

Contracts

- Changes to contracts for FY 20-21:
 - Contract with Coastal Behavioral Health ended on 6/30/2020. As Coastal will be transitioning into a shell subsidiary under First Step of Sarasota, First Step took over services. All services except Lee Mental Health Court services were transferred over.
 - Lee Mental Health Court services were surrendered by Coastal/First Step and bid out. The services were awarded to Centerstone of Florida. CFBHN staff are working on the transition with all parties.
 - Contract with Drug Free Highlands ended on 6/30/2020. Due to contract performance, CFBHN did not renew services for FY 20-21. CFBHN staff will work on acquiring a new provider of coalition services in Highlands County.
 - Special Appropriations. Anticipated contracts for the following providers were vetoed by the governor:
 - Centerstone Psychiatric Residency Program \$1,000,000 (prior funded program)
 - Johns Hopkins \$850,000 (new)
 - Salvation Army of Sarasota \$250,000 (new)
 - Veterans Alternative \$100,000 (prior funded program)
- All contracts with network service providers for FY 20-21 have been executed

Consumer and Family Affairs

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

- ROSC Transformation Workgroup Committee: Seventeen stakeholder groups participating
- Statewide stakeholders: Eight stakeholder groups participating
- Community stakeholders: Ten stakeholder groups participating.
- SAPT Pilot- Eight agencies participating

Status Update: Consumer and Family Affairs (C&FA)

- Provide ROSC related up-dates to CFBHN staff, DCF and NSP to address issues related the Covid-19
- Participates on DCF's statewide monthly SAPT TA
- Facilitates the Suncoast ROSC Transformation Workgroup- Four participants were on the call



Summary of ROSC Outcomes and Accomplishments to Date

1. Collaborative Service Relationships:

- A. C&FA staff participate on DCF's ROSC Guidance Document Committee.
 - Determined that the document is meant for providers and is designed to assist MEs with contracting and monitoring NSPs and should be called *Recovery Management Guidance Document*, instead of the ROSC Guidance Document.
- B. C&FA and QI staff participated in DCF's Recovery Oriented Quality Improvement Monitoring Protocol trainings provided by the FCB.
 - Staff will use evidence-based measures of recovery principles and apply these measures, which have been added to the State's traditional quality improvement monitoring practices for NSPs.
- C. C&FA staff conduct monthly Wraparound Learning Community Meeting/Conference calls to increase the scope knowledge and skills for the Suncoast regions Wraparound facilitators.
 - Nine participants attended

2. Community Integration

- A. CFBHN's Consumer and Family Affairs department continues to provide technical assistance to the Suncoast regions efforts to develop Recovery Community Organizations (RCO).

RCO Updates:

Lee County: Kimmy's Recovery Zone met in June and is currently developing a mission and vision statement.

Pasco County: No update

Hillsborough County: The Hillsborough Recovery Coalition approved their mission statement and reviewed draft bylaws and articles of incorporation. Their Outreach Committee is working to expand their base in the community.

3. Cross-system Partnerships:

- A. C&FA staff participated in the 3rd Annual State Mental Health Treatment Facilities Summit: Facilities and Communities Working Together Using the ROSC Framework.
 - Teams completed the SOAR and developed action plans, which will guide each team in their collaboration with state hospitals.
- B. C&FA participated in JWB's Children's Mental Health Initiative (CMHI) to hold ten family focus groups.
 - Currently in the process of data analysis of the data collected to generate a report which will be utilized to support the work of the CMHI and to create a public awareness campaign.

4. Peer-based Recovery Support Services

- A. Monthly Suncoast Regional Peer Advisory Council Meeting/Call
 - Twenty-two participants were on the call.



Collaborating for Excellence

- B. C&FA in collaboration with David Lawrence Center offers a weekly “Mutual Peer Support” call to the Suncoast Regional Peer Advisory Council members to help support their wellness and offer guidance on resources during the COVID -19 pandemic.
- Fifteen to twenty participants attend each weekly meeting.

5. Community Health and Wellness

- A. C&FA supports and provides technical assistance to grassroots organizations in the Suncoast Region.
- C&FA staff provided technical assistance to NAMI Pinellas regarding their 2020-2021 contract with CFBHN.

Summary of Barriers/Issues and Strategies to Mitigate them

COVID-19 continues to be the only barrier at this time. Network Service Providers and peers have been calling to ask when the 40-hour peer specialist training, Helping Others Heal and WRAP training will be available. We have received requests for online training but have not received permission to provide those two trainings online from DCF or The Copeland Center.

Florida Children’s Mental Health System of Care (FCMHSOC) – Expansion and Sustainability Grant

Purpose of Collaboration

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

Key Partners

Subcontractor: Directions for Living, Partners in Wraparound- SalusCare, BayCare, Success 4 Kids and Families (S4KF), PEMHS and Carlton Manor, NAMI Pinellas, and Pasco County School district.

Other Stakeholders: Juvenile Welfare Board, the University of South Florida and Humana, NAMI Pasco, Juvenile Welfare Board, SEDNET, St. Petersburg College- Clearwater campus, Recovery Epicenter, Pasco Hernando State College, Ready For Life, Bobby White Foundation, Zero Suicide partners of Pinellas, Pasco Youth Haven, Magellan-MY LIFE, Clearwater Neighborhood Family Center, and Sr. Pastor, James Williams from Mt. Olive AME Church have been key partners. This month, we developed one new partnership with Community Impact & LEAP Tampa Bay College Access Network within the Community Foundation of Tampa Bay.

Data Summary

The data summary overview outlines the following two data points:

1. Direct services funded by the grant and delivered by Directions for Living in June:
 - Four referrals were made for Wraparound. Five were assigned to a Wraparound facilitator.
 - Thirty-seven families are served through the grant funds and High Fidelity Wraparound. Seven families are residents of Pasco County and thirty are residents of Pinellas County.
 - No families were discharged from the program.



Collaborating for Excellence

2. The SAMHSA IPP indicators which include infrastructure, development, prevention and mental health promotion are coordinated throughout Pasco and Pinellas Counties (Circuit 6):

➤ Policy Changes (PD1): There were nine policy changes or updates in the month of June.

1. The NAMI Pinellas Scope of work was updated to include deliverables to include and sustain the Peers in Recovery Mentorship Program (PRMP).

2. The Tampa Bay Healthcare Collaborative (TBHC) members completed charter agreements for three Impact Councils-

- a) By June 30, 2021 the Awareness Impact Council will conduct a gap-analysis to identify 100 public and private organizations that have a values-alignment with the Collaborative.
- b) By June 30, 2021 the Building Capacity Impact Council will facilitate the design and delivery of one in-person and one online capacity building opportunity to improve participants' ability to advocate for health equity at work or in their community.
- c) By June 30, 2021 the Collaboration Impact Council will design, deliver and assess the impact of one digital opportunity and in-person experience to collaborate on improving health equity.

3. Directions For Living created several documents as well as five policies and procedures as they complete the OWRAP Self-Assessment. This includes an updated referral form expanding eligibility and funding outside the scope of the grant, implemented the ECOGRAM and reviewed over ten policies to ensure they are aligned with Wraparound principles/concepts which include the following: Approval/authorization Process

Procedure, Strengths Needs Cultural and Discovery Assessment Procedure, Transition Discharge Planning Procedure, Wraparound Plan procedure and the Wraparound Plan Update Procedure.

➤ Memorandum of Understanding (PC1): There were no formal written agreements made this month.

➤ Mental Health and Related Workforce Trained in Mental Health Practices (WD2):

Fourteen individuals participated in the following trainings:

- a) On June 5th, eight individuals completed Wraparound 101 Training.
- b) On June 14th, two peers completed the NAMI Family Support Facilitator Training.
- c) On June 28th, four peers completed the NAMI Peer to Peer Facilitator Training.

➤ Consumers Providing Mental Health –Related Services (WD5): One consumer was a featured speaker on the Virtual Youth Fest- MY LIFE Thriving Thru Trauma.

Summary of FCMHSOC Expansion and Sustainability Grant Outcomes and Accomplishments; Summary of Strategic Plan:

Goal 1. Demonstrate Family and Youth Engagement:

- Accomplishments-Continued to support the virtual MY LIFE Youth Fest, working alongside three national youth led partners. The four virtual events that occurred this month focused on Advocate for Change, Sports and Mental Wellness, and Thriving Thru Trauma. Approximately 200 youth and young adults from across the country participated and one of our peers, Johnny Crowder was a national speaker on June 25.



Collaborating for Excellence

- Accomplishment- Participated in the ongoing development of the “Peers in Recovery Mentorship Program”. Three new participants applied to join the initiative this month.
- Accomplishment- Youth MOVE Pinellas received a \$250 grant from America’s Promise Alliance. The grant will fund “Wellness on Wheels” which will deliver mental health care packages on the doorsteps of youth in Pinellas County.

Goal 2. Expand and Sustain a SOC-Driven Array of Services

- Accomplishment- Updated NAMI Pinellas’ CFBHN contract and scope of work to include and sustain the “Peers in Recovery Mentorship Program”.

Goal 3. Implement High-Fidelity Wraparound Statewide

- Accomplishment- A statewide celebration was held to share the success the state has seen in the implementation of Wraparound. The Suncoast Region’s implementation statistics to date are:
 - Six endorsed Wraparound Trainers
 - Five certified coaches
 - 14 Certified Wraparound Facilitators
- Accomplishment- Ten Statewide Wraparound Principle Awards were presented and eight Suncoast Regional staff were honored:
 - Sarah Miller and Courtney Hendrickson (DFL) received the *Natural Support Award*
 - Pam Jeffre (S4K&F) received the *Collaboration Award*
 - Jo Dee Nicosia (CFBHN) received the *Team Based Award*
 - Julie Semantik (Carlton Manor) received the *Community Based Award*
 - Tajhah Kittling and John Mayo (S4K&F) received the *Strengths Based Award*
 - Dr. Mary Armstrong received the *Outcome Based Award*
 - Beth Picora (CFBHN) received a Wraparound Visionary Leadership Award and a Wraparound Champion Award as the Suncoast Region’s Wraparound Champion
 - John Mayo (S4K&F) received the state Wraparound Lifetime Achievement Award

Summary of Barriers/Issues and Strategies to Mitigate them

An ongoing barrier due to the impact from the COVID-19 pandemic, scheduled trainings, workshops and group meetings were cancelled and postponed. To mitigate the cancelation of trainings, workshops, trainings, and meetings, CFBHN is providing meetings through video chats, webinars and conference calls. CFBHN is reviewing innovations for possible video/webinar training platforms.



Human Resources – As of 6.30.2020

NEW HIRE SUMMARY

NEW EMPLOYEES	Q1	Q2	Q3	Q4	TOTAL	%
Administration					0	0.0%
Consumer Affairs					0	0.0%
Contracts		1			1	16.7%
Community Managers/Housing/ Special Projects			1		1	16.7%
Finance			2		2	33.3%
HR					0	0.0%
IT			1		1	16.7%
NDCS		1			1	16.7%
QI/Risk					0	0.0%
TOTAL	0	2	4	0	6	100.0%

SEPARATION REPORT

WORKFORCE SIZE	Q1	Q2	Q3	Q4	TOTAL	%
Number of Employees (Average)	68	67	68	68	68	
TOTAL SEPARATED						
Involuntary			1		1	
Voluntary	1	2	1	1	5	
Total Separated	1	2	1	1	6	
Percent of Workforce	1.5%	3.0%	1.5%	1.5%	8.9%	8.9%
DETAIL						
Terminated			1		1	16.7%
Moved					0	0.0%
New Opportunity			1	1	2	33.3%
Retired		1			1	16.7%
Other	1	1			2	33.3%
TOTAL	1	2	2	1	6	100.0%



DEPARTMENT							
Administration			1		1	2	33.3%
Consumer Affairs						0	0.0%
Contracts		1				1	16.7%
Community Managers/Housing/Special Projects						0	0.0%
Finance				1		1	16.7%
HR						0	0.0%
JWB						0	0.0%
IT				1		1	16.7%
NDCS			1			1	16.7%
QI/Risk						0	0.0%
TOTAL		1	2	2	1	6	100.0%

Network Development/ Clinical Services

CFBHN Children's Mental Health SOC Assistance Data Summary

July Call Summary: CMH attended and participated in 50 interagency calls including critical case staffings, CSST and youth at risk calls during the month of July. Of these calls 0 children were known to have been sheltered during these calls hence all were diverted from entering the child welfare system. CFBHN CMH received and reviewed 17 child specific staffing packets and subsequently facilitated the multi-agency staffings for community youth being considered for higher levels of care.

CO-VID 19 continues to present significant challenges for the system of care .CFBHN CMH Team continues to support providers who are experiencing difficulties in care coordination and discharge planning. Additionally, CMH is also working with DOH and SMMC MMA plans on the identifying additional community resources to assist families who are impacted by Covid-19. CFBHN is continuing to promote the early identification of high risk youth with further development of the youth at risk model created by CFBHN in all five circuits and technical assistance has been offered through the utilization of Zoom or conference call to assist staff who cannot participate in person due to impact of Covid-19.

Family Intervention Services (FIS)

Due to the ongoing COVID-19 crisis, FIS providers continue to provide services primarily via telehealth and teleconferencing. Procedures are in place to secure necessary releases, complete intakes and assessments, and begin treatment through remote technology. Since the incorporation of telehealth, a significant increase has been seen in the count of assessments being completed each month and assessments being completed within ten and 30 days of receipt of the referral. In addition, the time to engagement in the first treatment appointment has decreased, likely due to the removal of barriers such as transportation and child care by utilizing telehealth. FIS providers are being encouraged to continue to utilize telehealth, as clinically appropriate, once face to face contract resumes, as it has proven successful in removing barriers such as transportation, child care, etc.



Family Intensive Treatment (FIT) Status Update

Many providers reported a decline in referrals, impacting the providers' ability to serve the required number of families within the year. Since this decline was a result of the COVID-19 crisis, the annual target for families served was adjusted to match the total numbers served by each team to avoid penalties to the providers.

Providers continue to utilize telehealth and other remote service delivery methods, in person contact has resumed for some of the most high-risk clients, including the implementation of group therapy sessions within some of the FIT teams. Providers are ensuring all protective measures are followed for any face-to-face contact. Concern has been noted in the clinicians' ability to complete as accurate assessment of the clients' needs as would be gathered during a face-to-face meeting and the long-term impact this could have on clients' engagement and successful completion of FIT. Trends are emerging demonstrating a higher disengagement rate for clients who began FIT services via telehealth when compared to clients who were engaged in face to face contact prior to the use of telehealth services.

The enrollment by Provider/County for FY19-20 (through June 30, 2020) is detailed below.

Family Intensive Treatment (FIT) Program: Enrollment Summary Report, FY 19-20				
Provider/County	Number of Families			Capacity Served Percentage
	Currently Enrolled	Served Year-to-Date	Annual Enrollment Target	
Baycare/Pasco	34	107	105	101.9%
DFL/Pinellas	28	60	60	100.0%
DACCO/Hillsborough	22	58	60	96.7%
CBHC/Charlotte	8	20	24	83.3%
CBHC/Lee	24	60	66	90.9%
Centerstone/Manatee	27	67	67	100.0%
TCHS/Circuit 10	12	38	38	100.0%
TOTAL	155	410	420	97.6%

Behavioral Health Consultants (BHCs)

CFBHN funds six BHC positions across the Region, located in Charlotte, Lee, Sarasota, Manatee, Collier, and Highland/Hardee Counties. DCF funds BHCs in Sarasota, Hillsborough, Pinellas, Pasco, and Polk Counties. CFBHN and DCF collaborate to ensure all BHC positions are aligned and the work is consistent throughout the region.

BHCs provide consultation services to the CPIs, however, due to ongoing COVID-19 crisis, services continue to be provided primarily via remote technology. The BHC position with David Lawrence Center (Collier County) remains vacant; CBHC has temporarily filled the Charlotte County position with an interim staff while recruitment continues for a permanent staff.



FACT

CFBHN'S 14 FACT teams continue to focus on priority populations as identified. Diversion from SMHTF admission and expediting discharge from SMHTF for those on the seeking placement list.

***COVID-19-- COVID19 continues to present challenges to the ROSC, FACT included. Efforts to be responsive to all clients in community living settings has been accomplished so far through telehealth, and other technology in lieu of face to face contact while insuring the frequent and intensive contact necessary for our clients during this time. These efforts continue.

ALL CIRCUITS: FACT

1st QUARTER ADMISSIONS= N/A

FY 20/21 ADMISSIONS TO DATE =9

1ST QUARTER DISCHARGES= N/A

FY 20/21 DISCHARGES TO DATE=11

In FY 20/21, focus will continue on the priority populations by being responsive to state hospital discharges and increased diversion efforts.

FACT Admission/Discharge/Census JULY 2020 (MONTH) FISCAL YEAR 20/21 TOTAL					
	Circuit- 6 4 teams	Circuit-10 2 teams	Circuit- 12 2 teams	Circuit- 13 2 teams	Circuit- 20 4 teams
Current Month Admissions/ FYTD 20/21 TOTAL ADMISSIONS- 9	2/2	1/1	1/1	0/0	5/5
1 th QUARTER/FYTD TOTAL ADMISSIONS- N/A					
Current Month Discharges/ FYTD 20/21 TOTAL DISCHARGES-11	2/2	2/2	1/1	1/1	5/5
1 ST QUARTER/FYTD TOTAL DISCHARGES- N/A					
TOTAL CURRENTLY SERVED BY FACT- 1391/1400	399/400	197/200	199/200	198/200	398/400

**** As of week ending 7/25/2020, 5 of 14 FACT teams are 100 or over**



Forensic

COVID-19--Forensic State Hospital Admissions have been impacted by the COVID-19 virus beginning March 16, 2020. Effective April 1, 2020, all Forensic State Hospital Admissions were placed on hold. As of August 1, 2020, admissions to the Forensic State Hospital have started but are moving slowly due to quarantine procedures at the State Hospitals. Also, many of the State Hospitals have experienced positive COVID results with clients. This is slowing admissions as well. All admissions are requiring a negative COVID-19 tests prior to admission. Individuals who decline the COVID-19 test are being held in jail until the DCF Mental Health Program Office is able to put together a plan for admitting those individuals safely. The 15-day admissions requirement is still suspended and there are currently 390 individuals throughout the state waiting for admission to the Forensic State Hospital. Courts have continued holding Zoom hearings. Some jails are continuing to quarantine new inmates for 14-days once booked before releasing into General Population; however, visitations in the Jails are still on hold. Forensic Residential Providers have begun scheduling new admissions.

Prevention

As a continued result of COVID-19, prevention providers and coalitions are continuing to adjust to the “new normal” to keep their communities safe. During the summer months, many communities within the SunCoast Region are impacted with the negative consequences of being home with school age children with very limited options of constructive learning, enrichment and fun activities. In addition, parents are also finding themselves in financial limbo thus creating a concern for the increase in substance use among both youth and adults.

Many providers have re-vamped their virtual learning platforms to better align to the changing landscape in what works best for the families they are serving. There are still barriers to online access to already disenfranchise and disadvantaged communities thus the need to curtail prevention messages and be more hands on is at the forefront of planning priorities. In addition, prevention providers and drug free coalitions maintain social distance with implementing outreach and community events and utilize online learning as well as social media to continue to spread why remaining drug/alcohol free even in the midst of a pandemic is at the upmost importance.

It should be noted that due to the fact that more than 11,000 kids will try alcohol for the first time during the months of June and July. Our drug free coalitions are taking this time as an opportunity to openly discuss the dangers of alcohol abuse by offering tips to parents about how to help protect their kids from the dangers of underage drinking. Parents are their children's first role model so education to parents about modeling responsible behavior is also a necessary conversation.

The below data shows the impact of positive prevention messages, education and environmental strategies that have been implemented during this reporting period.



Number Served for July, 2020

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
Information Dissemination	2,632	11,191	9	13,832
Education	2,056	821	-	2,877
Alternatives	111	70	-	181
Environmental	35	1,106	-	1,141
Problem ID and Referral	4,454	248	-	4,702
TOTAL	9,288	13,436	9	22,733

Healthy Transitions:

The program is working to facilitate final participant surveys and assessments, in preparation for the federal grant closeout report. The program staff recently received notice that due to budget cuts, the program will be ending on October 31, 2020. The final 5-year closeout report has been completed by the program staff and forwarded to DCF for review and routing. The program staff will work to coordinate warm linkages to other applicable program for the youth and young adults current enrolled in Florida Healthy Transitions. This is critical due to the severe needs of the young people, especially during COVID when many are socially and physically isolated.

The chart below details the number of individuals served over the life of the Florida Healthy Transitions' grant, by the number achieved and number proposed in the grant application for each program component.

Indicator	Number Achieved	Proposed In Grant
Policy Development	11	11
Partnership/Collaborations	47	38
Community Outreach	13,607	1,688
Behavioral Health Screenings	18,752	
Unique Texters	711	
Referrals to BH Services	1,813	
Care Coordination/ Intensive Care Management/ Wraparound Services	339	562
Educational/Vocational Support	37	
Mental Wellness Support Groups	461	



Care Coordination

1. Access to Care

CFBHN Utilization/Care Managers continue to outreach to all regional providers of services for anyone waiting for a bed-based SA service resulting in more timely access to services.

COVID-19: Due to COVID-19, many adult substance abuse residential programs have paused admissions or continue to operate with restrictions, limiting admissions to internal referrals only. These changes have significantly reduced the bed availability for clients placed on the waitlist for Residential treatment. Additionally, providers who house long term programs greater than 60 days have also reduced or paused admissions. Some residential programs are just recently beginning to reopen beds for admission, especially for persons being referred by another inpatient provider. CFBHN Utilization/Care Managers continue to outreach to all regional substance abuse service providers for anyone waiting for a bed-based service, which continues to support timely access to services. Utilization/Care Managers also work with providers in locating treatment services and resources for persons who may need additional or ongoing treatment after completing a short-term program.

2. Care Coordination

CFBHN Utilization/Care Managers monitor all registrations for Crisis Stabilization, Detox and Residential Level 1 & 2 treatment to identify persons who meet HNHU status and notify providers when persons admitted are eligible for care coordination. The regional providers have served a total of 825 persons during FY1920 in care coordination. There are currently 220 individuals actively being served in care coordination as of 8/5/20. CFBHN Utilization/Care Managers and network providers meet routinely and work together to explore treatment and resource needs for persons who readmit and engage other community resources and providers as needed to support those efforts. Voucher funds to assist with care coordination resource needs for FY1920 were exhausted as of 5/11/20. CFBHN allowed providers to shift care coordination service dollars to incidentals to provide ongoing assistance with resource needs for care coordinated individuals until 7/31/20 when new voucher dollars for FY2021 became available.

COVID-19: Due to COVID-19, most Care Coordination providers are providing virtual services or making contact with individuals remotely via telephone or video teleconferencing where possible. Some providers are beginning to report initiating face to face contacts with consumers during the month of July/early August. The pandemic has created multiple challenges for individuals including access to employment, loss of jobs, loss of assistance from family/friends, etc. resulting in increased need for assistance for some individuals.

NDCS Special Projects Updates

1. First Episode Psychosis (FEP) Program

4 participants were enrolled in July and there are 6 prospective participants being explored for eligibility for the FEP Program. A relationship was recently established with the Director of BH Outreach with HCA as well as the BRH CSU Director. The Program Manager continues to conduct a weekly phone staffing with Assistant Director of GP CCSU and regular email contact with USF Dept. of Psychiatry staff and GP Adult CSU staff. A staff member will begin attending adult MH court on a regular basis and conducting in-person community presentations after the COVID-19 distancing directives are lifted. The Family Education Clinician maintains contact with St. Joseph's CSU/CCSU staff. The SEES continue to participate in SOAR Workgroups (remote), engage with the PACE Center for Girls led Girls to Thrive workgroup and regular contact with Vocational Rehabilitation.



Covid-19 impact- Due to COVID-19, in-person outreach activities are on hold and efforts are underway to explore additional virtual opportunities with CFBHN and other community partners. The Family Education Clinician continues to represent HM at Juvenile MH Court via Zoom. The PM continues to participate in monthly Acute Care and Children's Committee meetings via Microsoft Teams.

2. SOR (Statewide Opioid Response)

Through federal and state funding, CFBHN has worked with Providers to implement the SOR (State Opioid Response) program. The funding has allowed for increased and enhanced access to MAT services throughout CFBHN's Provider Network. A critically important result of the SOR program is the development of hospital bridge partnerships. CFBHN has facilitated the development of hospital bridge programs throughout the Suncoast/C10 region (ACTS – Tampa General & St. Joseph's Hospital, Baycare Behavioral – Morton Plant North Bay, Charlotte Behavioral Health Care – Fawcett Memorial & Bayfront Port Charlotte, David Lawrence Center – NCH Healthcare & Physicians Regional, DACCO – Tampa General, First Step of Sarasota – Manatee Memorial & Sarasota Memorial, and Operation PAR – St. Anthony's, SalusCare – Lee Health, Tri-County Human Services – Bartow/Winter Haven Regional, Lakeland Regional, & Lake Wales/Davenport). Data collected for June 2020. This does not include data for the month of July and August. Providers submit data on the 27th of each month.

Hospital Bridge Partnership	
Number of individuals Screened	348
Number of individuals induced with buprenorphine in ED/hospital prior to discharge	9
Number of individuals referred to treatment providers	116
Number of individuals linked to treatment providers	82

Due to Coronavirus-19 providers have implemented telehealth/telemedicine services to continue to serve clients. Providers will continue to evaluate their respective programs and services and maintain compliance with health department and government recommendations.

DCF has approved \$1.5 million be shifted from SOR Child Welfare Project, which provides access to MAT services for parents involved in the child welfare system. CFBHN has facilitated collaboration between community based care (CBCs) and substance abuse providers across the Suncoast region/C10 to ensure access and delivery of services for identified families. The money will be shifted to the general SOR funds for better provider utilization.

3. 4DX

CFBHN has agreed to focus on State Hospital diversions as its next 4DX project. Meetings between DCF and CFBHN Adult Mental Health staff have occurred to outline expectations for this measure. Further preparations are being made to transfer existing reporting methods of the diversion data to processes that can be more readily reported to DCF. A narrative explanation framing CFBHN diversion efforts and process is being refined to better communicate a comprehensive picture of the 5 circuits and what influences diversion activities and outcomes.



Communications

NOTE: This is a consolidated report for communications through Fiscal Year-End. With the rise of the global COVID pandemic, CFBHN operations and communications changed substantially during this period. Communications shifted focus to educate regarding status and access to services and providing information relative to the pandemic. Social media and traditional media provided the reach and support needed by the community during this period, as traditional meetings ceased operations during shutdown and quarantine. Meetings became operational through Zoom, Google and Microsoft Teams virtual meetings for staff. Additionally, with the death of George Floyd at the hands of Minneapolis police, the reaction and subsequent response by the Black Lives Matter movement resulted in increased awareness of Diversity at CFBHN. A support statement was posted on our website, via social media and through our email distribution system.

Community

- Suspended in person due to COVID.

Legislative/Elected Officials/Community

- Providing twice weekly status update reports via Constant Contact during the COVID 19 crisis

Workshops/Award Recognitions/Other

- Selected to present at FBHCON however due to COVID conference cancelled

Press & Media

- Media campaign partners and other channels stepped up to provide free PSA's during the COVID crisis to advise CFBHN was open and operational through the contracted provider network
- Launched the COVID Helpline and supported awareness via media campaign in month of June and free PSA initiative
- Completed the Opioid campaign end June
- Final summary report attached showing a total of 32mm impressions from end December 2019 to end June 2020 including the free PSA activity

Website

- COVID Helpline link posted on website
- Continued to support COVID information
- Supported Diversity and Black Lives Matter

Video Production

- None this period

Print and Communication Production

- COVID Helpline spots produced and disseminated



Social Media

Social media become essential during the COVID 19 crisis to post information
It was used to support the CENSUS 2020 initiative grant through the Thriving Minds ME
It supported the launch of the helpline and the free PSA campaigns

Posts in March reached: April 28.1k, May 30.6k, June 31.1k

Engagements averaged about 2.9k monthly

Facebook Likes total 3105 at end of June. New likes averaged 30 monthly during period

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

Video viewing significantly up this period with new materials to view including Cope Notes, COVID Helpline, We Are Here TV spots. Good Sam video remained most watched. Total minutes viewed was 33.4k with 140.1k 3 sec views.

Twitter Analytics:

- All posts that reach over 1K on FB are shared on Twitter
- Tweets in May recorded 6.4k impressions

Please note that total impressions during this period were almost 32mm

The Gross impressions generated by PSA activity totaled
CFBHN Media Campaign

14,068,300

December 2019 - June 30th 2020

<u>MEDIA Name & Campaign</u>	<u>Platform</u>	<u>Spots</u>	<u>Gross Impressions DMA P18+</u>
NBC - COVID 19 Helpline - June 2020	TV	120	1,741,000
NBC - COVID 19 PSA - June 2020	TV	30	643,000
NBC - Opioid - Dec 2019 thru June 2020	Facebook		363,131
NBC - Snapchat (still waiting for update)			
MOR (Hearst) COVID 19 Helpline - June 2020	TV	117	1,608,000
MOR (Hearst) COVID 19 PSA - 4/20 thru 5/3/2020	TV	177	1,268,000
CBS - COVID 19 Helpline - June 2020	TV	120	4,857,400
BS - COVID 19 PSA - 4/20 thru 5/03	TV	57	301,600
WTOG - CW44 / COVID 19 Helpline & PSA	TV	114	515,000
WTOG - CW44 / Opioid - Dec 2019 thru June 2020	TV	892	1,848,837
<u>Gross Impressions DMA P12+</u>			
FT MYERS (WINK) COVID 19 Helpline & PSA April - June 2020	TV	140	1,591,000
FT MYERS (WINK) Opioid Dec 2019 thru June 2020	TV	486	1,531,000
Sun Broadcasting FLY 98.5, 97.7 & WAXA COVID 19 Helpline & PSA	Radio	510	1,177,700



Sun Broadcasting FLY 98.5, 97.7 & WAXA Opioid PSA 4/13 thru 5/03	Radio	90	351,000
IHeart Media (streaming) WFLZ & WMTX COVID 19 Helpline June 2020	Streaming	180	76,666
IHeart Media WFLZ & WMTX COVID 19 Helpline June 2020	Radio/Mix	144	1,510,000
iHeart Media WFLZ & WMTX COVID 19 PSA April thru May 2020	Radio/Mix	1039	6,630,000
iHeart Media WFLZ & WMTX Opioid Dec 2019 thru June 2020	Radio/Mix	924	4,430,000
iHeart Media WFLZ & WMTX Opioid Dec 2019 thru June 2020 PSA	Radio/Mix	110	952,000
Total		5,250	31,395,334



Continuous Quality Improvement Monthly Report FY 19-20

As of 6/30/20

1. Monitoring Update for FY 19-20

TABLE A: Provider Monitoring Status Summary

Number of Provider Monitorings:	Count	%
<i>In-Progress</i>	0	0%
<i>Not Yet Started</i>	0	0%
<i>Monitored - Complete</i>	24	42%
<i>Monitored - Follow-Up Required</i>	19	33%
<i>Follow-Up Complete</i>	14	25%
TOTAL	57	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	1	2.5%	0	0.0%	0	0.0%
Assisted Living Facilities - LMH	0	0.0%	0	0.0%	0	0.0%
BNET	0	0.0%	1	5.3%	0	0.0%
CAT	2	5.0%	2	10.5%	0	0.0%
Care Coordination	2	5.0%	1	5.3%	2	33.3%
Coalition Compliance	0	0.0%	0	0.0%	0	0.0%
CARF Unaccredited Standards	2	5.0%	0	0.0%	0	0.0%
Crisis Stabilization Unit (CSU)	0	0.0%	0	0.0%	0	0.0%
Data Access	0	0.0%	10	52.6%	0	0.0%
Deaf and Hard-of-Hearing	4	10.0%	3	15.8%	1	16.7%
Employee Verification	16	40.0%	0	0.0%	0	0.0%
FACT	0	0.0%	1	5.3%	1	16.7%
FIT	1	2.5%	0	0.0%	0	0.0%
Forensic	0	0.0%	0	0.0%	0	0.0%
HIV	0	0.0%	1	5.3%	0	0.0%
Indigent Drug Program	0	0.0%	0	0.0%	0	0.0%
Incidentals	2	5.0%	0	0.0%	0	0.0%
Mental Health	0	0.0%	0	0.0%	1	16.7%
Outreach	3	7.5%	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	3	7.5%	0	0.0%	0	0.0%
Staff Time Validation	0	0.0%	0	0.0%	0	0.0%
TANF	1	2.5%	0	0.0%	1	16.7%
Women's Block Grant	0	0.0%	0	0.0%	0	0.0%
Other	3	7.5%	0	0.0%	0	0.0%
TOTAL	40	100.0%	19	100.0%	6	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	1
	TOTAL Number of Provider Monitorings Conducted	60	61	59	57

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%	24	42%
	<i>REQUIRED FOLLOW-UP</i>		32	53%	22	36%	27	46%	33	58%
	<i>Monitoring Results are PENDING</i>		0	0%	0	0%	0	0%	0	0%
	TOTAL Number of Provider Monitorings Conducted		60	100%	61	100%	59	100%	57	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	40
	Areas of Concern Identified		33	12	6	19
	Commendations Given		23	9	8	6

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		33	
	<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		12		0	
	Adjusted Number of Follow-Ups to Complete		29		14		15		33	
	<i>Follow-Ups Not Yet Completed</i>		0	0%	0	0%	0	0%	19	0%
	Follow-Ups COMPLETED to Date		29	100%	14	100%	15	100%	14	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	40	19
	<i>Number of CAs & AOCs WAIVED or TABLED</i>		0	0	9	3	14	3	2	1
	Adjusted Number of CAs & AOCs		53	33	15	9	21	3	38	18
	<i>Number PENDING at Follow-Up</i>		0	0	0	0	1	0	30	11
	<i>Number RESOLVED at Follow-Up</i>		48	30	8	6	15	3	6	4
	Number of CAs/AOCs UNRESOLVED at Follow-Up		5	3	7	3	5	0	2	3
	<i>Percent of CAs/AOCs UNRESOLVED at Follow-Up</i>		9.4%	9.1%	46.7%	33.3%	23.8%	0.0%	5.3%	16.7%

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 Results PENDING</i>				0	0%	0	0%	0	0%
	<i>That Earned No CAs/AOCs</i>				39	64%	32	54%	24	42%
	<i>With Follow-Up PENDING</i>				0	0%	0	0%	19	33%
	<i>With WAIVED or TABLED CAs/AOCS</i>				8	13%	12	20%	2	4%
	<i>That RESOLVED All CAs/AOCs at Follow-Up</i>				7	11%	11	19%	9	16%
	<i>With UNRESOLVED CAs/AOCs After Follow-Up</i>				7	11%	3	5%	3	5%
	TOTAL Number of Providers Monitored in the FY				61	100%	58	98%	57	100%

RISK MANAGEMENT Monthly Report

As of 6/30/20

1. Count of Subcontractor Incident Reports Received

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	Average Number of Reports per Month	% Change - Current vs. Previous Year
3-Hour (Phone) Notification															
Child on Child Sexual Abuse	4	1	1	0	0	0	0	2	2	0	0	1	11		
Client Death	22	19	19	13	13	26	22	21	14	22	29	23	243		
Media Event	1	1	1	1	0	1	0	3	0	0	1	0	9		
Sexual Abuse/Sexual Battery	2	1	0	3	0	2	1	2	1	0	1	3	16		
24-Hour (RL6) Notification															
Child Arrest	0	0	0	0	0	1	0	0	0	0	0	0	1		
Elopement	7	13	12	10	10	11	11	9	5	8	3	6	105		
Employee Arrest	0	1	1	0	1	1	0	0	1	1	0	0	6		
Employee Misconduct	1	2	0	5	1	5	3	2	3	1	5	2	30		
Missing Child	0	0	0	0	0	0	0	1	1	0	0	3	5		
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	2	7	2	1	1	1	0	19		
Significant Injury to Staff	0	1	0	1	0	2	0	1	0	2	3	1	11		
Suicide Attempt	7	3	6	6	2	3	4	3	1	3	2	2	42		
Other:															
Bomb/Biological/Chemical Threat	0	0	0	0	0	0	1	0	0	0	0	0	1		
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	1	1		
Theft, Vandalism	2	1	0	0	1	0	0	0	0	0	0	0	4		
No Other Category	2	0	2	3	1	1	3	1	25	29	5	39	111		
TOTAL	50	45	42	42	30	55	52	47	54	67	50	81	615	51.3	+ 12.6%
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

		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%	589	95.8%
	Late	10	1.6%	21	3.9%	16	2.9%	26	4.2%
	TOTAL	637	100.0%	534	100.0%	546	100.0%	615	100.0%
From CFBHN to DCF (IRAS)	On-Time	637	100.0%	533	99.8%	541	99.1%	585	95.1%
	Late	0	0.0%	1	0.2%	5	0.9%	30	4.9%
	TOTAL	637	100.0%	534	100.0%	546	100.0%	615	100.0%

3. Client Manner of Death Summary

	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	12	4.9%	0.1
Accident - Overdose	33	16.7%	0.3	38	21.0%	0.3	57	27.5%	0.5	43	17.7%	0.4
Homicide	2	1.0%	0.0	1	0.6%	0.0	1	0.5%	0.0	3	1.2%	0.0
Natural Death	48	24.2%	0.4	67	37.0%	0.6	69	33.3%	0.6	22	9.1%	0.2
Suicide	22	11.1%	0.2	23	12.7%	0.2	20	9.7%	0.2	22	9.1%	0.2
	Gunshot - 9			Gunshot - 9			Gunshot - 7			Gunshot - 4		
	Jumped - 4			Jumped - 2			Jumped - 0			Jumped - 1		
	Hanging - 4			Hanging - 5			Hanging - 8			Hanging - 11		
	Overdose - 3			Overdose - 3			Overdose - 3			Overdose - 3		
	Other - 2			Other - 4			Other - 2			Other - 1		
Undetermined	3	1.5%	0.0	3	1.7%	0.0	2	1.0%	0.0	3	1.2%	0.0
Unknown	69	34.8%	0.6	33	18.2%	0.3	50	24.2%	0.4	138	56.8%	1.3
TOTAL	198	100.0%	1.9	181	100.0%	1.7	207	100.0%	1.8	243	100.0%	2.2

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

4. Count of Subcontractor Incidents per Level of Care

	FY 16-17		FY 17-18		FY 18-19		FY 19-20	
	Count	%	Count	%	Count	%	Count	%
Care Coordination					6	1.1%	2	0.3%
Case Management	28	4.4%	36	6.7%	31	5.7%	23	3.7%
CAT Team					1	0.2%	0	0.0%
Crisis Stabilization Unit	117	18.4%	92	17.2%	91	16.6%	65	10.6%
Detox	15	2.4%	18	3.4%	24	4.4%	9	1.5%
Drop-In/Mental Health Clubhouse	15	2.4%	6	1.1%	5	0.9%	8	1.3%
FACT/Forensic	40	6.3%	30	5.6%	50	9.1%	45	7.3%
FIT/FIS	1	0.2%	3	0.6%	1	0.2%	1	0.2%
Medical Services	7	1.1%	4	0.7%	6	1.1%	7	1.1%
Methadone	8	1.3%	8	1.5%	10	1.8%	0	0.0%
Outpatient	125	19.6%	97	18.2%	122	22.3%	76	12.4%
Residential	208	32.7%	163	30.5%	147	26.9%	92	15.0%
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	1.0%
Not Applicable	12	1.9%	25	4.7%	21	3.8%	28	4.6%
Other	39	6.1%	39	7.3%	15	2.7%	253	41.1%
TOTAL	637	100.0%	534	100.0%	547	100.0%	615	100.0%

5. Subcontractor Incident Rates per 1000 Served

	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	11	0.1
Client Death	198	1.9	181	1.7	207	1.8	243	2.2
Media Event	20	0.2	10	0.1	15	0.1	9	0.1
Sexual Abuse/Battery	24	0.2	11	0.1	15	0.1	16	0.1
24-Hour (RL6) Notification								
Child Arrest	7	0.1	2	0.0	2	0.0	1	0.0
Elopement	201	10.7	152	8.3	129	7.0	105	6.4
Employee Arrest	8	0.1	16	0.1	22	0.2	6	0.1
Employee Misconduct	34	0.3	35	0.3	35	0.3	30	0.3
Missing Child	6	0.1	4	0.0	0	0.0	5	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	19	0.2
Significant Injury to Staff	6	0.1	13	0.1	8	0.1	11	0.0
Suicide Attempt	51	0.5	48	0.4	61	0.0	42	0.0
Other:								
Biological/Chemical Threat	0	0.0	1	0.0	0	0.0	1	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	0.0
Visitor Injury or Death	2	0.0	0	0.0	0	0.0	1	0.0
No Other Category	28	0.3	23	0.2	22	0.2	111	1.0
TOTAL	637	5.9	534	4.8	546	4.7	615	5.7

6. File Review Summary

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	42
FILES FOR REVIEW	44	21	30	47
Full File Review Not Required				16
Unable to Complete*			4	6
File Reviews Completed	38	12	21	21
FILE REVIEWS IN PROGRESS	6	9	5	4

File Review Results

File Reviews that Resulted in:	16-17	17-18	18-19	19-20
Observations	9	2	0	7
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 6/30/20)

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	4	2	2		8
Data Security								
Unsecured FROM CFBHN	6	13	8	2	1	2		5
Unsecured TO CFBHN	39	31	25	5	8	11	9	33
Other	4	2	3	2	1	1	4	8
Equipment Malfunction/Failure	0	1	8	2	2	1		5
Facility Issues	1	3	0	2			1	3
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			1		1
Threat to Safety	1	0	1					0
Utility Failure								
Electrical	2	2	3				1	1
Heating/AC	0	0	0					0
Internet	1	5	4				1	1
Telephone	0	3	0					0
Water/Plumbing	0	1	0					0
Other	1	8	12	1		1		2
TOTAL	63	72	67	19	14	19	16	68

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			1		1
Legal Notice	1	1	3		2	1	3	6
Media Request	3	6	2					0
Public Records Request	3	15	16	3		5	1	9
Report to Licensing	0	0	0					0
Report to OIG	43	46	62	5	12	10	9	36
Wellness Check Request	2	0	2					0
Other	1	1	2					0
TOTAL	56	71	87	8	14	17	13	52

CFBHN IT Board Report
August 2020
IT System Update

Current IT projects

- a. All Provider meetings:
 - i. IS Strategic / IT Provider Meeting is held monthly.
 - 1. FASAMS is still the focus of the meetings.
 - a. Everyone to cutover 7/1/21
 - b. (still not official by DCF)
 - 2. Covid 19 is a major concern
 - 3. Performance outcome measures
 - a. Challenges presented for both ME and DCF
 - b. Discussion on what needs to be collected
 - i. Select Providers have been invited to participate
- b. FASAMS:
 - i. Pamphlet ISS-2 VI4 has been released
 - 1. Delayed implementation until November 2020
 - 2. Must submit in VI4 format by 7/1/21
 - 3. Awaiting final approval of this date by DCF
 - ii. "System and Financial Exchange (SaFE)".
 - 1. Select providers continue to test
 - 2. Full System continues to be developed
 - 3. Voucher application in design phase
 - iii. Providers are still concerned about timeline for being ready with new XML file format
 - 1. DCF is very open to ideas and ways to make FASAMS work.
 - 2. When will we want all providers to use XML.
 - a. Discussions with providers are ongoing
 - b. Providers prefer waiting until 7/1/21 to submit data in VI4 format
 - c. New data format will cause a lot of existing reports to need changing.
 - 3. The ME/IT committee and FAME has this as a high priority.
- c. System Changes
 - 1. 4DX is refocused on increasing the number diversions from state hospitals.
- d. County Projects:
 - i. Some projects are ramping up again after having slowed down due to Covid 19.
- e. Covid 19
 - i. Requests for reports are starting

