

Department Directors Report
June 2019

Contracts

- Contract amendments for FY 19-20 have been sent to providers for review and signature.
- The Contract department hosted a Contract Webinar for all providers on June 3rd. The webinar was recorded and a link to the recording and handouts was sent out. Some topics of discussion included:
 - FY 19-20 Subcontract Changes
 - Number Served and Funding Shifts
 - Data vs Billing and FASAMS
 - Match Reporting
 - Agency SharePoint Resources and the BI Portal

Consumer and Family Affairs

1. Recovery Oriented System of Care (ROSC) Transformation

Purpose of Collaboration

To transform Florida's substance use and mental health system into a recovery-oriented system of care (ROSC), CFBHN's strategy is to align our action plan with the State's ROSC PoE and its key priorities.

Key Partners

CFBHN's subcontractor staff members, statewide and community stakeholders participate in the Suncoast region ROSC transformation initiative.

ROSC Transformation Workgroup Committee: ACTS; Centerstone; Charlotte Behavioral Health; Coastal Behavioral Health; DACCO Behavioral Health; David Lawrence Center; Directions for Living; Drug Free Charlotte County; NAMI Pinellas; NAMI Collier; Operation PAR, Inc.; PEMHS; Polk County Government; SalusCare; Tri-County Human Services; YFA.

Statewide stakeholders include Department of Children and Families (DCF) Substance Abuse Mental Health Program Office; DCF Suncoast Region SAMH Office; Florida Alcohol and Drug Abuse Association (FADAA); Florida Certification Board (FCB); Peer Support Coalition of Florida; University of South Florida College of Behavioral & Community Sciences Dept. of Mental Health Law & Policy, Louis De La Parte Florida Mental Health Institute (FMHI); Florida Children's Mental Health SOC Grant; and Magellan Health care – Peer Services.

Community stakeholders include Epicenter RCO, Humana, University of South Florida (Health and Human Services), Faith-based leaders such as Underground Ministries, Wholesome Ministries and Muslim Connections, NAMI Hillsborough, and James A Haley VA.

SAPT Pilot- NAMI Pinellas, ACTs, BayCare, Centerstone, Charlotte Behavioral Health Care, DACCO, David Lawrence Center, Operation Par, SalusCare, Mental Health Community Centers



Status Update

CFBHN and ten of its network agencies are participating in DCF's Self-Assessment Planning Tool (SAPT) pilot project. Currently 10 providers are in the process of completing or have completed the SAPT, Recovery Self-Assessment (RSA) Persons in Recovery and Recovery Self-Assessment (RSA) Provider Survey's. These surveys were entered into DCF's Survey platform and are in the process of scoring for analysis.

Data Summary

Total number of participants include: SAPT Pilot Program- 10, CFBHN's Transformation workgroup- 8 statewide stakeholders, and 7 Community stakeholders.

Summary of Outcomes and Accomplishments to Date

Promoting Collaborative Service Relationships:

- A. CFBHN Consumer and Family Affairs staff participates on Pinellas County Children's Mental Health Initiative sponsored by the Juvenile Welfare Board's to build a scalable mental health system of care that will improve the quality, scope and scale of service to children in Pinellas County.

Outcome: Staff co-chairs the Public Awareness and Family Engagement committee meeting and the committee is in the process of developing focus groups with families throughout Pinellas County to inquire about their understanding of the current system in Pinellas, to identify barriers within the system and obtain their recommendations to improve service provision. CFBHN also offered the Workforce committee educational information on implementing the wraparound philosophy into agencies delivery of services and to advocate for peers in the workforce.

- B. CFBHN assists the Hillsborough Community Manager on the Hillsborough Jail Services Pilot Project and Orient Road Services Coordination Project along with Hillsborough County, ACTs, and DACCO. Phoenix House, NaphCare, Hillsborough County Sheriff's Office and Falkenburg Road Jail.

Outcome: Currently case managers from ACTs, DACCO and Phoenix House are providing services within the Falkenburg Road Jail. The committee is working to develop a process of communication and workflow within the jail. The committee is also in the process of developing a plan to implement the Orient Road Services Coordination Project.

- C. CFBHN coordinated a train the trainer (State trainers) NAMI's Smarts Advocacy signature program for Hillsborough and Pinellas NAMI Affiliates.

Outcome: Three leaders were trained as state trainers to build capacity for a grass roots effort for consumers and families to advocate for improvement of behavioral health treatment and supports in the State of Florida.

- D. CFBHN collaborated with NAMI Hillsborough to develop an advocacy committee that would align with the NAMI Broward Advocacy initiative "NAMI Advocacy Group" or NAG that is a statewide effort for advocacy.

Outcome: 20 individuals joined NAMI Hillsborough NAG and they developed a strategic plan to continue its efforts for when the grant funds are no longer available.

- E. CFBHN collaborated with NAMI Broward and Hillsborough to offer the NAMI Smarts Advocacy Training.

Outcome: 10 individuals participated in the NAMI Smarts Advocacy Training. CFBHN co-leads the NAG committee in bi-monthly meetings to develop a local advocacy strategic plan, practice their skills, and reach out and educate their legislative representatives on SAMH issues in their district.



Outcome: On average, 5 individuals participated at each meeting.

- F. CFBHN, DACCO and SunCoast Region DCF SAMH office collaborated with FADAA to educate the Hillsborough Community regarding the value and benefits of developing a Recovery Community Organization and create recovery capital for the community.

Outcome: Our core group met to develop a plan for a 2019 fall Summit.

Training and Technical Assistance

- A. CFBHN provided Introduction to Wraparound to Sarasota County's Behavioral Health Stakeholders Consortium.

Outcome: 56 members of Sarasota County's Behavioral Health Stakeholders Consortium attended the training.

Increase Peer-based Recovery Support Services

- A. CFBHN's Consumer and Family Affairs department continues to offer Recovery Peer Specialist training, such as "Helping Others Heal" (40 hour State approved curriculum) and the evidence-based program "Wellness Recovery Action Plan" to build capacity in the Recovery Peer Specialist workforce development.

Outcome: 16 Recovery Peer Specialist were trained in Helping Others Heal was provided in C -20.

Summary of Barriers/Issues and Strategies to Mitigate them

In regards to ROSC, several issues have been encountered in writing the MAT QI Reports and for the implementation of completion of the SAPT tool. As staff attempted to complete the MAT QI Reports it became evident that there had been a miscommunication between the Florida Certification Board (FCB) and DCF and that staff had not been trained to complete the document provided. For the future, a new reporting document will be developed and staff will be trained on the document.

In regards to the SAPT Tool, MEs were given approximately a month to implement the pilot once all of the tools were released. As of this report, the majority of CFBHN agencies that agreed to participate have submitted their documentation. In the future, a longer timeframe would be appreciated in order to accommodate for all aspects of the project that includes delivering the tools and training the providers and time to allow providers to implement the SAPT and return the data.

Florida Children's Mental Health System of Care (FCMHSOC) - Expansion and Sustainability Grant.

Purpose of Collaboration

Develop a sustainable community-based infrastructure to improve behavioral health outcomes for children, youth and young adults diagnosed with Serious Emotional Disturbances (SED) and their families and include utilization of the evidence based Wraparound process.



Key Partners

Subcontractors: Directions for Living, SalusCare, BayCare, Success 4 Kids and Families (S4KF), PEMHS and David Lawrence Center (DLC).

Other Stakeholders: Carlton Manor, Juvenile Welfare Board, the University of South Florida and Humana.

Data Summary

Thirteen individuals were referred to the FCMHSOC grant program, three are being served through the Wraparound process and three individuals were discharged.

Summary of Outcomes and Accomplishments to Date

With the goal to educate our families/caregivers on System of Care (SOC) concepts and principles, CFBHN offered educational workshops on improving and developing a Recovery Oriented System of Care that includes Trauma Informed Care, Cultural and Linguistic Competencies and the Wraparound process.

- B. Provided NAMI's Family to Family Signature Program to increase families understanding of their loved one's illness and build their capacity to advocate for their loved one.

Outcomes: 8 family members participated in the training

- C. Participated in the Pinellas County Community Health Action Team as we updated and reviewed the CHIP.

Outcomes: The plan is split into three Health Priority Areas of: Access to Care, Behavioral Health, and Social Determinants of Health and the groups updated the original action plans with a worksheet for every objective of the 2018 - 2021 CHIP.

- D. SOC group in Pasco submitted a Mental Health Proclamation for May is Mental Health Month.

Outcomes: 15 agencies participated in the presentation of the resolution.

Human Resources:

ANNUAL - AS OF		
06/17/2019		
		7%
5	Total separated	
	average # of	
68	employees	
7.35%		
4.41%	voluntary	3
2.94%	involuntary	2

CFBHN Children's Mental Health

CFBHN facilitated two children's mental health trainings (Hillsborough and Polk Counties) with over eighty attendees. Additionally, both trainings were streamed live via GoToWebinar. Numerous agencies and system partners attended and participated in the training to include, DCF, DJJ, school districts, and SMMC Plans.

CFBHN continues encouraging the Circuit Facilitators to promote the multi-disciplinary staffing process upon submission of the SIPP Packet and has observed an increase in participation since February 2018. In addition, CFBHN CMH Team continues to provide technical assistance to Suncoast Region and Circuit 10 on development of Youth at Risk Staffings to identify high need youth earlier and provide additional community resources. CFBHN Pasco County School Program Manager continues to work with Pasco County School System on provision of mental health resource linkage to the school system to support DCFs Priority of Efforts utilizing the Youth at Risk Staffing Model. CFBHN CMH Team participated in 15 interagency calls to divert youth from entering deeper end system of care in May and 15 interagency calls in May.

Child Welfare/SAMH Integration

Referral and communication protocols for FIS were implemented. Providers have been asked to evaluate their intake, screening, assessment, and engagement procedures and develop strategies to improve performance in all areas. Additional focus is being placed on enrollment and engagement in treatment services. New program requirements and performance measures are being developed and will be implemented for FY19-20. During the previous fiscal year, all providers met or exceeded their YTD goals and multiple teams started the current fiscal year with a waitlist.

FIT providers must screen potential clients/families carefully to ensure they are taking the most severe cases and many referrals are diverted to other substance abuse/mental health programs due to a lack of capacity within the FIT teams. In order to increase capacity, there is a need for increased funding across all providers. In addition, increased funding would allow for addition of FIT teams in areas currently not being served by the program.

In efforts to ease the high number of referrals received by the FIS programs, the BHCs are being utilized as the first point of contact for Substance Exposed Newborn (SEN) cases. The BHCs are able to consult on SEN cases as part of the Plan of Safe Care. If additional services are warranted, the BHCs are able to assist with referrals to FIS, FIT, or other appropriate programs.

Civil State Hospital

As of the end of MAY 2019, CFBHN had **42 clients WAITING** for a SMHTF bed.

FSH wait time for Males, 3-4 WEEKS, if under 65 and without any physical/intellectual/medical disability.

FSH wait time for Females is 2-4 MONTHS

FSFH wait times for Females is about 3+ MONTHS and for Males about 6+ WEEKS.



Civil State Hospital Waitlist		
State Hospital	Private	Public
Florida State Hospital	**23	12
South Florida State Hospital	3	4
North East Florida State Hospital	0	0

** 3 of the 23 from private receiving facilities have been transferred to the SRT and are waiting for the SMHTF bed on the SRT.

In MAY 2019 there were **15 ADMITS** (11 FSH, 4 to SFSH, 0 to NEFSH) to a Civil SMHTF.

In MAY 2019 there were **8 DIVERSIONS** from admission to a Civil SMHTF.

- QUARTERLY ADMISSIONS- N/A
- FY 18/19 TO DATE ADMISSIONS-151
- QUARTERLY DIVERSIONS- N/A
- FY 18/19 TO DATE DIVERSIONS-128

18/19 Year-to-Date State Mental Health Treatment Facility Referrals by Circuit			
Circuit	Receiving Facilities in Circuit	Year-to-Date Clients Referred to State Treatment Facility	
6	11	115	
10	7	72	
12	5	36	
13	7	28	
20	5	29	

- QUARTER REFERRALS, ALL CIRCUITS= N/A
- FY 18/19 TOTAL REFERRALS, ALL CIRCUITS= **280 **Corrected**

In **MAY 2019** CFBHN conducted a **total of 17 discharge planning conference calls with the state hospitals** (Florida State Hospital, Northeast Florida State Hospital, and South Florida State Hospital). Suncoast Region providers, case management personnel, and FACT teams participate in these discharge planning calls.



Forensic

SunCoast Region/C10 has diverted 128 individuals from the State Hospital from July 2018 to April 2019 and continues to work with case management providers to increase diversion number each month. For July to June 1, 2019, the SunCoast Region/C10 has also facilitated over 219 forensic residential referrals to the community partners within the region to promote diversions from the Forensic state mental health treatment facilities and assisted in 30 discharges in the month of April for a total of 235 fiscal year to date from the Forensic State Mental Health Treatment Facilities. Fiscal year to date the Suncoast Region/C10 has assisted with 558 Forensic State Hospital Admissions throughout the region. This is a 36% increase within the Suncoast Region/C10 for Forensic State Hospital Admissions when compared to last fiscal year.

Prevention

SOR Funding Proposals Submitted for Substance Abuse Prevention Services, parameters for funding per circuit are below:

Circuit/County	FY18-19 Allocation (December 2018 through June 2019)	FY19-20 Allocation (July 2019 through September 2019)	Total Available
Circuit 6: Pasco County	\$57,507	\$38,338	\$95,845
Circuit 6: Pinellas County	\$29,552	\$19,702	\$49,254
Circuit 10: Hardee, Highlands, and Polk Counties	\$33,358	\$22,238	\$55,596
Circuit 12: Desoto, Manatee, and Sarasota Counties	\$66,215	\$44,144	\$110,359
Circuit 13: Hillsborough County	\$62,947	\$41,964	\$104,911
Circuit 20: Charlotte, Collier, Glades, Hendry, and Lee Counties	\$68,013	\$45,342	\$113,355
Total Allocation for SunCoast Region	\$317,592	\$211,728	\$529,320

Purpose of collaboration, any updates or new strategies undertaken

Collaborations continue to be strengthen with the Department of Education, Law Enforcement, Healthcare providers, EMS, Fire Department, Religious/churches, colleges, substance abuse treatment providers, FADAA, Drug Free America Foundation, statewide drug free coalitions, child welfare agencies, businesses, etc. where more education and awareness regarding substance abuse prevention, treatment and recovery conversations can be held. Providing both consumers and partners with the knowledge needed to advocate, support and aid in these services throughout the SunCoast Region.

Healthy Transitions:

Engaged in therapy or Med Mgmt.	53
Obtained Health Insurance	14
Completed GED Program	15
Graduated from high school	8
Obtained Employment	72
Enrolled in College or Vocational Program	48
Graduated from Post-Secondary Program	1
Accessed transportation independently	27
Obtained Driver's License	4
Secured stable housing	23
Obtained Florida ID	8
Completed Transition Plan Goals	45

Care Coordination

CFBHN Utilization/Care Managers continue to outreach to all regional providers of services for anyone waiting for a bed-based SA service which has resulted in availability of more timely access to services. It is noted, however, that while available beds are being offered to persons waiting, they often choose to wait for the service at their preferred provider. They are removed from the waitlist once they have refused an available bed in the region

NDCS Special Projects Updates

1. First Episode Psychosis (FEP) Program

Success For Kids and Families was awarded the First Episode Psychosis (FEP) Program to serve clients in Hillsborough County regarding Early Intervention Services – Psychotic Disorders involving Community Services Team (CST) in Hillsborough County” which focuses on youth/young adults who experience a first episodic psychosis”. For this reporting period, Success for Kids FEP Staff and CFBHN Senior Program Manager NDCS completed a three day training on the NY On Track Model which will be utilized as the evidence based practice model for the FEP Program. SFK has hired all FEP Staff and admitted their first client this month. In addition, SFK and CFBHN completed meetings on developed of performance measures for the upcoming fiscal year and new contract proposal connected to payment methodology beginning July 1 2019. SFK and CFBHN will finalized items this month for contract extension starting July 1.

2. SOR (Statewide Opioid Response)

As part of the SOR deployment, NDCS is overseeing three Hospital Bridge Programs around the Suncoast region. They will include DACCO, FSOS, and Charlotte Behavioral initially. CFBHN, the providers, and the hospitals are at the beginning stages of developing programs to address MAT services in local hospitals. DACCO is partnering with Tampa General Hospital. FSOS is partnering with Sarasota Memorial Hospital.

3. Mobile Crisis Services

The Mobile Response Team contracts have been awarded and CFBHN and the providers are working towards the implementation stage. There are currently four teams currently running and are expanding services (Centerstone, Gracepoint, JFS, and Peace River.)

4. HIV Services

NDCS has been attempting to improve the utilization of HIV services around the Suncoast Region through webinars and in-person meetings to see if those numbers can be improved upon. The providers who continue to lag behind are ACTS, Centerstone, and Westcare. The providers who continue to be an example of successfully providing HIV services are DACCO, Operation PAR, and FSOS.

Communications:

Community

CW44/Eco Media backpack distribution occurred at Everglades City School April 24. Entire school population received 200 backpacks for all grade levels. Supported via CFBHN PR/Social Media and Collier Prevention Coalition partner team.

Doris Nardelli appointed to serve on Sheriff Grady Judd (Polk County) 2019-2020 Advisory Council.

Prepared PowerPoint for Linda McKinnon Panel Discussion on Opioid.

Supported TriCounty Human Services Event Lakeland April 2



Legislative

End of session and results pending on 2019-2020 budget depending on Governor's veto. Board Legislative Committee will meet in June to discuss and plan for legislative focus for 2019-2020. Meetings are being scheduled to meet with all elected representatives over the summer introducing the Community Managers to District staff.

Workshops/Award Recognitions/Other

Marcia Monroe/Doris Nardelli selected to present two workshops at FBHCON in August in Orlando.

Press & Media

Linda McKinnon interview with WINK reporter in Fort Myers April 24 on CFBHN services for rural counties like Hendry Glades.

CW44 has transitioned to new format and team. Made presentation regarding new HealthCare Champions Sunday morning interview program. Cost for program, advertising support (at about 500k monthly impressions in target age demographics prime time placement with sliders included), and creative production is \$4k monthly for three months. After discussions, this is not in the budget and we will pass on opportunity.

IHeart Media has also transitioned to new team and met with CFBHN. They are putting together a proposal that would include their support in seeking funding from local community. They will also craft a program for providers to consider. They anticipate a communications plan proposal featuring a podcast concept at the \$150-175k level.

PoliticoPro offered their subscription services for legislative tracking but their product is similar to what Natalie Kelly uses with FAME and would be a duplicate of the work her office provides for the Managing Entities.

Website

Reporting RX Take Back Day totals on website

Video Production

None this period. Budget request in place to support program 2019-2020.

Print and Communication Production

Infographic production completed – see attached. These will be used with news media, legislative packets and social media for educational purposes.

Internal

Nothing this period

Social Media

Facebook Likes total is 2828 (increase of 47); Page Followers 2973 (increase of 50); Demographics unchanged – 77% Women/22% Men – 25-34 age group highest engaged Video viewing exploded again in May following a strong April largely based on viewing of the Good Sam video. 7.8k minutes viewed – up 4754%. 26.9k 3 second views – up 3797%.

Top Face Book Analysis:

- Video viewing explosion – Good Sam remains most watched
- Organic Post Reach of 6941 – up 171%
- Post Engagements 1733 – up 181%



Twitter Analytics:

- All posts that reach over 1K on FB are shared on Twitter
- 14 Twitter post in May

Overview

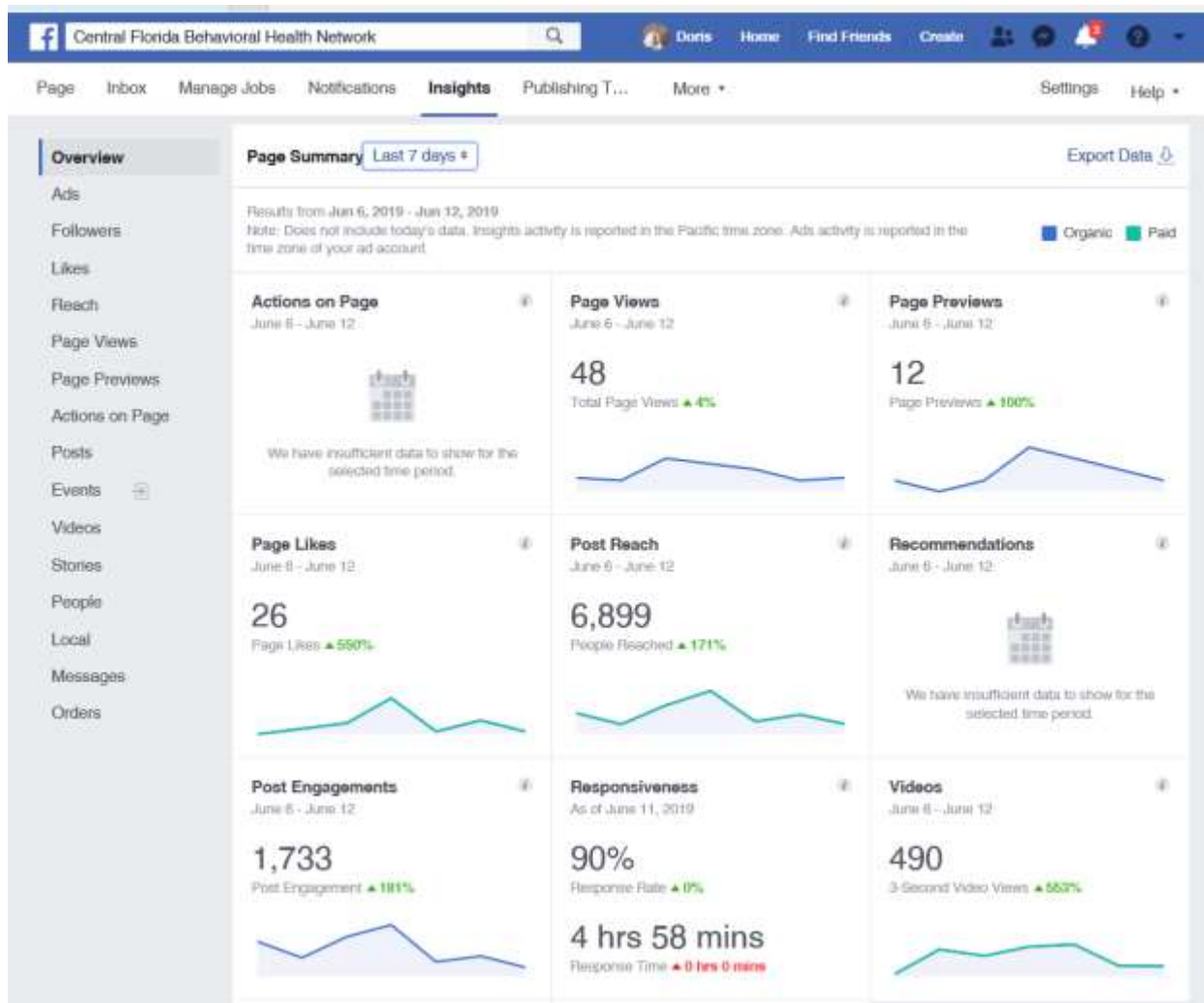
For May a Mental Health Tip was posted daily for Mental Health Awareness Month. Five posts performed favorably in April achieving reach greater than 1K. Eight additional posts achieved reach between 700-900. This shows target audience is being reached. Vendor continues to write copy for posts to encourage engagement as this is key to increasing reach.

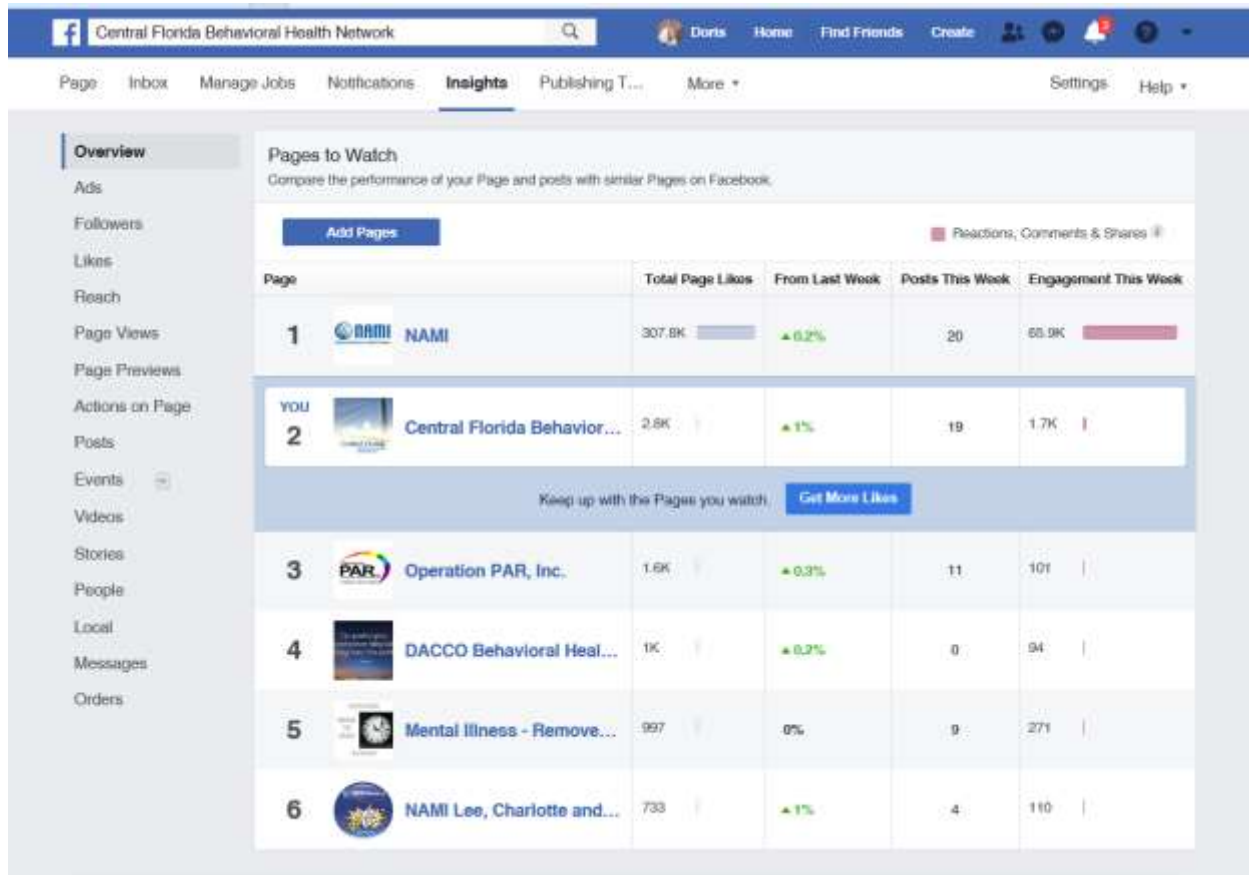
For May there were over 20 comments or tags on posts. Vendor responded as appropriate. One respondent wrote “Central Florida Behavioral Health Network Thank you for all you do and “loved” our comment. Letting the audience know we are listening and validating their concerns adds value to the social media efforts.

It was announced May 1 that FB has changed its mobile interface and emphasizes friends over pages. Vendor will be checking and watching to see how and what needs to be tweaked to maintain a high reach and recommends a focus on using graphics to maintain presence. Graphics are getting the highest rate of reach and engagement. Vendor has been developing and testing new graphic concepts that appear to be achieving positive results with readers. Vendor is not only creating original curated work but is sharing excellent graphics from supportive pages which shows we understand the feelings that can accompany mental health issues.

The post that generated the most interest in this period was a check tool developed by a teacher for checking in with her students. This appears to be an excellent model and it is conceivable that adaptations will be developed for workplaces.







Continuous Quality Improvement Monthly Report

June, 2019

1. Monitoring Update for FY 18-19 (As of 5/31/19)

TABLE A: Annual Monitoring Results - Summary Data FY 18-19		
	Number	%
Provider Monitorings Scheduled	59	
Number of Initial Monitorings Completed (% = Monitorings completed/Monitorings scheduled)	49	83.1%
<i>Corrective Actions Issued</i>	25	
<i>Areas of Concern (AOC) Identified</i>	6	
<i>Commendations Given</i>	5	
Number of Provider Follow-Ups Required (% = Providers requiring follow-up/Initial monitorings completed)	22	44.9%

TABLE B: Corrective Action/Area of Concern/Commendation Summary						
Covered Service/Program Area/Tool	Corrective Actions		Area(s) of Concern		Commendations	
	Count	%	Count	%	Count	%
Administrative Compliance	1	4.0%	0	0.0%	1	20.0%
Assisted Living Facilities - LMH	0	0.0%	0	0.0%	0	0.0%
BNET	0	0.0%	0	0.0%	0	0.0%
CAT	0	0.0%	0	0.0%	0	0.0%
Coalition Compliance	2	8.0%	0	0.0%	0	0.0%
CARF Unaccredited Standards	2	8.0%	0	0.0%	0	0.0%
Crisis Stabilization Unit (CSU)	1	4.0%	0	0.0%	0	0.0%
Deaf and Hard-of-Hearing	2	8.0%	2	33.3%	0	0.0%
Employee Verification	9	36.0%	1	16.7%	2	40.0%
FACT	1	4.0%	1	16.7%	0	0.0%
FIT	1	4.0%	0	0.0%	0	0.0%
Forensic	0	0.0%	0	0.0%	1	20.0%
HIV	0	0.0%	0	0.0%	0	0.0%
Indigent Drug Program	0	0.0%	0	0.0%	0	0.0%
Incidentals	1	4.0%	0	0.0%	0	0.0%
Mental Health	0	0.0%	0	0.0%	0	0.0%
Outreach	0	0.0%	1	16.7%	0	0.0%
PATH	0	0.0%	0	0.0%	1	20.0%
Prevention	2	8.0%	0	0.0%	0	0.0%
Service Validation	2	8.0%	0	0.0%	0	0.0%
Staff Time Validation	1	4.0%	0	0.0%	0	0.0%
TANF	0	0.0%	0	0.0%	0	0.0%
Women's Block Grant	0	0.0%	1	16.7%	0	0.0%
Other	0	0.0%	0	0.0%	0	0.0%
TOTAL	25	100.0%	6	100.0%	5	100.0%

2. Annual Comparative Data (FY 16-17, FY 17-18, FY 18-19):

MONITORINGS SCHEDULED		FY 16-17		FY 17-18		FY 18-19	
Provider Monitorings Scheduled		60		61		59	
<i>Count of FULL Monitorings</i>		40		33		22	
<i>Count of LIMITED and COALITION Monitorings</i>		20		28		36	
Number of Initial Monitorings Completed		60		61		49	
INITIAL MONITORING RESULTS							
Corrective Actions Issued		53		24		25	
Areas of Concern Identified		33		12		6	
Commendations Given		23		9		5	
FOLLOW-UP DATA		Count	%	Count	%	Count	%
Providers That DID NOT Require Follow-Up		28	46.7%	39	63.9%	27	55.1%
Providers That Required Follow-Up (%= Provider Follow-Ups required/Monitorings Completed)		32	53.3%	22	36.1%	22	44.9%
<i>Follow-Up WAIVED due to Contract Termination</i>		0		2		0	
<i>Follow-Up WAIVED due to Relinquished Program</i>		0		1		0	
<i>Follow-Up POSTPONED for Completion in Next FY</i>		3		5		0	
Adjusted Number of Follow-Ups to Complete		29		14		22	
<i>Follow-Ups Completed to Date</i>		29	100.0%	14	100.0%	1	4.5%
<i>Follow-Ups Remaining</i>		0	0.0%	0	0.0%	21	95.5%
CORRECTIVE ACTION and AREA OF CONCERN SUMMARY		CAs	AOCs	CAs	AOCs	CAs	AOCs
Issued During Initial Monitoring		53	33	24	12	25	6
<i>Follow-Up WAIVED - Contract Termination</i>				3	0	0	0
<i>Follow-Up WAIVED - Relinquished Program</i>				1	0	0	0
<i>Follow-Up POSTPONED Until Next FY</i>				5	3	0	0
Adjusted Number of Corrective Actions/AOCs				15	9	25	6
<i>Pending Follow-Up Review</i>				0	0	25	6
RESOLVED after Follow-Up		48	30	8	6	1	0
Number UNRESOLVED after Follow-Up		5	3	7	3	0	0
% Unresolved (Unresolved/Issued During Initial Monitoring minus WAIVED and POSTPONED)		9.4%	9.1%	46.7%	33.3%	0.0%	0.0%
PROVIDER RESULTS SUMMARY - FISCAL YEAR END		Count	%	Count	%	Count	%
Number of Provider Monitorings Scheduled		60		61		59	
Number of INITIAL Provider Monitorings Completed		60	100.0%	61	100.0%	49	83.1%
Number of FOLLOW-UP Monitorings Required				14		22	
Number of FOLLOW--UP Monitorings Completed		29	100.0%	14	100.0%	1	4.5%
At Year-End, Count of Providers With:	<i>Follow-Up Waived/Postponed/Unable to Complete</i>			8	13.1%	0	0.0%
	<i>No Corrective Action or Areas of Concern</i>			46	75.4%	28	100.0%
	<i>Unresolved Corrective Actions or Areas of Concern</i>			7	11.5%	0	0.0%
TOTAL Number of Concluded Monitorings		60	100.0%	61	100.0%	28	100.0%

3. CQI Goal Summary for FY 18-19 (As of 5/31/19)

Goal 1: *Expand the Network's ability to be data-driven.*

Objective: Utilize data collected by the Network to guide and inform program planning and development.

1-A: Create a sub-committee of the Board CQI Committee and orient them to the data collected for patients most often treated by Network providers.

UPDATE: The sub-committee began the process of mapping out current data sources during a call on 5/3/19. There was discussion of potential data priorities, and this work will continue during upcoming sessions.

1-B: Identify data priorities and types of information that should be tracked, trended and consistently reviewed by members of the Data sub-committee.

UPDATE: This step is in progress, and will be finalized over the course of additional meetings of the sub-committee.

Goal 2: *Improve data collection and reporting capabilities related to CARF standards and committees.*

Objective: Work with CFBHN departments to efficiently create/update data reporting templates to improve data tracking and trending.

2-A: Improve the quality of the data collected and shared through the CFBHN Risk Management and CQI Oversight Committees.

UPDATE: Nothing new to report

2-B: With department Managers and Directors, identify reports that need to be created or updated.

UPDATE: Nothing new to report.

Goal 3: *Improve the Network's ability to capture Risk Management data*

Objective: Finalize the implementation of the RL6 system.

3-A: Finalize the report-building phase of implementation.

UPDATE: This phase of the project is now complete.

4. Other Updates

A. Compliance issues: No compliance issues to report.

B. The next Board CQI Committee meeting is scheduled for Thursday, July 18th at 11:00 am.

Risk Management Monthly Report

May, 2019

1. Count of Subcontractor Incident Reports Received (as of 5/31/19)

Incident Type	July 2018	Aug 2018	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019	May 2019	Jun 2019	Year-to-Date	Average Number of Reports per Month	% Change - Current vs. Previous Year
Phone Notification															
Child on Child Sexual Abuse	0	2	1	1	1	0	0	1	0	0	0	0	6		
Client Death	17	16	15	12	19	16	22	18	12	17	23	0	187		
Media Event	2	2	3	3	0	0	0	2	0	0	1	0	13		
Sexual Abuse/Sexual Battery	1	1	0	1	1	0	1	2	3	4	1	0	15		
Written Notification															
Child Arrest	0	0	0	1	0	0	0	0	1	0	0	0	2		
Elopement	11	15	12	7	16	7	10	10	9	8	18	0	123		
Employee Arrest	2	2	5	3	1	1	2	1	0	1	2	0	20		
Employee Misconduct	3	4	1	5	4	1	3	3	2	1	4	0	31		
Missing Child	0	0	0	0	0	0	0	0	0	0	0	0	0		
Security Incident/Unintentional	0	0	0	0	0	0	0	0	0	0	0	0	0		
Significant Injury to Client	4	1	1	5	3	4	1	0	1	1	1	0	22		
Significant Injury to Staff	1	0	0	4	0	0	0	0	3	0	0	0	8		
Suicide Attempt	7	8	9	4	3	3	1	7	3	7	7	0	59		
Other:															
Bomb/Biological/Chemical Threat	0	0	0	0	0	0	0	0	0	0	0	0	0		
Visitor Injury or Death	0	0	0	0	0	0	0	0	0	0	0	0	0		
Human Acts	0	0	0	0	0	0	0	1	0	0	0	0	1		
Theft, Vandalism	0	0	0	0	0	0	0	0	0	0	0	0	0		
No Other Category	3	1	4	0	1	0	2	3	5	1	1	0	21		
TOTAL	51	52	51	46	49	32	42	48	39	40	58	0	508	46.2	
FY 17-18	55	40	38	42	41	30	57	36	45	56	49	45	534	44.5	+ 3.8%
FY 16-17	43	62	62	60	45	65	62	43	56	46	49	44	637	53.1	- 13.0%

2. Count of Subcontractor Incident Reports, Year-to-Date Compared to 5-Year Average (as of 5/31/19)

Quarter	Count of Incidents, 5-Year Average FY 13-14 thru FY 17-18	FY 18-19 Year-to-date	Difference per Quarter Count	%
Q1	152	154	+ 2	1.3%
Q2	148	127	-21	-14.2%
Q3	145	129	-16	-11.0%
Q4	144			
YTD TOTAL	445		-35	-7.9%

3. Client Manner of Death Summary (as of 5/31/19)

	FY 16-17		FY 17-18		FY 18-19	
	Count	%	Count	%	Count	%
Accident	21	10.6%	16	8.8%	2	1.1%
Accidental Overdose	33	16.7%	37	20.4%	40	21.4%
Homicide	2	1.0%	1	0.6%	0	0.0%
Natural Death	48	24.2%	67	37.0%	40	21.4%
Suicide	22	11.1%	22	12.2%	12	6.4%
	Gunshot - 9		Gunshot - 9		Gunshot - 4	
	Jumped - 4		Jumped - 1		Jumped - 0	
	Hanging - 4		Hanging - 5		Hanging - 6	
	Overdose - 3		Overdose - 3		Overdose - 1	
	Other - 2		Other - 4		Other - 1	
Undetermined	3	1.5%	3	1.7%	0	0.0%
Unknown	69	34.8%	35	19.3%	93	49.7%
TOTAL	198	100.0%	181	100.0%	187	100.0%

4. Count of Subcontractor Incidents per Level of Care (as of 5/31/19)

	FY 16-17		FY 17-18		FY 18-19	
	Count	%	Count	%	Count	%
Care Coordination					5	1.0%
Case Management	28	4.4%	36	6.7%	29	5.7%
CAT Team					1	0.2%
Crisis Stabilization Unit	117	18.4%	92	17.2%	83	16.3%
Detox	15	2.4%	18	3.4%	21	4.1%
Drop-In/Mental Health Clubhouse	15	2.4%	6	1.1%	4	0.8%
FACT/Forensic	40	6.3%	30	5.6%	45	8.9%
FI/FIS	1	0.2%	3	0.6%	0	0.0%
Medical Services	7	1.1%	4	0.7%	5	1.0%
Methadone	8	1.3%	8	1.5%	10	2.0%
Outpatient	125	19.6%	97	18.2%	117	23.0%
Residential/Inpatient	208	32.7%	163	30.5%	134	26.4%
SIPP/Therapeutic Group Home	5	0.8%	0	0.0%	4	0.8%
Supported Employment/Housing	17	2.7%	13	2.4%	13	2.6%
Not Applicable	12	1.9%	25	4.7%	18	3.5%
Other	39	6.1%	39	7.3%	18	3.5%
Special Project: PICCA					1	0.2%
TOTAL	637	100.0%	534	100.0%	508	100.0%

5. Subcontractor Incident Rates per 1000 Served (as of 5/31/19)

	FY 16-17		FY 17-18		FY 18-19	
	Count	Rate per 1000	Count	Rate per 1000	Count	Rate per 1000
PHONE NOTIFICATION						
Child-on-Child Sexual Abuse	9	0.1	5	0.0	6	0.1
Client Death	198	1.9	181	1.7	187	1.8
Media Event	20	0.2	10	0.1	13	0.1
Sexual Abuse/Battery	24	0.2	11	0.1	15	0.1
WRITTEN NOTIFICATION						
Child Arrest	7	0.1	2	0.0	2	0.0
Elopement	201	10.7	152	8.3	123	7.8
Employee Arrest	8	0.1	16	0.0	20	0.3
Employee Misconduct	34	0.3	35	0.3	31	0.3
Missing Child	6	0.1	4	0.0	0	0.0
Security Incident - Unintentional	3	0.0	1	0.0	0	0.0
Significant Injury to Client	30	0.3	27	0.3	22	0.2
Significant Injury to Staff	6	0.1	13	0.1	8	0.1
Suicide Attempt	51	0.5	48	0.5	59	0.6
Other:						
Biological/Chemical Threat	0	0.0	1	0.0	0	0.0
Human Acts	3	0.0	2	0.0	1	0.0
Vandalism/Theft/Damage/Fire	7	0.1	3	0.0	0	0.0
Visitor Injury or Death	2	0.0	0	0.0	0	0.0
No Other Category	28	0.3	23	0.3	21	0.2
TOTAL	637	6.2	534	5.1	508	4.8

6. File Review Summary (as of 5/31/19)

Number of	FY 16-17	FY 17-18	FY 18-19			
			Q1	Q2	Q3	Q4
File Reviews Carried over from Previous Period	19	6	9	2	1	0
New Files Referred for Review	25	15	6	4	2	9
FILES FOR REVIEW	44	21	15	6	3	9
Unable to Complete*			3	0	0	0
File Reviews Completed	38	12	10	5	3	0
FILE REVIEWS IN PROGRESS	6	9	2	1	0	9

* This category refers to reviews that were unable to be completed as a result of services funded by a source other than CFBHN.

File Review Results

File Reviews that Resulted in:	FY 16-17	FY 17-18	FY 18-19
Observations	9	2	0
Corrective Action	2	0	0

7. CFBHN Internal incidents and Events Summary (as of 5/31/19)

INCIDENTS	FY 16-17	FY 17-18	FY 18 - 19				
			Q1	Q2	Q3	Q4	TOTAL
Alarm issues	3	3	0	0	0	1	1
Building Security	0	0	0	0	0	0	0
Computer Security	1	0	0	1	1	0	2
Data Security							
Unsecured FROM CFBHN	6	13	1	3	1	2	7
Unsecured TO CFBHN	39	31	5	8	3	8	24
Other	4	2	1	0	0	2	3
Equipment Malfunction/Failure	0	1	4	2	1	0	7
Facility Issues	1	3	0	0	0	0	0
Infection Control	0	0	0	0	0	0	0
Medical Emergency/Injury/Death	2	0	0	0	0	0	0
Property Damage	2	0	0	0	0	0	0
Threat to Safety	1	0	0	1	0	0	1
Utility Failure							
Electrical	2	2	1	1	1	0	3
Heating/AC	0	0	1	0	0	0	1
Internet	1	5	2	0	2	0	4
Telephone	0	3	0	0	0	0	0
Water/Plumbing	0	1	1	0	0	0	1
Other	1	8	1	4	2	0	7
TOTAL	63	72	17	20	11	13	61

EVENTS	FY 16-17	FY 17-18	FY 18 - 19				
			Q1	Q2	Q3	Q4	TOTAL
Call to Abuse Registry	3	2	0	0	0	0	0
Legal Notice	1	1	1	1	0	0	2
Media Request	3	6	0	0	0	2	2
Public Records Request	3	15	5	2	7	2	16
Report to Licensing	0	0	0	0	0	0	0
Report to OIG	43	46	17	15	15	8	55
Wellness Check Request	2	0	1	0	0	1	2
Other	1	1	0	0	2	0	2
TOTAL	56	71	24	18	24	13	79



CFBHN IT Board Report June 2019

IT System Update

Current IT projects

- a. IS Strategic Committee / All Provider meetings:
 - i. Meeting every month.
 - ii. **FASAMS is the focus of the meetings.**
- b. FASAMS:
 - i. **Demo of the new upload system “System and Financial Exchange (SaFE)”.**
 - 1. Providers like the system
 - 2. Providers are still concerned about timeline for being ready with new XML filer format
 - a. **We have received formal request to extend the deadline.**
 - i. **We responded that we will continue to support the Vendor and not just let them hang.**
 - ii. **DCF could make changes anytime after 7/1 that could require us to change direction.**
 - iii. This is an ongoing discussion with the ME/IT committee and FAME.
- c. System Changes
 - i. Looking at options for our existing / new Health Data System for CFBHN
 - 1. Looking at ways to maximize system functionality and minimize costs.
 - ii. Working with Providers to have a HIE (Health Information Exchange)
 - 1. First Phase: Providers in Pinellas County
 - 2. Need to determine, How much and what to exchange
- d. County Projects:
 - i. Producing Quarterly reports for Hillsborough Integrated care project,
 - ii. PASCO school contract fully executed, setting up access and reporting.
 - iii. **Hillsborough school contract fully executed, setting up access and reporting**