

Department Directors Report
December 2019

Contracts

- The DCF Contract Oversight Unit (COU) will be monitoring CFBHN and meeting with network service providers during the week of December 9th-13th. The ME monitoring process has shifted to a System of Care monitoring, modeled after the monitoring process of the Community Based Care (CBC) agencies, which is more of a qualitative review than a compliance review. They have scheduled interviews with NSP leadership, management and direct care employees throughout the network.
- CFBHN Board of Directors voted to apply reduction in MH000 (Mental Health Services) of \$249,869 across all providers with MH000/MHSFP funding. Amendments for these reductions have been completed.

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 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

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.

Outcome: Nine providers/individuals from across the region participated on the ROSC call in October.

Outcome: Nine providers/individuals from across the region participated on the ROSC call in November and provided updates on their SAPT action plans.

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

Outcome: C&FA staff participated in two parent focus groups as facilitators and note takers to seek information about families' experience with accessing mental health services for their children. Data collected from all twelve focus groups will be utilized to bring family voice and choice to the development of the system of care and for the development of the public awareness campaign

- B. C&FA in collaboration with Network Development's Hillsborough Community Manager collaborate with the 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: In October, jail leadership decided to pause case management referrals due to concerns impacting court cases/sentencing. C&FA staff and the Community Manager worked with all parties involved to schedule a meeting in early November to address and resolve the concerns.

- C. 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 hosting the "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.

Outcome: C&FA staff in collaboration with the James A. Haley VA and Stop RX Drug Abuse presented "Understanding Behavioral Health Resources" at the forum.

- D. 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 collaborated in the Hillsborough County Sheriff's CIT Training.

Outcome: 51 deputies participated in this training.

- B. C&FA staff collaborated with Julie Radlauer with the Ronik-Radlauer Group, Inc. on the statewide Wraparound Train the Trainer. This training will increase the cadre of Wraparound trainers across the state. Trainees and mentors from all regions of the state were invited to attend the training in Orlando.

Outcome: Six trainees from the Suncoast Region along with two regional mentors attended the four day training. The trainees will work with the regional mentors to become certified Wraparound Trainers by June 2020.

- C. C&FA staff held the regions first Learning Community to sustain Wraparound in the Suncoast region. The purpose of the Learning Community is to increase the scope of participants and enhance the sharing of knowledge and discussion, share experiences with Wraparound tools, examine effective strategies and practice skills, act as a support network and provide information about current trends in Wraparound.

Outcome: Sixteen individuals attended the training. These individuals represented six CFBHN providers and other community stakeholders. The group developed a mission, vision and scheduled meetings for the next twelve months.

- D. C&FA staff provided board development to NAMI Polk to assist their efforts to build and create a more sustainable board structure.

Outcome: Ten individuals including Board members, families and community stakeholders attended the training. Board members were trained on their roles, a board committee structure was developed and committee leadership established, and committees developed action plans with 2-3 key goals.

- E. C&FA staff participated in the ALF Training sponsored by CFBHN. Staff shared their lived experience and introduced the facts and myths regarding stigma.

Outcome: Twenty-nine participants attended the training.

- F. C&FA staff presented "ROSC Implementation in Hillsborough County" at the Hillsborough James A. Haley VA Summit.

Outcome: Eighty-five participants attended the training.

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: Eleven peers from across the region participated on the call in October.

Outcome: Seventeen peers from across the region participated on the call in November.

- B. 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 11th 2020. 200-500 community members will be invited to attend and participate.

RCO Updates

Ft. Myers:

The RCO symposium for Lee County was held on June 15, 2019. There will be three RCO's in Lee County. Two new RCO's are being developed at this time. One RCO, "The Freedom House" already had their 501©3. The second, "Kimmie's Zone" has been formed by Al Kinkle and are in their planning phase to develop their mission statement and establish a permanent venue. The third RCO is called the "Lee County Recovery Collective" and is now forming their founding Board and is in the visioning stage. Several committees are working on sustainability, venue, and board development.

Pasco County:

Pasco County's symposium was held on September 28, 2019. The name of the RCO is "Epicenter". They had their first visioning meeting on November 12, 2019 and the committee has broken up into various groups for development of the Board of Directors, and sustainability.

Hillsborough County:

Hillsborough is in the planning phase for their symposium. The symposium will be held at the Sons of Italy lodge in Tampa. The symposium is scheduled for January 11, 2020. Committees have been formed for the various components of the symposium (food, program committee, speaker committee, sponsors, volunteers, media, etc.).

Sarasota County:

Sarasota is just getting started. Ginny Larue and Ken Brown presented the concept of an RCO to the Sarasota Community Health Care Collaborative on November 15, 2019.

Polk County

On November 19, 2019 the Project Director for the Floridians for Recovery (FFR) / Florida Association of Alcohol and Drug Abuse (FADAA) RCO Development technical assistance team, Ms. Ginny LaRue, along with assistant Ms. Linda Kemp-Baird, met with Recovery Champions from Polk County at Oasis Community Church, in Lakeland, Florida, to continue planning for a Recovery Symposium. If the date is set for 4/4, a possible theme for the Symposium could be "4-4 Recovery!" Contacts for the RCO are Mick Pickos, Ann Claussen and Craig Pickos. The next meetings are scheduled for 12/17/19 and 1/4/20 at the Oasis Community Church, 3330 Winter Park Road, Lakeland, FL from 10:00 a.m. – 11:30 a.m.



Summary of Barriers/Issues and Strategies to Mitigate them

One barrier faced in regards to peer specialist training is the lack of trainers that are endorsed by the department. Currently in the Suncoast Region there are several trainers but the only two that are able to commit to conducting regular training are limited in traveling. This has made it increasingly more difficult to meet the demand for trainings south of Hillsborough County. Solutions could include having more trainers endorsed by the department and/or allowing for travel by those that are endorsed by the department.

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, DEA 360 Strategies and Clearwater Neighborhood Family Center have been key partners this month.

Data Summary

Eleven additional referrals were made in November to Directions For Living Wraparound with four of them being assigned to a facilitator. 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. Six families were discharged in November.

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. They have expanded the program to include one more Wraparound Facilitator, which will raise the service capacity to 45 families. 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 have requested a meeting with the leadership team to review the Wraparound Organizational review (O-WRAP).

Five individuals from the Suncoast region- representing CFBHN, Directions for Living, Carlton Manor and Guided Results continue to pursue the statewide train the trainer in Wraparound. These five will offer the Wraparound 101 class throughout



the Suncoast region under observation of a Statewide Trainer to achieve the full endorsement over the next six months.

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: Continued planning and conference calls are being held with stakeholders to ensure the implementation of MY LIFE in Pasco. The first of a series of youth and young adult events was held on 11/20 at PHSC with approximately 35 people in attendance to introduce supports and resources to the community. The Save the Date for Magellan MY LIFE scheduled for January 16, 2020 was announced at the event. A planning conference call is scheduled with Magellan, SOC, YHM Teen Centers, and PHSC for Wednesday, December 4 to continue planning.

B. SOC coordinators are members of the Rise Above! Youth Leadership Conference steering committee led by the Clearwater Neighborhood Family Center. The goal is to continue strengthening our community partnerships and develop youth leaders.

Outcome: Efforts to continue filming the Rise Above! Youth Leadership Conference YouTube channel featuring spotlights on youth mental health is still in the planning stages. In November, the youth coordinator will host a panel of individuals who will tell their stories and then coordinate with the Rising Above Youth Leadership Conference Youth Tube channel to tape and distribute.

Outcome: F & Y Coordinator participates in monthly planning meetings for the annual youth conference which will promote social/emotional wellness and mental health in the community. In addition, the Y & F Coordinator hosts youth meetings weekly with teens at the center to develop social/emotional skills and connect to ongoing community resources.

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 October's meeting, we reviewed PEMHS' purchases of 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. Additional documentation was reviewed and collected for program implementation.

Outcome: Six individuals from the Suncoast Region attended a four-day Wraparound train the trainer class as the initial phase to certify them to teach the 3-day Wraparound training class.



Outcome: SOC Family/Youth Coordinator offered the *NAMI Ending the Silence* presentation to youth at the YMCA of Greater Palm Harbor on the October 8 and 9, 2019. Thirty-five individuals attended.

Outcome: On October 29, *Cyntoia's Story: Me Facing Life* was held at St. Petersburg College Clearwater Campus, sponsored by the Clearwater Neighborhood Family Center, and hosted by SOC grant coordinator and Pastor Walker to raise awareness to the effects of trauma on childhood development. Approximately forty people attended the presentation.

Outcome: Recently trained WRAP Certified instructors are planning their annual course offerings with the SOC to be offered to the community beginning in 2020.

Outcome: Recently trained Wraparound train-the-trainer participants will be participating in the upcoming 3-day, Wraparound training alongside John Mayo, on December 10, 11, and 12, 2019. This will allow previously trained participants to gain the necessary experience in conducting the training so that they can become certified to teach the class and increase training capacity within the community.

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

Outcome: October 17, the Family & Youth Coordinator attended an ESE College, Career & Life Fair held at Pinellas Park High School to share information about Wraparound and community meetings such as Youth on the Move and Family Voices with youth and families in attendance.

Outcome: SOC Youth/Family coordinator held two social/emotional wellness groups at the Clearwater Neighborhood Family Center on October 10 and 17. Twelve to fifteen people attended each session.

Outcome: On October 30, five youth from the leadership group formed a committee and met at Ready for Life Pinellas to complete the Dare to Dream grant application which was due November 1st. Tyler Smith, a youth leader from Youth on the Move, submitted the application for the \$3000 Dare to Dream grant to host a "Mindful Chameleon Festival" in the community to raise mental health awareness.

Outcome: SOC Youth/Family coordinator held 2 social/emotional wellness groups at the Clearwater Neighborhood Family Center on November 7 and 14 with approximately 10-12 people in attendance.

Outcome: November 25, 11 youth attended the Youth on the Move (soon to be Youth MOVE Pinellas) leadership meeting. The group includes representatives from NAMI Pinellas County, Mobile Crisis Response Team, Healthy Transitions, Directions for Living-Wraparound, and Ready for Life. Plans were made to pursue "Mindful Chameleon Festival" to raise mental health awareness in the community. Tentative date set for April 25 2020.

Outcome: On November 25, F & Y Coordinator and seven other youth attended a phone conference meeting with Jasmine from Youth MOVE National to review the application and answer additional questions. Jasmine reported the group sounded very "strong" and "organic." She said she was excited about our chapter's development and efforts and their Board would make a decision in December to formally approve the chapter application. She was encouraging and affirming regarding the group's progress.

Outcome: F & Y Coordinator attends monthly community and provider meetings to promote the Youth on the Move (Youth MOVE Pinellas) group meetings. In addition, she reports out the progress of their efforts to plan a youth festival to raise mental health awareness in the community of Pinellas County under the Youth MOVE Pinellas Chapter. St. Petersburg College is interested in hosting/sponsoring the event in addition to promoting it with their students.



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 continue to meet 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.

Human Resources

2nd Quarter - 10/1/2018 - 12/31/2018 - as of 11/30/2019

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

ANNUAL - AS OF 11/30/2019 2%

1	Total separated	
67	average # of employees	
1.49%		
2.99%	voluntary	2
1.49%	involuntary	1



Network Development/ Clinical Services

CFBHN Children's Mental Health System of Care Assistance

CFBHN CMH Team facilitates the placement of youth into higher levels of care when a child is recommended for residential treatment. CFBHN CMH Team facilitated 10 child specific staffings for the month of November, received, and processed 11 residential treatment applications. CMH provides daily 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 counties. Each CSST is child centered (specific) and is comprised of individuals typically involved with the child and family. The multi-disciplinary 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 shared with the families or guardians.

CMH facilitated two in-site trainings in November with newly hired staff at partnering agencies. CMH attended a training focused on Data-Driven and Ethical Decision Making. CMH presented on children's mental health data to our interagency partners in C12. CMH provided technical assistance to the SEDNET Discretionary Project on the development and implementation of the Youth at Risk (YAR) model. CMH attended and participated in the Polk County School Board's Interagency Meeting focusing on the Marjorie Stoneman Douglas Act's requirement of enhancing communication and collaboration with system partners.

Child Welfare/SAMH Integration Updates

Shivana Gentry, Director of Integration, convened an Integration Advisory Committee with representatives for each Region. Regional representatives include partners from SAMH, OCW, MEs, and providers. Stacy Payne, from CFBHN, is a member of the committee representing the SunCoast Region. The Integration Advisory Committee has reviewed the Regional Status Update Summary and set goals for statewide integration with the intent to consolidate the work from Regional Plans of Action previously submitted. Information from the Committee meeting has been shared with the DCF Regional Directors and will be presented out to all Circuits in upcoming meetings.

Family Intervention Services (FIS)

Improvement in treatment engagement continues to be seen across the FIS program as a whole. A larger count of clients are engaging in treatment appointments and are doing so at increasingly faster rates. Revised data collection has allowed for more thorough and accurate data analysis and FIS providers are using data analysis in discussions with treatment providers, both internal to their agency and external, to address barriers to access to treatment. Circuit or county level meetings that include CBC, CMO, CPI, etc. are continuing throughout the Region to ensure the needs of the child welfare system as a whole are being met and to foster collaboration across all the child welfare provider. 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)

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). Findings demonstrate families involved with a FIT team are successfully completing treatment at a higher rate than other traditional substance abuse programs. Furthermore, USF researchers also demonstrated caregivers with involvement in FIT improved in their overall Caregiver Protective Capacities, had fewer subsequent investigations, and when they did have subsequent investigations, had fewer verified findings. It was also noted, if FIT was involved early in the child welfare case, within the first six months, improved permanency outcomes were noted for FIT involved families. Data reviewed by researchers from University of South Florida conclude FIT not only is a successful substance abuse program, but has positive outcomes for child welfare. Caregivers enrolled in FIT had higher improvements in Caregiver Protective Capacities, fewer new abuse allegations, and less subsequent verified allegations. Clear evidence was found to support when caregivers were enrolled in FIT soon after an investigation was opened, permanency outcomes were significantly higher for families in enrolled in FIT. Further data analysis continues both at the State and Managing Entity level.

Behavioral Health Consultants (BHCs)

Status Update

The BHC continues to be a valuable asset to the CPIs providing information important to safety determinations. Additionally, they are helpful for FIS and FIT programs as they assist CPI refer to these programs. The BHC position for Highlands and Hardee Counties has been transitioned from Directions for Living to Tri-County Human Services (TCHS) and the position was recently filled. The BHC positions in Charlotte and Collier Counties are currently vacant and those providers are actively recruiting. Due to recent difficulties in filling and maintaining the BHC position, CFBHN and SAMH Regional Directors have reviewed the position description and modifications were made to allow the BHC to be a registered mental health intern under specific circumstances. Updated tracking spreadsheet and documentation template were developed to parallel documentation completed by DCF funded BHCs. These efforts were made to align the positions and reduce confusion amongst CPIs. A brief, seven question survey assessing the CPIs' opinions of the BHC, their usefulness in assisting with their investigations, etc. was created in efforts to obtain additional information about the effectiveness of the position. The survey will be distributed on a monthly basis to each CPI who consulted with a BHC and the results evaluated in the upcoming months.

FACT

CFBHN'S 14 FACT teams continue to focus on priority populations as identified. Diversion for SMHTF admission and expediting discharge from SMHTF. David Lawrence Center is the new FACT provider in Collier County. As of the end of September 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. They will begin accepting new clients beginning October 1, 2019.



ALL CIRCUITS: FACT

QUARTER ADMISSIONS= N/A

FY 19/20 ADMISSIONS TO DATE =54

QUARTER DISCHARGES= N/A

FY 18/19 DISCHARGES TO DATE 51

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

FACT Admission/Discharge/Census NOVEMBER 2019 (MONTH) FISCAL YEAR 19/20 TOTAL					
	Circuit 6 4 teams	Circuit 10 2 teams	Circuit 12 2 teams	Circuit13 2 teams	Circuit 20 4 teams
Current Month Admissions/ FY 18/19 TOTAL ADMISSIONS-54	3/14	2/9	0/7	2/5	5/19
QUARTER/FY TOTAL ADMISSIONS- N/A					
Current Month Discharges/ FY19/20 TOTAL DISCHARGES-51	2/13	2/8	2/8	1/3	0/19
QUARTER/FY TOTAL DISCHARGES- N/A					
TOTAL CURRENTLY SERVED BY FACT- 1389/1400	404/400	197/200	198/200	203/200	387/400

**** As of week ending 11/30/19, 7 of 14 FACT teams are 100 or over**

Forensic

SunCoast Region/C10 has diverted 59 individuals from the State Hospital from July 2019 to October 2019 and continues to work with case management providers to increase diversion number each month. For July 1, 2019 to end of November 2019, the SunCoast Region/C10 has also facilitated over 143 forensic residential referrals to the community partners within the region to promote diversions from the Forensic state mental health treatment facilities and assisted in 83* discharges from July 2019 to September 2019 from South Florida Evaluation and Treatment Center and Florida State Hospital. Fiscal year to date the Suncoast Region/C10 has assisted with 258 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 79. They had 0 individuals discharged in October due to the courts finding the client competent. They are continuing to screen, accept and review referrals. The team has hired 3 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 will 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 October, 2019
Where Funding Source is Block Grant
And 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	268,613	850,660	-	1,119,273
Services Provided	38,724	16,840	401	55,965
Community Action	935	731	-	1,666
Community Change	2,355	369	-	2,724
TOTAL	310,627	868,600	401	1,179,628



Many of the drug free coalitions continue to partner with new agencies, businesses, healthcare providers, county offices, etc. The goal is to have substance abuse prevention conversations held at every capacity and at every level. They continue to foster and nurture existing relationships with traditional partners, however new partnerships or new “ears” and “eyes” is always the goal.

Believe it or not, there are still pockets of people within the communities that are considered untouched. The message of substance abuse prevention is for everyone and anyone. With still drug and substance abuse crisis affecting us on a daily basis, there is still work that needs to be done.

Science and research supports the continuing need for substance abuse prevention messaging and programs in all communities and not just the ones that may appear to be of higher risk. This is truly a community health crisis.

Efforts continue to reach parents/guardians as they are typically the gatekeepers to how their children will be impacted by substance use peer pressure. Many communication tools are being implemented both in paper form such a parent newsletters, open house forums, parent night at school, sporting events, etc. where prevention professionals provide information.

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 **28,265** youth, young adults and their families. SAMSHA approved a no-cost extension for program for the time period of October 1, 2019 thru June 30, 2020. The “FY19-20 Goal” column listed on the chart below represents the approved goals for October 1, 2019 to June 30, 2020. The “FY19-20 Achieved” column represents the number of youth and young adults served during the time period of October 1, 2019 to October 31, 2019.

INDICATOR	FY19-20 ACHIEVED	FY19-20 GOAL	ACHIEVED SINCE INCEPTION
Community Outreach	402	325	11,272
Behavioral Health Screenings	424	455	16,666
Referrals to BH Services	14	306	1,470
Intensive CM/Wraparound Services	48	80	266
Educational/Vocational Support Services	24	40	24**
Mental Wellness Support Groups	3	40	327
Unique Texters	11	90	634

Florida Healthy Transitions is currently operating with funds from SAMHSA, under a No-Cost Extension. New funding is needed to sustain the program beyond June 30, 2020.

Summary of outcomes of accomplishments to date

Florida Healthy Transitions
January 1, 2016 - September 30, 2019
6-Month SPARS Reassessment Highlights

Outcome Measure (N = 87)	Percent Change - Baseline to 6-months
Decrease in the number of days hospitalized for mental health (C.1.b.)	75%
Satisfaction with health (B.5.d.)	86%
Increased ability to deal with crisis (B.3.c.)	7%
Decrease in days of homelessness (C.1.a)	23%
Decrease in the number of participants unemployed and looking for work (D.3.)	3%
Increase among young people whose symptoms are no longer bothersome (B.3.h.)	82%
Decrease in severe depression (B.4.d.)	55%
Increased Support from family and friends during crisis (G.1.d.)	19%
If I had other choices, I would still get services from this agency (F.1.n.)	95%
Increased sense of belonging in community (G.1.c)	29%
Increased Does well in school and/or work (B.3.f.)	27%

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. As of 12/1/2019, Success for Kids and Families have served 26 participants in the FEP Program. Phone and email contact with CSU/CCSUs is ongoing (one Primary Clinician is on-site at GP CCSU every Thursday). HM team members continue to represent HM at Juvenile Mental Health Court (bi-weekly). Phone/email contact is ongoing between the PD office and HM team (to include a joint evaluation project, funded by PCORI/USF, to assess engagement related issues). Program Manager and Family Education Clinician met with USF Psychiatry and participated in a monthly call to discuss prospective referrals. HM Team members continue to partner with multiple agencies, including NBHC, Gracepoint, Corbett Trauma Center, & USF Dept. of Psychiatry to ensure continuity of care for participants receiving services with both programs. The Healthy Minds Primary Clinician and Gracepoint CCSU is in the process of scheduling a meeting with the adult unit team at Gracepoint and will discuss having a regular presence on the unit as well. Success for Kids and Families participated in 8 Outreach Activities in November by all HM Team Members (phone/F2F meetings, presentations, and tabling events).

2. SOR (Statewide Opioid Response)

As the federal government has partnered with states and local governments to address the opioid crisis, CFBHN has worked with providers to implement the SOR (State Opioid Response) program. This wide ranging program supplements and develops enhanced MAT services throughout CFBHN's provider network. A critically important result of the SOR program is the development of hospital bridge partnerships. This program has created an innovative medical/clinical pathway to provide MAT services for individuals entering hospital emergency rooms. Current active partnerships are: DACCO - Tampa General, ACTS – Tampa General, First Step of Sarasota – Sarasota Memorial, First Step Sarasota – Manatee Memorial Hospital, and Operation PAR – St. Anthony's Hospital. Each of the hospital bridge partnerships have provided a pathway for much needed MAT services and given hospital emergency rooms a process for referring individuals for appropriate substance abuse services. Other Providers (Baycare, Charlotte Behavioral Health, David Lawrence Center, SalusCare, and Tri-County Human Services) will have bridge programs in place soon. To enhance the child welfare system of care, CFBHN will utilize SOR Child Welfare funding to increase access to MAT services for families identified through the child welfare system.

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, 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.



Communications:

Community

- Completed LBR's for Pinellas, Hillsborough and Pasco projects
- Developed Community Event targeting Opioid Prevention held at Polk State College Safety Campus/Winter Haven with partner RALI FL and Moore Communications. There was a panel discussion including national, state and local dignitaries and a trailer showing a teen bedroom and hiding places for drugs was onsite for tours. The local prevention coalition and treatment providers participated.
- 5 Star luncheon was Nov 6. Over 150 persons attended and 31 awardees were honored. The speaker was Mark Engelhardt, FMHI.

Legislative

- Participation in Legislative Delegation Meetings per county by various CFBHN assigned staff

Workshops/Award Recognitions/Other

- Received \$10,000 grant from RALI FL for managing community outreach event in Polk County Oct 30. Plans are to use this funding and the PHARMA grant of \$3000 for video production
- Submitted (3) workshop proposals for National Council Annual Conference 2020; submitted Mary Lynn Uray for Lifetime Achievement Award; submitted Beth Picora for Peer Achievement Award
- Participated in the Ragan Communications Roundtable on invitation hosted at Moffit Cancer Center USF
- Presented workshop at Baycare Community Nurses Annual meeting

Press & Media

- Voice over for RALI FL PSA
- Bayside on the Town interview program on CW44 with Dr David Clapp, Jason Saffels/Housing and Operation Par VP
- Launching network prevention campaign targeted at Opioid reduction for period Dec 2019-Jun 2020. Using approved DCF media campaign - Use Only as Directed: Utah Prescription Pain Medication Program <https://useonlyasdirected.org/>. Information will be used to create original ad spots for digital, broadcast and radio voice over as well as interview shows. Complete media program available for review. Funding \$79,394.10. This campaign will lead into the phase two prevention campaign CFBHN will launch Jul 2020 - Jun 2021.
- Best of the Bay PSA Radio show taping

Print and Communication Production

- Completed print and supply order for Community & Families Affairs Department/ SOC and ROSC

Internal

- Participated in FAME retreat
- Prepared information for Contract Oversight Unit review



Social Media

Facebook Likes total 2953 (net gain 53)

Demographics unchanged – 78% Women/22% Men (25-34 age group highest engaged)

Video viewing significantly up this period – Good Sam video most watched

Face Book Analysis:

- Post Reach (9491 up 54%),
- Post Engagement (3066)
- Video Viewing (1.2k mins viewed up 503%/401k 3 sec video views up 382%)
- Page Views (602 up 6%)

Twitter Analytics:

- All posts that reach over 1K on FB are shared on Twitter
- 9 Twitter posts September, 14 Twitter Posts October, 23 Twitter posts Nov

FB Overview

During this period 87 posts achieved reach greater than 400. Received two recommendations this period. In December will probably gain likes but lose “fans”. This occurs every holiday season. It is hoped the Season of Care campaign in December helps to build fan base to goal of 3000 for year end 2019. Pages lose fans as people deactivate accounts, FB removes accounts and sometimes people simply unlike a page due to content sensitivity.

Graphics continue to be king on the FB platform and outperform informational posts on average. The graphics that perform the best are those of encouragement and kindness. Fans comment on CFBHN graphics which helps with reach. As they are commenting they are also engaging. When graphic is noted as original it is branded with the CFBHN logo. The original graphic for Mental Illness Awareness Week reached over 5000 people.

Some of the more interesting articles that do not perform as well as expected will be posted to LinkedIn with write up asking questions. The goal is engagement with the LinkedIn audience and in doing so show CFBHN is examining issues related to mental illness, addiction and treatment.

Vendor is also spending time researching and cataloging potential articles to share. Work will begin on curating original content to feed a new Blog post on the website beginning in December as well as postings quarterly on LinkedIn.

Vendor is also paying note to posting times and performance. It appears the high graphic reach is before 9 (or better before 8). Graphics increase engagement and promotes scrolling and additional liking. Invitations to like the page were sent to every person who interacted with anything on the page who was not already a fan.



1. Monitoring Update for FY 19-20 (As of 11/30/19)

TABLE A: Provider Monitoring Status Summary		
Number of Provider Monitorings:	Count	%
<i>In-Progress</i>	2	3%
<i>Not Yet Started</i>	41	71%
<i>Monitored - Complete</i>	12	21%
<i>Monitored - Follow-Up Required</i>	3	5%
<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%
Care Coordination	0	0.0%	1	25.0%	0	0.0%
Coalition Compliance	0	0.0%	0	0.0%	0	0.0%
CARF Unaccredited Standards	1	16.7%	0	0.0%	0	0.0%
Crisis Stabilization Unit (CSU)	0	0.0%	0	0.0%	0	0.0%
Data Access	0	0.0%	3	75.0%	0	0.0%
Deaf and Hard-of-Hearing	0	0.0%	0	0.0%	0	0.0%
Employee Verification	3	50.0%	0	0.0%	0	0.0%
FACT	0	0.0%	0	0.0%	0	0.0%
FIT	1	16.7%	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	1	16.7%	0	0.0%	0	0.0%
Mental Health	0	0.0%	0	0.0%	1	100.0%
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	6	100.0%	4	100.0%	1	100.0%

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 Acton or Area of Concern</i>	28	47%	39	64%	32	54%	12	21%
	<i>REQUIRE FOLLOW-UP</i>	32	53%	22	36%	27	46%	3	5%
	<i>Monitoring Review is PENDING</i>	0	0%	0	0%	0	0%	43	74%
	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	6
	Areas of Concern Identified	33	12	6	4
	Commendations Given	23	9	8	1

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		3	
	<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		11		0	
	Adjusted Number of Follow-Ups to Complete	29		14		16		3	
	<i>Follow-Ups Not Yet Completed</i>	0	0%	0	0%	1	6%	3	0%
	Follow-Ups COMPLETED to Date	29	100%	14	100%	15	94%	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	6	4
	<i>Number of CAs & AOCs WAIVED or TABLED</i>	0	0	9	3	14	3	0	0
	Adjusted Number of CAs & AOCs	53	33	15	9	21	3	6	4
	<i>Number PENDING at Follow-Up</i>	0	0	0	0	1	0	0	0
	<i>Number RESOLVED at Follow-Up</i>	48	30	8	6	15	3	0	0
	Number of CAs/AOCs UNRESOLVED at Follow-Up	5	3	7	3	5	0	6	4
	<i>Percent of CAs/AOCs UNRESOLVED at Follow-Up</i>	9.4%	9.1%	46.7%	33.3%	23.8%	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%	43	74%
	<i>That Earned No CAs/AOCs</i>			39	64%	32	54%	12	21%
	<i>With Follow-Up PENDING</i>			0	0%	1	2%	3	5%
	<i>With WAIVED or TABLED CAs/AOCs</i>			8	13%	12	20%	0	0%
	<i>That RESOLVED All CAs/AOCs at Follow-Up</i>			7	11%	11	19%	0	0%
	<i>With UNRESOLVED CAs/AOCs After Follow-Up</i>			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

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

- 1-A. Through the work of Data sub-committee, identify data priorities to be tracked, trended and consistently reviewed by the Board CQI Committee.

There are no updates to report for this goal.

- 1-B Collect Care Coordination data, specific to the prevention of acute care readmissions, to support DCF's 4 DX initiative. Share data with the Board CQI Committee at regularly-scheduled meetings.

CFBHN's Utilization Management department continues to work with representatives of the Department to finalize Lead and Lag measures that will track our progress over time. As these measures are finalized, updates will be included in the monthly Board report.

4. Other Updates

A. Compliance issues: No compliance issues to report.

B. The next Board CQI Committee meeting is scheduled for Thursday, January 16th at 11:00 am.

RISK MANAGEMENT REPORT - December, 2019

1. Count of Subcontractor Incident Reports Received (as of 11/30/19)

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	1	0	0	0	0	0	0	0	0	0	6		
Client Death	21	19	19	13	13	0	0	0	0	0	0	0	85		
Media Event	1	1	1	1	0	0	0	0	0	0	0	0	4		
Sexual Abuse/Sexual Battery	2	1	0	3	0	0	0	0	0	0	0	0	6		
24-Hour (RL6) Notification															
Child Arrest	0	0	0	0	0	0	0	0	0	0	0	0	0		
Elopement	7	13	12	10	10	0	0	0	0	0	0	0	52		
Employee Arrest	0	1	1	0	1	0	0	0	0	0	0	0	3		
Employee Misconduct	1	2	0	5	1	0	0	0	0	0	0	0	9		
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	1	0	0	0	0	0	0	0	5		
Significant Injury to Staff	0	1	0	1	0	0	0	0	0	0	0	0	2		
Suicide Attempt	7	3	6	6	2	0	0	0	0	0	0	0	24		
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	1	0	0	0	0	0	0	0	4		
No Other Category	2	0	2	3	1	0	0	0	0	0	0	0	8		
TOTAL	49	45	42	42	30	0	0	0	0	0	0	0	208	41.6	-8.6%
FY 18-19	51	52	51	46	49	32	42	48	39	40	57	39	546	45.5	
FY 17-18	55	40	38	42	41	30	57	36	45	56	49	45	534	44.5	
FY 16-17	43	62	62	60	45	65	62	43	56	46	49	44	637	53.1	
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		

2. Timeliness of Incident Reports - 24-Hour RL6 Notification (as of 11/30/19)

		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%	199	95.7%
	Late	10	1.6%	21	3.9%	16	2.9%	9	4.3%
	TOTAL	637	100.0%	534	100.0%	546	100.0%	208	100.0%
		Count	%	Count	%	Count	%	Count	%
From CFBHN to DCF (IRAS)	On-Time	637	100.0%	533	99.8%	541	99.1%	205	98.6%
	Late	0	0.0%	1	0.2%	5	0.9%	3	1.4%
	TOTAL	637	100.0%	534	100.0%	546	100.0%	208	100.0%

3. Client Manner of Death Summary (as of 11/30/19)

	FY 16-17			FY 17-18			FY 18-19			FY 19-20		
	Count	%	Per 1000*	Count	%	Per 1000*	Count	%	Per 1000*	Count	%	Per 1000*
Accident	21	10.6%	0.2	16	8.8%	0.1	8	3.9%	0.1	3	3.5%	0.0
Accident -Overdose	33	16.7%	0.3	38	21.0%	0.3	57	27.5%	0.5	9	10.6%	0.1
Homicide	2	1.0%	0.0	1	0.6%	0.0	1	0.5%	0.0	2	2.4%	0.0
Natural Death	48	24.2%	0.4	67	37.0%	0.6	69	33.3%	0.6	7	8.2%	0.1
Suicide	22	11.1%	0.2	23	12.7%	0.2	20	9.7%	0.2	6	7.1%	0.1
	Gunshot - 9			Gunshot - 9			Gunshot - 7			Gunshot - 2		
	Jumped - 4			Jumped - 2			Jumped - 0			Jumped - 0		
	Hanging - 4			Hanging - 5			Hanging - 8			Hanging - 4		
	Overdose - 3			Overdose - 3			Overdose - 3			Overdose - 0		
	Other - 2			Other - 4			Other - 2			Other - 0		
Undetermined	3	1.5%	0.0	3	1.7%	0.0	2	1.0%	0.0	1	1.2%	0.0
Unknown	69	34.8%	0.6	33	18.2%	0.3	50	24.2%	0.4	57	67.1%	0.8
TOTAL	198	100.0%	1.9	181	100.0%	1.7	207	100.0%	1.8	85	100.0%	1.2

*Manner of death rate per 1000 individuals served during the fiscal year.

4. Count of Subcontractor Incidents per Level of Care (as of 11/30/19)

	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
	Count	%	Count	%	Count	%	Count	%
Care Coordination					6	1.1%	3	1.4%
Case Management	28	4.4%	36	6.7%	31	5.7%	7	3.4%
CAT Team					1	0.2%	0	0.0%
Crisis Stabilization Unit	117	18.4%	92	17.2%	91	16.7%	29	13.9%
Detox	15	2.4%	18	3.4%	24	4.4%	7	3.4%
Drop-In/Mental Health Clubhouse	15	2.4%	6	1.1%	5	0.9%	5	2.4%
FACT/Forensic	40	6.3%	30	5.6%	50	9.2%	19	9.1%
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%	3	1.4%
Methadone	8	1.3%	8	1.5%	10	1.8%	0	0.0%
Outpatient	125	19.6%	97	18.2%	122	22.3%	59	28.4%
Residential	208	32.7%	163	30.5%	147	26.9%	48	23.1%
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%	6	2.9%
Not Applicable	12	1.9%	25	4.7%	21	3.8%	10	4.8%
Other	39	6.1%	39	7.3%	15	2.7%	12	5.8%
TOTAL	637	100.0%	534	100.0%	546	100.0%	208	100.0%

5. Subcontractor Incident Rates per 1000 Served (as of 11/30/19)

	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	6	0.1
Client Death	198	1.9	181	1.7	207	1.8	85	1.2
Media Event	20	0.2	10	0.1	15	0.1	4	0.1
Sexual Abuse/Battery	24	0.2	11	0.1	15	0.1	6	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	52	6.9
Employee Arrest	8	0.1	16	0.1	22	0.2	3	0.0
Employee Misconduct	34	0.3	35	0.3	35	0.3	9	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	0.2	22	0.2	5	0.1
Significant Injury to Staff	6	0.1	13	0.1	8	0.1	2	0.0
Suicide Attempt	51	0.5	48	0.4	61	0.5	24	0.4
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	4	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	0.2	22	0.2	8	0.1
TOTAL	637	5.9	534	4.8	546	4.7	208	3.0

6. File Review Summary (as of 11/30/19)

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	11
FILES FOR REVIEW	44	21	30	16
Unable to Complete*			4	0
File Reviews Completed	38	12	21	5
FILE REVIEWS IN PROGRESS	6	9	5	11

File Review Results

File Reviews that Resulted in:	16-17	17-18	18-19	19-20
Observations	9	2	0	2
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 11/30/19)

INCIDENTS	FY 16-17	FY 17-18	FY 18 - 19	FY 19-20				TOTAL
				Q1	Q2	Q3	Q4	
Alarm issues	3	3	1					0
Building Security	0	0	0					0
Computer Security	1	0	2	3	2			5
Data Security								
Unsecured FROM CFBHN	6	13	8	2	1			3
Unsecured TO CFBHN	39	31	25	6	6			12
Other	4	2	3	1	1			2
Equipment Malfunction/Failure	0	1	8	2	1			3
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	17	11	0	0	28

EVENTS	FY 16-17	FY 17-18	FY 18 - 19	FY 19-20				TOTAL
				Q1	Q2	Q3	Q4	
Call to Abuse Registry	3	2	0					0
Legal Notice	1	1	3		1			1
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	5	7			12
Wellness Check Request	2	0	2					0
Other	1	1	2					0
TOTAL	56	71	87	8	8	0	0	16



CFBHN IT Board Report December 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. Occuring as needed.
- b. FASAMS:
 - i. Staff changes at DCF has prompted them to meet with all the ME's and select providers to look at what issues need to be addressed in FASAMS
 - 1. We met with DCF, SAS and Gracepoint met with them also
 - 2. The meetings went Very Well, they are interested in getting things right.
 - ii. "System and Financial Exchange (SaFE)".
 - 1. Select providers continue to test
 - 2. Full System continues to be developed
 - iii. Providers are still concerned about timeline for being ready with new XML file format
 - 1. Changes at DCF have put things on hold as far as Provider EHR development
 - 2. When will we want all providers to use XML.
 - a. Due to recent changes at DCF use of XML is temporarily on hold
 - 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 (SaFE).
 - 3. Outsourcing the development of a new Vouchering system, ITN to be released shortly
 - ii. Working with Providers to have a HIE (Health Information Exchange)
 - 1. Next steps: setup workgroup to determine needs.
- d. County Projects:
 - i. Reporting for County Projects are continuing.
 - ii. County school reports in production
 - iii. Hillsborough Integrated Care Substance Abuse pilot ending this month.
 - iv. Hillsborough County Sheriffs department tracking of released inmates to start in January
 - v. Working with THHI to integrate their homeless data into our databases