



COORDINATED  
SYSTEM OF CARE

CSOC Director's Report to the Governance Board  
Prepared for the November 29, 2017 Meeting

**Highlights for period (July 2017 - September 2017)**

- Total CSOC enrollment is 2095.
- OBH contracted National Trainers have completed trainings to support skill development of wraparound coaches and facilitators. The trainer will conduct training of trainers for facilitation and coaching in December 2017.
- CSOC outcomes continue to trend positively for CSOC children, youth and their families.

**CSOC Enrollment:**

Act 1225 Region	6/24/2016	9/30/2016	12/30/2016	3/31/2017	6/30/2017	9/30/2017
1 (Jefferson Parish/Greater New Orleans area)	414	406	396	392	389	376
2 (Capital area)	328	276	240	238	220	191
3 (Covington area)	272	272	274	272	245	246
4 (Thibodaux area)	244	256	279	286	277	269
5 (Acadiana area)	121	122	119	113	126	122
6 (Lake Charles area)	141	138	147	159	177	174
7 (Alexandria area)	174	156	168	157	162	153
8 (Shreveport area)	221	204	213	217	191	193
9 (Monroe area)	306	344	384	371	387	371
<b>TOTAL</b>	<b>2221</b>	<b>2174</b>	<b>2220</b>	<b>2205</b>	<b>2174</b>	<b>2095</b>

During the reporting period (7/1/17 – 9/30/17) there were a total of 624 referrals. The range of referrals by region was 36 to 108. Referrals to CSOC come from a variety of sources. The number of referrals from state agencies since implementation of CSOC continues to rise (DCFS – 1239, OJJ – 1107, and schools – 1306). However, the majority of referrals have come from other sources including caregivers, Licensed Mental Health Professionals, hospitals, self or legal guardians, and other Juvenile Entities.

## Referrals by Agency/Entity



REFERRING SOURCE	6/30/2017	9/30/2017	CHANGE
DCFS	1163	1239	76
OJJ	1050	1107	57
OBH	122	125	3
DOE/School	1255	1306	51
Caregiver	2810	3021	211
Hospitals	1319	1347	28
Licensed Mental Health Professional	2329	2412	83
Other Juvenile Entities	667	687	20
Self or Legal Guardian	974	995	21
Primary Care Physician (PCP)	63	71	8
Other	1709	1775	66
<b>Total</b>	<b>13,461</b>	<b>14,085</b>	<b>624</b>

Per request from Board members, the table below reflects referrals by region over the last four quarters. This table will continue to be included in the CSoc Director's Report.

### CSoc Referrals by Quarter

Act 1225 Region	11/25/2016	3/31/2017	6/30/2017	9/30/2017
1 (Jefferson Parish/Greater New Orleans area)	62	124	86	65
2 (Capital area)	62	109	84	63
3 (Covington area)	93	136	90	107
4 (Thibodaux area)	71	72	56	36
5 (Acadiana area)	71	79	42	53
6 (Lake Charles area)	63	92	56	50
7 (Alexandria area)	73	96	44	51
8 (Shreveport area)	121	125	85	88
9 (Monroe area)	194	120	98	108
<b>TOTAL</b>	<b>810</b>	<b>953</b>	<b>641</b>	<b>624</b>

The majority of children/youth enrolled in CSoc are male (1,226 or 61%). African-American is the predominant race of these young people, representing 1,121 (56%). The age group with the highest enrollment is 13-16 years old (755 or 36%).

**Wraparound Agency (WAA) update:**

The national trainer, Laura Burger Lucas, will be conducting the Facilitation 101 and Introduction to Coaching ‘Train the Trainer’ for WAA supervisors/coaches and trainers in the month of December. The goal of these trainings is to build sustainability that allows for the individual wraparound agencies to conduct these trainings, as needed, for their staff. Sheila Jordan, CSOC State Team Family Lead, has been working with the national trainer over the past year, developing content expertise, in order provide technical assistance, as well as monitoring for best practice of the WAAs going forward.

The State CSOC team has been working with the Magellan CSOC team and the WAAs to review the current quality data reports to better understand regional areas of strengths and needs from a practice perspective. We will continue to determine how best to refine our quality reporting over the next several months. Magellan has just completed the annual 2017 Wraparound Fidelity Evaluation. The results of the evaluation will be shared with the Board.

The WAAs continue to work in their communities engaging partners and other stakeholders, to support the adoption of system of care values, as well as to increase awareness of and access to the CSOC program.

**Statewide Coordinating Council**

For the past year, active participation and attendance at SCC meetings has been a challenge. The CSOC Family Lead has attempted to make these meetings more accessible, by offering them both in person and by conference call in the early evenings, however, participation has dwindled. The CSOC Family Lead will work with the new FSO as they establish Parent and Youth Advisory Boards, regionally and statewide, to cultivate family and youth voice.

**CSOC Finance and Audit Committee:**

This committee meets on an ‘as needed’ basis and has not met during this quarter. However, we are finalizing the CSOC MOU, which will be sent to the agency Secretaries for review and signature as soon as possible.

**CSOC Quality Assurance (QA) Committee:**

Committee Chair, Cindy Guitrau, will report to the Board during today’s meeting.

**Provider Network:****Short-term Respite**

- There are 20 STR providers this quarter.

**Independent Living Skills Building**

- There are 139 ILSB providers throughout the regions.

**Trends in Children/Youth Outcomes Data:****Inpatient Psychiatric and Emergency Room Utilization**

Source: Medicaid Claims: Calendar Year 2017, Quarter 3

Utilization of inpatient psychiatric hospitalization for CSoC youth who were enrolled in CSoC for more than 90 days. Review includes use of inpatient psychiatric hospitalization 90 days **before enrollment** in CSoC and 90 days **post-discharge** from CSoC.

- Data reveals an **81.4% decrease** in the **use of inpatient psychiatric hospitalization in the 90 days post-discharge from CSoC.**
- Data also reveals a **71.4% decrease** in the **use of the emergency room for behavioral health diagnosis for the same population.**

**CSoC Children Inpatient Psychiatric Utilization**

Source: Magellan

- Percent of CSoC members (under 22) who were served in a psychiatric hospital during the quarter: 123 or 4.79%
- Average length of stay for CSoC members (under 22) in psychiatric hospitalization: 6.74 days

*CSoC Children Inpatient Psychiatric Utilization*

TYPE OF SETTING	MEMBER COUNT: all members who spent any days in restrictive settings (levels shown below)	NUMBER OF CHILDREN UNDER AGE 22 ENROLLED WITH MCO DURING REPORTING PERIOD	PERCENT	ALOS
Inpatient Psychiatric Hospital	123	2,567	4.79%	6.74

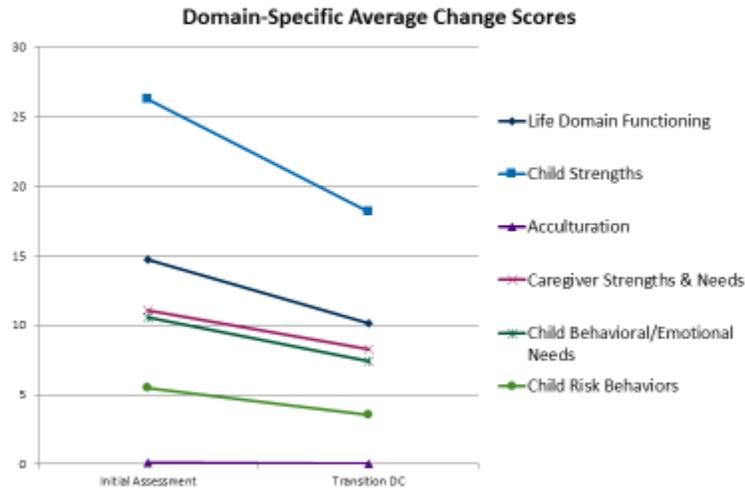
**CANS Outcomes Data**

Source: Magellan

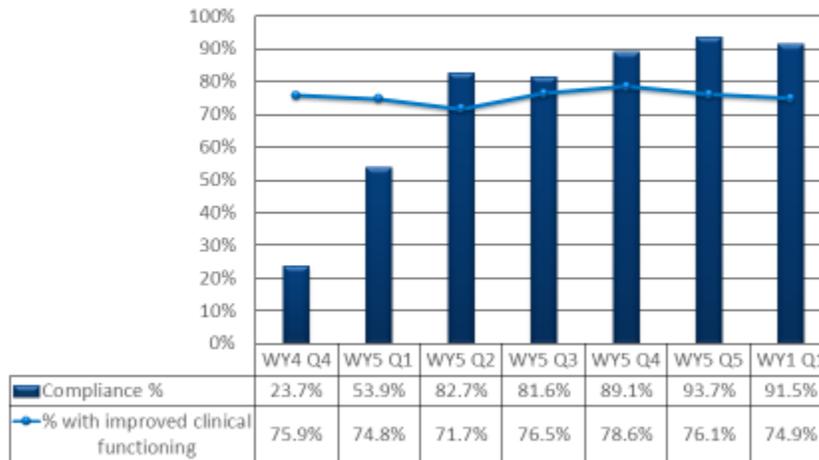
Outcomes Findings: An analysis of the global CANS scores beginning at initial intake and then at discharge for youth with valid data of the 493 youth discharged during the quarter showed:

- A mean score decrease of 20.54 points
- 74.85% of youth showed improved clinical functioning

*CANS Outcomes: Domain Scores*



*Child and Adolescent Needs and Strengths (CANS) Outcomes: Clinical Functioning*



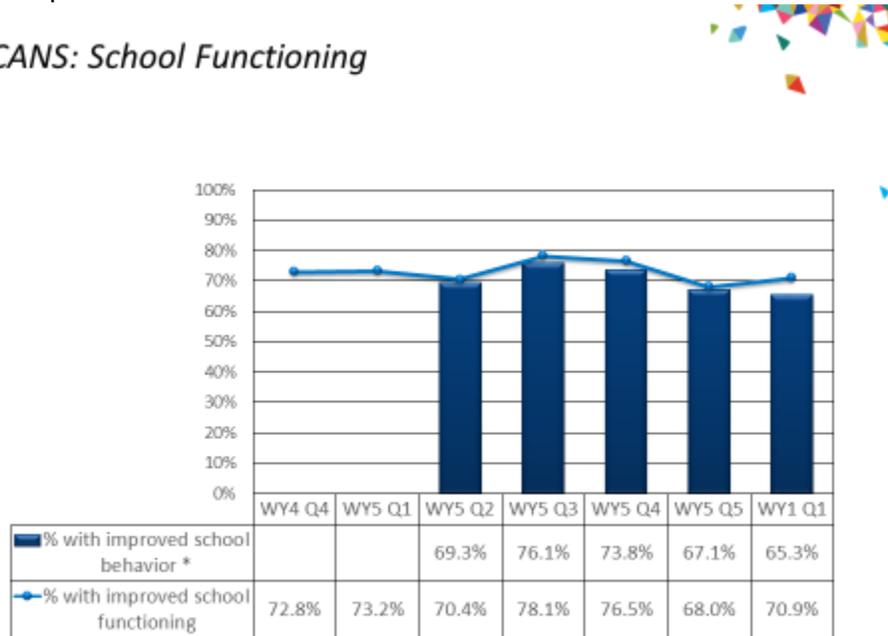
**School Outcomes**

Source: Magellan

The CANS school module which evaluates school functioning, is regularly applied when children and youth initially enroll in CSoC, then every 180 days after enrollment and at discharge. This offers a more consistent and objective picture of a youth’s school functioning over time. The following results were documented:

- 70.9% showed improved school functioning
- 65.3% showed improved school behavior

*CANS: School Functioning*



**Youth with an IEP**

Source: Magellan

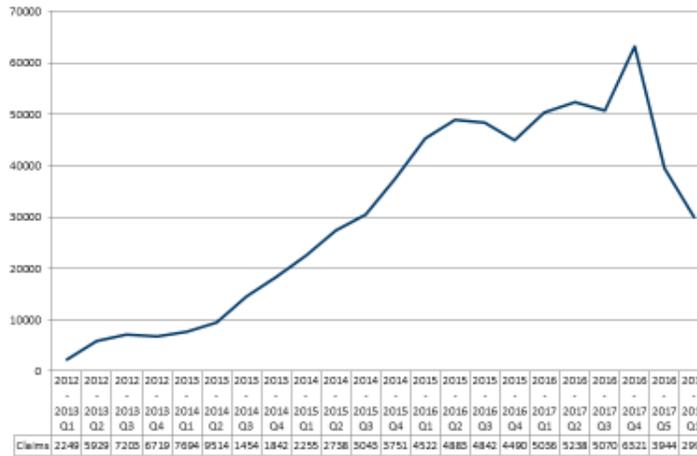
- A review of the enrollment for this time period indicates that approximately 36.58% of the children/youth enrolled in CSoC had a current IEP meaning that they are receiving special education services in the school system.

**Home and Community Based Services**

Source: Magellan

- There continues to be a high level of use of Home and Community Based Services, one of the factors that contributes to children and youth being able to stay successfully in their homes and communities.

### Home and Community-Based Service Utilization

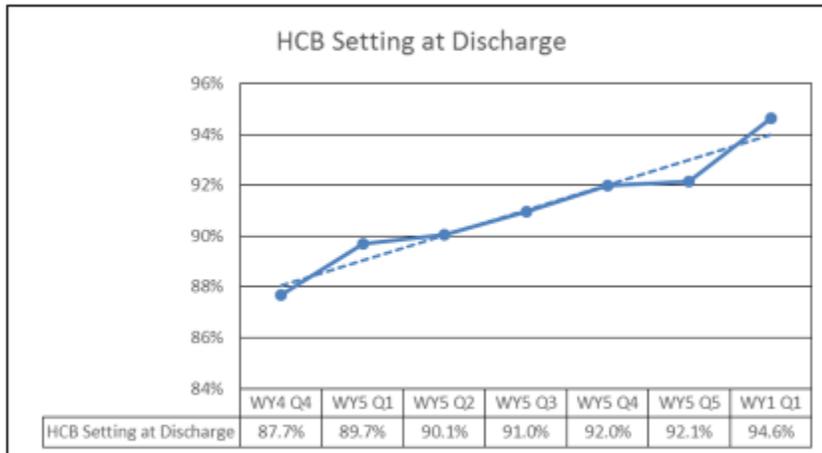


### Living Situation at Discharge from CSoC

Source: Magellan

- Percent of youth whose living situation at discharge from CSoC is a home and community based setting: 94.62%

### Living Situation at Discharge



Central Goal of CSoC is to ensure high risk children remain in the Home and Community:  
This quarter 94.6% of children were discharged into a HCBS.

### Utilization of Natural/Informal Supports

Source: Magellan

- Percent of CSoC members who have at least one natural/informal support on their child and family team: 89.7%