Plan and Budget Required Documents Checklist

MODIFIED FY 2024-2025

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Plan and Budget Required Documents Checklist

MODIFIED FY 2024-2025

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Children's Medical Services (CMS) Branch

California Children's Services (CCS) Health Care Program for Children in Foster Care (HCPCFC)

Plan for Fiscal Year 2024-2025

For:

SISKIYOU COUNTY





AGENCY INFORMATION SHEET, CERTIFICATION STATEMENT, AND AGENCY DESCRIPTION

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Agency Information Sheet

County/City:	SISKIYOU COUNTY /YR	EKA	Fiscal Year: 2024- 2025
	C	Official Agen	су
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 Di	rector (if ap	plicable)
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
	CC	S Administr	ator
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

	Clerk of the Board	l of Supervis	sors 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 Serv	ices 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
	Inte	erim Chief Probat	ion Officer
Name:	Stacey Jackson	Address:	805 Juvenile Lane
Phone:	530/841-8896		Yreka, CA 96097
Fax:	530/841-4157	E-Mail:	Stacey.Jackson@siskiyouprobation.org

Ilhsd Ian\HSD\Agency Fiscal\PHD Div\BOS\FY 24-25\2-4-2025\CMS Plan FY 24-25 (BOS 1-21-2025)\24-25 MULTI YEAR PLAN (MYP)\PART 2_AGENCY & CO DESCRIPTION. INCUMBANT\2-4 Agency information Sheet FY MYP 24-25 doc



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Health Care Program for Children in Foster Care

Certification Statement	County/City:	Fiscal Year:
	Siskiyou	2024-25
I certify that the Health Care Program f comply with all applicable state and f including all federal laws and regulation granted to states for medical assistance pu (42 U.S.C. Section 1396 et seq.). I further certi promulgated by DHCS pursuant to these a Manual. I further agree that this HCPCFC may this HCPCFC violate	ederal and state la s governing recipie ursuant to Title XIX o fy that the HCPCFC v authorities, including be subject to sancti s any of the above.	aws and regulations, ents of federal funds of the Social Security Act will comply with all rules g the HCPCFC Program
Brenda Harris, Deputy Director Public Health	B about	- prover
HCPCFC/County Authorized Representative	Signature	Date
Nancy Ogren, Chair, Board of Supervisors, County of Siskiyo		
Local Governing Body Chairperson Name,	Signature	Date

State of California - Health and Human Services Agency

Certification Statement - California Children's Services (CCS)

County/City: SISKIYOU COUNTY / YREKA Fiscal Year: 2024-2025

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:	
Brenda Harris, Deputy Director	1/16/2025
Signature of CCS Administrator-	
Brenda Harris PHN	Date Signed
DocuSigned by:	
Shelly Davis, Director Public Health	1/16/2025
Signature of Director or Health Officer-	
Shelly Davis, MN BSN PHN CCHP	Date Signed
Director of Public Health Division	_
Signature and Title of Other – Optional	Dete Circuit
	Date Signed
I certify that this plan has been approved by the local governing body.	
Signature of Local	
Nancy Ogren, Chair	
Board of Supervisors	
County of Siskiyou	Date Signed
ATTEST: LAURA BYNUM	
Clerk, Board of Supervisors	
Ву:	
Deputy	
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Agency Description

The Siskiyou County California Children's Services (CCS) program and Health Care for Children in Foster Care (HCPCFC) Programs are located in the Public Health Division. CCS and Foster Care 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.

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.

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.

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

Affiliation and integration of CCS and Foster Care 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 42,024. 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 23/24 report, for the population both in population diversity and economically.

Eighty five percent of the Siskiyou County population is Caucasian, 13.7% Hispanics, 5.3% Native American, 1.7% are African American and 1.9% 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 October 2024 the unemployment rate for the county was 5.7%

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 2024 – 25 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: 2024 - 25

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	.03	No	No
LVN	Jennifer Hathaway, LVN 2	.95	No	No
Community Outreach Coordinator	Taryn Johnson, COC	.05	No	No
Program Admin	Emily Metz PHN	.23	No	No
CCS M&O	Emily Metz PHN	.24	Yes	No

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 2024-2025, complete the table below for all personnel listed in the Health Care Program for Children in Foster Care HCPCFC Base, Psychotropic Medication Monitoring & Oversite (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: 2024 - 2025

Job Title	Incumbent Name	FTE % on HCPCFC Admin Budget	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)
Public Health Nurse	Emily Metz PHN	0	25%	13%	7%	55%	0	Y
Community Outreach Coordinator	Genevieve Eller	25%	0	0	0	75%	0	Ν
Deputy Director Public Health/ Director of Nursing	Brenda Harris PHN	25%	0	0	0	75%	0	Y

DUTY STATEMENTS





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

Emily Metz, PHN CCS Program Administrator 23% FTE CCS Monitoring and Oversight 24% FTE Duty Statement 47% FTE

The CCS Program Administrator, 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 Administrator 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% Admin)
- 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% Admin)
- 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% Admin)
- 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% Admin)
- Personnel management, including preparation of annual CMS Plan, implementation of policies and regulations, direction of the LVN and Public Health Community Outreach Coordinator regarding medical case management activities. (Time 1% Admin)
- 6. Participate in the CCS meetings, trainings, and processes regarding the WCM, MCP MOU and the M&O implementation. (Time 100% of the M&O Budget)



Health and Human Services Agency Public Health Division

810 South Main StreetYreka, 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 3% 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%)
- 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%)



Health and Human Services Agency Public Health Division

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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:

- 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%)
- 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%)
- 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%)



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Taryn Johnson, COC CCS Community Outreach Coordinator Duty Statement: CCS 5% 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



Health and Human Services Agency Public Health Division

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Brenda Harris, PHN Health Care Program for Children in Foster Care (HCPCFC Admin -100% Non-Enhanced) Duty Statement - 25% FTE

Under the direction of Public Health Director and in support of the Foster Care Program, the Foster Care Admin position will perform a variety of nursing duties in support of the HCPCFC PHN focused on the concepts of health care coordination for children in foster care. Guidance and nursing oversite will be provided by this position.

Administrative Duties

- 1. Provide staff supervision of the HCPCFC PHN.
- 2. Ensure the HCPCFC PHN is informed of and trained of all aspects of the HCPCFC program.
- 3. Provide support to the HCPCFC PHN in the duties of the following: monitor and evaluate health care coordination

services required by children in foster care and on probation.

4. Take an active role in the budget process.



Health and Human Services Agency Public Health Division

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Emily Metz, PHN Health Care Program for Children in Foster Care Base (HCPCFC Base -100% Enhanced) 25% Caseload Relief 13% Psychotropic Medication Monitoring and Oversite (PMM&O 90% Enhanced / 0% Non-Enhanced) 7% Duty Statement - 45% FTE

Under the direction of the Public Health Director and in support of the Foster Care Program, the Foster Care PHN position will perform a variety of nursing duties focused on the concepts of health care coordination for children in foster care. The PHN 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 PHN 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. The PHN will be located in the CPS office. Guidance and nursing oversite 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



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

Genevieve Eller, Community Outreach Coordinator Health Care Program for Children in Foster Care (HCPCFC) Duty Statement: HCPCFC: Admin .25 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 documents
- 2. Support HCPCFC Nurse with regional activities related to HCPCFC meetings



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:

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Number of children with a primary care physician/ Medical Home	Number of children in the local CCS program	Percentage of compliance
(Numerator)	(Denominator)	
213	219	97%

* 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:		er of CCS unduplicated new referrals to the CCS program ned a pending status in the last fiscal year.

Data Source:	10% of the county CCS cases or 100 cases (which ever number is less).
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MEDICAL ELIGIBILTY	Number of referrais 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	13		66		19%	
PROGRAM ELIGIBILITY	Number of cases determined eligible within 30 days of receipt of documentation needed to make the determination		Number of new unduplicated referrals		Percentage compliance	
	(Numerator)		(Denominator)			
Financial eligibility determined within 30 days	MC /OTLICP	OTLICP CCS only MC /OTLICP CCS only		MC/OTLICP	CCS	
	44	30	35	31	97%	, D
Residential eligibility determined within 30 days	64		66		96%	6

Reporting Form

Average number of days from first referral to client eligibility determination= 89 Siskiyou County is a Dependent CCS County-ISCD reviews for Medical Eligibility.

Reporting Form - Part A:

Category selected (cardiac, pulmonary, etc.)	Number of children with annual team report in client's medical records	Number of children with SCC authorization	Percentage of compliance
	(Numerator)	(Denominator)	
Diabetes	17	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)	17	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.

Trans	ition 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

Transition Planning Checklist

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

Reporting Form:

Number of CCS charts reviewed	Number with transition planning	Percentage of compliance
42	42	100%
Number of MTP charts reviewed	Number with transition planning	Percentage of compliance
7	7	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)
 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	97%	3% 22 %
2. CCS Program Eligibility	24%	76% 6%
3. Special Care Center	0%	100% 0%
4. Transitionary	100%	0% 25%
Total	100%	53%

HCPCFC Performance Measure 1 - Care Coordination

The degree to which the local HCPCFC 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 HCPCFC 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)	644	844	76%
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.	316	850	37%

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