

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 the 2nd quarter (YTD):

- Substance Abuse Prevention Services – 52%
- HIV Early Intervention Services – 29%
- Substance Abuse Services for Pregnant Women – 43%
- Coordinated Specialty Care for Early Serious Mental Illness – 50%
- CMHBG Core Crisis Services Set-Aside – 19%

Exhibit B1 and Exhibit C Requirements

To demonstrate compliance with the requirements of the SAPT and CMHS block grants (Exhibit B1) and to submit a report detailing its activities and performance (Exhibit C), 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 2nd quarter.

Date(s) of Activity	Type: Training Activity	Training Location	# Of Participants
10/5/2021	Wraparound Refresher Training	Virtual	39
11/1/2021-11/3/2021	Wraparound 101 Training	Virtual	28
11/18/2021	Wraparound Natural Support Training	Virtual	39

The following chart represents technical assistance related to Wraparound during the 2nd quarter.

Date(s) of Technical Assistance	Agency / Provider	Technical Assistance Type	# Of Participants
10/4/2021	Wraparound Coaching-Legacy Behavioral Health Center	Virtual	3
10/4/2021	Wraparound Coaching-Tykes and Teens	Virtual	3
10/5/2021	Wraparound Technical Assistance-New Horizons of the Treasure Coast	Virtual	2
10/11/2021	Wraparound Coaching-Tykes and Teens	Virtual	3

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10/12/2021	Wraparound Coaching- Helping People Succeed	Virtual	4
10/12/2021	Wraparound Coaching- Legacy Behavioral Health Center	Virtual	3
10/20/2021	Wraparound Coaching- Tykes and Teens	Virtual	3
10/29/2021	Wraparound Coaching- Tykes and Teens	Virtual	3
11/4/2021	Wraparound Coaching- Helping People Succeed	Virtual	4
11/8/2021	Wraparound Coaching- Legacy Behavioral Health Center	In-person	3
11/15/2021	Wraparound Coaching- Tykes and Teens	Virtual	3
11/17/2021	Wraparound Technical Assistance- Multilingual Psychotherapy Center	Virtual	5
11/17/2021	Wraparound Technical Assistance- South County Mental Health Center	Virtual	3
11/22/2021	Wraparound Coaching- Tykes and Teens	Virtual	3
11/30/2021	Wraparound Technical Assistance- Chrysalis Health CAT	Virtual	2
11/30/2021	Wraparound Coaching- Helping People Succeed	Virtual	4
12/3/2021	Wraparound Coaching- Helping People Succeed	In-person	4
12/3/2021	Wraparound Coaching- South County Mental Health Center	Audio Review	3
12/6/2021	Wraparound Coaching- Helping People Succeed	In-person	5
12/8/2021	Wraparound Technical Assistance- Multilingual Psychotherapy Center	Virtual	6

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12/8/2021	Wraparound Coaching- Helping People Succeed	Virtual	4
12/9/2021	Wraparound Coaching- South County Mental Health Center	Virtual	2
12/13/2021	Wraparound Coaching- Helping People Succeed	Virtual	4
12/14/2021	Wraparound Coaching- Legacy Behavioral Health Center	Virtual	8

We have been consistently providing Wraparound 101 Training for Youth and Families, Care Coordinators, (Intensive) Adult Case Managers, FIT and FACT team members. We use one curriculum for all populations served.

SEFBHN staff continues to work with the following providers for coaching to Wraparound certification and/or helping with prevention of drift of Wraparound facilitation and with family support partners (technical assistance).

- Henderson Behavioral Health (Palm Beach and Treasure Coast/Okeechobee): Provider attends the Wraparound Learning Community and has certified facilitators and coach staff.
- Housing Partnership d/b/a Community Partners of South Florida: Provider attends the Wraparound Learning Community and has certified facilitators and coaches on staff.
- Multilingual Psychotherapy Center: 4 supervisors and 4 staff members are currently certified; Staff attend the Wraparound Learning Community
- Federation of Families: All family support partner staff certified; Staff attend the Wraparound Learning Community.
- Legacy Behavioral Health: They recently certified one coach who is also a facilitator and one facilitator only. SEFBHN Coach is currently with another supervisor and staff for certification. Staff are attending trainings and the learning community.
- Helping People Succeed: They are currently in the coaching and certification process. Staff are attending trainings and the learning community.
- Chrysalis Health (CAT): Staff attend the Wraparound Learning Community. They are in the coaching and certification process to have a new coach and facilitators. Their previous coach left the agency.
- Tykes and Teens: 1 supervisor certified as coach and facilitator. They are in the process of certifying facilitators.
- South County Mental Health Center: 1 supervisor and 2 facilitators across programs have completed the coaching process and staff are represented at the Wraparound Learning Community. They are actively working to certify another staff as another coach. They are also working to certify other staff as facilitators.
- New Horizons of the Treasure Coast (Care Coordinators/Adult Case Managers/Peers/Intensive Case Managers): Currently there are certified facilitators in ICM, Children’s Outpatient and on the CAT team, however staff are in the certification process.

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- Jeff Industries- Has expressed interest in learning about Wraparound, but no plan at this time to move forward.

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. SEFBHN also coordinates Wraparound 101 trainings, so participants are provided with the roadmap they need to begin the coaching and certification process.

For Quarter 2, for Wraparound in the SE region (Circuits 15 & 19):

- SEFBHN arranged 1 Wraparound Refresher Training in the month of October with 39 participants. 1 Wraparound 101 training in the month of November with 28 participants. We also completed a Natural Supports Training in November with 39 participants.
- During this quarter, the Wraparound learning community Shared responsibility of the meetings and we had other agencies facilitate the meetings.
- By the end of the 2nd Quarter there were thirty-three (33) certified facilitators and fifth teen (15) certified active coaches in our region.
- There were also 3 certified trainers in our region and access to an external trainer. Wraparound has been provided to over 800 families in this quarter.

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 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, meetings were held on the following dates:

Circuit 15 – 10/14/2021, 12/9/2021.

Circuit 19 – 10/21/2021. This group holds meetings quarterly.

Wraparound Learning Communities offered group coaching efforts, shared 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, Wraparound Learning Communities were held on the following dates:

Circuit 15 – 10/27/2021.

Circuit 19 – 10/27/2021 This meeting meets every other month.

Combined Circuits 15 & 19 – 12/8/2021.

SEFBHN continues to monitor Wraparound fidelity throughout the network through data collection, satisfaction surveys, providing organizations with coaching and technical assistance and participating in inter-rater reliability activities. SEFBHN implemented an online satisfaction survey system this quarter

for individual teams to complete to assist with organizations that work remotely and if successful this will be the process moving forward.

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. It is available via our website at www.sefbhn.org under Wraparound Initiative. The toolkits were both monitored and updated for Quarter 2.

Link to SEFBHN's Toolkits: [Wraparound | Southeast Florida Behavioral Health Network](#)

(B) - Forensic Services

(1) Continued Efforts with Network Service Providers and Systems

- 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.
- Technical assistance calls are held regularly with each Forensic Specialist and Civil Liaison to discuss state hospital visits, care coordination efforts and discharge planning barriers.
- Regular discussions about the submitted transitional vouchers are held. Trainings are ongoing with the network service providers who have forensic case managers. The use of vouchers for the recent FACT discharges to a lower level of care has been implemented.
- Trainings were held for the providers about the use of the Level of Care Utilization System (LOCUS) assessments.
- Separate Discharge Planning conference calls that include the SMHTF staff are set for each circuit to increase communication about any barriers to discharge. Other parties are invited to these meetings, as needed (example: when a Circuit Transfer is needed).
- When a consumer is on the Seeking Placement List for an extended period, due to extensive medical issues, SEFBHN has a separate conference call with the SMHTF staff, DCF Regional staff and the network service provider staff to address the barriers to discharge. There has been an increase in the collaboration calls due to the desire to increase individuals from the state facilities. The consumers with complex mental health, forensic and medical needs warranted more calls to assist with discharge planning. Transitional vouchers are utilized during this discharge planning process.
- Collaboration calls with DCF and the court personnel continue due to the waiting list for admission to civil and forensic SMHTFs. Three SEFBHN staff are dedicated to these calls. An increase in communication with the jails and court personnel happened about the pending admission dates to the forensic state hospitals. Input was given about which consumers may need to be higher priority on the SMHTF waiting list due to mental health acuity and behavioral concerns in the jail. SEFBHN staff collaborated with the DCF Regional Office attorney when the commitment packets had inconsistencies.
- The SEFBHN Forensic Coordinator continues to provide technical assistance and any necessary training due to the halt in DCF led Forensic trainings at this time.
- The SEFBHN Forensic Coordinator is attending the court hearings on a regular basis to ensure compliance with DCF commitment orders, Circuit Transfers, and other matters.
- SEFBHN continues to participate in monthly conference calls with DCF, SMHTF and ME staff for care coordination efforts. The COVID outbreak has created the need to explore alternative placements, if appropriate, from the jail, ALFs and SMHTFs.
- The C15 forensic services were enhanced due to the CARES Act funding. Additional staff members were hired to increase jail services and community-based services. The TTI funding for certified Peer

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Services has been troublesome due to difficulty finding peers who can pass the Level II background checks. A Jail Diversion program with identified goals was created with collaboration of South County Mental Health Center and SEFBHN.

- SEFBHN continues with participating in the court staffing regarding FACT and other consumers (Care Coordination consumers, SMHTF diversions, assistance with working with other MEs). Collaboration included involving DCF, Wellpath, court personnel, SEFBHN and other parties to assist with consumers who have multiple needs: psychiatric, medical, and social needs.
- SEFBHN continues to work closely with the C15 Public Defender and State Attorney offices to identify the court’s needs regarding persons placed on a conditional release plan. Education about the available community resources is ongoing. Continued discussions occur about the high number of forensic involved consumers placed in the other ME circuits.
- SEFBHN and the network service provider are still developing the jail diversion program that includes collaboration with the Public Defender’s social worker, mental health provider in the jail, housing staff, SOAR specialists and other staff in the Mental Health Division. A recent collaboration with another agency has resulted in the hiring of a Forensic Peer Specialist to assist the program.
- Meetings continue with several providers to discuss collaboration when the consumers have several staff involved in their treatment (example: residential staff, case manager, Forensic Specialist, etc.)
- An increase in communication with the St. Lucie County jail behavioral health provider, Wellpath, occurred due to scheduled meetings to share community resources, concerns in the jail (i.e., persons under a Baker Acts who end up in the jail instead of the local crisis stabilization units) and other needs.

(2) Florida Assertive Community Treatment (FACT) Team Updates & Activities

- The new FACT hybrid billing process (Medicaid and ME funding for FACT) has necessitated more technical assistance to the providers and development of a new tracking system from a Weekly Census to a Daily Census. The transition is still facing some barriers but should be rectified soon.
- Due to the extensive reduction of the amount of DCF funding for FACT services, many meetings have involved the possibility of reducing caseload size, looking at the community needs for step-down services for FACT consumers and other barriers that have arisen due to the changes to the FACT programs.
- Due to the decision to change the C19 FACT providers in this quarter, a focused effort was put on discharging several FACT consumers from the program and providing linkage to other providers. Also, the SEFBHN staff ensured that FACT teams were meeting the required level of care for the FACT consumers despite a staff shortage during this transition period.

(3) Department of Corrections

- SEFBHN staff continue to have oversight regarding the securing of intake appointments at the local behavioral health providers prior to the end of sentence date for those persons sentenced to the Department of Corrections.
- The increase in the number of inmates who are released under a Baker Act has continued. The returning citizens are demonstrating a higher level of care coordination due to the length of time in the DOC system (i.e., 30 years +), complex medical and psychiatric needs as well as limited housing options due to the nature of the crimes they were convicted of (sexual nature).
- An increase in communication between the C15 Re-Entry providers occurred. Next steps include more collaboration and clarity about how to better service the DOC inmate releases who do not get referred to the Palm Beach County portal.

(C) – Child and Family Related Interventions

(1) Keeping Families Connected (Lock-out) Committees

- C19 Keeping Families Connected (Lock-out) Committees in Circuit 19 are attended by a SEFBHN Children’s Care Coordination Manager 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. SEFBHN Children’s Care Coordination Manager provides system level care coordination services to youth and families and fosters collaboration among meeting participants, as often coordination is needed on calls where multiple providers and agencies are represented. The goal of the Keeping Families Connected Committee is to reduce the number of youths going into licensed care. Through the team’s interactions with families, more high-risk youth have been able to immediately access intensive services and crises are able to be addressed from a strength-based, recovery-oriented approach.
- This quarter SEFBHN participated in five (5) C19 Keeping Families Connected Staffings on 10/11/2021; 10/18/2021; 10/25/21; 10/27/21; 12/6/21. Additionally, there were three (3) lockouts held in C15 with Chief JPO Starling facilitating held on 10/1/2021; 10/13/2021; 12/2/21 that Children’s Care Coordination Manager attended.

(2) DCF Lock-out Protocols and SST Calls

- For the C15 Lock-out Protocol, SEFBHN and Children’s Care Coordination Manager and Family Systems Managers are also identified members. The C15 lockout staffings have been transitioned into the SST conference staffings, per the Service Coordinator at ChildNet. SST staffings allow the CBC, SEFBHN and other stakeholders to come together to brainstorm ways to divert youth from the child welfare system and to provide community supports and services (i.e., CAT and Wraparound Case Management) via Care Coordination efforts. Children’s Care Coordination Manager is the primary on child specific cases with the Family System Managers as back up, as needed.
- In C19, SST staffings are only for safety determination and Children’s Care Coordination Manager attends when needed. Usually, the cases attended will be at the request of the Department, for youth with high mental health needs, substance exposed newborns, or if the need of the case determines system level care coordination. Family System Managers attend as back up for the Children’s Care Coordination Manager, as needed.
- For this quarter, thirty-five (35) total SST calls were attended for both Circuits 15 & 19:
 - Circuit 15 – twenty-two (22) SST calls were attended by a SEFBHN Children’s Care Coordination Manager and Family System Manager on 11/8/21; 11/9/21; 11/16/21; 11/17/21; 11/30/21; 12/1/21 (x3); 12/2/21; 12/6/21; 12/7/21; 12/8/21; 12/9/21 (x4) 12/10/21; 12/13/21; 12/15/21; 12/22/21 (x2); 12/28/21
 - Circuit 19 – thirteen (13) SST calls were attended by a SEFBHN Children’s Care Coordination Manager and Family Systems Manager on 10/5/2021 (x2); 10/7/2021; 10/12/2021; 10/18/2021; 10/27/21 (x2) 11/9/21; 11/29/21 (x2); 11/30/21 x2; 12/13/21 (3)
- For the Circuit 19 Local Review Team, SEFBHN Children’s Care Coordination Manager attends monthly to review high risk youth cases that are involved with multiple agencies. SEFBHN

worked collaboratively with Carisk Partners clinical staff to ensure that we were represented in the review teams scheduled for this quarter.

- SEFBHN C15 Family Systems Manager (FSM) continues to participate in monthly/as needed in Circuit 15 Interagency (Local Review Team) meetings hosted by ChildNet. The Interagency Review Team continues to function as a system-level overview of Circuit 15 and helps to bring together network partners from ChildNet, the Department of Juvenile Justice, Southeast Florida Behavioral Health Network, the Department of Children and Families, the School District of Palm Beach County and other behavioral health providers. Youth are staffed on a case-by-case basis with ChildNet, the Department of Juvenile Justice and Southeast Florida Behavioral Health Network according to their involvement with each of these agencies.
- For this quarter, twenty-five (25) total Interagency, Local, Regional, or State Review Team meetings were attended for both Circuits 15 & 19:
 - Circuit 15 – ten (10) total between Local, Regional, State: 10/6/2021 IRT C15; 11/3/21 IRT C15; 12/1/21 IRT C15; 12/17/21 youth specific; 12/10/21 youth specific; 11/12/21 youth specific; 11/17/21 youth specific; Regional Review Team 12/17/21; State Review Team: 10/1/21
 - Circuit 19 – fifteen (15) total between Local, Regional, State Review Teams 10/26/21 LRT C19; 11/16/21 C19; 12/22/21 C19; Regional Review Team: 11/18/21; State Review Teams held: 10/13/2021; 10/25/21; 10/26/21; 10/27/21; 11/1/21; 11/4/21; 11/24/21; 12/3/21; 12/7/21; 12/14/21; 12/22/21; 12/29/21.

(4) Child Welfare and Behavioral Health Integration Efforts

- SEFBHN continues to participate in C15 and C19 Child Welfare and Behavioral Health Integration Meetings with DCF, CBCs and community partners, as scheduled.
- This 2nd quarter, SEFBHN staff attended and presented at Steering Committee meetings in C15 10/14/2021, and 12/9/2021. Circuit 19 meetings were attended on 10/12/2021, 11/9/2021 and 12/14/2021.
- The SACC line remains available to support child welfare to schedule appointments for assessments or request a SAFE mobile response for parents with a behavioral health issue. SEFBHN provides access to real-time progress exchange form data for the data workgroup. Additionally, the data-subcommittee has been provided 2-1-1 SACC data monthly. The Progress Exchange Form continues to be utilized in both circuits and quarterly summary data is provided to the Steering Committee.
- S.A.F.E. Mobile response teams (MRT) remained available for Child Welfare Professionals to make referrals for specific outreach efforts have been discussed and recommended with Mobile Response Teams to help build and maintain relationships with Child Welfare. Although it appears under-utilized via 211 data, direct referrals are being made from DCF to the MRTs.
- SEFBHN participated in a DCF Explained virtual training for Palm Beach County Guardian ad Litem on 10/7/2021.
- SEFBHN staff participated in several SEN/NAS prototype meetings to be aware of and assist with provider support of these new positions and processes to reduce the effects of parental substance use on newborns.

(6) School System Collaborations

- The School and Community Safety Meetings lead by Judge Martz in C15 continued this quarter with meetings respectively on 10/12/2021, and 12/13/2021.
 - A short-term Intervention workgroup was established and SEFBHN plans to participate next quarter.
- SEFBHN staff attended several School Health Advisory Committees, including the Mental Health Sub-committee in Palm Beach on 10/19/2021 and 11/16/2021. SEFBHN attended on 11/4/21 and 12/2/2021 for St. Lucie County. The Director of the Children’s System of Care has continued to present updates of House Bill 945 for all stakeholders. School Health Advisory Council (SHAC) Palm Beach Mental Health has added House Bill 945 as a standing agenda item.
- Other routine meetings with our school partners include our House Bill 945 Continuum of Care Steering Committee with all five school districts represented and system of care meetings.
- Children’s Care Coordinator and Coordinator of mental health services in St Lucie and Martin County School System collaborate to bring suicide prevention and risk assessment training to their front-line personnel.
- A newly established Policy 5.20 Stakeholder Workgroup was created by the School District of Palm Beach County (formerly known as the Adolescent Collaborative). SEFBHN participated 11/18/2021 providing information about data available for uninsured youth and mobile response teams.

(7) Collective Impact Projects

- Although there was no BeWellPBC Stewardship Council, this quarter, SEFBHN continues to collaborate with and support this collective impact project. SEFBHN and BeWellPBC met to engage and focus on the next steps for continuing growth in our system of care.
- SEFBHN also continued meetings with the Palm Beach County Pediatric Integrated Care Project. Its purpose is to support a more integrated approach for Primary Care especially Pediatricians to include behavioral health staff or collaborations with behavioral health providers to increase early identification of behavioral health needs for youth and adolescents. SEFBHN is proposing better collaborations with our system level independent care coordination program for youth and families as Palm Beach Pediatrics is considering adding provider level care coordination with Center for Child Counseling.

(8) Ongoing Behavioral Health Activities & Efforts for Children and Youth

- During the 2nd quarter, the Children’s Care Coordination Manager (CCCM), has continued to serve youth out of funding from the CARES act which specifically focuses on system level coordination for High Utilizer youth utilizers of behavioral health services and their families. Additionally, the CCCM works with the two Children’s Care Coordinators housed in Network Providers to provide training and technical assistance to those working directly with the youth identified as high utilizers. SEFBHN is collaborating with providers to link, advocate, and work with those youth and families who have 3 or more admissions, 16 or more days inpatient stays, and looking to prevent youth with 2 inpatient hospitalizations from becoming high utilizers of more intensive services.
- Data reports continue to be 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 Children’s Care Coordination Manager holds biweekly meetings with Network Crisis Units, JKFN and New Horizons of the Treasure Coast, 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. These routine meetings held with JKFN, and New Horizons Children’s Crisis Unit staff identify high utilizers and those who meet the criteria of two Baker Acts to attempt to prevent them from becoming high utilizers by connecting them to services that will meet their needs. Brainstorming ways to connect with youth and families not engaging in services is also done during these meetings. Community Action Teams, Children’s Case Management agencies, and Children’s Crisis Units 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.
 - This quarter’s meetings with the Crisis Units JKFN and New Horizons were held: 10/11/2021; 10/25/21; 11/8/21; 11/22/21; 12/6/21; 12/20/21
 - Navigate and SCMHC CC meeting identify transitional age youth: 10/14/2021
 - Monthly Meeting with all Provider Agencies for Children’s Care Coordination: 10/14/2021; (November was rescheduled); 12/9/21
 - Children’s Care Coordination Manager attended Regional Meetings for Care Coordinators with Tallahassee staff Dr. Fitzgerald on 11/17/21; the Regional meeting also set up collaborative training opportunities monthly that SEFBHN’s Children’s Care Coordinator attended on 11/9/21; 12/14/21. The regional meetings also facilitated calls with the MMA plans to hold “meet and greets” with all plans (Beacon, Sunshine, WellCare/CMS, Simply, Humana) and the Children’s Care coordinators. SEFBHN has good working relationships with insurance plans, and most were familiar with the Children’s Care Coordinator. During this quarter, SEFBHN has developed positive working relationship with Blue Cross Blue Shield/New Directions.
- 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. New Horizons CAT families on Waitlists are provided care coordination and added support by Mobile Response Team’s Care Coordinator to ensure crisis are managed and further family and youth deterioration can be avoided.
- During the 2nd quarter, Child Specific Staffings are also attended by Children’s Care Coordination Manager. At times SEFBHN will facilitate those staffings when the youth is not assigned a community provider case manager. These circumstances are rare but do occur. During the 2nd quarter there were thirty-one (31) child specific staffings from a variety of sources, DCF, CBC, MMA plans, DJJ, providers.
- Additionally, Care Coordinators engaged in outreach services in a variety of different settings. They reached out to community providers, primary care providers, mental health hospitals, schools in both the Treasure Coast and Palm beach, SEDNET, Mental Health Courts, School Advisory Committees, FAU Center for Autism and Related Disabilities, the Mental Health Task Force in St Lucie County, our Mobile Response Teams, and a vast number of our Network Providers to spread the word about eligibility for Care Coordination, access, providing referral and answer questions about services.

- A positive gain in reaching more high utilizer youth was a meeting held with HCA headquarters in Tennessee regarding establishing a relationship with Lawnwood Medical Center in Ft Pierce. A further follow-up was had with the Director of Inpatient services at Lawnwood, and a Business Associates Agreement is in development.
- Children’s Care Coordinator met with NW Region Managing Entity staff to discuss our implementation of Care Coordination on 11/19/21. We discussed strengths, processes of identification of High Utilizers, relationship building and outreach, system level and direct level care coordination throughout the Network.
- Children’s Care Coordinator additionally attended two webinars this quarter to further best practice and training on 10/12/2021 Self injury webinar: 11/23/21 Preventing Compassion Fatigue
- Direct Supervisors’ System Meetings were held in Circuit 15 on 10/14/2021 and 12/9/2021.
- In lieu of the Direct Supervisors’ System Meetings typically held in Circuit 19, a Behavioral Health Resource Fair was facilitated on 10/21/2021 in partnership with Community Connected with Kids and Sunshine Health. Raffles were held throughout the presentation; these were made available by the partnership with Sunshine Health. Providers educated investigators, dependency case managers and other community members regarding their overview of services. This included specific treatment modalities used, populations served, locations and target communities, their engagement of indigent/rural/migrant populations as well as relevant waitlists, referral processes and insurance coverage/funds available for underinsured individuals. This integrated event assisted in supporting the workforce both in the Dependency system and at community-based levels of care. 18 total providers presented, and all educational resources were made available following the event. All levels of care were represented, from 211 to residential treatment.
- Children’s Care Coordination Manager attended C15 Child Abuse Death Review Committee held 10/28/21; 11/18/21 to discuss systemic policy and community changes to prevent child fatalities.
- Children’s Care Coordination Manager attends Monthly Treatment Team Staffings held at Sandy Pines on SIPP/PRTS and Care Coordination youth to review progress with their treatment and discharge planning.
- Children’s Care Coordinator with Libra HomeSafe on 11/22/21 with Director of Children’s System of Care to discuss negotiation of room and board rates and options for PRTS funding while serving those youth most in need.
- Children’s Care Coordination Manager continues as the Secretary of the St. Lucie County’s Department of Juvenile Justice Advisory Council. The meetings are held monthly 10/18/21; 11/16/21. Additionally, Children’s Care Coordination Manager is the backup co-chair for the Child Welfare Network Crossover Youth Network Meeting to discuss improvements to the DJJ Intake process for our cross-system youth. That meeting was held on 12/16/21 and we discussed the next steps in implementation for Georgetown crossover model.
- A new connection to increase collaboration with our DJJ involved youth has occurred. Children’s Care Coordinator attends the Monthly Ignite Intervention Team meeting to explore care coordination connections and provide clinical team perspectives and feedback. This quarter the 12/8/21 meeting was attended and barriers to treatment were addressed and removed by collaborative efforts.

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- In Circuit 15, Family Systems Manager provided monthly technical assistance and support to the Mobile Response Team at South County Mental Health Center on 10/20/2021, 11/17/2021, 12/15/2021.
- In Circuit 19, Family Systems Manager provided monthly technical assistance and support to the Mobile Response Team at New Horizons of the Treasure Coast on 10/26/2021, 11/23/2021, 12/22/2021.
- The Family Systems Manager facilitated a meeting with the School District of St. Lucie County on 10/28/2021 to facilitate open conversation and collaborations with NHTC MRT.
- SEFBHN staff facilitate and participate in the Martin County Baker Act Task force and combined Mental Health Collaborative meetings. Martin County courts, law enforcement, school system, hospitals, New Horizons of the Treasure Coast and SEFBHN comprises a behavioral health collaborative to specifically identify and address needs and potential cross-system solutions. This quarter, one meeting was held on: 10/29/2021.
- In Circuit 15, Family Systems Manager provided monthly technical assistance and support to the Community Action Team (CAT)/Chrysalis on 10/11/2021, 11/15/2021 and 12/13/2021. Additional meetings with the director of Chrysalis/CAT and the Family Systems Manager occurred on 10/21/2021, 10/22/2021, 10/26/2021, 11/8/2021, 11/15/2021, 11/18/2021, 11/22/2021, 12/1/2021, 12/9/2021, 12/13/2021, 12/16/2021, 12/20/2021 and 12/24/2021 to address new leadership and team members, data requirements, person served related staffings.
- Circuit 19, Family Systems Manager provided monthly technical assistance and support to CAT/New Horizons of the Treasure Coast (NHTC) 10/1/2021, 11/5/2021 and 12/3/2021. Additional meetings with the director of CAT/NHTC and the Family Systems Manager occurred on 11/17/2021 and 12/15/2021 in direct response to the agencies waitlist and staffing concerns. Also, the Family Systems Manager attended monthly Statewide CAT calls with DCF. These occurred on 10/15/2021 and 11/19/2021.
- SEFBHN staff continued participation this quarter in Glades (10/3/2021, 11/10/2021 and 12/8/2021) and Okeechobee (10/1/2021) System of Care governance meetings sharing information around closing out the grant, sustainability, children’s care coordination and House Bill 945. It was expanded to include adult providers, as well.

(D) - Access to Treatment for Priority Populations, Including Capacity Reports

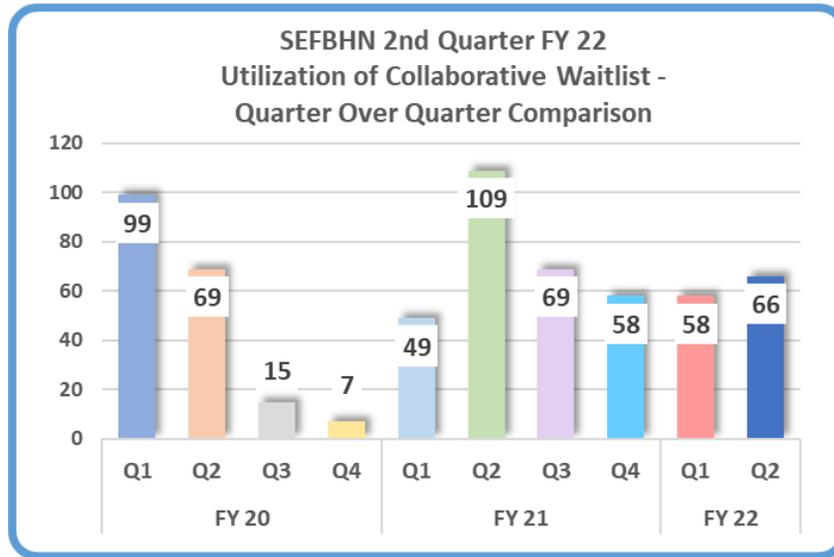
(1) Centralized Electronic Waitlist 2nd Quarter Update

Six (6) SEFBHN providers added 66 persons to the Collaborative Waitlist in the second quarter of FY 22, with 21 added in October, 20 in November and 25 in December:

SEFBHN 2nd Quarter FY 22 Waitlist Update				
Persons Waitlisted by Provider and Month				
Listing Provider	Oct	Nov	Dec	Total
Counseling and Recovery Center	5	5	9	19
Drug Abuse Foundation of Palm Beach Co	4			4
New Horizons of The Treasure Coast	11	11	3	25
South County Mental Health Center		3	5	8
Substance Abuse Council of Indian River Co		1	8	9
WaySide House	1			1
Grand Total	21	20	25	66

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The ongoing quarter over quarter comparison shows that utilization of the Waitlist has evened out and stabilized over the last 4 quarters:



In the second quarter, 31 of the 66 persons waitlisted were priority clients. As shown in the next 3 tables, 9 child welfare involved individuals, 9 homeless persons, and 13 intravenous drug using individuals were waitlisted. No pregnant women were waitlisted during the quarter.

SEFBHN 2nd Quarter FY 22 Waitlist Update Child Welfare Involved Waitlisted Persons				
Listing Provider	Oct	Nov	Dec	Total
Counseling and Recovery Center	1	2	5	8
Substance Abuse Council of Indian River Co			1	1
Grand Total	1	2	6	9

SEFBHN 2nd Quarter FY 22 Waitlist Update Homeless Waitlisted Persons				
Listing Provider	Oct	Nov	Dec	Total
Counseling and Recovery Center	1	1		2
Drug Abuse Foundation of Palm Beach Co	2			2
New Horizons of The Treasure Coast		1		1
South County Mental Health Center		1	2	3
WaySide House	1			1
Grand Total	4	3	2	9

SEFBHN 2nd Quarter FY 22 Waitlist Update Waitlisted Intravenous Drug Use Individuals				
Listing Provider	Oct	Nov	Dec	Total
Counseling and Recovery Center	3	2	4	9
Drug Abuse Foundation of Palm Beach Co	1			1
New Horizons of The Treasure Coast	1	1		2
WaySide House	1			1
Grand Total	6	3	4	13

There is overlap among the 31 priority clients, with 6 individuals experiencing multiple priority problems. Specifically, as shown in the next 3 tables, one individual was both child welfare involved and homeless; two were child welfare involved intravenous drug users; and three were dealing with both homelessness and intravenous drug use.

SEFBHN 2nd Quarter FY 22 Waitlist Update Child Welfare Involved and Homeless Persons Waitlisted		
Listing Provider	Oct	Total
Counseling and Recovery Center	1	1
Grand Total	1	1

SEFBHN 2nd Quarter FY 22 Waitlist Update Child Welfare Involved and Intravenous Drug Use Individuals Waitlisted			
Listing Provider	Nov	Dec	Grand Total
Counseling and Recovery Center	1	1	2
Grand Total	1	1	2

SEFBHN 2nd Quarter FY 22 Waitlist Update Intravenous Drug Use and Homeless Individuals Waitlisted			
Listing Provider	Oct	Nov	Total
Drug Abuse Foundation of Palm Beach Co	1		1
New Horizons of The Treasure Coast		1	1
WaySide House	1		1
Grand Total	2	1	3

Individuals were waitlisted most often for the CAT Team (17 individuals), followed by Intervention – Individual (15 persons), Outpatient – Individual (13), and Residential Level II (10):

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SEFBHN 2nd Quarter FY 22 Waitlist Update				
Waitlisted Individuals by Service or Project and Month				
Covered Service	Oct	Nov	Dec	Total
B4 -CAT Team	6	9	2	17
11 - Intervention - Individual	3	4	8	15
14 - Outpatient - Individual	3	2	8	13
19 - Residential Level II	7	2	1	10
39 - Short-term Residential Treatment		1	4	5
24 - Substance Abuse Inpatient Detoxification	2	1	1	4
15 - Outreach			1	1
01 - Assessment		1		1
Grand Total	21	20	25	66

As shown in the next table, 28 persons were discharged from the Waitlist during the second quarter; while 38 of those listed during the quarter were not discharged. Eighteen (18) of the 28 – or 64% – were discharged because they began receiving needed services at either the listing provider or another network provider.

SEFBHN 2nd Quarter FY 22 Waitlist Update				
Discharge Reasons				
Reason	Oct	Nov	Dec	Total
Not discharged this quarter	8	13	17	38
1 - Receiving Services at this Provider	8	4	4	16
4 - Declined		2	2	4
9 - No face-to-face telephone or other documented contact in last 30 days	3			3
8 - Incarcerated	1	1		2
7 - Receiving Services at another Provider	1		1	2
6 - Evaluation determined that service is no longer appropriate			1	1
Grand Total	21	20	25	66

The average length of stay (ALOS) for all waitlisted individuals was 19.4 days during the quarter. As shown in the next table, the amount of time persons had to wait for services (ALOS on the Waitlist) ranges from 1.8 days for SA Detox to 23.7 days for Residential Level II:

SEFBHN 2nd Quarter FY 22 Waitlist Update	
ALOS on the Waitlist by Service	
Service	ALOS (in Days)
01 - Assessment	12.0
11 - Intervention - Individual	21.7
14 - Outpatient - Individual	23.0
19 - Residential Level II	23.7
24 - Substance Abuse Inpatient Detoxification	1.8
Grand Total	19.4

ALOS by provider is shown in the following table. Individuals had to wait from 16.2 days for services at the Substance Abuse Council of Indian River County to 25 days for services from Drug Abuse Foundation of Palm Beach County.

SEFBHN 2nd Quarter FY 22 Waitlist Update ALOS on the Waitlist by Listing Provider	
Listing Provider	ALOS in Days
Counseling and Recovery Center	21.6
Drug Abuse Foundation of Palm Beach Co	25.0
New Horizons of The Treasure Coast	17.5
South County Mental Health Center	17.0
Substance Abuse Council of Indian River Co	16.2
WaySide House	23.0
Overall ALOS	19.4

Members of priority populations waited for services from 16.6 to 23.8 days, as shown below:

SEFBHN 2nd Quarter FY 22 Waitlist Update ALOS on the Waitlist by Priority Population	
Population	ALOS (in Days)
Child Welfare Involved	23.8
Intravenous Drug Use	19.6
Homeless	16.6
Overall ALOS	20

(E) Peer Activities

The following information represents Peer Activities conducted by SEFBHN during the 2nd quarter:

(1) Peer Support Activities for Quarter 2

During this second quarter, October through December 2021, Rebel Recovery has engaged an average of 166 participants per month, up from an average of 157. An average of 152 participants were engaged in treatment services with a behavioral health organization, an increase from 143. In December, 131 are also receiving Medication Assisted Treatment and 53 are receiving abstinence-based treatment services; and 18 are engaged with peer services while attending abstinence-based recovery support groups. Rebel Recovery supersedes the performance measure of percentage of persons served who are engaged in behavioral health services by averaging 91% per month (target measure percentage is 75% a month).

Rebel Recovery Florida continues to collaborate and build connections with community-based behavioral health providers and to locate and utilize community resources in their efforts to best meet the needs of the participants they serve, many of whom experience homelessness. Rebel Recovery links the participants they serve to many network providers for substance use treatment, such as: Community Partners’ Village for Change, Sunset House, Center for Family Services, Drug Abuse Foundation of Palm Beach, Wayside House. Rebel Recovery also collaborates with Healthcare District, The Recovery Research Network, Ebb Tide Treatment Center and Access Recovery Solutions (ARS), among others, to link participants to Medication Assisted Treatment (MAT) services.

Through the Recovery Community Organization (RCO), Rebel Recovery promotes recovery through education. They hosted many trainings/support groups during this quarter that consisted of staff, participants and/or community members. Some of the trainings held include but are not limited to: Mental Health First Aid, Overdose Prevention and Naloxone Training, Overdose Prevention and Response, Heart of Recovery, Yoga Journey, Recovery Resiliency and many more. For the month of October, they hosted a fun family event titled, “Spooktacular.” This community event entailed activities such as Trunk or Treat, Cookie Decorating, Face Painting, Family Movie Classic, and more.

RiteLife Services hosted their official Ribbon Cutting Ceremony on October 1, 2021, in Okeechobee County. Though still in the early development stage of their program, they have accomplished much. They obtained their 501(c)(3) status and have their Peer-Led Board of Directors established. They continue to engage the individuals through hosting various community events. While RiteLife cannot be accredited no sooner than 2 years, they continue to take the necessary steps that will lead them to accreditation by the Council on Accreditation of Peer Recovery Support Services (CAPRSS).

RiteLife promotes recovery through education and conducted/engaged in several trainings and community events during this past quarter. Some of the trainings/meetings held included MHC Peer Meeting, H&I NA meetings, Broken but Worthy, Depression Virtual meeting, SOAR Workgroup and many more. RiteLife continued networking with local community providers and participated in meetings with Glades County BOCC, Okeechobee County BOCC, Treasure Coast Opioid Taskforce, and Small Business Saturday Event, when they were spotlighted as a new community program. RiteLife have fortified their presence in the community and have Successfully gained partnerships with Mental Health Organizations, Mental Health Court in Okeechobee, Drug Court in Okeechobee and DCF in Okeechobee and Martin Counties. RiteLife remains committed to reducing Stimulant and Opioid use in Okeechobee by maintaining their connection to Medicated Assisted treatment providers for indigent services.

Jeff Industries, additionally, continues to engage the community through Partnerships with Palm Beach County Food Bank and NAMI, which both continued into the 2nd quarter. MHAPBC has also continued to develop their Peer Support Program.

The Network Prevention Manager, Cassandra Burney, as a Trainer of Trainers of the “Recovery Capital Training”, and 4 other trainers conducted a “Soft” training cycle for a select group of Executive Directors/ Board Chairpersons. The training began on August 5, 2021 and concluded during the first quarter on September 30, 2021. All trainers completed a Recovery Capital Training Planning and DeBrief meeting on October 22, 2021. The state liaisons listened to recommendations from the trainers to shorten the training due to loss of participants over the 8-week training period. The liaisons plan to reconvene to further explore recommendations and will bring the Recovery Capital Trainers back together for another conversation. The state continues to recommend the Recovery Capital Training be completed by all DCF RCO’s for the training of their peers.

(F) Priority Access to Treatment for Pregnant Women

(1) Pregnant and Post-Partum Women Updates & Activities

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 programs specific to pregnant and post-partum women diagnosed with substance use disorders are designed to meet the

needs of the mothers and their children and, are aimed at assisting them to reach full recovery in the long term. These programs empower women by providing not only substance use treatment services to achieve a successful recovery, but also parenting interventions and support to maintain family unity and stability.

Subject to the Coronavirus Relief Fund, funding derived from CARES ACT, Southeast Florida Behavioral Health Network (SEFBHN) has expanded Care Coordination services to mothers and babies with Neonatal Abstinence Syndrome (NAS) or Substance Exposed Newborn (SEN) conditions. The main purpose of this expansion is to establish Care Coordination, housing and employment, and peer support programs for women with babies with NAS or SEN. This funding has allowed for three (3) new full time Care Coordination positions at Drug Abuse Foundation of the Palm Beaches who features the Pavilion, a 22-bed residential treatment facility offering substance use treatment, including Medication Assisted Treatment (MAT), for pregnant and post-partum women who can reside with their infants until they reach 6 months of age. The program will also offer enhanced supervised visitations of up to 8 consecutive hours between the residents and their children residing in licensed care with the Department of Children and Families or with relatives.

During Quarter 2 of fiscal year 2021-2022, our network providers (Drug Abuse Foundation of Palm Beach, Counseling and Recovery Center, Housing Partnership and Wayside House) who are dedicating treatment services specific to the pregnant and post-partum women struggling with substance use disorders, served 135 women. Out of those 135 women being served in these specialty programs, 47% were parenting children between the ages zero (0) to six (6) years of age. Moreover, 35 of the 135 women being served were pregnant during the last quarter of fiscal year 2020-2021.

(2) Success Story for Pregnant / Post-Partum Women in the SE Region

This quarterly report's success story is being presented by the staff from the NAS/SEN Care Coordination team at Drug Abuse Foundation of Palm Beach. This success story emphasizes how this Care Coordination program derived from Cares Act funding, is fulfilling an especially important purpose of engaging pregnant mothers in services, avoiding Dependency involvement and, thus, increasing their chances to remaining and maintaining the family unit. One of the main objectives of the Care Coordination team, in collaboration with the DCF Program Regional Director is to respond to the needs of pregnant mothers experiencing substance use disorders prior to their involvement in the DCF Dependency system. One such referral came from the community. A concerned father called the Department asking for services for his pregnant partner (4 months pregnant) who had just been charged with her third DUI. The collaboration between the DCF Program Regional Director and the Care Coordination team at DAF allowed the Care Coordination team to become involved in active advocacy for the needs of this pregnant mother by speaking directly to her attorney, discussing the benefits of the Residential mommy and baby program at DAF. The team successfully engaged the mother while in jail and arranged and completed a thorough assessment via tele-health system of communication. Recommendations for treatment were sent to the Judge who, after hearing the plan for treatment from the Care Coordination team, agreed with the recommendations. Currently this mother is participating in DAF's mommy and baby Residential program and has a very positive outlook on her life as a parent and her abilities to gain sustainability for her and her baby.

(G) 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.

(H) Compliance with charitable choice provision

- There were no issues related to Charitable Choice in Quarter 2.

(I) Monitoring for FY 21/22

As noted in the previous quarterly report SEFBHN has made some revisions to our monitoring processes using a Tiered approach that involves desk review and on-site validations. We believe this approach, is both comprehensive and an improvement over previous approaches to validations and monitoring.

As a reminder of our new process, agencies who receive a Tier 2 (Desk Review) Validation will only receive a stand-alone validation report if no Tier 3 (On-Site) Validation is needed. In the instance an agency receives a Tier 3 Validation, the report will include observations from both Tier 2 and Tier 3 reviews.

Tier 1 – The following represents the status of Tier 1 validations as of Quarter 2, October - December 2021: Tier 1 validations have been completed on all contracted providers in the first quarter; there were none completed in the 2nd quarter.

Tier 2 - The following represents the status of Tier 2 validations as of Quarter 2, October - December 2021:

Agency	Contract(s)	Date Tier 2 Begun	Current Status
Substance Abuse Council of Indian River County, Inc.	ZDF05	10/29/2021	No Tier 3 Tier 2 report date: 12/14/2021
Access Recovery Solutions, LLC	PDA54	10/29/2021	Tier 3 Scheduled: 11/18/2021
Roundtable of St. Lucie County, Inc.	ZDF03	11/1/2021	Tier 3 Scheduled: 11/18/2021
Housing Partnership, Inc. d/b/a Community Partners	PTF07	11/9/2021	Tier 3 Currently Being Scheduled
Wayside House, Inc.	PDA51	11/8/2021	No Tier 3 Tier 2 report date: 12/16/2021
Catholic Charities of the Diocese of Palm Beach, Inc.	LNFO1	11/9/2021	No Tier 3 Tier 2 report date: 12/28/2021

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Alternatives in Treatment, LLC d/b/a Mandala Healing Center	PDA61	11/10/2021	Tier 3 Scheduled: 12/8/2021
South County Mental Health Center, Inc.	PNA31	11/16/2021	Tier 3 Scheduled: 12/15/2021
Comprehensive Wellness Centers, LLC	PTA02	11/18/2021	Tier 3 Scheduled: 1/19/22
NAMI Palm Beach County, Inc.	PNA17	11/23/2021	Tier 3 Scheduled: 12/20/2021
The Recovery Research Network Foundation, Inc.	PDA59	1/14/2022	Tier 3 Scheduled: 2/9/2022
Access Recovery Solutions, LLC	PDA54	11/10/2021	Tier 3 required - On-site 11/18/21

Tier 3 - The following represents the status of Tier 3 validations as of Quarter 2, October - December 2021:

Agency	Contract(s)	Date Tier 3 Begun	Current Status
Access Recovery Solutions, LLC	PDA54	11/18/2021	Anticipated Tier 3 Report Due: 1/2/2022
Roundtable of St. Lucie County, Inc.	ZDF03	11/18/2021	Tier 3 Report Date: 12/15/2021
Alternatives in Treatment, LLC d/b/a Mandala Healing Center	PDA61	12/8/2021	Anticipated Tier 3 Report Due: 1/21/2022
South County Mental Health Center, Inc.	PNA31	12/15/2021	Anticipated Tier 3 Report Due: 2/3/2022
NAMI Palm Beach County, Inc.	PNA17	12/20/2021	Anticipated Tier 3 Report Due: 2/18/2022

(J) Continuous Quality Improvement

The following information was presented during the 2nd quarter CQI meetings which were conducted through a Virtual Platform due to the COVID-19 Pandemic:

- **Linda Kane** presented regarding information on Sublocade and Medication-Assisted Treatment (MAT). The following information was shared:
 - Medication-assisted treatment (MAT) is the use of medications, in combination with counseling and behavioral therapies, to provide a “whole-patient” approach to the treatment of substance use disorders.
 - In addition, SEFBHN is:
 - Allocating \$1,000,000 in SOR2 funds to purchase Sublocade.
 - Negotiating with Indivior for a discounted rate for all ME subcontracted providers.
 - Working with Indivior to train providers – NHTC, TRRNF, Ebb Tide, CWC, SACIRC have been trained; Pinnacle Wellness, Mandala and Wayside House in process.
 - Medication Assisted & Peer Support (MAPS) program at PBSO – Wellpath has been trained.

- Working on a contract with Wellpath to provide funding for Sublocade in the jail.
 - Implementing a MAT protocol in St Lucie Jail; offer peer services in jail with linkage to services upon release. Collaboration with Pinnacle Wellness, Rite Life Services and Wellpath.
- **Angela Guzenski** presented from the Mental Health Association in Indian River County. The following information was shared with the group:
 - The Mental Health Association in Indian River County
 - (MHAIRC) is a non-profit organization that has been providing services to Indian River County and surrounding area residents since 1978. MHAIRC is the only provider of free and same-day mental health screenings for residents in Brevard, St. Lucie, and Indian River County.
 - Walk-In & Counseling Center (WICC)
 - The Walk-In & Counseling Center (WICC) located in Indian River County provides effective outpatient mental health and co-occurring treatment for all ages and income levels. The MHA treats Depression, Anxiety, Bipolar Disorder, Trauma, Substance use, Psychosis, Adjustment Disorders, Personality Disorders, and other mental health diagnoses. The WICC is unique in that it gives immediate access to mental health care, providing crisis intervention as a same-day, walk-in service to preserve safety of self and others.
- **Chandra Brown** presented regarding the Oxford House Program. The Oxford House Programs are self-run, self-supported addiction recovery homes that are Peer Support driven. Oxford Houses use an evidence-based model of operation.
- **Jill Sorensen** and **Jody Olayinka-Lebrun** presented on Wraparound Family Retention for a quarterly CQI update. The following information was shared with the group:
 - What does the research say about family retention?
 - Wraparound studies have shown that when High-Fidelity Wraparound is done correctly, family engagement and retention in services is high.
 - Monitoring data is important for agency success. If there is an issue with retention of families, action should be taken at the organizational and program level.
 - Support from an organizational level is critical.
 - Ongoing engagement and creative techniques at the family level are paramount.
 - A review of SEFBHN data:
 - As of September 2021, there are currently 110 unsuccessful discharges for Wraparound families.
 - This is just within 3 months of data collection.
 - This is higher than the first 3 months of FY 20/21, which was 26.

(K) Reinvestment Grants

SEFBHN continues to provide Program Coordination for the Indian River and Okeechobee Reinvestment Grants which has provided funding for the expansion of the Indian River Mental Health Court System, and the Okeechobee County Mental Health and Drug Courts. SEFBHN received a three-year expansion grant effective July 1, 2020, in the amount of \$1,200,000.00 for Indian River and a three-year expansion grant for Okeechobee in September 2021 in the amount of \$1,193,789.

(1) Indian River County

The Indian River Criminal Justice, Mental Health and Substance Abuse Reinvestment Grant is entering its sixth quarter of the current CJMHSR Reinvestment Grant. We had 15 clients who entered this quarter who received an assessment. All the highest utilizers were referred to the Wrap Around case managers for a more intensive approach. Already there are 36 clients who have been referred to New Horizons for the Wraparound Case Management. We are already seeing a reduction in these high utilizers with less hospital admissions and a stabilization in housing. For the first six quarters 60 clients were discharged and 49 of those clients were successfully discharged. Meaning 81% of clients who left Mental health Court, did so having meet all expectations. This quarter we have continued to operate while being understaffed and continue to adhere to all the CDC guidelines. We have encouraged those clients who can and desire to get the vaccine to do so and are assisting some with making those appointments. Clients continue to find employment opportunities, with many open and hiring positions currently, and several are doing very well at maintaining those positions. We have begun working in partnership with Vocational Rehabilitation and UP to assist clients in finding employment.

Mental Health Association is providing therapy and now some psychiatric services. MHA IRC received a special provision of funds and will be filling in the gaps for clients who need immediate psychiatric services and medication management. These services will allow for clients to avoid deterioration in their mental health needs until a more stable provider can be established.

Wrap-around case management with New Horizons is working very well in conjunction with court case management for our high utilizers. Addition of wraparound is proving very effective in keeping these clients engaged in treatment and avoiding costly hospital visits and re-offending.

We have maintained the two transitional houses and the clients residing in them are working towards independent living. The clients in these homes are provided peer support services who meet at least weekly for group/house meetings to provide additional support and supervision. Housing continues to be a challenge, so we continue to utilize boarding housing opportunities and other assistance to ensure no one is homeless. Treasure Coast Homeless Services Council continues to be vital partner in this effort.

The mental health court program routinely completes a cost avoidance analysis as a return-on-investment measure. The data 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. Calculations as follows:

- 57 clients with Misdemeanor x average 40 days in jail x \$125.00 average cost per day = \$285,000
- 130 clients with felony charges x average 98 days in jail x \$125.00 average cost per day = \$1,592,500
- 187 total clients = 15,020 jail bed days x \$125.00 per day = \$1,877,500 Estimated Cost Avoidance

(2) Okeechobee County

Okeechobee Mental Health Court began a new reinvestment expansion grant in September 2021. Since then, Okeechobee Mental Health Court has entered 29 clients. Eleven clients have had misdemeanors and 18 clients with Felony charges. This quarter there were 7 successful graduations and 2 unsuccessful

discharges. This meaning the MHC is successfully discharging clients at 77%. Through this grant, the expansion will include continued targeted case management, therapy, psychiatric services, medication management and peer services with Legacy Behavioral Health Center. Clients will continue to be assisted with SOAR applications and everyday needs and connections to set them up for a successful diversion from the criminal justice system.

Mental Health Court has assisted clients in obtaining housing when homeless, jobs when they were unemployed, benefits to assist the clients, and other much needed gaps in their lifestyles. This quarter the team assisted two clients in getting their driver’s license reinstated. As well, another client was assisted in getting dentures which he has never had, greatly affecting the client’s demeanor and optimism. Covid being a hurdle that is unavoidable, the mental health court team joined forces to support all the clients with services wrapped around to prevent deterioration in the clients’ progress. The Okeechobee MHC Team has proven itself to be the upmost professional and capable team anyone could have put together.

In addition to the Mental Health Court, this reinvestment grant will allow for an expansion of services in the juvenile drug court. This addition is still in the development phases but will include therapy and case management for substance use disorder. Along with connections to service providers in our network for family support and needs found during assessments.

The Cost avoidance during the life of this grant is calculated below. We analyzed cost avoidance with Okeechobee Reinvestment grant program through its entirety. 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:

- 11 clients with Misdemeanor x average 40 days in jail x \$125.00 average cost per day = \$55,000
- 18 clients with felony charges x average 98 days in jail x \$125.00 average cost per day = \$220,500
- 29 total clients with 2,204 days x \$125.00 per day = \$275,500

[\(L\) Consumer Satisfaction Surveys](#)

With input from the SEFBHN staff, Director of Systems Integration has been actively engaging in the Person Served Satisfaction Survey Review Workgroup and providing feedback to improve the items on the new survey published by the department in the 155-2 pamphlet earlier this year. SEFBHN is prepared to implement use of the new survey as soon as the update assembled by the workgroup is published.

[\(M\) SEFBHN 2nd Quarter FY 21-22 LOCUS and CALOCUS Update](#)

SEFBHN providers performed 1,150 LOCUS and 745 CALOCUS evaluations during the second quarter of FY 22. NHTC accounted for 50% of the LOCUS and 44% of the CALOCUS performed. For adults, Brighter Family Center came in second with 24%, followed by Housing Partnership with 13%, and South County Mental Health Center with 8% of the LOCUS. The remaining 5% was distributed among 7 other providers, as shown in the first table below. For children, Housing Partnership was second to NHTC, having performed 27% of the CALOCUS, followed by Helping People Succeed with 11%, and The Chrysalis Center with 8%. The remaining 10% were performed by 4 other providers.

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SEFBHN 2nd Quarter FY 22 LOCUS Update					
LOCUS Evaluations by Provider and Month					
Provider	Oct	Nov	Dec	Total	% of Total
Behavior Basics, Inc.			2	2	0%
BOYS TOWN SOUTH FLORIDA, INC.			2	2	0%
Brighter Family Center, Inc.	116	92	68	276	24%
HENDERSON BEHAVIORAL HEALTH - SEFBHN	13	10	7	30	3%
Housing Partnership	58	54	39	151	13%
JEFF INDUSTRIES INC	1	3		4	0%
JFK MEDICAL CENTER-NORTH CAMPUS	1			1	0%
NEW HORIZONS OF THE TREASURE CO - SEFBHN	208	177	192	577	50%
Psychotherapeutic Services of Florida, Inc		13	3	16	1%
SOUTH COUNTY MENTAL HEALTH CENTER	25	44	20	89	8%
The Chrysalis Center Inc. - SEFBHN			2	2	0%
Grand Total	422	397	331	1150	100%

SEFBHN 2nd Quarter FY 22 CALOCUS Update					
CALOCUS Evaluations by Provider and Month					
Provider	Oct	Nov	Dec	Total	% of Total
Brighter Family Center, Inc.	3	7	9	19	3%
FATHER FLANAGAN'S BOYS TOWN	11	5		16	2%
HENDERSON BEHAVIORAL HEALTH - SEFBHN	8	26	4	38	5%
Housing Partnership	68	76	55	199	27%
HPS HELPING PEOPLE SUCCEED INC.	30	29	23	82	11%
NEW HORIZONS OF THE TREASURE COAST	117	117	94	328	44%
Our Village Okeechobee, Inc.	1	1		2	0%
SOUTH COUNTY MENTAL HEALTH CENTER	1		1	2	0%
The Chrysalis Center Inc. - SEFBHN		33	26	59	8%
Grand Total	239	294	212	745	100%

As was the case during the first quarter, the most frequently recommended level of care (LOC) during the quarter was LOC 2- Low Intensity Community Based Services for both the LOCUS (38%) and CALOCUS (27%) assessments (see next two tables). For both adults and children, LOC 5 – Medically Monitored Residential Services was the second highest LOC recommended (by 18% of LOCUS and 17% of CALOCUS assessments).

SEFBHN 2nd Quarter FY 22 LOCUS Update													
Instrument-Recommended Level of Care (LOC) by Provider													
Recommended LOC	Provider											Total	% of Total
	BB	BT	BFC	HBH	HP	JI	JFK	NHTC	PSF	SCMHC	TCC		
Basic Services	1		43	1	15	1		11	2	5		79	7%
LOC 1 - Recovery Maintenance and Health Management			72	4	12			17	2	3		110	10%
LOC 2 - Low Intensity Community Based Services		2	109	6	34	3		250	3	30		437	38%
LOC 3 - High Intensity Community Based Services			27	8	61			22		20	1	139	12%
LOC 4 - Medically Monitored Non-Residential Services			10	5	13			4		8		40	3%
LOC 5 - Medically Monitored Residential Services	1		12	5	12			150	6	20		206	18%
LOC 6 - Medically Managed Residential Services			3	1	4		1	123	3	3	1	139	12%
Grand Total	2	2	276	30	151	4	1	577	16	89	2	1150	100%

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SEFBHN 2nd Quarter FY 22 CALOCUS Update											
Instrument-Recommended Level of Care (LOC) by Provider											
Recommended LOC	Provider									Grand Total	% of Total
	BFC	BT	HBH	HP	HPS	NHTC	OV - O	SCMHC	TCC		
Basic Services for Prevention and Maintenance	2	2	3	39	6	14	1	1		68	9%
LOC 1 - Recovery Maintenance and Health Management	5	5	10	41	1	17			3	82	11%
LOC 2 - Low Intensity Community Based Services	7	2	12	38	47	94			1	201	27%
LOC 3 - High Intensity Community Based Services	3	2	5	61	24	6	1	1	15	118	16%
LOC 4 - Medically Monitored Community Based Services		1	2	3	2	40			11	59	8%
LOC 5 - Medically Monitored Residence Based Services	2	2	6	16	2	85			15	128	17%
LOC 6 - Medically Managed Residence Based Services		2		1		72			14	89	12%
Grand Total	19	16	38	199	82	328	2	2	59	745	100%

When a clinician completes a LOCUS or a CALOCUS assessment, the result is an instrument-recommended LOC for an individual’s placement. Both the LOCUS and CALOCUS instruments allow a clinician to override their recommended LOC with a clinician-selected Actual LOC, but a clinician must specify the reason for this variance.

LOCUS variance reasons and rates, by provider, are shown in the next table. The network variance rate for the LOCUS was 15% - an increase from the 10% rate achieved in the first quarter of the fiscal year and 50% above the 10% target set by SEFBHN. Clinical judgment continues to be cited overwhelmingly (78%) as the reason for the LOCUS variances. While this 15% variance rate is above target, it is still acceptable from a quality assurance standpoint.

However, the variance rate by provider continues to show significant variability, ranging from 0% for Boys Town, Jeff Industries and JFK Medical Center to 39% for SCMHC. Two (2) providers demonstrated LOCUS variance rates high enough to generate concern. The 50% rate of Behavior Basics is based on only 2 evaluations and can thus be discounted, but Henderson Behavioral Health’s 37% variance rate is based on 30 evaluations and SCMHC’s 50% variance rate is calculated on 89 evaluations. Variance rates this high are indicative of incorrect use of the LOCUS tool.

SEFBHN 2nd Quarter FY 22 LOCUS Update												
Variance Reasons and Rates by Provider												
Variance Reason	Provider											Total
	BB	BT	BFC	HBH	HP	JI	JFK	NHTC	PSF	SCMHC	TCC	
Client chose a LOC other than the one recommended	1		2					4	1	1		9
Client is court ordered to a higher level of care								3		1		4
Client is court ordered to a lower LOC								5				5
Client refuses recommended level								1				1
Client's finances/job deter treatment level			1	1							2	4
Client's priority is shelter at this time					1							1
Clinical Judgment			60	10	16			22	2	21		131
LOC is clinically appropriate			2		1			2		10		15
Rec LOC will not admit due to medical condition			1									1
Services at recommended LOC not what client needs								3				3
Total Variances	1	0	66	11	18	0	0	40	3	35	0	174
None (No Variances)	1	2	210	19	133	4	1	537	13	54	2	976
Grand Total	2	2	276	30	151	4	1	577	16	89	2	1150
Variance Rate	50%	0%	24%	37%	12%	0%	0%	7%	19%	39%	0%	15%

The network variance rate for CALOCUS assessments, shown in the following table, also came in at 15% - up from 9% last quarter – with CALOCUS users citing clinical judgment most often (33% of the time) as the

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basis for the variance. While significant, this compares favorably to 78% of LOCUS variances relying on clinical judgment.

SEFBHN 2nd Quarter FY 22 CALOCUS Update										
Variance Reasons and Rates by Provider										
Variance Reason	Provider									Grand Total
	BFC	BT	HBH	HP	HPS	NHTC	OV - O	SCMHC	TCC	
Benefits from CCT					1				3	4
Client refuses recommended level of care		1			1	2				4
Client waitlisted for recommended LOC						18			1	19
Clinical judgment	4		2	8	4	9	2	2	19	50
Family/guardian refuses level of care									1	1
Lower LOC not yet completed or provided		1			19	17				37
Total Variances	4	2	2	8	25	46	2	2	24	115
None (No Variance)	15	14	36	191	57	282			35	630
Grand Total	19	16	38	199	82	328	2	2	59	745
Variance Rate	21%	13%	5%	4%	30%	14%	100%	100%	41%	15%

The differential among individual CALOCUS providers’ variance rates is shown above. The 30% variance rate of Helping People Succeed, based on 82 evaluations, is a concern, as is The Chrysalis Center’s 41% rate across 59 evaluations.

These high rates are red flags highlighting that the person or persons completing these evaluations are not performing them correctly. Carisk and SEFBHN will add technical assistance and trainings to next quarter’s schedule targeting the current clinicians of LOCUS and CALOCUS providers with the excessively high variance rates.

(N) Adjustments to Required Plans and Network Management Activities

(1) Overview of necessary adjustments to Required Plans

SEFBHN staff has completed the process of reviewing and revisions to all required plans during the 2nd quarter. Plans reviewed during the 2nd quarter include the Quality Assurance Plan.

(2) Network Management Activities

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

Nineteen amendments; six new subcontracts; one new agreement; and one termination were completed during the 2nd quarter. The documents can be found in the Provider E-Contracting System and are listed as follows:

Amendments

PDC19 – Hanley Center Foundation, Inc.

PDA59 – The Recovery Research Network Foundation, Inc.

ZNA34 – Love and Hope in Action, Inc. (Amend #001)

ZDA14 – Counseling and Recovery Center, Inc.

PDA54 – Access Recovery Solutions, LLC

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AGR34 - University of Florida Board of Trustees, for the benefit of the Department of Psychiatry, College of Medicine, University of Florida

PDA57 – The Recovery Research Network Foundation, Inc.

AGR49 – Palm Healthcare Foundation

PNA37 – Brighter Family Center, Inc.

AGR47 – CommonlyWell, PBC

PNA17 – NAMI Palm Beach County, Inc.

PNA16 – Jeff Industries, Inc.

PNA19 – Palm Beach Habilitation Center, Inc.

PDA58 – Palm Beach County Substance Abuse Coalition

ZNA34 – Love and Hope in Action, Inc. (Amend #002)

AGR48 – Palm Healthcare Foundation

PNA31 – South County Mental Health Center, Inc.

ZTF13 – New Horizons of the Treasure Coast, Inc.

ZNA30 – Mental Health Association in Indian River County, Inc.

PDA44 – Sunset House, Inc.

PDA48 – Drug Abuse Foundation of Palm Beach County, Inc.

New Subcontracts

PTF07 – Housing Partnership, Inc. d/b/a Community Partners

ZDA24 – RiteLife Services, Inc.

ZTF15 – Our Village Okeechobee, Inc.

PNF25 – Federation of Families

PDC19 – Hanley Center Foundation

PDA62 – Rebel Recovery

New Agreements

AGR55 – Ferd and Gladys Alpert Jewish Family and Children's Service of PBC, Inc.

Termination

ZDF02 -- Okeechobee Substance Abuse Coalition

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

The following is a summary of collaborative strategies and partnerships for the 2nd quarter:

- Continuation of the DCF and SEFBHN Collaboration calls to discuss the DCF 4DX Goals. Current focus is diversion from the SMHTF waiting lists due to the COVID-19 pandemic.
- SEFBHN in partnership with Communities Connected for Kids executed a virtual Behavioral Health Resource Fair 10/21/2021 to help support and advance knowledge in behavioral health resources in our shared workforce.
- “DCF Explained” are opportunities to provide behavioral health information and resources to community partners. The Director of Children’s SOC presented with DCF-Child Welfare and SAMH, ChildNet, and Children’s Services Council on one occasion during this quarter. More specifically, a presentation was provided to the Guardian ad Litem program on 10/7/2021.
- As previously reported the Palm Beach County Sheriff’s Office has contracted with SEFBHN to coordinate client treatment services under the Justice & Mental Health Collaboration Program (JMHCP). This 2-year grant began on May 1, 2020. The funding provides for SEFBHN to hire a Care Coordinator and for treatment and non-treatment services for program participants. SEFBHN will also act as the fiscal agent to reimburse the Providers through the federal grant funds. The Target Population for this grant are individuals identified by the PBSO Behavioral Services Unit in need of behavioral health services. It is expected that 200 adults and 40 juveniles will be served by this grant over the 2-year period.
 - In the 2nd quarter of FY 21/22, 12 new referrals were received. Of these new referrals received during this quarter – 8 adults and 4 adolescents. We continue to utilize the method of engaging a 3-way conference call between PBSO Staff, Care Coordinator and Program Participant to facilitate communication between Care Coordinator and Program Participant when linking Program Participants to community providers and have found this to be successful. SEFBHN sends a weekly Excel spreadsheet to PBSO depicting status update of all program participants referred within the community. We continue to refer to in-network and out-of-network providers for therapeutic, psychiatric, housing, and emotional support services.
 - During this quarter we successfully linked a participant with Equine therapy, and he is engaging well in this therapeutic process. Furthermore, we were able to link an adolescent to an 8-week social skills therapeutic group.
 - Following last quarter there has been 11 file closures. Of those file closures five have declined services, and six no longer participated in services, therefore, file was closed due to non-engagement of LINC program. Program participants declined services at this time; however, program participants are aware they can contact PBSO in the future to reactive file. Moreover, of the 47 active cases, 17 are being monitored monthly due to having a positive connection within community and doing well as evidenced by keeping scheduled appointments, taking medications, having gainful employment, and being connected to housing. Lastly, we continue to refer adolescents to Boystown for further support to the family through the Children’s Care Coordination.
- 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 continues to collaborate with Palm Beach Sheriff’s Office to provide treatment and peer services for the Medication Assisted & Peer Services (MAPS) program in West Detention Center in Belle Glade. More details on this program can be found under the MAT section.
- SEFBHN and Carisk Partners continue to meet monthly. Due to the COVID-19 pandemic, these meetings were held virtually (Microsoft Teams). These meetings allow for robust information

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exchange about Data, Technology, Reporting, Billing and Financial Management and Care Coordination.

- SEFBHN works closely with Palm Beach County Community Services department on several grants related to substance use disorder and housing.
 - The Comprehensive Opioid Stimulant and Substance Abuse Program (COSSAP) is a housing and recovery support grant for individuals with criminal justice involvement, substance use disorder and housing instability. COSSAP is a collaboration with SEFBHN, PBC Community Services Department, Florida Atlantic University and Rebel Recovery that started in July 2021.
 - Emergency Shelter Grant – COVID (ESG-CV) is a rapid re-housing program for individuals identified through the homeless continuum of care with mental health and/or substance use disorders. Community Partners of South Florida dba/ Housing Partnership (CP/HP) started their program in December 2020. In July 2021, SEFBHN contracted with Rebel Recovery to also provide rapid re-housing and peer services to the same target population. This contract runs through August 2022.
- SEFBHN also collaborates with the Specialty Courts in Palm Beach County as follows:
 - Early Childhood Court, and Family Drug Court in Palm Beach County to provide recovery support services to participants in each court program.
 - Marchman Act Court to provide independent assessments and care coordination services.

(3) Further Collaborations and Activities with DCF, Stakeholders and Network Service Providers

(a) Children’s System of Care

- This quarter, SEFBHN completed a Behavioral Health Disparities Impact Statement. Also completed was a revised, proposed narrative and budget for the continuation of the grant into the second year.
- SEFBHN staff met with SAMHSA and DCF several times this quarter to discuss status of implementation activities, SPARS IPP and Services targets and they were subsequently adjusted.
- Additionally, this quarter, SEFBHN hired a Project Coordinator who began November 1, 2021. Also, SEFBHN actively worked on recruiting a Family Coordinator during this quarter. SEFBHN has met with four identified providers for system of care service expansion opportunities and is actively working on contract amendments.
- On 11/20/2021, the SEFBHN SOC Project Coordinator was able to attend a training “Introduction to Strengthening Families: Focus on the Protective Factors framework,” developed by the Center for the Study of Social Policy.
- A goal for System of Care is to address the health disparities of African American and migrant population’s and increase utilization of behavioral health services by these populations. To address part of the disparities Dr. Julie Radlauer-Doerfler of Collectively, Inc. has developed a curriculum, training, and coaching program entitled Equitable Advancement of Support for Everyone (EASE). EASE is a model designed to work with multi-system professionals to assist them in the understanding of both the value of and the skills necessary to expand access to social support with their clients.
- Trainings scheduled for the next quarter include:
 - January 18, 2022, 2-4PM EASE Leadership training. Meeting for key leaders from providers and key community stakeholders about the nature and topics of EASE and encourage these leaders to commitment for participation in future staff training.
 - Feb. 4, 2022, 9AM-1PM EASE training / coaching for direct care staff and supervisors' session 1
 - Feb. 11, 2022, 9AM-1PM EASE training / coaching for direct care staff and supervisors' session 2

- Feb. 18, 2022, 9AM-1PM EASE training / coaching for direct care staff and supervisors' session 3
- Feb. 25, 2022, 9AM-1PM EASE training / coaching for direct care staff and supervisors' session 4

(b) Prevention

The following is the summary of Prevention activities and updates for the 2nd quarter:

- The Network Prevention Manager continues to meet monthly with the DCF state Prevention Clinical liaison and other state ME Prevention Managers, with the sustained goal to enable coordination among Prevention Coordinators across Managing Entities and create a statewide systematic and professional approach to addressing the state’s SAMH Prevention needs and initiatives.
 - This quarter’s Prevention ME Coordinators’ team meeting Conference Calls continued to address and discuss the following Agenda items:
 - Utilizing the Supplemental Block Grant Funds for Prevention services.
 - Measuring and validating Environmental Strategies used by Coalitions around the state
 - Evaluating Evidenced Based Programs used by School-based agencies around the state
 - DCF Substance Abuse Prevention Licensing Protocol
 - Statewide Training Opportunities/ Needs for Prevention Providers
 - Individual Managing Entity Prevention Provider and Coalition program implementation Updates.
 - DCF Substance Abuse Block Grant Prevention Performance Indicators
 - DCF Prevention Rule Chapter 65E-14 for Prevention Services.
 - DCF Prevention Guidance Document 10 for Prevention Services.
 - DCF Program Guidance Document 1 for Managing Entity Contracts.
- The Network Prevention Manager continues oversight of prevention-exclusive contracts and amendments, risk assessments and agency validations. During this 2nd quarter, the Network Prevention Manager completed the Contract Validation for Roundtable of St. Lucie Count, Inc. risk assessments for agencies for whom she’s Primary Point of Contact (PPOC).
- Monthly SEFBHN Prevention Team meetings continue via Virtual Microsoft Teams formats, allowing visual 2-way conversations between the ME and all network prevention funded agencies and coalitions.
 - October – December 2021 meeting discussions centered around:
 - Direct vs Support Prevention Services
 - Contract Validations and Utilization of the Prevention Monitoring Tool and the CARF Unaccredited Workbook as a Quality guide
 - DCF Substance Abuse Prevention License process
 - Full Utilization of Performance Based Prevention Systems (PBPS) with New Enhancement of Carisk Upload capabilities.
 - Full Utilization of the Electronic Invoice Application (EIA) enhancements to the Carisk Fiscal Reporting
 - The requirement of the CPP and Substance Abuse Prevention Skills Training (SAPST) for all agencies/ coalitions for licensure
- Due to the surge of the new COVID-19 Omicron variant during this 2nd quarter of FY 2122, Prevention Activities continue to be offered via Hybrid in person/ online formats. Prevention Sessions continue to be offered in person partnerships with individual Classroom teachers and via virtual formats, offered to County schools and communities at large.

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- Principals in all 5 ME Counties continue to work closely with the network agencies in Indian River, Martin, Okeechobee, Palm Beach and St. Lucie Counties to provide Substance Abuse and Mental Health Prevention messaging and programming, which schools provide as options to in-classroom instruction, via Google Classroom, ZOOM, and Microsoft Teams formats.
- As implemented at the beginning of the COVID outbreak, prevention coalitions also continue to provide activities in regional online Virtual formats, i.e.: Youth Summits, Youth Forums, Youth Conversations and Activities via ZOOM, Google Classroom, Microsoft Teams, Facebook or YouTube Live.
- During this 2nd quarter, SEFBHN Prevention Providers continue implementing the following:
 - o Drug Abuse Treatment Association (DATA):
 - “Project Success” school-based and Parenting support programs in Palm Beach, St. Lucie, and Okeechobee Counties. The “Project Success” programs are being offered in Middle Schools in those counties.
 - DATA is expanding into Martin County with “Project Success” school-based and Parenting support programs. The “Project Success” programs will also be offered in Middle Schools in that county.
 - o Hanley Center Foundation (HCF):
 - “Botvin LifeSkills Training” school-based program in Palm Beach County’s Coastal and Western Communities. The online format is being offered to 8th, 9th, and 11th grade students in partnering schools with whom HCF have agreements for FY 21/22.
 - HCF continues to offer the “Active Parenting” series in-person and, also via online Virtual formats, made available to community parents.
 - o New Horizons of the Treasure Coast (NHTC):
 - “Too Good for Drugs / Violence” in selected grades in all Elementary, Middle and High School students in St. Lucie County.
 - NHTC also provides “Botvin Life Skills Training” to schools transitioning from “Too Good for Drugs / Violence.”
 - o Substance Abuse Council of Indian River (SACIRC):
 - In-class and virtual implementations of “Botvin LifeSkills Training” in all Indian River County Elementary Schools
 - “Erica’s Lighthouse” in Middle and High Schools, as well as the “Teen Intervene” Evidenced Based Program (EBP), with selected students.
 - o Tykes & Teens:
 - “Botvin LifeSkills Training” school-based program in Martin County Elementary Schools to 4th and 5th grade students.
- Additionally, all County Coalitions continue their work to provide environmental community and school substance use alternative activities, both in person and online Virtual formats.
 - o PBCSAC continues Coalition Community meetings that encourage community partner engagement. During this quarter, they began their School Bus Poster Contest; and continued to address substance use disorder (SUD) Prevention, HIV Prevention, and Alcohol-free Alternative Youth Activities.
 - Their Middle School After-School Drug Prevention program meets both in-person and virtually addressing topics such as Vaping, Over the Counter Medicine safety, 7 Habits for the Highly Effective Teen, and the National Drug IQ Challenge.
 - Their Teen Coalition-In-Action (CIA) continues Wednesday sessions for youth in the Palm Beach County region, both in-person and online. The sessions led by

- PBCSAC Teen CIA, serve the community youth. Recruitment of new participants to replace 20/21 graduating seniors is currently in process.
- o PBCSAC continues their work on Opioid Prevention initiatives recommended as result of Community Conversations convened by PBCSAC
 - They successfully launched “The Hub” Recovery Community Center (RCC) and began serving Palm Beach County Adults in Recovery (and active use) and their families.
 - PBCSAC continues to create messaging to School and College age Youth, Parents and the general community about opioids and preventive substance use measures Release of the media presentations is planned for fall of this FY 21/22.
 - The recommended Opioid Education and Support Group, continues to be facilitated by Hanley Center Foundation. The Program Project C4OPE continues to be implemented in the 4 Palm Beach County quadrants.
 - o Martin County Board of County Commissioners in partnership with PBCSAC serves Martin County with Coalition services. This partnership continues the implementation of Martin County’s own Teen Coalition-In-Action (CIA).
 - Substance Abuse Council Indian River County’s (SACIRC) Substance Abuse Free Indian River (SAFIR) Coalition continues their implementation of the Coffee and Conversation parent-to-parent forum and the environmental strategy, “No One’s House”.
 - o SAFIR hosted a Marijuana Forum in October 2021. Attendees were encouraged to attend in-person and via Virtual format.
 - o SAFIR participated with Indian River’s Charter school forums and conducted a week-long youth training through CADCA to train their new Coalition Youth leaders.
 - Roundtable of St. Lucie County – Substance Abuse Prevention Network Committee – Continues their work with schools, facilitating the implementation of “Kids at Hope” programming in St. Lucie County schools.
 - o Roundtable reports that the “Kids at Hope” training has been completed not only with educators, but, with other community sectors in the county, including first responders and members of the business and health communities.
 - o Roundtable also continues their work with the St. Lucie County Behavioral Health Task Force; working with community partners within their county to provide a safe and drug-free community.
 - o The Executive Director of the Roundtable of St. Lucie County facilitates the Behavioral Health Task Force which continues their work with the St. Lucie County School Board, Children’s Services Council, Treatment Centers, DJJ, DOH, SEFBHN and other County Coalitions.
 - o This collaborative’s short-term outcome is almost realized with the soon to be completed Needs Assessment, Logic Model and Community Action Plan which will identify and focus to the Community Behavioral Health needs/ priorities.
 - Okeechobee Substance Abuse Coalition (OSAC) and SEFBHN agreed to terminate their Contract to provide Coalition services in Okeechobee County. That agreement went into effect October 31, 2021.
 - Our Village Okeechobee accepted the contract to provide Prevention services in Okeechobee County after OSAC’s Contract termination. The agency has begun to provide services as the Prevention Coalition at Our Village. That contract was effective October 1, 2021.
 - o Our Village Okeechobee began holding their community outreach Coalition Meetings in October.

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- o The Prevention Coalition at Our Village convened a Parent Substance Use Prevention Meeting for parents, convened Monthly Youth Leadership meetings and has held its first Friday Night Done Right Alternative Youth event during the month of December.
- o The Prevention Coalition at Our Village post an active calendar for the remainder of this Fiscal Year.
- Hanley Center Foundation, too, continues their work on the Health Resources and Services Administration (HRSA) grant Needs Assessment and Sustainability Plan as directed in their award guidance.
 - o The HRSA Grant focuses resources to the opioid crisis in rural counties via the collaboration stakeholders (law enforcement, hospitals, FQHC, treatment, schools). The Grant allows Hanley to facilitate that work in Okeechobee to identify needs in and engage resources to Okeechobee County.
 - Because residents often travel outside of Okeechobee County to receive services, Hanley’s plan will address the full spectrum of programming available (Prevention, Treatment and Recovery) to Okeechobee residents.
 - They’re currently in the process of completing gathering information from Prevention, System of Care, Mental Health Court services, Behavioral Health and Substance Abuse Treatment and Recovery service providers in Okeechobee and surrounding counties.
- The FADAA/ FBHA statewide prevention team monthly brings together DCF State Representatives, Managing Entity Prevention Coordinators and Agency and Coalition leaders.
 - o Conversations continued to address matters surrounding the Substance Abuse Prevention license/ waiver mandate and ways to develop an effective “single message” going out from the Florida statewide Prevention Community.
 - o Discussions continue around the Prevention Training of all agencies and coalitions to achieve professional quality. At this writing, the Substance Abuse Prevention Skills Training (SAPST) is being strongly recommended by the state. The Network Prevention Manager is a SAPST trainer and is working with the state to provide this training for the SEFBHN Prevention providers and coalitions.
- The Network Prevention Manager as a Trainer of Trainers of the “Recovery Capital Training”, and 4 other trainers conducted a “Soft” training cycle for a select group of Executive Directors/ Board Chairpersons. The training began on August 5, 2021, and concluded during the first quarter on September 30, 2021. All trainers completed a Recovery Capital Training Planning and DeBrief meeting on October 22, 2021. The state liaisons listened to recommendations from the trainers to shorten the training due to loss of participants over the 8-week training period. The liaisons plan to reconvene to further explore recommendations and will bring the Recovery Capital Trainers back together for another conversation. The state continues to recommend the Recovery Capital Training be completed by all DCF RCO’s for the training of their peers.
- The Network Prevention Manager continues as Co-Chair of the Circuit 15 Juvenile Justice Advisory Board. She, her Co-chair, and other State Circuit Chairpersons attended the DJJ yearly Restoring Hope Training and Summit in Orlando, FL on October 25-27, 2021. They were all recognized and honored with a trophy for dedicated services rendered during the year. She continues co-facilitating meetings and working on committees and alliances alongside Community partners. Virtual Meetings continue into this new Fiscal Year, allow Community partners to safely come together each month to address goals and work for FY 21/22. Collaborating partners include state agency representatives, county, school, and community leaders.

(c) Care Coordination

The Care Coordination team continued, in the 2nd quarter, to create opportunities for cross-system collaboration and communication between SEFBHN, community stakeholder, and the Network Service Providers (NSP). Four (4) NSPs: New Horizons of the Treasure Coast, JFK North, Boys Town of South Florida, South County Mental Health Center maintain both Children and Adult care coordinators full-time care coordination staff dedicated for Care Coordination, and one part-time Certified Peer Specialist Care Coordinator. 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.

Success Story for SEFBHN Care Coordination

An example of a success story with Boys Town children’s care coordination case opened this quarter, is a 15-year-old female who was referred by JFK after repeated baker acts resulting from self-harm and multiple suicide attempts. The family is undocumented and were having a difficult time accessing needed services. Youth was asking to be admitted into a residential treatment facility such as Sandy Pines because they were having a difficult time implementing healthy coping skills during moments of distress and they were experiencing distress from repeated baker acts. Youth was ultimately able to get linked up with Caridad Center for medical and dental services as well as Legacy Behavioral Health for psychiatric and therapeutic services. Youth was accepted into SandyPines and ultimately chose to continue to utilize outpatient services and bypass residential treatment at this time. The client is continuing to demonstrate an improved ability to implement healthy coping skills to keep themselves safe. Youth has not had an incident of self-harm or suicidal ideation requiring a trip to CSU in over 8 weeks. Youth has expressed feeling empowered and proud at their significant improvement in their ability to keep themselves safe as well as having a say in their treatment due to their mother's improved trust based on remaining safe in the home.

Coronavirus Relief and CARES Act Funding

Additionally, and subject to CFDA 21.019 - Coronavirus Relief Fund, funding derived from CARES ACT has allowed for the expansion of Care Coordination services to families and babies with Neonatal Abstinence Syndrome (NAS) or Substance Exposed Newborn (SEN) conditions. The main purpose of this expansion is to establish Care Coordination, housing and employment, and peer support programs for women with babies with NAS or SEN. Drug Abuse Foundation of the Palm Beaches, Inc., which features the Pavilion, a residential treatment program for mothers and their babies up to 6 months of age, has been designated the three new Care Coordination positions. On October 4, DCF launched this initiative with all stakeholders involved and weekly workgroup meetings have been held to ensure a smooth process from referral to coordination of services. The Care Coordination team at Drug Abuse Foundation (DAF) in collaboration with DCF Regional Program Director, have received 4 referrals of mothers with babies with NAS/SEN conditions; two of those mothers have successfully been engaged and are currently participating in the Pavilion residential program.

Civil State Mental Health Treatment Facility Diversions

The Care Coordination teams were very engaged with individuals that were petitioned for South Florida State Hospital civil commitment. In Quarter 2, there were zero civil diversions from a SMHTF. With the added service of the SRT individuals have been directly linked to SRT, and petitions for a civil placement

were down. The individuals that were not diverted required a high level of care, and stabilization. During the 2nd quarter, 114 adults were served in Care Coordination.

One example of a person served who was admitted to the SRT and linked to Care Coordination services is a male high utilizer from C19. This person served was a high utilizer and was enrolled in FACT services. Despite FACT involvement he had multiple Baker Acts. A referral was sent from C19 to C15 for the SRT. He was screened and admitted, a petition for a SMHTF was not needed since he was able to be admitted to the SRT. With the transitioning of the FACT teams, and admission to SRT the Care Coordination team got involved to for planning and linking to services before he is discharge ready. The CC team is assisting with linkage to medical services due to a significant medical history.

Transitional Vouchers

SEFBHN staff and Network Service Providers continue 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.

In the 2nd quarter, SEFBHN approved 106 transitional vouchers – 45 for substance use and 61 for mental health, which is almost double compared to the previous quarter. This increase has been partially enabled by an increase in funding for transitional vouchers. The transitional voucher program continues to play a critical role in the system of care in helping people receiving services obtain true sustainability and self-sufficiency in the community.

Additional Care Coordination Activities for Quarter 2

- SEFBHN staff have been receiving an influx of community calls reaching out for services for themselves and loved ones. SEFBHN staff gather as much collateral information as possible and schedules a staffing or discuss during bi-weekly meetings to make the referrals to the Care Coordinators.
- SEFBHN and one of the Care Coordination team completes a weekly direct referral meeting to discuss new referrals and make a direct connection for adult care coordination.
 - During the second quarter there has also been an increased number of referrals from Department of Corrections (DOC) for persons releasing from state and federal prisons. The prison aftercare teams have been reaching out to SEFBHN for assistance in linking these persons to services in the community. Due to the increase, there was a collaborative meeting between NAMI, DCF Regional Forensic Coordinator, Career Source of PBC, and SEFBHN to discuss the referral process, warm handoffs, community providers, and additional resources to assist with community reintegration for those returning to C15 and C19.
- In Quarter 2 there was some staff turnover, but the Providers quickly addressed the turnover and new Care Coordination staff were onboarded. SEFBHN had additional meetings in training as part of onboarding and orienting new Care Coordinator staff. These trainings will also carry over to Quarter 3 to ensure the Care Coordination teams are supported, trained, and offered continued Technical Assistance.
- In Quarter 2, a Universal Care Coordination referral form for adult CC services was rolled out from SEFBHN staff to NSP, stakeholders, and SEFBHN staff. This form is comprehensive to

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gather the most information about the person served to assist the Care Coordination teams. The form includes who is making the referral, the type of Care Coordination Referral needed, a brief history, barriers to obtain services, the services the person served needs connected to, and ability to attach documents.

- SEFBHN Care Coordination staff have been attending collaborative meetings during Quarter 2 with PBSO, NSP, and out of network providers for the PBSO care coordination grant. These meetings have occurred at several providers to make introductions, discuss services available, take tours, and discuss the referral process.
- SEFBHN Care Coordination staff continues to facilitate a regularly scheduled bi-weekly conference calls to offer technical assistance, make referrals, and discuss those recognized as high utilizers. Additional care coordination collaborative calls have been added to discuss direct referrals to the care coordination teams other NSP have been invited to ensure streamlined warm handoffs.
 - The NSPs and SEFBHN had two monthly meetings in the 2nd quarter (in December there was no meetings due to Holidays). During October's monthly meeting the group discussed the process of validation season; Tier 1 Risk Assessments, Tier 2 Desk Reviews, and Tier 3 On-sites. The meeting also went through Warm Handoffs as a Core Competency of Care Coordination; strategies and tips for making quality warm handoffs. The November meeting discussed many community resources for persons served to obtain and engage in Thanksgiving activities, and the NSP shared new resources they have discovered in the community to keep everyone up to date.
- The Network Integrity team facilitated a meeting for Circuit 19 SUD SEFBHN network providers to introduce new providers and discussed the referral process and care coordination within the SEFBHN network. The new providers introduced to the SEFBHN network were Pinnacle Wellness Group, Public Defender's Office Nineteenth Judicial Court, and Ritelife Services.
- Children's Care Coordinator collaborates with Adult Care Coordinators on all teams to ensure a family's needs are met. A parent must be able to maintain stability to provide for their child. It is imperative cases are viewed from a systemic lens and all barriers are removed for our families.
- Children's Care Coordinator met with Martin County School Board Mental Health Personnel on 11/30/21 to discuss opportunities for providing suicide prevention training to their staff in the new year. The training Question, Persuade, Refer (QPR) and Question, Persuade, Refer, Treat (QPR-T) will be offered to their mental health professionals in Martin County schools with Children's Care Coordinator and Compliance Manager both being certified trainers. Sustainability within their system and the Network was additionally discussed and will be planned for to continue SEFBHN Zero Suicide mission.
- United Way training coordinator for Palm Beach County reached out to Children's Care Coordinator and Compliance Manager on 12/29/21 to discuss QPR and Trauma Informed Care training for his Mentor Program for at risk youth. These trainings will be offered in the New Year.

(d) Mobile Response Teams (MRTs) for C15 and C19

SEFBHN provides funding for C15 and C19 Mobile Response Teams (MRTs): South County Mental Health Center operates 3 Mobile Response Teams serving Palm Beach County and New Horizons of the Treasure Coast operates 1 Mobile Response Team serving Indian River, Martin, Okeechobee, and St. Lucie Counties.

SEFBHN MRTs provide on-demand crisis intervention services in any setting in which a behavioral health crisis is occurring, including homes, schools, and emergency rooms. Mobile response services are available 24 hours a day, 7 days a week, 365 days a year by a team of professionals and paraprofessionals (including peer support providers), who are trained in crisis intervention skills to ensure timely access to supports and services. In addition to helping resolve a crisis, teams work with individuals and their families to identify and develop strategies for effectively dealing with potential future crises. The primary goals for Mobile Response Teams are to lessen trauma, divert from emergency departments and/or criminal justice agencies and prevent unnecessary psychiatric hospitalizations

Mobile Response Team Data for Quarter 2

- During the 2nd Quarter, New Horizons of the Treasure Coast received 402 MRT calls, and South County Mental Health Center received 555 calls, for a total of 957 calls.
- For both teams combined, 696 calls required an acute response with an average response time of 33.07 minutes.
- The average diversion rate for both MRTs was 89.4%.
 - New Horizon of the Treasure Coast’s diversion rate was 89.4%.
 - South County Mental Health Center’s diversion rate was 89.4%.

(e) Housing Activities

The following is a summary of Housing Activities for the 2nd quarter:

- For this reporting period, SEFBHN engaged in ESG-CV monthly provider meetings with Housing Partnership d/b/a Community Partners (HP/CP). Updates on programs and participants were provided. Technical assistance was provided throughout the quarter to address issues/concerns with participants, enforcing policies and procedures, incident reporting and self-care. They are and will continue to work on creative ways to engage participants. The Coordinator attended all required subcommittee meetings and HHA General Meeting with the Continuum of Care.
- SEFBHN and Housing Partnership d/b/a Community Partners (HP/CP) are still waiting for feedback from the county regarding updates made to policy and procedures, per courtesy monitoring held June 2020.
- The Housing Network Specialist engaged in weekly coordination calls with Housing Partnership d/b/a Community Partners (HP/CP) Village 1, SAMH funded transitional housing program. During the calls, current caseloads as well as referrals were discussed. As of 12/31/2021, Village 1 is currently at capacity. Technical Assistance is provided as needed. They are continuing to work with coming up with various ways to engage and address the participant’s mental health and substance use needs. In November, they hosted “Friendsgiving.” This event was held outdoors, and all participants were provided with a Thanksgiving basket filled with food items and goodies!
- Carrfour Supportive Housing is currently at capacity. The Network Housing Specialist engaged in monthly provider meetings with staff and spent time providing Technical Assistance (TA). TA was provided in identifying ways to assist a participant whose mental diagnosis was putting his housing at-risk. NAMI of Palm Beach County, along with the participant’s mother was involved, and with the added support, the participant was able to get his needs met. Data support was also provided to staff to assist them with invoicing and Performance Measure Outcome. The Peers are engaging well with participants by way of engaging them in onsite activities and groups. Programmatically, Carrfour is experiencing shortage in staff. They have had difficulty in filling 2 positions. They reached out to SEFBHN and requested to have those positions posted on SEFBHN’s website as well as to share it with the Network Providers. Carrfour Supportive Housing remains interested in expanding their services to

provide a wider range of Peer lead and community services. Because of staffing shortages, there's been a delay in it coming to fruition.

- Rebel Recovery Florida has their ESG-CV Rapid Rehousing up and running! In October, the Network Housing Specialist coordinated meetings to link Rebel to Coordinated Entry, met with potential participants and modeled the interview process, completion of SPDATs and intake process. As of 12/31/2021, Rebel has 7 participants enrolled. Technical Assistance was provided throughout the quarter to assist Rebel with participants violating their lease and housing search. The Director of ESG & COSSAP passed her exam and became a certified inspector for Housing Quality Standard (HQS)!
- Rebel Recovery Florida's COSSAP Program is growing. The Network Housing Specialist and Rebel staff attended monthly workgroup meetings with Palm Beach County, and monthly COSSAP Housing Provider meetings. The purpose of both meetings was to receive/provide programmatic and participant updates. The operators remain engaged with participants' recovery and reach out as needed.
- The Network Housing Specialist is continuing to work on engaging new FARR certified Recovery Houses to be a part of COSSAP.
- The SEFBHN Director of Network Integrity, and Network Housing Specialist continue to attend and participate in the Continuum of Care (CoC) meetings for Circuits 15 & 19.
- The Director of Network Integrity and Network Housing Specialist continues to participate in the bi-monthly statewide Managing Entity Housing calls with DCF.
- The Director of Network Integrity is a member of the Executive Committee of the Homeless and Housing Alliance (HHA), Palm Beach County's CoC and participates in monthly virtual meetings.
- The Director of Network Integrity is a member of the Healthcare and HMIS subcommittee of the HHA and participates in monthly virtual meetings.
- The Network Housing Specialist is a member of the HMIS subcommittee of the HHA and participates in monthly virtual meetings.
- The Director of Network Integrity is a member of the Homeless Advisory Board (HAB) of Palm Beach County and attends quarterly meetings.

(f) Opioid Addiction Services/Medication Assisted Treatment/Substance Use Disorder

The following is a summary of Opioid and MAT services for the 2nd quarter:

- On December 6, 2021, the Director of Network Integrity met with Major Hayes, Captain Wheeler, Wellpath and Rite Life Services at St. Lucie Sherriff's Office jail to discuss access for peers in the jail as well as offering MAT services to inmates. Everyone was very receptive and suggested that Rite Life begin the process of getting peers screened for access. Wellpath has submitted a proposal the SLSO for a MAT program and once that has been approved, we can begin the process of integrating it with the Journey Forward program that SEFBHN currently funds and adding MAT.
- SEFBHN's COO and Director of Network Integrity met in December with National Director of MAT Programs at Wellpath to begin working on a contract between SEFBHN and Wellpath to fund Sublocade in PBSO Medication Assisted & Peer Support (MAPS) program as well as St. Lucie County. The goal to complete is January/February 2022.
- In the 2nd quarter, the Director of Network Integrity met several times with reps from Indivior to discuss utilization of Sublocade in our region and negotiate a discounted rate, like what they offer jails and federally qualified health center. In December, we received confirmation that Indivior can offer a discounted rate, that would apply to not only all SEFBHN providers, but would include all Managing Entity contracted providers in Florida. We anticipate finalizing the details early in 2022.
- SEFBHN continues to pursue Hospital Emergency Room Programs that initiate a buprenorphine induction for overdose patients in their ER coupled with Peer Services in Palm Beach and the Treasure

Coast. We currently fund peers at Rebel Recovery, SACIR, Rite Life Services and NHTC to be available for hospitals to request for Peer Support for 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 (SACIRC), Treasure Coast Community Health (TCCH) and Cleveland Clinic Indian River Medical Center in Vero Beach collaborate to offer a buprenorphine induction in the hospital to opioid overdose patients with linkage to a peer and treatment services at SACIRC and continuing MAT services TCCH.

- During the second quarter, a total of 2 individuals were served in the Hospital Bridge Program, additionally, 10 individuals were linked to treatment.
- SEFBHN continues to meet monthly with Martin County Sheriff's Office, Fire Rescue, and other community providers to discuss diversion options, including MAT services for opioid overdoses and OUD inmates. New Horizons of the Treasure Coast MAT clinic in Stuart continues to address the need for these services in Martin County. They are working closely with MCSO, Rite Life Services and Fire Rescue on referrals.
- The Director of Systems Integration continues to oversee and provide ongoing technical support to providers using the WITS system for SOR grant data reporting. With SOR 1 completed, focus is now fully on SOR 2 compliance. As of December, SEFBHN has an approximately 80% compliance rate for SOR 2 6-month post-intake follow-up GPRAs and this continues to be closely monitored. Validations being conducted by SEFBHN are including GPRA compliance as a monitoring component to further ensure that data collection requirements for the SOR grant are followed and that providers have the information and understanding necessary to succeed in this. Trends this quarter include several cases where existing records in the WITS system prevented providers from adding records, which requires substantial hands-on technical assistance and working as a bridge between providers to solve issues. In most cases the issues can be solved except where the existing record is from another ME area.
- Technical assistance continues to be provided to network providers regarding the transition to SOR 2, particularly regarding how to make the transition while maintaining the highest possible compliance rate with follow-up GPRAs. Alexander Parodi and the team at DCF have been collaborating closely with SEFBHN regarding this transition as well.
- Rebel Recovery proposed the MAPS Mentor position as in the Inmate Worker Program assignment for qualified participants as reported in the first quarter. During the second quarter, the proposal for the Mentor position was submitted to PBSO and it continues to be review by PBSO administration. During the second quarter, the MAPS meeting was held virtually on October 25, 2021, and December 13, 2021.
- During the MAPS monthly meeting held on 12/13/2021, the following feedback was shared from MAPS participants regarding the MAPS program:
 - *"My whole view of recovery has changed. Heard about Buprenorphine and thought it was a cop out, but now sees its importance and how it keeps them alive".*
 - *"Feeling like I belong. Didn't think I could find any community in jail. Thankful for Ms. Price and Mr. Greg ".*
- During the second quarter, Southeast Florida Behavioral Health Network collaborated with Florida Behavioral Association to offer training to the network providers regarding Medication Assisted Treatment with Q/A session. On 12/1/021, Dr. Hunt from the University of Florida hosted MAT basics overview and Q&A over Zoom for all MAT network providers.

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

As previously reported: The COVID-19 Pandemic has resulted in a reduction of revenues that are used to fund state government. The state has told Managing Entities to prepare for budget reductions. We were instructed to prepare for a 3% reduction and a 6% reduction. SEFBHN has applied for and was granted a Payroll Protection Loan with forgiveness. The loan will thus cover the 3% reduction and if a 6% reduction is ultimately needed SEFBHN will utilize carry forward funds to meet the requirement.

(O) Network Service Provider (NSP) Performance

(1) Monitoring and Review Results, Including Reports, Corrective Action Plans (CAP) or Other Necessary Follow-up Actions

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 previously been submitted or are submitted with the quarterly report directly to the DCF.

The following is a summary of currently open Performance Improvement Plans (PIPs) and Corrective Action items:

- **Chrysalis Health** – A PIP around data remains open at the end of this quarter as lack of consistent uploading is still an issue. CAT was not utilizing the CARISK Waitlist Module. It is a contractual requirement. They will begin to use the CARISK Waitlist to enter youth placed on the Waitlist for services. A new Tier 3 review will be planned for next quarter to, in part, follow-up with this ongoing PIP.
- **New Horizons of the Treasure Coast, Inc.** – A PIP relating to the agency’s internal process for SOAR training and quality assurance remains open, and technical assistance is provided to NHTC by SEFBHN, related to the PIP.
- **Catholic Charities of the Diocese of Palm Beach, Inc.** – Report issued December 28, 2021, and Performance Improvement Plan due on January 31, 2022.
- **Wayside House, Inc.** – SEFBHN completed a validation on Wayside House on December 17, 2021. A PIP has been submitted by Wayside House on January 14, 2022, to address the following concerns: 1) staff training to ensure Incident Reports are submitted to the Department of Children and Families IRAS system appropriately; and 2) a plan to ensure the Provider reaches 80% minimum GPRA compliance rate to continue receiving SOR 2 funding. The PIPs are currently under review by SEFBHN.
- **JFK Medical Center Limited Partnership d/b/a JFK Medical Center North Campus** – This PIP was anticipated to be closed this quarter based on ongoing technical assistance however, it appears more assistance will be needed. As such, a deeper review will be conducted in a new Tier 2 validation to be scheduled 2/28/22. These PIPs will be closed during the validation (if not resolved sooner) and, if progress cannot be validated a new PIP will be opened.
- **Brighter Family Center, Inc.** – This PIP was anticipated to be closed this quarter based on ongoing technical assistance however, it appears more assistance will be needed. As such, a deeper review will be conducted in a new Tier 2 validation to be scheduled 1/21/22. These PIPs will be closed during the validation (if not resolved sooner) and, if progress cannot be validated a new PIP will be opened.

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SEFBHN has always been committed to maintaining open communication with our providers and understands the importance of maintaining open communication with providers. We continue to meet virtually with our large community mental health agencies and our largest substance abuse treatment providers to address both their concerns and SEFBHN’s concern in effort to troubleshoot and problem solve.

(2) 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	85.84
	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%	90.00%
	Percent of adults in forensic involvement who live in stable housing environment	67%	75.00%
	Percent of adults in mental health crisis who live in stable housing environment	86%	90.00%
Adult Substance Abuse	Percentage change in clients who are employed from admission to discharge	10%	11.00%
	Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge	15%	-60.00%
	Percent of adults who successfully complete substance abuse treatment services	51%	53.00%
	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge	94%	85.00%
Children's Mental Health	Percent of school days seriously emotionally disturbed (SED) children attended	86%	98.00%
	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	65%	N/A
	Percent of children with emotional disturbance (ED) who live in a stable housing environment	95%	100.00%
	Percent of children with serious emotional disturbance (SED) who live in a stable housing environment	93%	100.00%
	Percent of children at risk of emotional disturbance (ED) who live in a stable housing environment	96%	N/A

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Children's Substance Abuse	Percent of children who successfully complete substance abuse treatment services	48%	50.00%
	Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to	20%	0.00%
	Percent of children with substance abuse who live in a stable housing environment at the time of discharge	93%	100.00%

The percent of adults with substance abuse who live in a stable housing environment at the time of discharge SEFBHN: SEFBHN has two Providers that works directly in the jail to provide the necessary treatment services using a person-centered approach. Guidance Document 24 is still in version 12 and needs to be updated for version 14 data reporting. Jail should not be a failing measure if services were provided in the jail for the duration of treatment. It should only be counted against the ME if client entered in the community and was discharged to jail. In the last quarter we have improved the measure by 6%. We provide TA (technical assistance) to make sure the providers review their submission. We hosted a monthly data workgroup meeting to assist in resolving issues. SEFBHN will continue to provide technical assistance and ensure data is being reported accurately.

(P) Implementation of Specific Appropriations or Grant Funds

(1) Family Intensive Treatment Teams (FITT)

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.

FIT uses a team approach to provide substance abuse treatment services to parents of children who are involved in the child welfare system. The intensive family services being provided by the FIT Teams to child welfare involved families continue to demonstrate cost avoidance by diverting individuals and families served from higher levels of care and longer-term child welfare involvement, including foster care. A total of 73 families have been served this fiscal year to date by both FIT Teams. Through December 2021, the percentage of families served who have successfully completed treatment with FIT Team services is 45% (14 successful discharges out of a total 31 discharges to date).

As indicated in the tables below, both FIT Teams are performing well within expectations in relation to the outcome measures for stable housing and stable employment for all families served who successfully completed treatment during the first quarter of Fiscal Year 21-22.

Provider	Episodes With Stable Housing	Total Number of Episodes	Percentage
Counseling and Recovery Center	19	19	100.00%
Henderson Behavioral Health - Palm Beach	12	12	100.00%
Total	31	31	100.00%

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Provider	Episodes With Stable Employment	Total Number of Episodes	Percentage
Counseling and Recovery Center	19	19	100.00%
Henderson Behavioral Health - Palm Beach	12	12	100.00%
Total	31	31	100.00%

(2) Return-on-Investment Reporting

The following is a summary of ROI Reporting for the 2nd quarter:

- 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 Chrysalis Health 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 21/22, these teams served a total of 140 children and reported a total cost avoidance less total costs YTD to the state of \$3,053,415.00. This return on investment is in keeping children and youth out of deeper end child welfare, juvenile justice programs, and psychiatric in-patient programs.
- Specific Appropriation 368 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). 17 persons were served in the 2nd quarter. The savings to the state was \$104,762.33 had these individuals had to remain in the SMHTF as opposed to having the availability of the Transitional Housing program.
- Specific Appropriation 376 provides \$250,000.00 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, the center served 1757 individuals. The center can provide lower cost services using physician trainees. As a result, the cost avoidance to the state this quarter was \$204,805.17 had the services been rendered by psychiatrists only.
- Specific Appropriation HB 2865 provides \$300,000 to the Mental Health Association of Indian River County for the year. The walk-in center offers low-cost and no cost behavioral health care to the Treasure Coast community to reduce baker acts and hospitalizations and reduce mental deterioration in the community. Services include immediate same day walk-in services, screening and risk assessments, on-going therapy, psychiatric evaluations and medication management services, support groups (Mood & Anxiety, Veterans Groups, Wellness classes, Teen Support groups), and Community Education (community mental health work groups, collaborations). During the 2nd and 2nd quarter, the walk-in center has served 853 unduplicated individuals and has prevented up to 381 baker acts for clients in crisis. During this quarter, they have completed 81 Safety Plans; 79 Risk Assessments, 70 with current thoughts of suicide at time of screening; 220 New Admissions; 164 Resource Consultations; 33 Psychiatric Evaluations; and 279 Medication Management Appointments. The center can provide lower cost services using physician trainees. The have hired 3 Bachelors Interns from Indian River State College, 2 Masters level Interns from various colleges and 1 Psychiatric Nurse Practitioner Intern. As a result, the cost avoidance to the state this quarter was \$701,760.00, with a YTD Cost Avoidance of \$1,365,760.00.

(Q) Any Adverse Finding or Report against a Network Service Provider

There were no adverse findings or reports against a Network Service Provider by any regulatory or law enforcement entity in the 2nd quarter.

(R) Additional Network Activities to support the System of Care

(1) Triennial Needs Assessment

SEFBHN, in partnership with the Health Council of Southeast Florida (HCSEF) has been a part of a statewide workgroup to create and develop both the Triennial Needs Assessment Report and the Cultural Health Disparities Survey. This Needs Assessment is intended to find gaps, barriers, strengths, and opportunities of improvement for our system of care. To develop the Needs Assessment, four (4) surveys were developed through collaboration from the seven (7) Managing Entities, which will be distributed to Q3. The surveys were developed during Q2, and contain the following information:

1. **Cultural Health Disparity Survey:** Intended to be distributed to individuals being served by agencies that live within certain zip codes to assess system-level strengths and opportunities for improvement and reflect the experiences and needs of those being served within provider agencies.
2. **Peer Recovery Community/Support Specialist's Survey:** Intended to be distributed to Peer Support staff to assess system-level strengths and opportunities for improvement and reflect the experiences and needs of those working in Peer Support.
3. **Stakeholder Survey:** Intended to be distributed to provider agency staff to assess system-level strengths and opportunities for improvement and reflect the experiences and needs of those working within the agency.
4. **Individuals Served Survey:** Intended to measure the experience of individuals that are receiving services at provider agencies.

After the distribution of the surveys in Q3, focus groups will be convened – also in Q3 – using the data from the Cultural Health Disparity Survey, to examine the development of more comprehensive and inclusive services and programs in those individuals living in socially vulnerable areas of the region (as identified through the CDC's Vulnerability Index). The final report will be presented and made available in Q4, June 2022.

(2) Planning and Implementation of House Bill 945

The following is a summary of House Bill 945 related activities for the 2nd quarter:

- SEFBHN continues to take the lead on creating the structure for all Managing Entities to follow as they implement HB 945 in their own networks. Refer to Children and Family Related Interventions in this report for other 2nd quarter activities related to the implementation of House Bill 945 by SEFBHN staff.
- SEFBHN staff met with FAME face to face in Tampa on 12/7-12/9/2021 to review the status of HB plans and identify any barriers. As part of the meeting, this group met with DCF Leadership staff and SEFBHN CEO presented a summary of the SEFBHN HB 945 plan at the DCF Statewide Quarterly Meeting.
- SEFBHN and FAME continued to meet this quarter with House Committee (Children, Families and Elders) staff re: Opportunities for Improvement identified as part of our HB 945 planning.

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- House Bill 945 Steering Committee convened for Circuits 15 and 19 by SEFBHN. This quarter, meetings were held 10/12/2021, 11/9/2021 and 12/14/2021. The goal of the Steering Committee is to plan for the implementation of House Bill 945 requirements, as well as the Coordinated System of Care. This quarter we focused on finalizing the plan and beginning a strategy for implementation of it.
- The plan was vetted by the Steering Committee, SEFBHN Board of Directors, Executive Board and signed by SEFBHN Chair and CEO. It was submitted to DCF on 12/29/2021.