

**(1) Exhibit A, Federal Requirements**

- Continue to work with Carisk Partners to ensure data collected in the portal is complete and accurate.
- Current Block Grant funds utilization through Q4:
  - 2.3.1.1 – 100% (Prevention set aside)
  - 2.3.1.2. – 100% (HIV early inter set aside)
  - 2.3.2. – 100% (Women set aside)
  - 2.3.3. – 100% (Prevention set aside for people with psychotic disturbances, post first episode set aside)

**(2) To demonstrate compliance with the requirements of the SAPT and CMH block grants, the Managing Entity shall, on a quarterly basis report on the following activities:**

**a. Training and technical assistance:**

The following chart represents training activities related to Wraparound during the fourth quarter.

<b>Date(s) of Activity</b>	<b>Type of Wraparound Training Activity</b>	<b>County (where training occurred)</b>	<b># of Participants</b>
4/22/2019	Wraparound for Clinicians	Palm Beach	33
5/7-5/9/2019	Wraparound 101	Palm Beach	34

<b>Date(s) of Technical Assistance</b>	<b>Other Wraparound technical assistance provided</b>	<b>County (where technical assistance occurred)</b>	<b># of Participants</b>
4/8/2019	Wraparound Coaching and Technical Assistance- NAMI PBC and Federation of Families	Palm Beach	3
4/11/2019	Wraparound Coaching Documentation Review-Sinfonia	Palm Beach	4
4/19/2019	Wraparound Coaching	Palm Beach	2

	Documentation Review-Sinfonia		
5/8/2019	Wraparound Coaching-Goodwill	Palm Beach	3
5/24/2019	Wraparound Technical Assistance-Community Partners	Palm Beach	2
5/29/2019	Wraparound Technical Assistance-Multilingual	Palm Beach	3
6/3/2019	Wraparound Coaching-Sinfonia	Palm Beach	4
6/3/2019	Wraparound Coaching-Goodwill	Palm Beach	3
6/17/2019	Wraparound Coaching-Sinfonia	Palm Beach	4
6/20/2019	Wraparound Coaching-Legacy	Palm Beach	4

We have been consistently providing Wraparound 101 Training for Youth and Families and are now providing Wraparound 101 training to Care Coordinators, (Intensive) Adult Case Managers, FITT and FACT teams. We are currently using one curriculum for all populations served.

We are currently working with **fifteen** providers coaching to Wraparound certification or helping with prevention of drift of Wraparound facilitation and with family support partners/supervision. Four others are in the beginning phase of initiating coaching, as well:

- Henderson Behavioral Health (Palm Beach and Treasure Coast/Okeechobee, staff attends the Wraparound Learning Community)
- Community Partners-Parent Child Center (Staff attends the Wraparound Learning Community)
- Multilingual Psychotherapy (2 supervisors and 4 staff members are currently certified; Staff attends the Wraparound Learning Community)
- Federation of Families (all family support partner staff certified; Staff attends the Wraparound Learning Community)
- SequelCare (Palm Beach and Treasure Coast, 1 certified facilitator, no current specific plan on their part to move forward with certification, however they continue to send staff to trainings and staff attends the Wraparound Learning Community)
- Suncoast Mental Health Center, 3 certified facilitators (no current specific plan on their part to move forward with certifying internal coaches, but staff attends the Wraparound Learning Community)
- For the Children (no current specific plan on their part to move forward)
- Legacy Behavioral Health (Assessment updated and actively working towards implementation of policy and procedures and documentation, plan to go through the certification process in near future and staff attends the Wraparound Learning Community)

- Helping People Succeed (staff was sent to Wraparound 101; Supervisor recently completed the Wraparound Refresher Booster Training and desires to start coaching process. Hired a new supervisor who will attend next Wraparound 101 and become the Wraparound coach for the agency. Staff attends the Wraparound Learning Community)
- New Horizons of the Treasure Coast (Outpatient and CAT Team and Staff attends the Wraparound Learning Community)
- Counseling and Recovery Center (FITT) (Initial coaching assessment completed on 8/13/2018, Policy and procedures and documentation have been implemented, initial coaching session on 3/27/19 and Staff attends the Wraparound Learning Community)
- Sinfonia CAT Team (3 staff are close to certification and Staff attends the Wraparound Learning Community)
- Tykes and Teens (1 supervisor certified as coach and facilitator. Plan to certify more staff and staff attends the Wraparound Learning Community)
- Jerome Golden Center (Several staff and supervisors have initiated the coaching process and staff are represented at the Wraparound Learning Community).
- South County Mental Health Center (5 staff/supervisors across programs have completed the coaching process and became certified as facilitators and coaches and staff are represented at the Wraparound Learning Community).

Others who have sent staff to Wraparound 101 training and plan to begin coaching in the near future are:

- Goodwill (Youth re-entry) (Initial coaching plan developed, policy and procedures and documentation have been updated however there is no current timeframe to start the coaching process; Goodwill has recently reassessed their structure and conversations continue as to how Wraparound can help support their practices. Goodwill stated that Wraparound is in their strategic plan for the Back to the Future Program).
- Cotler Youth and Family Services (No plan has been developed to move forward with the certification process)
- New Horizons of the Treasure Coast (Care Coordinators/Adult Case Managers/Peers/Intensive Case Managers)
- Drug Abuse Foundation- (Care Coordinators/Adult Case Managers/Peers/Intensive Case Managers)

Coaching continues to occur within group Wraparound Learning Communities and at the individual level of coaching with providers. It may involve presentations, documentation review, role plays, behavioral rehearsals, and/or live/telephonic observations. Coaching also occurs through technical assistance and inter-rater reliability events.

In this fourth quarter, two case managers were certified as Wraparound Facilitators. The recently certified Wraparound facilitators are providing Wraparound at New Horizons of the Treasure Coast CAT team and Tykes and Teens. One supervisor became an internal Wraparound Coach for Tykes and Teens. By the end of the fourth quarter there were 44 certified facilitators and 18 certified active coaches in our region. For those providers using Wraparound with Care Coordination, the providers will receive continued or additional coaching to use a facilitation method.

Supervisors' System Meetings continue to be held in both Circuits with a primary goal to increase awareness and collaboration across providers and system partners. Barriers to services and efforts to eliminate waitlists are often the topic of conversation. Direct Supervisors at provider agencies and system partners discuss day-to-day integration efforts and share information about new resources.

This quarter, they were held:

Circuit 15 – 5/9/2019, 6/11/2019

Circuit 19 – 4/18/2019, 5/20/2019 (this group voted to hold meetings every other month)

Wraparound Learning Communities offered group coaching efforts, share concerns regarding Wraparound implementation and opportunities to increase certification and prevent practice drift. Representation from providers that serve children and families, adults and the SPMI populations are all represented at the meetings.

This quarter, they were held:

Circuit 15 – 6/26/2019

Circuit 19 – 6/19/2019

Combined Circuits 15 & 19 – 4/24/2019

SEFBHN has also developed an online Wraparound Toolkit for regional and statewide access and use. The toolkit has a variety of resources to help support provider and system level implementation of Wraparound and sustainability. Other toolkits were developed to assist the Wraparound Champions and supportive training. SEFBHN devoted a section on their website for housing the multiple toolkits. This quarter a Wraparound Systems toolkit was developed to support systems and other managing entities with implementation of Wraparound and sustainability. The toolkit continues to be monitored monthly and updated, as needed by a SEFBHN staff. It is available via our website at [www.sefbhn.org](http://www.sefbhn.org) under Wraparound Initiative.

### **Forensic Services**

Care Coordinators continue to assist with the Forensic Specialists and Civil Liaisons with discharge planning and placement from the civil and forensic SMHTF in Circuits 15 and 19.

- Increased meetings with the mental health service providers, re-entry service programs, housing providers, jail staff and MH court system staff has occurred. Better care coordination for the consumers has been the result.
- SEFBHN participated in the SAMHSA GAINS project to discuss Florida forensic goals (i.e. pre and post diversions from SMHTF as well as competency restoration efforts). On site meetings occurred in Gainesville and Boynton Beach.
- FACT staff, Forensic Specialists, Civil Liaisons, Care Coordinators and APD staff for C15 + C19 were trained by DCF Forensic staff member Leah Compton in April 2019 regarding the DCF definition of diversion and diversion strategies. A continued effort to educate these staff members about how to divert pre-admission and post-admission to SMHTF is ongoing.
- A review of all the current ME funded Residential beds has been done to increase forensic discharges.
- Discussed with a local homeless provider to expand bed capacity for forensic discharges in the future.
- SEFBHN continues to participate in monthly conference calls with DCF, SMHTF and ME for care coordination efforts.
- SEFBHN continues to provide technical assistance to the providers whenever there is staff turnover in the Forensic Specialist or Civil Liaison roles.

## FACT

As previously reported, SEFBHN released an RFA to solicit prospective new FACT Team providers at the end of the 3<sup>rd</sup> quarter. The decision to release a competitive solicitation was made as our on-site reviews of both existing providers revealed concerns about their adhering to the fidelity of the FACT model. One of these providers (New Horizons of the Treasure Coast – {NHTC}) actually chose not to renew their contract for FY 19/20. Henderson Behavioral Health (HBH), which was the existing provider for Palm Beach County and Psychotherapeutic Services Florida (PSF) submitted applications. HBH was selected to continue operating the Palm Beach County Team but has proposed obtaining additional training and consultation to ensure they are maintaining fidelity to the model. PSF was selected to operate the 2 teams in Indian River, Martin, Okeechobee, and St. Lucie Counties. Each provider was awarded a 3 year contract.

The SEFBHN FACT Team specialist worked very closely with PSF and NHTC to transition FACT Team members from the existing teams to the new teams. This included reviewing cases for eventual discharge to a lower level of care (ie intensive outpatient services). PSF is also looking at the residential settings for each FACT Team Member to determine if they are in the most appropriate location.

Monthly technical assistance has been offered to both providers with clear communication about the expectations for the new fiscal year.

## Children and Family Related Interventions

A SEFBHN Family Systems Manager continues to participate on the C19 Keeping Families Connected (Lock-out) Committee to reduce the number of children who are “locked out” of their homes due to their parents refusing to allow them to return home, usually following a delinquent act or mental health crisis. One Keeping Families Connected call was held this quarter. A SEFBHN Family Systems Manager participates on the C19 calls to provide care coordination services to youth and families and foster collaboration among the multiple agencies represented. Often coordination is needed after the calls to secure services for the youth and families, to refer to housing, or to remove any barriers to service needs. The goal of the Keeping Families Connected Committee along with the standard multiple partner calls is to reduce the number of children and youth going into licensed care. Through the team’s interactions with families, more high-risk youth have been able to access intensive services immediately and crises are able to be addressed from strengths-based recovery-oriented approach. This quarter SEFBHN participated in one C19 Keeping Families Connected Staffing and **this youth was diverted from out of home care.**

The SEFBHN Family Systems Managers are also identified members for the C15 Lock-out protocol. The C15 lockouts have been transitioned into the SST conference staffing per the Service Coordinator at Child Net. SST staffings allow the CBC, SEFBHN and other stakeholders to come together to brainstorm ways to divert youth from the child welfare system with combined efforts to provide community supports and services (i.e. CAT and Wraparound Case Management) via Care Coordination efforts. During this quarter, C19 Family Systems Manager attended 1 SST Staffings.

In C15 and C19, SEFBHN and the FL LINC Project partnered to implement a collaborative training with the Jerome Golden Center for Behavioral Health, South County Mental Health Center and New Horizons of the Treasure Coast. Trainings were held from April thru June, with the topic of QPR-T Advanced



**Quarterly Report**  
**For the period: April 1, 2019 – June 30, 2019**  
**Submitted: 8/16/2019**

Suicide Risk Assessment and Management Training. A total of 30 Mobile Response Team Specialists were trained in suicide intervention and risk assessment strategies. 15 CEUs were offered for the training.

SEFBHN participates in C19 Local Review Team monthly to review high risk youth cases that are involved with multiple agencies. SEFBHN worked collaboratively with Carisk Partners clinical staff to ensure the we were represented in three review teams scheduled this quarter.

SEFBHN C15 Family Systems Manager continues to participate in monthly/as needed C15 Interagency (Local Review Team) meetings hosted by ChildNet. This quarter, C15 FSM attended 3 LRT meetings. Since raising awareness of this interagency opportunity at Executive Order meetings, system partners in the Interagency agreement have decided to review this current process and realign it toward it's intended purpose. System level issues were discussed versus actual cases during the quarter, as none were raised to the team.

SEFBHN continues to participate in C15 and C19 Child Welfare and Behavioral Health Integration Meetings with DCF, CBCs and community partners to discuss Network opportunities for improvement, access issues and overall progress with programs/agencies aimed at serving the Child Welfare Population (i.e. 211 SACC Hotline; FIT Teams; CAT Teams). Additionally, workgroups were formed from the Integration Meetings to address training needs and reviewing baseline data and establishing goals within the Circuits. Shared accountability continues to be discussed among Network behavioral health providers and the Child Welfare staff as to how to get the parents to specific appointments; have them remain in treatment; and comply with case plans tasks. The training workgroup has held additional meetings throughout the quarter to work on specific tasks related to updating the Progress Exchange Form and Training needs for Child Welfare Professionals and Behavioral Health Providers. The goal of the trainings is to help each profession gain knowledge of the others function, basic concepts, and create a joint language and understanding from which to build a foundation. SEFBHN participated in both workgroup opportunities, as well.

Director of Children's System of Care participates in monthly C15 Adolescent Collaborative meetings with law enforcement (Sheriffs Behavioral Health Unit staff and School Police) as well as with Children's Services Council, ChildNet, JFK North, School district (School Safety and ESE/SEDNET staff) to discuss collaboration opportunities for high risk youth. Routine meetings in the fourth quarter were suspended while the youth were out of school but will resume in August. However, SEFBHN participated in workgroups to review the School District of Palm Beach County's Baker Act decision tree and a shared document for parents as to what the can expect when their child is Baker Acted reflecting school, hospital and community treatment and support perspectives.

This fourth quarter, SEFBHN Leadership met with the School District of Palm Beach County and Children's Services Council to discuss behavioral health services in the schools and care coordination. SEFBHN all participated in the targeted selection review process for their new Director of Mental/Behavioral Health and in the screening process of a pool of (about 300) applicants for their new 170 Behavioral Health Professional positions within the schools.

The Director of Children's System of Care also met with the School District of Palm Beach County's C.A.P.E (Crisis, Assessment, Planning and Evaluation) teams who provide a mobile response to schools to support staff and youth with behavioral health needs. Collaboration between the C.A.P.E. teams and

mobile response teams was discussed. The School District plans to add a third team before school starts in August to cover the western communities.

SEFBHN staff attends monthly School Health Advisory Council meetings in both circuits. In C15, a Mental Health Subcommittee meeting is attended to support Palm Beach County school system access to community behavioral health supports and services. Mobile Response Team and Baker Act information are routinely shared as well to identify any trends or additional supports needed at the school level. In this quarter, the Director of Children's System of Care presented on Baker Acts and Care Coordination compared to Case Management at one of the meetings in collaboration with Community Partners. C15 meetings in the fourth quarter were suspended while the youth were out of school but will resume in August. There were none held in C19 this quarter.

Additional efforts to advance behavioral health efforts for children, youth and families include:

- Data reports are run biweekly to identify families and youth who are high utilizers of acute care services and/or have child welfare involvement. Youth who are identified as High Utilizers are added to the Care Coordination Module and Family System Managers contact area Crisis Units to request relevant assessments and discharge plans to be uploaded into the Care Coordination Module. Data reports are reviewed to offer assistance/services that can bridge gaps which may be creating patterns of high utilization. Identified high-risk consumers are referred to the Coordination of Care Module for further monitoring and collaboration during transitional phases of treatment.
- Family Systems Managers continue to attend monthly Coordination of Care meetings facilitated by SEFBHN in order to address barriers around Care Coordination and collaborate to ensure continuity and fidelity to the process across all counties served.
- Family Systems Managers also met with multiple providers over the quarter to provide education and technical assistance around the Care Coordination process and module, respectively.
- Agencies within the SEFBHN Network are expected to update the Care Coordination Module for the children and families they serve that are receiving care coordination services.
- Child welfare consumers who are on the Waitlist for services are also targeted for care coordination services. Care coordination efforts at the system level are done to ensure interim services are provided to the consumers.
- Family System Manager attended Monthly Treatment Team Staffings held at SandyPines on SIPP/PRTS and Care Coordination youth.
- QPR-T (Question, Persuade, Refer and Treat) Advanced Suicide Risk Assessment and Management Training was offered to several Network Providers involved with the Mobile Response Teams this Quarter. C19 and C15 Family System Managers co-trained at Jerome Golden Center on 4.4.19, 5.31.19, 6.17.19 and 6.21.19; New Horizons of the Treasure Coast on 5.31.19. South County Mental Health Center received the training on 6.17.19. Additional trainings in the community were held for QPR-T on 5.6.19.
- QPR was also provided to community partners within our Network on these dates: 4.8.19, 5.7.19 and 5.10.19.
- Family Systems Manager attended one of the three St Lucie County Juvenile Justice Council Meetings held at Port St Lucie Police Department this Quarter. Information on our system

- level care coordination was provided during the meeting along with collaboration with the PSL PD social worker on specific cases for high risk youth.
- Family Systems Manager provided monthly technical assistance and support to the FIT Team at Counseling & Recovery Center on 6.13.19. Technical assistance was also provided to the CAT team at Sinfonia on 6.10.19. Technical assistance meetings provide an opportunity for processing and brainstorming high risk cases that have been identified by the teams in an effort to celebrate successes and formulate plans of action for the clients and families. In addition to in-person technical assistance meetings, Family System Managers also provided tele-support to both identified teams.
  - Family Systems Manager provided monthly technical assistance to the FIT Team at Henderson Behavioral Health on 4.4.19; 5.4.19; 6.13.19 and the CAT team with New Horizons of the Treasure Coast Inc on 4.5.19; 5.3.19; 6.7.19. Barriers to services are being addressed, clinical issues get resolved in terms of the process of integrating child welfare and behavioral health into the practice model, along with care coordination expectations and the COC Module.
  - C19 Family Systems Manager participated in Child Abuse Death Review (CADR) in C15 on 4.25.19; 5.23.19. C19 Family Systems Manager participated in C19 CADR on 4.25.19 and the other meetings were rescheduled until 8.22.19.
  - SEFBHN has submitted a proposal related to the use of State Opioid Response funding specifically for families in the Child Welfare System. SEFBHN has established a Substance Abuse Call Center (SACC) line through 211 to help ensure the prioritization of Child Welfare parents/caregivers within our network. The SACC line uses a calendar with available appointment times at SEFBHN providers, which allows assessments to be scheduled 24 hour/7 days a week by the CPI or DCM. While this has assisted in expediting substance abuse treatment services for families in the Child Welfare System we recognize that engagement of parents and caregivers with an Opioid Misuse Disorder can be difficult. An enhancement to this existing process will address the engagement barriers.

The enhancements will utilize the Mobile Response Teams that will be available to respond to residence of the parent/caregiver 24/7/365. The CPI or the Dependency Case Manager can call the 211 line who will dispatch the MRT to the home and then work to partner with the family on a plan to address their Opioid Misuse Disorder. The MRT will stay connected to the parent/caregiver for up to 72 hours to ensure implementation of the plan. After the initial 72 hours, the MRT may refer to the designated Child Welfare Peer Specialist for continued support, advocacy, and navigation through a warm handoff. The CPI or DCM may also directly link a parent/caregiver to the designated Child Welfare Peer Specialist for continued support, advocacy, and navigation, preferably through a face-to-face.



**b. Access to treatment for Priority populations, including capacity reports:**

**Waitlist Update 4<sup>th</sup> Quarter FY 18/19**

SEFBHN providers added 88 persons to the waitlist during the 4<sup>th</sup> quarter of FY 18-19, as shown in the following table:

<b>SEFBHN Quarter 4 FY 19 Waitlist Summary</b>	
<b>Waitlisted Individuals by Listing Provider</b>	
<b>Listing Provider</b>	<b>Distinct Count of SSN</b>
DRUG ABUSE FOUNDATION OF PALM BEACH	82
HOUSING PARTNERSHIP INC.	6
<b>Grand Total</b>	<b>88</b>

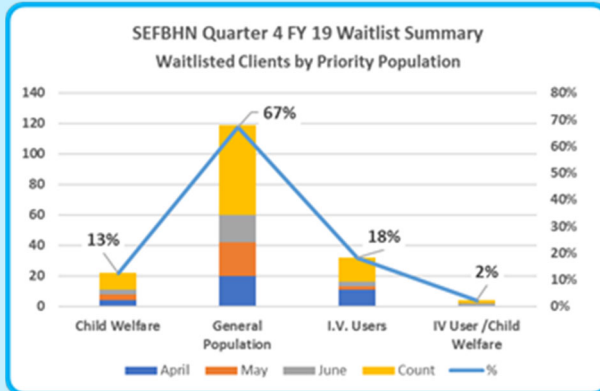
Sixty seven percent of all clients waitlisted in the 4<sup>th</sup> quarter were general population clients, in line with last quarter’s distribution. However, IV Drug Users dropped from 27% in the 3<sup>rd</sup> quarter to 18% in the fourth. Child Welfare involved clients (both with and without IV drug use) increased to 13% of the total from only 8 percent last quarter.

<b>SEFBHN Quarter 4 FY 19 Waitlist Summary</b>		
<b>Waitlisted Clients by Priority Population</b>		
<b>Priority Population</b>	<b>Count</b>	<b>%</b>
Child Welfare	11	13%
General Population	59	67%
I.V. Users	16	18%
IV User /Child Welfare	2	2%
<b>Grand Total</b>	<b>88</b>	<b>100%</b>

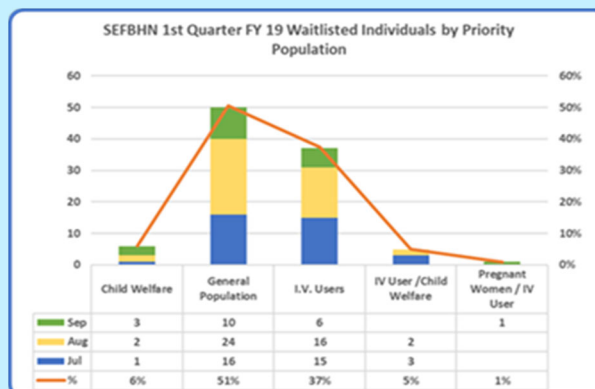
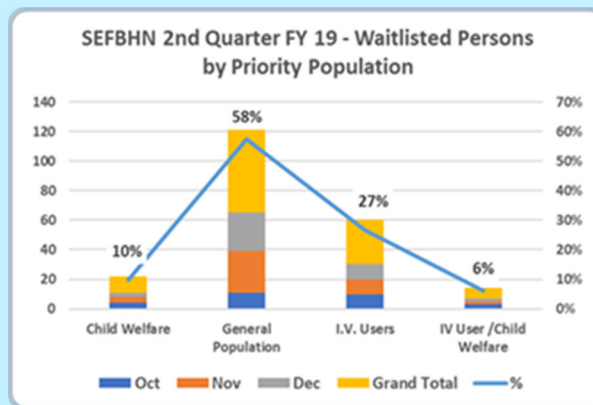
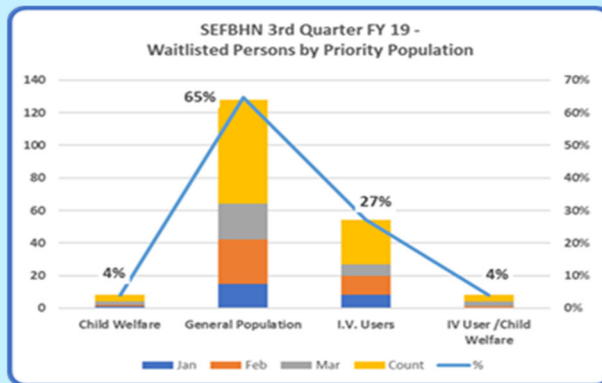
The changes and similarities in the distribution of waitlisted clients among priority populations from quarter to quarter during FY 18-19 are visually displayed in the set of figures on the following page.

Residential Level 2 services continue as the most waitlisted level of care, with Residential Level 4 and Residential Level 1 services comprising only 8% of the total as shown below.

<b>SEFBHN Quarter 4 FY 19 Waitlist Summary</b>				
<b>Waitlisted Clients by Level of Care</b>				
<b>Priority Population</b>	<b>Level of Care</b>			<b>Grand Total</b>
	<b>Residential Level 1</b>	<b>Residential Level 2</b>	<b>Residential Level 4</b>	
Child Welfare	1	10		11
General Population		53	6	59
I.V. Users		16		16
IV User /Child Welfare		2		2
<b>Grand Total</b>	<b>1</b>	<b>81</b>	<b>6</b>	<b>88</b>
<b>%</b>	<b>1%</b>	<b>92%</b>	<b>7%</b>	<b>100%</b>



**FY 18-19 Distribution of Waitlisted Individuals Among Priority Populations by Quarter**



The average length of stay on the waitlist during the 4<sup>th</sup> quarter of last fiscal year was 33 days – a 50 percent increase from the ALOS achieved in the 3<sup>rd</sup> quarter.

SEFBHN Quarter 4 FY 19 Waitlist Summary	
Average Length of Stay on Waitlist (in Days)	
Priority Population	Average Days
Child Welfare	31
General Population	37
I.V. Users	19
IV User /Child Welfare	13
<b>Grand Total</b>	<b>33</b>

Seventy one persons were removed from the waitlist in the 4<sup>th</sup> quarter of FY 18-19, with 8 of those, or 11%, receiving the services for which they were referred to the waitlist. This is significantly down from the percentages achieved in prior quarters (37% in the 3<sup>rd</sup> quarter and 70% in the second quarter) and prior years (31% in FY 18).

SEFBHN Quarter 4 FY 19 Waitlist Summary					
Reason Removed From Waitlist					
Priority Population	Not Removed	Declined	Other	Received Referred Services	Grand Total
Child Welfare	3	1	7		11
General Population	14	5	35	5	59
I.V. Users		4	9	3	16
IV User /Child Welfare			2		2
<b>Grand Total</b>	<b>17</b>	<b>10</b>	<b>53</b>	<b>8</b>	<b>88</b>

Carisk Partners and SEFBHN developed a comprehensive set of Waitlist Thresholds for all covered services to provide guidance to providers on when a client should be added to the centralized waitlist. In addition, Carisk Partners held 4 Waitlist trainings during the quarter to acclimate providers to the new FASAMS data fields in the Waitlist Chapter.

**Waitlist reduction strategies** – SEFBHN continues to proactively work with providers to ensure appropriate use of Care Coordination, utilization of Transitional Vouchers, and Peer Services to reduce the number of individuals who are on the waitlist.

**c. Peer activities:** The following information represents Peer Activities conducted by SEFBHN during the fourth quarter

- SEFBHN continues to work with the DCF QI Peer to develop a local Advisory Board.
- In April, SEFBHN along with DCF QI Peer and Peer Support Florida to conduct a ROSC monitoring of one of SEFBHN's providers. The ROSC monitoring tool was utilized and the report was sent out to provider in July.
- As part of the SOR Grant, SEFBHN and Rebel Recovery were selected to receive additional funding for the development of a Recovery Community Organization (RCO) and Community

Center. Rebel Recovery Florida, Inc. has started the process to become an CAPRSS accredited Recovery Community Organization. Rebel Recovery has also found a location for the new Recovery Community Center and is planning a fall opening. The RCO provides peer-to-peer recovery support services that are responsive to community needs, prevent recurrence of substance use and promote sustained recovery. All activities and services are led and driven by “peers” (i.e. individuals who have experienced addiction and recovery, either directly or indirectly as a family member or friend). The overall goal is to provide a safe place for recovering individuals to gather in support of one another and experience sober living in a community setting.

- SEFBHN continues to provide technical assistance in the direction in the ROSC movement and the value of creating ROSC mini coalitions within their Agencies.
- The SEFBHN conducts Peer Workgroups on a monthly basis. The groups provide information to assist the peers in pursuing their certification and also serves as a support group.

**d. Priority access to treatment for pregnant women;**

Pregnant IV drug users and pregnant drug/alcohol users continue to be prioritized for services. We work with our providers to ensure that pregnant women do not go on the waitlist.

**e. Wait list management for non-pregnant injecting drug users and all others:**

- SEFBHN staff monitor the waitlist to ensure that these priority populations are being put on the waitlist and that our providers are utilizing the waitlist appropriately. We are also encouraging providers to utilize peer services for individuals on the waitlist to keep them engaged as part of the delivery of interim services while they await placement in the appropriate level of care.
- Additional information about waitlist management is under Access to treatment for Priority populations, including capacity reports:

**f. Compliance with charitable choice provision:** There were not issues related to Charitable Choice

**g. Monitoring FY 18/19: Contract Validation On-Site visits were conducted at the following agencies during the fourth quarter**

**PTF03-1619 – Jerome Golden Center for Behavioral Health, Inc.** –The final report is pending.

**PNC25 - Father Flanagan’s Boys Town Florida, Inc.** – The final report has been sent out to the provider.

**PDA49 - The Recovery Research Network Foundation, Inc.** – The final report was sent out to the provider in the 4<sup>th</sup> quarter (a revision was sent out 1<sup>st</sup> quarter of FY 19/20).

Status of previously reported on-site validations.

**ZDA08-1619 - Public Defenders Office, Nineteenth Judicial Circuit** – The final report was sent out in the 4<sup>th</sup> quarter.

**ZNC24 - New Horizons of The Treasure Coast: (CAT Team)** – The final report was sent out in the 4<sup>th</sup> quarter.

**PDA54 - Access to Recovery Solutions, LLC** – The final report was sent out in the 4<sup>th</sup> quarter.

**LDC07-1619 - Drug Abuse Treatment Association** – The final report was sent out in the 4<sup>th</sup> quarter.

#### **h. Continuous quality improvement: (CQI)**

The following information was presented during the fourth quarter CQI meetings:

- The Treasure Coast Homeless Services Council CoC and The Homeless and Housing Alliance of Palm Beach County provided presentations on the services and resources they offer for individuals who are homeless or at risk of becoming homeless.

Anthony Arroya from The Treasure Coast Homeless Coalition shared information about the grants that they have available to assist in paying rent for an individual. Each grant has specific criteria that the recipient must meet to qualify. A coordinated Entry Assessment Process is used across the Continuum of Care on the Treasure Coast which helps to prioritize the most vulnerable households for financial assistance. Kat Hammer from the Homeless and Housing Alliance of PBC also spoke about homeless resources in Palm Beach County. Both agencies are also involved in Advocacy activities to develop additional resources for the homeless within our network.

- Lauren Odell, SEFBHN Family Care Manager provided a presentation on Treatment Planning and Trends across the network. As we are moving towards a recovery oriented system of care she emphasized the benefits of effective Collaborative Treatment Planning with the consumer. The foundations of ROSC include a person and family centered approach that is grounded in partnership and transparency.

Lauren also spent time on how to write the Problem Statement with the consumer – utilizing their words and then developing goals and objectives to address the problem identified by the consumer. Part of the presentation included an activity in which participants practiced writing Problem statements base on a scenario provided. Participants were then given the opportunity to voluntarily share what they wrote. This presentation generated good group discussion with participants offering tips and suggestions that work well for them in developing a treatment plan with the consumer.

- Lindsay Slattery-Cerny, the Regional Suicide Specialist for the Florida LINC program provided a presentation on the Zero Suicide Quality Assurance Initiative that Southeast Florida

Behavioral Health Network will be implementing. The initiative is a system-wide, organizational commitment to safer suicide care in health and behavioral health care systems. Providers identified by SEFBHN will be sent a self-study to enable them to assess internally how well they are assessing suicide risk and how they address it. After completion of the self-study, SEFBHN staff will complete an on-site visit to review results of the self-study, related policies and procedures, and random client file review. There will be a follow-up meeting with each of the designated providers to discuss findings and provide recommendations to encourage the use of ZS evidence-based practices. It was emphasized that this is not an audit – it is a quality improvement initiative. Ten SEFBHN providers have been selected for this review. The on-site visits are scheduled to take place in July and August, 2019.

- All CQI meeting agendas, power point presentations, and handouts are available on SEFBHN Board Docs at the following link:

<https://www.boarddocs.com/fl/sefbhn/Board.nsf/Public>

### **Reinvestment Grants**

SEFBHN continues to provide Program Coordination for the Indian River Reinvestment Grant which has provided funding for the expansion of the Indian River Mental Health Court System, and the Okeechobee County Reinvestment Grant which has provided funding to expand the existing Drug Court and establish a Mental Health Court.

### **Indian River County**

Mental Health Court has selected 18 clients to participate in our upcoming graduation scheduled for October 1. There was a graduation July 9 and we had 4 clients to graduate at that time.

We have had 8 clients previously enrolled in Rapid Rehousing become fully independent and are maintaining in the community well this quarter. We have had two clients approved for SSI this quarter. We continue to work with other clients in the application process and appeals.

The Transitional Houses continue to be a vital part of the program. The Men's house is full and the women's house has one client to date, due to two others transitioning out to another level of care, with others being considered. Peer Support services are in the home at least once a week and this has proven to be a vital part of the stability and overall comradery in the homes.

The Mental Health Coordinator and case manager participated in the NADCP Conference in Maryland and ORAS trainings in July and are certified on the ORAS tools. We have begun to utilize these tools in the program.

Note that the funding for this grant ends December 30, 2019. SEFBHN had applied for a subsequent Reinvestment Grant to continue the program but was not selected in the original award announcement. The Dept of Children and Families has determined that they will allow

applicants who were not selected to resubmit their applications addressing the items that were noted to be insufficient thus allowing the granting of additional funds.

### **Okeechobee County**

Okeechobee Mental Health Court has had 44 clients to date, 10 which have graduated successfully. We have had 6 clients discharged due to non-compliance and 1 pass away due to medical complications. There has only been one re-arrest with those clients and the charges were dropped. The grant has assisted 13 clients with getting access to benefits from SSI/SSDI to Food stamps and Medicaid. We have assisted 12 clients with temporary housing until stable. We have had 4 clients enter a 28 day residential treatment program. We currently have 24 clients enrolled with 8 receiving targeted case management. We have one client in residential treatment, one client receiving intensive case management and living in an assisted living facility, and one client moved to a long term care facility.

We have begun analyzing cost avoidance with Okeechobee Reinvestment grant program. This has been measured by calculating the daily cost of jail multiplies by the average # of days for a jail sentence for individuals convicted of a misdemeanor and the average # of days for jail sentence for individuals convicted of a felony. Calculations as follows:

*18 clients with Misdemeanor x average 40 days in jail x \$125.00 average cost per day =*  
**\$90,000**

*26 clients with felony charges x average 98 days in jail x \$125.00 average cost per day =*  
**\$318,500**

*44 total clients x 3,268 days x \$125.00 per day =* **\$408,550**

**We will analyze cost avoidance for Indian River beginning in FY 19/20.**

**Consumer Satisfaction Surveys:** SEFBHN staff submitted 4<sup>th</sup> quarter Consumer Satisfaction Surveys; closing out FY 18/19. A total of 661 Adult surveys were submitted with an additional 421 surveys submitted for children's services within the network.

### LOCUS 4<sup>th</sup> Quarter FY 19 Update

Six providers performed 139 LOCUS assessments on SEFBHN clients in the 4<sup>th</sup> quarter of FY 18-19. The distribution of these assessments by provider is shown in the following table:

SEFBHN 4th Quarter FY 19 LOCUS Assessments by Provider	
Provider	# of LOCUS Assessments
Behavior Basics, Inc. (BB)	7
Henderson Behavioral Health (HBH)	17
New Horizons of the Treasure Coast (NHTC)	62
South County Mental Health Center (SCMHC)	13
South Florida State Hospital (SFSH)	16
The Jerome Golden Center (JGC)	24
<b>Grand Total</b>	<b>139</b>

LOC 5, Medically Monitored Residential Services, was the recommended level of care in 25% of the assessments. LOC 3, High Intensity Community Based Services, was recommended in 23%. LOC 2, Low Intensity Community Based Services, and LOC 6, Medically Managed Residential Services, were both recommended in 19% of the assessments performed in the 4<sup>th</sup> quarter of FY 18-19. LOC 1, Recovery Maintenance and Health Management, and LOC 4, Medically Monitored Non-Residential Services, were the least recommended levels of care with 6% and 8% respectively. The following table summarizes the recommended level of care data by provider:

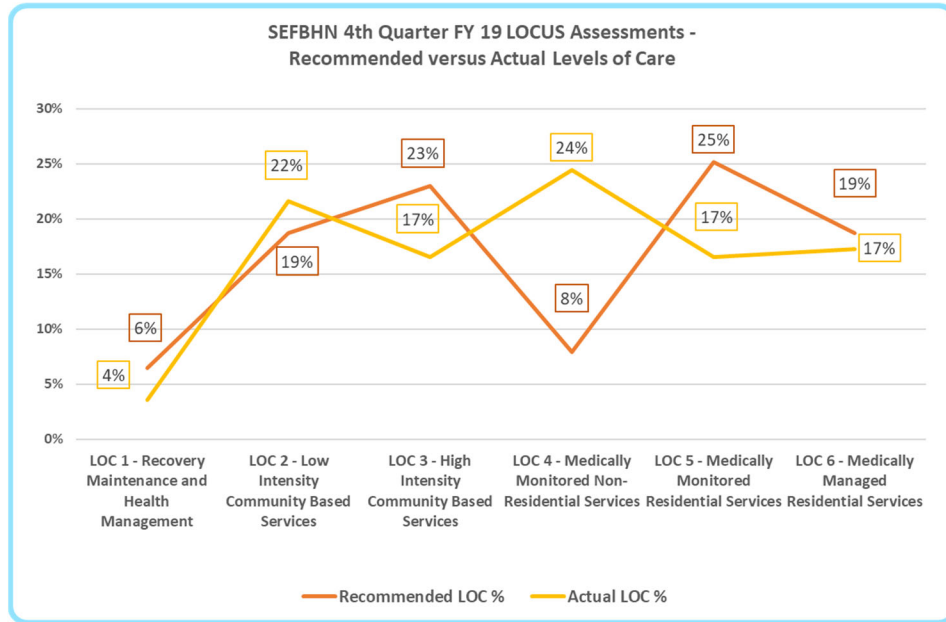
SEFBHN 4th Quarter FY 19 LOCUS Assessments - Recommended Levels of Care by Provider									
Recommended Levels of Care	BB	HBH	NHTC	SCMHC	SFSH	JGC	Grand Total	%	
LOC 1 - Recovery Maintenance and Health Management	2	2	2	3	0	0	9	6%	
LOC 2 - Low Intensity Community Based Services	1	3	10	4	6	2	26	19%	
LOC 3 - High Intensity Community Based Services	4	6	12	5	4	1	32	23%	
LOC 4 - Medically Monitored Non-Residential Services	0	0	6	1	3	1	11	8%	
LOC 5 - Medically Monitored Residential Services	0	6	18	0	1	10	35	25%	
LOC 6 - Medically Managed Residential Services	0	0	14	0	2	10	26	19%	
<b>Grand Total</b>	<b>7</b>	<b>17</b>	<b>62</b>	<b>13</b>	<b>16</b>	<b>24</b>	<b>139</b>	<b>100%</b>	

The actual levels of care for these persons are detailed in the following table:

SEFBHN 4th Quarter FY 19 LOCUS Assessments - Actual Levels of Care by Provider									
Actual Levels of Care	BB	HBH	NHTC	SCMHC	SFSH	JGC	Grand Total	%	
LOC 1 - Recovery Maintenance and Health Management	2		1	2	0		5	4%	
LOC 2 - Low Intensity Community Based Services		1	19	2	6	2	30	22%	
LOC 3 - High Intensity Community Based Services	5	3	6	4	4	1	23	17%	
LOC 4 - Medically Monitored Non-Residential Services		13	13	5	3		34	24%	
LOC 5 - Medically Monitored Residential Services			6		1	16	23	17%	
LOC 6 - Medically Managed Residential Services			17		2	5	24	17%	
<b>Grand Total</b>	<b>7</b>	<b>17</b>	<b>62</b>	<b>13</b>	<b>16</b>	<b>24</b>	<b>139</b>	<b>100%</b>	

The difference between the recommended and actual LOC for the persons assessed during the quarter is visually displayed in the following chart:





Another way of viewing the differences between recommended and actual levels of care is shown in the following table, which presents the percentage correspondence between recommended and actual levels of care for the 139 persons assessed during the 4<sup>th</sup> Quarter:



Quarterly Report  
 For the period: April 1, 2019 – June 30, 2019  
 Submitted: 8/16/2019

SEFBHN 4th Quarter FY 19 LOCUS Assessments - Recommended versus Actual Levels of Care by Provider								
Recommended LOC/Actual LOC	Behavior Basics, Inc.	HBH	NHTC	SCMHC	SFSH	JGC	Grand Total	Correspondence
<b>LOC 1 - Recovery Maintenance and Health Management</b>	2	2	2	3			9	LOC 1
LOC 1 - Recovery Maintenance and Health Management	2		1	2			5	56%
LOC 4 - Medically Monitored Non-Residential Services		2	1	1			4	
<b>LOC 2 - Low Intensity Community Based Services</b>	1	3	10	4	6	2	26	LOC 2
LOC 2 - Low Intensity Community Based Services	1	3	8	2	6	2	19	73%
LOC 3 - High Intensity Community Based Services	1	1					2	
LOC 4 - Medically Monitored Non-Residential Services		1	2	2			5	
<b>LOC 3 - High Intensity Community Based Services</b>	4	6	12	5	4	1	32	LOC 3
LOC 2 - Low Intensity Community Based Services			5				5	
LOC 3 - High Intensity Community Based Services	4	2	4	4	4	1	19	59%
LOC 4 - Medically Monitored Non-Residential Services		4	3	1			8	
<b>LOC 4 - Medically Monitored Non-Residential Services</b>			6	1	3	1	11	LOC 4
LOC 2 - Low Intensity Community Based Services			2				2	
LOC 3 - High Intensity Community Based Services								
LOC 4 - Medically Monitored Non-Residential Services			3	1	3		7	64%
LOC 5 - Medically Monitored Residential Services			1			1	2	
<b>LOC 5 - Medically Monitored Residential Services</b>		6	18		1	10	35	LOC 5
LOC 2 - Low Intensity Community Based Services			2				2	
LOC 3 - High Intensity Community Based Services			2				2	
LOC 4 - Medically Monitored Non-Residential Services		6	4				10	
LOC 5 - Medically Monitored Residential Services			5		1	10	16	46%
LOC 6 - Medically Managed Residential Services			5				5	
<b>LOC 6 - Medically Managed Residential Services</b>			14		2	10	26	LOC 6
LOC 2 - Low Intensity Community Based Services			2				2	
LOC 5 - Medically Monitored Residential Services						5	5	
LOC 6 - Medically Managed Residential Services			12		2	5	19	73%
<b>Grand Total</b>	<b>7</b>	<b>17</b>	<b>62</b>	<b>13</b>	<b>16</b>	<b>24</b>	<b>139</b>	

Fifty-four (54) assessments identified actual levels of care different from that recommended by the LOCUS assessment tool. The reasons for these variances specified by those performing the assessments are summarized in the following table:

SEFBHN 4th Quarter FY 19 LOCUS Assessments - Variance Summary by Provider							
	Behavior Basics, Inc.	HBH	NHTC	SCMHC	SFSH	JGC	Grand Total
<b>No Variance</b>	<b>6</b>	<b>3</b>	<b>33</b>	<b>9</b>	<b>16</b>	<b>18</b>	<b>85</b>
<b>Variance Reason</b>							
Client is court ordered to a higher level of care		1					1
Client refuses recommended level		3	10				13
Clinical Judgment	1	10	17		4	6	38
No services/beds available at level of care			1				1
Services at recommended LOC not what client needs			1				1
<b>Total # of Variances</b>	<b>1</b>	<b>14</b>	<b>29</b>	<b>4</b>	<b>0</b>	<b>6</b>	<b>54</b>
<b>Total LOCUS Assessments</b>	<b>7</b>	<b>17</b>	<b>62</b>	<b>13</b>	<b>16</b>	<b>24</b>	<b>139</b>
<b>% of Assessments with Variances</b>	<b>14%</b>	<b>82%</b>	<b>47%</b>	<b>31%</b>	<b>0%</b>	<b>25%</b>	<b>39%</b>

In April, Carisk Partners began design of a LOCUS/CALOCUS Quality Assurance and Fidelity Monitoring process with the goal of improving the quality of the assessments being performed. The process is to consist of the following components:

- Increase in initial and follow-up trainings with all providers using the LOCUS and CALOCUS.

- Design of a “Train the Trainer” process to provide an intensive education of clinical supervisors in the clinically accurate use of the LOCUS/CALOCUS tools.
- Design of a LOCUS/CALOCUS review and reliability testing process to include:
  - Development of LOCUS Fidelity Monitoring tool or guidelines to assist Carisk and SEFBHN staff and provider clinical supervisors in reviewing the quality of completed LOC assessments through, for example, identification of common mistakes to look for, use of the LOCUS/CALOCUS website reports to identify outliers, etc.
  - Establishment of a protocol and creation of sets of adult and children’s clinical scenarios for inter-rater reliability testing.
  - Testing of the protocol with SEFBHN staff who have completed the intensive Train the Trainer trainings.
  - Adjustment of the Train the Trainer instruction, the fidelity monitoring tool/guidelines, and the inter-rater reliability protocol as needed based on the testing to assure that all trainers are knowledgeable and conversant in understanding LOC theory and in using and training others in the use of the electronic LOCUS/CALOCUS tools.
- Ongoing quarterly or other periodic meetings of a LOCUS/CALOCUS QA Work Group to address substantive questions, identify implementation issues, and conduct of periodic inter-rater reliability testing of Work Group participants.

During the fourth quarter, Carisk Partners developed the Fidelity Monitoring Tool and designed a comprehensive Train-the-Trainer protocol. Carisk Partners also conducted 6 provider trainings: 3 CALOCUS, 1 LOCUS, 1 combined LOCUS-CALOCUS, and 1 Train-the-Trainer. As these processes continue, Carisk Partners expects to document improved quality and fidelity of the LOCUS and CALOCUS assessments being performed within the SEFBHN system of care.

**(3) Overview of necessary adjustments to required plans, including justification for proposed changes, identification of barriers or anticipated barriers to achieving stated goals, and proposed strategies to mitigate the impact of said barriers on the Network.**

No changes were made to any plans during the 4th quarter.

As noted SEFBHN introduced our zero suicide initiative during the 4<sup>th</sup> quarter. We believe this effort is consistent with the principles of a Recovery Oriented System of Care. We believe that as a result of this effort providers will be assessing for suicide risk more thoroughly using evidence-based practices and thus providing appropriate intervention services for individuals considered to be at risk. Infusing ROSC principles throughout our systems will reduce barriers to achieving positive outcomes for consumers receiving services.

**(4) Network Management Activities:**

**(a) New subcontracts, or amendments to existing subcontracts with Network Service Providers;**

Twenty amendments; Eight new subcontracts; and, one new agreement was completed during the fourth quarter. The documents can be found in the Provider E-Contracting System and are listed as follows:

**Amendments**

**PNF20-1619** – Parent-Child Center, Inc. (Amendment #007)  
**ZTF13-1619** – New Horizons of the Treasure Coast, Inc.  
**PNF25** – Federation of Families of Florida, Inc.  
**PNF20-1619** – Parent-Child Center, Inc. (Amendment #008)  
**ZNC25** – Tykes and Teens, Inc.  
**PNA31** – South County Mental Health Center, Inc. (Main)  
**PDA48** – Drug Abuse Foundation of Palm Beach County, Inc.  
**PDA52** – South County Mental Health Center, Inc. (Ted's Place)  
**LTF10** – Henderson Behavioral Health, Inc. (Wraparound)  
**PDA51** – Wayside House, Inc.  
**PDA54** – Access Recovery Solutions, LLC  
**PDA50** – Healthy Living Detox, LLC  
**AGR09** – SP Behavioral LLC d/b/a SandyPines  
**AGR19** – Camelot Community Care, Inc.  
**PDF04** – Henderson Behavioral Health, Inc. (FIT Team)  
**PDA44** – Sunset House, Inc.  
**ZDF04** – Counseling and Recovery Center, Inc.  
**PDA56** – Rebel Recovery Florida, Inc.  
**ZDF02** -- Okeechobee Substance Abuse Coalition  
**ZDF03** -- Roundtable of St. Lucie County

**New Subcontracts**

**ZNA33** – Psychotherapeutic Services of Florida, Inc.  
**PNA17** - National Alliance on Mental Illness in Palm Beach County, Inc.  
**PNF23** – JFK Medical Center Limited Partnership d/b/a JFK Medical Center North Campus  
**ZNC16** – HPS, Helping People Succeed  
**PNA22** – The Lord's Place, Inc.  
**PNA16** – Jeff Industries, Inc.  
**LDC07**—Drug Abuse Treatment Association  
**PDC18** – Palm Beach County Substance Abuse Coalition

**New Agreements**

AGR28 – Unity Behavioral Health, LLC

**Termination**

N/A

**(b) Collaborative strategies and activities with the Department or Stakeholders**

- SEFBHN held a provider meeting on June 25<sup>th</sup>. Approximately 55 participants representing over 25 of our provider agencies were in attendance. Topics covered included the Zero Suicide Initiative, DCF Priorities and Initiatives for FY 19/20, SMHTF Diversion Initiatives, My Strength, and the Triennial Needs Assessment due on 10/1/2019. These meetings allow for discussion of a wide range of issues and offer networking opportunities for our providers
- SEFBHN and the FL LINC Project continues to collaborate to create messages to reduce the stigma of suicide with education and training throughout the network. SEFBHN continues to enhance partnerships, networks, and advisory boards to engage, organize, and empower community leaders and its members to recognize Suicide Prevention, Intervention, and Post-vention. Care Coordination responsibilities for the Florida LINC program were transitioned to New Horizons of the Treasure Coast (NHTC) at the end of FY 16/17, with SEFBHN is providing workspace and office supplies for the Florida LINC Regional Suicide Prevention Specialist. As result, SEFBHN provides funding to support the following services with our Care Coordination Team being available to lend additional technical assistance as needed / requested.
  - **29** children were provided Coordination of Care Services by NHTC during the four quarter of the 18/19 fiscal year.
  - **3** Suicide Prevention Trainings were conducted in both Circuits 15 and 19 by Florida LINC during this 4th quarter providing skills and tools to **72** participants:
    - **3** QPR (Question, Persuade, Refer) trainings prepared a total of **31** QPR trained gatekeepers
    - **4** QPRT Suicide Risk Assessment Orientation Workshop trained **33** participants
    - **1** Family Training trained **8** participants

Florida LINC also informed SEFBHN that due to some identified carry forward funding the program will be able to continue an additional 6 months – through September 30, 2019.

**Children’s System of Care**

- During the fourth quarter a total of 276 children and youth received prevention and treatment services through system of care. Fifty-one new referrals were received, and thirty-nine children and youth were enrolled in treatment services while twenty-nine children and youth were discharged. At the start of the quarter, 237 youth were being served and at the end of the quarter, 247 were being served. The following is a summary of activities that occurred during the fourth quarter.
- The Federation of Families (FoF) in partnership with Community Partners of South Florida offered SOC families in the Glades area (western Palm Beach County) an eight- week summer program. The FoF participates in a summer weekend food program which is sent home with campers weekly.
- In Okeechobee, Drop-In centers were offered for all students. To increase utilization the System of Care Program Director called each child identified as high risk to inform them about the opportunity to come to the Drop-In Center along with h children who are already

- receiving Wraparound Services. Thus far 22 children have used the drop-in centers on at least one occasion. The drop-in centers serve as a means to ensure children have a safe and structured environment including social emotional learning activities. Therapists and case managers are also able to participate with clients at the drop-in centers
- The Coordinating Councils conducted 5 meetings during the 4<sup>th</sup> quarter – 3 in the Glades area and 2 in Okeechobee County.
  - During May (Mental Health Awareness Month) a resource fair was sponsored by the Okeechobee System of Care at the local High School in addition to promoting the painting of green thumbs. Federation of Families sponsored four presentations of the documentary “Broken Places” – about the impact of childhood adversities on emotional health..
  - Both of our SOC locations offer family and youth support services. In the Glades area, the youth participate in a weekly mentoring program for young men and “Girl Talk” is offered for young ladies. These services are also provided during weekly TUF talks and Strengthening Families classes. Fifty unduplicated youth participated in the Glades.
  - The Okeechobee SOC hosted a girls empowerment group weekly with Freshmen girls. The opening of the previously mentioned Drop-In Centers resulted in an increase in participation in the group.
  - Federation of Families has partnered with the Palm Health Foundation to implement The Open Table in the Glades Area. The Open Table is a faith-based support model that is designed to support systems in rural communities to address their lack of resources and build capacity to address the behavioral health needs of the children and their families. It utilizes the resources within a congregation to support these families to develop a life plan. The Open Table is part of the sustainability plan for children, youth and families as they transition from Wraparound Services.

### Prevention Activities

- The Network Prevention Manager continues to meet monthly with ME Prevention Managers and DCF state Prevention Clinical liaison. The team has confirmed the next face-to-face for October 24, 2019 in Tampa, FL. The goals continue..
  - to create a better statewide educated and skilled Prevention work force,
  - to continue conversations to better the data collection system {The developer of the Collaborative Planning Group, was invited to present the growth and new capabilities of the Performance Based Prevention System (PBPS)}
  - to better communications and present a cohesive message which represents the needs of the Prevention community to those at the state legislative level.
- The Network Prevention Manager continues to convene monthly phone-in meetings; for all Prevention SAMH funded agencies and coalitions to discuss Statewide Managing Entity Prevention news and updates within the ME and state. The calls allow for a monthly 2-way conversations between the ME and the Prevention funded. During the months of April - June 2019 conversations continued to center around updates to the
  - Fiscal Reporting and Data Collection systems,
    - Carisk Partners (formerly known as Concordia)

- FASAMS (Financial And Services Accountability Management Systems)
    - Data Conversion Tool
  - Performance Based Prevention Systems (PBPS)
    - Data Collection Upgrades
    - PBPS Invoicing Tool
- BASE and CORE Manuals
- Suicide Prevention
- Discussions Continued surroundings
  - Validations / Monitorings
    - Prevention Monitoring Tool
    - Performance Measures Outcomes doc
  - Needs Assessment and Community Action Plan Upcoming reviews
  - Individual CARF Review Findings
- The Network Prevention Team additionally began discussing resources and promising program initiative which address the emerging Vaping concerns expressed by Community leader, parents and this ME's County school officials.
  - Coalitions created Community conversation opportunities
  - School-based providers engaged parents in PTA, SAC and PTO events.
- This 18-19 FY, the Network Prevention Manager continues to assume the responsibility of completing the writing of Prevention Contracts and Amendments. During this 4<sup>th</sup> quarter of FY 18-19, the Network Prevention Manager worked with the Compliance Administrator to complete 2 Contract renewals and 2 Contract Amendments. Drug Abuse Treatment Association and Palm Beach County Substance Awareness Coalition contracts were negotiated and renewed. Okeechobee Substance Abuse Coalition and Roundtable of St. Lucie County contracts were negotiated and amended to extend another Fiscal Year.
- Discussions were initiated during this 4<sup>th</sup> Quarter to amend other fund awards into new contracts with 211, Palm Beach County Substance Abuse Coalition and Drug Abuse Treatment Association for the next 19/20 Fiscal Year.
- This Network Prevention Manager also worked with the Compliance Administrator to learn the various steps to lead SEFBHN staff through a SEFBHN Validation of agencies. During this 4<sup>th</sup> quarter of FY 18-19, with the guidance of the Compliance Administrator, the Network Prevention Manager lead and completed the processes for Validations for:
  - 2 Coalition Validations (Palm Beach County Substance Abuse Coalition, Inc. and Okeechobee Substance Abuse Coalition, Inc.) and
  - 1 Provider Validation (Drug Abuse Treatment Association, Inc.)
- All SEFBHN Coalitions are working on the semi-annual review of their county's Needs Assessments, Logic Models and Comprehensive Community Action Plans. Network Prevention Manager reviewed plans and is in the process of making recommendations. Completed Coalition County reports will be submitted to the state during the 1<sup>st</sup> quarter of FY 19/20.

- During the months of April – June 2019, the Coalitions were fully engaged, continuing the implementation of Environmental Strategies and School-based Programming throughout the SEFBHN Network.
  - Palm Beach County Substance Abuse Coalition (PBCSAC) Teen Coalition-In-Action (CIA) continued hosting Teen Vaping sessions and initiated #Teen Talk, an interactive event where Teen CIA led conversations with parents, community members, teachers and law enforcement regarding a solution focused approach to e-cigarette use, underage drinking and other drugs.
  - PBCSAC partnered with Palm Beach County Schools in the implementation of the Palm Beach County Youth Teen Summit. They also completed the PBC Schools poster contest; reviewing 600 entries to recognize the top 5 in Elementary, Middle and High School. A partnership with the South Florida Fair allowed the display of the top 75 entries.
  - PBCSAC continues to the work to complete the implementation and execution of goals outlined in the Circuit 15 Heroin Task Force (HTF) Prevention Plan. Those identified initiatives in the HTF Prevention Plan are as follows:
    - Execution and roll-out of Opioid Prevention messaging to educate School and College age Youth, Parents and the general community.
    - Enhancement of current Opioid Prescription education components to Physicians and Medical service providers.
  - Martin County Board of County Commissioners and PBCSAC continue to partner. They have developed a Teen Coalition-In-Action group who worked with the PBCSAC and Martin County Board of County Commissioners to implement a Martin County Schools Youth Teen Summit. That group is also working on an ordinance to present to the Commissioners to raise the smoking legal age to 21 in Martin County.
  - Okeechobee Substance Abuse Coalition – continued holding Friday Night Done Right outings at the Bowling Lanes and partnered with community partners to create safe drug free places and activities for Okeechobee Schools and Community. They also participated in the Okeechobee County Behavioral Health Fair, sponsored by the Okeechobee County System of Care initiative.
  - Roundtable of St. Lucie County – assisted in the development of the St. Lucie County Behavioral Health Task Force.
    - Their Executive Director and the Network Prevention Manager co-chair the task force which has engaged representation by the St. Lucie County School, Children’s Services Council, Treatment Centers, DJJ, DOH and other County Coalitions.
    - That Task Force meets monthly on the 4<sup>th</sup> Wednesday to connect Community Behavioral Health Resources.
    - Their short- term goal is to create a Needs Assessment, Logic Model and Community Action Plan to prioritize and direct the steps to meet the identified Community Behavioral Health needs.



- Roundtable also worked with community partners within their county to provide safe and drug-free End of School activities.
  - Substance Abuse Free Indian River (SAFIR) partnered with community partners to bring a Marijuana forum to Vero Beach on **April 12<sup>th</sup>**. As result, that presenter has been invited to present at a Roundtable of St. Lucie event in Ft. Pierce in July, 2019 and a return Substance Abuse Free Indian River (SAFIR) event in October, 2019.
  - Substance Abuse Free Indian River (SAFIR) was also highlighted / featured in the Community Anti-Drug Coalitions of America (CADCA) Coalitions Online weekly newsletter for their partnership between the coalition and St. Lucie County law enforcement.
  - All SEFBHN Coalitions continue developing Youth Coalition Teams / Teen Coalitions In Action.
- SEFBHN Prevention Providers are celebrating their ability and successes had in implementing the state recommended Prevention School-based Programming in schools in each of our counties:
    - Hanley Center Foundation (HCF) successfully completed their implementation of the Botvin LifeSkills Training school-based program in Palm Beach County's Western Community. HCF completed their 8<sup>th</sup>, 9<sup>th</sup> and 11<sup>th</sup> grade program implementations and have been invited back to increase their involvement in those schools. HCF plans to continue the transition of some of their schools from Allstars and Alcohol Literacy Challenge to Botvin LifeSkills Training
    - New Horizons of the Treasure Coast (NHTC) has successfully provided "Too Good For Drugs / Violence" to selected grades in all Elementary, Middle and High School students in St. Lucie County. They have been successful in developing and nurturing this partnership with St. Lucie County School District which has allowed this implementation for the last 4 years.
    - Tykes & Teens, successfully completed their implementation of Botvin LifeSkills Training school-based program in Martin County Elementary Schools. At the end of quarter, Tykes & Teens reports having served 1300 5<sup>th</sup> graders and 304 4<sup>th</sup> graders.
    - Substance Abuse Council of Indian River (SACIRC) successfully implemented Botvin LifeSkills Training in all Indian River County Elementary, Middle, and High Schools. They have been successful in developing and nurturing this partnership with Indian River County School District which has allowed this implementation for more than 5 years.
    - Because of SACIRC's success at implementing Botvin LifeSkills Training in Indian River County, Botvin LifeSkills Training has recognized SACIRC, featuring them on their Program tab. Please see the weblink to the article.

<https://www.lifeskillstraining.com/indian-river-county-florida-and-botvin-lifeskills-training-prevention-is-a-partnership/>

- The Network Manager now works with the Circuit 19 Juvenile Justice Advisory Board, attending the Circuit's monthly meetings and participating on the Tobacco/Vaping Sub-Committee.
- The Network Prevention Manager continues work with the Circuit 15 Juvenile Justice Advisory Board, partnerships / committees and alliances. Meetings continue to address the goals and work for FY 18/19; and the collaborative work of state agencies and integration of Behavioral Health recommendations by the State of Florida Marjorie Stoneman Douglas High School Public Safety Act.
- The Network Prevention Manager and SEFBHN Prevention Team work closely with Circuit 19's Opioid Task Force Prevention Team. The Network Prevention Manager and Representatives from our SEFBHN Prevention Team attend and volunteer their expertise to create and support Prevention processes and measures which deter or delay the introduction of the use and abuse of Opioid substances.
- During this 18-19 FY, The Network Prevention Manager continues the work to complete the implementation and execution of the goals outlined in the Circuit 15 Heroin Task Force (HTF) Prevention Plan.
  - SEFBHN Prevention Providers are celebrating successes in implementing initiatives recommended by Circuit 15 / Palm Beach County's collaborative efforts to respond to the county's Heroin epidemic. The Heroin Task Force (HTF) developed plans for many sectors of the community. Components of that HTF Prevention plan continue to be implemented / executed.
  - Drug Abuse Treatment Association (DATA) continues our SEFBHN work to complete the implementation and execution of goals outlined in the Circuit 15 Heroin Task Force (HTF) Prevention Plan; namely the addition of 15-minute Opioid Prevention Message to their existing Prevention programming.
  - Hanley Center Foundation (HCF), additionally, continues to the work to complete the implementation and execution of goals outlined in the Circuit 15 Heroin Task Force (HTF) Prevention Plan. Those identified initiatives in the HTF Prevention Plan are as follows:
    - Creation and Development of an Opioid Education and Support Group, which made possible after the acquisition of funding from Palm Beach County to initiate the Project C4OPE project with Hanley Center Foundation.
    - Implementation of Botvin LifeSkills Training curriculum in schools where there is no SAMH Prevention ~ or ~ the addition of 15-minute Opioid Prevention Message to existing Prevention programming.
- Hanley also earned the Health Resources and Services Administration (HRSA) grant which addresses the opioid crisis in rural counties. This initiative will build a consortium of

- stakeholders (law enforcement, hospitals, fqhc, treatment, schools) to identify the need in Okeechobee County.
- Hanley will write the needs assessment and the plan to address the workforce and sustainability of the plan.
  - This plan will address the full spectrum of programming (Prevention, Treatment and Recovery) collecting information from -- *Prevention, System of Care, Mental Health Court services, and Substance Abuse Treatment and Recovery services* -- provided in Okeechobee and surrounding counties – since residents often travel outside of Okeechobee County to receive services.
- The Network Prevention Manager continues to work closely with the Florida Alcohol and Drug Abuse Association (FADAA) statewide Prevention team and Florida Substance Abuse Prevention Advisory Council (PAC). The PAC continues to meet quarterly by phone.
  - The FADAA statewide prevention team continues to phone meet monthly. This 4<sup>th</sup> quarter's discussions centered around initiatives to address the Opioid crisis and emerging Marijuana Vaping and in selected districts / circuits; and the overall increase in Marijuana as reflected in data reports from last year. FADAA representatives sought to have agencies share programming and initiatives to educate and inform parents and youth of the dangers of mis-using these medications. Also, on the agenda, was the continued conversation surrounding having an effective "single message" going out from the Prevention Community. During the 4<sup>th</sup> Quarter, this information was shared with SEFBHN Network Prevention Providers and Coalitions to encourage discussions about next steps for the work we'll do regarding the stated areas.

### **Care Coordination**

- The care coordination team continues to create opportunities for cross-system collaboration and communication between SEFBHN and the network providers that improves overall network performance outcomes through continuous quality improvement (CQI) meetings. Four network providers: Drug Abuse Foundation, New Horizons of the Treasure Coast, Jerome Golden Center, and South County Mental Health Center, continue to maintain full-time care coordination staff that are responsible for implementing internal care coordination processes and collaborating with community stakeholders for the purposes of developing a recovery-oriented system of care.
  - The SEFBHN Coordination of Care Team conducts daily coordination of care activities in collaboration with our network providers and stakeholders. They assist through trouble shooting complex cases by identifying needed services and supports within the community for priority consumers. During the 4<sup>th</sup> quarter there were 69 consumers identified, approved and enrolled as candidates for care coordination services. An example of a case opened during this quarter involved a consumer with a history of multiple recent acute care admissions due to suicidal ideation. Through care coordination involvement a treatment plan was developed, the client was linked with a supportive housing program, and continually engaged in care coordination.

The client also obtained employment. As of today, the client is still actively enrolled in recovery services and has maintained employment.

- The CoC team continues to utilize the Transitional Voucher Program. It is designed to provide care coordination and vouchers to purchase treatment and support services for adults transitioning from Florida Assertive Community Treatment (FACT) teams, acute crisis services, and institutional settings to independent community living. This program is designed to bridge the gap for persons with behavioral health disorders to live independently in the community as they transition to lower levels of care while building a support system to sustain their independence, recovery, and overall well-being. In the 4<sup>th</sup> quarter, SEFBHN approved 46 transitional vouchers – 22 for substance use and 24 for mental health. All vouchers were used for housing subsidies and 6 of the mental health vouchers were used for pharmaceuticals.
- The Coordination of Care Module remains fully operational. Carisk Partners is working with MD Flow to continue to make additional edits to the system.
- SEFBHN Care Coordination staff continues to facilitate a regularly scheduled monthly interdisciplinary care coordination meeting with staff persons from Jerome Golden Center, South County Mental Health Center, New Horizons of the Treasure Coast and Okeechobee, and Drug Abuse Foundation. The goal of the meetings is to facilitate the effective exchange of agency information that supports timely and efficient utilization of network resources through clearly defined actions. During this quarter, the participating provider staff discussed best practices for care coordination and trends relating to psychosocial barriers. Recent topics discussed included: social security disability application process for clients that are non-citizens and diversion strategies for clients that have been petitioned for involuntary placement. These meetings continue to offer provider and SEFBHN staff an open forum to discuss service trends, systems gaps, and treatment barriers.
- The SEFBHN Network Integrity Manager has been continued to conduct bi-weekly calls with Substance Use Disorder providers across the region with an emphasis on discussing coordination of care across the network. Collaboration and ease of communication among providers has improved significantly as a result of the calls. Weekly calls continue to be held directly with Teds Place staff to ensure that the needs of each resident are being met and that individuals are being both matched to the proper level of care and admitted to treatment as quickly as possible. This often involves a collaborative care coordination effort between Ted's Place staff, provider staff and the Network Integrity Manager working together. 84% of individuals who arrived at Ted's Place this quarter have been successfully linked to treatment services within an average stay of 14 days.

### Housing Activities

- The SEFBHN Director of Network Integrity and Housing Specialist are very active attending and participating in attend the Continuum of Care (CoC) meetings in Circuits 15 & 19.
- Housing Specialist and Housing Program Director attended ME/CoC conference in Orlando to provide a summary of activities and services available for CoC team members.
- At SEFBHN's the May CQI meeting, Housing Specialists from both the Treasure Coast Homeless Services Coalition and Palm Beach County's Continuum of Care homeless shelter, the Lewis Center, spoke with our network providers regarding their array of services and accessing the Coordinated Entry systems.
- The Housing Specialist and Treasure Coast Homeless Coalition have established quarterly meetings and assistance with a SOAR Online Cohort.
- The Director of Network Integrity and the Housing Specialist continues to participate in the quarterly statewide Managing Entity Housing Calls.
- The Director of Network Integrity is a member of the Executive Committee of the HHA (Palm Beach County's CoC) and participates in monthly meetings.
- The Housing Specialist is a member of the Palm Beach Continuum of Care Engagement Subcommittee, newly adapted and attends monthly, beginning March 2019.
- The Director of Network Integrity is member of the Homeless Advisory Board (HAB) of Palm Beach County and attends quarterly meetings. A new Housing Plan is due in 2019 – and additional workshop meetings are being held regularly to educate board members on options and ideas for the plan.
- Housing Specialist attends a monthly PBC CoC meeting, the Community Engagement Subcommittee in which Street Engagement Peers attend regularly to report success or struggles in housing persons experiencing homelessness. Community includes, Palm Beach Sheriff's Office Community Officer, Palm Beach County Homeless Outreach Team, Vita Nova, The Lord's Place and Housing Partnership.
- Housing Specialist had a meeting with local Immigration Attorneys to learn how to access pro bono services for persons in need of Citizenship assistance.
- Housing Specialist has met with Oxford Housing staff to assist in developing relationships and provide referrals.
- Housing Specialist attends monthly seeking placement conference calls
- Housing Specialist completed 15 Assisted Living Facilities site visits.
- Monthly Housing coordinator calls to assist persons linked to substance use treatment and follow up with housing opportunities.

- SEFBHN in collaboration with Indian River Mental Health Court (MHC) received the CJMHSA Reinvestment Grant which runs from January 2017 through January 2019. The Housing Specialist continues to help coordinate housing options in Indian River County for MHC clients and work with the Treasure Coast Homeless Services Council (TCHSC) to place clients and oversee the 2 houses leased by TCHCS through an MOU with SEFBHN. The Indian River County Reinvestment grant Project Coordinator and Housing Specialist continue to work with TCHSC to find permanent housing options for clients graduating from Mental Health court.
- SEFBHN continues to collaborate with Treasure Coast Homeless Services Council on a HUD grant they received from Martin County to house consumers in Mental Health and Drug Courts that are experiencing homelessness. This grant will assist eligible individuals with housing for up to a year in Martin, St. Lucie and Indian River counties. To date we have housed 12 individuals.
- PATH Indian River County partnered with Treasure Coast Homeless Coalition for ongoing housing possibilities throughout the Treasure Coast.
- Continued SOAR Technical Assistance and revitalizing SOAR dedicated positions and programs.
- Participates in the statewide SOAR Work Group scheduled Qtrly. National & State Leads have been attending ongoing SOAR calls. This Work Group is making great strides in developing quality data, creating higher collaborative relationships with SSA.
- Housing Specialist participates in the monthly SOAR Regional Advisory conference calls.
- Housing Specialist presented SOAR National Webinar for OAT data information
- OAT data proving higher outcomes of approvals and time lines of decisions made by Social Security Administration.
- SOAR/PATH monthly call with DCF attended regularly.
- ME, PATH and HMIS data teams are meeting regularly to identify glitches within HMIS to better control PATH data and services entered.
- SEFBHN continues to participate on the Circuits 15 and 19 Baker Act Task Force meetings. These meetings provide an opportunity to address case specific and systemic issues.
- SEFBHN and Carisk Partners continue to meet on a monthly basis. These meetings allow for robust information exchange about Data, Technology, Reporting, Billing and Financial Management and Care Coordination. A primary focus of these meetings in the last 6 months is the implementation of FASAMS and how the SEFBHN data portal has been adapted to align with FASAMS requirements.

**Opioid Addiction Services/Medication Assisted Treatment/Substance Use Disorder**

- The Director of Network Integrity attended FADAA Workshop for MAT induction in Hospital Emergency rooms in Orlando on Jan. 8, 2019.
- The Network Integrity Manager attended the WITS/ASAM Continuum training for the SOR grant in Tampa in February. He attended the ME training and the training day for our Network Provider.
- In April SEFBHN presented the Okeechobee Substance Use Disorder Forum to community stakeholders. The forum was presented as a Listening Session to hear from local stakeholders regarding the quality of local services, what services were needed and what they would like to see become available. The event was well attended by local leaders, coalitions, service providers, the school district, and peers to name a few.
- As previously reported, SEFBHN has been moving ahead with the Hospital Emergency Room Programs in Palm Beach and the Treasure Coast. These programs will utilize hospitals that agree to start a buprenorphine induction for overdose patients in their ER coupled with Peer Services. Peer Support will be available to the consumers in the ER and link them to continuing MAT and other required treatment services. The utilization of these programs has not been as high as had been anticipated. During the second quarter we began discussions with Tenent Hospitals in PBC. This would include 3-4 hospitals; Martin Memorial Hospitals (3 in Martin and St. Lucie County) – the start date has been delayed as we continue to discuss the implementation of a buprenorphine induction. Palm Beach County government has been considering funding a central addictions receiving facility which may impact how this program will be managed in Palm Beach County. Substance Awareness Center of Indian River County and Treasure Coast Community Health are in discussions with Cleveland Clinic Indian River Medical Center in Vero Beach to begin a buprenorphine induction in the hospital. The program would include a connection to peers, continuing MAT at TCCH and substance abuse treatment at SACIRC. Cleveland Clinic will be presenting to their Executive leadership to get final approval for the Hospital/MAT bridge program.
- Treasure Coast Opioid Task Force continues to meet every month and is actively involved in getting an ER/Peer program in place.
- The Network Integrity Manager has been overseeing and implementing SOR grant data reporting requirements by overseeing proper implementation of data reporting requirements, providing technical assistance and working with directly with FEI to ensure proper usability of the WITS system. This has involved deployment of WITS agency accounts for all Substance Use Disorder treatment providers receiving SOR grant funds and providing ongoing technical assistance and monitoring to ensure that providers have appropriate access, understand usage of the system, were aware of and attended FEI-provided WITS trainings, and have immediate support to rapidly resolve simple technical issues which could otherwise halt data entry work. Additionally, systematic issues with the WITS system have been addressed directly with FEI and DCF teams to ensure that the system was meeting provider needs and to ensure data fidelity.

- The Network Integrity Manager has begun to oversee deployment and usage of ASAM Continuum across Substance Use Disorder providers in the region including attending trainings together with providers to prepare for the rollout of the system and engaging directly with providers to provide technical assistance and help solve common barriers to implementation (esp. minimizing duplication of information collection), and development of provider guidance to help plan for implementation.
- The Network Integrity Manager and Director of Network Innovation attended a ROSC Quality Improvement Monitoring Activities training on May 23, 2019 and discussed how to integrate the ROSC monitoring tool into a unified provider monitoring approach.
- The Network Integrity Manager attended a FADAA webinar on Alternatives to Administrative Discharge on May 14, 2019.
- Southeast Florida Behavioral Health Network, Inc., in collaboration with the Palm Beach County Sheriff's Office (PBSO); The Recovery Research Network Foundation, Inc.; Rebel Recovery Florida, Inc.; and, Wellpath, LLC have designed a multi-pronged approach within the County Jail to expand access to substance use disorder (SUD) treatment, medication assisted treatment (MAT), clinical services and recovery support with continuing services in the community for any incarcerated individual with a substance use disorder. The goal of this MAT and Peer Services (MAPS) Program is to increase engagement in treatment and recovery services among the pretrial and posttrial populations with opioid use disorder (OUD) both within and when leaving the Jail.

New services in the jail will include medication-assisted treatment, enhanced screenings, assessments, cognitive behavioral treatment, as well as evidence-based practices such as treatment for trauma and co-occurring issues, individual counseling and peer support groups. Certified Peer Specialists will be embedded at various intercept points to help educate and engage individuals in treatment and recovery support services, provide linkage to community-based services, harm reduction and transitional housing. The project is in the planning and implementation phase at this time but it is anticipated that the program will begin providing services to the target population in October, 2019.

**(c) Adverse fiscal impact of proposed Network changes and recommendations for resolution.**

SEFBHN does anticipate some fiscal challenges heading into the new fiscal year. Initial budget proposals indicated an increase in FACT Team funding. We had issued an RFA for FACT Teams incorporating the enhanced funding as it was determined that the higher rates would be needed to incentivize prospective applicants and to thus ensure the delivery of quality services. This additional funding was not appropriated in the final budget thus impacting the alignment of our overall mental health funding.

The appropriation of funding from the School Safety Legislation that is to be used to hire mental health professionals in the schools is also having an impact on our network providers. They are losing their existing staff to these positions as they cannot compete with salary increases the schools are paying.



(2) **Network Service Provider performance including:**

(a) Monitoring and review results, including reports and corrective action plans (CAP) or other necessary follow-up actions; and

- Contract Validation reports with any subsequent required corrective actions for the provider can be found in the newly implemented Provider E-Contracting System but copies of all reports completed thus far have also been submitted directly to the DCF.
- During the third quarter of FY 18/19, it was reported that the following agencies had open Performance Improvement Plans (PIPs). The current status is noted next to each agency. A few agencies were added to this list as a result of validations which occurred in the third quarter having PIPs submitted between the third and fourth quarters.
  - **Henderson Behavioral Health** – The PIP is closed as we move forward with a new contract with this provider due to the noted changes they had been making base on our on-site review of their FACT Team. The SEFBHN FACT Team specialist continues to work closely with the provider.
  - **Jerome Golden Center** -This PIP is still open. SEFBHN continues to work closely with this provider to improve their delivery of services. SEFBHN just completed an on-site contract validation with many areas of concern noted. The associated validation report has not yet been finalized however much of it did contain repeat findings which may impact funding as the existing FY 18/19 contract has expired and FY 19/20's contract is still pending final agreement.
  - **New Horizons of the Treasure Coast** – The provider is no longer operating FACT Teams thus resulting in the closing out of the PIP.
  - **Federation of Families** –. With FY 18/19 now closed, this PIP can be closed and data will be reviewed to ensure additional concerns do not arise surrounding data integrity.
  - **The Lord's Place** – The PIP is still open. SEFBHN continues to provide technical assistance relating to SOAR and clinical use of evidence-based practices.
  - **JFK Medical Center** – The PIP is still open. SEFBHN continues to provide technical assistance relating to data submission, discharge planning, and care coordination.
  - **South County Mental Health Center** – The PIP for the NAVIGATE program was received and accepted. It is anticipated that it will be closed during the first quarter of FY 19/20.

- **Palm Beach County Substance Abuse Coalition, Inc.** – This PIP has been closed.
- **Ebb Tide Treatment, LLC** – A PIP was due May 2<sup>nd</sup> and was not received however, technical assistance has continued to be offered to the agency to allow them the opportunity to properly complete contract negotiation documents timely as they are limited on administrative staff.
- **211 Palm Beach/Treasure Coast, Inc.** – A PIP was opened regarding staff training and clearances are completed timely and maintained in the staff files, as appropriate. The agency is on track for this PIP.
- **Father Flanagan’s Boys Town Florida, Inc.** – PIPS were requested for clinical and administrative concerns. It has been reviewed and was undergoing second review before revisions to the submitted PIPs can be accepted.

SEFBHN continues to meet with the leadership team of all three community mental health centers - Jerome Golden Center (JGC), New Horizons of the Treasure Coast (NHTC), and South County Mental Health Center (SCMHC) and our largest substance abuse treatment center - Drug Abuse Foundation (DAF) ) on a monthly basis. During the 4th quarter, areas of discussion included SEFBHN’s proposal for specialized Mobile Response Team (MRT) services for families involved with Child Welfare utilizing the SOR Child Welfare set-aside funding as all 3 of our Community Mental Health Centers operate an MRT. These meetings also provides an opportunity to discuss the budget and contracts for the upcoming fiscal year and the Zero Suicide Initiative.

**(b) Performance measures:**

Network Service Provider Outcome Measures		FY Target	YTD Performance
Adult Mental Health	Average annual days worked for pay for adults with severe and persistent mental illness	40	68.83
	Percent of adults with serious mental illness who are competitively employed	24%	68%
	Percent of adults with severe and persistent mental illnesses who live in stable housing environment	90%	94%
	Percent of adults in forensic involvement who live in stable housing environment	67%	77%
	Percent of adults in mental health crisis who live in stable housing environment	86%	88%
	Percentage change in clients who are employed from admission to discharge	10%	18%

Adult Substance Abuse	Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge	15%	-81%
	Percent of adults who successfully complete substance abuse treatment services	51%	67%
	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge	94%	93%
Children's Mental Health	Percent of school days seriously emotionally disturbed (SED) children attended	86%	91%
	Percent of children with emotional disturbances (ED) who improve their level of functioning	64%	94%
	Percent of children with serious emotional disturbances (SED) who improve their level of functioning	65%	75%
	Percent of children with emotional disturbance (ED) who live in a stable housing environment	95%	99%
	Percent of children with serious emotional disturbance (SED) who live in a stable housing environment	93%	98%
	Percent of children at risk of emotional disturbance (ED) who live in a stable housing environment	96%	94%
Children's Substance Abuse	Percent of children who successfully complete substance abuse treatment services	48%	79%
	Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to discharge	20%	-86%
	Percent of children with substance abuse who live in a stable housing environment at the time of discharge	93%	99%

Two performance measures were not met during the fourth quarter both relating to stable housing. Affordable housing has been and continues to be a challenge within our network and across the state. In looking at possible reasons we note that one of our providers had to correct some data entries regarding the adult stable housing measure which did lower their performance and affected SEFBHN's overall performance. We are drilling down further on the children's stable housing measure to determine the issue – historically that are less records for children and thus outcomes can be easily skewed.

**c. Implementation of specific appropriations or grant funds.**

- The Jerome Golden Center continues to operate a 12-bed Level II licensed Residential Treatment Facility for individuals with co-occurring (mental health and substance abuse) disorders that is

funded through Specific Appropriation 372. In the 4th quarter they served 35 clients. 10 of the clients have successfully graduated during this quarter and 13 clients were carried over into the 1st quarter of the 2019-2020 year and are currently being served in the program. 11 clients were either terminated or voluntarily discharged from the program. 100% of all graduates were discharged to stable housing, 10 of the 10 graduates had social security benefits or other entitlements such as food stamps and health insurance.

- Henderson Behavioral Health continues to provide FIT Team services in Palm Beach County and Counseling and Recovery Center continues to provide FIT Team Services on the Treasure Coast covering Indian River, Martin, Okeechobee and St. Lucie Counties through specific appropriation 369 for FY 18/19. FIT uses a team approach to provide substance abuse treatment services to parents of children who are involved in the child welfare system. During the 4<sup>th</sup> quarter of FY 18/19 51 adults and 128 children were served by these 2 FIT Teams. It was determined that without these services 28 of the adults would have needed residential treatment vs. outpatient treatment and 36 of the 63 children living with their parents would not be able to remain in the home with their parents and would need foster care placements. The HBH FIT Team had hoped to increase the number served over the 3<sup>rd</sup> quarter since they filled a therapist position. They had a small uptick but then had some additional vacancies. The SEFBHN FIT Team liaison is working to address referrals and discharges with the HBH team.
- Specific Appropriation 366 provides a combined 1.5 million dollars in funding for 2 Community Action Teams (CAT) from the Department – one in Circuit 15/Palm beach County operated by Sinfonia and one in Circuit 19/Indian River, Martin, Okeechobee, and St. Lucie Counties and operated by New Horizons of the Treasure Coast. During the 4th quarter these teams served a total of 132 children and reported a total cost avoidance to the state of \$1,563,744.00 keeping children and youth out of deeper end child welfare, juvenile justice programs, and psychiatric in-patient programs.
- Specific Appropriation 367 funds the Transitional Housing program operated by New Horizons of the Treasure Coast. This program provides housing for individuals stepping down from the State Mental Health Treatment Facilities (SMHTF). During the fourth quarter the program served 21 clients stepping down from the state hospital. Five clients were successfully discharged to a less restrictive setting within the community. The savings to the state was \$204,978.00 had these individuals had to remain in the SMHTF as opposed to having the availability of the Transitional Housing program.
- Refer to section 2.h -Continuous Quality Improvement, of this report for information on the 2 Reinvestment Grants that SEFBHN received to enhance services to the Mental Health Court in Indian River county and to the Mental Health and Drug Courts in Okeechobee counties.
- Mobile Response Teams – As previously reported SEFBHN released an ITN to solicit Mobile Response Teams to be funded in part with the legislative appropriation from The Marjory Stoneman Douglas High School Public Safety Act, (SB7026). South County Mental Health Center and New Horizons of the Treasure Coast were selected to receive this funding. The

Jerome Golden Center continues to operate a Mobile Response Team but they were not awarded any of the additional appropriation. Since the infusion of this new funding 2150 calls have been received and 2117 individuals have been served by the four teams operated by our 3 providers.

**d. Any adverse finding or report against a Network Service Provider by any regulatory or law enforcement entity.**

While no adverse findings or reports against a Network Service Provider by any regulatory or law enforcement entity have occurred, SEFBHN continues to provide ongoing oversight for the Drug Abuse Foundation due to concerns about the quality of care they are providing. They were monitored for adherence to ROSC principles during the fourth quarter and it was determined that their treatment framework is primarily focused on a Twelve Step approach to treatment. ROSC is more broad based in that it encompassed many modalities such as Medication Assisted Treatment. While actual financial penalties have not yet been assessed SEFBHN has determined that the results of the ROSC monitoring will affect the funding streams for their contract in FY 19/20.