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Executive Summary

This report is prepared in compliance with 2SHB 1061, which requires the Washington State Department of Children, Youth, and Families (DCYF) to submit an annual report to the Legislature that provides the number of children and youth who:

- Are enrolled clients of the Developmental Disabilities Administration (DDA) of the Department of Social and Health Services (DSHS) ages 16 through 21 years old
- Are functionally eligible for Medicaid waiver services
- Are also defined as dependent children under chapter 13.34 RCW
- May exit dependency proceedings under chapter 13.34 RCW after reaching the maximum age for dependent children

The stated intent of 2SHB 1060 is to: (1) help reduce the number of former foster youth with developmental disabilities discharged into homelessness or inappropriately placed in hospitals; and (2) maximize the use of the most cost-effective and appropriate services for former foster youth with developmental disabilities.

Introduction

DCYF's stated mission and vision are to "protect children and strengthen families so they flourish" and "ensure that Washington State's children and youth grow up safe and healthy — thriving physically, emotionally, and academically, nurtured by family, and community."

DDA's stated mission is to "transform lives by providing support and fostering partnerships that empower people to live the lives they want."

Blending of these two missions with a person-centered, family-focused approach helps us meet the needs of dependent children and youth with disabilities. The goal of this cross-agency collaboration is to identify developmental needs of dependent youth, and begin planning as early as possible for their transition to young adulthood.

Shared Planning Meeting Requirement

2SHB1061 requires DCYF to convene a shared planning meeting (SPM) for dependent youth between the ages of 16 and 16.5 when the DCYF caseworker believes the youth "may be eligible for services administered by the developmental disabilities administration." The goal of the SPM is to begin planning for services the youth may need or want in preparation for their transition to adulthood. Representatives from DDA and the Division of Vocational Rehabilitation (DVR) are invited to this SPM. The SPM objectives may include but are not limited to:

- Assessing for functional eligibility for developmental disability waiver services
- Understanding of what services the youth wants or needs when they exit dependency
- Planning for residential services provided by DDA
- Planning for housing options from entities other than DDA
- Developing an action plan for how the youth will receive the services they want or need when they exit dependency

Additionally, DCYF is required to direct youth who have participated in this SPM to apply for DDA services, and provide assistance in the application process.

Dependent children and youth are required to have SPMs every six months while they are under DCYF's placement and care authority, so these requirements will be added to the SPM that occurs when a youth is between the ages of 16 and 16.5. DCYF added the specific requirements of this section to our <u>Guide to Shared Planning Meetings</u> and <u>Policy 1710 Shared Planning Meetings</u>.

Data Summary of the Identified Population

DCYF's FamLink system does not have a way of reliably tracking whether or not a child or youth is eligible for DDA services. Staff gathered an initial report from Famlink to identify youth ages 16 to 21 who were dependent at the time the law was enacted, but were older than 16.5 and would need to be assessed outside of the newly identified time point of the 16.5 SPM. Any youth turning 16 to 16.5 after July 1, 2021 will have this requirement added to the appropriate SPM.

As of August 24, 2021, there were 91 youth ages 16 to 21 years identified as eligible for DDA services in DCYF's FamLink system. In consultation on these cases, DDA identified that 17 of these youth were no longer eligible for services. DDA reported a variety of reasons that the youth were not eligible including: some who no longer qualify for eligibility and some for whom eligibility expired and a redetermination was never submitted. The youth for whom eligibility expired, may be eligible if new evidence is submitted with a new application for eligibility.

Of the remaining 74 youth who were eligible for DDA services:

- 15 were 16 years old
- 12 were 17 years old
- 47 were between the ages of 18 and 21 and in Extended foster care
- 50 of the youth already had a completed waiver assessment in their DDA file

These numbers reflect the number of youth who are known to be DDA eligible, not necessarily all youth who may be eligible but have not been assessed.

DDA has indicated that they will join ongoing SPMs for youth on this list who are over the age of 16.5 and have met the eligibility criteria for DDA eligibility. DDA will assess the youth for functional eligibility for waiver services at that time.

Cross Agency Collaboration

DCYF and DDA are working together to create new service level agreements (SLAs) to improve communication between agencies for both dependent and non-dependent children and youth. The process of outlining steps for inter-agency communications, escalation of concerns and needs, and multi-system collaboration is already supporting creative cross-agency solutions to meet the needs of eligible children and youth served by both systems.

Some of the ways DCYF and DDA are successfully collaborating and supporting families together include:

- DCYF offering in-home voluntary services to support families waiting for DDA out-of-home services
- DDA expediting approval processes to meet the needs of families in crisis
- Cross-system meetings that include Medicaid partners to explore all options available to youth and families
- Development of pathways to access to agency leadership when approval is needed for creative solutions

In addition, DCYF, DDA, and the Health Care Authority (HCA) continue to work collaboratively to support youth experiencing a crisis who do not meet the admission criteria for an acute behavioral health inpatient hospital or free-standing psychiatric hospital.

The Residential Crisis Stabilization Program (RCSP) will:

- Provide crisis stabilization services in a clinically appropriate facility setting
- Provide a safe setting for evaluation and treatment of a youth's behavioral health needs and family concerns for the purpose of preventing DCYF involvement

Conclusion

Dependent children and youth who are in out-of-home placement need all the supports they can get to be successful and thrive in their homes and communities. Dependent youth with disabilities require additional supports as they transition to adulthood. Exploring all possible options for services and building multi-system supports around these youth as they move into adulthood, will give them the best chance for success as young adults.

Appendices

Shared Planning Meetings Policy 1710

Guide to Shared Planning Meetings DCYF CWP 0070 publication