2010	12/11/2010	149	-		-	-	0	No			-	-	6	149	-	
7		8/6/2010	8/5/2011	364	-	8/5/2011	3/29/2012	237	-	1	No		-	-	1	-	601	
8*		3/29/2012	8/15/2012	139	-	8/15/2012	10/24/2012	70	-	1	No	10/24/2012		68	3	-	277	
9		8/9/2010	1/24/2012	533	-	1/24/2012	3/5/2012	41	-	0	No	3/5/2012	7/24/2012	141	-	4	715	-
10		8/12/2010	1/20/2011	161	-		-	-	0	No			-	-	5	161	-	
11		8/24/2010	9/29/2011	401	-	9/26/2011	6/25/2012	273	-	1	No		-	-	4	674	-	
12		9/7/2010	9/23/2010	16	-		-	-	0	No			-	-	6	16	-	
13		9/22/2010		-	831		-	-	0	No			-	-	2	-	831	
14		11/1/2010	12/15/2011	409	-		-	-	0	No			-	-	6	409	-	
15		11/12/2010	12/3/2010	21	-		-	-	0	No			-	-	6	21	-	
16		12/6/2010	1/6/2012	396	-	1/6/2012	8/29/2012	236	-	1	No		-	-	1	-	632	
17*		8/29/2012		-	124		-	-	0	No			-	-	1	-	124	
18		1/12/2011	12/7/2011	329	-		-	-	0	No	12/7/2011	6/7/2012	183	-	4	512	-	
19		3/10/2011	11/20/2011	255	-		-	-	0	No			-	-	6	255	-	
20		3/25/2011	7/28/2011	125	-		-	-	0	No			-	-	7	125	-	
21*		8/6/2012		-	147		-	-	0	No			-	-	1	-	147	
22		5/18/2011	9/1/2011	106	-		-	-	0	No	9/1/2011	12/1/2011	91	-	4	197	-	
23		5/26/2011	1/27/2012	246	-		-	-	0	No			-	-	4	246	-	
24		8/8/2011		-	511		-	-	0	No			-	-	1	-	511	

Current Status Codes:

- 1 RBS Case Open with Youth in Residential Group Care
- 2 RBS Case Open with Youth in "Bridge" Foster Care
- 3 RBS Case Open with Youth in Permanent Placement with RBS Aftercare Services
- 4 RBS Case Closed: Graduation
- 5 RBS Case Closed: Exit before Graduation due to Emancipation
- 6 RBS Case Closed: Exit before Graduation for Reason other than Emancipation
- 7 RBS Case Closed: Voluntary Closure
- 8 RBS Case Closed: AB 3632 Eligibility Ends

RBS DAYS OF CARE SCHEDULE
County Annual Report -- Section A, Question 2
(Revised June 2012)

COUNTY OF San Bernardino

List the youth who have been admitted to your RBS program since implementation and show how they have moved through the various stages of your program thus far (e.g. from the residential group care component, to "bridge" foster care, to reunification or another form of permanency).

Non-Profit Corp. Name: Victor Treatment Center **Program Number:** 0389.10.01 **Contact Person:** Kelly Cross
Period Covered: Activity through..... 12/31/2012 **Telephone Number:** 909-388-0174 **Date Completed:** 1-Mar-13

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S
Youth Enrolled		RBS Residential Group Care				RBS Community-Based "Bridge" Foster Care						RBS Aftercare in Permanent Placement, including Reunification				CURRENT STATUS		
Use Youth's Foreign Client Key Only; List in order of Date of Admission	Date Entered	Date Exited	Total Days Upon Exit	If Still In Group Care, Total Days To Date	Date Entered	Date Exited	Total Days Upon Exit	If Still In "Bridge" Foster Care, Total Days To Date	Number of RBS "Bridge" Foster Care Placements To Date	Did Child Incur Episodes For Crisis Stabilization?	Date Entered	Date Exited	Total Days Upon Exit	If Still In Aftercare or a Permanent Care Total Days To Date	Use Current Status Codes Below	For CLOSED Cases ONLY, Total Days In RBS	For OPEN Cases ONLY, Total Days In RBS	
1		8/19/2011	12/28/2011	131	-		-	-	0	No			-	-	6	131	-	
2		10/3/2011	4/20/2012	200	-	4/20/2012	-	255	1	No			-	-	2	-	455	
3		10/1/2011	11/21/2011	51	-		-	-	0	No			-	-	6	51	-	
4		10/14/2011	2/2/2012	111	-		-	-	0	No			-	-	6	111	-	
5		11/18/2011	1/18/2012	61	-		-	-	0	No			-	-	6	61	-	
6		12/9/2011	12/19/2011	10	-		-	-	0	No			-	-	6	10	-	
7		1/19/2012	3/24/2012	65	-		-	-	0	No			-	-	6	65	-	
8		1/12/2012	3/12/2012	60	-		-	-	0	No			-	-	6	60	-	
9		2/24/2012	3/3/2012	8	-		-	-	0	No			-	-	6	8	-	
10		2/24/2012	3/18/2012	23	-		-	-	0	No			-	-	6	23	-	
11		2/29/2012		-	306		-	-	0	No			-	-	1	-	306	
12		2/29/2012		-	306		-	-	0	No			-	-	1	-	306	
13		3/6/2012		-	300		-	-	0	No			-	-	1	-	300	
14		3/16/2012		-	290		-	-	0	No			-	-	1	-	290	
15		5/7/2012		-	238		-	-	0	No			-	-	1	-	238	
16		6/18/2012	8/15/2012	58	-		-	-	0	No	8/15/2012	11/28/2012	105	-	4	163	-	
17		6/18/2012		-	196		-	-	0	No			-	-	1	-	196	
18		9/5/2012		-	117		-	-	0	No			-	-	1	-	117	
19				-	-		-	-	-				-	-	-	-	-	
20				-	-		-	-	-				-	-	-	-	-	
21				-	-		-	-	-				-	-	-	-	-	
22				-	-		-	-	-				-	-	-	-	-	
23				-	-		-	-	-				-	-	-	-	-	
24				-	-		-	-	-				-	-	-	-	-	

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