

### Department Directors Report November 2019

### **Contracts**

- CFBHN Board of Directors voted to apply reduction in MH000 (Mental Health Services) of \$249,869 across all providers with MH000/MHSFP funding. Amendments will begin in mid-October.
- All other funding major funding changes reported last month have been amended into subcontracts, which included:
  - o Reduction in prevention services of \$32,047 through two-year lapse.
  - o Reduction in children's BNET program of \$105,894.
  - o Reductions in other programs related to two-year lapses.
  - o Increases in the following: PATH Grant, Prevention Partnerships for Success, SOR Prevention, and SOR Services.
  - o Additions in SOR Hospital Bridge, SOR Child Welfare, and Road to Recovery (opioid).
  - o Addition of Year 2 funding for SOR services and SOR prevention.

### **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 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



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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), Faithbased 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

C&FA staff and DCF staff continue to provide technical assistance to providers as they complete their action plans. CFBHN also participates on the monthly SAPT TA calls hosted by DCF.

### 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.

### 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 meets monthly to discuss the implementation of the project. CFBHN staff provide technical assistance to the project to address barriers and introduce potential new partners and resources.

B. C&FA collaborates with USF Health, Timothy Initiative, Wholesome Ministries, HCADA, NAMI Hillsborough, Humana HealthCare, and other Community stakeholders to bring faith based leaders and behavioral health providers together to develop recovery capital and facilitate long-term recovery in mental health and substance abuse.





**Outcome**: This Community and Faith Leader coalition is presenting "Lost Connections: Revolutionary Views on Drug Abuse and Mental Health" forum on November 13, 2019 from 9-3pm. to over 150 community and faith leaders

C. 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.

### Training and Technical Assistance

A. C&FA Staff met with Gracepoint Coffee Shop, a drop in center for homeless in the community to discuss utilizing certified recovery peer specialists or provisionally certified peers to provide services at the Coffee Shop.

**Outcome:** Gracepoint staff will review the peer specialist certification and reconvene with C&FA staff to discuss the potential of utilizing peers at the Coffee Shop.

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

Outcome: 25 deputies participated in this training.

C. C&FA staff collaborated in the Hillsborough County Sheriff's CIT Training.

Outcome: 30 deputies participated in this training.

D. C&FA staff collaborated with Julie Radlauer from the Ronik-Radlauer Group, Inc. and Crystal Lilly with Federation of Families of Central Florida to provide the first Wraparound Family Support Partner Training in Orlando.

**Outcome:** 16 Family Support Partners (FSP) and those seeking to become certified attended the training and we were able to officially approve this training as the Wraparound FSP Training for the state of Florida.

E. C&FA staff collaborated with Julie Radlauer from the Ronik-Radlauer Group, Inc. to provide technical assistance to our providers and community partners utilizing Wraparound to discuss Wraparound Coaching, mechanism to track coaches trained across the state and how to support more coaches to become certified in the region.

Outcome: 7 individuals attended the Suncoast Region Coach's technical assistance meeting.



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**Outcome:** C&FA will discuss the potential of utilizing its SharePoint platform to track Wraparound Coaches across the state. A meeting was scheduled for September 30, 2019 to begin the discussion.

F. C&FA staff collaborated with Julie Radlauer from the Ronik-Radlauer Group, Inc. to provide technical assistance to our providers and community partners utilizing Wraparound to discuss sustaining Wraparound in the Suncoast Region after the Children's System of Care grant ends.

Outcome: 11 individuals attended the Sustainability and Technical Assistance Meeting.

Outcome: C&FA staff is developing a Learning Community to sustain Wraparound in the Suncoast region.

### Increase Peer-based Recovery Support Services

A. CFBHN's Consumer and Family Affairs department continues to convene its monthly Peer Council conference calls to provide peers throughout the region the opportunity to network, share ideas, participate in mini trainings, and gather information and resources to support those they serve, their agencies and themselves.

Outcome: 22 peers from across the region participated on the call this month.

B. CFBHN's Consumer and Family Affairs department continues to provide technical assistance to Pasco County's efforts to develop a Recovery Community Organization (RCO).

Outcome: 200 individuals and community members attended the Pasco County RCO Summit.

C. CFBHN's Consumer and Family Affairs department continues to provide technical assistance to Hillsborough County's efforts to develop a Recovery Community Organization (RCO).

**Outcome:** Hillsborough Community members are preparing a RCO Summit for January 11<sup>th</sup> 2020. 200-500 community members will be invited to attend and participate.

### Summary of Barriers/Issues and Strategies to Mitigate them

No barriers were identified for the month of September.

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, and Children's Home Society 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, Pasco Hernando State College, Ready For Life, Shady Hills United Methodist Church, Bobby White Foundation, Zero Suicide partners of Pinellas, Pasco Youth Haven, Magellan-MY LIFE, Pasco County School district, and Clearwater Neighborhood Family Center have been key partners this month.

### Data Summary

Nine additional referrals were made in September to Directions For Living Wraparound with seven of them being assigned to a facilitator and four remain on a waitlist due to capacity. Thirty families are currently being served through the grant funded High Fidelity Wraparound process. Twenty-four families reside in Pinellas and six families reside in Pasco County. Two families were discharged in September.

### **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. The SOC Site Coordinator and Family and Youth Coordinator were invited to become endorsed as statewide trainers in Wraparound.

### 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, Pasco Youth Haven, Recovery Epi-Center and Magellan to create the MY LIFE youth group.

**Outcome**: CFBHN signed the MOU this month to bring the Magellan Youth Leaders Inspiring Future Empowerment (MY LIFE) youth supports to Pasco County. Pasco Youth Haven and Pasco Hernando State College agreed to collaborate with CFBHN/SOC Staff to bring the MY LIFE youth supports to Pasco County. The Kick off date was postponed to November to give partners a chance to promote the event. The Youth Empowerment Director, Greg Dicharry for MY LIFE is also the



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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.

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 strengthening our community partnerships and develop youth leaders. This month, Our Youth coordinator began filming the Rise Above! Youth Leadership Conference YouTube channel featuring spotlights on youth mental health.

**Outcome:** Over 20 youth advocates aged 12 to 18, and staff participants were able to interview, film and edit the footage as they work to break down the stigma of mental health conditions while sharing services and supports available to the community.

### Increase Peer-based Recovery Support Services

- C. SOC grant coordinators and CFBHN's Consumer and Family Affairs department continues to provide training and technical assistance.
- **Outcome**: CFBHN SOC grant staff continue to develop the peer's in recovery mentorship model with PEMHS and NAMI Pinellas. 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 needed for certification while providing peer services within one of the units. During September's meeting, we signed the MOU 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 would allow consumers to socialize, learn new skills, and encourage and further workforce development.
- **Outcome:** We offered the 40 hour Wellness Recovery Action Plan (WRAP): Seminar II facilitator class for 20 individuals from Polk, Pinellas, Pasco, Hillsborough, Collier and Orange Counties. These participants are now endorsed as facilitators to co-facilitate the 16 hour class and/or lead WRAP groups.
- **Outcome:** SOC Family/Youth Coordinator attended the Recovery Community Organization symposium on Saturday, September 28<sup>th</sup> in Pasco County to share SOC information with the community and assist in hosting Café Conversations with community participants to identify needed supports for peers in recovery.

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

**Outcome**: This month, the SOC Youth/Family Coordinator submitted an application to Youth MOVE National to apply for a local Youth Move Chapter in Pinellas/Pasco counties. We will receive notice in January if our Youth on the MOVE groups can officially become a Youth MOVE Chapter. 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





was awarded carryover dollars to support the beginning phase of the group's initiatives including planning a kickoff party to celebrate their chaptering and notifying the community of their existence, creating signage and t-shirts for the group, activities, and so forth.

**Outcome**: Two youth participated on the monthly statewide YES (Youth Ending Stigma) call with the SOC Youth/Family coordinator on September 9.

**Outcome**: SOC Youth/Family coordinator held 2 social/emotional wellness groups at Clearwater Neighborhood Family Center on September 12 and 19 in at which 12 people attended.

**Outcome**: On September 9, the SOC Youth Coordinator met with 5 youth leaders to finalize the Youth MOVE National chapter application.

**Outcome**: SOC Youth/Family Coordinator offers a Family Voices meeting on the fourth Thursday of every month. On September 26, the Youth/Family Coordinator met with two parents in the community to offer a 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.

### Summary of Barriers/Issues and Strategies to Mitigate them

The Pasco Coordinating Council has begun to make progress since moving the meeting to begin right after the YAR staffing in which several community providers are already in attendance. 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 leadership from both CFBHN and Directions For Living met 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.





### Network Development/ Clinical Services

### CFBHN Children's Mental Health System of Care Assistance

CFBHN CMH facilitates the placement of youth into higher levels of care when a child is recommended for residential treatment. CFBHN CMH facilitated 42 child specific staffings for the months of July-Sept 2019. applications as well as provides technical assistance to consumers, providers and system of care partners on the DCF Operating Procedures and the Agency for Health Care Administration's, Statewide Medicaid Managed Care, medical necessity criteria relating to placement into residential treatment. CMH coordinates, facilitates and schedules the Child Specific Staffing Team (CSST) meetings each week to meet the needs of consumers and providers in all 14 contracted circuits. Each CSST is child centered (specific) and is comprised of individuals typically involved with the child and family. The team works collaboratively with the families to discuss and provide additional community based alternatives such as equine or art therapy, behavior analyst services, transportation support and other community based options that may not have been known. In addition, in September 2019, CFBHN CMH Team participated in 32 interagency staffing calls including critical case staffings and youth at risk calls resulting in 32 youth being diverted from child welfare during the call and 93 interagency staffing calls for the quarter (July-Sept 2019) resulting in 91 youth being diverted from child welfare 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 phone s 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 36 individuals from the State Hospital from July 2019 to August 2019 and continues to work with case management providers to increase diversion number each month. For July 1, 2019 to end of Septmeber2019, the SunCoast Region/C10 has also facilitated over 80 forensic residential referrals to the community partners within the region to promote diversions from the Forensic state mental health treatment facilities and assisted in 55\* discharges from July 2019 to August 2019 from South Florida Evaluation and Treatment Center and Florida State Hospital. Fiscal year to date the Suncoast Region/C10 has assisted with 154 Forensic State Hospital Admissions throughout the region. CFBHN holds weekly calls with the Forensic Residential Diversion Providers using the Forensic Residential Census Report to closely monitor diversions from the STF and forensic bed referrals, 90-reviews and to staff special needs cases. Forensic Specialist Providers are also joining the weekly Residential calls also to increase collaboration on expediting placements from STF/diversions in the community. In addition to this, CFBHN is working collaboratively to utilize FACT more with the Forensic Population for diversions and as a community option upon discharge in addition to the Forensic Multidisciplinary Team in Hillsborough County.

The Forensic Multidisciplinary team in Hillsborough County is currently at 76. They had 1 individual discharged in July due to the courts finding the client competent. They are continuing to screen, accept and review referrals. The team has hired 3



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additional Case Managers to increase capacity of the Hillsborough team by 45. The team capacity will be 90. The Hillsborough County PD, FMDT Team and the forensic team met this week to discuss referrals. CFBHN is holding weekly Residential meetings with providers to ensure that the beds are turning over appropriately according to client need and remaining full. CFBHN is utilizing the monthly data supplied to work with specific counties who have numbers above 20 for 'average days until pick up' for a return to court. CFBHN with meet with Forensic Provider and speak with court parties. Suncoast Region/C10 is at 15.8 days on average for individuals returning to court. Monthly data is reviewed with forensic providers each month and numbers outside the 'norm' are looked into to ensure that individuals are brought back in a timely manner.

### **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 **26,821** 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. The "FY18-19 Goal" column listed on the chart below represents the approved goals for the SAMHSA grant year, October 1, 2018 to September 30, 2019. The "FY18-19 Achieved" column represents the number of youth and young adults served during the time period of October 1, 2018 to August 31, 2019.





INDICATOR	FY18-19 ACHIEVED	FY18-19
		GOAL
Policy Development (IPP)	1	3
Partnership/Collaborations (IPP)	8	7
Community Outreach (IPP)	2,183	500
Behavioral Health Screenings (IPP)	4,097	700
Referrals to BH Services (IPP)	362	300
Care Coordination/Intensive CM/Wraparound Services	91	125
Mental Wellness Support Groups	110	60
Unique Texters	196	180

### Care Coordination

CFBHN Utilization/Care Managers continue to outreach to all regional providers of services for anyone waiting for a bedbased 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 overdoes 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 descalation, but also crisis and safety planning. Stakeholder collaboration includes law enforcement and school superintendents, but may also include other areas within education, emergency responders, 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.





### 1. Monitoring Update for FY 19-20 (As of 9/30/19)

TABLE A: Provider Monitoring Status Summary	Sec. and and	
Number of Provider Monitorings:	Count	%
In-Progress	0	0%
Not Yet Started	58	100%
Monitored - Complete	0	0%
Monitored - Follow-Up Required	0	0%
Follow-Up Complete	0	0%
TOTAL	58	100%

Covered Service/Program Area/Tool	C	A	AC	DC 0	Comme	ndation
covered service/ Program Area/ 1001	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):

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

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

<u>ا</u>	PROVIDER MONITORING RESULTS	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
Ĺ	TROVIDER MONTORING RESOLTS		%	Count	%	Count	%	Count	
ſ	Number of Providers Monitorings That:	Count	78	count	70	Count	70	Count	%
ſ	Resulted in NO Corrective Acton or Area of Concern	28	47%	39	64%	32	54%	0	0%
	REQUIRE FOLLOW-UP	32	53%	22	36%	27	46%	0	0%
	Monitoring Review is PENDING	0	0%	0	0%	0	0%	58	100%
F	OTAL Number of Provider Monitorings Conducted	60	100%	61	100%	59	100%	58	100%

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

FOLLOW-UP SUMMARY: PROVIDER PROGRESS STATUS		FY 16-17		FY 17-18		FY 18-19		FY 19-20	
		%	Count	%	Count	%	Count	%	
Number of Providers that Required Follow-Up	32		22	an i i	27		0	2.11	
Follow-Up WAIVED due to Contract Termination	0		2		0		0		
Follow-Up WAIVED due to Relinquished Program	0		1		0		0		
Follow-Up TABLED for Completion in Next Fiscal Year	3		5		10		0		
Adjusted Number of Follow-Ups to Complete	29		14		17		0		
Follow-Ups Not Yet Completed	0	0%	0	0%	5	29%	0	0%	
Follow-Ups COMPLETED to Date	29	100%	14	100%	12	71%	0	0%	

FOLLOW-UP SUMMARY: CA & AOC RESULTS	FY 1	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
FOLLOW-OF SUMMARY: CA & AUC RESULTS	CAs	AOCs	CAs	AOCs	CAs	AOCs	CAs	AOCs	
Number of CAs & AOCs Issued	53	33	24	12	35	6			
Number of CAs & AOCs WAIVED or TABLED	0	0	9	3	12	2			
Adjusted Number of CAs & AOCs	53	33	15	9	23	4			
Number PENDING at Follow-Up	0	0	0	0	6	1			
Number RESOLVED at Follow-Up	48	30	8	6	12	3			
Number of CAs/AOCs UNRESOLVED at Follow-Up	5	3	7	3	5	0			
Percent of CAs/AOCs UNRESOLVED at Follow-Up	9.4%	9.1%	46.7%	33.3%	21.7%	0.0%			

F

PROVIDER MONITORING: YEAR-END STATUS		FY 16-17		FY 17-18		FY 18-19		9-20
Number of Providers:	Count	%	Count	%	Count	%	Count	%
With Monitoring PENDING		6	0	0%	0	0%	58	100%
That Earned No CAs/AOCs			39	64%	32	54%	0	0%
With Follow-Up PENDING			0	0%	5	8%	0	0%
With WAIVED or TABLED CAs/AOCS	and the second second		8	13%	10	17%	0	0%
That RESOLVED All CAs/AOCs at Follow-Up			7	11%	9	15%	0	0%
With UNRESOLVED CAs/AOCs After Follow-Up			7	11%	3	5%	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.

### 4. Other Updates

A. Compliance issues: No compliance issues to report.

B. The next Board CQI Committee meeting is scheduled for Thursday, September 19th at 11:00 am.



## **RISK MANAGEMENT REPORT - October, 2019**

July   Aug   Sep   Oct   Nov   Dec   Jan 2020   Feb     2019   2019   2019   2019   2019   2019   2020   2020     4   1   1   1   0   0   0   0   0   0     21   19   19   0   0   0   0   0   0   0     1   1   1   0 <t< th=""><th></th><th>Vest-to-</th></t<>		Vest-to-
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# 2. Timeliness of Incident Reports - 24-Hour RL6 Notification (as of 9/30/19)

		FY1	FY 16-17	FY 1	FY 17-18	FY 1	FY 18-19	FY 1	FY 19-20
		Count	%	Count	%	Count	%	Count	%
	On-Time	627	98.4%	513	96.1%	530	97.1%	128	94.1%
From Providers	Late	10	1.6%	21	3.9%	16	2.9%	8	5.9%
to CFBHN	TOTAL	637	100.0%	534	100.0%	546	100.0%	136	100.0%
		Count	%	Count	%	Count	%	Count	%
	On-Time	637	100.0%	533	%8.66	541	99.1%	136	100.0%
	Late	0	0.0%	1	0.2%	5	0.9%	0	0.0%
TO UCF (IKAS)	TOTAL	637	100.0%	534	100.0%	546	100.0%	136	100.0%

### 3. Client Manner of Death Summary (as of 9/30/19)

	FY 1(	FY 16-17	FY 1	FY 17-18	FY 1	FY 18-19	FY 19-20	9-20
	Count	%	Count	%	Count	%	Count	%
Accident	21	10.6%	16	8.8%	6	2.9%	2	3.4%
Accident -Overdose	33	16.7%	38	21.0%	54	26.1%	5	8.5%
Homicide	2	1.0%	1	0.6%	0	0.0%	2	3.4%
Natural Death	48	24.2%	67	37.0%	58	28.0%	4	6.8%
	22	11.1%	23	12.7%	17	8.2%	2	3.4%
	9	Gunshot - 9	9	Gunshot - 9	9	Gunshot - 7	9	Gunshot - 0
	II.	Jumped - 4	il.	Jumped - 2	I	0 - padunf	T	Jumped - 0
Suicide	H	Hanging - 4	H	Hanging - 5	Н	Hanging - 7	H	Hanging - 2
	0N	Overdose - 3	OV	Overdose - 3	NO	Overdose - 2	NO	Overdose - 0
		Other - 2		Other - 4		Other - 1		Other - 0
Undetermined	3	1.5%	3	1.7%	2	1.0%	1	1.7%
Unknown	69	34.8%	33	18.2%	70	33.8%	43	72.9%
TOTAL	198	100.0%	181	100.0%	207	100.0%	59	100.0%

## 4. Count of Subcontractor Incidents per Level of Care (as of 9/30/19)

	FY 16-17	6-17	FY 1	FY 17-18	FY 1	FY 18-19	FY 1	FY 19-20
	Count	%	Count	%	Count	%	Count	%
Care Coordination	Paral A			A State of the sta	6	1.1%	0	0.0%
Case Management	28	4.4%	36	6.7%	31	5.7%	2	1.5%
CAT Team					1	0.2%	0	0.0%
Crisis Stabilization Unit	117	18.4%	92	17.2%	91	16.7%	19	14.0%
Detox	15	2.4%	18	3.4%	24	4.4%	9	4.4%
Drop-In/Mental Health Clubhouse	15	2.4%	9	1.1%	5	0.9%	5	3.7%
FACT/Forensic	40	6.3%	30	5.6%	50	9.2%	10	7.4%
FIT/FIS	⊣	0.2%	З	0.6%	0	0.0%	0	0.0%
Medical Services	7	1.1%	4	0.7%	6	1.1%	ю	2.2%
Methadone	8	1.3%	8	1.5%	10	1.8%	0	0.0%
Outpatient	125	19.6%	97	18.2%	122	22.3%	40	29.4%
Residential	208	32.7%	163	30.5%	147	26.9%	28	20.6%
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	3.7%
Not Applicable	12	1.9%	25	4.7%	21	3.8%	8	5.9%
Other	39	6.1%	39	7.3%	15	2.7%	10	7.4%
TOTAL	637	100,0%	534	100.0%	546	100.0%	136	100.0%

### 5. Subcontractor Incident Rates per 1000 Served (as of 9/30/19)

	FY 16-17	6-17	FY 1.	FY 17-18	FY 1	FY 18-19	FY 1	FY 19-20
	Count	Rate per 1000	Count	Rate per 1000	Count	Rate per 1000	Count	Rate per 1000
3-Hour (Phone) Notification	and the second	Million and		iel allele	- Williams	Tel for the	S THE REAL	
Child-on-Child Sexual Abuse	6	0.1	5	0.0	7	0.1	9	0.1
Client Death	198	1.9	181	1.7	207	1.8	59	1.2
Media Event	20	0.2	10	0.1	15	0.1	3	0.1
Sexual Abuse/Battery	24	0.2	11	0.1	15	0.1	З	0.1
24-Hour (RL6) Notification			At the second	A set of the	Same and			10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Child Arrest	7	0.1	2	0.0	2	0.0	0	0.0
Elopement	201	10.7	152	8.3	129	7.0	32	7.3
Employee Arrest	8	0.1	16	0.0	22	0.2	2	0.0
Employee Misconduct	34	0.3	35	0.3	35	0.3	ю	0.1
Missing Child	9	0.1	4	0.0	0	0.0	0	0.0
Security Incident - Unintentional	я	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	9	0.1	13	0.1	8	0.1	τH	0.0
Suicide Attempt	51	0.5	48	0.5	61	0.5	16	0.3
Other:								
Biological/Chemical Threat	0	0.0	1	0.0	0	0.0	0	0.0
Human Acts	ю	0.0	2	0.0	1	0.0	0	0.0
Vandalism/Theft/Damage/Fire	7	0.1	Э	0.0	0	0.0	ñ	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	4	0.1
TOTAL	637	6.2	534	5.1	546	4.7	136	3.9

### 6. File Review Summary (as of 9/30/19)

	FY	F	F۲	F
Number of	16-17	16-17 17-18 18-19 19-20	18-19	19-20
File Reviews Carried over from	10	Y	σ	U
Previous Period	Ì.	D	h	'n
New Files Referred for Review	25	15	21	9
FILES FOR REVIEW	44	21	30	11
Unable to Complete*			4	0
File Reviews Completed	38	12	21	m
FILE REVIEWS IN PROGRESS	9	6	ъ	80

\* 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:	16-17	17-18	18-19	19-20
Observations	6	2	0	0
Corective Action	2	0	0	0

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### 7. CFBHN Internal incidents and Events Summary (as of 9/30/19)

INCIDENTS	FY	FY	FY			FY 19-20		
INCIDENTS	16-17	17-18	18 - 19	Q1	Q2	Q3	Q4	TOTAL
Alarm issues	3	3	1					0
Building Security	0	0	0			i sa iliyara		0
Computer Security	1	0	2	3				3
Data Security		枪				- Andrews		
Unsecured FROM CFBHN	6	13	8	2				2
Unsecured TO CFBHN	39	31	25	6				6
Other	4	2	3	1				1
Equipment Malfunction/Failure	0	1	8	2				2
Facility Issues	1	3	0	2	Frank Star		Super-	2
Infection Control	0	0	0		的国家机		Sec. Parts	0
Media	0	0	0	1				1
Medical Energency/Injury/Death	2	0	0				Seguration	0
Property Damage	2	0	0					0
Threat to Safety	1	0	1					0
Utility Failure							12-10-24-5	45 - C.
Electrical	2	2	3			100		0
Heating/AC	0 8	0	0			0.011-52		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	17	0	0	0	17

EVENITS	FY	FY	FY			FY 19-20		
EVENTS	16-17	17-18	18 - 19	Q1	Q2	Q3	Q4	TOTAL
Call to Abuse Registry	3	2	0					0
Legal Notice	1	1	3				812.22	0
Media Request	3	6	2					0
Public Records Request	3	15	16	3				3
Report to Licensing	0	0	0		and the second se		1	0
Report to OIG	43	46	62	5				5
Wellness Check Request	. 2	0	2	<u>a</u> 4 10	Six Para		CONSTRA	0
Other	1	1	2				275 255	0
TOTAL	56	71	87	8	0	0	0	8