

Department Directors Report
December 2022

Contracts

Contracts is waiting on the new schedule of funds to amend SOR funds into contracts for the next federal fiscal year.

Amendments are almost all complete to add carry forward funding, add additional substance abuse and substance abuse prevention supplemental block grant funding, add additional supported employment funding for clubhouses, and update some performance measures.

Consumer and Family Affairs

C. Collaborative Strategies with the Department and other stakeholders

1. Recovery Oriented System of Care (ROSC) Transformation

Purpose of Collaboration

To transform Florida's substance use and mental health system of care into a Recovery Oriented System of Care (ROSC). CFBHN's strategy is to align our goals, objectives and action plan with the Department of Children and Families' (DCF) ROSC key indicators.

Key Partners

SunCoast ROSC Transformation Workgroup Committee: CFBHN's Consumer and Family Affairs Department (CFA), Agency for Community Treatment Services (ACTS), Centerstone, Charlotte Behavioral Health, Cove Behavioral Health, David Lawrence Center, Directions for Living, Drug Free Charlotte County, National Alliance on Mental Illness (NAMI) Pinellas, NAMI Collier, Operation PAR, Inc., Personal Enrichment through Mental Health Services (PEMHS), Polk County Government, SalusCare, Tri-County Human Services, and Youth and Family Alternatives (YFA). Boley Centers, Inc., Community Assisted Supported Living (CASL), First Step of Sarasota, Inc., Gulf Coast Jewish Family & Community Services, Inc., Gracepoint, Mental Health Resource Center, Inc., NAMI Collier, Northside, Operation PAR, Inc., Peace River Center for Personal Development Inc., PEMHS, Phoenix House, Polk County Problem solving Court, Success 4 Kids & Families (S4KF), Inc.,



Statewide stakeholders include Office of Substance Abuse and Mental Health (SAMH), Florida Alcohol and Drug Abuse Association (FADAA), Florida Certification Board (FCB), Peer Support Coalition of Florida, the University of South Florida (USF) College of Behavioral & Community Sciences, USF Department of Mental Health Law & Policy, and the USF Louis de la Parte Florida Mental Health Institute (FMHI).

Community stakeholders include Drug Enforcement Administration (DEA), Epicenter Recovery Community Organization (RCO), Humana, USF Health and Human Services, NAMI Hillsborough, Safe and Sound, James A. Haley Veterans' Hospital, The Timothy Initiative, Just Initiative, Wholesome Community Ministries, Elite DNA Therapy, The Children's Network of Southwest Florida, Chrysalis Health, Carton Manor, and Project Opioid Tampa Bay.

Recovery Community Organization (RCO) development partnerships: CFBHN, DCF SunCoast Region Office of Substance Abuse and Mental Health (SAMH), Cove Behavioral Health, American Addiction Centers, DEA, The Phoenix, The Timothy Initiative, FADAA, Dr. Amanda Sharpe, Polk Recovery Community, Faces and Voices of Recovery (FAVOR), Kimmie's Recovery Zone, Hillsborough Recovery Coalition, and The Hope Shot.

ROSC Action-Oriented Priority Areas Fostered – Summary of Accomplishments and Outcomes

- A. Collaborative Service Relationships:
1. DCF's Guidance 35 Recovery Management Practices, III. Implementation A.9. Monitor NSPs' use of the Self-Assessment Planning Tool (SAPT) and Recovery Self-Assessment (RSA) surveys.

CFBHN's CFA department provided NSPs with their SAPT/RSA reports and held a training to explain the reports and how to complete their Action Plans. Sixty-five people participated in the training. CFBHN continued to provide technical assistance to NSPs.

CFA continued to work with Behavioral Science Research Institute (BSRI) to create the cumulative annual SAPT/RSA report for the SunCoast Region.

2. Facilitates a monthly SunCoast ROSC Transformation Technical Assistance Workgroup:



B. Cross-system Partnerships:

1. CFA coordinates Wraparound 101 Trainings for SunCoast Region stakeholders to assist in the certification process and capacity.
2. CFA serves as the SunCoast Regional Wraparound Champion to oversee and track individuals who receive Wraparound trainings and those that are awarded facilitation and coaching certifications.

Currently, Directions for Living, Success 4 Kids & Families, Carlton Manor, and Chrysalis Health are the only NSPs in the region that are contracting with Sunshine Medicaid to deliver high fidelity Wraparound.

Directions for Living, Success 4 Kids & Families, Carlton Manor, Chrysalis Health, Baycare Pasco CAT Team, Children's Network of Southwest Florida, Elite DNA, Guided Results, NAMI Pinellas, NAMI Sarasota/Manatee, Charlotte Behavioral Health Care, Operation PAR, and Serving Children and Reaching Families, LLC, are all capable of providing high fidelity Wraparound and billing Medicaid in the Suncoast Region.

Five individuals were certified as Wraparound Facilitators in October and November.

3. CFA partners with Chrysalis Health and Carlton Manor to provide monthly Wraparound Learning Community Meetings to increase the knowledge and skills of SunCoast region Wraparound facilitators/coaches.

Fourteen individuals participated in the November meeting.

4. CFA provide an overview of High Fidelity Wraparound (HFW) that included success stories from several HFW certified NSP staff members in the CFBHN Children's System of Care Annual Trainings.

During the months of October and November, many attendees participated in our interactive HFW presentation held in each of our five SunCoast regional circuits.



C. Community Integration:

1. CFA provides technical assistance to the SunCoast region's Recovery Community Organizations (RCO) to educate and encourage the use of recovery concepts and principles.

RCO Updates are as follows:

Hillsborough County: Hillsborough Recovery Coalition (HRC) – The board president and two members of the advisory committee met with Hillsborough County Health department director, Gene Earley to present on the program that HRC will offer. They also asked for startup funding for this program, and Mr. Earley is considering it and will get back with them. A board retreat is scheduled for Dec 17th.

Lee County: Kimmie's Recovery Zone (KRZ) – No update

Pinellas County: Recovery Epicenter Foundation (REF) - No update

Pasco County: The Hope Shot - No update

Polk County: Polk for Recovery (PFR) - No update

Manatee County: - No update.

Sarasota County: Sarasota Cares Outreach - No update.

2. CFA provides technical assistance to SunCoast regional NAMI affiliates to assist in their sustainability efforts as they provide free education, support, advocacy, and resources to their community.

NAMI Hillsborough- No technical assistance provided in October or November.

NAMI Pinellas- In November, NAMI Pinellas entered into a contract with CFBHN to deliver the Florida Certification Board's (FCB) required training content to recovery peer specialists working and volunteering within the SunCoast region with our NSPs. NAMI Pinellas began their 1st cohort of training in November.



3. CFA participates on the Winter Haven, Manatee, Pinellas, Pasco, and Hillsborough FACT Advisory Teams with the goal to include persons served, family voice and choice, and awareness of recovery principles and concepts to the team.

CFA participated in the Hillsborough FACT Advisory Team meeting in November.

D. Community Health and Wellness

1. CFA/NAMI Pinellas/PEMHS Memorandum of Understanding (MOU).

No applicants obtained certification through FCB in October or November.

2. CFA provides leadership on Team Two, Pinellas County's Juvenile Welfare Board (JWB) Children's Mental Health Initiative (CMHI).

In October and November, Team Two continued meeting to plan another "Prevention of Suicide: A Youth Town Hall Event" for November 10, 2022. Due to Hurricane Nicole, it was postponed until December.

3. CFA staff participated in Project Hope after Hurricane Ian, working at a FEMA site in Hardee County.

E. Increase Peer-based Recovery Support Services

1. CFA facilitates the SunCoast region Recovery Peer Specialist Learning Committee meeting to provide peer specialists with opportunities to expand their leadership potential, provide educational opportunities as well as support and technical assistance to develop and grow the recovery peer workforce.

Twenty individuals participated in October and the community developed the following Mission Statement: "United as a diverse Recovery Peer Specialist community in a safe space sharing our ideas and experiences to empower one another and to maximize the effectiveness of recovery-oriented systems of care and the role peers play in this movement".

Seventeen individuals participated in November.



2. CFA staff, offers a weekly Mutual Peer Support meeting to support peer workers/volunteers in their wellness and offer guidance and resources in the SunCoast region and across the state.

On average, 20 peers participated each week during October.

On average, 17 peers participated each week during November.

3. CFA developed and filmed five webinars that meet the training criteria for peer certification and are hosted on the CFBHN website.

During October and November, no individuals registered for a webinar. CFBHN found a glitch in the system that did not allow participants to register for training. Our IT and Communications Director is working on solutions.

4. CFA provides the Florida Certification Board's required 40-hour recovery peer specialist training to our NSP staff and the community.

In November, CFBHN subcontracted with NAMI Pinellas to offer recovery peer specialist training services. This service will be at no cost to the SunCoast Network Service Providers (NSP) and community stakeholders who employ Recovery Peer Specialists with direct service roles.

5. CFA staff provides Wellness Recovery Action Plan (WRAP) training.

NAMI Pinellas offered a WRAP training in November.

6. CFA staff provided "Reaching For Their Dreams - Using Recovery Capital as the Foundation for Recovery Planning" Training in November.

Forty-two participants attended the training.

Eighteen participants attend the Learning Collaborative.

7. CFA staff participated in and completed the National Supervision Three Part Series - The Role of Leadership in Supervision of Peer Staff sponsored by the Peer Support Coalition of Florida.

Summary of Barriers/Issues and Strategies to Mitigate Them

No barriers.



Human Resources:



Human Resources Report FY 22-23

NEW HIRE SUMMARY

NEW EMPLOYEES	July	August	September	October	November	December	January	February	March	April	May	June	TOTAL	%
Administration	0	1	0	0	0	0	0	0	0	0	0	0	1	16.7%
Consumer Affairs	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
Contracts	1	1	0	0	0	0	0	0	0	0	0	0	2	33.3%
Community Managers/ Housing/ Special Projects	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
Finance	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
HR	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
IT	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
NDCS	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
QI/Risk	0	1	1	1	0	0	0	0	0	0	0	0	3	50.0%
TOTAL	1	3	1	1	0	0	0	0	0	0	0	0	6	100.0%

SEPARATION REPORT

WORKFORCE SIZE	July	August	September	October	November	December	January	February	March	April	May	June	TOTAL	%
Number of Employees (Average)	51	46	46	46	0	0	0	0	0	0	0	0	47	
TOTAL SEPARATED														
Involuntary	6	0	0	0	0	0	0	0	0	0	0	0	6	
Voluntary	0	2	1	1	0	0	0	0	0	0	0	0	4	
Total Separated	6	2	1	1	0	0	0	0	0	0	0	0	10	
Percent of Workforce	11.8%	4.3%	2.2%	2.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	21.2%	
DETAIL														
Terminated	6	0	0	0	0	0	0	0	0	0	0	0	6	60.0%
Moved	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
New Opportunity	0	2	0	0	0	0	0	0	0	0	0	0	2	20.0%
Retired	0	0	1	0	0	0	0	0	0	0	0	0	1	10.0%
Other	0	0	0	1	0	0	0	0	0	0	0	0	1	10.0%
TOTAL	6	2	1	1	0	0	0	0	0	0	0	0	10	100.0%
DEPARTMENT														
Administration	0	0	1	0	0	0	0	0	0	0	0	0	1	10.0%
Consumer Affairs	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
Contracts	1	0	0	0	0	0	0	0	0	0	0	0	1	10.0%
Community Managers/ Housing/Special Projects	0	2	0	0	0	0	0	0	0	0	0	0	2	20.0%
Finance	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
HR	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
IT	4	0	0	0	0	0	0	0	0	0	0	0	4	40.0%
NDCS	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%
QI/Risk	1	0	0	1	0	0	0	0	0	0	0	0	2	20.0%
TOTAL	6	2	1	1	0	0	0	0	0	0	0	0	10	100.0%





Network Development and Clinical Services

CFBHN Children's Mental Health (CMH) System of Care Data Summary

During this reporting period, CFBHN continued providing technical assistance and guidance to Network Service Providers (NSP) on early identification of cases with high utilization through further training of the Youth At Risk Models for each circuit and continues to encourage the utilization of wraparound and agency wraparound certification. In addition, CFBHN conducted five trainings focused on children system of care with emphasis on wraparound this reporting period.

Data Summary

During this reporting period, the CFBHN Children's Mental Health (CMH) Team processed 11 Children Specific Staffing Team (CSST) applications for mental health residential treatment. Of the 11 applications received, 1 application had prior mental health residential placement and was considered for readmission. Of the applications, 3 applications underwent the CSST staffing process and were submitted for Statewide Inpatient Psychiatric Program (SIPP) review. In addition, the CMH Team participated in 19 Critical Case Staffings and 20 Youth-At-Risk Staffings. Of the 19 Critical Case Staffings, 2 youth were sheltered as a result.

Summary of Data

This reporting period displayed a decrease in the amount of high risk youth being considered for readmission to mental health residential treatment (1 out of 11). In addition, 17 of 19 high risk youth were diverted from entering child welfare during the critical case staffing calls. CFBHN CMH Team continues to assist the community in all 5 circuits with diversion of high risk youth into deeper end systems of care.

Summary of barriers/ issues and strategies to mitigate Long wait lists for Statewide Inpatient Psychiatric Program and Therapeutic Group Home Referrals. CFBHN CMH Team continues to maintain ongoing communications with contracted providers serving children with significant behavioral and emotional disturbances to assist with coordination of care needs thru the utilization of Microsoft Teams and other communication strategies.

Child Welfare/Behavioral Health Integration Summary **Hurricane Ian**

All Behavioral Health Consultant (BHC), Family Intensive Treatment (FIT), and Family Intervention Specialist (FIS) programs are operational, and FIT and FIS programs have contacted and accounted for all clients. CFBHN continues to monitor coverage, support needs, and assist with communications between the SunCoast Regional Office, child welfare teams that are assisting DCF Service Centers impacted by the storm, and Network Service Providers (NSPs).



Local Systems Integration

CFBHN facilitates Behavioral Health Integration (BHI) Workgroups with Community-Based Care (CBC) lead agencies, Network Service Providers (NSP's) with programs for child welfare-involved parents and caregivers with substance use or co-occurring disorders, the regional Office of Child and Family Well-Being (OCFW), the regional Office of Substance Abuse and Mental Health (SAMH), and stakeholders. Meetings occur at least quarterly in each circuit. The Circuit 13 workgroup continues to meet monthly during the Children's Network of Hillsborough's transition as the new CBC lead agency.

Regional meetings continue to occur monthly for each BHI program. A joint meeting is planned for February in order to increase collaborative efforts between FIT, FIS, and BHC's and to workshop success stories for dissemination.

Family Intervention Services (FIS)

FIS teams engage child welfare-involved families in substance abuse or co-occurring behavioral health treatment and prevent out-of-home placements, where appropriate, by providing outreach, assessment, intervention, case management, and linkage to treatment services.

FIS referrals increased 11 percent during the first quarter of Fiscal Year (FY) 2022-2023 compared to the previous quarter. Areas affected by Hurricane Ian show a decrease in referrals following the storm.

FIS Referrals Received	CBHC-Charlotte	CBHC-Lee	Centerstone-Manatee	COVE-Hillsborough	DLC-Collier	FSOS-Sarasota	OPAR-Pinellas	TCHS-Polk, Highlands, Hardee
Jul-22	16	27	43	78	15	40	7	31
Aug-22	20	20	62	93	20	41	9	52
Sep-22	17	21	47	65	8	28	12	19
Oct-22	9	18	55	62	13	33	5	31
Total	62	86	207	298	56	142	33	133

The table below summarizes regional **FIS program conversion activities that cover referrals in each month**. Conversions are the number of referrals that result in client contact, a completed client assessment, treatment recommendations, and the first treatment appointment attended within 30 days. Each of these activities is sequential, and clients must complete one stage in order to count in the next. Activities are reported by the month in which a client's program referral was originally received. For this reason, it is important to note that the most recent month reported does not fully capture client contacts, assessments, and treatment engagement, which may carry over to the following month.





FIS Conversion Summary, Combined		Number of Referrals Received	Client Contacts	Assessments Completed	Treatment Recommended	First Treatment Appointment Within 30 Days
Jul-22	Count	257	208	142	112	57
	%	--	80.9%	68.3%	78.9%	50.9%
Aug-22	Count	317	257	174	133	55
	%	--	81.1%	67.7%	76.4%	41.4%
Sep-22	Count	217	181	133	102	32
	%	--	83.4%	73.5%	76.7%	31.4%
Oct-22	Count	226	165	95	70	15
	%	--	73.0%	57.6%	73.7%	21.4%

% - Numerator equals the number of clients completing each stage. Denominator is the number of clients completing the previous stage.

Family Intensive Treatment (FIT)

FIT provides intensive team-based, family-focused, comprehensive interventions targeting high-risk families with child welfare involvement due to parental substance use and co-occurring disorders.

Teams continue to share concerns regarding staffing, increased client acuity, and drug use trends. These concerns were shared with the statewide FIT SME, and a workgroup with strong representation from the SunCoast Region will convene after January 1 to review for potential revisions to Guidance Document 18.

FIT Enrollments through October 31, 2022:

Family Intensive Treatment (FIT) Program Enrollment Summary, Fiscal Year 2022-2023					
Provider & County	Served YTD	Annual Threshold	Percent Annual Threshold Met	Currently Enrolled	Average Needed/Month to Meet Annual Threshold
BayCare Behavioral Health - Pasco	63	165	38.18%	39	13
Directions for Living - Pinellas	38	70	54.29%	22	4
COVE - Hillsborough	38	87	43.68%	25	6

Charlotte Behavioral Healthcare - Charlotte	19	35	54.29%	7	2
Charlotte Behavioral Healthcare - Lee	35	90	38.89%	17	7
Centerstone - Sarasota	0	23	0.00%	0	3
Centerstone - Manatee	41	82	50.00%	27	5
Peace River Center - Polk	19	48	39.58%	14	4
TOTAL	253	600	42.17%	151	43

Behavioral Health Consultants (BHCs)

BHCs assist CPIs as subject matter experts (SME) on behavioral health, substance misuse, and co-occurring disorders through consultations, brief assessments, record reviews, and joint visits.

The Office of Child and Family Wellbeing (OCFW) launched the Family Navigator (FN) initiative in Sarasota, Circuit 20, and Circuit 10. The Hillsborough County Sheriff's Office (HCSO) also launched FN in Circuit 13. NSP BHCs participate in and prioritize FN case staffings, which has significantly increased activity in those counties. Since the initiative is still in process of being fully implemented and processes vary by county/region, the BHI program manager continues to seek OCFW representation during regional BHC meetings in order to keep staff informed of expectations and processes.

The table below presents the number of activities completed by Network Service Provider (NSP) BHCs in Fiscal Year (FY) 2022-2023. Consultation requests dropped significantly in Charlotte and Lee counties during October, following Hurricane Ian. The Collier BHC position was vacant in September and October. The Highlands/Hardee BHC assisted with remote coverage until the position was filled in November.



Behavioral Health Consultants (BHC) Count of Activities - FY 2022-2023					
County & Provider	JUL	AUG	SEP	OCT	YTD TOTALS
Charlotte/DeSoto (CBHC)	134	145	126	50	455
Lee (CBHC)	118	100	65	32	315
Manatee (Centerstone)	61	80	48	68	257
Collier (DLC)	139	142	N/A	N/A	281
Sarasota (FSOS)	28	43	88	69	228
Highlands/Hardee (TCHS)	13	18	20	22	73
TOTALS	493	528	347	241	1609

FACT

Central Florida Behavior Health Network's (CFBHN) fourteen FACT teams continue to focus on priority populations as identified. Diversion from State Mental Health Treatment Facility admission and expediting discharge from for those on the State Mental Health Treatment Facility seeking placement list.

In FFY 22/23, the focus will continue on the priority populations by being responsive to state hospital discharges and increased diversion efforts. Adapting to Medicaid being a payor source for FACT has resulted in the teams needing to increase their team composition of members with full Medicaid. This has been going well since previous FFY. FACT teams nearly across the board struggle with securing licensed therapists and RN's.

ALL CIRCUITS: FACT

QUARTER ADMISSIONS= NA

FFY 22/23ADMISSIONS TOTAL = 39

QUARTER DISCHARGES=NA

FFY 22/23 DISCHARGES TOTAL= 58



FACT Admission/Discharge/Census NOVEMBER 2022 (MONTH) FEDERAL FISCAL YEAR 22/23 TOTAL					
	Circuit- 6 4 teams	Circuit- 10 2 teams	Circuit- 12 2 teams	Circuit- 13 2 teams	Circuit- 20 4 teams
Current MONTH Admissions / FFYTD 22/23 TOTAL ADMISSIONS- 4/39	3	0	0	0	1
QUARTER/FFYTD TOTAL ADMISSIONS- NA					
Current MONTH Discharges / FFYTD 22/23 TOTAL DISCHARGES- 10/58	5	2	1	1	1
QUARTER/FFYTD TOTAL DISCHARGES-					
TOTAL CURRENTLY SERVED BY FACT- 1355/1400	385/ 400	194/ 200	200/ 200	189/ 200	387/400

During and after Hurricane Ian, which struck southwest and central Florida in September 2022 was disruptive to the clients served as well as the staff. working under the conditions without power, housing or essentials everyday supplies has been challenging for the teams. All the teams have insured the clients were safe before the storm by implementing their disaster preparedness plan. Then during the storm communication was available through cell phones until power no longer permitted this. After the storms the teams insured each client was contacted and needed supplies taken to them. Continued therapeutic interventions are provided as needed to the effected clients.

Forensic

Hurricane Ian Update:

Two months after Hurricane Ian, Forensic activities have resumed their normal flow of operations. All providers are online and serving the forensic population. Court systems, jail operations and sheriff transports are also back to full functionality throughout the region.





There are currently 271 individuals throughout the state waiting for admission to the Forensic State Hospital. This is significantly less than recent numbers but remains high overall. The waitlist remains a challenge due to the backlog of admissions but progress is being made. Even though most SMHTFs continue to operate at or above capacity, staffing issues have become better and more units are opening at the facilities. Forensic Residential Providers in the community continue to work diligently diverting individuals from the SMHTF's while demand for residential placement remains high. CFBHN and DCF continue initiatives to organize strategies with community stakeholders to increase diversions, troubleshoot barriers to community placements, and increase communications across all parties. Providers throughout the region have slowly increased their forensic staff although there remain a number of vacant positions. Even after full staffing has been achieved, staff turnover remains a concern. Provider staff continue to take on multiple roles and large caseloads causing high client-to-staff ratios.

Funding for new Forensic Multidisciplinary Teams (FMT) in Pinellas and Polk counties has been approved and these teams are beginning to organize their programs. CFBHN is working closely with these two teams to help guide their integration into existing forensic programs and ensure their operating procedures are sound. The more intensive intervention provided by the FMT's will further help these two counties serve their respective communities.

Prevention

Prevention programs and coalitions work collectively with community partners to maintain engagement in substance abuse prevention education. Many partners include local businesses, healthcare providers, law enforcement, medical services, faith-based leaders and organizations, community-based care providers, food and nutrition services, housing/shelter, senior centers, and schools.

The CFBHN Senior Program Manager of NDCS and VP of NDCS is currently interviewing for a Prevention Program Manager after the previous Prevention Program Manager resigned during this reporting period.

Prevention partners and drug free coalitions (NSPs) continue to implement evidence-based programs and practices in their respective communities. Educating and raising awareness of the prevention of substance abuse in schools and communities.





Healthy Transitions:

The Florida Healthy Transitions Program through Success For Kids and Families for Hillsborough County continues to implement its peer-to-peer service delivery model when providing and coordinating behavioral health and related services for youth and young adults between the ages of 16-25. The goal of the program is to use youth voice and choice as the foundation of all services provided. During this reporting period, Success For Kids and Families continued to focus on tutoring and employment assistance training and is identifying additional ways to engage young adults in transitional services. There continues to be an increase in Healthy Transitions (HT) referrals this reporting period and Healthy Transitions shared success stories during 5 circuit trainings focused on wraparound during this reporting period.

Care Coordination

1. Access to Care

CFBHN Utilization/Care Managers continue to assist all providers with bed searches for bed-based services and, as a result, days waiting for Substance Abuse residential services remain minimal at this time. The SAMH waitlist went live in the Carisk system on November 1, 2022 and providers are able to enter clients onto the waitlist if they have a demographic in the Carisk system. Providers are still able to alert the UM team of clients waiting for services using prior manual methods on an as needed basis. The UM team has advised providers to work with their internal IT departments to resolve any existing issues with the submission of client demographics.

Most individuals waiting for services are children waiting for CAT team services. While CAT teams have expanded in the region, providers continue to report difficulties staffing programs due to hiring challenges. Programs that are staffed report that referrals continue to exceed ability to serve at this time.

CFBHN works continually with providers to improve wait list reporting of all DCF funded services. The UM team is currently working with room and board providers to finalize a single universal referral form to expedite the referral process for potential admissions to this level of care. For Adult Substance Abuse providers across the region, the UM team continues to utilize a single universal substance abuse treatment provider referral form, which streamline the referral process and has reduced the amount of time from bed offer to completion of clinical review and determination.





Hurricane Ian:

- The region had one Adult Substance Abuse Residential program that needed to close following Hurricane Ian. This program has recently re-opened and is accepting referrals for potential clients.
- As of this time, SalusCare CSU remains closed to new admissions due to needed repairs resulting from the storm's impact on the CSU building. SalusCare is collaborating with community providers on strategies for managing Baker Act petitions. CFBHN is working with community hospital providers to assist as much as possible with locating placements for persons in need of Baker Act admissions. Nearby community providers are actively stepping in to assist with accepting admissions whenever possible.

2. Care Coordination

The UM team continues to work with CARISK to utilize the bed day reporting system and other reporting functions to identify eligible persons. While the UM team continues to work to streamline these processes, providers continue to monitor their admissions for eligible individuals to Care Coordination services are offered to anyone who meets criteria as set forth in DCF Guidance Document 4.

For FY 22/23, 341 total clients have been served in Care Coordination. There are currently 181 individuals actively being served in Care Coordination as of 11/1/22. Numbers served decreased slightly in October 2022. The UM team continues to collaborate with providers on the development of Children's Care Coordination. During FY 22/23, a total of 46 children were served as of 11/1/22. During September and October, CFBHN Children's Care Coordination providers served 27 children per month. The UM team continues to facilitate the identification of individuals eligible for Care Coordination and continually addresses engagement efforts with providers to help increase numbers served.

CFBHN Utilization/Care Managers and network providers meet routinely and work together to explore treatment and resource needs for persons who readmit to acute care and engage other community resources and providers as needed to support those efforts. SAMH Transition Voucher funds for FY 22-23 have been allocated and are being utilized to assist with care coordination resource needs. Additional non-recurring Managing Entity Substance Abuse Transitional Voucher funds are also being utilized for Substance Abuse Care Coordination clients which will be available through the remainder of the fiscal year and will help provide additional support for basic needs.





Children's Care Coordination has continued implementation across 4 providers: BayCare Pasco, Success 4 Kids, Centerstone, and Directions for Living. CFBHN UM staff and the VP of NDCS continue to collaborate with these providers to continue the launch of Children's Care Coordination to provide additional supports and help improve outcomes for children and adults who meet criteria for MHCAS eligibility as set forth in Guidance Document 4.

Hurricane Ian: CFBHN continues to work with all of our providers to explore options and additional resources as needed for persons impacted by Hurricane Ian.

NDCS Special Projects Updates

1. First Episode Psychosis (FEP) Program/Healthy Minds (HM)

Success 4 Kids and Families (S4KF) runs the Early Intervention Services – Psychotic Disorders program (also known as the First Episode Psychosis (FEP) program or Healthy Minds (HM)) for clients in Hillsborough County, Peace River Center for Pasco County, and David Lawrence Center for Collier County which focuses on youth/young adults who experience a first episode of psychosis. Ongoing consultation/support calls continue to occur with OnTrackNY, including monthly team case consultation, bi-monthly role-specific consultation and management planning meetings. The Healthy Minds teams continue to develop and maintain referral pathways with a variety of mental health and community providers, offering information and education on Healthy Minds' services. During this reporting period, CFBHN and CFBHN contracted FEP providers are currently working together on providing feedback to DCF on needs/gaps and opportunities for program enhancements regarding the FEP program in the state.

2. SOR (Statewide Opioid Response)

Through federal and state funding, CFBHN continues working 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/10 region (ACTS – Tampa General & St. Joseph's Hospital, Baycare Behavioral – Morton Plant North Bay, David Lawrence Center – NCH Healthcare & Physicians Regional, COVE – Tampa General, Operation PAR – St. Anthony's & Lee Health, Tri-County Human Services – Bartow/Winter Haven Regional, Lakeland Regional, & Lake Wales/Davenport). The Hospital Bridge programs, like many, are experiencing some challenges in staffing throughout the region.



3. **HB945** CFBHN continued to update community stakeholders on status of HB 945 during alliance meetings and other community meetings such as Regional Councils. CFBHN continued to place an emphasis on wraparound and other children system of care improvements included in the HB 945 plan. Continued updates are being provided to FAME to include barriers and opportunities.
4. **SEN/NAS**
CFBHN currently has one SEN/NAS program with First Step of Sarasota in Sarasota County. Program began taking clients in October of 2021 and continue to build caseloads. Additionally, CFBHN is collaborating with DCF and TriCounty Human Services in a startup SEN/NAS program in Circuit 10. This program is in the beginning stages and is currently working on coordinating with DCF a Referral Process to begin taking on clients.

Communications

Community

- Continue to support community activities, virtual and in space, with social media and website postings

Legislative/Elected Officials/Community

- Community managers and Leadership Team attending Legislative Delegation meetings and supporting local provider requests

Workshops/Award Recognitions/Other

- Presented online workshop on Diversity, Equity and Inclusion to National Association of Social Workers
- Participated in the Tampa Bay Times Best Places to Work survey
- Selected to be a poster presenter at National Council Conference 2023
- Received \$10,000 Pharma Grant for communications activities

Press & Media

- Used additional funds for December-end Jan 2023 media campaign to support “Talk. They Hear You” and mention Provider Coalitions by name
- Monthly interviews discussing comprehensive “Talk. They Hear You” Prevention campaign with radio personalities Queen B and Ronnie Lane continue. Distribution via IHeart and CFBHN social media accounts. Posted on CFBHN website. They are performing well.





- Secured two NBC interview time slots for Giving Day December 16
- Secured Bayside Show CW44 interview for January 2023
- Secured interview shows (various) through NBC – both Spanish and English
- Sent out press regarding Hurricane Ian donation activities
- Modified TV and radio spots following Hurricane Ian to be sensitive to issues (to include suicide 988 line) and reworked creative for “Talk They Hear You” in light of the devastation experienced in south counties

Website

- Regular postings and updates as requested
- Working on new build for Consumer & Family Affairs tab to meet Recovery goals

Video Production

- This will commence in 2023 with grant from Pharma and Tampa Bay Lightning Foundation. Anticipate producing 3-4 video stories

Print Communication

- Completion of annual report in December

Other

- Participating in and supporting CFBHN internal Diversity effort with committee and quarterly newsletter
- Participate in weekly FAME calls
- Participate in monthly Contract meeting call with DCF
- Fielded inquiries and routed to appropriate departments from social media and website
- Submitted a grant to Florida Blue Foundation to fund DEI Director position (this was not funded)
- Constant Contact emails to support significant dates and announcements
- Participated in quarterly Prevention call
- Trained to input data for prevention media performance into state system and will be assuming those duties moving forward





Social Media

Social media continues to perform well

The following metrics were achieved:

Meta (Facebook)

Likes:	3,378 (up 157)
Followers	3,691
Nov-Dec Post Reach	62,716 (up 25.7%)
Nov-Dec Post engagement	5,445

Top performing post during the period was regarding the ROC (Recovery Operations Center). The post reached 644% more people (461) than median post (62) and received 1,650% more reactions.

LinkedIn

- Posting 1x per week

Instagram

- Reach 11,234 with 177 followers

Note: The social media platforms used by CFBHN are reaching people at a consistently high rate. Engagement is also meeting or exceeding expectations across the above mentioned platforms.



Continuous Quality Improvement Monthly Report FY 22-23

As of 11/30/22

1. Network Service Provider (NSP) MONITORING STATUS

CA = Corrective Action AOC = Area of Concern

Provider Monitoring Status Summary		FY 19-20		FY 20-21		FY 21-22		FY 22-23	
ANNUAL REVIEW PHASE:		Count	%	Count	%	Count	%	Count	%
Not Yet Started		0	0%	0	0%	0	0%	40	71%
Monitoring In-Progress		0	0%	0	0%	0	0%	4	7%
FOLLOW-UP PHASE:									
Follow-Up Required - CA or AOC		0	0%	0	0%	2	4%	1	2%
Follow-Up Required - NO SAMPLE		0	0%	0	0%	1	2%	3	5%
REVIEW COMPLETE:									
Annual Complete - NO CITED CAs/AOCs		24	42%	3	6%	4	8%	0	0%
Follow-Up Complete - NO SAMPLE		7	12%	18	33%	14	26%	0	0%
Follow-Up Complete - CAs/AOCs RESOLVED		18	32%	14	26%	12	23%	0	0%
Follow-Up Complete - UNRESOLVED CAs/AOCs		8	14%	8	15%	8	15%	0	0%
Follow-Up Waived - TERMINATION/HURRICANE		0	0%	2	4%	5	9%	0	0%
EXEMPT From Review		N/A	--	9	17%	7	13%	8	14%
TOTAL		57	100%	54	100%	53	100%	56	100%

2. NSP Monitoring LEVEL OF REVIEW

	FY 19-20	FY 20-21	FY 21-22	FY 22-23
FULL Monitorings	28	13	15	30
LIMITED Monitorings	17	29	20	13
COALITION Monitorings	11	2	9	1
BASELINE Monitorings	1	1	2	4
Coalitions/NSPs EXEMPT from Monitoring		9	7	8
TOTAL	57	54	53	56

3. NSP Monitoring - COUNT OF CITED CAs/AOCs

COUNT OF	FY 19-20	FY 20-21	FY 21-22	FY 22-23
CORRECTIVE ACTIONS	55	60	69	1
AREAS OF CONCERN	21	8	6	0
COMMENDATIONS	6	5	3	0

4. NSP MONITORING RESULTS

COUNT OF CAs/AOCs	FY 19-20		FY 20-21		FY 21-22		FY 22-23	
	CAs	AOCs	CAs	AOCs	CAs	AOCs	CAs	AOCs
Issued at Annual Monitoring	55	21	55	5	68	6	1	0
Issued at Follow-Up			5	3	1	0	0	0
TOTAL	55	21	60	8	69	6	1	0
Follow-Up WAIVED (Contract Termination or Program Restructure)	0	0	2	0	1	0	0	0
Follow-Up WAIVED Until Next FY					12	0	0	0
CAs Converted to AOCs at Follow-Up							0	0
AOCs Converted to CAs at Follow-Up							0	0
Converted at Follow-Up (Net Total)	-4	4	-2	2	-3	3		
REVISED TOTAL	51	25	56	10	53	9	1	0
Unable to Assess - NO SAMPLE	4	3	8	1	6	2	0	0
RESOLVED at Follow-Up	43	15	38	7	31	3	0	0
UNRESOLVED at Follow-Up	4	7	10	2	8	0	0	0
PENDING RESULT	0	0	0	0	8	4	1	0
Percent of CAs & AOCs UNRESOLVED at Follow-Up (UNRESOLVED CAs + AOCs/REVISED TOTAL CAs + AOCs)	14.5%		18.2%		12.9%		0.0%	

5. NSP Monitoring ANNUAL MONITORING RESULT SUMMARY, BY TOOL, FY 22-23

Corrective Action (CA) - Area of Concern (AOC) - Commendation DETAIL

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%
CARF Unaccredited Standards	0	0.0%	0	0.0%	0	0.0%
CAT	0	0.0%	0	0.0%	0	0.0%
Care Coordination	0	0.0%	0	0.0%	0	0.0%
Coalition Compliance	0	0.0%	0	0.0%	0	0.0%
Client Financial	0	0.0%	0	0.0%	0	0.0%
Client Trust Fund	0	0.0%	0	0.0%	0	0.0%
Crisis Stabilization Unit (CSU)	0	0.0%	0	0.0%	0	0.0%
Data Access	0	0.0%	0	0.0%	0	0.0%
Deaf & Hard-of-Hearing (Plan & Services)	0	0.0%	0	0.0%	0	0.0%
Drop-In Program	0	0.0%	0	0.0%	0	0.0%
Employee Verification	1	100.0%	0	0.0%	0	0.0%
FACT (Administrative & Program)	0	0.0%	0	0.0%	0	0.0%
FIT	0	0.0%	0	0.0%	0	0.0%
Forensic	0	0.0%	0	0.0%	0	0.0%
HIV	0	0.0%	0	0.0%	0	0.0%
Indigent Drug Program	0	0.0%	0	0.0%	0	0.0%
Incidentals	0	0.0%	0	0.0%	0	0.0%
Mental Health	0	0.0%	0	0.0%	0	0.0%
Mental Health Clubhouse	0	0.0%	0	0.0%	0	0.0%
Mental Health - Residential	0	0.0%	0	0.0%	0	0.0%
Outreach	0	0.0%	0	0.0%	0	0.0%
PATH	0	0.0%	0	0.0%	0	0.0%
Prevention (Block Grant and PPG)	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%
SOR (Program and Prevention)	0	0.0%	0	0.0%	0	0.0%
TANF	0	0.0%	0	0.0%	0	0.0%
Training and Reference*	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	1	100.0%	0	0.0%	0	0.0%

FY 21-22 Counts		
CA	AOC	Comm
3	0	0
0	0	0
0	1	0
2	0	0
2	0	1
2	1	0
2	0	0
3	0	0
0	0	0
0	0	0
10	0	0
1	1	1
1	0	0
23	0	0
2	1	0
0	0	0
3	1	0
1	0	0
1	0	0
2	0	0
1	0	0
0	0	0
0	0	0
2	0	0
0	0	0
2	0	0
2	1	0
0	0	0
3	0	0
0	0	0
-	-	-
0	0	0
1	0	1
69	6	3

* New tool for FY 22-23

Other Updates

1. CQI Goals - FY 22-23

- A. Work with platform administrators to create and customize data reports for use during the monitoring process.

Update: The CQI team has been trained by Carisk administrators on the use of the 'Report Builder' feature of the platform. This will allow CQI staff to be able to create and pull any data necessary to conduct a scheduled monitoring.

- B. Adapt monitoring procedures and timelines to accommodate the needs of NSPs affected by Hurricane Ian, other natural disasters, or unforeseen circumstances that significantly impact the organization's ability to deliver funded services.

Update: Monitoring follow-ups, scheduled to take place in October/November, 2022, with NSPs impacted by the storm, were postponed. Follow-ups with these agencies will be conducted at the time scheduled to complete their monitoring for FY 22-23.

Program and facility closures will be considered on an individual basis as plans for monitoring in FY 22-23 are made.

2. Compliance Issues

There are no compliance issues to report at this time.

3. Upcoming Board CQI Committee Meeting

The next Board CQI Committee is scheduled for February 16, 2023 at 11:00 a.m.

RISK MANAGEMENT Monthly Report (As of 11/30/2022)

1. Count of Subcontractor Incident Reports Received

Incident Type	July 2022	Aug 2022	Sept 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	June 2023	Year-to-Date	Average Number of Reports per Month	% Change - Current vs. Previous Year
3-Hour (Phone) Notification															
Child on Child Sexual Abuse	1	0	2	2	2	0	0	0	0	0	0	0	7		
Client Death	18	15	11	18	22	0	0	0	0	0	0	0	84		
Media Event	0	0	0	0	0	0	0	0	0	0	0	0	0		
Sexual Abuse/Sexual Battery	2	0	0	0	0	0	0	0	0	0	0	0	2		
24-Hour (RL6) Notification															
Child Arrest	0	1	0	1	0	0	0	0	0	0	0	0	2		
Elopement	7	4	6	5	6	0	0	0	0	0	0	0	28		
Employee Arrest	1	1	2	1	0	0	0	0	0	0	0	0	5		
Employee Misconduct	2	2	3	2	1	0	0	0	0	0	0	0	10		
Missing Child	0	1	0	0	0	0	0	0	0	0	0	0	1		
Security Incident/Unintentional	0	0	0	0	0	0	0	0	0	0	0	0	0		
Significant Injury to Client	3	1	1	3	2	0	0	0	0	0	0	0	10		
Significant Injury to Staff	0	1	0	0	0	0	0	0	0	0	0	0	1		
Suicide Attempt	3	7	0	2	6	0	0	0	0	0	0	0	18		
Other:															
Admission/Assess Emergencies	3	1	0	0	1	0	0	0	0	0	0	0	5		
Bomb/Biological/Chemical Threat	0	0	0	0	0	0	0	0	0	0	0	0	0		
COVID-19 (Reported to DCF)*	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	1	0	1	0	0	0	0	0	0	0	0	0	2		
No Other Category	5	4	14	6	8	0	0	0	0	0	0	0	37		
TOTAL	46	38	40	40	48	0	0	0	0	0	0	0	212	42.4	-10.4%
FY 21-22*	46	80	57	55	43	43	42	42	42	46	38	34	568	47.3	
FY 20-21*	80	45	42	48	35	53	49	53	56	60	52	60	633	52.8	
FY 19-20*	49	45	42	42	30	55	52	46	53	67	50	81	612	51.0	
3-Year Average, by Month	58.3	56.7	47.0	48.3	36.0	50.3	47.7	47.0	50.3	57.7	46.7	58.3			

* In August 2020, DCF updated their guidance on the reporting of COVID-19 incidents through the IRAS system. In light of that guidance, COVID-19 reports made by Network Service Providers are documented and tracked as 'Information Only,' and submitted to the DCF via IRAS only if the report involves the media, or has the potential to gain media attention.

2. Timeliness of Incident Reports - 24-Hour RL6 Notification

		FY 19-20		FY 20-21		FY 21-22		FY 22-23	
		Count	%	Count	%	Count	%	Count	%
From Providers to CFBHN	On-Time	586	95.8%	617	97.5%	539	94.9%	203	95.8%
	Late	26	4.2%	16	2.5%	29	5.1%	9	4.2%
	TOTAL	612	100.0%	633	100.0%	568	100.0%	212	100.0%
From CFBHN to DCF (IRAS)		Count	%	Count	%	Count	%	Count	%
	On-Time	583	95.3%	625	98.7%	565	99.5%	211	99.5%
	Late	29	4.7%	8	1.3%	2	0.4%	1	0.5%
	N/A*	--	--	--	--	1	0.2%	0	0.0%
	TOTAL	612	100.0%	633	100.0%	568	100.0%	212	100.0%

*N/A refers to incident reports made by a CFBHN project that does not require DCF notification.

3. Client Manner of Death Summary

	FY 19-20			FY 20-21			FY 21-22			FY 22-23		
	Count	%	Per 1000*	Count	%	Per 1000*	Count	%	Per 1000*	Count	%	Per 1000*
Accident	19	7.9%	0.2	14	4.8%	0.1	10	4.5%	0.1	2	2.4%	0.0
Accident - Overdose	55	22.9%	0.5	77	26.3%	0.7	54	24.5%	0.6	10	11.9%	0.2
Homicide	6	2.5%	0.1	5	1.7%	0.0	2	0.9%	0.0	1	1.2%	0.0
Natural Death	81	33.8%	0.7	93	31.7%	0.9	63	28.6%	0.7	23	27.4%	0.5
Suicide	27	11.3%	0.2	21	7.2%	0.2	11	5.0%	0.1	3	3.6%	0.1
	Gunshot - 7			Gunshot - 2			Gunshot - 3			Gunshot - 1		
	Jumped - 2			Jumped - 3			Jumped - 0			Jumped - 1		
	Hanging - 11			Hanging - 11			Hanging - 5			Hanging - 1		
	Overdose - 5			Overdose - 4			Overdose - 2			Overdose - 0		
	Other - 2			Other - 1			Other - 1			Other - 0		
Undetermined	3	1.3%	0.0	1	0.3%	0.0	4	1.8%	0.0	0	0.0%	0.0
Unknown	49	20.4%	0.4	82	28.0%	0.8	63	28.6%	0.7	15	17.9%	0.3
Pending				0	0.0%	0	13	5.9%	0.2	30	35.7%	0.6
TOTAL	240	100.0%	2.1	293	100.0%	2.8	220	100.0%	2.5	84	100.0%	1.7

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

4. Count of Subcontractor Incidents per Level of Care

	FY 19-20		FY 20-21		FY 21-22		FY 22-23	
	Count	%	Count	%	Count	%	Count	%
Care Coordination	5	0.8%	6	0.9%	3	0.5%	4	1.9%
Case Management	30	4.9%	53	8.4%	38	6.7%	12	5.7%
CAT Team	0	0.0%	2	0.3%	8	1.4%	2	0.9%
Crisis Stabilization Unit	97	15.8%	103	16.3%	102	18.0%	33	15.6%
Detox	16	2.6%	23	3.6%	28	4.9%	14	6.6%
Drop-In/Mental Health Clubhouse	13	2.1%	8	1.3%	9	1.6%	4	1.9%
FACT/Forensic	64	10.5%	57	9.0%	40	7.0%	23	10.8%
FIT/FIS	1	0.2%	2	0.3%	2	0.4%	0	0.0%
Medical Services	10	1.6%	3	0.5%	9	1.6%	9	4.2%
Methadone	13	2.1%	0	0.0%	0	0.0%	0	0.0%
Outpatient	137	22.4%	149	23.5%	119	21.0%	39	18.4%
Residential	144	23.5%	125	19.7%	109	19.2%	40	18.9%
SIPP/Therapeutic Group Home	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Supported Employment/Housing	12	2.0%	22	3.5%	37	6.5%	7	3.3%
Not Applicable	37	6.0%	44	7.0%	21	3.7%	6	2.8%
Other	33	5.4%	36	5.7%	43	7.6%	19	9.0%
TOTAL	612	100.0%	633	100.0%	568	100.0%	212	100.0%

5. Subcontractor Incident Rates per 1000 Served

	FY 19-20		FY 20-21		FY 21-22		FY 22-23	
	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	11	0.1	10	0.1	15	0.2	7	0.1
Client Death	240	2.1	293	3.0	220	2.5	84	1.7
Media Event	9	0.1	7	0.1	9	0.1	0	0.0
Sexual Abuse/Battery	16	0.1	11	0.1	9	0.1	2	0.0
24-Hour (RL6) Notification								
Child Arrest	1	0.0	3	0.0	1	0.0	2	0.0
Elopement	105	0.9	93	0.9	73	0.8	28	0.6
Employee Arrest	6	0.1	11	0.1	8	0.1	5	0.1
Employee Misconduct	30	0.3	35	0.4	27	0.3	10	0.2
Missing Child	5	0.0	3	0.0	3	0.0	1	0.0
Security Incident - Unintentional	0	0.0	2	0.0	3	0.0	0	0.0
Significant Injury to Client	19	0.2	18	0.2	20	0.2	10	0.2
Significant Injury to Staff	11	0.1	9	0.1	2	0.0	1	0.0
Suicide Attempt	42	0.4	52	0.5	42	0.5	18	0.4
Other:								
Admission/Assess Emergencies			8	0.1	15	0.2	5	0.1
Biological/Chemical Threat	1	0.0	1	0.0	2	0.0	0	0.0
COVID-19 (Reported to DCF)	94	0.8	30	0.3	35	0.4	0	0.0
Human Acts	1	0.0	0	0.0	0	0.0	0	0.0
Vandalism/Theft/Damage/Fire	4	0.0	1	0.0	1	0.0	2	0.0
Visitor Injury or Death	0	0.0	1	0.0	2	0.0	0	0.0
No Other Category	17	0.1	45	0.5	81	0.9	37	0.8
TOTAL	612	5.4	633	6.4	568	6.6	212	4.3

*The 'Rate per 1000 Served' has been calculated on the data available at the time this report was compiled.

6. File Reviews - MONTHLY Summary

	July 2022	Aug 2022	Sept 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	June 2023
File Reviews Carried over from Previous Period	2	2	2	3	3							
New Files Referred for Review	0	0	1	0	0							
FILES FOR REVIEW	2	2	3	3	3							
Full File Review Not Required	0	0	0	0	0							
Unable to Complete*	0	0	0	0	0							
File Reviews Completed	0	0	0	0	0							
FILE REVIEWS IN PROGRESS	2	2	3	3	3							

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

7. File Reviews - ANNUAL Summary

Number of	FY 19-20	FY 20-21	FY 21-22	FY 22-23
File Reviews Carried over from Previous Period	5	5	3	2
New Files Referred for Review	43	22	17	1
FILES FOR REVIEW	48	27	20	3
Full File Review Not Required	16	9	2	0
Unable to Complete	6	1	15*	0
File Reviews Completed	21	14	1	0
FILE REVIEWS IN PROGRESS	5	3	2	3

* In FY 21-22, this total includes reviews that were: (a) Unable to be completed as a result of services funded by a source other than CFBHN; and (b) Removed from the 'file review' list due to limited staff capacity.

8. File Reviews - ANNUAL RESULT Summary

File Reviews that Resulted in:	FY 19-20	FY 20-21	FY 21-22	FY 22-23
Observations	7	11	1	0
Corrective Action	0	0	0	0

9. CFBHN Internal incidents and Events Summary (as of 11/30/2022)

INCIDENTS	FY 19-20	FY 20-21	FY 21-22	FY 22-23				
				Q1	Q2	Q3	Q4	TOTAL
Alarm issues	0	0	0					0
Building Security	0	0	0					0
Computer Security	8	2	1					0
Data Security								
Unsecured FROM CFBHN	5	13	21	8	3			11
Unsecured TO CFBHN	33	54	101	41	18			59
Other	8	9	2					0
Equipment Malfunction/Failure	5	0	1					0
Facility Issues	3	0	1					0
Infection Control	0	0	0					0
Media	1	0	0					0
Medical Emergency/Injury/Death	0	0	0					0
Property Damage	1	0	0					0
Threat to Safety	0	0	0					0
Utility Failure								
Electrical	1	0	1					0
Heating/AC	0	1	1					0
Internet	1	0	0	1				1
Telephone	0	0	0					0
Water/Plumbing	0	0	0					0
Other	2	2	5	1				1
TOTAL	68	81	134	51	21	0	0	72

EVENTS	FY 19-20	FY 20-21	FY 21-22	FY 22-23				
				Q1	Q2	Q3	Q4	TOTAL
Call to Abuse Registry	1	1	2					0
Legal Notice	6	0	0		1			1
Media Request	0	0	0					0
Public Records Request	9	10	15	3	1			4
Report to Licensing	0	0	0					0
Report to OIG	36	40	33	10	6			16
Wellness Check Request	0	1	1					0
Other	0	1	11	4				4
TOTAL	52	53	62	17	8	0	0	25