

**Children's Medical Services (CMS) Branch
California Children's Services (CCS)**

Plan for Fiscal Year 2023-2024

For:

SISKIYOU COUNTY



Plan and Budget Required Documents Checklist

MODIFIED FY 2023-2024

County/City: SISKIYOU COUNTY / YREKA

Fiscal Year: 23-24

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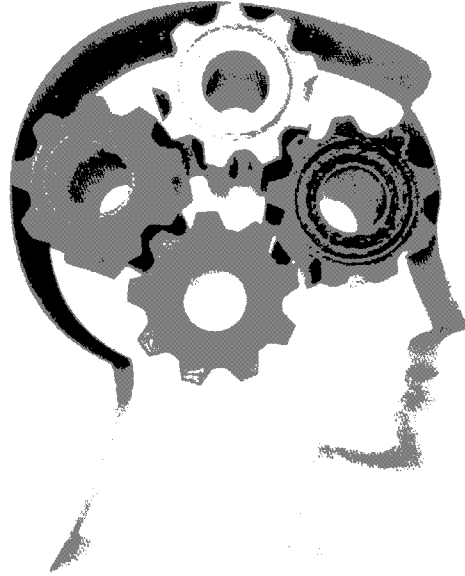
Plan and Budget Required Documents Checklist

MODIFIED FY 2023-2024

County/City: SISKIYOU COUNTY / YREKA

Fiscal Year: 23-24

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**AGENCY INFORMATION SHEET,
CERTIFICATION
STATEMENT,
AND
AGENCY DESCRIPTION**

Agency Information Sheet

County/City: SISKIYOU COUNTY /YREKA

Fiscal Year: 2023- 2024

Official Agency

Name: Siskiyou County	Address: 810 South Main Street
Health Officer: Aaron Stutz, MD	Yreka, CA 96097
Health Officer:	Email: astutz@co.siskiyou.ca.us

CMS Director (if applicable)

Name: Shelly Davis MN BSN PHN CCHP Director Public Health Division	Address: 810 South Main Street
Phone: 530/841-2140	Yreka, CA 96097
Fax: 530/841-4094	E-Mail: sdavis@co.siskiyou.ca.us

CCS Administrator

Name: Brenda Harris, PHN Deputy Director Public Health Div.	Address: 810 South Main Street
Phone: 530/841-2124	Yreka, CA 96097
Fax: 530/841-4075	E-Mail: bharris@co.siskiyou.ca.us

CHDP Director

Name: Shelly Davis MN-BSN, PHN CCHP Director Public Health Division	Address: 810 South Main Street
Phone: 530/841-2140	Yreka, CA 96097
Fax: 530/841-4094	E-Mail: sdavis@co.siskiyou.ca.us

CHDP Deputy Director

Name: Brenda Harris, PHN Deputy Director Public Health Div.	Address: 810 South Main Street
Phone: 530/841-2136	Yreka, CA 96097
Fax: 530/841-4094	E-Mail: bharris@co.siskiyou.ca.us

Clerk of the Board of Supervisors or City Council

Name: Laura Bynum	Address: 311 Forth St. Room 201
Phone: 530/842-8084	Yreka, CA 96097
Fax: 530/841-4110	E-Mail: lbynum@co.siskiyou.ca.us

Director of Social Services Agency

Name: Trish Barbieri Director of Social Services Division	Address: 818 South Main Street
Phone: 530/841-2750	Yreka, CA 96097
	E-Mail: tbarbieri@co.siskiyou.ca.us

Chief Probation Officer

Name: Mike Coley	Address: 805 Juvenile Lane
Phone: 530/841-4155	Yreka, CA 96097
Fax: 530/841-4157	E-Mail: Mike.Coley@siskiyouprobation.org

State of California—Health and Human Service Department of Health Care Services
Child Health and Disability Prevention Program

Certification Statement	County/City: Siskiyou	Fiscal Year: 2023-2024
<p>I certify that the CHDP Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 6 (commencing with Section 124025), Welfare and Institutions Code, Division 9, Part 3, Chapters 7 and 8 (commencing with Section 14000 and 14200), Welfare and Institutions Code Section 16970, and any applicable rules or regulations promulgated by DHCS pursuant to that Article, those Chapters, and that section. I further certify that this CHDP Program will comply with the Integrated Systems of Care Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CHDP Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further agree that this CHDP Program may be subject to all sanctions or other remedies applicable if this CHDP Program violates any of the above laws, regulations and policies with which it has certified it will comply.</p>		

Brenda Harris, Deputy Director	DocuSigned by: <i>Brenda Harris, Deputy Director</i> 2023	
CHDP/County Authorized Representative	Signature	Date
Ed Valenzuela, Siskiyou County Board Chair	DocuSigned by: <i>Ed Valenzuela</i>	9/6/2023
Local Governing Body Chairperson Name,	Signature	Date

State of California—Health and Human Service Department of Health Care Services
Health Care Program for Children in Foster Care

Certification Statement	County/City: Siskiyou	Fiscal Year: 2023-2024
<p>I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, including the Integrated Systems of Care Plan and Fiscal Guidelines Manual. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above.</p>		

Brenda Harris, Deputy Director	<small>DocuSigned by:</small> <i>Brenda Harris, Deputy Director</i> 2023 <small>256D2A4A84E5458</small>
HCPCFC/County Authorized Representative	Signature Date
Ed Valenzuela, Siskiyou County Board Chair	<i>Ed Valenzuela</i> 9/21/2023
Local Governing Body Chairperson Name,	<small>DocuSigned by:</small> <i>Ed Valenzuela</i> 9/21/2023 <small>5E178EA33A7143F</small> Signature Date

Certification Statement - California Children's Services (CCS)

County/City: SISKIYOU COUNTY / YREKA	Fiscal Year: 2023-2024
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I certify that the CCS Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 5, (commencing with Section 123800) and Chapters 7 and 8 of the Welfare and Institutions Code (commencing with Sections 14000-14200), and any applicable rules or regulations promulgated by DHCS pursuant to this article and these Chapters. I further certify that this CCS Program will comply with the Children's Medical Services (CMS) Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CCS Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.) and recipients of funds allotted to states for the Maternal and Child Health Services Block Grant pursuant to Title V of the Social Security Act (42 U.S.C. Section 701 et seq.). I further agree that this CCS Program may be subject to all sanctions or other remedies applicable if this CCS Program violates any of the above laws, regulations and policies with which it has certified it will comply.

DocuSigned by: <i>Brenda Harris, Deputy Director</i>	1/2/2024
Signature of CCS Administrator- Brenda Harris PHN	Date Signed

DocuSigned by: <i>Shelly Davis, Director Public Health</i>	1/2/2024
Signature of Director or Health Officer- Shelly Davis, MN BSN PHN CCHP Director of Public Health Division	Date Signed

Signature and Title of Other – Optional	Date Signed

I certify that this plan has been approved by the local governing body.	
Signature of Local Governing Body Chairperson- Michael N. Kobseff, Chair Board of Supervisors County of Siskiyou	Date Signed

ATTEST: LAURA BYNUM
Clerk, Board of Supervisors
By: _____
Deputy

Certification Statement - California Children's Services (CCS)

County/City: SISKIYOU COUNTY / YREKA	Fiscal Year: 2023-2024
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<small>DocuSigned by:</small> <i>Brenda Harris, Deputy Director</i>	1/2/2024
<small>238D284788E5F88</small> Signature of CCS Administrator- Brenda Harris PHN	Date Signed

<small>DocuSigned by:</small> <i>Shelly Davis, Director Public Health</i>	1/2/2024
<small>10712DF72B38408</small> Signature of Director or Health Officer- Shelly Davis, MN BSN PHN CCHP Director of Public Health Division	Date Signed

Signature and Title of Other – Optional	Date Signed

I certify that this plan has been approved by the local governing body.	
Signature of Local Governing Body Chairperson- Michael N. Kobseff, Chair Board of Supervisors County of Siskiyou	Date Signed

ATTEST: LAURA BYNUM
Clerk, Board of Supervisors
By: _____
Deputy

Certification Statement - California Children's Services (CCS)

County/City: SISKIYOU COUNTY / YREKA	Fiscal Year: 2023-2024
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<small>DocuSigned by:</small>	
<i>Brenda Harris, Deputy Director</i>	1/2/2024
<small>Signature of CCS Administrator- Brenda Harris PHN</small>	<small>Date Signed</small>

<small>DocuSigned by:</small>	
<i>Shelly Davis, Director Public Health</i>	1/2/2024
<small>Signature of Director or Health Officer- Shelly Davis, MN BSN PHN CCHP Director of Public Health Division</small>	<small>Date Signed</small>

<small>Signature and Title of Other – Optional</small>	<small>Date Signed</small>

I certify that this plan has been approved by the local governing body.	
<small>Signature of Local Governing Body Chairperson- Michael N. Kobseff, Chair Board of Supervisors County of Siskiyou</small>	<small>Date Signed</small>

ATTEST: LAURA BYNUM
 Clerk, Board of Supervisors
 By: _____
 Deputy

Agency Description

The Siskiyou County California Children's Services (CCS), Foster Care and Child Health and Disability Prevention (CHDP) Programs are both located in the Public Health Division. CCS, Foster Care and CHDP are under the direction of the Health Officer and the Director of Public Health. Public Health Nurses (PHNs) oversee these programs and work together to cross refer and coordinate case management. The Public Health Division is part of Health and Human Services Agency. The Public Health Division houses Public Health and Inmate Health.

See the attached diagram for interdepartmental relationship. The Director of the Public Health Division is Shelly Davis MN, BSN, PHN, CCHP. Aaron Stutz, M.D. is the Health Officer who oversees the medical piece of the Children's Medical Services (CMS) Programs.

Through the CHDP Program, children and youth can obtain regular preventive health assessments to identify any health problems. The PHN oversees the nurse who works to ensure that eligible children and youth receive health services. Target populations include children on Medi-Cal up to age 21 and children to age 19 at or below 200% of the federal poverty level.

The CCS Program financially assists income eligible families to access necessary medical care for children with medically eligible conditions. CCS is part of the Whole Child Model in conjunction with Partnership Health Plan and private insurance to provide case management services for CCS eligible children. The CCS case manager follows up on direct referrals received, including those from Foster Care and CHDP.

The Foster Care program works in coordination with CCS, CHDP, Child Protection Services and Probation to ensure and assist children in foster care receive their scheduled medical appointments and provide the necessary medical case management.

Affiliation and integration of CCS, Foster Care and CHDP within the county structure is described by MOUs between the Public Health Department and Human Services, Probation, and WIC. There is also a significant relationship with the schools through the school nurses, even though a formal MOU has not been established with the schools.

Siskiyou County Description

Siskiyou County is located inland in Northern California adjacent to the Oregon Border. Siskiyou County is about 300 miles north of Sacramento. Siskiyou County extends 70 miles southward from the Oregon border and stretches 120 miles East to West. As the fifth largest county in California by area, Siskiyou County features spectacular natural beauty and scenic cities and towns including Yreka, Mt. Shasta, Weed, Dunsmuir, McCloud, and Tulelake as well as Butte Valley, Scott Valley, Shasta Valley and the Klamath River Corridor. Siskiyou County's population is 43,830. Approximately 50% of the County population live in unincorporated areas. The age and sex distribution of the county are: 20.3% under 18 years of age, 4.8% are under 5 years of age and 26.9% are 65 year and over, 50% female, 50% male.

The Annual Statistics have remained the essentially the same since the 22/23 report, for the population both in population diversity and economically.

Eighty two percent of the Siskiyou County population is Caucasian, 13.9% Hispanics, 3.37% Native American, 1.7% are African American and 1.5% Asian.

Government is the largest industry in the county. Local government employment includes local education, city, county and federal government, and Indian tribal government. Other industry in Siskiyou County includes retail trade, transportation, education, health related services, construction and utilities. Leisure and hospitality also make up a significant portion of employers. Within this industry, most of the jobs were in the food services and drinking places component. As of September 2023 the unemployment rate for the county was 5.4%

Siskiyou's largest growth industries include; Government, Healthcare, Retail Trade, Accommodations & Food Service and Construction.

Information provided by California EDD and the United States Census Bureau.

Children’s Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency Department of Health Care Services - Children's Medical Services

Incumbent List - California Children’s Services

For FY 2023 – 24 complete the table below for all personnel listed in the CCS budgets. Use **the same** job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

Identify Nurse Liaison positions using: **MCMC** for Medi-Cal Managed Care; **HF** for Healthy Families; **IHO** for In-Home Operations, and; **RC** for Regional Center.

County/City: **Siskiyou County / Yreka** Fiscal Year: **2023 - 24**

Job Title	Incumbent Name	FTE % on CCS Admin Budget	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
Program Administrator	Brenda Harris, PHN	.10	No	No
LVN	Jennifer Hathaway, LVN 2	.95	No	No
Community Outreach Coordinator	Taryn Johnson, COC	.10	No	No

Incumbent List - Child Health and Disability Prevention Program

For FY 23-24, complete the table below for all personnel listed in the CHDP budgets. Use **the same** job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City: **SISKIYOU COUNTY / YREKA**

Fiscal Year: **2023-24**

Job Title	Incumbent Name	FTE % on CHDP No County/ City Match Budget	FTE % on CHDP County/City Match Budget	FTE % in Other Programs (Specify)	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
LVN 2	Vacant	45%	0	45% CHDP 55% other PH	No	No
Community Outreach Coordinator	Taryn Johnson	15%	0	15% CHDP 10% CCS 75% other PH	No	No
Public Health Deputy Director	Brenda Harris PHN	2%	0	10% CCS 2% CHDP 88% other PH	No	No

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency Department of Health Care Services - Children's Medical Services

Incumbent List - Health Care Program for Children in Foster Care

For FY 2023-2024, complete the table below for all personnel listed in the Health Care Program for Children in Foster Care HCPCFC Base, Psychotropic Medication Monitoring & Oversight (PMM&O), Caseload Relief Augmentation (Caseload Relief), and applicable Base County-City budgets. Use **the same** job titles for the incumbent list, budget and the organizational chart. Total percent for an individual incumbent should **not be over 100 percent**.

The Welfare and Institutions Code requires that the services provided to foster children through the HCPCFC are performed by a Public health Nurse (PHN). Some counties may experience difficulty recruiting and hiring a PHN into the role. A Registered Nurse (RN) without a PHN certificate may only be used in the program with documentation justifications, (to the extent feasible) a commitment for the RN to obtain the PHN certificate, and a waiver approved by the ISCD and CDSS. Local program that will need to hire an RN into the role must contact this office immediately to request a waiver form and instruction. Please note, contracted nurses (e.g., hired through an agency) may not be used in the HCPCFC program.

County/City: SISKIYOU COUNTY / YREKA

Fiscal Year: 2023 - 2024

Job Title	Incumbent Name	FTE % on HCPCFC Base Budget	FTE % on HCPCFC Caseload Relief Budget	FTE % on HCPCFC PMM&O Budget	FTE % in Other Programs (Specify)	FTE% on Base County-City/Federal Budget	Incumbent is PHN Certified (Y/N)
Senior PHN	Linda Roseland PHN	23%	10%	8%	59%	0	Y
Community Outreach Coordinator	Taryn Johnson	0	10%	0	90%	0	N

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DUTY STATEMENTS





SISKIYOU COUNTY

Health and Human Services Agency

Public Health Division

810 South Main Street
Yreka, CA 96097
(530) 841-2134 / Fax (530) 841-4094

AARON STUTZ, M.D. FAAEM CCHP
Public Health Officer

SHELLY DAVIS, MN BSN-RN PHN CCHP
Director of Public Health Division
Director of Correctional Health Services

Brenda Harris, PHN
CCS Program Manager
Duty Statement 10% FTE

The CCS Program Manager, Public Health Nurse (PHN) is classified as Skilled Professional Medical Personnel (SPMP). Under the supervision of the Director of Public Health Division, responsibilities include overall management of the CCS program in accordance with State and Federal regulations. The Program Manager performs a variety of public health nursing duties focused on the concepts of prevention, treatment, education, and rehabilitation. The PHN is expected to exercise independent and professional judgment in dealing with the complex needs and programs administered at the county level and a working familiarity of health care resources in the community. In addition to the Siskiyou County Senior Public Health Nurse job description, duties shall include:

1. Referral of potential clients: Medi-Cal, Partnership Health Plan recipients and income-eligible recipients. Outreach shall be conducted through all available avenues. (Time 25%)
2. Assists in determination of CCS client eligibility for referral to other specific health department programs; initiates case management plans to coordinate patient care; reviews medical reports and utilizes other pertinent information to determine need for additional medical/nursing services and any necessary follow-up services; ensures referral to appropriate community resources; assists clients in obtaining appropriate referrals and services for conditions not directly related to their CCS eligibility. (Time 25%)
3. Liaison and coordination with community agencies (Regional Centers, Education, Department of Social Services, Providers, Hospitals, Vendors) relating to the needs of CCS clients. (Time 25%)
4. Provides skilled professional medical expertise in developing and conducting training on program eligibility requirements and benefits for providers serving the patient population to ensure appropriate referral and follow-up; provides program information to providers and assists in recruitment of new providers in order to meet the needs of the patient population; acts as a consultant to community groups and participates in health planning and educational training sessions. (Time 24%)
5. Personnel management, including preparation of annual CMS Plan, implementation of policies and regulations, direction of the LVN and Public Health Assistant regarding medical case management activities. (Time 1%)



SISKIYOU COUNTY

Health and Human Services Agency

Public Health Division

810 South Main Street
Yreka, CA 96097
(530) 841-2134 / Fax (530) 841-4094

AARON STUTZ, M.D. FAAEM CCHP
Public Health Officer
SHELLY DAVIS, MN BSN-RN PHN CCHP
Director of Public Health Division
Director of Correctional Health Services

Jennifer Hathaway, LVN
CCS Program Case Manager
Duty Statement .95 FTE

Under the direction of the CCS Program Manager, Public Health Nurse, the LVN performs a variety of general office work. The LVN will provide clerical support for the Skilled Professional Medical personnel (SPMP). In addition to the Siskiyou County LVN job description, duties shall include:

1. Case finding of potential clients: Medi-Cal and income-eligible recipients. Outreach shall be conducted through all available avenues. Also determination of financial and residential eligibility through conducting interviews of applicant/client and the family. Interagency coordination and appropriate community resource referrals to: CHDP, Far Northern Regional Center, WIC and other medical specialties, etc. (Time 12%)
2. Provide orientation to the applicant/client and the family to the CCS program including such areas as need for prior authorization, referrals to other financial agencies; Medi-Cal, SSI, GHPP, etc. Provides direct family contact to assess family compliance, provides technical assistance to the family relating to the Child's CCS eligible medical condition, assistance with the child/family accessing medical care and coordination with community based and out of county services. (Time 30%)
3. Maintain a date-file tracking system to insure timely response and follow-up on applications to the programs, family's compliance with financial/residential interview appointments, obtain needed/required medical reports. (Time 10%)
4. Answers and screens incoming calls from providers and families and refers to appropriate SPMP; schedules appointments for professional staff; greets clients and the general public; provides general program information to callers and walk-ins. (Time 7%)
5. Typing, including letters drafted by SPMP to families and providers of services; budgets and invoices; general program correspondence and documents. Also assists with preparation of annual CCS Plan. (Time 5%)
6. Participates in patient care conferences, team conferences, and IFSP/IEP conferences in relation to complex medical cases--organization and coordination of Medical Therapy Conference participants and vendors. (Time 2%)
7. Photocopies medical reports, bills, and various other correspondences for SPMP; maintains filing system for case records. Processes incoming mail (date stamps, sorts, and distributes to appropriate staff); prepares and sends outgoing mail. (Time 7%)
8. Assists with medical case management duties including: initiates case management plans to coordinate patient care, medical record review to determine follow-up needs of the client and coordination with parents and providers to ensure the follow-up care occurs. Also ensures referrals are made to appropriate community resources. (Time 17%)
9. Attends meetings as appropriate; performs other duties as assigned. (Time 5%)
10. Paid time off, i.e., vacation, breaks, sick time, etc. (Time 5%)



SISKIYOU COUNTY

Health and Human Services Agency Public Health Division

810 South Main Street
Yreka, CA 96097
(530) 841-2134 Fax (530) 841-4091

AARON STUTZ, M.D. FAEM CCHP
Public Health Officer

SHELLY DAVIS, MN BSN-RN PHN CCHP
*Director of Public Health Division
Director of Correctional Health Services*

Taryn Johnson, COC
CCS Community Outreach Coordinator
Duty Statement: CCS 10% FTE (100% non-enhanced)

Under the direct supervision of the CCS Program Manager, performs routine administrative duties related to the CCS program.

1. Assist with the receipt of CCS paperwork from clients along with other administrative duties
2. Collect Registration and Enrollment fees and write receipts
3. Assist CCS Program Manager with the annual CMS Plan



SISKIYOU COUNTY

Health and Human Services Agency

Public Health Division

810 South Main Street
Yreka, CA 96097
(530) 841-2134 / Fax (530) 841-4094

AARON STUTZ, M.D. FAAEM CCHP

Public Health Officer

SHELLY DAVIS, MN BSN-RN PHN CCHP

Director of Public Health Division

Director of Correctional Health Services

Vacant, LVN

CHDP Program Coordinator

Duty Statement - CHDP.45 FTE: (95% Enhanced, 5% Non-enhanced)

Under the direction of the Deputy Director and/or the Senior PHN, the RN is classified as a Skilled Professional Medical Personnel (SPMP). Responsibilities include overall administration of the CHDP program in accordance with State and Federal regulations. The program coordinator performs a variety of public health nursing duties focused on the concepts of prevention, treatment, education, and rehabilitation. Under the direction of the Deputy Director, the RN is expected to exercise professional judgment in dealing with the complex needs of children and youth participating in the local program. Additionally, the RN must have a thorough and detailed knowledge of the laws, regulations, and procedures governing the health programs administered at the county level, and a working familiarity of health care resources in the community. In addition to the Siskiyou County LVN job description, duties shall include:

1. Provides skilled professional medical expertise in developing and conducting training on program eligibility requirements and benefits for providers serving the patient population to ensure appropriate referral and follow-up; provides program information to providers and assists in the recruitment of new providers in order to meet the needs of the patient population; acts as a consultant to community groups and participates on health planning and educational committees; attends professional and educational training sessions (75% of time; codes 2,6,8,9)
2. Goals of the Child Health and Disability Prevention-Lead Poisoning Prevention (CHDP-LPP) is for the RN to conduct a review of medical records to verify that providers are following the established health care standards for blood testing of children for lead exposure. (2% of time; code 2)
2. Uses skilled medical expertise in the review of PM160s; providing care coordination for eligible children/youth coded 4 and/or 5, per State CHDP guidelines (4%; code 2)
3. Coordinates with multiple agencies throughout county and state to coordinate or establish services. Promotes CHDP network and childcare standards (5% of time; code 1)
4. Maintains and utilizes current knowledge of community service agencies, developing and strengthening those working relationships (2% of time; code 8)
5. Participates in Health Department Staff Meetings (3% of time; codes 5, 8, & 9)
6. Provider relations, including recruitment, maintenance and audits (3% of time; code 3)
7. Performs additional duties as assigned by the Deputy Director, Senior PHN or State Staff (3% of time; codes 3, 5, 6, 8, & 9)
8. Paid time off; holidays, vacation, break time, sick leave (3% of time; code 12)



SISKIYOU COUNTY

Health and Human Services Agency

Public Health Division

810 South Main Street
Yreka, CA 96097
(530) 841-2134 Fax (530) 841-4094

AARON STUTZ, M.D., FFAEM CCHP
Public Health Officer

SHELLY DAVIS, MN BSN-RN PHN CCHP
*Director of Public Health Division
Director of Correctional Health Services*

Taryn Johnson, Community Outreach Coordinator
CHDP Program
Duty Statement .15 FTE: (100% Non-enhanced)

Under general supervision of the CHDP Deputy Director, perform routine administrative duties and general support activities. Assist Deputy Director with the CHDP Annual Budget Report, organize, maintain accurate records, and give provider, if required, informational support. Health Assistant must have a general understanding of the eligibility requirements for the CHDP program and be able to effectively communicate those requirements to the targeted populations.

1. Provide general program information to potential Medi-Cal and income eligible clients
2. Maintain contact with provider offices and give general support
3. Assist Program Coordinator with provider quality assurance visits and new provider training (billing questions, CHDP rules and regulations)
4. Submit provider status changes: provider enrollment, deactivation and provider address changes, etc.
5. Coordinate annual audiometer calibration — this is State mandated. Annual calibration ensures provider compliance with CHDP State audiometric regulations
6. Track CHDP Provider Notices on 4504 distribution and file
7. Order PM 160's for Providers
8. Enter all PM 160s onto Excel spreadsheet, including those coded 4, and 5 for follow-up
9. Input, file and maintain PM 160's for the Lead Program and Foster Care
10. Update annual CHDP eligibility notices with the new federal poverty guidelines and distribute to providers



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Public Health Officer

SHELLY DAVIS, MS BSN-RN PHN CCHP
Director of Public Health Division
Director of Correctional Health Services

Brenda Harris PHN
Deputy Director of Public Health Division
CHDP Deputy Director
Duty Statement: CHDP .02 FTE (100% non-enhanced)

The Deputy Director of Public Health Division directs and reviews the work of all assigned personnel and is classified as Skilled Professional Medical Personnel (SPMP).

1. Assure that CHDP funded personnel perform only allowable functions, audit trail is maintained for all expenditures, and staff completes time studies a minimum of one month a quarter and retain records on file.
2. Personnel management including supervision of CHDP Program Manager Senior PHN, CHDP Program Coordinator and Public Health Assistant.
3. Review program standards, regulations, policies, procedures and health-related materials.



SISKIYOU COUNTY

Health and Human Services Agency Public Health Division

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AARON STUTZ, M.D., FAEEM CCHP

Public Health Officer

SHELLY DAVIS, MN BSN-RN PHN CCHP

Director of Public Health Division

Director of Correctional Health Services

Linda Roseland, PHN

Health Care Program for Children in Foster Care Base (HCPCFC Base -100% Enhanced) 23%

Caseload Relief 10%

Psychotropic Medication Monitoring and Oversight (PMM&O 90% Enhanced / 0% Non-Enhanced) 8%

Duty Statement - 41% FTE

Under the direction of the CHDP Deputy Director and in support of the Foster Care Program, the Foster Care RN position will perform a variety of nursing duties focused on the concepts of health care coordination for children in foster care. The RN is expected to exercise independent, professional judgment in dealing with the complex needs and problems faced by children in foster care, their families and services providers. Additionally, the RN must have a thorough and detailed knowledge of the laws, regulations, and procedures governing other health programs available to Medi-Cal participants. Examples of duties and responsibilities are listed below. Due to the time allocation, the RN will have an office in the Public Health Department and at the CPS office. Guidance and medical oversight will be provided by the Public Health Deputy Director.

Administrative Medical Case Management

1. Provide, monitor and evaluate health care coordination services required by children in foster care on probation
2. Monitor a child's treatment progress and advise substitute care providers of the rationale and importance of timely medical intervention
3. Participate in case conferences or multi-disciplinary teams to review client health needs and treatment plans
4. Interpret results of health assessments, medical and dental evaluations sent by social worker, probation officer, provider or professional staff of another agency



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Director of Public Health Division

Director of Correctional Health Services

Taryn Johnson, Community Outreach Coordinator
Health Care Program for Children in Foster Care (HCPCFC)
Duty Statement: HCPCFC: Caseload Relief .10 FTE (100% non-enhanced)

Under the direct supervision of the Foster Care nurse, perform routine administrative duties related to the HCPCFC program.

1. Input, file and maintain Foster Care follow-up PM160 s
2. Support HCPCFC Nurse with regional activities related to HCPCFC meetings
3. Track and forward PM160s to CPS Foster Care RN



PERFORMANCE MEASURES

CCS Performance Measure 1 – Medical Home

Children enrolled in the CCS Program will have documented Medical homes/primary care providers. The goal is to have 100% compliance.

- Definition:** Children in the CCS program will have a designated primary care physician and/or a physician who provides a medical home.
- Numerator:** The total number of children with a completed field with identification of a primary care physician and/or a physician that provides a medical home.
- Denominator:** The total number of children in the local CCS county program
- Data Source:** Sample of 100 charts or 10% of caseload if caseload under 1,000.

Reporting Form:

Number of children with a primary care physician/ Medical Home <small>(Numerator)</small>	Number of children in the local CCS program <small>(Denominator)</small>	Percentage of compliance
218	238	91%

* Note: If county percentage of compliance is under 80%, counties need to submit with the annual report a plan for how they will work to improve this result.

CCS Performance Measure 2 – Determination of CCS Program Eligibility

Children referred to CCS have their program eligibility determined within the prescribed guidelines per Title 22, California Code of Regulations, Section 42000, and according to CMS policy. Counties will measure the following:

Numerators:

- a. Medical eligibility within five working days of receipt of all medical documentation necessary to determine whether a CCS-eligible condition exists.
- b. Residential eligibility within 30 days of receipt of documentation needed to make the determination.
- c. Financial eligibility within 30 days of receipt of documentation to make the determination.

Denominator: Number of CCS unduplicated new referrals to the CCS program assigned a pending status in the last fiscal year.

Data Source: 10% of the county CCS cases or 100 cases (which ever number is less).

Reporting Form:

MEDICAL ELIGIBILITY	Number of referrals determined medically eligible within 5 days (Numerator)		Number of new unduplicated referrals (Denominator)		Percentage of compliance	
Medical eligibility determined within 5 days of receipt of all necessary documentation	18		73		24%	
PROGRAM ELIGIBILITY	Number of cases determined eligible within 30 days of receipt of documentation needed to make the determination (Numerator)		Number of new unduplicated referrals (Denominator)		Percentage of compliance	
Financial eligibility determined within 30 days	MC/OTLCP 44	CCS only 26	MC/OTLCP 44	CCS only 129	MC/OTLCP	CCS 100%
Residential eligibility determined within 30 days	70		73		95%	

Average number of days from first referral to client eligibility determination= 96

Reporting Form - Part A:

Category selected (cardiac, pulmonary, etc.)	Number of children with annual team report in client's medical records (Numerator)	Number of children with SCC authorization (Denominator)	Percentage of compliance
Diabetes	13	0 (WCM)	0%

Reporting Form - Part B:

Category selected (cardiac, pulmonary etc.)	Number of children with authorization to SCC (Numerator)	Number of children with eligible medical conditions that require an authorization to a SCC (Denominator)	Diagnostic Code Chosen	Percentage of compliance
Diabetes	0 (WCM)	15	E10.65, E10.9, E11.65, E11.69, E11.9, E23.2	0%

All CCS cases have WCM PHP

- * Counties may select four (4) to five (5) specific medical conditions as outlined in the SCC NL to use as the basis for clients that should have a referral to a CCS SCC.

Transition Planning Checklist

Transition Documentation	YES	NO	Comments
1. Client has an identified need for long-term transition planning.	X		
2. Transition planning noted in child's medical record.	X		
3. Transition planning noted in Special Care Center (SCC) reports		X	Not usually noted by the SCC
4. Vocational Rehab noted in child's reports.		X	Not usually noted
5. Adult provider discussed or identified for children 17 years of age or older.	X		Usually discussed around 18 years old
6. Transition planning noted in SELPA for those children that are in the MTP		X	Unknown. No access to SELPA records

* Note: Not all of the items in the Checklist will be applicable for each chart review.

Reporting Form:

Number of CCS charts reviewed	45	Number with transition planning	45	Percentage of compliance	100%
Number of MTP charts reviewed	7	Number with transition planning	7	Percentage of compliance	100%

Transition Planning Definition: Children, 14 years and older who are expected to have chronic health conditions that will extend past the twenty-first birthday will have documentation of a biannual review for long term transition planning to adulthood.

We don't do transition planning for the 14 and 16 year olds due to limited staff time. In the past when we did the 14 and 16 year olds, this created confusion for the parents, providers and patients. However we do transition planning for the 17, 18, 19 and 20 year old.

CCS Performance Measure 5 – Family Participation

The degree to which the CCS Program demonstrates family participation.

Definition: This measure is evaluated based on each of the following four (4) specific criteria that documents family participation in the CCS program. Counties need to indicate the score based on the level of implementation.

Checklist documenting family participation in the CCS program	Yes	No	Comments
1. Family members are offered an opportunity to provide feedback regarding their satisfaction with the services received through the CCS program by participation in such areas as surveys, group discussions, or individual consultation.	X		Our goal is to provide for individual consultation when issues arise.
2. Family members participate on advisory committees or task forces and are offered training, mentoring and reimbursement when appropriate.		X	Referrals go to the Family Advisory Committee (FAC) and Family Voices (we currently have 1 parent participant)
3. Family members are participants of the CCS Special Care Center services provided to their child through family participation in SCC team meeting and/or transition planning.	X		We see this mostly with the Endocrine Center diabetic kids, Cleft Palate Panel and GI Center kids
4. Family advocates, either as private individuals or as part of an agency advocating family centered care, which have experience with children with special health care needs, are contracted or consultants to the CCS program for their expertise.	X		-Far Northern Regional Center -Family Advisory Committee -Family Voices

Reporting Form:

Criteria	Performing (25% for each criteria)	Not Performing	
1. Medical Home	91%	9%	22.75%
2. CCS Program Eligibility	24%	76%	6%
3. Special Care Center	0%	100%	0%
4. Transitional	100%	0%	25%
Total	100%		53.75%

CHDP Performance Measure 1 - Care Coordination

The degree to which the local CHDP program provides effective care coordination to CHDP eligible children.

Definition: CHDP health assessments may reveal condition(s) requiring follow-up care for diagnosis and treatment. Effective CHDP care coordination is measured by determining the percentage of health condition(s), coded 4 or 5, where follow-up care is initiated¹ within 120 days of local program receipt of the PM 160

Numerator: Number of conditions, coded 4 or 5, where the follow-up care was initiated within 120 days of receipt of the PM 160.

Denominator: Total number of conditions, coded 4 or 5, on a PM 160, excluding children lost to contact.

Data Source: Local program tracking system.

Reporting Form:

Element	Number of conditions coded 4 or 5 where follow-up care was initiated (Numerator)	Total number of conditions coded 4 or 5, excluding children lost to contact (Denominator)	Percent (%) of conditions where follow-up care was initiated within 120 days
Conditions found on children eligible for fee-for-service Medi-Cal that required follow-up care	0	0	0%
Conditions found on children eligible for State-funded CHDP services only (Aid code 8Y) that required follow-up care	0	0	N/A

- **Data obtained from PM 160's sent to local program by enrolled providers**
 No PM 160's have been received over this FY 22-23
 Local program experienced staffing shortage due to COVID19
- **Continuing to educate/ encourage providers to continue providing the local program with information on FFS population**

¹ Centers for Medicare and Medicaid Services, Publication #45, the State Medicaid Manual, Chapter 5 EPSDT, Section 5310 A

CHDP Performance Measure 2 - New Provider Orientation

The percentage of new CHDP providers with evidence of quality improvement monitoring by the local CHDP program through a New Provider Orientation.

Definition: The number of new CHDP providers (i.e., M.D., D.O., N.P., P.A.) added within the past fiscal year who were oriented by the local program staff.

Numerator: The number of new CHDP providers who completed an orientation within the past fiscal year.

Denominator: The number of new CHDP providers in the county or city (local program) added within the past fiscal year.

Data Source: Local program tracking system.

Reporting Form:

Number of New Providers who Completed Orientation (Numerator)	0
Number of New Providers (Denominator)	0
Percent (%) of New Providers Oriented	0%

CHDP Provider Training

Provider	Provider Location	Date of Orientation	Number of Licensed Staff in Attendance	Number of Non-Licensed Staff in Attendance
1.				
2.				
3.				
4.				

- To avoid duplication of services, provider trainings will occur with site visits, focusing on FFS population
- Future provider trainings will focus on the implementation of new CHDP activities
- Provider files are kept by the local program- information obtained by enrolled providers with annual update request

CHDP Performance Measure 3 - Provider Site Recertification

The percentage of CHDP provider sites (excludes newly enrolled providers) who have completed recertification within the past fiscal year. Provider site visits may occur for other reasons. These can be documented for workload activities. The purpose of this performance measure is to ensure that all providers are recertified at least once every three (3) years. This performance measure is a benchmark to ensure that providers are recertified using the Facility and Medical Review Tools. These tools ensure that providers maintain CHDP standards for health assessments.

Definition: An office visit which includes a medical record review and a facility review or Critical Element Review with a Managed Care Plan.

Numerator: The number of CHDP provider sites who have completed the Recertification within the past fiscal year using the facility review tool and medical record review tool.

Denominator: The number of active CHDP provider sites in the county/city due for recertification within the fiscal year.

Data Source: Local program tracking system.

Reporting Form:

Number of Completed Site Recertifications (Numerator)	4
Number of Active CHDP Provider Sites Due for Recertification (Denominator)	5
Percent (%) with Completed Recertifications	80%

Other reasons for a provider site visit:

(Other reasons for a provider site visit by local program. This identifies workload.)

Other reasons for provider site visits:	Number of Visits
1. Provider change in location or practice	0
2. Problem resolution such as, but not limited to, billing issues, parental complaints, facility review and/or other issues. ²	0
3. Medical record review.	0
4. Office visits for CHDP updates or in-service activities	4
5. Other Please Specify:	N/A

- To avoid duplication of services, site reviews are being conducted after the managed care plan completes theirs, focusing on the Critical Elements and Medical Record Review
- Currently, most enrolled providers are seeing less than 10% FFS population
- Site reviews are being completed at the 5 year interval as discussed in CHDP meetings

² CHDP Provider Manual: Program, Eligibility, Billing and Policy. California Department of Health Care Services. Child Health & Disability Prevention (CHDP) Program. See website for current updates.
 Local Program Guidance Manual Chapter 10: Problem Resolution and/or Provider Disenrollment. California Department of Health Care Services. Child Health & Disability Prevention (CHDP) Program. May 2005. Both references available at <http://www.cdph.ca.gov/Programs/OPA/Pages/NR050501.aspx>

CHDP Performance Measure 4 - Desktop Review: Dental, Lead

Within the past fiscal year, identify the percentage of PM 160s with documentation indicating compliance with the CHDP Periodicity Schedule and Health Assessment Guidelines. Local programs may choose to evaluate the same provider sites over the 5-year Performance Measure cycle, or select different provider sites each year.

Definition: A targeted desktop review for three high volume providers within the county/city by determining the percent of PM 160s that have documentation for:

- Referral to a dentist at 1 year exam (12-14 months of age)
- Lead testing or a referral for the test at 1 year exam (12-14 months of age)

Numerator: The number of PM 160 elements recorded correctly per selected providers for the specific ages.

Denominator: The total number of PM 160s reviewed per selected providers for the specific ages.

Data Source: Local program tracking system.

Reporting Form:

Provider	Dental Referral			Lead Test or a Referral		
	Number of PM 160s w/ Dental at 1 year exam (Numerator)	Total PM 160s Reviewed (Denominator)	Percent (%) Compliance	Number of PM160s w/ Lead Test or Referral at 1 year exam (Numerator)	Total PM 160s Reviewed (Denominator)	Percent (%) Compliance
1. N/A	0	0	0%	0	0	0%
2. N/A	0	0	0%	0	0	0%
3. N/A	0	0	0%	0	0	0%

- No PM160s were received, as they are no longer in use.

Reporting Form for Performance Measure 5 – Desktop Review: BMI

Provider	BMI percentile recorded on PM 160s for children ages 2 (two) and older			If BMI percentile is < 5 %, 85 - 94 %, or ≥ 95 %, abnormal weight status category and/or related diagnosis listed in Comments Section		
	Number of PM 160s with BMI %ile recorded (Numerator)	Number of PM 160s reviewed (Denominator)	Percent (%) Compliance	Number of PM 160s with abnormal weight status category/ diagnosis in Comments (Numerator)	Number of PM 160s with abnormal weight status reviewed for diagnosis and follow-up (Denominator)	Percent (%) Compliance
1. N/A	0	0	0%	0	0	0%
2. N/A	0	0	0%	0	0	0%
3. N/A	0	0	0%	0	0	0%

- No PM160s received for FY 22-23
- No FFS charts to review

CHDP Performance Measure 6 – County/City Use of Childhood Obesity Data

1. Childhood obesity data shared with CHDP Providers to inform about overweight and obesity prevalence rates: <i>(If yes, underline all that apply)</i>	YES	NO
Presentations, in-services, trainings		X
Newsletters, media outreach, reports		X
Provide educational and resource materials related to healthy eating/active living	X	
2. Childhood obesity data shared to support local assistance grants and implementation of multi-sector policy strategies to create healthy eating and active living community environments (Goal 3, California Obesity Prevention Plan 2010): <i>(If yes, underline all that apply)</i>		
Academic: Universities, Academic Institutions, Educators and Researchers Other <i>(Please specify)</i>		X
Community Coalitions/Committees: Health Advisory Committee, Health Collaboratives/Coalitions Other <i>(Please specify)</i>		X
Community Planning: City Planners, County Land Use Staff, Built Environmental Groups Other <i>(Please specify)</i>		X
Community Programs: Faith-based Groups, YMCA/YWCA, After School programs, Parks and Recreation programs, Child Care, University Cooperative Extension Other <i>(Please specify)</i>		X
Health Care: Managed Care Health Plans and Insurers, Hospitals, CCS Program/Special Care Centers, Medical Provider Groups, Medical Societies, Health Associations Other <i>(Please specify)</i>		X
Policy Makers: County Board of Supervisors, City Councils, Community Planners, Legislators Other <i>(Please specify)</i>		X
Projects or Funding Entities: First Five Commission, Public and Private Foundations/Endowments/Grants Other <i>(Please specify)</i>		X
Public Health Programs: WIC, Foster Care, MCAH, Nutrition Network Funded Projects, Health Officers, Epidemiologists, Program Directors Other <i>(Please specify)</i>		X
Schools: School Health Nurses, School Health Coordinators, County Office of Education, Elementary, Junior High and High Schools, Head Start, other preschool programs, student groups and parent groups Other <i>(Please specify)</i>		X

HPCFC Performance Measure 1 - Care Coordination

The degree to which the local HPCFC provides effective care coordination to CHDP eligible children.

Definition: CHDP health assessments may reveal condition(s) requiring follow-up care for diagnosis and treatment. Effective HPCFC care coordination is measured by determining the percentage of health condition(s) coded 4 or 5 where follow-up care is initiated within 120 days of local program receipt of the PM 160.

Numerator: Number of conditions coded 4 or 5 where the follow up care was initiated within 120 days of receipt of the PM 160.

Denominator: Total number of conditions coded 4 or 5 on a PM 160, excluding children lost to contact.

Reporting Form:

Number of conditions coded 4 or 5 where the follow-up care was initiated within 120 days of receipt of the PM 160. (Numerator)	0
Total number of conditions coded 4 or 5 on a PM 160, excluding cases lost to no contact. (Denominator)	0
Percent of conditions coded 4 or 5 where the client received follow-up care within 120 days of receipt of the PM 160.	0

Data Source: Child Welfare Services Case Management System (CWS/CMS), and county specific data for Probation Department

-PM160s are no longer in use.

HCPCFC Performance Measure 2 - Health and Dental Exams for Children in Out- of-Home Placement

The degree to which the local HCPCFC program ensures access to health and dental care services for eligible children according to the CHDP periodicity schedule.

Definition: This measure is based on characteristics that demonstrate the degree to which the PHN in the HCPCFC facilitates access to health and dental services as evidenced by documentation of a health and dental exam in the Health Education Passport.

Numerator 1: Number of children in out-of-home placement with a preventive health exam, according to the CHDP periodicity schedule documented in the Health and Education Passport, and

Numerator 2: Number of children in out-of-home placement with a preventive dental exam, according to the CHDP dental periodicity schedule documented in the Health and Education Passport.

Denominator: Number of children in out-of-home placement during the previous fiscal year supervised by Child Welfare Services or Probation Department.

Reporting Form:

Element	Number of Children With Exams (Numerator)	Number of Children (Denominator)	Percent of Children with Exams
Number of children in out-of-home placement with a preventive health exam according to the CHDP periodicity schedule documented in the Health and Education Passport. (Numerator)	44	60	73%
Number of children in out-of-home placement with a preventive dental exam according to the CHDP dental periodicity schedule documented in the Health and Education Passport.	27	60	45%

Data Source/Issue: Child Welfare Services Case Management System (CWS/CMS), and county specific data for Probation Department.