

(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 Q 2:
 - 2.3.1.1 – 48% (Prevention set aside)
 - 2.3.1.2. – 41% (HIV early inter set aside)
 - 2.3.2. – 54% (Women set aside)
 - 2.3.3. – 50% (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 second quarter.

Date(s) of Activity	Type of Wraparound Training Activity	County (where training occurred)	# of Participants
11/12/2019 - 11/14/2019	Wraparound 101	Palm Beach	25

Date(s) of Technical Assistance	Other Wraparound technical assistance provided	County (where technical assistance occurred)	# of Participants
10/8/2019	Wraparound Technical Assistance-Community Partners	Palm Beach	2
10/23/2019	Wraparound Technical Assistance-Community Partners	Palm Beach	2
10/31/2019	Wraparound Coaching-Sinfonia	Palm Beach	2
11/8/2019	Technical assistance-NHTC	St. Lucie	8
11/27/2019	Technical assistance-Henderson	Palm Beach	2
12/2/2019	Wraparound coaching-CRC	St. Lucie	3
12/3/2019	Wraparound coaching-Goodwill	Palm Beach	4



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12/9/2019	Wraparound coaching-Goodwill	Palm Beach	2
12/20/2019	Wraparound Coaching-Sinfonia	Palm Beach	3

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 continue to work with sixteen 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 of South Florida-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 101 Training and initial coaching session is scheduled for January 9, 2020. 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, currently engaged in the coaching process and Staff attends the Wraparound Learning Community)



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Sinfonia CAT Team (2 staff are ready to be certified as facilitators and 1 coach is 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)

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).

Goodwill (Youth re-entry) (Initial coaching plan developed, policy and procedures and documentation has been updated to align with Wraparound. Initial coaching session took place on 12/3/2019. 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. Staff attends the Wraparound learning community).

New Horizons of the Treasure Coast (Care Coordinators/Adult Case Managers/Peers/Intensive Case Managers. 2 staff are ready to be certified as facilitators and other staff are in the certification process.)

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 second quarter, two case managers were certified as Wraparound Facilitators. The recently certified Wraparound facilitators are providing Wraparound at Henderson Behavioral Health Center in Palm Beach County. By the end of the second quarter there were 46 certified facilitators and 17 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 – 10/10/2019, 11/14/2019

Circuit 19 – 10/17/2019 (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 – 10/17/2019

Circuit 19 – 10/9/2019 (the group voted to hold meetings every other month)

Combined Circuits 15 & 19 – 11/20/2019

SEFBHN monitors Wraparound fidelity throughout the network through data collection, satisfaction surveys, providing organizations with coaching and technical assistance and participating in inter-rater reliability activities.

On 10/22/2019 System of Care Specialist attended a new hire orientation for Communities Connected for Kids child welfare workers to discuss SEFBHN's Wraparound initiative and the provider network offering Wraparound to their youth and families.

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. 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 under Wraparound Initiative. The toolkits are continuously monitored and updated as needed.

An agency-wide shared SEFBHN Training Tracker was established for increased awareness and documentation of identified training needs, upcoming trainings, cross-system trainings, training topics and overall better training integration efforts. Our agency-wide shared PIP (Performance Improvement Plans) and TA (Technical Assistance) Tracker has a tab specific to technical assistance provided to our providers to increase awareness and better communication when multi-staff are involved with a provider.

Forensic Services

1. Care Coordinators continue to assist with the Forensic Specialists, Civil Liaisons and FACT teams with discharge planning and placement from the civil and forensic SMHTF in Circuits 15 and 19.
2. A complete revamping of the C15 Forensic Services was developed after the closure of a large behavioral health provider in September 2019:
The two C15 Forensic Specialists now both work for South County Mental Health Center
Another agency, Multilingual Psychotherapy Center was recruited to service the northern part of the C15 area.
A full-time employee to offer Competency Restoration Education to C15 + C19 has been proposed.
The Housing, Case Management and SSA Payee needs of the forensic consumers who were serviced by the closed center were addressed by linking those consumers to new service providers.
A Civil Liaison position was moved to Henderson Behavioral Health.
Notification to the C15 Mental Health Court Division was done regarding all of the changes in service providers.
3. SEFBHN continues to provide technical assistance to the providers whenever there is staff turnover in the Forensic Specialist or Civil Liaison roles.
4. SEFBHN continues to participate in monthly conference calls with DCF, SMHTF and ME for care coordination efforts.
5. SEFBHN continues to participate in the C15 Re-Entry Task Force meetings.

FACT

- The PSF FACT teams were trained on how to use the Level of Care Utilization System.

- The Henderson Behavioral Health FACT team completed all of the past due concurrent reviews for continued stay or discharge.
- The Henderson Behavioral Health FACT team was helpful with transitioning consumers from a closed behavioral health center that closed in September.
- SEFBHN continued to provide technical assistance to the PSF FACT team regarding the billing and contract requirements: conference calls, in person meetings, emails, etc.
- Discussion with the C19 Public Defender's Office regarding how to enhance the FACT services.

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 two C19 Keeping Families Connected Staffings on 10/30/19 and 12/9/19.

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, there were 4 SST staffings that SEFBHN participated in on 12/10/19, 12/17/19, 12/23/19 and 12/26/19 in C15.

In C15 and C19, SEFBHN implemented QPR-T (Question, Persuade, Refer and Treat) Advanced Suicide Risk Assessment and Management Training trainings with the Community Action Teams (CAT) from Sinfonia Family Services and New Horizons of the Treasure Coast. Trainings were held on 10/2/19 and 10/3/19. A total of 12 CAT Team Specialists were trained in suicide intervention and risk assessment strategies.

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 the review teams scheduled this quarter. C19 Local Review Team meetings were attended on 10/22/19 and 11/19/19; C19 Local Review Team meetings were postponed in December 2019 to January 2020, where they will begin again. C19 Family Systems Manager continues to make the network aware of the resource available for multisystem involved youth.

SEFBHN C15 Family Systems Manager (FSM) continues to participate in monthly/as needed C15 Interagency (Local Review Team) meetings hosted by ChildNet. This quarter, C15 FSM attended 2 Interagency meetings on 11/6/19 and 12/4/19, as well as a child-specific Interagency staffing on 11/13/19. Since raising awareness of this interagency opportunity at Executive Order meetings,



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system partners in the Interagency agreement have decided to review this current process and realign it toward its intended purpose.

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. The Progress Exchange Form has been updated and made available in an electronic format for providers to begin utilizing. Training needs for Child Welfare Professionals and Behavioral Health Providers is another area of focus that has made significant progress this quarter. 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.

In C19, November 2019 Progress Exchange Form aggregate data was submitted to and reviewed by the Integration Steering Committee. In C15, December 2019 Progress Exchange form data was reviewed in January 2020. Training needs were still noted to be needed and the Training workgroup is finalizing the curriculum.

Operationalization of the S.A.F.E. MRT (Support & Advocacy for Family Engagement Mobile Response Team) began this 2nd quarter. Multiple meetings were held with child welfare leadership in each circuit as well as providers involved in this process. In each circuit, decision making trees were developed to support child protection investigators and dependency case managers with input from child welfare leadership prior to finalization.

In Circuit 15, South County Mental Health Center provides the mobile response and had added peers to their team. The peers, when available are providing onsite supports for families involved with child welfare as well as follow-up after mobile team response has occurred. A warm handoff to Rebel Recovery for further child welfare peer support is made within 72 hours when needed.

In Circuit 19, New Horizons of the Treasure Coast and Okeechobee provides the mobile response. A warm handoff to Counseling and Recovery Center for child welfare peer support is also made within 72 hours when needed.

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. Director of Children's System of Care and C15 Family Systems Manager attended a monthly meeting on 10/17/19. SEFBHN has been continuing to participate 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 they can expect when their child is Baker Acted reflecting school, hospital and community treatment and support perspectives. SEFBHN has also been in collaboration with members of the Adolescent Collaborative regarding suicide prevention trainings and working to develop a unified, community response to suicide crises in the child welfare system, as well as in the School District of Palm Beach County.

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 FSM attended one School Health Advisory Council meeting on 10/24/19. C15 meetings for November and December were cancelled; meetings will begin again in C15 in January 2020. There was 1 meeting 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 Care Manager attended Monthly Treatment Team Staffing held at Sandy Pines 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 Community Action Teams (CAT) this Quarter. C19 and C15 Family System Managers co-trained at New Horizons of the Treasure Coast on 10/2/19 and at Sinfonia Family Services on 10/3/19.
- Family Systems Manager provided monthly technical assistance and support to the FIT Team at Counseling & Recovery Center on 10/23/19 and 11/13/19. Technical assistance was also provided to the CAT team at Sinfonia on 10/21/19, 11/12/19 and 12/12/19. 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 Managers provided monthly technical assistance to the FIT Team at Henderson Behavioral Health on 10/29/19 and 12/19/19. as well the CAT team with New Horizons of the Treasure Coast Inc on 10/25/19 and 12/13/19, along with several dates in October, November and December via telephone. 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.
- Family Systems Manager participated in Child Abuse Death Review (CADR) in C15 on 11/21/19 and 12/19/19. C19 Family Systems Manager participated in C19 CADR on 10/24/19 and no other meetings were scheduled up until that date.
- SEFBHN has received funding 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.

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

Waitlist 2nd Quarter FY 20 Update

In the second quarter of this fiscal year, 69 persons were added to SEFBHN's electronic centralized Wait List. Table 1 shows the number of individuals waitlisted during the 2nd quarter by program and listing provider.

Table 1: SEFBHN 2nd Quarter FY 20 Waitlisted Individuals by Listing Provider		
Program	Provider	Distinct Count of Demographic SRI
1 - AMH	59-0711167 - Henderson Behavioral Health	14
2 - ASA	23-7074625 - Drug Abuse Foundation of Palm	21
	59-0711167 - Henderson Behavioral Health	6
	59-1590644 - WaySide House	21
	65-0202835 - Substance Abuse Council of Indian River County	3
5 - ASA and AMH	59-1590644 - WaySide House	4
Grand Total		69

Table 2 displays waitlisted clients by the seven (7) populations that can be derived from the three (3) data fields included in the Waitlist Chapter of FASAMS (homeless, IV drug user, and pregnant). Data is no longer collected on waitlisted clients with child welfare involvement, IV drug users with child welfare

involvement, pregnant women with child welfare involvement or pregnant IV drug users with child welfare involvement. As noted last quarter, reporting will no longer include data on these populations.

Program Area	IV Drug User	Pregnant IV		Homeless IV		Pregnant & Homeless	General Population	Total
		Pregnant	Drug User	Homeless	Drug User			
1 - AMH	0	0	0	7	0	0	7	14
2 - ASA	3	1	0	13	0	0	34	51
5 - ASA and AMH	4	0	0	0	0	0	0	4
Grand Total	7	1	0	20	0	0	41	69
%	10%	1%	0%	29%	0%	0%	59%	100%

Fifty nine percent (59%) of waitlisted individuals were general population, 29% were homeless, and 10% were IV Drug Users.

Residential Level II continues to be the covered service for which individuals are most frequently waitlisted, regardless of program area, as shown in Table 3. SEFBHN clients were also waitlisted for Residential Level 1, Room and Board Level II, and Outreach services. Outreach is not a service with the need for waitlist, so follow up with the listing provider will be pursued to be sure responsible staff are listing individuals accurately.

Program Area	Project	Covered Service	Total
1 - AMH		18 - Residential Level I	6
		19 - Residential Level II	6
	A5 - First Episode Team	19 - Residential Level II	2
2 - ASA		15 - Outreach	2
		19 - Residential Level II	27
	A4 - Care Coordination	15 - Outreach	1
		19 - Residential Level II	21
5 - ASA and AMH		19 - Residential Level II	3
		37 - Room and Board with Supervision Level II	1
Grand Total			69

Table 4 displays the level of care (LOC) evaluation tool used to assess clients prior to waitlisting by program area. Interestingly, 59% of individuals waitlisted for ASA services were assessed using the LOCUS or a Biopsychosocial, with the ASAM used for the remaining 41%.

Table 4: SEFBHN 2nd Quarter FY 20
Level Of Care Evaluation Tool Used for Waitlisting Client by Program Area

Program Area	Level Of Care Evaluation Tool	Total
1 - AMH	1 - LOCUS	2
	3 - BIO Psychosocial	12
2 - ASA	1 - LOCUS	3
	3 - BIO Psychosocial	27
	4 - ASAM	21
5 - ASA and AMH	4 - ASAM	4
Grand Total		69

The recommended LOCs for waitlisted individuals, by program area and LOC evaluation tool, are shown in Table 5. Notably, while 42 persons were recommended for community based services (see yellow highlights), Table 3 shows that only 3 persons were waitlisted for a covered service meeting that LOC standard.

Table 5: SEFBHN 2nd Quarter FY 20
Recommended LOCs by Program Area and Evaluation Tool

Program Area	Level Of Care Evaluation Tool	Recommended Level Of Care	Total
1 - AMH	1 - LOCUS	5 - Medically Monitored Residential Services	2
	3 - BIO Psychosocial	2 - Low Intensity Community Based Services	12
2 - ASA	1 - LOCUS	2 - Low Intensity Community Based Services	2
		3 - High Intensity Community Based Services	1
	3 - BIO Psychosocial	2 - Low Intensity Community Based Services	27
5 - ASA and AMH	4 - ASAM	7 - Clinically Managed High Intensity Residential Services	21
		7 - Clinically Managed High Intensity Residential Services	3
		9 - 3 7 Adults - Medically Monitored Intensive Inpatient Services	1
Grand Total			69

Viewing this divergence between the LOC evaluation and the waitlisted service from another perspective, Table 6 shows the number of individuals who were waitlisted for a covered service that is a part of a different (typically higher) level of care (red highlights). The overall correspondence between the recommended level of care and the covered service for which the client was waitlisted is only 44%, with the range running from 0% correspondence to 100%, as shown in the yellow highlighted column in the table. These findings mirror the ongoing LOCUS-CALOCUS issue of providers' referrals and placements diverging fairly substantially from the LOCs recommended by the evaluation tools. In this case, providers are waitlisting clients for services that do not match the recommended LOCs more than 50% of the time.

Table 6: SEFBHN 2nd Quarter FY 20 LOC Evaluation Tool Recommended LOC Correspondence with Covered Service For Which Client Was Waitlisted							
Program Area	Recommended Level Of Care	Provider Treatment Setting				Grand Total	% Correspondence
		15 - Outreach	18 - Residential Level I	19 - Residential Level II	37 - Room and Board Level II		
1 - AMH	2 - Low Intensity Community Based Services		6	6		12	0%
	5 - Medically Monitored Residential Services			2		2	100%
2 - ASA	2 - Low Intensity Community Based Services	2		27		29	7%
	3 - High Intensity Community Based Services	1				1	0%
	7 - Clinically Managed High Intensity Residential Services			21		21	100%
5 - ASA and AMH	7 - Clinically Managed High Intensity Residential Services			3		3	100%
	9 - 3 7 Adults - Medically Monitored Intensive Inpatient Services				1	1	0%
Grand Total		3	6	59	1	69	44%

Noting that 67% of the individuals waitlisted during the 2nd quarter were either not discharged or their removal was not specified, Table 7 shows the discharge reason for those individuals who were removed from the Wait List. Of the 23 discharged individuals, 19 (83%) were a result of the person receiving services at the listing provider.

Table 7: SEFBHN 2nd Quarter FY 20 Discharge Reason (Outcome) by Program Area		
Program Area	Discharge Reason (Outcome)	Total
1 - AMH	Not Yet Discharged or Not Specified	5
	1 - Receiving Services at this Provider	8
	6 - Evaluation determined that service is no longer appropriate	1
2 - ASA	Not Yet Discharged or Not Specified	37
	1 - Receiving Services at this Provider	11
	4 - Declined	1
	6 - Evaluation determined that service is no longer appropriate	2
5 - ASA and AMH	Not Yet Discharged or Not Specified	4
Grand Total		69

As noted in Table 8, the average length of stay (ALOS) in days for AMH clients was 29 days and 17 days for ASA clients for an overall ALOS of 23 days.

Table 8: SEFBHN 2nd Quarter FY 20 Average Length of Stay on Waitlist (In Days)	
Program Area	ALOS In Days
1 - AMH	29
2 - ASA	17
5 - ASA and AMH	NA*
Grand Total	23

* Not Yet Discharged

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

- Rebel Recovery moved into their new location in November and opened the 1st Recovery Community Center (RCC) in December. They are putting together a full schedule of activities that include trainings, grief groups, art & craft, etc. The RCC is open 7 days a week.
- SEFBHN continues to work with the DCF QI Peer to develop a local Advisory Board. Redevelopment of this Advisory Board will be introduced to the local RCO to flourish and make their own as the peer network is already involved with the RCO's.
- Southeast Florida Behavioral Health network has requested "Drop-In Centers" to begin offering Wellness Recovery Action Plan (WRAP) groups. Four (4) "Drop-In Centers" now provide at least one (1) WRAP Group every three (3) months.
- Drop-In Centers are also providing Peer Support Groups weekly.
- Monthly meetings such as TOCA 2.0, ROSC, Faces & Voices in Recovery attended by Southeast Florida Behavioral Health Network CRPS.
- Ongoing conversation with County of Palm Beach in hiring and Supervision of CRPS staff. One (1) CRPS has been hired through PBC Homeless Outreach Team. PBC is looking to hire four (4) new CRPS's for Outreach purposes.
- Two WRAP Seminar Trainings were held for Wraparound Case Managers and Peers to help them understand the WRAP (Wellness Recovery Action Plan). The trainings held on September 11 -12, 2019 and September 18 – 19, 2019 has a total of 19 people in attendance. Two SEFBHN Service Providers will be facilitating 8 WRAP Trainings and 8 HOH trainings annually for our network.
- 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 Lord's Place has a dedicated ROSC Coordinator which brings a weekly Peer Support Group for all County Peers to attend.
- 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. This Peer Work Group will be shifted to the RCO's with the Southeast Florida Behavioral Health Network Peer to monitor with ongoing technical assistance to those seeking Certification assistance.

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. The following is an example of efforts to assist our consumers in meeting all of their needs.

- A previous IV Drug User that had been pregnant and receiving substance use services. This individual had relapsed and lost custody of her child. She did come back to recovery with the assistance of Peer Support and continued support services awaiting her. She currently has safe, affordable housing and reunification of her child is set for the month of January.

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.
- The following represents the ability assist individuals seeking recovery:

A 24-year old female experiencing homelessness, with alcohol use disorder, diagnosed with severe seizure disorder and syncope was high utilizer of emergency services, with only one (1) support person in place, was desperately reaching for help. PATH engaged her, connected her to a SOAR Dedicated Specialist and completed a claim for her, she was connected to Vivitrol injection for her alcoholism and a voucher request for an Adult Family Home Care facility to monitor her seizures and Syncope. At this time, her SSI claim is at medical review and it is very hopeful she will be approved, her seizures have minimized, and her Syncope is under control.

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 second quarter**

As part of our Zero Suicide Initiative, SEFBHN conducted on-site technical assistance visits at Hanley Center Foundation on November 13, 2019. During the 1st Quarter, Providers were asked to complete an Organizational Self Study and thereby discuss options to incorporate Zero Suicide protocol into the agency's processes. Providing only Prevention services, Hanley Center Foundation was selected to complete the Self Study to explore possibilities of adding and enhancing existing processes to include Suicide Care awareness and education. Hanley Center Foundation completed the Self Study and expressed a desire to enhance their protocol with Suicide Care awareness for staff. The final report was completed and sent out.

There was also an agency contract validation/ monitoring completed with Hanley Center Foundation for contract number:

- PDC19 – Hanley Center Foundation, Inc.

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

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

- Linda Kane provided a presentation on the many program initiatives in the network that are supported with SOR funding. These programs include:
 - The Hospital Bridge Program in Indian River County – linking an individual with a peer and beginning Buprenorphine while in the ER

- The Palm Beach County Jail Program – Offers MAT Induction, Clinical Treatment Services, Peer Services for the inmate while in jail and Linkage to continuing MAT and Community Services upon release from Jail.
- Child Welfare- **MRT SAFE** – Offers the ability to immediately link a parent/caregiver who is the subject of Child Protective Investigation to a Peer from the Child Welfare System and a clinician through the Mobile Response Teams in both Circuit 15 and 19.
- Jennifer Sellars of The Lord's Place gave a presentation on The SOAR referral Process. SOAR is a SAMHSA supported program and is an acronym for SSI/SSDI Outreach, Access, Recovery. SOAR is a program that assists individuals with Behavioral Health Disorders who are also at risk of homelessness to apply for Social Security benefits. The Lord's Place employs SOAR dedicated staff who meet with individuals who potentially meet criteria to be eligible for SOAR services. If the individual meets criteria after an intake assessment is completed the SOAR specialist will move ahead with the application to Social Security Administration. The Lord's Place offers these services to any prospective candidate. Jennifer did point out however that when making the referral to the SOAR Team – the more complete the information, the more streamlined the process will be.
- Barbara Moody provided a presentation on the The Online Application System (OAT). OAT is a secure web-based system that allows SOAR specialists to enter information about the SOAR applications submitted for individuals. The system tracks the outcomes and produces reports that can show the efficacy of SOAR. Barbara also provided a handout published by the SOAR TA Center on Hiring and Supervising SOAR Case Workers.
- Jennifer Branham from CARISK Partners gave a presentation related to accurate data entry to ensure performance outcomes for each individual agency and the network as a whole is accurately reflected. She went over some key issues from DCF Guidance 24 – Performance Measurement Manual. Participants were given a refresher on the individual criteria that must be included for accurate measurement for outcome.

Jennifer indicated that they will pull an AdHoc report after closeout on the 10th to gauge data accuracy. She will arrange to provide individual technical assistance to provider agencies based as needed or requested.

- Jill Sorensen and Jody Olayinka-Lebrun presented a refresher of information provided at CQI meetings over the past year through a Jeopardy Game format. This proved to be an entertaining way to engage all participants while reviewing many important CQI topics. The full game with questions and answers is available at the following link

<https://jeopardylabs.com/play/continuous-quality-improvement-cqi-a-year-in-review#.Xd7iUcl2GzY.mailto>

- 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>



Quarterly Report
For the period: October 1, 2019 – December 31, 2019
Submitted: 1/22/2019

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.

The Indian River Grant actually came to an end on December 31st but DCF granted a No Cost Extension through June 30, 2020 and it is anticipated that additional funding will be made available through an expansion grant beginning 7/1/2020.

Indian River County

On October 1, 2019 Mental Health Court had 20 clients to successfully complete and graduate the Mental Health Court Diversion Program.

We continue to have clients participate in the Rapid Rehousing program and they continue to maintain in the community. This quarter we have had one client approved for Disability and three to become employed on their way to independence in a community setting. We continue to work with other clients in the application process and appeals.

The Transition Houses continue to be a vital part of the program. During the last quarter we had one male and one female transition from each of the homes. The male home was quickly occupied and the female home continues to have two clients in it with another female being considered for it at this time. Peer support services continue to play an important part to the continuity and stability of the client that reside there from assisting with simple independent living tasks to addressing simple disagreements to budgeting for household products.

We continue to work well with our community partners to include New Horizons working in partnership with case management, psychiatric and therapy services. As well as acute care services and the 28 day program. We continue to work with MHA for peer support services to include the Our House program where clients receive social support services. Legacy BHC for our indigent clients who access psychiatric, therapy and case management services. We also heavily utilize the McCabe Connections Center for resources and assistance in applying for financial resources. The TCSHC for assistance with the housing needs of our clients. As well, our housing providers continue to provide this most valuable and necessary service that assists the clients in community living. SAC who provides substance use disorder treatment and drug testing services for our court.

We have begun analyzing cost avoidance with Indian River County Reinvestment grant program. This has been measured by calculating the daily cost of jail, multiplied 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. The below cost avoidance is for the clients who have been in Mental Health Court since January 2017. Calculations as follows:

82 clients with Misdemeanor x average 40 days in jail x \$125.00 average cost per day = \$410,000

168 clients with felony charges x average 98 days in jail x \$125.00 average cost per day = \$2,058,000



Quarterly Report
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250 total clients x 19,774 jail bed days x \$125.00 per day = \$2,468,000 Estimated Cost Avoidance

Okeechobee County

Overall, Okeechobee Mental Health Court has had 50 clients to date. Seventeen clients which have graduated successfully (4 during the last quarter). We have had 6 clients discharged due to non-compliance and 1 pass away due to medical complications. 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 currently have 23 clients enrolled with 10 receiving targeted case management, one client receiving intensive case management and living in an assisted living facility, one client receiving FACT team case management and one client living in a long term care facility. One client is currently in state hospital.

During this quarter, 2 clients had their ROR revoked temporarily due to sanctions for non-compliance. There were no new arrests by clients participating in MHC. We assisted 3 clients with housing. We assisted 2 clients with entrance into a DOC funded residential substance abuse treatment program. We are assisting 4 clients with payment for their outpatient substance abuse treatment at ADAP. Three clients are paying for their own outpatient substance abuse treatment (one at ADAP and 2 at another provider out of county).

11 people were assessed for MHC in the past quarter (2 have officially entered MHC; 1 was sent to state hospital; 3 did not meet criteria and the remaining 5 are still pending).

The MH Court Case manager has created and implemented a participate handbook/resource guide for the Mental Health Court clients.

We have begun analyzing cost avoidance with Okeechobee Reinvestment grant program. This has been measured by calculating the daily cost of jail, multiplied 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:

19 clients with Misdemeanor x average 40 days in jail x \$125.00 average cost per day = \$95,000

31 clients with felony charges x average 98 days in jail x \$125.00 average cost per day = \$379,750

50 total clients x 3,798 days x \$125.00 per day = \$474,750

Consumer Satisfaction Surveys: SEFBHN submitted 1,802 consumer satisfaction surveys in the first quarter of this fiscal year. Second quarter surveys are being entered by staff to submit to DCF by 1/30/2020. SEFBHN staff have received and entered 943 surveys to date.

LOCUS-CALOCUS 2nd Quarter FY 20 Update

LOCUS

As shown in Table 1 below, SEFBHN providers conducted 643 LOCUS assessments in the second quarter of this fiscal year, which is less than half (48%) of the number performed in the first quarter. The closing of The Jerome Golden Center in the second quarter explains this drop in assessments (as JGC accounted for 728 LOCUS evaluations in the first quarter).

Table 1: SEFBHN LOCUS Assessments - 2nd Quarter FY 20

Provider	Oct	Nov	Dec	Grand Total
BEHAVIOR BASICS, INC.	1	5	1	7
HENDERSON BEHAVIORAL HEALTH - SEFBHN	6	26	2	34
JEFF INDUSTRIES INC	7		3	10
NEW HORIZONS OF THE TREASURE CO - SEFBHN	168	121	126	415
SOUTH COUNTY MENTAL HEALTH CENTER	31	57	23	111
SOUTH FLORIDA STATE HOSPITAL	3	4	3	10
THE JEROME GOLDEN CENTER	41		15	56
Grand Total	257	208	173	643

Fifty-nine percent (59%) of the LOCUS assessments recommended Medically Managed Residential Services, which corresponds to Acute Care (crisis stabilization) and SMHTF services, as shown in Table 2. NHTC accounted for 98% of the LOCUS evaluations recommending LOC 6. The second most frequently recommended LOC in the 2nd quarter was LOC 2 – Low Intensity Community Based Services with 23% of the total.

Table 2: SEFBHN 2nd Quarter FY 20 LOCUS Recommended LOCs by Provider

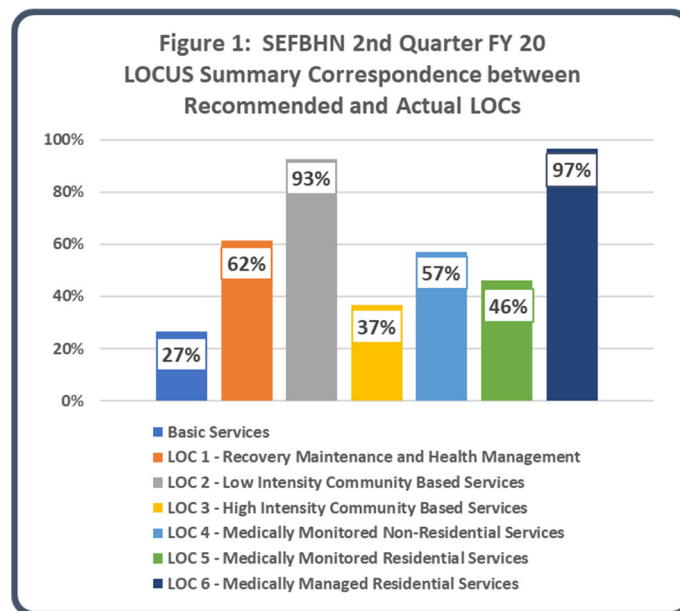
Recommended LOC	Provider							Grand Total	%
	BB	HBH	JEFF	NHTC	SCMHC	SFSH	JGC		
Basic Services	4		2	4	1		4	15	2%
LOC 1 - Recovery Maintenance and Health Management	1	3		3	3		3	13	2%
LOC 2 - Low Intensity Community Based Services		5	8	10	98		30	151	23%
LOC 3 - High Intensity Community Based Services	1	9		3	5	3	9	30	5%
LOC 4 - Medically Monitored Non-Residential Services		4		4		5	1	14	2%
LOC 5 - Medically Monitored Residential Services	1	11		16	3	2	6	39	6%
LOC 6 - Medically Managed Residential Services		2		375	1		3	381	59%
Grand Total	7	34	10	415	111	10	56	643	100%

The correspondence between the LOCUS recommended LOC and the provider-selected Actual LOC can be understood by analysis of the number, and type, of variances chosen by providers. As shown in Table 3, while the overall variance rate for all LOCUS assessments performed was 13%, the rate ranged from 0% at two providers up to 65% at Henderson Behavioral Health, with two other providers have a variance rate of 29%.

Table 3: SEFBHN 2nd Quarter FY 20 Summary of LOCUS Variances by Provider

Reason for Variance	Provider							Grand Total
	BB	HBH	JEFF	NHTC	SCMHC	SFSH	JGC	
Client chose a LOC other than the one recommended		1					3	4
Client refuses recommended level		1					1	2
Client's finances/job deter treatment level		2						2
Clinical Judgment	1	18		38	6		7	70
Services at recommended LOC not what client needs	1			1			5	7
Total Variances	2	22	0	39	6	0	16	85
No Variance	5	12	10	376	105	10	40	558
Grand Total	7	34	10	415	111	10	56	643
Variance %	29%	65%	0%	9%	5%	0%	29%	13%

Figure 1 and Table 4 present another way of viewing the correspondence of the LOCUS-recommended LOCs versus the provider-identified Actual LOC by showing the degree to which providers diverged from the LOCUS-recommendation for each LOC.



The lowest correspondence occurred for Basic Services with providers agreeing with the LOCUS recommendations only 27% of the time. The greatest correspondence is at LOC 6, Medically Managed Residential Services, with 97% agreement.

Table 4: SEFBHN 2nd Quarter FY 20 Correspondence between LOCUS Recommended and Actual LOCs

Recommended LOC	Actual LOC							Grand Total	% Correspondence
	Basic Services	LOC 1	LOC 2	LOC 3	LOC 4	LOC 5	LOC 6		
Basic Services	4	9	1	1				15	27%
LOC 1 - Recovery Maintenance and Health Management		8	3		2			13	62%
LOC 2 - Low Intensity Community Based Services		5	140	1	5			151	93%
LOC 3 - High Intensity Community Based Services		2	5	11	11	1		30	37%
LOC 4 - Medically Monitored Non-Residential Services		1	2		8	2		14	57%
LOC 5 - Medically Monitored Residential Services		3	7	4	7	18		39	46%
LOC 6 - Medically Managed Residential Services		1	10	1		1	368	381	97%
Grand Total	4	29	168	18	33	22	368	643	60%

Another conclusion to be drawn from Table 4 is that provider staff are not following assessment administration protocols when it comes to evaluating and testing the accuracy of their own evaluations. Providers are instructed that, at any time a LOCUS-recommended LOC is more than 1 LOC away (one step higher or lower) from what the provider thinks is correct (actual LOC), they need to redo their evaluation because the discrepancy indicates that they have not scored the client accurately. These instances provide one of the best learning opportunities available for providers to improve their LOCUS administration skills.

Table 4 shows that, for every Recommended LOC, providers chose actual LOCs more than one step higher or lower – all without undertaking the directed review of their own evaluations. For example, for the LOCUS recommended LOC 3 High Intensity Community Services, providers chose LOCs as low as LOC 1 and as high as LOC 5. For LOC 6 Medically Managed Residential Services, providers chose Actual LOCs as low as LOC 1 – 5 steps below the LOCUS recommendation.

Given that the dual goals of increasing the accuracy of the LOCUS assessments performed by SEFBHN providers while maintaining variances within 10%, these findings demonstrate that SEFBHN and Carisk Partners need to continue their fidelity and quality monitoring, technical assistance with provider staff and supervisors, and trainings.

CALOCUS

Two SEFBHN providers – New Horizons of the Treasure Coast and The Jerome Golden Center - performed 263 CALOCUS assessments during the second quarter of this fiscal year, as shown in Table 5.

Table 5: SEFBHN CALOCUS Assessments - 2nd Quarter FY 20

Providers	Oct	Nov	Dec	Grand Total
NEW HORIZONS OF THE TREASURE COAST	99	85	73	257
THE JEROME GOLDEN CENTER	6			6
Grand Total	105	85	73	263

Table 6 shows that LOC 6 – Medically Managed Residence Based Services – was the recommended LOC in 97% of these CALOCUS Assessments, with NHTC accounting for all assessments with this recommended LOC. And, every CALOCUS assessment performed by NHTC resulted in this one recommended disposition.

Table 6: SEFBHN 2nd Quarter FY 20 CALOCUS Recommended LOCs by Provider

Recommended LOC	Provider			%
	NHTC	JGC	Grand Total	
Basic Services for Prevention and Maintenance		2	2	1%
LOC 1 - Recovery Maintenance and Health Management		1	1	0%
LOC 2 - Low Intensity Community Based Services		1	1	0%
LOC 3 - High Intensity Community Based Services		1	1	0%
LOC 5 - Medically Monitored Residence Based Services	1	1	2	1%
LOC 6 - Medically Managed Residence Based Services	256		256	97%
Grand Total	257	6	263	100%

Additionally, Table 7 shows that NHTC used 0 variances, and Table 8 shows that their correspondence between the CALOCUS-Recommended LOC and the provider-selected Actual LOC was 100%.

Table 7: SEFBHN 2nd Quarter FY 20 CALOCUS Variances by Provider

Reason for Variance	NHTC	JGC	Grand Total
Clinical judgment		3	3
Total Variances	0	3	3
No Variance	257	3	260
Grand Total	257	6	263
Variances %	0%	50%	1%

Table 8: SEFBHN 2nd Quarter FY 20 Correspondence between CALOCUS Recommended and Actual LOCs

Recommended LOC	Actual LOC						Grand Total	% Correspondence
	Basic Services	LOC 1	LOC 2	LOC 3	LOC 5	LOC 6		
Basic Services for Prevention and Maintenance		2					2	0%
LOC 1 - Recovery Maintenance and Health Management		1					1	100%
LOC 2 - Low Intensity Community Based Services			1				1	100%
LOC 3 - High Intensity Community Based Services				1			1	100%
LOC 5 - Medically Monitored Residence Based Services				1	1		2	50%
LOC 6 - Medically Managed Residence Based Services						256	256	100%
Grand Total	0	3	1	2	1	256	263	75%

These results indicate that the CALOCUS is may not be being administered correctly by the NHTC staff. It would be unusual in which 256 assessments, administered over a 3 month period, would all result in the same Recommended LOC, zero variances, and the matching Actual LOC if the CALOCUS assessments were being performed accurately.

Carisk Partners will meet with the clinicians conducting these assessments during January 2020 to assist NHTC staff in identifying how they are misapplying the CALOCUS tool and in improving the accuracy of their assessments in the future. Carisk and SEFBHN will also continue to encourage other children's providers to begin use of the CALOCUS as part of our expanded training initiative, scheduled to begin in February 2020.

(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 revisions to any plans were made during the second quarter

(4) Network Management Activities:

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

Fourteen amendments; one new subcontracts; and, two new agreements were completed during the second quarter. The documents can be found in the Provider E-Contracting System and are listed as follows:

Amendments

ZDA14 – Counseling and Recovery Center, Inc.
PDA52 – South County Mental Health Center, Inc.
LNC05 – Legacy Behavioral Health, Inc. (Amendment #001)
PNF23-1619 – JFK Medical Center Limited Partnership d/b/a JFK Medical Center North Campus
ZNC16 – HPS, Helping People Succeed, Inc.
LNC05 – Legacy Behavioral Health, Inc. (Amendment #002)
PDA48 – Drug Abuse Foundation of Palm Beach County, Inc.
PDA56 – Rebel Recovery Florida, Inc.
PDA51 – Wayside House, Inc.
PNA31 – South County Mental Health Center, Inc.
LTF10 – Henderson Behavioral Health, Inc.
PDA47 – Ebb Tide Treatment, LLC
PTF03-1619 – The Jerome Golden Center for Behavioral Health, Inc.
AGR36 – South County Mental Health Center, Inc.

New Subcontracts

ZTF13 – New Horizons of the Treasure Coast, Inc.

New Agreements

AGR34 – University of Florida Board of Trustees for the Benefit of the Department of Psychiatry, College of Medicine, University of Florida
AGR36 – South County Mental Health Center, Inc.

Termination

N/A

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

- As a Guest Reviewer, one SEFBHN staff member participated in the DCF contract monitoring of the Central Florida Behavioral Health Network, Inc. in the Suncoast Region during the week of December 9-13, 2019. This opportunity allowed the SEFBHN team to learn about the ME monitoring process and how that region works to overcome any barriers. Also, the use of the monitoring tools was helpful to understand the expectations set by DCF and the process provided clarity regarding the DCF initiatives.
- SEFBHN and the FL LINC Project collaborated to create messages to reduce the stigma of suicide with education and training throughout the network since the grant's inception in FY 14/15. The grant ended September 30, 2019.
 - The collaboration sunsetted with 11 provider agencies completing an assessment of their awareness of Suicide Prevention. With the exception of Hanley Center Foundation all of these reviews occurred in the 1st quarter. As part of the Zero Suicide initiative, a Zero Suicide Organizational Self-Study was requested completed by the following 11 agencies:
 - PNA31 – South County Mental Health Center, Inc.
 - ZNC24, ZTF13 – New Horizons of the Treasure Coast, Inc.
 - ZDA14 – Counseling and Recovery Center, Inc.
 - LDC07 – Drug Abuse Treatment Association, Inc.
 - PNC26 – Sinfonia Family Service of Florida, Inc.
 - ZNC25 – Tykes and Teens, Inc.
 - PDA51 – Wayside House, Inc.
 - LNC05 – Legacy Behavioral Health Center, Inc.
 - PNC25 – Father Flanagan's Boys Town Florida, Inc.
 - ZNC16 – HPS, Helping People Succeed, Inc.
 - PDC19 – Hanley Center Foundation, Inc.
- With the completion of Hanley's Zero Suicide Initiative assessment and review, SEFBHN moves to incorporating Suicide Prevention measures and processes into the qualitative review of all agencies.

Children's System of Care

During the second quarter a total of 299 children and youth received prevention and treatment services through system of care. Forty-one new referrals were received, and thirty-three children and youth were enrolled in treatment services while six children and youth were discharged. At the start of the quarter, 276 youth were being served and at the end of the quarter, 293 were being served. The following is a summary of activities that occurred during the second quarter.

- Okeechobee County SOC staff worked on the goal of increasing awareness and reducing the stigma mental health disorders and substance abuse and mental illness. The New

Horizons wraparound case manager and community therapist continue having conversation with school personnel about the system of care including the implementation of wraparound as an effective approach to case management. Staff actively participate in activities hosted by the SOC. As an agency, New Horizons has a radio show each week where they discuss a variety of mental health topics, such as trauma informed care, depression, suicide, and more. New Horizons also uses social media as a tool to start conversations about mental health. The SOC has an active presence on social media, putting positive quotes and providing relevant mental health information to followers. Members of the SOC met with Freshmen students for world mental health day. Additionally, SOC staff attended the annual high school homecoming game to provide information about the SOC service to attendees. SOC Site Coordinator met with the ministerial association several times over the course of the quarter to discuss collective impact and the possibility of moving forward with events and activities in partnership. In December SOC and partners provided stress relief to college students at IRSC.

- In the western communities of Palm Beach County (also referred to as the Glades) Federation of Families worked on the goal of creating a safe environment where families and youth actively participate in the development, implementation, and evaluation of the system of care. The Federation looked for creative ways to expand their work. They identified additional space, and entered into an agreement with the Belle Glade Housing Authority to lease additional space for \$1.00 per year to provide additional services in collaboration with other system partners. They will open the center at 19 Everglades Street, Belle Glade, FL in the 3rd quarter and will continue to look for partnership opportunities with other community and faith based organizations in the Glades area.
- SOC providers also utilized some non-traditional in the second quarter. In Okeechobee, children and teens who attend the peer support days, were invited to attend a party with Santa at Our Village Okeechobee. Children and their families were treated to a visit with Santa, treats and moms were able to “shop” for clothing items donated by a LulaRoe consultant. Peer support kids were also invited to return the following week for “shopping at Our Village” where they were able to select gifts for their families and themselves with Reindeer bucks. Eighteen families were served, some of whom were referred in by agencies serving their needs.

In the Glades, the Federation of Families parents were awarded the “Woosa Parent Retreat” grant this quarter from Healthier Glades. A Federation dad and his daughter won a Healthier Glades mini grant for Healthier Living and Youth Leadership which includes therapy rabbits. They will be hosting a retreat in April. Our teens applied for the Dare to Dream grant and were awarded this in December. They plan to host a basketball tournament for youth with behavioral issues. This will be held in the Spring. The annual Holiday party, complete with a buffet dinner, youth decorated hall, and youth playing Santa with gifts for all, provided an evening of fun for our families and community partners.

- The Glades System of Care conducted 3 full coordinating council meeting and Okeechobee SOC conducted 2 full meeting. Both areas report participation by Family and Youth, Community Based Care, Dept of Juvenile Justice, Children’s Mental Health Providers, Primary Health Care Providers, Faith Based representatives, Local Law Enforcement and SEDNET/Education representatives.

- Social Marketing/Public Education included the following activities:
 - The Okeechobee Children’s Mental Wellness Facebook page has 735 people who like the page and engages an average of 600 people per day.
 - New Horizons participates in a weekly radio show which is broadcast in Okeechobee.
 - In Okeechobee the SOC site coordinator participated in the universal screening process and educated teams at the secondary level about local services available such as wraparound, and peer support groups. A brochure available in English and Spanish has also been provided to families. Those meetings continue in the new year.
 - In the Glades, two parents participated in the Federation of Families National Conference. They attended both as parents and exhibitors about Open Table and wraparound and how the programs are enhancing the system of care in the Glades communities. Additionally, in the Glades they have started a photography club. Youth are mentored by a local photographer and are learning a trade in the process.
 - In Okeechobee a partnership was developed with the Health and Safety Expo (which draws an older crowd) with a Touch a Truck children’s event. The event will take place in January, but SOC staff attended planning meetings to work out the details. The hope is to attract a younger crowd to the Health and Safety Expo and thus provide more families with information about the SOC at the event.

Prevention Activities

- The Network Prevention Manager continues to meet monthly with ME Prevention Managers and DCF state Prevention Clinical liaison. The team met in Tallahassee, FL for the semi-annual face-to-face on October 24, 2019.
Discussed Agenda items included:
 - Program Guidance Document 1 for Managing Entity Contracts
 - Prevention Guidance Document 10 for Prevention Services
 - Performance Based Prevention System (PBPS) Crosswalk
 - Training Needs
- 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 monthly 2-way conversations between the ME and the Prevention funded. During the months of October - December 2019 conversations continued to center around updates to the
 - FL LINC Zero Suicide Organizational Quality Self-Evaluation
 - Discussions Surrounding
 - Validations / Monitorings
 - Prevention Monitoring Tool
 - Performance Measures Outcomes doc

- Needs Assessment and Community Action Plan Upcoming reviews
 - Individual CARF Review Findings
 - New Enhancements to the Fiscal Reporting and Data Collection systems,
 - Performance Based Prevention Systems (PBPS)
 - Data Collection Upgrades
 - PBPS Invoicing Tool
 - Substance Abuse Skills Prevention Training (SAPST)
 - ACEs and their impact on Youth / Adult behavior
- The SEFBHN Prevention Team additionally continued discussions around the development of resources and promising program initiatives which address the emerging Vaping concerns expressed by Community leaders, parents and this ME's Counties' school officials.
 - Coalitions created Community conversation opportunities
 - School-based providers engaged parents in PTA, SAC and PTO events.
- This 19-20 FY, the Network Prevention Manager continues to train and develop skills to assist in the writing of Prevention Contracts and Amendments, completion of Prevention agencies' Risk Assessments and the completion of Validations/ Monitorings.
 - During this 2nd quarter of FY 19-20, the Network Prevention Manager worked with the Compliance Administrator to complete Risk Assessments for Prevention-funded agencies.
 - During this 2nd quarter, Network Prevention Manager also completed the Validation/ Monitoring for Hanley Center Foundation.
 - During this 2nd quarter, Validation/ Monitoring conversations were initiated with Substance Abuse Council of Indian River County (SACIRC) to plan the Validation site-visit on January 22-23, 2020.
- This Network Prevention Manager completed Hanley Center Foundation, Inc. (HCF) Zero Suicide Self-Evaluation; reviewing HCF's completion of self-assessment, and policies and procedures relevant to processes for staff trainings in Suicide Prevention. The Technical Assistance visit was informative and provided information, direction and guidance needed for HCF to develop an agency-wide awareness and protocol to address youth, parents, community and school partners who desire information about suicide prevention.
- During the months of October – December 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) continued community and school alternative activities with the Teen Coalition-In-Action (CIA) conducting scheduled Teen Vaping sessions. PBCSAC also conducted #Teen Talk events for this 19/20 School Year. #Teen Talk is an interactive event where Teen CIA lead conversations with parents, community members, teachers and law enforcement regarding a solution focused approach to e-cigarette use, underage drinking and other drugs event for this 19/20 School Year.

- PBCSAC implemented their first Youth Teen Summit. It was held at their location at the Children’s Services Council Office in Boynton Beach, FL on October 12, 2019. 65 youth were served and participated in the all- day event.
- PBCSAC began the PBC Schools poster contest. Last year’s contest had as many as 750 entries, whereby the top 5 in Elementary, Middle and High School were recognized. A partnership with the South Florida Fair allowed the display of the top 75 entries. The contest began October 23, 2019. Posters were submitted and judged, with winners selected on December 16, 2019. Those selected winning posters and top 75 entries, again, will be on display at the South Florida Fair, during the last 2 weeks of January 2020.
- PBCSAC has begun its work on a Vaping Task Force. One of its goals is to create a Logic Model which will provide data and information to Palm Beach County surrounding these issues.
- PBCSAC initiated this School Year’s “Friday Night Rivals” where the Coalition on Wheels (COW) travels and sets-up tents with outreach tables, chairs and fun youth activities at the following locations and dates. PBCSAC, also, honors responsible teens with certificate at Halftime of the rival football games.
 - The 2019 Schedule
 - 8/29 Palm Beach Central High at Dwyer High School in Palm Beach Gardens, FL.
 - 9/27 American Heritage School at Benjamin High School in Palm Beach Gardens, FL.
 - 10/11 Clewiston High School at Cardinal Newman High School in West Palm Beach, FL.
 - November Palm Beach County Play-off games
- PBCSAC continues the work to complete the implementation and execution of the following goals yet to be completed, as 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.
 - Other initiatives have been executed and are being implemented by Community partners of the Coalition:
 - Creation and Development of an Opioid Education and Support Group, which was actually made possible after the acquisition of funding from Palm Beach County to initiate the Project C4OPE project with Hanley Center Foundation.
 - Advocation and Encouragement of the implementation of Botvin Life Skills curriculum in schools where there is no SAMH Prevention ~ or ~ the addition of 15-minute Opioid Prevention Message to existing Prevention programing.

- Martin County Board of County Commissioners and PBCSAC continue to partner. They, too, continued community and school alternative activities with their Teen Coalition-In-Action (CIA) who, continue work on their Martin County Schools Youth Teen Summit.
 - That group, too, has continued their work started during the 4th quarter FY of 18/19 on an ordinance they plan to present to the Commissioners to raise the smoking legal age to 21 in Martin County.
- Okeechobee Substance Abuse Coalition – continued their Fall School events, holding Friday Night Done Right outings at sites partnered with community partners to create safe drug free places and activities for Okeechobee Schools and Community. They are continuing to work with the Okeechobee County System of Care initiative.
- Roundtable of St. Lucie County – Substance Abuse Prevention Network Committee - continues working closely with the St. Lucie County Behavioral Health Task Force.
 - Roundtable continues to work with community partners within their county to provide safe and drug-free back to School events and activities.
 - Their Executive Director and the Network Prevention Manager co-chair the Behavioral Health Task Force which has engaged representation from the St. Lucie County School, Children’s Services Council, Treatment Centers, DJJ, DOH and other County Coalitions.
 - The short- term goal of the task force is to continue to partner with Community partners 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.
- Substance Abuse Free Indian River (SAFIR) sponsored a return engagement of the Marijuana forum held in Vero Beach on April 12th. Ed Shemelya from High Intensity Drug Trafficking Areas (HIDTA) presented at the Richardson Center at Indian River State College, Mueller Campus, in Vero Beach, FL. The fall Marijuana Forum was held from 8:00 am – 4:30 pm. on October 22, 2019. They reported having 70 community participants in attendance. 7.5 CEU’s were given to some participants attending the Forum.
 - SAFIR worked with community partners within their county to provide safe and drug-free Back to School events and activities.
 - 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.
 - SAFIR continues to implement the environmental strategy, “No One’s House” in partnership with Substance Abuse Council of Indian River (SACIRC).
 - SAFIR continues their Fall implementation of the Coffee and Conversation parent-to-parent forum, in partnership with Substance Abuse Council of Indian River (SACIRC).
- All SEFBHN Coalitions continue developing Youth Coalition Teams / Teen Coalitions In Action, during this 2nd quarter of FY 19/20.

- 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) continued their implementation of the Botvin LifeSkills Training school-based program in Palm Beach County's Coastal and Western Communities. During this 2nd Quarter, HCF continued their work with 8th, 9th and 11th grade program implementations in schools with whom they made agreements during the summer and the beginning of FY 19/20. HCF plans to continue the transition of some of their schools from Allstars and Alcohol Literacy Challenge (ALC) to Botvin LifeSkills Training (LST).
 - New Horizons of the Treasure Coast (NHTC) has, too, successfully continued its implementation of "Too Good For Drugs / Violence" in 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. This 2nd Quarter of FY 19/20, they have begun to transition some of their schools from "Too Good For Drugs / Violence" to Botvin LifeSkills Training (LST).
 - Tykes & Teens, has, also, successfully continued with their 2nd Quarter implementations of Botvin LifeSkills Training (LST) school-based program in Martin County Elementary Schools. They plan to, again, implement the Elementary Program with all Martin County District Schools 4th and 5th graders.
- Substance Abuse Council of Indian River (SACIRC) continues the 2nd Quarter implementations of 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.
- SACIRC provided special "Vaping Education and Facts" Presentations to which parents were invited to attend:
 - On November 6th, the presentation was geared toward and implemented with High School students
 - November 13th, the presentation was geared toward and implemented with Middle School students
 - Due to the success of the presentations, SACIRC is discussing new dates and locations in Spring 2020, for both the High School and Middle School presentations.
- The Network Prevention Manager has been selected as Co-Chair of the Circuit 15 Juvenile Justice Advisory Board, and continues this work and partnerships, alongside Community partners, committees and alliances. Meetings continue to address the goals and work for FY 19/20; 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 19/20 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 continues to work on the needs assessment and plan to address the workforce and sustainability of the plan.
 - The 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 2nd quarter's discussions centered around having an effective "single message" going out from the Prevention Community; the state and county initiatives which address the Opioid crisis and emerging Marijuana Vaping; and overall increases 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.
 - SEFBHN Network Prevention Manager, Provider and Coalition discussions continue 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, community stakeholder, and the network service providers (NSP). Three NSPs: New Horizons of the Treasure Coast, JFK North, 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 and leveraging resources to facilitate access to care. During the 2nd quarter there were 57 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 acute care admissions and incarceration. Through care coordination involvement the consumer was enrolled in case management and placed on long acting injectable medication.
 - 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.. Various vouchers were used for housing subsidies, pharmaceuticals, clothing, and transportation.
 - In the 2nd quarter, SEFBHN approved 87 transitional vouchers – 52 for substance use and 35 for mental health. This is compared to 78 transitional vouchers for the prior quarter. Vouchers were used for housing subsidies, pharmaceuticals, clothing, and transportation. The electronic transitional voucher application form continues to be refined for ease of use and efficiency. Additionally, conceptualization and operationalization of outcomes tracking continues to be tested and refined with the goal of being able to accurately and effectively

determine challenges with vouchers and improve outcomes for voucher recipients. This process has been recognized as an Innovative Initiative by the 6 other Managing Entities and has been adopted by several of them with assistance from the SEFBHN Network Integrity Manager.

- The Coordination of Care Module remains fully operational. Carisk Partners added a feature to the module that will enable the ME to collect information concerning the citizenship status of consumers.
- SEFBHN Care Coordination staff continues to facilitate a regularly scheduled monthly interdisciplinary care coordination meeting with staff persons from JFK North, South County Mental Health Center, New Horizons of the Treasure Coast and Okeechobee. 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: Level of Care Utilization System (LOCUS) and Social Security Administration verification processes. These meetings continue to offer provider and SEFBHN staff an open forum to discuss service trends, systems gaps, community resources, and treatment barriers.
- The SEFBHN Network Integrity Manager continues to oversee deployment of ASAM Continuum across the network as well as engaging with national ASAM Continuum User group and development team to provide feedback about the software and assisting with correcting technical issues when they arise. Network providers continue to be provided with access to immediate technical assistance regarding ASAM Continuum. Expanded biweekly care coordination calls continue to be held, with particular emphasis on ensuring the new MAT and Peer Services (MAPS) Program in the Palm Beach County jail is able to effectively transition individuals directly to services in the community once they are released from the jail. This collaborative effort has assisted with developing pathways for consumers leaving the jail in anticipation of their graduation from the program. Weekly calls continue to be held directly with Ted's 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. 43 individuals received services at Ted's Place in the 2nd quarter. Of those who discharged from Ted's Place during that time, 78% of them were successfully linked to treatment services (down from previous quarter's 87% due to a group of individuals leaving against staff advice in November) with an average stay of 15 days (compared to last quarter's 16 days).
- Family Systems Managers initiated a monthly Care Coordination Meeting for the Network's Community based Children's Providers, Community Base Care

Agencies (CBC), Children's Crisis Unit's, DCF, DJJ, and Managed Care representatives along with Mobile Response Team to meet and discuss ways to improve our care coordination efforts, make referrals to the Local Review Teams, utilize the Care Coordination Module, Address Challenges within the Network, and discuss relevant topics that affect our High Utilizers or complex cases. The meetings held this quarter were 10/16/19 and 12/18/19. The meetings are held via conference call. The October meeting discussed the Network's implementation of Trauma Informed Care and the importance of engagement. The meetings are held monthly on the 3rd Thursday of the month from 10-11:30pm.

Housing Activities

Due to the Jerome Golden Center closing, 44 (Forty-Four) consumers needed to be relocated to safe, affordable housing. The most vulnerable persons were placed into Adult Family Care Homes and Assisted Living Facilities, with continuing MH services.

- SEFBHN staff assisted with all the moves. Discussions were held with the consumers and family members, visits to potential housing, and client voice were taken into account prior to the moves and placement.
- Some consumers needed furniture and all around basic human needs.
- Meeting with Landlords, requesting price reductions for those who live on a fixed income, and determining "the right fits" for all the individuals were crucial to this level of transition. Between the months of October 2019 – January 2020, consumers were assessed, engaged by Mobile Response staff over weekends and holidays,
- Seeking "outside the box" type living arrangements, created new-found friendships and community supports.
- Peer support was provided from the ME Level, with an open communication line through 211, Mental Health America Palm Beach County and NAMI collaboration. Individuals and any Jerome Golden Center consumers seeking assistance for continuing services were linked with a Peer support through MHA. The Peers provide support, linkage to services and as well as other resources needed to help maintain their recovery.
- SEFBHN continues to work with Network Providers to expand services and create new programs to fill the gap from the closing of the largest Mental health Provider in Palm Beach County.
- Some residents found that they were able to navigate systems that they believed they were unable to navigate in the past, creating self- support and self -determination. Family members that were not involved, are now stepping up to support as well.
- To date- zero consumers impacted by this closing has been reported homeless, not connected to Case Management or Psychiatric services or without support services.
- Housing Specialist has teamed up with ALF owners that own single-family houses and willing to rent them out with utilities included. There are options available through this opportunity that will open new beds for Forensic persons.
- Oxford House has allowed several Co-Occurring consumers, primary mental health.
- Housing Specialist has been invited to sit on the PBC CoC Board. With this position, Housing Specialist/SOAR Local Lead will be utilized to bring SOAR into PBC CoC Partners.

- 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 attends a weekly Acuity meeting with the Palm Beach County CoC staff and Providers.
- Housing Specialist attends a monthly Community Engagement Committee Meeting involving Engagement Teams throughout Palm Beach County.
- Director of Network Integrity attended the Supportive Housing Summit in Orlando, Sept. 23-24th, 2019 and participated in one of the workshops on the Managing Entity Panel. The workshop highlighted all the different programs, assistance and collaboration that take place with the ME Housing coordinators.
- 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.
- 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. At the September HHA meetings, the committee's voted to change the makeup of the Executive board and as well as add 5 slots for people with lived experience. The HHA Board met in December to readjust the changes to the Executive Board after it was determined that all but two board members would have to rotate off due to term limits. It was decided that only 1/3 of the board would rotate off each year, thus extending some terms. The SEFBHN position remains on the HHA Executive Board.
- 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 has been approved and will be presented to the Board of County Commissioners in 2020.
- 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 attends a Quarterly Government meeting which Social Security Administration, Homeland Security-Immigration and Citizenship, Palm Beach County Tax Collectors Office, Vital Statistics Office, Department of Children and Families, and Libraries.
- Housing Specialist has met with Oxford Housing staff to assist in developing relationships and provide referrals.

- Housing Specialist explained the lack of housing in Martin and St. Lucie Counties to Oxford Houses and they are looking to open 2 houses in Martin.
- Housing Specialist attends monthly seeking placement conference calls
- Housing Specialist completed 15 Assisted Living Facilities site visits.
- October 1, 2019 ALF annual meeting invitation where two ALF Owner Operators attended. ALF Owner and Chair of ALFA, Roshni Lakram and assistant. Housing Specialist has been invited to attend November 21, 2019 at 11:30am next Treasure Coast ALF meeting. The information provided during the meeting has been distributed by ALFA Chair to other ALF Owners.
- 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 CJMNSA Reinvestment Grant which runs from January 2017 through January 2020. 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 TCHSC 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.
- Housing Specialist working closely with SOAR State and National Team Leads to clean up OAT users, to ensure cleaner outcomes.

- 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.
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Opioid Addiction Services/Medication Assisted Treatment/Substance Use Disorder

- 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. Substance Awareness Center of Indian River County and Treasure Coast Community Health and Cleveland Clinic Indian River Medical Center in Vero Beach started their program offer a buprenorphine induction in the hospital to opioid overdose patients with linkage to a peer and continuing MAT services. The program includes a connection to peers, continuing MAT at TCCH and substance abuse treatment at SACIRC. The program started on Oct. 7, 2019 and has a few individuals opt into treatment.
- 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 continued to oversee implementation of SOR grant data reporting requirements which has involved ongoing technical assistance to providers as early issues with the WITS data system have been worked out in cooperation with FEI and DCF staff. Technical challenges with the WITS data system continue to be reported and addressed. Among the major challenges currently impacting SOR grant oversight is the lack of ability for SEFBHN Network Integrity Manager to view data submitted by SOR providers in the WITS system.

- The Network Integrity Manager has continued to oversee the deployment of the ASAM Continuum system across the network of Substance Use Disorder treatment providers. This has involved a high level of support and technical assistance to help provider overcome the technical, logistical and clinical challenges involved in with this implementation. Challenges with integrating ASAM Continuum into clinical workflows and duplication of effort continue to be reported by providers and feedback has been gathered and discussed with national ASAM Continuum development team through multiple channels including quarterly ASAM Continuum User Group conference call. The ASAM Continuum development team also facilitated a direct conference call with the SEFBHN Network Integrity Manager to receive feedback.
- Southeast Florida Behavioral Health Network, Inc., in collaboration with the Palm Beach County Sherriff'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. On October 1, 2019, SEFBHN providers Rebel Recovery and TRRN started offering clinical and recovery support services with MAT to inmates at the PBSO West Detention Center in collaboration with Wellpath and PBSO. By the end of December, the MAPS program had 34 inmates enrolled with an additional 18 participants ready to be moved into the program. The MAPS program is currently offered to males with the intention of opening a woman's program within the first 4 months of 2020.

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

No Adverse fiscal impact during the second quarter

(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.
 - **The Lord's Place** – The PIP is closed.
 - **South County Mental Health Center** – The PIP for the NAVIGATE program was received and accepted. A Peer and a Supported Employment Specialist was hired. Additional documentation has been submitted and pending review. It is anticipated that the PIP will be closed during the third quarter.

- **Ebb Tide Treatment, LLC** – Ebb Tide is on-track with their PIPs and showing improvement in administrative areas sighted in the report. For the time period of this report, the PIPs are still open however, it is believed these will be able to close soon as only minor clarifications are still needed on documentation submitted for review. A desk review is scheduled for January 2020 to confirm if PIPs will be ready to fully close.
- **211 Palm Beach/Treasure Coast, Inc.** – The PIP was closed in December after the agency submitted a tool they would be using to track employee information to include staff training and background clearances.
- **Father Flanagan’s Boys Town Florida, Inc.** – PIPS were requested for clinical and administrative concerns. The administrative PIPS are now closed but we are still working with them on the clinical findings related to Suicide Care Services, as well as administering training for staff on discharge planning and strength-based language in documentation.

SEFBHN understands the importance of maintaining open communication with providers. Meetings continue to be held with the leadership teams at 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 2nd quarter, SEFBHN discussed the Department of Children and Families 4DX initiative to ensure a reduction in the number of individuals in crisis and how their respective agencies can be a part of this effort. SEFBHN believes that the ongoing effort to ensure a Recovery Oriented System of Care (ROSC) in the network will support the 4DX 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	60.78
	Percent of adults with serious mental illness who are competitively employed	24%	67.00%
	Percent of adults with severe and persistent mental illnesses who live in stable housing environment	90%	95.00%
	Percent of adults in forensic involvement who live in stable housing environment	67%	69.00%
	Percent of adults in mental health crisis who live in stable housing environment	86%	83.00%
	Percentage change in clients who are employed from admission to discharge	10%	26.00%

Adult Substance Abuse	Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge	15%	-68.00%
	Percent of adults who successfully complete substance abuse treatment services	51%	61.00%
	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge	94%	91.00%
Children's Mental Health	Percent of school days seriously emotionally disturbed (SED) children attended	86%	92.00%
	Percent of children with emotional disturbances (ED) who improve their level of functioning	64%	N/A
	Percent of children with serious emotional disturbances (SED) who improve their level of functioning	65%	70.00%
	Percent of children with emotional disturbance (ED) who live in a stable housing environment	95%	98.00%
	Percent of children with serious emotional disturbance (SED) who live in a stable housing environment	93%	100%
	Percent of children at risk of emotional disturbance (ED) who live in a stable housing environment	96%	100.00%
Children's Substance Abuse	Percent of children who successfully complete substance abuse treatment services	48%	75.00%
	Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to discharge	20%	-82.00%
	Percent of children with substance abuse who live in a stable housing environment at the time of discharge	93%	97.00%

Two of the performance measures not met continue to be related to stable housing. There was a 7 point improvement for the percent of adults in mental health crisis who live in stable housing from last quarter and the measure for the percent of adults with severe and persistent mental illness who live in stable housing rose 8 points and exceeded the target. The target for the percent of adults with substance abuse who live in a stable housing environment at the time of discharge was not met by 3 points. Even though 2 housing measures were not met there was improvement for individuals with mental health disorders even while SEFBHN was faced with the challenge of finding housing for the clients being served by The Jerome Golden Center that closed late in the first quarter of the fiscal year.

Last quarter it was noted that there were 2 metrics marked as N/A due to insufficient data. Carisk Partners has been working with our providers to address accurate data entry. A training was provided at the December CQI meeting and those providers who were having difficulty were also offered direct

technical assistance from Carisk. It is noted that only one measure remains N/A which Carisk will continue to troubleshoot.

c. Implementation of specific appropriations or grant funds.

- Henderson Behavioral Health (HBH) continues to provide FIT Team services in Palm Beach County and Counseling and Recovery Center (CRC) continues to provide FIT Team Services on the Treasure Coast covering Indian River, Martin, Okeechobee and St. Lucie Counties through specific appropriation 370 for FY 19/20. 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 2nd quarter of FY 19/20 56 adults and 140 children were served by these 2 FIT Teams. It was determined that without these services 31 of the adults would have needed residential treatment vs. outpatient treatment and 54 the children living with their parents would not be able to remain in the home with their parents and would need foster care or relative placements. The HBH FIT Team continues to struggle with increasing the numbers served. The SEFBHN FIT Team liaison provides monthly Technical Assistance and asked that they provide a plan by February, 2020 to increase the number of referrals and strategies for family engagement.
- Specific Appropriation 367 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 2nd quarter of FY 19/20 these teams served a total of 100 children and reported a total cost avoidance to the state of \$\$1,335,492.04 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 second quarter the program served 21 clients stepping down from the state hospital. Five individuals were discharged. The savings to the state was \$237,025.500 had these individuals had to remain in the SMHTF as opposed to having the availability of the Transitional Housing program.
- Specific Appropriation 373 provided \$300,000.00 to the University of Florida Health Center for Psychiatry in Indian River County. The center offers low cost behavioral health care in the community in addition to providing a learning environment for UF Medical School Psychiatry Residents to gain clinical experience. During the 2nd quarter 4 psychiatric residents and psychology residents worked in the Center and 1 resident returned to the Treasure Coast to practice psychiatry upon completion of their education.
- 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 – South County Mental Health Center operates 3 Mobile Response Team in Palm Beach County and New Horizons of the Treasure Coast operates Mobile Response services in Indian River, Martin, Okeechobee, and St. Lucie Counties. were selected to receive this funding. The MRT's responded to 714 calls in the second quarter and all reported an average response time of slightly under 28 minutes.

SEFBHN also initiated the MRT SAFE (Support and Advocacy for Family Engagement) in which the MRT responds to Child Welfare Report with Substance Misuse Allegation utilizing peer specialists to engage the family.

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

There were no adverse findings or reports against a Network Service Provider by any regulatory or law enforcement entity in the second quarter. As previously reported the Jerome Golden Center (which was a large community behavioral health hospital) closed their doors and is no longer providing services due to severe financial distress. During the 2nd quarter SEFBHN staff began the process of working to transition all services and consumers to other agencies within the network. Legacy Behavioral Health assumed the majority of Case Management Services and South County Mental Health assumed the responsibility of operating the MRT that Jerome Golden Center ran and the Crisis Stabilization unit in Belle Glade. Understanding the impact of the loss of CSU and residential beds due to the closure, SCMHC also applied to AHCA to expand their number of CSU beds. They increased the number by 15. To ensure transparency throughout the transition process the SEFBHN CEO appeared before the Palm Beach County Board of County Commissioner on several occasions and conducted a press conference to ensure our stakeholders and the community were kept current on the efforts to ensure continuity of care for the Jerome Golden consumers.