

## 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 3<sup>rd</sup> quarter (YTD):

- Substance Abuse Prevention Services – 76%
- HIV Early Intervention Services – 43%
- Substance Abuse Services for Pregnant Women – 58%
- Coordinated Specialty Care for Early Serious Mental Illness – 75%
- CMHBG Core Crisis Services Set-Aside – 72%

## 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

#### *Wraparound Training and Technical Assistance*

Date(s) of Activity	Type: Training Activity	Training Location	# Of Participants
2/7/2022 to 2/9/2022	Wraparound 101 Training	Virtual	16
3/7/2022	Wraparound Refresher Training	Virtual	13

The following chart represents technical assistance related to Wraparound during the 3<sup>rd</sup> quarter.

Date(s) of Technical Assistance	Agency / Provider	Technical Assistance Type	# Of Participants
1/12/2022	Helping People Succeed	Coaching	4
1/14/2022	Helping People Succeed	Coaching	4
1/21/2022	Helping People Succeed	Coaching	4
1/25/2022	Helping People Succeed	Coaching	4
1/25/2022	Legacy Behavioral Health	Coaching	3
1/27/2022	Legacy Behavioral Health	Coaching	2
2/2/2022	Legacy Behavioral Health	Coaching	3

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2/3/2022	Helping People Succeed	Coaching	4
2/7/2022	Henderson Behavioral Health	Technical Assistance	2
2/16/2022	Legacy Behavioral Health	Coaching	3
2/25/2022	Helping People Succeed	Coaching	4
3/2/2022	Helping People Succeed	Coaching	8
3/3/2022	Helping People Succeed	Coaching	1
3/4/2022	Helping People Succeed	Coaching	4
3/9/2022	Legacy Behavioral Health	Coaching	2
3/14/2022	Legacy Behavioral Health	Coaching	3
3/17/2022	The Chrysalis Center (CAT)	Technical Assistance	2
3/29/2022	Helping People Succeed	Coaching	6

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 the 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 two facilitators. SEFBHN Coach is currently working with another supervisor and staff for certification. Staff are attending trainings and the learning community. They are currently working on an expansion plan to have more facilitators on the treasure coast.
- Helping People Succeed: They are currently in the coaching and certification process. Staff are attending trainings and the learning community.

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- Chrysalis Health (CAT): Staff attend the Wraparound Learning Community. They are in the coaching and certification process to have a new coach and facilitators.
- 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, the CAT team’s supervisor is in the certification process to become a coach.
- Jeff Industries- Has expressed interest in learning about Wraparound but has 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 3, for Wraparound in the SE region (Circuits 15 & 19):

- SEFBHN arranged 1 Wraparound 101 training in February with 16 participants and 1 Wraparound refresher training in March with 13 participants. During this quarter, the Wraparound learning community shared responsibility for the meetings and we had other agencies facilitate the meetings.
- By the end of the 3<sup>rd</sup> Quarter, there were twenty-nine (29) certified facilitators and ten (10) 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.
- There were 4 facilitators certified this quarter.

For those providers using Wraparound with Care Coordination, the providers will receive continued or additional coaching to use a facilitation method. Additionally, this quarter, Wraparound Learning Communities were held on the following dates:

Circuit 15 – 1/19/2022, 2/16/2022

Circuit 19 – 1/27/2022, 2/23/2022

Combined Circuits 15 & 19 – 3/23/2022

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.

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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](http://www.sefbhn.org) under Wraparound Initiative. The toolkits were both monitored and updated for Quarter 3.

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

*Circuit-Specific Supervisors’ System Meetings*

Supervisors’ System Meetings continue to be held in both Circuits with the 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 – 1/13/2022, 2/10/2022, 3/10/2022

Circuit 19 – 1/20/2022, 3/24/2022. This group holds meetings quarterly.

Wraparound Learning Communities offered group coaching efforts and 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.

*Zero Suicide Training and Technical Assistance*

The following chart represents training activities related to Zero Suicide and Suicide Prevention during the 3<sup>rd</sup> quarter.

<b>Date(s) of Activity</b>	<b>Type: Training Activity</b>	<b>Training Location</b>	<b># Of Participants</b>
2/24/22	QPR	Teams Online for United Way of Palm Beach County	37
3/11/22	QPRT	Martin County School Board Training Room	11

- For Quarter 3, SEFBHN provided Question, Persuade, Refer “QPR” training virtually to 37 Mentors at United Way of Palm Beach County. QPR is evidence-based, basic suicide prevention on how to initially intervene in a crisis situation. This training was specifically tailored to adults mentoring at-risk youth.
- Question, Persuade, Refer and Treat “QPRT” training was provided by SEFBHN on-site at Martin County School District for 11 school counselors. QPRT is advanced, clinical suicide risk assessment management, and this training is to be delivered to clinicians who can triage suicide risk. More trainings for the Martin County School District are to be provided in Quarter 4.
- SEFBHN has scheduled and planned for four (4) QPRT trainings for New Horizons and South County’s Mobile Response Teams (MRT) in Quarter 4 and into Quarter 1 FY 22-23, ranging from May to September.

## (B) - Forensic Services

### *(1) Continued Efforts with Network Service Providers and Systems*

#### Recurring Activities Continued in Quarter 3 - FY 21-22

- 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. Training is 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.
- Training was 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 (Department of Children and Families) 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. 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 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.
- 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 consumers who have multiple needs: psychiatric, medical, and social needs.

#### New Activities for Quarter 3 - FY 21-22

- In Circuit 15 there have been two collaborative calls with DCF attorneys, DCF regional office, PD office, State Attorney's Office, SCMHC, and SEFBHN to make introductions and discuss issues or concerns with C15.
- In Circuit 15, SEFBHN has conducted meetings with the Public Defender's Office and Palm Beach Sheriff's Office to get Competency Restoration Training (CRT) in the jail. In the latest meeting Wellpath asked for a CRT proposal in the jail. In efforts to finalize this proposal, SEFBHN has reached

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out to the other MEs (Managing Entity) to gain information on getting CRT in their county jails. SEFBHN has also reached out to South County Mental Health Forensic Team who has been identified as the Provider to conduct CRT in the Palm Beach County jail. The proposal will be completed in April 2022 and will be presented to Wellpath.

- The SEFBHN Forensic Coordinator has reached out to the other MEs on CRT training curriculum. SEFBHN will be developing a comprehensive curriculum that is used across the Provider Network.
- SEFBHN received funding for TTI from DCF which was awarded to Mental Health Association of Palm Beach County (MHAPBC) in Circuit 15. The TTI funding is specifically intended for recovery support services to Forensic clients exiting Jail and client within the Community. This enhancement is in the first year of services to promote the inclusion of persons with lived experiences in the delivery of services in jails and the criminal justice system creating opportunities for sustainability using peers. MHAPBC have been working with South County Mental Health Center (SCMHC) to promote the necessary services. The TEAM (SCMHC, MHAPBC, and SEFBHN) have been collaborating to find success in meeting the consumers' needs. MHAPBC has already connected with only a handful of clients since receiving this funding and continues to look for creative ways to build connections with other community stakeholders and Providers to support them in their efforts to meet persons served needs.
- MHAPBC is collaborating with the Forensic teams to engage individuals getting out of jail with Supported Employment at their New Clubhouse located on Fern Street Downtown West Palm Beach, Belle Glades Clubhouse and Recovery Supported Services located on Congress Avenue off 45<sup>th</sup> Street. These services are presented during contact with the referred Forensic client based on their willingness to participate with MHAPBC Certified Peers.
  - Currently, the MHA PBC Clubhouse Program Director and Team Coordinator are the main contacts for the TTI Program. Upon receiving each referral for the Forensic Client being released from jail or already in the community, they will contact the client and engage them in Peer Supported Services.

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

Recurring Activities Continued in Quarter 3 - FY 21-22

- SEFBHN continues to ensure that FACT teams are meeting the required level of care for all FACT consumers despite a staff shortage during this transition period.
- SEFBHN continues to offer technical assistance to all FACT teams with ongoing training. Collaborative efforts between SEFBHN and Carisk have allowed for continued training on topics such as LOCUS/CALOCUS, FARS (Functional Assessment Rating Scale), waitlist, and concurrent reviews.
- Weekly Team meetings are conducted between SEFBHN, Carisk and all FACT team leads to increase communication, transparency, and collaboration across all FACT teams.

New Activities for Quarter 3 - FY 21-22

- To fill vacant positions and increase staff census at for the NHTC FACT Team, a new HR position was added for recruitment. Both New Horizons North (Ft. Pierce) and South (Stuart) teams have been able to fill both Team Lead positions along with several other staff.
- Upcoming negotiations with Henderson FACT Team will be completed for FY22/23. Tentative negotiation date of 5/10/22 has been scheduled. SEFBHN is projecting to add another FACT team in Circuit 15 through Henderson Palm Beach.

*(3) Department of Corrections*

Recurring Activities Continued in Quarter 3 - FY 21-22

- 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 has been noted through Q1 – Q3. Next steps are continuing to be implemented and 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*

- Keeping Families Connected (Lock-out) Committees in Circuit 19 are attended by 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 six (6) C19 Keeping Families Connected Staffings on 1/3/22; 1/19/22; 2/2/22; 2/17/22; 3/14/22; 3/17/22. Additionally, there were two (2) lockout staffings held in C15 with Chief JPO Starling facilitating held on 1/13/22 and 2/9/22 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 backup, as needed.
- In C19, SST staffings are only for safety determination and the 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



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need of the case determines system-level care coordination. Family System Managers attend as backup for the Children’s Care Coordination Manager, as needed.

- For this quarter, twenty-one (21) total SST calls were attended for both Circuits 15 & 19:
  - Circuit 15 –fifteen (15) SST calls were attended by a SEFBHN Children’s Care Coordination Manager and Family System Manager on 1/3/22; 1/6/22; 1/20/22; 2/11/22; 3/1/22; 3/2/22; 3/8/22; 3/10/22; 3/15/22; 3/16/22; 3/18/22; 3/24/22; 1/24/2022; 1/31/2022; 2/11/2022
  - Circuit 19 – six (6) SST calls were attended by a SEFBHN Children’s Care Coordination Manager and Family Systems Manager on 1/13/22; 2/3/22(x2); 2/15/22; 3/1/22
- 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 works 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, seventeen (17) total Interagency, Local, Regional, or State Review Team meetings were attended for both Circuits 15 & 19:
  - Circuit 15 – eight (8) total between Local, Regional, State: 2/2/22 IRT C15; 3/2/22 IRT C15; 1/6/22 youth-specific; 1/4/2022; 1/25/2022; Regional Review Team 1/7/22; 1/10/22; 3/4/22.
  - Circuit 19 –nine (9) total between Local, Regional, State Review Teams 1/25/22; 2/22/22 LRT C19; 1/26/2022 youth-specific; All State Review Teams held for one specific youth: 1/15/22; 1/12/22; 1/19/22; 2/2/22; 2/9/22; 3/9/22.

*(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 3rd quarter, SEFBHN staff attended and presented at Steering Committee meetings in C15 1/13/2022, 2/10/2022, and 3/10/2022. Circuit 19 meetings were attended on 1/11/2022, 2/10/2022, and 3/10/2022.
- 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 that have been discussed and recommended with Mobile



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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 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 have transitioned to being led from Judge Martz to the Lt. Foley of the Palm Beach Sheriff's in C15, which continued this quarter with a meeting on 2/14/2022. In addition, a short-term Intervention workgroup was established and SEFBHN participated on 1/11/2022 and 1/26/2022.
- SEFBHN staff attended several School Health Advisory Committees, including the Mental Health Sub-committee in Palm Beach on 01/18/2022 and 02/10/2022. SEFBHN attended on 01/06/2022 and 02/03/2022, and 03/03/2022 for St. Lucie County. The Family Systems Manager presented a Mobile Response presentation at the February St Lucie County meeting. 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 Committee has added House Bill 945 as a standing agenda item. Henderson Behavioral Health presented BNET to school staff as an opportunity to increase referrals to their program. And South County Mental Health Center has continued to participate in presenting its MRT data monthly.
- Children's Care Coordinator and Coordinator of Mental Health Services in St Lucie and Martin County School Systems collaborated to bring suicide prevention and risk assessment training to their front-line personnel. The training was provided to Martin County School Board Social Services Personnel this quarter in QPRT advanced suicide risk assessment to better enhance the skills of their staff and align the evidence-based risk assessment tools with that of what the Mobile Response Teams use during a crisis.
- 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 on 1/20/2022 and 2/17/2022 providing information about data available for uninsured youth and mobile response teams.
- The Family Systems Manager and Director of Children's System of Care facilitated a meeting with the School District of Martin County on 03/01/2022 to facilitate open conversation and collaborations with NHTC MRT.
- SEFBHN CEO and Director of Children's System of Care met with the Assistant Superintendent and Director of Mental and Behavioral Health of the School District of Palm Beach County on 3/29/2022 discussing the need for a BAA/MOU and Children's Care Coordination opportunities. Follow-up meetings will address these issues. A follow-up meeting was also created specifically for MRT and CAPE team collaboration.

*(7) Collective Impact Projects*

- A BeWellPBC Stewardship Council was held this quarter on 2/24/2022 and SEFBHN continues to collaborate with and support this collective impact project. SEFBHN and BeWellPBC also met to

engage and focus on the next steps for continuing growth in our system of care and focusing on psychiatry needs and pediatric integrated care opportunities as well as the workforce pipeline.

- SEFBHN also continued meetings with the Palm Beach County Pediatric Integrated Care Project, which added the Child Psychiatry workgroup members this quarter. 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 the 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 added provider level care coordination with the Center for Child Counseling.

*(8) System-level Children’s Care Coordination*

- During the 3rd 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, JFKN 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 that 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 JFKN, 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 Treatment 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 JFKN and New Horizons were held: 1/3/22; 1/31/22; 2/14/22; 2/28/22; 3/14/22; 3/28/22.
  - Navigate and Children’s Care Coordination meeting identify transitional age youth: 1/21/22; 2/18/22
  - Monthly Meeting with all Provider Agencies for Children’s Care Coordination: 1/13/22; 2/10/22; 3/10/22.
  - Children’s Care Coordination Manager attended Regional Meetings for Care Coordinators with Tallahassee staff Dr. Fitzgerald on 2/16/22; 2/28/22; 3/16/22; the

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regional meeting also set up collaborative training opportunities monthly that SEFBHN's Children's Care Coordinator attended on 1/11/22; 3/8/22.

- Child welfare consumers who are on the Waitlist for services are also targeted for care coordination services as a priority population. Care coordination efforts at the system level are done to ensure interim services are provided to the consumers. New Horizons CAT families on the waitlist are provided care coordination and added support by Mobile Response Team's Care Coordinator to ensure the crisis is managed and further family and youth deterioration can be avoided.
- During the 3rd quarter, Child Specific Staffings are also attended by the 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 3rd quarter, there were twelve (12) specific staffings from a variety of sources, DCF, CBC, MMA plans, DJJ, and behavioral health providers.
- Additionally, SEFBHN Children's team 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. SEFBHN is working on the development of a Business Associate Agreement with a Memorandum of Understanding to be presented to Lawnwood to further the relationship. In the meantime, conversations are had with the clinical department regarding children in need of care coordination.

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

- Direct Supervisors' System Meetings were held in Circuit 15 on 01/13/2022, 02/20/2022 and 3/10/2022 with topics covered such as working together across providers towards waitlist reduction, Navigate and CAT programs, Wraparound initiative including transition readiness scale, workforce support,
- Direct Supervisors' System Meetings were held in Circuit 19 on 1/13/2022 and 3/24/2022 with topics covered such as the new SAMHSA Children's System of Care grant in Martin and St Lucie counties.
- Children's Care Coordination Manager attended C15 Child Abuse Death Review Committee held 2/24/22 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 Coordination Manager continues as the Secretary of the St. Lucie County's Department of Juvenile Justice Advisory Council. The meetings were held monthly on 1/18/22; 2/15/22. Additionally, the 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 1/18/22; 2/15/22; 2/17/22

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and we discussed the next steps in funding and 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 2/9/22; 3/2/22; 3/23/22 meeting was attended and barriers to treatment were addressed and removed by collaborative efforts. Referrals to Adult and Children’s Care Coordination were made to further assist youth and families.
- A new connection was made with the FBI Human Trafficking Advocates and a meeting was held with DCF/SAMH and SEFBHN on 1/3/22. Additionally, the PBCSO Human Trafficking Task Force, DCF, ChildNet, and SEFBHN met to coordinate services for high-risk youth in our area. A meeting was held on 2/28/22 and then a follow-up on 3/2/22 for further linkage and coordination of agencies and services.
- In Circuit 15, Family Systems Manager provided monthly technical assistance and support to the Mobile Response Team at South County Mental Health Center on 02/11/2022, 2/16/2022, 03/07/2022, and 03/29/2022.
- 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 01/25/2022, 02/22/2022, and 03/22/2022.
- The Family Systems Manager and Director of Children’s System of Care facilitated a meeting with the School District of Martin County on 03/01/2022 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, 3 meetings were held on: 01/28/2022, 02/25/2022, and 03/25/2022.
- In Circuit 15, Family Systems Manager provided monthly technical assistance and support to the Community Action Team (CAT)/Chrysalis on 1/10/2022; 2/14/2022; 3/14/2022. Additional meetings with the director of Chrysalis/CAT and the Family Systems Manager occurred on 1/6/2022; 1/12/2022; 1/27/2022; 2/7/2022; 2/15/2022; 2/25/2022; 3/9/2022; 3/12/2022 and 3/28/2022 relating to new team members, data requirements, and person served related staffings.
- Circuit 19, Family Systems Manager provided monthly technical assistance and support to CAT/New Horizons of the Treasure Coast (NHTC) on 1/7/2022; 2/11/2022, and 3/11/2022. Additional meetings with the director of CAT/NHTC and the Family Systems Manager occurred on 1/21/2022; 2/3/2022; 2/10/2022; 2/23/2022; 2/28/2022; 3/17/2022; and 3/25/2022 in direct response to the agencies’ waitlist, person served related topics/staffings, and staff retention.
- Family Systems Manager attended a Statewide CAT call with DCF. The only one that occurred this quarter was on 1/21/2022.
- 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.

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

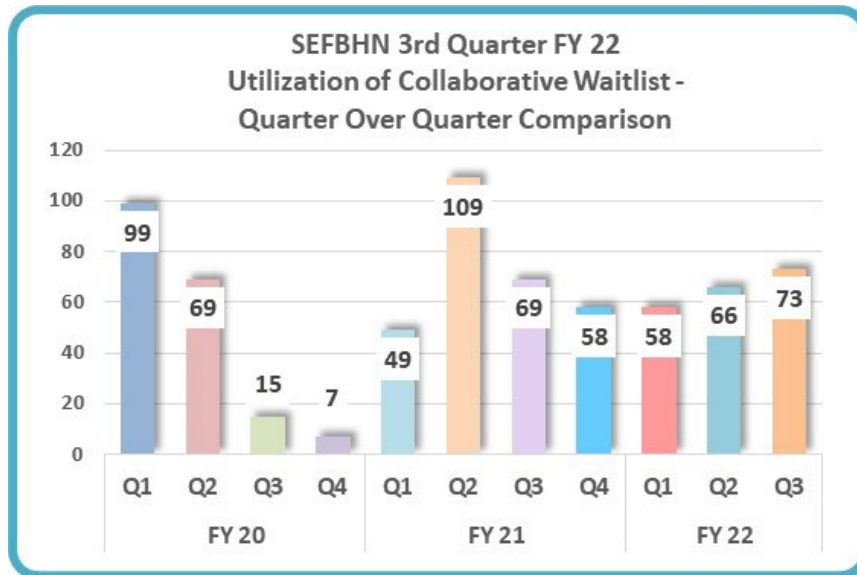
(1) Centralized Electronic Waitlist 3rd Quarter Update

**3<sup>rd</sup> Quarter FY 22 Waitlist Update**

Seven (7) providers added 73 individuals to the Collaborative Waitlist in the third quarter of FY 21-22 distributed across the 3 months as shown in the following table:

<b>SEFBHN 3rd Quarter FY 22 Waitlist Update</b>				
<b>Persons Waitlisted by Provider and Month</b>				
<b>Provider</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Total</b>
The Chrysalis Center Inc.	7	7	10	24
South County Mental Health Center	2	3	7	12
Jeff Industries Inc.	1		1	2
Housing Partnership Inc.			2	2
New Horizons of The Treasure Coast	5	3	2	10
Substance Abuse Council of Indian River County		1	2	3
Counseling and Recovery Center	6	8	6	20
<b>Grand Total</b>	<b>21</b>	<b>22</b>	<b>30</b>	<b>73</b>

The ongoing quarter over quarter comparison shows that utilization of the Waitlist continues to stabilize and is trending slightly upward:



In the third quarter, 35 of the 73 waitlisted individuals were priority population clients. The following 4 tables show that these 35 priority clients were comprised of 4 homeless persons, 13 child welfare involved individuals, 11 persons using IV drugs, and 7 pregnant women.

SEFBHN 3rd Quarter FY 22 Waitlist Update Homeless Waitlisted Persons				
Listing Provider	Jan	Feb	Mar	Total
Housing Partnership Inc.	-	-	1	1
Substance Abuse Council of Indian River County	-	-	1	1
Counseling and Recovery Center	-	-	2	2
<b>Grand Total</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>4</b>

SEFBHN 3rd Quarter FY 22 Waitlist Update Child Welfare Involved Waitlisted Persons				
Listing Provider	Jan	Feb	Mar	Total
The Chrysalis Center Inc.	3	2	2	7
Counseling and Recovery Center	2	1	3	6
<b>Grand Total</b>	<b>5</b>	<b>3</b>	<b>5</b>	<b>13</b>

SEFBHN 3rd Quarter FY 22 Waitlist Update Waitlisted IV Drug Use Individuals				
Listing Provider	Jan	Feb	Mar	Total
Housing Partnership Inc.			2	2
Counseling and Recovery Center	2	5	2	9
<b>Grand Total</b>	<b>2</b>	<b>5</b>	<b>4</b>	<b>11</b>

SEFBHN 3rd Quarter FY 22 Waitlist Update Waitlisted Pregnant Women				
Listing Provider	Jan	Feb	Mar	Total
Counseling and Recovery Center	3	3	1	7
<b>Grand Total</b>	<b>3</b>	<b>3</b>	<b>1</b>	<b>7</b>

The characteristics that define priority clients often are often experienced together. That is, someone using IV drugs is likely to also be child welfare involved if they have children. As shown in the next 4 tables, the combination of issues exhibited by the 35 waitlisted persons included:

- 2 who were both homeless and using IV drugs
- 1 who was homeless and child welfare involved
- 5 who were pregnant and using IV drugs
- 1 who was pregnant and child welfare involved.

SEFBHN 3rd Quarter FY 22 Waitlist Update Homeless IV Drug Use Individuals Waitlisted				
Listing Provider	Jan	Feb	Mar	Total
Housing Partnership Inc.	-	-	1	1
Counseling and Recovery Center	-	-	1	1
<b>Grand Total</b>	<b>-</b>	<b>-</b>	<b>2</b>	<b>2</b>

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**SEFBHN 3rd Quarter FY 22 Waitlist Update  
Homeless Child Welfare Involved Persons Waitlisted**

Listing Provider	Jan	Feb	Mar	Total
Counseling and Recovery Center	-	-	1	1
<b>Grand Total</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>

**SEFBHN 3rd Quarter FY 22 Waitlist Update  
Pregnant IV Drug Using Women Waitlisted**

Listing Provider	Jan	Feb	Mar	Total
Counseling and Recovery Center	2	3	-	5
<b>Grand Total</b>	<b>2</b>	<b>3</b>	<b>0</b>	<b>5</b>

**SEFBHN 3rd Quarter FY 22 Waitlist Update  
Pregnant Child Welfare Involved Women Waitlisted**

Listing Provider	Jan	Feb	Mar	Total
Counseling and Recovery Center	1	-	-	1
<b>Grand Total</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>

The CAT Team is the most frequently waitlisted service with 33 of the 73 individuals added in the 3<sup>rd</sup> quarter awaiting an opening, as presented in the next table. Nineteen (19) persons were waitlisted for Individual Intervention services and 8 for Medical Services.

<b>SEFBHN 3rd Quarter FY 22 Waitlist Update Most Waitlisted Services/Projects</b>				
Covered Service/Project	Jan	Feb	Mar	Total
B4 - CAT Team	11	10	12	33
11 - Intervention - Individual	5	8	6	19
12 - Medical Services		3	5	8
19 - Residential Level II	2		2	4
21 - Residential Level IV	1		2	3
14 - Outpatient - Individual		1	1	2
01 - Assessment	1			1
18 - Residential Level I			1	1
25 - Supportive Employment			1	1
C1 - Sustainability Payment for COVID related funds/services	1			1
<b>Grand Total</b>	<b>21</b>	<b>22</b>	<b>30</b>	<b>73</b>

The next table shows that 24 persons were discharged from the Waitlist during the third quarter. Two-thirds of them were removed from the Waitlist because they began receiving services at the provider who waitlisted them. Five were removed after the providers lost contact with them.



SEFBHN 3rd Quarter FY 22 Waitlist Update				
Discharge Reasons				
Discharge Reason	Jan	Feb	Mar	Total
1 - Receiving Services at this Provider	6	3	7	16
4 - Declined		1		1
8 - Incarcerated	2			2
9 - No face-to-face telephone or other documented contact in last 30 days		4	1	5
<b>Total Discharges</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>24</b>
Not discharged this quarter	13	14	22	49
<b>Grand Total</b>	<b>21</b>	<b>22</b>	<b>30</b>	<b>73</b>

The average length of stay (ALOS) on the Waitlist for all persons was 24 days – up from 19.4 days in the second quarter. As shown below, the number of days a person must wait for services ranges from 7 days for Individual Outpatient services to 35 days for an Assessment:

SEFBHN 3rd Quarter FY 22 Waitlist Update	
Average Length of Stay (ALOS) on the Waitlist by Covered Service	
Covered Service	ALOS (in Days)
01 - Assessment	35
19 - Residential Level II	35
25 - Supportive Employment	27
11 - Intervention - Individual	24
18 - Residential Level I	8
14 - Outpatient - Individual	7
12 - Medical Services	-
21 - Residential Level IV	-
<b>Grand Total</b>	<b>24</b>

ALOS by provider is shown in the following table. There is considerable variance among providers with Substance Abuse Council of Indian River County averaging only a 7 day wait, while the wait for SCMHC services averages 35 days.

SEFBHN 3rd Quarter FY 22 Waitlist Update	
ALOS on Waitlist by Provider	
Listing Provider	ALOS in Days
South County Mental Health Center	35
Jeff Industries Inc.	27
Counseling and Recovery Center	24
Substance Abuse Council of Indian River County	7
The Chrysalis Center Inc.	-
Housing Partnership Inc.	-
New Horizons of The Treasure Coast	-
<b>Grand Total</b>	<b>24</b>

Members of priority populations waited for services from 6 to 23 days. Most notable in the following table is that the ALOS for pregnant women was 23 days – a length of time that exceeds SAPTBG standards even with interim services being provided. Follow-up with the provider(s) is needed.

<b>SEFBHN 3rd Quarter FY 22 Waitlist Update</b>	
<b>ALOS on Waitlist by Priority Population</b>	
<b>Priority Population</b>	<b>ALOS in Days</b>
Child Welfare Involved	25
Intravenous Drug Use	23
Pregnant	23
Homeless	6

**(E) Provider Peer Activities**

The following information represents Peer Activities conducted by SEFBHN during the 3rd quarter:

*(1) Peer Support Activities for Quarter 3*

During this third quarter, January through March 2022, Rebel Recovery engaged an average of 192 participants per month, up from an average of 166. An average of 172 participants were engaged in treatment services with a behavioral health organization, an increase from 152. In March, 112 received Medication Assisted Treatment and 53 received abstinence-based treatment services. 15 engaged with peer services while attending abstinence-based recovery support groups. Rebel Recovery continues to surpass the performance measure of percentage of persons served who are engaged in behavioral health services by averaging 90% per month (target measure percentage is 75% a month).

Rebel Recovery Florida continues to support their participants by linking them with resources tailored to their needs. They continue to maintain a strong relationship with community-based behavioral health providers to best meet the needs of the participants who they serve. Rebel Recovery has worked with and linked participants who are experiencing homelessness, substance use and or co-occurring to many network providers for treatment. Some of the Network providers include Center for Family Services, Wayside House, Drug Abuse Foundation and have also identified Independent Housing for participants experiencing homelessness. They have also successfully linked participants with Medicated Assisted Treatment (MAT) providers such as The Recovery Research Network, Community Partners’ Village for Change, Drug Abuse Foundation of Palm Beach and Wayside House, to name a few.

Rebel Recovery Florida continues to promote recovery through education through their Recovery Community Organization (RCO). During this quarter, Rebel Recovery hosted many trainings/support groups. They consisted of staff, participants and/or community members. Some of the trainings held include but are not limited to: Helping Others Heal - Peer Support Training, Mental Health First Aid, Trauma-Informed Peer Services and WRAP Seminar 1. In addition, they’ve reengaged staff, participants, and community members in activities such as Open Gaming, Yoga Journey, after a brief pause in January and February due to increase COVID cases.

Rebel Recovery’s services and programs remain steady and continue to expand. It is worth noting that they have a new partnership with Delray Beach Public Library to expand outreach. In addition, they were

awarded NASTAD/ AIDS United grant for expanding SSP capacity to include covid vaccine outreach and Navigation.

RiteLife promotes recovery through Education and Training, Recovery Support Services and Housing Support Services. They remain committed to reducing Stimulant and Opioid use by maintaining connection to Medicated Assisted Treatment (MAT) providers for indigent services. Through their Recovery Community Organization (RCO) in Okeechobee, they serve adults with substance use disorder or a history of it, and adults with a Mental Health diagnosis in their respite in St. Lucie County. Case Management, Recovery Support Individual/Group and Outreach are among other services that they provide.

During the last quarter, RiteLife attended and engaged in several trainings/activities. Helping Others Health (HOH), First Responders: Preventing Behavioral Health Risk (FADAA), Stimulant Use Disorder Webinar series and Opioid Use and Older Adults Webinar are a few training opportunities they attended. RiteLife continues to network with local community providers and met with the Sheriff of Okeechobee. They have also employed in other collaborative efforts by attending the FLAPP Monthly Affiliate Call, Treasure Coast Opioid Task Force Prevention Subcommittee Meeting, SOAR Leaders Collaborative as well as the Community Health Improvement Plan at the Florida Department of Health.

They are continuing to work collaboratively with Mental Health Court in Okeechobee, Drug Court in Okeechobee and DCF in Okeechobee and Martin Counties. RiteLife has completed 17 SOAR applications this quarter and will likely exceed their target of 20 by next quarter. RiteLife will continue to work towards accreditation. It is noteworthy to share that RiteLife was able to pass out 360 Narcan Kits at the Okeechobee County Health Expo. They will continue to attend community events to make their presence known to increase their opportunities to serve more consumers.

Our Village Okeechobee peer support specialists support and coach children and transitional-aged youth in Okeechobee County, including helping to improve the child's overall skill set. Our Village serves all youth, to include LGBTQ+, transitional aged youth, teen parents, children, and young adults transitioning from the New Horizons crisis unit, or another inpatient facility. Additionally, they serve youth who may be involved in juvenile justice, child welfare, drug, or mental health court. Their support involves the use of evidence-informed practices like the use of Wellness Recovery Action Planning, Motivational Interviewing, Wraparound coaching, and SOAR. This can help to have them develop skills that are transferable through living, working, and receiving an education. Services often include tobacco use reduction and education, general substance use or mental health education or connection to other services, helping the youth to have coordinated services and understand the role that each person on their team plays. Referrals are largely received from partners in the school district, family and friends, physicians/primary care, outreach efforts, and outpatient providers. In this 3<sup>rd</sup> quarter, they engaged about 50 youth plus family members.

The Network Prevention Manager has been trained as a Trainer for the "Recovery Capital Training". On March 29-30, 2022, the Network Prevention Manager conducted a new 2-day "Recovery Capital Training" which had immediate positive feedback due to the shortened format. In April, a second team will conduct the same 2-day training to allowing further feedback on the new format. The liaisons plan to reconvene to review recommendations with the Recovery Capital Trainers. 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. SEFBHN continues to work with 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 assist mothers, children, and families in reaching a long-term, sustainable recovery. 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. As previously reported, 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. The Pavilion is expected to be open towards the beginning of 4<sup>th</sup> Quarter in FY 21-22.

During 3<sup>rd</sup> quarter, SEFBHN Network Providers (Drug Abuse Foundation of Palm Beach, Counseling and Recovery Center, Housing Partnership and Wayside House) served 122 individuals with treatment services specific to the pregnant and post-partum women struggling with substance use disorders. Out of those 122 women being served in these specialty programs, 63% were parenting children between the ages zero (0) to six (6) years of age. Moreover, 36 of the 122 women being served were pregnant.

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

During the 3<sup>rd</sup> quarter, the NAS/SEN Coordinator at Drug Abuse Foundation of Palm Beach, shared the following success story:

“My initial engagement with Ms. B was to first acknowledge her as an individual and inquire about her overall wellbeing. I introduced myself and built the rapport as an individual genuinely concerned about her as another individual. Afterwards, I received the consumer's consent to speak with her support system (her partner). I seized the opportunity to introduce myself to him and provide insight about the services offered at DAF with our DCF partnership. I solicited her partner's support in encouraging her to seek further engagement with DAF. Ms. B advised she was only interested in detox, and she stated she would call me to let me know when she was discharged from the hospital and enroute to detox.

I reassured her that I would be available to her and actively engaged throughout her time at detox. As promised, I did engage with Ms. B throughout her time at detox. I tried to meet with her after her initial admission, and I continued to visit her every day that she was in detox. Through this consistency, I was able to persuade her into engaging into residential treatment. Currently, she is participating in the Mommy & Me programmatic format and is awaiting her next OB/GYN appointment.

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I will continue to meet with Ms. B as the biggest takeaway was the consistency in engagement aiding in her openness to additional services”.

**(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 3.

**(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 3: Tier 1 validations have been completed on all contracted providers in the first quarter; there were none completed in the 3rd quarter.

*Tier 2 and Tier 3* - The following represents the status of Tier 2 and Tier 3 validations as of Quarter 3, January - March 2022:

Agency	Contract(s)	Date Tier 2 Begun	Date Tier3 Begun	Current Status
<b>Alternatives in Treatment, LLC d/b/a Mandala Healing Center</b>	PDA61	11/1/2021	12/8/2021	Tier 3 Report Date: 1/19/2022
<b>Access Recovery Solutions, LLC</b>	PDA54	10/29/2021	11/18/2021	Tier 3 Report Date: 1/20/2022
<b>South County Mental Health Center, Inc.</b>	PNA31	12/16/2021	12/15/2021	Tier 3 Report Date: 2/2/2022
<b>Behavior Basics, Inc.</b>	ZNA29	N/A	1/14/22	Tier 3 Report Date: 2/9/2022
<b>Comprehensive Wellness Centers, LLC</b>	PTA02	11/18/2021	1/19/2022	Tier 3 Report Date:

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				2/10/2022
<b>NAMI Palm Beach County, Inc.</b>	PNA17	11/23/2021	1/28/2022	Tier 3 Report Date: 2/22/2022
<b>Public Defenders Office, Nineteenth Judicial Circuit</b>	ZDA08	1/18/2022	2/2/2022	Tier 3 Report Date: 2/28/2022
<b>Our Village Okeechobee, Inc.</b>	ZTF15	N/A	1/31/2022	Tier 3 Report Date: 3/1/2022
<b>Counseling and Recovery Center, Inc.</b>	ZDA14	1/28/2022	N/A	Tier 2 Report Date: 3/2/2022
<b>Housing Partnership, Inc. d/b/a Community Partners</b>	PTF07	11/9/2021	2/4/2022	Tier 3 Report Date: 3/10/2022
<b>Tykes and Teens, Inc.</b>	ZNC25	2/16/2022	N/A	Tier 2 Report Date: 3/11/2022
<b>The Lord’s Place, Inc.</b>	PNA22	2/1/2022	N/A	Tier 2 Report Date: 3/16/2022
<b>Mental Health Association of Palm Beach County, Inc. d/b/a Mental Health America of Palm Beach County</b>	PNA32	2/8/2022	2/17/2022	Tier 3 Report Date: 3/17/2022
<b>Palm Beach Habilitation Center, Inc.</b>	PNA19	1/31/2022	2/11/2022	Tier 3 Report Date: 3/17/2022
<b>The Recovery Research Network Foundation, Inc.</b>	PDA57, PDA59	1/14/2022	2/9/2022	Tier 3 Report Date: 3/18/2022
<b>Mental Health Association in Indian River County, Inc.</b>	ZNA24, ZNA30	1/28/2022	2/14/2022	Tier 3 Report Date: 3/23/2022
<b>Jeff Industries, Inc.</b>	PNA16	2/14/2022	2/17/2022	Tier 3 Report Date: 3/24/2022
<b>The Chrysalis Center, Inc.</b>	PNC26	1/28/2022	2/25/2022	Tier 3 Report Date: 3/25/2022
<b>Henderson Behavioral Health, Inc.</b>	LTF10	1/28/2022	2/22/2022	Tier 3 Report Date: 3/25/2022
<b>211 Palm Beach/Treasure Coast, Inc.</b>	LTF09	1/21/2022	2/18/2022	Tier 3 Report Date:

				3/31/2022
<b>Ritelife Services, Inc.</b>	ZDA24	2/21/2022	2/28/2022	Report Pending
<b>Ebb Tide Treatment, LLC</b>	PDA47	2/25/2022	3/9/2022	Report Pending
<b>Pinnacle Wellness Group, LLC</b>	ZDA23	3/31/2022	TBD	Ongoing

**(J) Continuous Quality Improvement**

The following information was presented during the 3rd Quarter CQI meetings which were conducted through a Virtual Platform, Microsoft Teams.

- **Lindsay Slattery-Cerny** presented regarding the SEFBHN & HCSEF Statewide Behavioral Health Needs Assessment. For 2022, Southeast Florida Behavioral Health Network (SEFBHN), in partnership with the Health Council of Southeast Florida (HCSEF), has been a part of the above-mentioned workgroup to create and develop both the Statewide Behavioral Health Assessment and a Cultural Health Disparities Survey.
- **Dr. Persaud-Vazquez** from Drug Abuse Foundation presented on Medication Assisted Treatment (MAT) in pregnant and postpartum women.
- **Thomas Beyer** and **George Lydon** presented regarding Transpire/Inspire Recovery’s LGBTQ+ programs provided in Circuit 15, Palm Beach County.
- **Joey Nieves** and **Christina Mitchel** presented regarding Peer Support groups and services provided at The Lord’s Place, in Circuit 15, Palm Beach County.
- **Jill Sorensen** and **Jody Olayinka-Lebrun** presented on the topic of telehealth and Wraparound. The following information was shared with the group:
  - Questions were asked to providers that were asked to national providers to see if the SEFBHN network is aligned with respondent experiences from National Wraparound Institute.
  - Positive results from the survey as well as less than ideal situations were discussed.
  - Possible QA/QI solution (Wraparound telehealth survey) offered to interested providers
- **Sharyn Dodrill** reviewed important information regarding changes to FASAMS v14 and ensuring data integrity.

**(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 CJMHSA Reinvestment Grant. There were 19 clients who entered this quarter who received an assessment. All high utilizers were referred to the Wraparound case managers for a more intensive approach. Already, there are 36 clients who have been referred to New Horizons



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for the Wraparound Case Management. SEFBHN is already seeing a reduction in high utilizers, with less reported hospital admissions and greater stabilization in housing. For the first six quarters of the grant, 60 clients were discharged and 49 of those clients were successfully discharged. This means that 81% of clients who left Mental health Court, did so having met all expectations. This quarter, operations have successfully continued, despite challenges with staffing. Clients continue to find employment opportunities, with many open and hiring positions currently, and several are doing very well at maintaining those positions. There is a current partnership with Vocational Rehabilitation and UP to assist clients in finding employment.

Mental Health Association is providing therapy and 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 have allowed for clients to avoid deterioration in their mental health needs until a more stable provider can be established, or receive psychiatric medications right away once released from jail without a break in receiving medications. This is proving to have a great effect on the continued stability of mental health courts clients entering the community and staying in the community with less hospitalizations and less new crimes committed.

Wraparound 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.

Two transitional houses have been maintained, 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 County Specialty Courts recently were awarded a grant for Inpatient SUD treatment and have had 3 clients utilizing that so far with at least one more referred. Two clients are at Port Saint Lucie Hospital, and one is scheduled for intake at Independence Recovery of New Horizons.

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:

- *68 clients with Misdemeanor x average 40 days in jail x \$125.00 average cost per day = \$340,000*
- *138 clients with felony charges x average 98 days in jail x \$125.00 average cost per day = \$1,690,500*
- *206 total clients = 16,244 jail bed days x \$125.00 per day = \$2,030,500 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 36 clients. Sixteen clients have had misdemeanors and 20 clients with Felony charges. To date, there were 21 successful graduations and 3 unsuccessful

discharges. The MHC is successfully discharging clients at 80%. Through this grant, the expansion will include continued targeted case management, therapy, psychiatric services, and medication management with Legacy Behavioral Health Center. Peer Specialist working with a new provider in the area at Rite life will be assisting 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. Last 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. This quarter, 5 clients with co-occurring disorders received a variety of services like residential treatment, Intensive outpatient treatment, and outpatient substance use treatment through the grant.

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:

- 16 clients with Misdemeanor x average 40 days in jail x \$125.00 average cost per day = \$80,000
- 20 clients with felony charges x average 98 days in jail x \$125.00 average cost per day = \$245,000
- 36 total clients with 2,600 days x \$125.00 per day = \$325,000

#### (L) Consumer Satisfaction Surveys

SEFBHN continues to collect consumer satisfaction survey data using the previous format published by DCF. Year-to-date, over 3,100 surveys have been collected. SEFBHN utilizes this vital data to help evaluate opportunities for improvement both at individual providers and at a system level. SEFBHN is prepared to implement use of the new survey questions which were recently finalized as soon as it is published and released.

#### (M) SEFBHN 3rd Quarter FY 21-22 LOCUS and CALOCUS Update

SEFBHN network providers performed 1,171 LOCUS and 749 CALOCUS level of care evaluations during the third quarter of fiscal year 2021-2022. NHTC accounted for 46% of the LOCUS and 42% of the CALOCUS completed – see the following tables.

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SEFBHN 3rd Quarter FY 22 LOCUS Update					
LOCUS Evaluations by Provider and Month					
Provider	Q3 FY 22			Grand Total	% of Total
	Jan	Feb	Mar		
Behavior Basics, Inc.	4	2		6	1%
Brighter Family Center, Inc.	123	104	122	349	30%
HENDERSON BEHAVIORAL HEALTH - SEFBHN	2	4	16	22	2%
Housing Partnership	60	49	36	145	12%
JEFF INDUSTRIES INC	3	3	2	8	1%
JFK MEDICAL CENTER-NORTH CAMPUS	1	1	3	5	0%
NEW HORIZONS OF THE TREASURE CO - SEFBHN	203	180	157	540	46%
SOUTH COUNTY MENTAL HEALTH CENTER	41	19	33	93	8%
The Chrysalis Center Inc. - SEFBHN		1	2	3	0%
<b>Grand Total</b>	<b>437</b>	<b>363</b>	<b>371</b>	<b>1171</b>	<b>100%</b>

SEFBHN 3rd Quarter FY 22 CALOCUS Update					
CALOCUS Evaluations by Provider and Month					
Provider	Q3 FY 22			Grand Total	% of Total
	Jan	Feb	Mar		
Brighter Family Center, Inc.	12	8	12	32	4%
FATHER FLANAGAN'S BOYS TOWN	20	17	30	67	9%
HENDERSON BEHAVIORAL HEALTH - SEFBHN	6	16	12	34	5%
Housing Partnership	54	58	43	155	21%
HPS HELPING PEOPLE SUCCEED INC.	20	25	24	69	9%
NEW HORIZONS OF THE TREASURE COAST	87	114	116	317	42%
Our Village Okeechobee, Inc.	1	1	2	4	1%
SOUTH COUNTY MENTAL HEALTH CENTER	0	6	1	7	1%
The Chrysalis Center Inc. - SEFBHN	13	33	18	64	9%
<b>Grand Total</b>	<b>213</b>	<b>278</b>	<b>258</b>	<b>749</b>	<b>100%</b>

LOC 2 – Low Intensity Community Based Services continues to be the most recommended level of care for both LOCUS (42%) and CALOCUS (30%), as shown in the next two tables.

SEFBHN 3rd Quarter FY 22 LOCUS Update											
LOCUS-Recommended Level of Care (LOC) by Provider											
Recommended Level of Care	Provider									Grand Total	% of Total
	BB	BFC	HBH	HP	JI	JFK	NHTC	SCMHC	TCC		
Basic Services		32		17	1		6	6		62	5%
LOC 1 - Recovery Maintenance and Health Management	1	94	2	12	1		18	14		142	12%
LOC 2 - Low Intensity Community Based Services	3	145	5	37	5		252	47		494	42%
LOC 3 - High Intensity Community Based Services		55	1	48	1		29	13	1	148	13%
LOC 4 - Medically Monitored Non-Residential Services		3	2	8			7			20	2%
LOC 5 - Medically Monitored Residential Services	2	17	11	20		2	165	12	2	231	20%
LOC 6 - Medically Managed Residential Services		3	1	3		3	63	1		74	6%
<b>Grand Total</b>	<b>6</b>	<b>349</b>	<b>22</b>	<b>145</b>	<b>8</b>	<b>5</b>	<b>540</b>	<b>93</b>	<b>3</b>	<b>1171</b>	<b>100%</b>

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CALOCUS-Recommended Level of Care (LOC) by Provider											
CALOCUS-Recommended Level of Care	Provider									Grand Total	% of Total
	BFC	BT	HBH	HP	HPS	NHTC	OV-C	SCMHC	TCC		
Basic Services for Prevention and Maintenance	4	12	2	38	5	11			4	76	10%
LOC 1 - Recovery Maintenance and Health Management	11	12	7	18	1	10	1	1	4	65	9%
LOC 2 - Low Intensity Community Based Services	10	8	6	51	53	83		3	14	228	30%
LOC 3 - High Intensity Community Based Services	5	13	8	32	6	17	1	3	12	97	13%
LOC 4 - Medically Monitored Community Based Services	1	3	2	3		35	1		11	56	7%
LOC 5 - Medically Monitored Residence Based Services		16	5	13	4	98	1		15	152	20%
LOC 6 - Medically Managed Residence Based Services	1	3	4			63			4	75	10%
<b>Grand Total</b>	<b>32</b>	<b>67</b>	<b>34</b>	<b>155</b>	<b>69</b>	<b>317</b>	<b>4</b>	<b>7</b>	<b>64</b>	<b>749</b>	<b>100%</b>

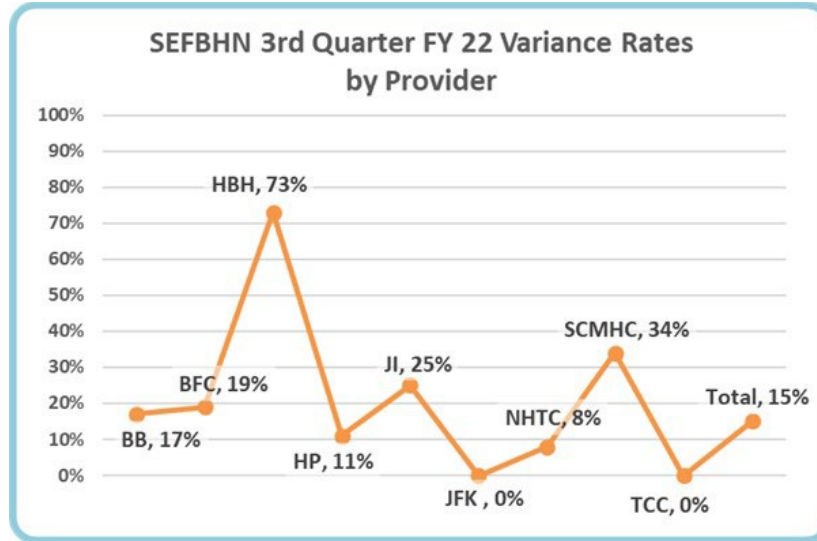
When a clinician completes a LOCUS or a CALOCUS assessment, the result is an instrument-recommended LOC for an individual’s placement. Both the LOCUS and CALOCUS instruments allow a clinician to override their recommended LOC with a clinician-selected Actual LOC, but a clinician must specify the reason 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% - the same rate as achieved in the second quarter but still 50% above the 10% target set by SEFBHN. Clinical judgment continues to be cited overwhelmingly as the reason for the LOCUS variances, with 143 out of the 175 variances using this reason. While a 15% variance rate is above target, it is still acceptable from a quality assurance standpoint.

SEFBHN 3rd Quarter FY 22 LOCUS Update										
Variance Reasons and Rates by Provider										
Variance Reason	Provider									Total
	BB	BFC	HBH	HP	JI	JFK	NHTC	SCMHC	TCC	
Client chose a LOC other than the one recommended		2			1		4			7
Client denies SPMI; refuses to seek services							1			1
Client dropped out of treatment							1			1
Client is court ordered to a higher level of care								1		1
Client is court ordered to a lower LOC							1			1
Client refuses recommended level		4	1							5
Client waitlisted for Recommended LOC							2			2
Client's finances/job deter treatment level					1					1
Client's priority is shelter at this time		1	1							2
Clinical Judgment		55	14	15			28	31		143
LOC is clinically appropriate	1	1								2
Services at recommended LOC not what client needs		2		1			6			9
<b>Total Variances</b>	<b>1</b>	<b>65</b>	<b>16</b>	<b>16</b>	<b>2</b>	<b>0</b>	<b>43</b>	<b>32</b>	<b>0</b>	<b>175</b>
<b>No Variances</b>	<b>5</b>	<b>284</b>	<b>6</b>	<b>129</b>	<b>6</b>	<b>5</b>	<b>497</b>	<b>61</b>	<b>3</b>	<b>996</b>
<b>Grand Total</b>	<b>6</b>	<b>349</b>	<b>22</b>	<b>145</b>	<b>8</b>	<b>5</b>	<b>540</b>	<b>93</b>	<b>3</b>	<b>1171</b>
<b>Variance Rate</b>	<b>17%</b>	<b>19%</b>	<b>73%</b>	<b>11%</b>	<b>25%</b>	<b>0%</b>	<b>8%</b>	<b>34%</b>	<b>0%</b>	<b>15%</b>

However, the variance rate by provider continues to show significant variability, ranging from 0% for JFK Medical Center and The Chrysalis Center to a whopping 73% for Henderson Behavioral Health – see the table above and the graphic on the next page. South County Mental Health Center’s 34% variance rate also is problematic. Based on the number of evaluations performed, variance rates this high are indicative of incorrect use of the LOCUS tool. Carisk will work with Henderson and SCMHC staff to identify and resolve the problems.

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The network variance rate for CALOCUS assessments, shown in the following table, rose to 19% in the 3<sup>rd</sup> quarter - up from 15% last quarter and 9% in the first quarter and obviously trending in the wrong direction. CALOCUS users also cited clinical judgment most often as the basis for their variances.

SEFBHN 3rd Quarter FY 22 CALOCUS Update										
Variance Reasons and Rates by Provider										
Variance Reason	Provider									Grand Total
	BFC	BT	HBH	HP	HPS	NHTC	OV-C	SCMHC	TCC	
Benefits from CCT		2							9	11
Client refuses recommended level of care						1			1	2
Client waitlisted for recommended LOC		1				8			1	10
Clinical judgment	8	6	2	30	10	6	2	1	18	83
Family/guardian refuses level of care		1								1
Lower LOC not yet completed or provided		14	1		4	15				34
No Availability of service/bed at level of care		1								1
Total Variances	8	25	3	30	14	30	2	1	29	142
No Variances	24	42	31	125	55	287	2	6	35	607
<b>Grand Total</b>	<b>32</b>	<b>67</b>	<b>34</b>	<b>155</b>	<b>69</b>	<b>317</b>	<b>4</b>	<b>7</b>	<b>64</b>	<b>749</b>
<b>Variance Rate</b>	<b>25%</b>	<b>37%</b>	<b>9%</b>	<b>19%</b>	<b>20%</b>	<b>9%</b>	<b>50%</b>	<b>14%</b>	<b>45%</b>	<b>19%</b>

The differential among individual CALOCUS providers’ variance rates is shown in the table above and the graphic below. Five (5) of the 9 providers conducting CALOCUS evaluations in the 3<sup>rd</sup> quarter operated with variance rates of 20% or higher. Last quarter the variance rates of only 2 providers were high enough to be of concern. These increasing variance rates represent a significant departure from good practice. Thus, further investigation is warranted and will be carried out.

**(N) Adjustments to Required Plans and Network Management Activities**

*(1) Overview of necessary adjustments to Required Plans*

There were no adjustments or revisions made to SEFBHN Required Plans during the 3<sup>rd</sup> quarter.

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*(2) Network Management Activities*

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

12 amendments; 1 new subcontract; no new agreements; and no terminations were completed during the 3rd quarter. The documents can be found in the Provider E-Contracting System and are listed as follows:

Amendments

PDC – Palm Beach County Substance Abuse Coalition, Inc.

PDC19 – Hanley Center Foundation, Inc.

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

ZTF15 – Our Village Okeechobee, Inc.

AGR41 – The Devereux Foundation, Inc.

LDC07 – Drug Abuse Treatment Association, Inc.

ZNC25 – Tykes and Teens, Inc.

AGR54 – Collectively, A Radlauer Venture, LLC

PNA32 – Mental Health Association of Palm Beach County, Inc. d/b/a Mental Health America of Palm Beach County, Inc.

ZTF13 – New Horizons of the Treasure Coast, Inc.

ZNA36 – Legacy Behavioral Health Center, Inc.

ZNC16 – HPS, Helping People Succeed, Inc.

New Subcontracts

PDA63 – Transpire Help, Inc.

New Agreements

None

Termination

None

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

Recurring Activities Continued in Quarter 3 - FY 21-22

- 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 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 also works in partnership with Palm Beach Sheriff’s Office to provide substance use disorder 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 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. More details in this program can be found under the housing section.
  - 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 September 2022. More details in this program can be found under the housing section.
- SEFBHN also collaborates with the Specialty Courts in Palm Beach County as follows:
  - Marchman Act Court to provide independent assessments and care coordination services.
  - Early Childhood Court, and Family Drug Court in Palm Beach County to provide recovery support services to participants in each court program.

New Activities for Quarter 3 - FY 21-22

- 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 3rd quarter of FY 21/22, 16 new referrals were received. Of these new referrals received during this quarter –13 adults and 3 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 to Rebel Recovery, and he shared he is doing very well, was grateful for the program, and is appreciative of the help he received. Participant shared he no longer requires a Case Manager as he is



gainfully employed full time and able to pay his rent. Lastly, we are now able to provide transportation to participants that face transportation barriers to facilitate rides to and from appointments.

- Following last quarter there have been 16 file closures. Of those file closures one has declined services, and seven no longer participated in services, therefore, file was closed due to non-engagement of LINC program. The program participant that declined service during this quarter is aware he can contact PBSO in the future to reactivate his file. Moreover, of the 47 active cases, 16 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 Boys Town for further support to the family through the Children’s Care Coordination.
- SEFBHN has a new grant with PBSO Violent Crimes Division to assist with connecting victims or secondary victims with providers within the community or provide transportation to and from Court hearings. To date, SEFBHN has received 20 referrals. Of the twenty referrals, three have been for transportation to the courthouse and thirteen have been for mental health services.
- On March 7, 2022, SEFBHN provided for all the Family Court Judges and administration in Palm Beach County on Medication Assisted Treatment. Dr. Schlosser facilitated the MAT training, with a Question-and-Answer session. Additionally, SEFBHN will be providing a virtual training on Monday April 4 at 9:00am – 12:00pm on substance use disorder, effective treatment, relapse prevention and long-term recovery.

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

*(a) Children’s System of Care Grant in Martin and St. Lucie Counties*

This 3<sup>rd</sup> quarter, contract amendments with Helping People Succeed, Tykes and Teens, New Horizons for the Treasure Coast, and Collectively Inc. were completed incorporating SOC. Legacy was still in process in quarter. SEFBHN staff met with all the providers to share grant data reporting requirements, brochure, and referral processes. Children and families have been identified by providers who are eligible for SOC services and data collection will begin in April 2022.

Much of the quarter has been making community contacts, developing the infrastructure of SEFBHN and providers i.e., policy and procedure development/change, coordinating E.A.S.E. outreach, training, marketing material, and electronic referral form. SEFBHN SOC team has been reaching out to peer agencies and recruiting certified recovery support peers for the governance board and for SOC providers as potential staff members. DCF Project Director and SEFBHN SOC team are sharing resources and developing a governance board. DCF and SEFBHN are also actively planning for a child, family, and peer support group and potential intermediate steps for this organization. We hope to develop a group that will offer support and recruit new certified youth and family recovery support peers.

SEFBHN staff and DCF System of Care Project Director have had weekly meetings discussing implementation activities, SPARR, IPP, outreach, social media, achievements, and governance board. There have been two specific meetings with DCF Project Director concerning social media and governance board. SEFBHN and DCF team continue to participate in monthly SAMHSA meeting. SEFBHN has participated in 3 monthly SAMHSA Group 2 office hour meetings for grant technical assistance on January

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12, 2022, February 9, 2022, and March 9, 2022. On January 12, 2022, SEFBHN hired Family Coordinator, Linda Tuininga.

**SEFBHN SOC team's outreach activities for Quarter 3:**

- SEFBHN Project Coordinator participated in 4 workgroup sessions led by Dr. Julie Radlauer-Doerfler to engage youth in social media and to promote positive mental health and stigma reduction messaging on January 4, 2022, January 14, 2022, February 18, 2022, and March 16, 2022.
- SEFBHN staff developed a brochure with a description of Project C.R.A.V.E. Care, local resources, definitions of services, participating providers, and a QR code or hyperlink to take an individual to the electronic referral page.
- Meeting with Circuit 19 Department of Juvenile Justice with Chief and Assistant Chief of Probation Nathan Peters, and Ann Marie Campbell on January 19, 2022.
- SEFBHN Project and Family Coordinator presented to the Martin County Behavioral Health Collaborative on January 28, 2022.
- Family Coordinator meeting with two local peers Antoinette B. and Sarah S. for introduction and potential contact with other peers in Jan 2022.
- Project Coordinator met with Kevin Singletary of the Lincoln Park Advisory Council (LPAC) to discuss joining the council and partnering with key Ft. Pierce stakeholders as outlined in SOC Grant's Project Narrative on February 7, 2022.
- SEFBHN Project Coordinator and Family Coordinator attended staffing, observed hearings, and met with Martin County Mental Health Court staff on February 10, 2022. This is a key partner for young adults transitioning into adult services.
- Family Coordinator recruited four potential members of the governance board. Three of the four potential members have lived experience as a peer and/or family members.
- Family Coordinator recruiting CEO for Martin County Baker Act organization as a member for governance board in February 2022.
- Project Coordinator presented Project C.R.A.V.E. Care to Martin County Children's Services Council and discussed partnership in reaching out to Indiantown and representatives on the governance board on February 16, 2022.
- Project Coordinator presented Project C.R.A.V.E. Care and discussed partnership with IGNITE Youth Alliance, a nationally recognized youth prevention gang program and a key partner identified in the SOC Project Narrative on February 17, 2022.
- Project Coordinator attended the LPAC meeting and was able to discuss Project C.R.A.V.E. Care on March 24, 2022. The group offered positive feedback and stated the children and families of Lincoln Park in Ft. Pierce needed SOC grant services.
- Project Coordinator presented Project C.R.A.V.E. Care to the members of the Supervisor Systems' Meeting for Circuit 19 on March 24, 2022.
- Family Coordinator spoke to three peers for potential employment for SOC provider Helping People Succeed.
- Project Coordinator participated in Circuit 19 Crisis Intervention Team executive committee shared about Project C.R.A.V.E. Care, helped coordinate upcoming CIT training in April 2022, and CIT officer of the year awards breakfast on January 6, 2022.

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- Project Coordinator attended Incubate open house in Lincoln Park to learn about resources and services for young adults and discussed how to refer eligible youth to Project C.R.A.V.E. Care, and how to refer young adults to Incubate on March 30, 2022.
- Project Coordinator presented about SOC and de-escalation skills with law enforcement at Circuit 19 CIT training on January 24, 2022.
- Project Coordinator participated in Council of Social Agencies (COSA) to learn about resources in area and discuss Project C.R.A.V.E. Care with attendees on March 16, 2022.

Equitable Advancement of Support for Everyone (EASE) is an evidence-informed model designed to work with multi-system professionals to increase service utilization and engagement with African American and migrant communities. This was a highlighted training in SEFBHN SOC Project Narrative. Offerings this quarter included:

- January 18, 2022, 2-4PM E.A.S.E. Leadership training. Meeting for key leaders from providers and key community stakeholders about the nature and topics of EASE and encourage these leaders to commit supporting staff for participation in future professional training.
- Feb. 4, 2022, 9AM-1PM E.A.S.E. Professional training/coaching for direct care staff and supervisors' session 1
- Feb. 11, 2022, 9AM-1PM E.A.S.E. Professional training/coaching for direct care staff and supervisors' session 2
- Feb. 18, 2022, 9AM-1PM E.A.S.E. Professional training/coaching for direct care staff and supervisors' session 3
- Feb. 25, 2022, 9AM-1PM E.A.S.E. Professional training/coaching for direct care staff and supervisors' session 4
- Mar. 31, 2022, 2:30-4:30PM E.A.S.E. Professional Leadership training

To help build up the system of care, SEFBHN Project Coordinator attended the following trainings during this 3rd quarter:

- January 13, 2022, DCF, Peer Support Documentation.
- January 18, 2022, California Training Institute (CalTrin), Strengthening Families Protective Factor: Through Social Connections
- January 19-20, 2022, Peer Support Coalition of Florida, Supervisor Development training
- February 2, 2022, CalTrin, Racial Biases in Good People.
- March 1, 2022, Kids at Hope Training part of LPAC partnership.
- March 31, 2022, National Training and Technical Assistance Center (NTTAC) Strengthening the Continuum of Care from early childhood, graduation, and beyond.

Additionally, a panel presentation proposal on Project C.R.A.V.E. Care and E.A.S.E. was submitted to the National Training and Technical Assistance Center (NTTAC) for an upcoming 2-day virtual System of Care Strategy Summit in May 2022.

[\(b\) Prevention](#)

The following is the summary of Prevention activities and updates for the 3<sup>rd</sup> Quarter:

- As result of the Prevention Clinical Liaison transitioning to another role at the state level, The Network Prevention Manager and DCF state Prevention Clinical liaison now

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meet separately and independent of the other state ME Prevention Managers. This quarter's one on one meetings with the transitioning Prevention Clinical liaison addressed and the following items:

- Utilizing the Supplemental Block Grant Funds for Prevention services.
  - DCF Substance Abuse Prevention Licensing Protocol
  - Statewide Training Opportunities/ Needs for Prevention Providers
  - DCF Substance use Disorder 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 contracts and amendments, risk assessments and agency validations. During this 3<sup>rd</sup> quarter, the Network Prevention Manager completed Tiers 2 and 3 of Contract Validation for the Public Defender's Office, 19th Judicial Circuit Monthly.
- SEFBHN Prevention Team meetings continue via Virtual Microsoft Teams formats, between the ME and all network prevention funded agencies and coalitions.
  - o January – March 2022 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
- During this 3<sup>rd</sup> Quarter, 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.
- 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.
- During the 3<sup>rd</sup> 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, Okeechobee, and Martin Counties. The "Project Success" programs are being offered in Middle Schools in those counties.
  - o Hanley Center Foundation (HCF):
    - "Botvin LifeSkills Training" school-based program in Palm Beach County's Coastal and Western Communities. In person classes and the online format are 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):

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- “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 completed 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 continues to meet 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 for youth in both the Palm Beach and Martin Counties they serve; in-person and online. The sessions led by PBCSAC Teen CIA, serve the community’s youth. Recruitment of new participants to replace 21/22 graduating seniors is currently in process.
    - PBCSAC hosted the Johnny Ambassador: Dangerous Truth about Today’s Marijuana in March 2022. Attendees were encouraged to in-person and via Virtual format.
  - o PBCSAC continues their work on Opioid Prevention initiatives recommended as result of Community Conversations convened by PBCSAC
    - 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.
    - PBCSAC now convenes a monthly session of Community Reinforcement And Family Training (CRAFT) for Friends and Family members of a loved one with an addiction.
- 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 the Johnny Ambassador: Dangerous Truth about Today’s Marijuana in March 2022. Attendees were encouraged to attend in-person.
  - o SAFIR continued their youth training their new Coalition Youth leaders through CADCA’s training program.
- 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.

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- 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.
- The Federation of Families of Florida chapter in Palm Beach County receives funds from SEFBHN to implement two Prevention programs in the Western Communities of Palm Beach County:
  - o TUF Talk
    - Program allows youth to proceed at their pace through SAMH sessions on computers at the Federation site. The facilitator convenes group sessions for discussion of matters covered in the TUF talk sessions.
  - o Arise Life Skills Program
    - Structured sessions educate youth on ways to attain positive comprehensive Behavioral Health skills.
    - This month Middle and High School youth are additionally working on a “Finding your Superhero” project. When asked how they will use their Superhero power, the youth share they would assist their family and/or change their community.
  - o Strengthening Families
    - Program which brings youth and their family members together to discuss various topics over a Family Dinner.
    - Program brings Parents together to complete sessions on matters concerning building strong family dynamics and relationships.
- 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.



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- 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 continues as Co-Chair of the Circuit 15 Juvenile Justice Advisory Board. 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 3rd 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, In Children's Care Coordination, an ongoing case is proving successful in that the youth continues to attend LGBTQIA+ support groups at Compass and art therapy at Armory Art Center. He is linked with a targeted case manager as well. The youth had 5 baker acts prior to enrollment in Care Coordination; he has had no B/A or self-harm since December. Youth has continued to be medication compliant since beginning services, which was previously a significant issue. Overall family dynamics have improved, and the youth is seeing the therapist regularly.

**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***

In Quarter 3, despite the engagement from the Care Coordination teams, there were zero (0) diversions from SMHTF. The number of petitions has decreased in the five counties, and only 1 individual from a contracted Baker Act receiving facility was petitioned to a SMHTF. This individual was immediately linked to Care Coordination. Despite the efforts for diversion before commitment, and due to further decompensation, the Baker Act commitment was pursued to ensure stabilization of this individual. The Care Coordination teams do continue to receive referrals to engage individuals at the receiving facilities, even those outside of the Provider network.

One example of an individual that was served during Quarter 3 involved a High Utilizer who was admitted to the Care Coordination team in C15. The Care Coordination team was able to work with her while she was receiving services for stabilization on the CSU and develop a discharge plan. The individual wanted to move out of the area. Due to coordination between the Care Coordination teams in both circuits, 15 and 19, the consumer was able to move out of the area. Due to engagement with the C19 Care Coordinator, the consumer has located affordable stable housing, and has been linked with needed outpatient therapy and medication management services, which she has consistently attended. The consumer has built a new and strong supportive relationship with the owner of the facility who is involved in her recovery. The Care Coordinator has also assisted the consumer to reinstate her state health benefits.

### ***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 3<sup>rd</sup> quarter, SEFBHN approved 106 transitional vouchers – 52 for substance use and 44 for mental health, representing an increase in substance use vouchers and a decrease in mental health 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 3***

#### ***Recurring Activities Continued in Quarter 3 - FY 21-22***

- 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.
- 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.

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- 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.
  - SEFBHN Care Coordination Staff have also met with the behavioral health teams for further collaboration, resource sharing, and to develop a referral process for High Utilizers at receiving facilities to make referrals to the Care Coordination Teams. The Care Coordination Universal form has been shared. The NSP Care Coordinators are prepared to receive these referrals and conduct staffing meetings for appropriate discharge planning.

New Activities for Quarter 3 - FY 21-22

- 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.
  - In the 3<sup>rd</sup> Quarter, SEFBHN and the Care Coordination teams continued to manage referrals from the Department of Corrections (DOC) for persons being released 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. There has also been communication from the aftercare teams in relation to individuals being released on Baker Act evaluation orders. These individuals have been directly referred to the Care Coordinators.
- SEFBHN Care Coordination staff have been attending collaborative meetings during Quarter 3 with PBSO, NSP, and out of network providers for the PBSO care coordination grant. These meeting have occurred at several providers to make introductions, discuss services available, take tours, and discuss the referral process.
- 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.

(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**

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- During the 3<sup>rd</sup> Quarter, New Horizons of the Treasure Coast received 471 MRT calls, and South County Mental Health Center received 494 calls, for a total of 965 calls.
- For both teams combined, 793 calls required an acute response with an average response time of 39.67 minutes.
- The average diversion rate for both MRTs was 85%.
  - New Horizon of the Treasure Coast’s diversion rate was 84%.
  - South County Mental Health Center’s diversion rate was 87%.

(e) Housing Activities

Recurring Activities Continued in Quarter 3 - FY 21-22

- 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 in the Chair of the Healthcare Pillar and is responsible for holding meetings, which were held in both January and February. The goal of the Healthcare Pillar is to create strategic partnerships and collaborations with the medical, behavior health, and homeless systems of care. This is a new committee and will be held monthly.
- The Network Housing Specialist is a member of the HMIS subcommittee of the HHA and participates in this subcommittee and the General HHA 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.
- The Network Housing Manager and Director of Network Integrity participated in several workshops and state calls with Florida Housing Finance Corporation regarding an upcoming RFA that requires Managing Entity participation. SEFBHN has also had several conversations with possible services providers and developers that are interested in applying for the RFA when release in May/June.

New Activities for Quarter 3 - FY 21-22

- For this reporting period, SEFBHN and Housing Partnership met at least once monthly for programmatic and client updates, and to provide technical assistance where needed. To date, Housing Partnership have served 17 Participants. They have put forth exceptional effort to assist this tough population during this tough time. They have assisted several participants in gaining income either by linking them with employment opportunities or applying for SSI/SSDI. While there are some participants thriving in the program, some are having difficulty with engaging in services. The Network Housing Specialist is continuing to collaborate with HP/CP in identifying different approaches to utilize to engage their participants.
  - The housing crisis has added additional barriers to Participants successfully transitioning to independent housing. Due to the rise in housing cost, ESG participants cannot afford to maintain their rent, even if funding is provided for 1<sup>st</sup>, last and security. Support is being solicited from the county to provide subsidized housing vouchers for those that are eligible. SEFBHN is committed to providing support as much as possible. Both SEFBHN and HP/CP attended all required subcommittee meetings and HHA General Meeting with the Continuum of Care.

- The Network Housing Specialist continues to attend weekly coordination calls with Housing Partnership d/b/a Community Partners (HP/CP) Village 1, a SAMH funded transitional housing program. During the calls, caseloads are reviewed and referrals from both community and Network providers are discussed. Technical assistance was provided throughout the quarter. HP/CP staff requested Narcan training for their staff and participants. They were linked with Rebel Recovery who later provided the training. They were later provided with information on how to become a Narcan Distributor.
  - TA was also provided to assist Village 1 staff after they had difficulty in identifying affordable housing with the appropriate level of care for 2 participants. They were linked with Order My Steps, a nonprofit organization in Broward County, that provide services to adults with Mental Health, Substance Use and Housing Instability. After both participants were interviewed by the program, they were accepted. Post follow up revealed that both participants are now living closer to family and are engaging in services.
  - As of 03/31/2022, Village 1 is serving 27 participants and have 5 upcoming move-ins which will put them at 91% by next quarter.
- Carrfour Supportive Housing (CSH) is at 94% capacity and is currently serving 34 participants. The Network Housing Specialist and CSH team have met throughout the quarter for programmatic and participant updates. After 6 months vacancy, the Program Director position was filled, and technical assistance (TA) was provided as part of their onboarding process. The Peers continue to offer Recovery Support services, offering client voice and choice. They continue to work on creative and individualized ways to engage participant and maximize their potential. They have been consistent in reaching out for support when needed and have done an extraordinary job in maintaining a healthy and positive relationship with the Participants.
  - Programmatically, Carrfour is back to experiencing staff shortage and is in the process of interviewing for 2 Peer positions as both of their former peers resigned the last month of the quarter. Carrfour Supportive Housing remains interested in expanding their services to provide a wider range of Peer lead and community services. They are looking forward to revisiting that upon becoming fully staffed.
- Rebel Recovery Florida is currently serving 7 participants in their ESG-CV Rapid Rehousing program. The Network Housing Specialist provided TA throughout the quarter for data support, brainstorming ways to engage participants not engaging in services, and identifying affordable housing to house more participants. SEFBHN and Rebel attended HMIS and HHA General meeting as required by the county. During this housing crisis, Rebel is doing a great job in in engaging landlords in conversation regarding providing affordable units to potential participants. Along with housing services, they continue to provide recovery support, case management, and refer out for mental health services for participants when appropriate.
- Rebel Recovery Florida's COSSAP Program is growing. The Network Housing Specialist and Rebel staff attended monthly workgroup meetings with Palm Beach County, COSSAP webinars and monthly COSSAP Housing Provider meetings throughout the quarter. In January, the county monitored Rebel's COSSAP program. Rebel received raving accolades for the phenomenal work that they've been doing such as giving the participants voice and choice, individualization of each participant's recovery plan and documentation. The participants are receiving recovery support housing, recovery support incidental funds, assistance with developing resumes, obtaining employment, etc.
  - There are currently 7 participants enrolled in COSSAP. Unfortunately, there are only 8 approved recovery residences that can be utilized, as they're the only ones that are FARR certified and does not limit the type of Medicated Assisted Treatment (MAT) that a consumer chooses. This presents as a barrier due to having limited inventory for

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potential participants. SEFBHN is working on engaging more FARR certified recovery residences to consider being a network provider by updating their standards to accepting all forms of MAT.

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

Recurring Activities Continued in Quarter 3 - FY 21-22

- 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, and with COVID restrictions access to hospitals is still very limited. 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.
- 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. 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.
- SEFBHN continues to meet monthly with PBSO, Rebel Recovery, and The Recovery Research Network regarding the MAPS program collaboration. Additionally, SEFBHN participates in the Multidisciplinary weekly meeting, where Wellpath, PBSO, Rebel Recovery, and The Recovery Research Network collaborate on discharge planning and participants' progress towards completing the MAPS program. During the 3rd quarter, 11 participants completed the MAPS program.

New Activities for Quarter 3 - FY 21-22

- St. Lucie Sherriff's Office jail continued to have no access due to their COVID restrictions during the 3<sup>rd</sup> quarter and therefore, we continue wait for the opportunity to further our progress in gaining access for peers in the jail as well as offering MAT services to inmates.
- In Quarter 3, SEFBHN's COO and Director of Network Integrity continued to work out some contract issues with Wellpath to fund Sublocade in PBSO Medication Assisted & Peer Support (MAPS) program as well as St. Lucie County in the future.
- In the 3<sup>rd</sup> quarter, the Director of Network Integrity continued to meet with reps from Indivior and at the end of March we received the agreement for a discounted rate for Sublocade to review. The agreement will be finalized and signed in April. Once the agreement is complete, Indivior will use this as a template for all the Managing Entities in Florida and extend the discounted rate to all participating ME's and their Network Service Providers.
- During the 3<sup>rd</sup> quarter, a total of 2 individuals were served in the Hospital Bridge Program, additionally, 6 individuals were linked to treatment.

- On March 18th, 2022, Pinnacle Wellness Group and SEFBHN collaborated to expand Medication-Assisted Treatment (MAT) services in Okeechobee County. Beginning in April, Pinnacle Wellness Group will offer MAT and counseling services in Okeechobee one day a week; with a second day to be added as they build their program.

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

As previously reported: SEFBHN is continuing to monitor for any fiscal impacts and any reduction of revenues. There are no current concerns regarding adverse fiscal impacts for the third or last quarter of FY 21-22; however, SEFBHN is engaged in routine monitoring to be able to proactively identify concerns or issues as they arise.

## (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:

- **The Chrysalis Center** –A new Tier 3 validation was completed, as planned and there were 3 findings requiring corrective action and 4 requiring PIPs, which remain open at this time. Corrective actions include 1) updated policies and procedures related to staff screenings, training, and qualifications, missing auxiliary aids and services monthly report, 2) consistent uploading of CFARs and NCFAS data, and 3) correct service events that are not supported by chart documentation. PIPs are under review for 1) timeliness of required report submission, 2) persons served rights or denial of services grievance reporting, 3) training on ROSC and documentation requirements as well as specific domains i.e., safety and crisis planning, PHQ9-CSSRS consistency, and 4) clear use to inform services and appropriate frequency of certified peer recovery services. Data performance has greatly improved by the end of this 3<sup>rd</sup> quarter.
- **Catholic Charities of the Diocese of Palm Beach, Inc.** – A Tier 2 Validation was completed, and the Contract Validation Review Report was issued December 28, 2021, and Performance Improvement Plan due on January 31, 2022. The Performance Improvement Plans that were issues involved the following areas of concern: Ensuring the timely submission of required reports. This is a repeat finding which was first noted in the initial technical assistance site visit in Fiscal Year 20/21. A PIP (Performance Improvement Plan) was required from the Provider to reach 80% minimum compliance with Government Performance and Results Act (GPRA) submission requirements. The last PIP assigned was for timely completion of the Performance Outcome Measures (POMs) due to lack of data completion to validate the POMs. The Provider was also required to complete the following Corrective Action items: Submission of the Memorandum of Understanding with a Federally Qualified Health Center, Grievance Reporting to ensure all grievances by staff and consumers are being captured as determined by the policy and procedures. The other Corrective Action items included the development of a Waitlist Policy and Procedure, the utilization of the Carisk Collaborative Waitlist, and the development



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and implementation of a Level of Care Policy and Procedure for the utilization of LOCUS/CALOCUS assessments in outpatient counseling.

- **New Horizons of the Treasure Coast, Inc.** – A PIP relating to the agency’s internal process for SOAR training and quality assurance remains open as the Provider is currently not on track to submit the required FY number of SOAR application. Additional technical assistance will be provided by SEFBHN to the Provider’s new SOAR dedicated staff person that will begin employment on April 25th.
- **Wayside House, Inc.** – The PIPs for Incidence and Grievances and GPRA were reviewed, accepted, and closed on March 4, 2022.
- **Mandala Healing Center** – SEFBHN completed a validation of Mandala Healing Center on 1/19/2022. A performance improvement plan was submitted to address the proper documentation required for Incidental Expenses. This PIP is currently under review by SEFBHN.
- **Palm Beach Habilitation** – SEFBHN completed a validation on Palm Beach Habilitation on 3/17/2022. Performance improvement plans were requested to address the following concerns: 1) Identification of action steps to ensure the timely submission of required reports; and 2) Outline for staff training on the application of a sliding fee scale and quality assurance elements around financial eligibility. The PIPs are currently under review by SEFBHN.
- **Jeff Industries** – SEFBHN completed a validation on Jeff Industries on 3/24/2022. A Performance Improvement Plan was requested to address and maintain the timeliness of required reports submissions. This PIP is due April 23, 2022.
- **NAMI Palm Beach County**- SEFBHN completed a validation on NAMI Palm Beach County on 2/22/2022. A corrective action plan was required to ensure all staff sign a current Deaf and Hard-of-Hearing Attestation noting the new Single Point of Contact. NAMIPBC have submitted the documents needed for their corrective action plan.
- **Mental Health Association in Indian River County** - SEFBHN completed a validation on MHAIRC on 2/28/2022. Performance improvement plans were requested to address the following concerns: 1) Identification of action steps to ensure the timely submission of required reports; and 2) Identification of action steps to improve the consistency and quality of data submitted to SEFBHN via the Carisk portal, with the goal of achieving timely submission of 90-day performance outcome measures data and discharge data. The PIPs are currently under review by SEFBHN.
- **South County Mental Health:** SEFBHN completed a Tier 3 validation for South County Mental Health on January 18, 2022. This validation focused on Adult/Children Mental Health services. Multiple PIPS and Corrective Actions were required from the Provider to address deficiencies in the following areas: Attestations and Administrative Review; Service Invoice Validation; Quality Assurance/Quality Improvement Work Products; Recovery Oriented System of Care; and Performance Outcomes Measure Validation. SEFBHN will continue to provide continuous technical assistance to South County Mental Health regarding compliance and completion of all Corrective actions and PIPs as required. Additionally, PIPs are under review with the Mobile Response Team for topics i.e., policies and procedures specific to clinical record reviews, staff supervision, quality improvement activities, safety planning, data security, staff qualifications, care coordination, and an outreach plan inclusive of developing MOUs.
- **The Lords Place:** SEFBHN completed a Tier 2 validation for The Lords Place on February 25, 2022. This validation focused on Adult Mental Health Services. The areas validated include Attestation and Administrative Review, Service Invoice Validation (in areas of Case Management, Incidental



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Expenses, Outreach and Residential Level IV), Confidentiality and Data Security, multiple areas under Quality Assurance/Quality Improvement Work Products (Data Entry; Quality Assurance; Discharge Planning; SOAR/PATH), Performance Outcome Measures Validations and Missing Records. One Corrective Action Plan was requested and completed. One Performance Improvement Plan was requested regarding meeting SOAR application benchmark. SEFBHN has provided ongoing technical assistance and bi-weekly touchpoint meetings to ensure compliance with all contract areas.

- **Our Village Okeechobee** – because of the Tier 3 validation, corrective action was required this quarter for attestations and administrative review.
- **Henderson Behavioral Health** – For LTF10, data corrective action is required related to POMs, discharges, and data quality analysis and continues to be followed up on at this time. Two PIPs are still in process of review related to missing data and timely submission of the electronic invoice.
- **Tykes and Teens** – Corrective action is being reviewed for missing reports, financial eligibility policies, duplicative staff IDs, and a collaborative waitlist policy. PIPs are under review to help ensure timely submission of required reports, submission of incident reporting, submission of persons served satisfaction surveys, data affecting provider and level of functioning assessment (CFARs).
- **Access Recovery Solutions (ARS)** – SEFBHN completed a validation on ARS and report was sent January 20, 2022. All PIPs were received on time on February 21, 2022; however, more technical assistance is needed for the financial eligibility policy and procedures, with final submissions due in April. ARS requested additional time for the corrective action regarding the service validation and removing ineligible service units. Corrective action is due to be complete for the April invoice cycle.
- **Housing Partnership** – SEFBHN completed a validation on Housing Partnership and a report was sent on March 10, 2022. The report included three PIPs to update policies and procedures for service validation, performance outcome measures and GPRA compliance which are all due in April 2022.
- **Public Defenders Office, Nineteenth Circuit (PD19)** - SEFBHN completed a validation on PD19, and a report was sent on February 28, 2022. The report included one corrective action for timely incident reporting due in April 2022.
- **The Recovery Research Network Foundation (TRRNF)** - SEFBHN completed a validation on TRRNF, and a report was sent on March 18, 2022. The report included one corrective action and one PIP due in April 2022.
- **Ebb Tide Treatment Center** - SEFBHN completed a validation on TRRNF, and a report was sent on March 31, 2022, that included six corrective actions and two PIPs due in April 2022.

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.

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(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	72.83
	Percent of adults with serious mental illness who are competitively employed	24%	68.00%
	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%	89.00%
	Percent of adults in mental health crisis who live in stable housing environment	86%	86.00%
Adult Substance Abuse	Percentage change in clients who are employed from admission to discharge	10%	9.00%
	Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge	15%	-55.00%
	Percent of adults who successfully complete substance abuse treatment services	51%	51.00%
	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge	94%	80.00%
Children's Mental Health	Percent of school days seriously emotionally disturbed (SED) children attended	86%	86.00%
	Percent of children with emotional disturbances (ED) who improve their level of functioning	64%	64.00%
	Percent of children with serious emotional disturbances (SED) who improve their level of	65%	79.00%
	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%	99.00%
	Percent of children at risk of emotional disturbance (ED) who live in a stable housing environment	96%	86.00%
Children's Substance Abuse	Percent of children who successfully complete substance abuse treatment services	48%	79.00%
	Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to	20%	-75.00%
	Percent of children with substance abuse who live in a stable housing environment at the time of discharge	93%	98.00%

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Guidance Document 24 is still in version 12 and needs to be updated for version 14 data reporting.

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. SEFBHN is providing TA (technical assistance) to make sure the providers review their submission. SEFBHN will continue to provide technical assistance and ensure data is being reported accurately.

The percentage change in clients who are employed from admission to discharge are being reviewed by providers. Due to the currently job marking there are a lot more individuals who have no change in employment causing the percentage change to be based on a small group of individuals.

The percent of children at risk of emotional disturbance (ED) who live in a stable housing environment only has one client out of 8 individuals who are failing. This one client was in DJJ while receiving TASC services and was discharge while still in DJJ. 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.

**(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 100 families have been served this fiscal year by both FIT Teams. Through March 2022, the percentage of families served who have successfully completed treatment with FIT Team services is 63% (36 successful discharges out of a total 58 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	21	21	100.00%
Henderson Behavioral Health - Palm Beach	11	11	100.00%
<b>Total</b>	<b>32</b>	<b>32</b>	<b>100.00%</b>

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Provider	Episodes With Stable Employment	Total Number of Episodes	Percentage
Counseling and Recovery Center	21	21	100.00%
Henderson Behavioral Health - Palm Beach	11	11	100.00%
<b>Total</b>	<b>32</b>	<b>32</b>	<b>100.00%</b>

*(2) Return-on-Investment Reporting*

The following is a summary of ROI Reporting for the 3<sup>rd</sup> 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 3<sup>rd</sup> quarter of FY 21/22, these teams served a total of 134 children and reported a total cost avoidance less total costs YTD to the state of \$2,273,379.20. 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). 16 persons were served in the 3<sup>rd</sup> quarter. The savings to the state was \$67,190.33 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 3<sup>rd</sup> quarter, the center served 1796 individuals. The center can provide lower cost services using physician trainees. As a result, the cost avoidance to the state this quarter was \$216,256.36 had the services been rendered by psychiatrists only.
- During the 3<sup>rd</sup> quarter, the walk-in center has served 853 unduplicated individuals and has prevented up to 222 baker acts for clients in crisis. During this quarter, they have completed 81 Safety Plans; 94 Risk Assessments, 52 with current thoughts of suicide at time of screening; 227 New Admissions; 182 Resource Consultations; 49 Psychiatric Evaluations; and 275 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 \$724030.80, with a YTD Cost Avoidance of \$2,089,780.80.

*(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 3<sup>rd</sup> 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 were distributed in Q3. The surveys were collected at the end of February 2022 with the following response rate:

1. **Cultural Health Disparity Survey:** 224 surveys taken by individuals living in socially vulnerable areas, as identified by the CDC’s Vulnerability Index.
2. **Peer Recovery Community/Support Specialist’s Survey:** 85 surveys taken by Peer Support Specialists working within Provider Agencies.
3. **Stakeholder Survey:** 325 surveys taken by community stakeholders from Provider Agencies, system partners such as the Department of Juvenile Justice, School Districts, Community Based Care, Law Enforcement, and many others.
4. **Individuals Served Survey:** 321 surveys taken by individuals served within agencies of the SEFBHN Provider Network.

The following additional activities were implemented in Quarter 3 for the Triennial Needs Assessment:

- There were 21 Cultural Health Disparity Focus Groups convened with a total of 267 focus group participants. These focus groups were held virtually, and participation was screened to ensure accurate and balanced representation from all counties in Circuits 15 and 19.
  - Additionally, 2 of these focus groups were held and facilitated specifically for native speakers of Spanish and Creole. 1 group was facilitated in Spanish; the other group was facilitated in Creole.
- A Provider-Wide No Wrong Door Focus Group was held in February 2022 at SEFBHN’s Continuous Quality Improvement Meeting. This focus group was conducted with 80 individuals that work within SEFBHN’s Provider Network to identify areas of strength and opportunities for improvement for the No Wrong Door System.
- There were an additional seven (7) smaller, targeted, and intensive focus groups held with Network Providers such as New Horizons of the Treasure Coast, South County Mental Health Center, Drug Abuse Foundation, Henderson Behavioral Health, and others. These groups were invited to discuss strategies for improvement for the No Wrong Door System.
- Regarding the No Wrong Door Surveys, 42 surveys were completed, where SEFBHN requested 1 be completed per agency.

Next Steps for the Triennial Needs Assessment in Quarter 4

- There will be analysis of all data collected until the end of April 2022.
- In May 2022, the data will be formatted and worked into the final report along with additional data from the other Managing Entities.
- The final report is scheduled for release in June 2022.

*(2) Planning and Implementation of House Bill 945*

The following is a summary of House Bill 945 related activities for the 3<sup>rd</sup> quarter:

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- SEFBHN and FAME continued to meet this quarter re: Opportunities for Improvement (OFIs) identified as part of the statewide HB 945 plans and how best to plan for implementation with current resources.
- FAME plans to annotate the statewide OFIs and SEFBHN will assist with an infographic to help show resources for children that support HB945 and needs that continue to exist.
- SEFBHN has held off on additional Steering Committee meetings until a plan forward could be solidified.