

Department Directors Report
September 2019

Contracts

CFBHN the Schedule of Funds from DCF for FY 2019-2020. The following are a few highlights of the changes:

- Reduction in MH000 (Mental Health Services) of \$376,827, to fully fund Early Intervention Services for Psychotic Disorders in Hillsborough County. This will be partially offset with 2-year lapse funding in MH000 in the amount of \$56,988, for a balance of \$319,839 to be reduced. Three potential methodologies were proposed to regional councils related to how to apply these funds.
 - o Percentage reduction across all providers with MH000/MHSFP funding;
 - o Percentage reduction across Hillsborough County providers with MH000/MHSFP funding; or
 - o Reduction through circuits via equity.
- Reduction in prevention services of \$32,047. The majority of this will be offset by 2-year lapse, leaving a balance of \$941 to reduce.
- Reduction in children's BNET program of \$105,894.
- Increases in the following: PATH Grant, Prevention Partnerships for Success, SOR Prevention, and SOR Services.
- New funding in SOR Hospital Bridge, SOR Child Welfare, and Road to Recovery (opioid).

Two year lapses were reviewed and providers have been notified of upcoming reductions.

Contract amendments are in progress to add Year 2 funding for SOR services and SOR prevention into existing services contracts.

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 goals, objectives and action plan with the State's Wildly Important Goal (WIG) and the ROSC key indicators.

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; Mental Health



Collaborating for Excellence

Community Center Inc., 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, Charlotte Behavioral Health Care, DACCO, David Lawrence Center, Operation Par, SalusCare, Mental Health Community Centers Inc., Westcare of Florida

Status Update

CFBHN staff and DCF staff met with each of the providers participating in DCF's Self-Assessment Planning Tool (SAPT) pilot project. Utilizing their survey results from the SAPT, the following providers completed DCF's SAPT Strategic Assessment Action Plan for Improvement: NAMI Pinellas, ACTs, Baycare, Charlotte Behavioral Health Care, DACCO, David Lawrence Center, Operation Par, SalusCare, Mental Health Community Centers Inc., and Westcare of Florida.

These action steps address each domain that includes Administration, Treatment and Community Integration. The action plans will document the agency's strengths, weaknesses, the priority they want to focus on and the plan needed to address the priority. All plans were submitted to DCF on July 31, 2019.

CFBHN staff and participants from across the state participated in DCF's ROSC Guidance Document Workshop during the month of August facilitated by Lonnetta Albright and hosted by CFBHN. Recommendations were gathered from the group to assist in the development of the Department's ROSC Guidance Document.

Data Summary

Total number of organizational/agencies that participated include SAPT Pilot Program: 9 network service providers; 8 network service providers completed the SAPT Strategic Assessment Action Plan for Improvement; 17 CFBHN's Suncoast ROSC Transformation workgroup.



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Summary of Outcomes and Accomplishments to Date

Promoting Collaborative Service Relationships:

- A. C&FA in collaboration with Network Development's Hillsborough Community Manager collaborate with Hillsborough County health department, County Commissioners Office, ACTs, DACCO, Phoenix House, Hillsborough County Sheriff's Office, NaphCare, and Falkenburg Road Jail on the Hillsborough County Jail Behavioral Health Service Pilot Project and the Orient Road Service Coordination Project.

Outcome: Currently, ACTs, DACCO and Phoenix House are providing case management services within the Falkenburg Road Jail. The committee is developing processes for communications and workflow within the jail. In addition, this committee is developing an implementation plan for the Orient Road Services Coordination Project.

- B. C&FA collaborated with NAMI Hillsborough to develop an advocacy committee that would align with the NAMI Broward's statewide advocacy grant initiative "NAMI Advocacy Group" (NAG). The statewide committee has gained momentum and Mental Health America has now joined the committee. To encompass the collective efforts the name of this committee has changed to the FL Mental Health Advocacy Coalition.

Outcome: C&FA staff chairs the Hillsborough NAG committee that meets two times a month. An average of 10 individuals participated in these bi-monthly meetings to practice their skills, discuss local advocacy issues and develop a strategic plan to continue their efforts for when the grant funds are no longer available.

- C. C&FA and Karen Barfield, CFBHN Community Manager and the Healthy Hillsborough Behavioral Workgroup continue to collaborate on providing services to high need high utilizers in Hillsborough County through a Navigator Model funded by St. Joseph's Hospital, Inc. with service provision through ACTS.

Outcome: CFBHN and members of the workgroup, which include Hillsborough County, Public Defender's Office, Baycare, ACTS, St. Joseph's Hospital, Tampa General Hospital, HCA Hospitals, Gracepoint, and the Health Department, are meeting to review what was put in place for this model in 2018-2019 in an effort to develop a more structured process for the model.

- D. C&FA staff were invited to participate on a Peer Panel for the James A. Haley Veteran's Summit in Pasco County.

Outcome: Collaboration with the VA and their partners on the summits, which include HCA Hospitals, has led to a partnership between the VA and CFBHN in continuing the development of peer supports for the VA. CFBHN staff have assisted VA staff in creating a peer curriculum that has been certified by the Florida Certification Board for the training of veteran peers.



Training and Technical Assistance

- A. C&FA Staff provided technical assistance to NAMI Sarasota/Manatee, NAMI Pasco and NAMI Hillsborough.

Outcome: NAMI Sarasota will be completing a proposal to request funding from CFBHN.

Outcome: NAMI Hillsborough now has a fully functioning Board of Directors with elected board members that will prevent the chapter from going under.

Outcome: NAMI Pasco will be hiring an executive director within the next 2 months.

- B. C&FA staff participated in the Hillsborough County Sheriff's CIT Training.

Outcome: 15 Hillsborough County Sheriff and 4 Manatee county sheriff participated in this 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), the evidence-based program "Wellness Recovery Action Plan" (WRAP) and "Introduction to Wraparound", to build capacity in the Recovery Peer Specialist workforce development.

Outcome: 16 individuals were trained in WRAP, a 16-hour Peer certification requirement of the Florida Certification Board.

- B. C&FA staff participated in the five day Advanced level Wrap Facilitation Training along with others from each region in the state. When certified by the Copeland Center, the Advanced WRAP Facilitators will be able to train others as WRAP Facilitators.

Outcome: This training will give the Suncoast Region as well as the other regions the capacity needed to ensure the regions have trained WRAP Facilitators.

Summary of Barriers/Issues and Strategies to Mitigate them

No barriers were identified for the month of July or August.

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 High Fidelity Wraparound process.

Key Partners

Directions for Living is the subcontracted partner whom provides grant funded High Fidelity Wraparound (HFW) process to the circuit. BayCare, Success 4 Kids and Families (S4KF), Carlton Manor, Children's Home Society and Suncoast have committed to training staff in the delivery of HFW process are pursuing state certification as Wraparound Facilitators and coaches to remain sustainable.

Other Stakeholders: PEMHS, Pinellas and Pasco NAMI, Juvenile Welfare Board, SEDNET, St. Petersburg College- Clearwater campus, Recovery Epicenter, Inside Reach Ministries, Community Victory Family services, Ready For Life, Shady Hills United Methodist Church, Pasco Youth Haven, Magellan-MY LIFE, Pasco County School district, Clearwater Neighborhood Family Center and DEA 360 have been key partners this month.

Data Summary

Six additional referrals were made in June to Directions For Living Wraparound with five of them being assigned to a facilitator. Twenty-six families are currently being served through the grant funded High Fidelity Wraparound process. Twenty families reside in Pinellas and six families reside in Pasco County. Two families were discharged in June. Eleven additional referrals were made in July to Directions For Living Wraparound with one of them being assigned to a facilitator. Five families were discharged in the month of July. Twenty-two families are currently being served through the grant funded High Fidelity Wraparound process. Sixteen families reside in Pinellas and six families reside in Pasco County. Two families were discharged in July.

Training and Technical Assistance

CFBHN continues to provide Directions For Living technical assistance and training toward becoming a High Fidelity Wraparound provider within our region. We continue to facilitate meetings between the statewide wraparound coaches to ensure timely submission of coaching tools to allow their trained staff to become fully certified as Wraparound facilitators. We reviewed the CQI tool and determined we would meet monthly to review a case for fundamentals of Wraparound processes. This review of a case has begun and it reveals continued progress toward delivering High Fidelity Wraparound. The SOC Site Coordinator is actively preparing to become endorsed as a statewide trainer in Wraparound. The site coordinator is co-facilitating the August 7-9th Wraparound 101 training alongside statewide trainer, John Mayo. She is actively inviting participants who have applied to participate in this training. This training will be held at the RBCC.

Summary of Outcomes and Accomplishments to Date

With the goal to educate our families/caregivers on System of Care (SOC) concepts and principles, by promoting collaborative service relationships, 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.

- A. To strengthen our youth support partnerships in Pasco County, SOC Grant coordinators collaborated with, Recovery Epi-Center and Magellan/ MY LIFE youth group.



Outcome: Recovery Epi-Center agreed to sign the MOU to bring the MY LIFE youth supports to Pasco County with a kick off date of October 10. The Youth Empowerment Director, Greg Dicharry for MY LIFE is also the producer of Kevin Hines's documentary, "Suicide: The Ripple Effect". He has agreed to attend this event. We will invite faith leaders, Pasco educational staff, county dignitaries, and community members to increase their knowledge of MY LIFE youth supports and assist them in navigating resources that are available to meet the needs of the youth in the community.

Outcome: Pasco Youth Haven agreed to collaborate with CFBHN/SOC Staff to bring the Magellan Youth Leaders Inspiring Future Empowerment (MY LIFE) youth supports to Pasco County. The MOU is currently under review by management. Once signed we will be able to promote the kick off date of October 10.

- B. SOC coordinators have been members of the Rise Above! Youth Leadership Conference steering committee, under the leadership of Clearwater Neighborhood Family Center to continue in strengthening our community partnerships and develop youth leaders. This month, on July 25-27th we hosted the 2nd Annual Rise Above! Youth Leadership Conference at St. Petersburg College- Clearwater campus.

Outcome: Over 200 youth advocates aged 12 to 18, and parents attended the conference where they heard keynote and plenary addresses by Clearwater Chief of Police, Daniel Slaughter, King Nahh, the Board of County Commissioners' Office and SOC Youth Coordinator, Sarah Miller. Over the three-day period, the participants were able to tour the campus, and chose from 30 workshops to attend. Twenty-five conference vendors shared services and supports available to the community.

- C. SOC grant coordinators participated in the DEA 360 prevention strategies training. The DEA 360 Strategy Program has a three-prong comprehensive approach: 1) coordinated Law Enforcement operations/efforts – working with our state/local/tribal partners – opioid task force groups; 2) Through Diversion Control – engaging and educating the medical community (manufacturers, distributors, practitioners, and pharmacists) to increase awareness and encourage responsible prescribing practices; and 3) Community Outreach and Partnership – empowering our community/local organizations, coalitions, leaders, educators, to equip and empower them to fight this opioid epidemic and educate as to the root causes.

Outcome: The Site Coordinator appeared on Fox Channel 13 alongside Mike Furgason, the Head of the Tampa DEA office to promote the partnership and the 360 strategies. The two SOC coordinators were able to attend one of the "Train the Trainer" courses offered in four of the surrounding counties: Hillsborough, Manatee, Pasco, and Pinellas, which was attended by 175 Adults. The two SOC coordinators also attended the Youth Leadership Training course, which was attended by over 100 high school students from these same four counties. The Site Coordinator will participate in the coaches training in early August, as well as both coordinators will participate in the DEA Youth Summit planned for area 8th graders in late October.



- D. SOC grant site coordinator participated in the Peer Parent Coach training: The invitation to Change model on August 2-4, 2019. This class was sponsored by DEA 360 prevention strategies and facilitated by Dr. Catherine Tellides Jaffee with Harvard Medical School and Cordelia Kraus a Psychotherapist with the Center on Addiction and the Partnership for Drug-free kids. Tom Hedrick, founder of the partnership, attended the three-day training, which focused on Community Reinforcement, and Family Training (CRAFT), Motivational Interviewing (MI) and Acceptance and Commitment Therapy (ACT) concepts.

Outcome: Fifteen participants from Florida, Georgia, Virginia and New Jersey participated in the training. Seven participants were from the Suncoast region- Manatee, Pinellas, Pasco, Sarasota, and Hillsborough Counties. Each participant will begin to connect weekly as a Coach to parents of youth with co-occurring modalities who agree to Peer Parent coaching via the Partnership. The Site Coordinator will participate in bi-weekly support calls offered by the Partnership for the next six months.

Increase Peer-based Recovery Support Services

- E. SOC grant coordinators and CFBHN's Consumer and Family Affairs department continues to provide training and technical assistance to PEMHS through monthly meetings as the peer mentorship model is developed. This pathway will offer matched coaching and on the job training to peers seeking certification to allow them the ability to gain the 500 required work hours while providing peer services within one of the units.

Outcome: During July's meeting, we introduced Recovery Epi-Center as a partner, determined an MOU was necessary between PEMHS and NAMI as well as reviewed PEMHS' plan to utilize carryover dollars to foster a "wellness" space, staffed by mentorship program peers. This space is would allow consumers to socialize, learn new skills, and encourage and further workforce development.

Outcome: In August, we completed the MOU between PEMHS and NAMI as well as reviewed PEMHS' plan to utilize carryover dollars.

- F. SOC Youth/Family coordinator hosts opportunities for both youth and families to connect and share on a monthly basis at minimum.

Outcome: Four youth participated on the monthly statewide YES (Youth Ending Stigma) call with the SOC Youth/Family coordinator on July 1.

Outcome: SOC Youth/Family coordinator held two social/emotional wellness groups at Ready for Life on July 5 (5 people attended) and July 19 (5 people attended).

Outcome: On July 22, SOC Youth Coordinator held the monthly Youth on the Move – youth leadership meeting, which 7 youth attended at Ready for Life in Largo from 5:30-7pm. This group has been meeting consistently for seven months and plans to become a chapter of Youth MOVE National in January once the minimum year timeframe has been reached. The group includes representatives from NAMI Pinellas County, Mobile Crisis Response Team, Healthy Transitions, Direction for Living-wraparound, Ready for Life, and recently, representation from More Too Life has



committed to also attending as well as St. Petersburg College Clearwater Campus student leadership. Ready for Life has offered a proposal for carryover dollars to support the beginning phase of the group's initiatives including planning a kickoff party to celebrate their chartering and notifying the community of their existence, creating signage and t-shirts for the group, activities, and so forth.

Outcome: SOC Youth/Family Coordinator offers a Family Voices meeting on the fourth Thursday of every month. On July 25, the Youth/Family Coordinator met with two parents in the community to offer space to connect, share, and advocate. In addition, she is a leader in a text app discussion for mothers seeking support, resources, connection, and encouragement toward their families' recovery. This often requires daily participation.

Outcome: Two youth participated on the monthly statewide YES (Youth Ending Stigma) call with the SOC Youth/Family coordinator on August 5.

Outcome: SOC Youth/Family coordinator held two social/emotional wellness groups at Ready for Life on August 9 (5 people attended).

Outcome: On August 26, SOC Youth Coordinator held the monthly Youth on the Move – youth leadership meeting, which 17 youth attended at Ready for Life in Largo from 5:30-7pm. This group has been meeting consistently for seven months and plans to become a chapter of Youth MOVE National in January once the minimum year timeframe has been reached. The group includes representatives from NAMI Pinellas County, Mobile Crisis Response Team, Healthy Transitions, Direction for Living-wraparound, and Ready for Life. In addition, at this meeting we had additional representatives from the Juvenile Welfare Board, More Too Life, and NAMI advocacy attend. Ready for Life has offered a proposal for carryover dollars to support the beginning phase of the group's initiatives including planning a kickoff party to celebrate their chartering and notifying the community of their existence, creating signage and t-shirts for the group, activities, and so forth.

Outcome: SOC Youth/Family Coordinator offers a Family Voices meeting on the fourth Thursday of every month. On August 22, the Youth/Family Coordinator met with two parents in the community to offer space to connect, share, and advocate. In addition, she is a leader in a text app discussion for mothers seeking support, resources, connection, and encouragement toward their families' recovery. This often requires daily participation.

G. SOC Youth/Family Coordinator regularly attends community meetings and events for the purposes of outreach to engage families/youth and offer opportunities for support, connection, and education.

Outcome: SOC Youth/Family Coordinator met with Nilda Otero from More Too Life on July 3 and shared information regarding SOC initiatives including Wraparound training, training to become a certified recovery peer specialist, and the Youth on the Move meeting. Nilda showed great interest in all the mentioned opportunities and has registered for the upcoming Wraparound facilitator class. She intends on attending the next Youth on the Move meeting with some youth from her organization and expressed they would like to become more involved. More Too Life attended the recent Rising Above Conference held July 25-27 as well.



Outcome: SOC Youth/Family Coordinator attended the PACE Center for Girls Open House on July 17 to learn more about their program and resources as well as share about Youth on the Move and Wraparound for the girls attending the school.

Outcome: SOC Youth/Family Coordinator attended a meeting with student leadership at St. Petersburg College Clearwater campus on July 18 to share about Youth on the Move initiatives and Wraparound. SPC Clearwater intends to help promote, attend, and support the Youth on the Move meetings. They also have a strong interest in advocacy and offering an advocacy workshop to the SPC Clearwater campus.

Outcome: SOC Youth/Family Coordinator attended a Minority Mental Health Awareness event at Friendship Missionary Baptist Church 3300 31st St S in St. Petersburg on July 20. She shared SOC/Wraparound information and NAMI resources with about 120 families, as well as offered the Ending the Silence presentation to raise awareness to mental illness/suicide prevention, connect them with ways to get help, and end the stigma. Eight middle and high school students attended.

Outcome: On July 22, the SOC Youth/Family Coordinator met with Eric Harris from the City of Clearwater who created a schedule to include a twice a week social/emotional component (middle schoolers Tuesdays, high schoolers Thursdays) into their after-school activities at the Clearwater Neighborhood Family Center. The SOC Youth/Family Coordinator will create and train youth to lead this for the upcoming year. The Clearwater Neighborhood Family Center intends to allow a contracted position to continue this curriculum after both the school year and the grant ends. This endeavor is set to begin September 3.

Outcome: SOC Youth/Family Coordinator met with Paige Tucker from Juvenile Welfare Board on July 26 to discuss youth initiatives and creating opportunities for both youth leaders working with JWB and the youth leaders working with Youth on the Move to become more involved by sharing events, trainings, group, and committee/leadership opportunities. The SOC Youth/Family Coordinator is planning to attend JWB youth committee meetings in August to share about Youth on the Move and help to support them in planning their next youth event.

Outcome: SOC Youth/Family Coordinator and site coordinator attended a community meeting in Pasco County with representatives from Pasco-Hernando State College, Recovery Epi Center, Shady Hills United Methodist Church, NAMI Pasco, Inside Reach Ministries, Pasco Youth Haven, STAND, and Magellan to discuss youth initiatives in Pasco County and opportunities to collaborate to develop a youth organization under Magellan MY LIFE.

Summary of Barriers/Issues and Strategies to Mitigate them

As of July, the Pasco Coordinating Council has made little progress as we approach the deadline for the financial and sustainability plan to be submitted to the state. The Co-Chair has returned after being out of the office for a long period and we were able to meet to address priorities. The leadership of the Children's Behavioral Health Partnership continues to be discussed at the district level as the school district mental health program continues to grow towards a sustainable model of care for students with complex mental health needs.

The number of families and youth attending the advisory groups continues to increase, however families receiving grant funded Wraparound who participate in the coordinating councils and/or the family and youth advisory groups continues to be low. The number of families who are participating in the USF evaluations of the grant is also low. The SOC Grant Family and



Youth Coordinator has continued efforts with the Directions For Living Youth Peer Specialist to encourage families and youth receiving services to participate in the governance and supportive connections to increase the volume of the consumers voice in our community. The SOC Site Coordinator has reached out to the program staff to determine how we can increase the number of families who are willing to share their insight as to the quality of care and fidelity to the Wraparound model being delivered because of the grant funding.

Since July, the Pasco Coordinating Council has made progress towards setting the next community meeting for September 13. The leadership of the Children's Behavioral Health Partnership continues to be discussed at the district level as the school district mental health program continues to grow towards a sustainable model of care for students with complex mental health needs.

Human Resources

1st Quarter - 7/1/2018 - 9/30/2018 as of Sept 17

66	staff beginning of quarter	
65	staff end of quarter	
1	separated	
0	new hire	
1.54%		2%
1.54%	1	voluntary
0.00%		involuntary

2nd Quarter - 10/1/2018 - 12/31/2018 - as of 9.17.2018

65	staff beginning of quarter	
65	staff end of quarter	
0	separated	
0	new hire	
0.00%		0.0%
0.00%	0	voluntary
0.00%	0	involuntary



Network Development/ Clinical Services

CFBHN Children's Mental Health System of Care Assistance

CFBHN continues to provide education, technical assistance and guidance to our community stakeholders, families and system partners on the continuum of services within the circuits system of care. CFBHN facilitated three circuit staffings for system partners that focused on "Accessing Levels of Care ". CFBHN has observed active attendance, participation and engagement with families, system of care providers, health plans and other partners working with the child and family. CFBHN continues to assist community stakeholders in the early identification of children with significant mental health impairments. CFBHN is continuing to providing technical assistance and guidance to system of care providers to identify cases with high utilization earlier emphasizing prevention, interventions and resources to our consumers thru development of youth at risk staffing models. In addition, CFBHN CMH staff continues to work with The Florida Coalition for Children and the Department of Children and Families on several initiatives through a mutual strategic plan. CFBHN CMH Team participated in 34 Interagency Staffings this reporting period which resulted in 0 children being placed into child welfare and higher levels of care during the call

Child Welfare/SAMH Integration

Family Intervention Services (FIS)

New guidelines and performance measures for the FIS program were established for FY 19-20 and were implemented July 1, 2019. Key highlights of updated program requirements include:

- Provide ongoing training for referral sources regarding FIS program as well as for FIS staff on child welfare topics
- Co-locate FIS staff at referral source to strengthen handoffs
- Communicate regularly with referral source regarding parent engagement
- Attempt initial contact with referred parent within 1 business day of referral
- Update referral source of key events within 1 business day (e.g. scheduled appointments, parent no-shows, treatment recommendations, etc.)
- Document in FSFN at least weekly with summary of events
- Schedule parent appointments in a timely manner
- Provide services in home and in community
- Offer services for parents during non-traditional hours, including evenings and weekends
- Make all efforts to reduce barriers to parent engagement through additional use of incidental funding

Performance measures for FY 19-20 specifically target the time to successful contact with client, time to completion of assessment, and time to client's successful engagement in their first treatment service



Referral data tracking, including client specific information, began in June 2018 allowing for detailed evaluation of aspects within the FIS program.

Overall, referrals to FIS are continuing to increase, reaching 387 total in July 2019. In comparison, May and June 2019 referrals totaled 310 and 315 respectively. Overall improvement across the Region has been seen in areas of time to successful contact, time to completion of intake, and time to completion of assessment. Additionally, improvement is being seen in the length of time between client's completion of their assessment and their first treatment service.

Family Intensive Treatment (FIT)

CFBHN continues to collaborate with other MEs, DCF, and other pertinent stakeholders. CFBHN participates in monthly FIT calls and attends all scheduled face to face meetings. Currently, CFBHN is exploring adding an advocate from local domestic violence shelters as a members of FIT teams. This has been piloted in other regions and was very effective in helping to recognize domestic violence in FIT clients and better link them to services. CFBHN is meeting with select FIT providers to determine if emulating a similar position would be possible within the SunCoast Region.

Statewide efforts are in place to implement a FIT manual for use by all FIT providers. Additionally, a fidelity tool was created as part of the FIT evaluation project completed by University of South Florida and the tool is being revised to be piloted by FIT teams for future implementation. CFBHN will participate in work groups and pilot projects.

FIT is well utilized in all areas currently available within CFBHN's oversight. FIT teams continue to provide an intense level of substance abuse and mental health services. An evaluation of the FIT program was completed by University of South Florida with hopes of promoting FIT as an Evidence Based Treatment (EBT). Preliminary findings demonstrate families involved with a FIT team are successfully completing treatment at a higher rate than other traditional substance abuse programs. As part of the evaluation, a fidelity tool was also created, however, it has not yet been approved for use in the field at this time

Behavioral Health Consultants (BHCs)

Data Summary

There are currently five Behavioral Health Consultants (BHC) positions within the SunCoast Region and one in Circuit 10. The BHC provides consultations to the Child Protective Investigators (CPIs) to assist in information gathering regarding danger threats, adult functioning, and caregiver protective capacities. This is to assist the CPIs in understanding the severity of the substance abuse and mental health of the parents and/or caregivers and the effects the mental health and/or substance abuse could have on the safety of the children in the home. This information assists the CPIs in the information gathering for the Family Functioning Assessment and establishing Caregiver Protective Capacities. Each month, the BHC track their data and submit to CFBHN. The data collection points have been amended throughout the FY to best capture the work and successes the BHCs are having.

Purpose of collaboration, any updates or new strategies undertaken

Efforts are being made to align the Behavioral Health Consultant position funded by DCF with the BHC positions funded by CFBHN. Changes were made in the tracking spreadsheet CFBHN BHCs will use for FY19-20 to be similar to that of the DCF BHC. This updated tracking spreadsheet will also provide client specific data which will allow for ongoing analysis of cases referred to the BHCs and their child welfare outcomes. Additionally, documentation templates were provided to streamline consultation and clinical assessment notes for both DCF and ME funded BHCs.

FACT

CFBHN'S 14 FACT teams continue to focus on priority populations as identified. Diversion for SMHTF admission and expediting discharge from SMHTF. FACT procurement of a new provider for Collier County FACT is David Lawrence Center. As of the end of July 2019, they are fully staffed, have transferred all documents to EMR, and provided Fact staff with cell phones and laptops so accountability and responsiveness is increased. Excellent start to this transition.

ALL CIRCUITS: FACT

QUARTER ADMISSIONS= N/A

FY 19/20 ADMISSIONS TO DATE =20

QUARTER DISCHARGES= N/A

FY 18/19 DISCHARGES TO DATE = 25

In FY19/20, focus will continue on the priority populations and being responsive to state hospital discharge needs.

Forensic

SunCoast Region/C10 has diverted 16 individuals from the State Hospital for July 2019 and continues to work with case management providers to increase diversion number each month. For July 1, 2019 to end of August 2019, the SunCoast Region/C10 has also facilitated over 60 forensic residential referrals to the community partners within the region to promote diversions from the Forensic state mental health treatment facilities and assisted in 18* discharges in the month of July from South Florida Evaluation and Treatment Center and Florida State Hospital. Fiscal year to date the Suncoast Region/C10 has assisted with 112 Forensic State Hospital Admissions throughout the region.

The regional forensic program manager participates monthly in statewide forensic conference calls to address DCF's priorities of efforts (POE). These calls discuss the monthly updates of the forensic action plans to address the POE.

Prevention

Number Served for August, 2019

Where Outcome Type is Media Generated or Services Provided or Community Action or Community Change
Working off cached data - not live

	Youth	Adults	Unknown	Total
Media Generated	295,447	946,976	-	1,242,423
Services Provided	27,102	14,932	2	42,036
Community Action	4,254	1,727	-	5,981
Community Change	11,958	878	-	12,836
TOTAL	338,761	964,513	2	1,303,276

Healthy Transitions:

Since its official launch on January 1, 2016, Florida Healthy Transitions has provided information, crisis intervention, community linkages and/or behavioral health services to over **26, 000** youth, young adults and their families. The program continues to meet its goals for the number of youth and young adults who receive Wraparound services, and exceeds its goals for the number of young people who are provided with program information through outreach, and those who are assessed by the 2-1-1 Contact Centers.

Care Coordination

CFBHN Utilization/Care Managers continue to outreach to all regional providers of services for anyone waiting for a bed-based SA service resulting 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 remain on schedule to serve 75 clients for this fiscal year and have served. Currently there are 18 participants enrolled and there are 3 others in the process of being scheduled/enrolled. Success for Kids and Families continue contact with CSU/CCSUs and Healthy Mind (HM) team members are present at Juvenile and Adult Mental Health Courts (as scheduled) and phone/email contact is ongoing between Public Defender (PD) office and HM team. Collaboration meetings/calls are ongoing (2 held in August 2019) with Dr. Nev Jones, Dr Glenn Currier, Kristin Kosyluk, and Virginai Liddell (newly hired Clinical Trials Recruitment Specialist) with the USF Dept. of Psychiatry. They continue to provide guidance and support regarding best assessment/implementation/service delivery practices. Several meetings and presentations have been



provided at local colleges/universities. Meetings/Presentations were held with the following in August 2019: GP CAT Team; USF Psychiatry Department; Acute Care Committee; Crisis Center of TB; HCC; Several alternative schools & technical centers; HCSD (SW & Psychologists); ASO Supervisors; Presentations/meetings are scheduled in September for: Juvenile Justice Board and USF Dept. of Psychiatry / Care Coordinators. A process is now in place for the secure transmission of participant information between agencies. In addition, Family Education Clinician has translated the Healthy Minds Welcome Guide to Spanish. It has been utilized with 3 families thus far.

2. **SOR (Statewide Opioid Response)**

CFBHN continues to engage community Providers and stakeholders to increase MAT services to individuals dealing with Opioid misuse. As part of the System Priorities outlined in the SOR Grant Guidance - Priority 1 is the establishment of Emergency Department Bridges. Currently there are three in existence in the Suncoast region and C10. DCF has set aside \$2.6 million for a 10 – month duration to be utilized to develop hospital bridge partnership projects across the remaining parts of the Suncoast region. Each potential hospital with partnered provider will be allocated \$150,000 to fund the project. CFBHN facilitates relationships with hospital emergency departments (EDs) and community substance abuse providers in the development of hospital bridge partnership programs. These efforts have yielded the following partnerships: ACTS – Tampa General Hospital, DACCO – Tampa General, First Step - Sarasota Memorial, First Step – Manatee Memorial, and Operation Par – St. Anthony's Hospital. Peers will work with the EDs to transition opioid overdoses patients from the ED to the local substance abuse provider. As part of the SOR grant, CFBHN has been given \$2.1 million to target parents/caretakers involved in the child welfare system with identified opioid use disorders. CFBHN will collaborate with Community Based Care (CBCs) agencies, substance abuse providers, and child welfare to expand access to MAT related services to those individuals identified through child welfare referrals.

3. **Mobile Crisis Services**

The Mobile Crisis Response Services serves the Suncoast Region and Circuit 10. MRTs provide on-demand crisis intervention services in any setting in which a behavioral health crisis is occurring, including homes, schools and emergency departments. Mobile response services are available 24/7 by a team of professionals and paraprofessionals, who are trained in crisis intervention skills to ensure timely access to supports and services. In addition to helping resolve the crisis, teams work with the individual and their families to identify and develop strategies for effectively dealing with potential future crises. MRT providers are responsible for working with stakeholders to develop a community plan for immediate response and de-escalation, but also crisis and safety planning. Stakeholder collaboration includes law enforcement and school superintendents, but may also include other areas within education, emergency responders, and businesses, other health and human service related providers, family advocacy groups, peer organizations, and emergency dispatchers. Providers are giving clients warm hand-offs to other behavioral health services in the community should the clients not need immediate or emergent behavioral health care.



Communication

Community

Production in process to produce a 2-page Infographic by county/circuit to complement the Needs Assessment report. These will also be used for meetings with elected officials.

Legislative

Delegation meetings in process – four completed to date. More dates have been released and CFBHN is on schedule to speak. Draft 3-min speech has been produced to include specific asks by county as well as input from FAME. Individual meetings in district are being schedule through Laura Gross.

Workshops/Award Recognitions/Other

Doris Nardelli and Marcia Monroe presented two workshops at FBHCON annual conference in Orlando.

Press & Media

Statewide media proposals presented to FAME. Will be reviewed again at upcoming October meeting.

Website

Funder logo footer production in process. Website locator has been fixed and is functional. Needs Assessment survey button placed on home page of website. Recent workshop presentations from FBHCON added to website.

Video Production

None this period. There is no budget to continue production at this time.

Print and Communication Production

Beginning work on annual report. Completed work on production of materials to support ROSC and SOC to be delivered end September.

Internal

Prepping second corporate clothing program offering with new colors for polos and woven dress shirts.

Social Media

Facebook Likes total is 2911 (ncrease of 30); Page Followers 3,055 (increase of 30); Demographics unchanged – 77% Women/22% Men – 25-34 age group highest engaged Video viewing exploded again largely based on viewing of the Good Sam video.

Top Face Book Analysis:

- Post Reach (4,451),



- Post Engagement (3,994)
- Video Viewing (248)

Twitter Analytics:

- All posts that reach over 1K on FB are shared on Twitter
- 16 Twitter post in July

Overview

Graphic posts are outperforming all other posts on a regular basis. Finding and sharing or creating an excellent graphic for the day is important to the stability and future growth of the page.

On 8/7, we posted a link regarding the false connection between mental illness and violence. This post stimulated comments. One reader asked for a profile of a mass shooter and vendor responded with an article from the NYT which highlighted the factors often in play with mass shooters. After posting this, another reader demanded citations for the facts in the NYT article. Vendor replied on post attempting to clarify. Reader again responded in argumentative fashion alleging vendor didn't "advance my argument" and claiming she put a "warm and fuzzy spin to it" and that this was "counterproductive to more funding." This person was confusing. Vendor didn't understand exactly what they wanted from the page or from her. I took the conversation to private message, explaining that she did not understand what he wanted, that the NYT article would suffice as a citation for academia and that she knew this because she had an advanced education. Also mentioned that to her knowledge, CFBHN social media has zero to do with funding. Individual wrote back, almost a vomit of words, again confusing vendor as to what the desire of the individual was. Vendor simply wrote back that she did not mean to offend and to her surprise, the individual responded with "Have a nice night" and a peace icon.

This same post prompted a message from Fox 13 reporter Hailey Hinds (as Hailey Jacklyn) requesting an interview with someone from CFBHN. This request was forwarded to communication director. The piece was published and posted on 8/13.



Continuous Quality Improvement Monthly Report FY 19-20

September, 2019

1. Monitoring Update for FY 19-20 (As of 8/31/19)

TABLE A: Provider Monitoring Status Summary		
Number of Provider Monitorings:	Count	%
<i>In-Progress</i>	0	0%
<i>Not Yet Started</i>	58	100%
<i>Monitored - Complete</i>	0	0%
<i>Monitored - Follow-Up Required</i>	0	0%
<i>Follow-Up Complete</i>	0	0%
TOTAL	58	100%

TABLE B: Corrective Action (CA)/Area of Concern (AOC)/Commendation Summary						
Covered Service/Program Area/Tool	CA		AOC		Commendation	
	Count	%	Count	%	Count	%
Administrative Compliance	0	0.0%	0	0.0%	0	0.0%
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	0	0.0%	0	0.0%	0	0.0%
CARF Unaccredited Standards	0	0.0%	0	0.0%	0	0.0%
Crisis Stabilization Unit (CSU)	0	0.0%	0	0.0%	0	0.0%
Deaf and Hard-of-Hearing	0	0.0%	0	0.0%	0	0.0%
Employee Verification	0	0.0%	0	0.0%	0	0.0%
FACT	0	0.0%	0	0.0%	0	0.0%
FIT	0	0.0%	0	0.0%	0	0.0%
Forensic	0	0.0%	0	0.0%	0	0.0%
HIV	0	0.0%	0	0.0%	0	0.0%
Indigent Drug Program	0	0.0%	0	0.0%	0	0.0%
Incidentals	0	0.0%	0	0.0%	0	0.0%
Mental Health	0	0.0%	0	0.0%	0	0.0%
Outreach	0	0.0%	0	0.0%	0	0.0%
PATH	0	0.0%	0	0.0%	0	0.0%
Prevention	0	0.0%	0	0.0%	0	0.0%
Service Validation	0	0.0%	0	0.0%	0	0.0%
Staff Time Validation	0	0.0%	0	0.0%	0	0.0%
TANF	0	0.0%	0	0.0%	0	0.0%
Women's Block Grant	0	0.0%	0	0.0%	0	0.0%
Other	0	0.0%	0	0.0%	0	0.0%
TOTAL	0	0.0%	0	0.0%	0	0.0%

2. Annual Comparative Data (FY 16-17 to FY 19-20):

A	MONITORING TYPE - MULTI-YEAR SUMMARY	Fiscal Year			
		16-17	17-18	18-19	19-20
	<i>Number of FULL Monitorings</i>	40	33	21	39
	<i>Number of LIMITED and COALITION Monitorings</i>	20	28	36	17
	<i>Number of BASELINE Monitorings</i>	0	0	2	2
	TOTAL Number of Provider Monitorings Conducted	60	61	59	58

2. Annual Data (FY 16-17 to FY 19-20):

B	PROVIDER MONITORING RESULTS	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
		Count	%	Count	%	Count	%	Count	%
	Number of Providers Monitorings That:								
	<i>Resulted in NO Corrective Action or Area of Concern</i>	28	47%	39	64%	32	54%	0	0%
	<i>REQUIRE FOLLOW-UP</i>	32	53%	22	36%	27	46%	0	0%
	<i>Monitoring Review is PENDING</i>	0	0%	0	0%	0	0%	58	100%
	TOTAL Number of Provider Monitorings Conducted	60	100%	61	100%	59	100%	58	100%

C	SUMMARY OF CORRECTIVE ACTIONS (CA) - AREAS OF CONCERN (AOC) - COMMENDATIONS	FY 16-17	FY 17-18	FY 18-19	FY 19-20
	Corrective Actions Issued	53	24	35	0
	Areas of Concern Identified	33	12	6	0
	Commendations Given	23	9	8	0

D	FOLLOW-UP SUMMARY: PROVIDER PROGRESS STATUS	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
		Count	%	Count	%	Count	%	Count	%
	Number of Providers that Required Follow-Up	32		22		27		0	
	<i>Follow-Up WAIVED due to Contract Termination</i>	0		2		0		0	
	<i>Follow-Up WAIVED due to Relinquished Program</i>	0		1		0		0	
	<i>Follow-Up TABLED for Completion in Next Fiscal Year</i>	3		5		7		0	
	Adjusted Number of Follow-Ups to Complete	29		14		20		0	
	<i>Follow-Ups Not Yet Completed</i>	0	0%	0	0%	10	50%	0	0%
	Follow-Ups COMPLETED to Date	29	100%	14	100%	10	50%	0	0%

E	FOLLOW-UP SUMMARY: CA & AOC RESULTS	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
		CAs	AOCs	CAs	AOCs	CAs	AOCs	CAs	AOCs
	Number of CAs & AOCs Issued	53	33	24	12	35	6		
	<i>Number of CAs & AOCs WAIVED or TABLED</i>	0	0	9	3	9	2		
	Adjusted Number of CAs & AOCs	53	33	15	9	26	4		
	<i>Number PENDING at Follow-Up</i>	0	0	0	0	12	2		
	<i>Number RESOLVED at Follow-Up</i>	48	30	8	6	10	2		
	Number of CAs/AOCs UNRESOLVED at Follow-Up	5	3	7	3	4	0		
	<i>Percent of CAs/AOCs UNRESOLVED at Follow-Up</i>	9.4%	9.1%	46.7%	33.3%	15.4%	0.0%		

F	PROVIDER MONITORING: YEAR-END STATUS	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
		Count	%	Count	%	Count	%	Count	%
	Number of Providers:								
	<i>With Monitoring PENDING</i>			0	0%	0	0%	58	100%
	<i>That Earned No CAs/AOCs</i>			39	64%	32	54%	0	0%
	<i>With Follow-Up PENDING</i>			0	0%	10	17%	0	0%
	<i>With WAIVED or TABLED CAs/AOCs</i>			8	13%	7	12%	0	0%
	<i>That RESOLVED All CAs/AOCs at Follow-Up</i>			7	11%	8	14%	0	0%
	<i>With UNRESOLVED CAs/AOCs After Follow-Up</i>			7	11%	2	3%	0	0%
	TOTAL Number of Providers Monitored in the FY			61	100%	59	100%	58	100%

3. CQI Goal Summary for FY 19-20

To be determined

4. Other Updates

A. Compliance issues: No compliance issues to report.

B. The next Board CQI Committee meeting is scheduled for Thursday, November 21st at 11:00 am.

RISK MANAGEMENT REPORT - September, 2019

1. Count of Subcontractor Incident Reports Received (as of 8/31/19)

Incident Type	July 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Year-to-Date
3-Hour (Phone) Notification													
Child on Child Sexual Abuse	4	1	0	0	0	0	0	0	0	0	0	0	5
Client Death	21	19	0	0	0	0	0	0	0	0	0	0	40
Media Event	1	1	0	0	0	0	0	0	0	0	0	0	2
Sexual Abuse/Sexual Battery	2	1	0	0	0	0	0	0	0	0	0	0	3
24-Hour (RL6) Notification													
Child Arrest	0	0	0	0	0	0	0	0	0	0	0	0	0
Elopement	7	13	0	0	0	0	0	0	0	0	0	0	20
Employee Arrest	0	1	0	0	0	0	0	0	0	0	0	0	1
Employee Misconduct	1	2	0	0	0	0	0	0	0	0	0	0	3
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	2	2	0	0	0	0	0	0	0	0	0	0	4
Significant Injury to Staff	0	1	0	0	0	0	0	0	0	0	0	0	1
Suicide Attempt	7	3	0	0	0	0	0	0	0	0	0	0	10
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	0	0	0	0	0	0
Theft, Vandalism	2	1	0	0	0	0	0	0	0	0	0	0	3
No Other Category	2	0	0	0	0	0	0	0	0	0	0	0	2
TOTAL	49	45	0	0	0	0	0	0	0	0	0	0	94
FY 18-19	51	52	51	46	49	32	42	48	39	40	57	39	546
FY 17-18	55	40	38	42	41	30	57	36	45	56	49	45	534
FY 16-17	43	62	62	60	45	65	62	43	56	46	49	44	637
3-Year Average, by Month	49.7	51.3	50.3	49.3	45.0	42.3	53.7	42.3	46.7	47.3	51.7	42.7	572.3

Average Number of Reports per Month	% Change - Current vs. Previous Year
47.0	+ 3.3%
44.5	
53.1	

2. Timeliness of Incident Reports - RL6 Submission (as of 8/31/19)

		FY 16-17		FY 17-18		FY 18-19		FY 19-20	
		Count	%	Count	%	Count	%	Count	%
From Providers to CFBHN	On-Time	627	98.4%	513	96.1%	530	97.1%	87	92.6%
	Late	10	1.6%	21	3.9%	16	2.9%	7	7.4%
	TOTAL	637	100.0%	534	100.0%	546	100.0%	94	100.0%
		Count	%	Count	%	Count	%	Count	%
From CFBHN to DCF (IRAS)	On-Time	637	100.0%	533	99.8%	541	99.1%	94	100.0%
	Late	0	0.0%	1	0.2%	5	0.9%	0	0.0%
	TOTAL	637	100.0%	534	100.0%	546	100.0%	94	100.0%

3. Client Manner of Death Summary (as of 8/31/19)

	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
	Count	%	Count	%	Count	%	Count	%
Accident	21	10.6%	16	8.8%	6	2.9%	2	5.0%
Accident -Overdose	33	16.7%	38	21.0%	52	25.1%	2	5.0%
Homicide	2	1.0%	1	0.6%	0	0.0%	2	5.0%
Natural Death	48	24.2%	67	37.0%	56	27.1%	0	0.0%
Suicide	22	11.1%	23	12.7%	16	7.7%	2	5.0%
	Gunshot - 9		Gunshot - 9		Gunshot - 6		Gunshot - 0	
	Jumped - 4		Jumped - 2		Jumped - 0		Jumped - 0	
	Hanging - 4		Hanging - 5		Hanging - 7		Hanging - 2	
	Overdose - 3		Overdose - 3		Overdose - 2		Overdose - 0	
	Other - 2		Other - 4		Other - 1		Other - 0	
Undetermined	3	1.5%	3	1.7%	2	1.0%	0	0.0%
Unknown	69	34.8%	33	18.2%	75	36.2%	32	80.0%
TOTAL	198	100.0%	181	100.0%	207	100.0%	40	100.0%

4. Count of Subcontractor Incidents per Level of Care (as of 8/31/19)

	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
	Count	%	Count	%	Count	%	Count	%
Care Coordination					6	1.1%	0	0.0%
Case Management	28	4.4%	36	6.7%	31	5.7%	1	1.1%
CAT Team					1	0.2%	0	0.0%
Crisis Stabilization Unit	117	18.4%	92	17.2%	91	16.7%	16	17.0%
Detox	15	2.4%	18	3.4%	24	4.4%	3	3.2%
Drop-In/Mental Health Clubhouse	15	2.4%	6	1.1%	5	0.9%	5	5.3%
FACT/Forensic	40	6.3%	30	5.6%	50	9.2%	5	5.3%
FIT/FIS	1	0.2%	3	0.6%	0	0.0%	0	0.0%
Medical Services	7	1.1%	4	0.7%	6	1.1%	2	2.1%
Methadone	8	1.3%	8	1.5%	10	1.8%	0	0.0%
Outpatient	125	19.6%	97	18.2%	122	22.3%	26	27.7%
Residential	208	32.7%	163	30.5%	147	26.9%	18	19.1%
SIPP/Therapeutic Group Home	5	0.8%	0	0.0%	4	0.7%	0	0.0%
Supported Employment/Housing	17	2.7%	13	2.4%	13	2.4%	5	5.3%
Not Applicable	12	1.9%	25	4.7%	21	3.8%	5	5.3%
Other	39	6.1%	39	7.3%	15	2.7%	8	8.5%
TOTAL	637	100.0%	534	100.0%	546	100.0%	94	100.0%

5. Subcontractor Incident Rates per 1000 Served (as of 8/31/19)

	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
	Count	Rate per 1000	Count	Rate per 1000	Count	Rate per 1000	Count	Rate per 1000
3-Hour (Phone) Notification								
Child-on-Child Sexual Abuse	9	0.1	5	0.0	7	0.1	5	0.1
Client Death	198	1.9	181	1.7	207	1.8	40	1.1
Media Event	20	0.2	10	0.1	15	0.1	2	0.1
Sexual Abuse/Battery	24	0.2	11	0.1	15	0.1	3	0.1
24-Hour (RL6) Notification								
Child Arrest	7	0.1	2	0.0	2	0.0	0	0.0
Elopement	201	10.7	152	8.3	129	7.0	20	7.3
Employee Arrest	8	0.1	16	0.0	22	0.2	1	0.0
Employee Misconduct	34	0.3	35	0.3	35	0.3	3	0.1
Missing Child	6	0.1	4	0.0	0	0.0	0	0.0
Security Incident - Unintentional	3	0.0	1	0.0	0	0.0	0	0.0
Significant Injury to Client	30	0.3	27	0.3	22	0.2	4	0.1
Significant Injury to Staff	6	0.1	13	0.1	8	0.1	1	0.0
Suicide Attempt	51	0.5	48	0.5	61	0.5	10	0.3
Other:								
Biological/Chemical Threat	0	0.0	1	0.0	0	0.0	0	0.0
Human Acts	3	0.0	2	0.0	1	0.0	0	0.0
Vandalism/Theft/Damage/Fire	7	0.1	3	0.0	0	0.0	3	0.1
Visitor Injury or Death	2	0.0	0	0.0	0	0.0	0	0.0
No Other Category	28	0.3	23	0.3	22	0.2	2	0.1
TOTAL	637	6.2	534	5.1	546	4.7	94	2.7

6. File Review Summary (as of 8/31/19)

Number of	FY 16-17	FY 17-18	FY 18-19	FY 19-20
File Reviews Carried over from Previous Period	19	6	9	5
New Files Referred for Review	25	15	21	5
FILES FOR REVIEW	44	21	30	10
Unable to Complete*			4	0
File Reviews Completed	38	12	21	2
FILE REVIEWS IN PROGRESS	6	9	5	8

File Review Results

File Reviews that Resulted in:	16-17	17-18	18-19	19-20
Observations	9	2	0	0
Corective Action	2	0	0	0

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

7. CFBHN Internal incidents and Events Summary (as of 8/31/19)

INCIDENTS	FY 16-17	FY 17-18	FY 18 - 19	FY 19-20				
				Q1	Q2	Q3	Q4	TOTAL
Alarm issues	3	3	1					0
Building Security	0	0	0					0
Computer Security	1	0	2	2				2
Data Security								
Unsecured FROM CFBHN	6	13	8	2				2
Unsecured TO CFBHN	39	31	25	4				4
Other	4	2	3	1				1
Equipment Malfunction/Failure	0	1	8	2				2
Facility Issues	1	3	0	2				2
Infection Control	0	0	0					0
Media	0	0	0	1				1
Medical Emergency/Injury/Death	2	0	0					0
Property Damage	2	0	0					0
Threat to Safety	1	0	1					0
Utility Failure								
Electrical	2	2	3					0
Heating/AC	0	0	0					0
Internet	1	5	4					0
Telephone	0	3	0					0
Water/Plumbing	0	1	0					0
Other	1	8	12					0
TOTAL	63	72	67	14	0	0	0	14

EVENTS	FY 16-17	FY 17-18	FY 18 - 19	FY 19-20				
				Q1	Q2	Q3	Q4	TOTAL
Call to Abuse Registry	3	2	0					0
Legal Notice	1	1	3					0
Media Request	3	6	2					0
Public Records Request	3	15	16	3				3
Report to Licensing	0	0	0					0
Report to OIG	43	46	62	3				3
Wellness Check Request	2	0	2	1				1
Other	1	1	2					0
TOTAL	56	71	87	7	0	0	0	7



CFBHN IT Board Report September 2019

IT System Update

Current IT projects

- a. All Provider meetings:
 - i. IS Strategic / IT Provider Meeting every month.
 - 1. FASAMS is the focus of the meetings.
 - ii. Non / IT Provider meeting
 - 1. Occurring as needed.
- b. FASAMS:
 - i. "System and Financial Exchange (SaFE)".
 - 1. Select providers continue to test
 - 2. Full System continues to be developed
 - ii. Providers are still concerned about timeline for being ready with new XML file format
 - 1. We keep reassuring the providers we won't require new format until DCF makes changes that require it.
 - 2. When will we want all providers to use XML?
 - a. We're meeting internally to determine a data, its more than just IT, it affects finance, contracts etc. Everyone to convert about the same time, Probably around the first of the calendar year
 - b. New data format will cause a lot of existing reports to need changing.
 - i. Continuing priority list of critical reports
 - 3. 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.
 - 2. Internally developing most components. Outsourcing the development of a new Vouchering system
 - ii. Working with Providers to have a HIE (Health Information Exchange)
 - 1. First Phase: What do they want vs what that already have
- d. County Projects:
 - i. Reporting for County Projects are continuing.
 - ii. Polk County Helping hands day to day administration being offloaded to the county