

## 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 1<sup>st</sup> quarter (YTD):

- Substance Abuse Prevention Services – 14%
- HIV Early Intervention Services – 8%
- Substance Abuse Services for Pregnant Women – 28%
- Coordinated Specialty Care for Early Serious Mental Illness – 25%
- CMHBG Core Crisis Services Set-Aside – 22%

## 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
8/29/2022	Natural Supports Training	Virtual	8
9/6/2022-9/8/2022	Wraparound 101 Training	Palm Beach	24

**The following chart represents technical assistance related to Wraparound during the 1st quarter.**

Date(s) of Technical Assistance	Agency / Provider	Technical Assistance Type	# Of Participants
7/7/2022	Henderson Behavioral Health, inc.	Inter-rater reliability	2
7/14/2022	Legacy Behavioral Health Center	Wraparound coaching	3
7/22/2022	Legacy Behavioral Health Center	Wraparound coaching	3
7/22/2022	New Horizons of the treasure Coast	Wraparound coaching	4
7/25/2022	New Horizons of the treasure Coast	Wraparound coaching	4
8/18/2022	Multilingual Psychotherapy Center	Inter-rater reliability	2
9/9/2022	New Horizons of the treasure Coast	Wraparound coaching	4
9/26/2022	Multilingual Psychotherapy Center	Inter-rater reliability	2

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9/30/2022	Multilingual Psychotherapy Center	Implementation TA meeting	6
9/30/2022	Helping People Succeed	Wraparound coaching	2

We have been consistently providing Wraparound 101 Training for Youth and Families, Care Coordinators, (Intensive) Adult Case Managers, Peers, 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 on 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. They are currently in the process of certifying 2 new coaches.
- Multilingual Psychotherapy Center: 4 supervisors and 4 staff members are currently certified; Staff attend the Wraparound Learning Community. They are currently in the process of certifying more staff.
- Federation of Families: All family support partner staff will go through the coaching and certification process; Staff attend the Wraparound Learning Community.
- Legacy Behavioral Health: They have 2 coaches, and both are also certified as facilitators 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 to have more facilitators on the treasure coast. The Treasure Coast branches are currently certifying staff with SEFBHN assistance.
- Helping People Succeed: They recently had 1 internal coach who is also a facilitator and 2 facilitators. Staff are attending trainings and the learning community. They are almost certified.
- Chrysalis Health (CAT): Staff attend the Wraparound Learning Community. They are currently providing the Wraparound process to families.
- Tykes and Teens: 1 supervisor certified as coach and facilitator. They are in the process of certifying facilitators and another coach.
- 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 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, and Children’s Outpatient. The CAT team’s supervisor is in the certification process to become a coach and another staff member is being certified as a facilitator. They are currently going through the coaching and certification process. They attend Wraparound learning community meetings.
- Jeff Industries- Has expressed interest in learning about Wraparound but has no plan at this time to move forward.

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- Suncoast Mental Health Center 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 1st, there were 2 trainings for Wraparound in the SE region (Circuits 15 & 19):

- SEFBHN arranged 1 Natural Supports Training in August with 8 participants, 1 Wraparound 101 training in September with 24 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 1<sup>st</sup> Quarter, there were thirty-five (35) certified facilitators and fifteen (16) 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 900 families in this quarter.
- There were 3 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 – 7/28/2022, 8/24/2022

Circuit 19 – 7/20/2022, 8/25/2022

Combined Circuits 15 & 19 – Canceled due to Hurricane Ian.

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.

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

SEFBHN 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 1. This toolkit was updated during this quarter. 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

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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 – 7/14/2022, 8/11/2022, 9/8/2022

Circuit 19 –9/22/2022. This group holds meetings bi-monthly.

*Zero Suicide Training and Technical Assistance*

The following chart represents training activities related to Zero Suicide and Suicide Prevention during the 1st Quarter.

Date(s) of Activity	Type: Training Activity	Training Location	# Of Participants
9/23/22	QPRT	St. Lucie County School District	7

- Question, Persuade, Refer and Treat “QPRT” training was provided by SEFBHN to the above providers for a total of 42 clinicians and Mobile Responders trained. on-site at St. Lucie County School District for 7 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 South County Mental Health Center and the Lord’s Place are planned for Q2 in FY 22-23.

*Crisis Intervention Trainings for Law Enforcement*

- For Quarter 1 the SEFBHN SOC Project Coordinator for Project CRAVE Care continued to support the administration and training efforts of the Crisis Intervention Team for Circuit 19. This consisted of training for Law Enforcement Officers on de-escalation techniques, active listening, observation and use of body language, cultural diversity, tone of voice, and humor. Project Coordinator shared his family's mental health lived experience to create empathy within the officer as well as reduce stigma associated with mental illness. Training sessions were conducted on 8/1/2022 and included many School Resource Officers.
- Project Coordinator also sits as a member of the executive committee for Circuit 19 CIT. Responsibilities include reviewing previous training evaluations, adjusting CIT curriculum, setting future training sessions, and communicating with community stakeholders. Project Coordinator attended the meeting on 7/7/2022.

**(B) - Forensic Services**

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

Recurring Activities Continued in Quarter 1 - FY 22-23

- 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.
- 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.
- SEFBHN continues to participate in monthly conference calls with DCF, SMHTF and ME staff for care coordination efforts.
- 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 1 - FY 22-23*

- In Circuit 15 two providers started accepting referrals for Conditional Release Beds.
  - Eight individuals were accepted into these beds.
  - Five individuals were admitted into these CR beds, and the remaining two are awaiting approval for their conditional release orders.
  - One of these individuals was found competent to proceed and will not be admitted to the RTF.
- In Circuit 15 on the of providers The Lord's Place had a huge ribbon cutting ceremony to officially open the RTF beds.
  - There was representation from the State Attorney Office, Public Defenders Office, Re-entry program, PBC officials, DCF, SEFBHN, the Forensic team at SCMHC, and numerous other individuals that provide support in PBC.

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The referral process, UR process, and all the forms for the Forensic Multidisciplinary Teams (FMT) were drafted, and C15 FMT will start taking referrals in Quarter 2.

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

Recurring Activities Continued in Quarter 1 - FY 22-23

- SEFBHN continues to ensure that FACT teams are meeting the required level of care for all FACT consumers. Additional steps are being taken by SEFBHN to ensure that contacts are being made as required and that the contacts reflect appropriate billing.
- 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.
- All clients have had a concurrent review completed for the Calendar Year 2022. Carisk partners are working on compiling the 2023 concurrent review list that will be sent to the providers once complete. During the first quarter, the FACT teams at New Horizons completed 52 concurrent reviews, and Henderson’s FACT teams completed 30 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 1 - FY 22-23

- All teams continue to fill vacant positions and increase staff census.
- Henderson has hired many of the positions to fill the new team and current Team Lead will be proceeding with the plan to split older staff/new staff into the new team as well as dispersing current clients within both teams to create a more balanced team approach.
- All teams continue to screen new potential clients to increase client census.
- Additional training opportunities have been identified and will be scheduled during Q2 of FY22/23. Zero Suicide, ROSC, and LOCUS (In the Carisk Portal) will be conducted with all teams.

*(3) Department of Corrections*

Recurring Activities Continued in Quarter 1 - FY 22-23

- 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.
- An increase in communication between the C15 and C19 Re-Entry providers has been noted through this past fiscal year. 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 and newly hired Children’s Care Coordinator 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 and Children’s Care Coordinator provide 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 four (4) C19 Keeping Families Connected Staffings on 7/8/22; 8/15/22; 8/23/22; 8/31/22. Additionally, there was one (1) lockout staffing held in C15 with JPO Chief Starling facilitating held on 7/28/22 that Children’s Care Coordination Manager and Children’s Care Coordinator attended.

*(2) DCF Lock-out Protocols and SST Calls*

- For the C15 Lock-out Protocol, SEFBHN and Children’s Care Coordination Manager, Children’s Care Coordinator 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. The Children’s Care Coordination Manager are primary on child-specific cases with the Family System Managers as backup, as needed. Mobile Response Team is also present on the calls as a resource to the team to ensure the family has immediate access to de-escalate any crisis.
- In C19, SST staffings are only for safety determination and the Children’s Care Coordination Manager and Children’s Care Coordinator attend when needed. Usually, the cases attended will be at the request of the Department, for youth with high mental health needs, substance-exposed newborns, or if the need of the case determines system-level care coordination. Family System Managers attend as backup for the Children’s Care Coordination Manager, as needed. This quarter, the C19 SST calls have been primarily substance misuse related or substance exposed newborns. The innovation team SEN/NAS Care Coordinator has been able to join those calls and provide support to help stabilize the parents and link them to substance misuse services and supports.
- For this quarter, sixteen (17) total SST calls were attended for both Circuits 15 & 19:
  - Circuit 15 -sixteen (17) SST calls were attended by a SEFBHN Children’s Care Coordination, Manager, Children’s Care Coordinator, and/or Family System Manager on 7/20/2022; 7/26/22x2;7/29/22 x2; 8/12/22 x2; 8/17/22; 8/18/2022; 8/22/22x2; 8/24/22; 9/2/2022; 9/7/22 x2; 9/15/22; 9/30/22
  - Circuit 19 SEFBHN Program Innovation team SEN/NAS Coordinator to assist with CW integration as there were allegations of substance misuse or substance exposed newborns.
- For the Circuit 19 Local Review Team, SEFBHN Children’s Care Coordination Manager and Children’s Care Coordinator attend 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 are represented in the review teams scheduled for this quarter. C19 also holds emergency LRT meetings as needed.

- SEFBHN C15 Family Systems Manager (FSM) and Children’s Care Coordinator continue 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, thirteen (13) total Interagency, Local, Regional, or State Review Team meetings were attended for both Circuits 15 & 19:
  - Circuit 15 – seven (7) total between Local, Regional, State: Emergency: 7/6/22; 8/3/2022; 8/5/22; 8/24/22; 8/1/22; 9/7/22; 8/2/22
  - Circuit 19 –six (6) total between Local and Regional Teams, and no State Review Teams: Emergency 7/7/22; 7/26/22; 8/23/22; RRT 8/29/22; RRT 9/21/22; 9/27/22.

(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 1<sup>st</sup> quarter, SEFBHN staff attended and presented at Steering Committee meetings in C15 on 8/11/22 and 9/8/22. Circuit 19 meetings were attended on 7/12/22 and 9/13/22.
- 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) remains available for Child Welfare Professionals to make referrals for specific outreach efforts that have been discussed and recommended with Mobile Response Teams to help build and maintain relationships with Child Welfare. Although it continues to be 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.
- The SER training group did not meet this quarter due to the Behavioral Health Consultant’s schedule.

(6) School System Collaborations

- SEFBHN staff attended the School Health Advisory, Mental Health Sub-committee in Palm Beach on 9/20/2022. SEFBHN Family System Managers the School Health Advisory committee on 9/1/2022 in St. Lucie County. The Director of the Children’s System of Care has continued to present updates of House Bill 945 for all stakeholders. School Health Advisory Council (SHAC) Palm Beach Mental Health Committee has added House Bill 945 as a standing agenda item. South County Mental Health Center has continued to participate in presenting its MRT data monthly.
- Children’s Care Coordination Manager 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 in guidance. SEFBHN is working with them to establish a system of sustainability to maintain QPR and QPRT within the school system. 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.

- Children’s Care Coordination Manager, Family Systems Manager, and SCMHC Mobile Response Team met with the School District of Palm Beach County weekly to further collaborate for high-risk youth.
- Family Systems Manager attended two collaborative meetings with the School District of Palm Beach County and the Chrysalis/CAT team to increase communication and services for at risk youth.

*(7) Collective Impact Projects*

- BeWellPBC Stewardship Council was not held this quarter, but SEFBHN participated in two Culture of Wellness Learning Labs in September.
- This quarter SEFBHN reviewed the draft policy for the Palm Beach County Pediatric Integrated Care Project, which focused on improving Pediatric Integration with Behavioral Health, a collaboration Pediatricians with Palm Health, BeWellPBC, NAMI, and MHA PBC.
- Family System Manager attended the Special Needs Advisory Coalition (SNAC) meeting in Palm Beach County on 8/16/2022 as a panelist with attendees including parents of those with special needs, teachers, case managers from community agencies and other system partners. An overview of SEFBHN’s connections in the community, services i.e., MRT, CAT, EC-CAT and Wraparound and mission statement was shared with the audience. There were 36 attendees and 9 panelists. Unicorn Children’s Foundation was invited and subsequently attended the Supervisor Systems Meeting in September making new network connections and contacts in the community.

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

- During the 1st quarter, the Children’s Care Coordinator (CCC) continues to be supervised by the Children’s Care Coordinator Manager and works collaboratively with the Children’s Care Coordination Manager (CCCM) to serve youth which specifically focuses on system-level coordination for High Utilizer youth utilizers of behavioral health services and their families. Additionally, the CCC and CCCM work 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’s team 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 and Children’s Care Coordinator holds biweekly meetings with Network Crisis Units, JKFN and New Horizons of the Treasure Coast, along with the Network Care Coordinators 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, Care Coordination, 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. JFKN meeting resumed as a Care Coordinator was hired and trained.
  - This quarter's meetings with the Crisis Units JFKN and New Horizons were held: 8/4/22; 9/9/22; 8/24/22; 9/7/22; 9/21/22
  - Navigate and Children's Care Coordination meeting identify transitional age youth: monthly meetings were changed to accommodate SCMHC scheduling. Referrals continued to be sent to Provider Care Coordinators Directly. Meetings will resume in the 2nd quarter.
  - Monthly Meeting with all Provider Agencies for Children's Care Coordination: 7/14/22; 8/11/22; 9/8/22
  - Children's Care Coordination Manager attended Regional Meetings for Care Coordinators with Tallahassee staff: 7/20/22; then transition with staff occurred and meetings were postponed but anticipated to resume soon
- 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 1st quarter, Child Specific Staffings are also attended by the Children's Care Coordination Manager and Children's Care Coordinator. 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 1st quarter, there were twenty-two (22) specific staffings from a variety of sources, DCF, CBC, MMA plans, DJJ, APD 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 Okeechobee, SEDNET C19, Palm Beach Behavioral Health Collaborative, Palm Beach Youth Services Division, IGNITE, PBCSO Human Trafficking Division, Palm Beach CAPE Teams, NAMI Palm Beach, Legal Aid Society, Opportunity Inc, Public Defender C15, CBC staff, Horses Healing Hearts, Palm Beach Children's Therapy, Inspire Counseling LGBTQ, Reflections Creative Therapies, Faulk Center for Counseling, 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.
- Continued work is being done on the Business Associates Agreements and MOUs between SEFBHN and several of the receiving facilities within the Network. Palm Beach County School District and SEFBHN are also working to sign a BAA and MOU with SEFBHN regarding collaborating

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to assist children in need and expanding care coordination. A MOU is currently routing with the School District of Palm Beach County's Administration and Legal Services.

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

- Direct Supervisors' System Meetings were held in Circuit 15 on 7/14/2022, 8/11/2022 and 9/13/2022 with topics covered such as working together across providers waitlist reduction, collaboration with system partners, Wraparound initiative, self-care, System of Care Updates and the referral process for each community agency.
- A Direct Supervisors' System Meeting was held in Circuit 19 on 9/22/2022 with topics covered such as the new SAMHSA Children's System of Care grant in Martin and St Lucie counties with each service provider identified, expansion of the Community Action Treatment Team with NHTC, and referral processes for each community agency to ensure effective collaboration between agencies.
- Children's Care Coordination Manager attended C15 Child Abuse Death Review Committee held 8/25/22 to discuss systemic policy and community changes to prevent child fatalities.
- Children's Care Coordination Manager continues to attend Monthly Treatment Team Staffings held at Sandy Pines for children funded by SIPP/PRTS and those Care Coordination youth to review progress with their treatment and offer assistance with discharge planning. The Director of Children's System of Care and Children's Care Coordination Manager met with Sandy Pines Director of Marketing to discuss possible quarterly meetings with administration moving forward. Those quarterly meetings have not been scheduled as of yet.
- Children's Care Coordination Manager times a Secretary of the St. Lucie County's Department of Juvenile Justice Advisory Council ended in the 1st Quarter and a new secretary was elected in August. CCCM attended the next meeting held on 9/6/22. 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 7/19/22; 9/27/22 and the Georgetown (crossover youth practice) model has begun implementation of the first phase in St Lucie County.
- Children's Care Coordinator attended the Monthly Ignite Intervention Team meeting to explore care coordination connections for Juvenile Justice involved youth and provide clinical team perspectives and feedback. For the 1<sup>st</sup> quarter, the 8/16/22; 9/14/22 meetings were attended and barriers to treatment were addressed and removed by collaborative efforts. Referrals to Rite Life; SEDNET; Adult and Children's Care Coordination were made to further assist youth and families.
- Children's Care Coordination Manager continued to attend the ChildNet/DCF/PBCSO Human Trafficking Task Force staffings for high-risk Palm Beach County. CCCM attended to assist with coordination of care, brainstorming services, and removal of system level barriers to care for youth and families. Meetings were attended on: 7/14/22; 8/1/22; 8/4/22; 8/11/22; 9/7/22; 9/23/22
- Children's Care Coordination Manager provides consultation to administration staff from several agencies such as SAMH/DCF; CBC Clinical Staff; Behavioral Health Consultants with DCF; ADP; DJJ; school board; along with Network provider staff. During the 1<sup>st</sup> quarter, CCCM provided ten (10) consultation calls to address the needs of our high-risk youth throughout the Network.
- In Circuit 15, Family Systems Manager provided monthly technical assistance and support to the Mobile Response Team at South County Mental Health Center on 7/20/2022, 8/17/2022, 9/21/2022. Additional support was provided on 8/29/2022 and 8/30/2022. Two Family System Managers coordinated a joint meeting between Chrysalis/CAT and MRT on 8/31/2022 to facilitate

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introductions, summarize program aims and goals, and formalize ongoing collaborative efforts. An Emergency Preparedness call was held on 9/28/2022 ensuring the needs of the Team and the community served were met prior to Hurricane Ian.

- 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 7/22/2022 and 8/30/2022. An Emergency Preparedness call was held on 9/28/2022 ensuring the needs of the Team and the community served were met prior to Hurricane Ian.
- 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, 2 meetings were held on: 7/29/2022, and 9/30/2022.
- In Circuit 15, Family Systems Manager provided monthly technical assistance and support to the Community Action Team (CAT)/Chrysalis on 7/11/2022, 8/15/2022, and 9/12/2022 Additional meetings with the director of Chrysalis/CAT and the Family Systems Manager occurred on 7/12/2022, 7/15/2022, 7/26/2022, 7/29/2022, 8/2/2022, 8/3/2022, 8/17/2022, and 9/12/2022, 9/14/2022 relating to new team members, data requirements, person served related staffings and trainings. Additional meetings were facilitated regarding the Early Childhood CAT Team on 7/8/2022, 7/21/2022, 8/18/2022, 8/30/2022, and 9/7/2022. Meetings with Family Systems Manager and community members such as ELC, Child Welfare, and the school district employees to promote and introduce the EC-CAT model were facilitated on 7/10/2022, 8/18/2022, 8/18/2022, and 8/30/2022. Two Family System Managers coordinated a joint meeting between Chrysalis/CAT and MRT on 8/31/2022 to facilitate introductions, summarize program aims and goals, and to formalize ongoing collaborative efforts. An Emergency Preparedness call was held on 9/28/2022 ensuring the needs of the Team and the families served were met prior to Hurricane Ian.
- Circuit 19, Family Systems Manager provided monthly technical assistance and support to CAT/New Horizons of the Treasure Coast (NHTC) on 7/22/2022, 8/12/2022, and 9/9/2022. Additional meetings with the director of CAT/NHTC and the Family Systems Manager occurred on 8/9/2022, 8/16/2022, 8/30/2022, and 9/5/2022, relating to person served staffings, and the expansion of the current CAT Team. An Emergency Preparedness call was held on 9/28/2022 ensuring the needs of the Team and the families served were met prior to Hurricane Ian.
- The Family Systems Manager and the Director of Children’s System of Care attended Statewide MRT calls with DCF on 7/27/22 and 8/25/22.
- SEFBHN staff continued participation this quarter in Glades (7/13/2022, 8/10/2022, 9/14/2022) System of Care governance meetings sharing information around strategic planning, sustainability, children’s care coordination and House Bill 945. It was expanded to include adult providers, as well. SEFBHN participated in the Glades Wraparound Subcommittee on 7/13/2022, 8/10/2022, 9/14/2022.
- S(D) - Access to Treatment for Priority Populations, Including Capacity Reports

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

***(1) Centralized Electronic Waitlist 1<sup>st</sup> Quarter Update***

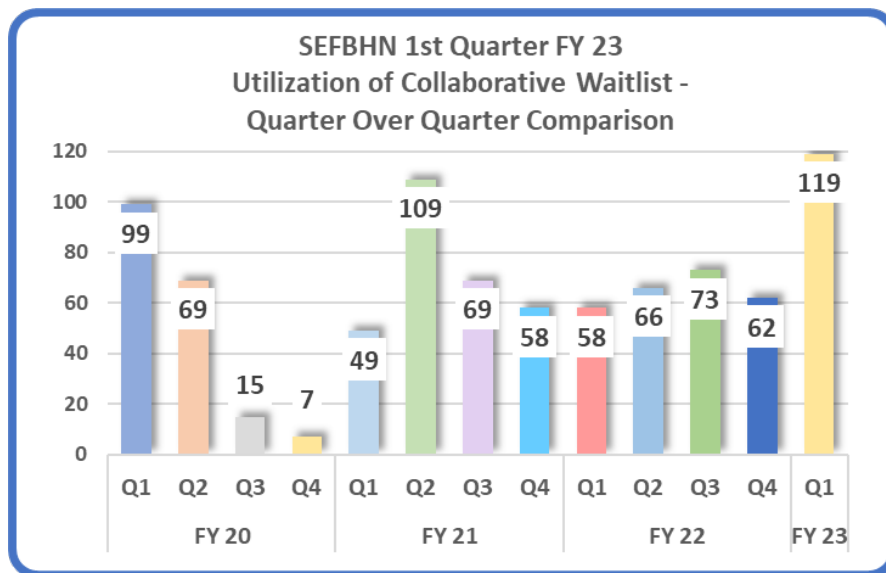
During the first quarter of fiscal year 2022-2023, 8 SEFBHN providers waitlisted 119 clients. As shown in the table below, 48% of this total (or 57 clients) had to wait to receive Brighter Family Center services.

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**Submitted: October 20, 2022**

Twenty-three (23) clients, or 19% of the total, were waitlisted for New Horizons of the Treasure Coast services.

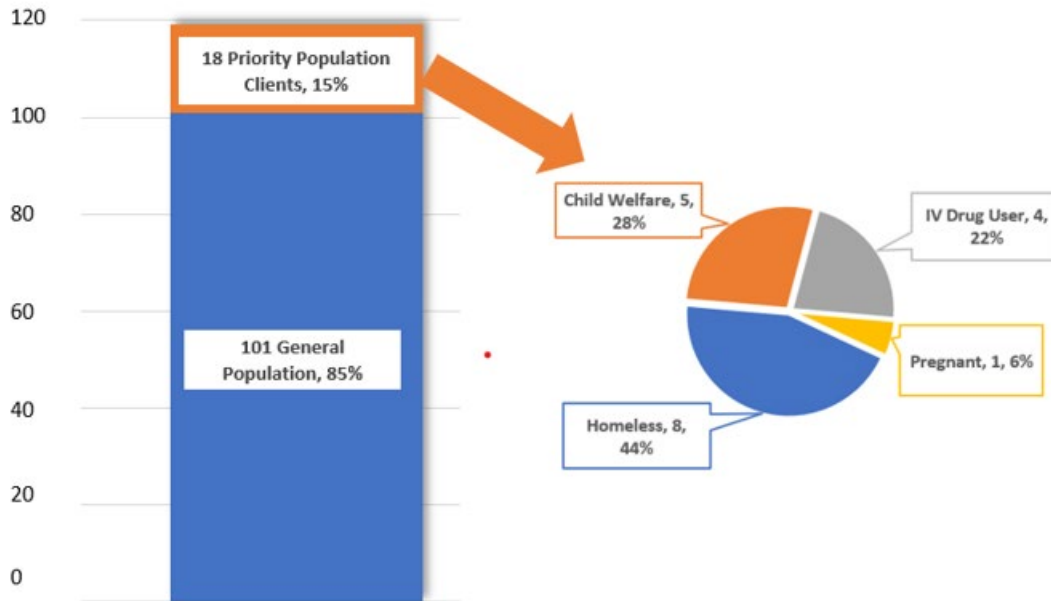
<b>SEFBHN 1st Quarter FY 23 Collaborative Waitlist Update</b>				
<b>Persons Waitlisted by Provider and Month</b>				
Listing Providers	Jul	Aug	Sep	Total
20-1966531 - Chrysalis Health Inc.	1	8	9	18
20-5662691 - Brighter Family Center Inc.	9	23	25	57
59-1519622 - South County Mental Health Center			2	2
59-2516157 - Jeff Industries Inc.		2	2	4
59-6153749 - New Horizons of The Treasure Coast	9	9	5	23
65-0202835 - Substance Abuse Council of Indian Riv	4		2	6
65-0988051 - Counseling and Recovery Center		8		8
81-2871377 - Transpire Help		1		1
<b>Grand Total</b>	<b>23</b>	<b>51</b>	<b>45</b>	<b>119</b>

As visually displayed in the following graphic, the 119 clients waitlisted in the first quarter represented a 92% increase over the 62 persons waitlisted during the last quarter of FY 22 and are in line with the historic, pre-pandemic waitlist numbers. Causality aside, this increase corresponds to the public’s perception that life can now return to normal as the threat of COVID-19 has finally passed.



As shown in the graphic below, of the 119 waitlisted clients during the first quarter, only 18 – or 15% – met the criteria for one of the priority populations. This 15% can be further detailed as follows: 8 individuals or 44% of all priority clients were homeless; 5 persons (28%) were involved with Child Welfare; 4 (22%) were using IV drugs; and 1 individual was pregnant.

**SEFBHN 1st Quarter FY 23 Waitlist Update**  
**Priority Population Detail**



The most frequently waitlisted services within the SEFBHN network are listed in descending order in the next table. Outpatient – Individual was the most sought-after service accounting for 34% of the waitlist total. CAT Teams accounted for 33%, and 11% of the total were waitlisted for Case Management services.

<b>SEFBHN 1st Quarter FY 23 Collaborative Waitlist Update</b>		
<b>Most Frequently Waitlisted Services</b>		
Covered Service/Project	#	%
14 - Outpatient - Individual	40	34%
B4 - CAT Team	39	33%
02 - Case Management	13	11%
11 - Intervention - Individual	8	7%
01 - Assessment	5	4%
25 - Supportive Employment	4	3%
35 - Outpatient - Group	3	3%
12 - Medical Services	2	2%
19 - Residential Level II	2	2%
06 - Day Treatment	1	1%
10 - Intensive Case Management	1	1%
15 - Outreach	1	1%
<b>Grand Total</b>	<b>119</b>	<b>100%</b>

Only 14 of the 119 persons waitlisted during the quarter were removed from the Collaborative Waitlist. As shown in the next table, 11 of these 14 individuals – or 93% – were removed because they began receiving services at the listing provider or another provider. Three (3) were removed after declining services.

SEFBHN 1st Quarter FY 23 Collaborative Waitlist Update Reasons Removed From the Waitlist	
Outcomes	#
Not Yet Discharged	105
1 - Receiving Services at this Provider	10
4 - Declined	3
7 - Receiving Services at another Provider	1
<b>Grand Total</b>	<b>119</b>

The average length of stay (ALOS) on the waitlist is calculated upon discharge from the waitlist and is expressed in days. As shown below, the ALOS for those discharged from the waitlist in the first quarter of FY 23 was 19 days on average. The ALOS ranged from 7 days for services at the Substance Abuse Council of Indian River County to 51 days for services from New Horizons of the Treasure Coast.

SEFBHN 1st Quarter FY 23 Collaborative Waitlist Update Average Length of Stay (ALOS) on Waitlist	
Listing Provider	ALOS
59-2516157 - Jeff Industries Inc.	17
59-6153749 - New Horizons of The Treasure Coast	51
65-0202835 - Substance Abuse Council of Indian River County	7
65-0988051 - Counseling and Recovery Center	20
<b>Grand Total</b>	<b>19</b>

SEFBHN is working to encourage all providers to expand their use the Collaborative Waitlist, and this topic is addressed at most of the monthly CQI meetings held by SEFBHN. The Collaborative Waitlist has now been modified to tag waitlisted clients who are insured by Medicaid. With its new ability to distinguish DCF clients from Medicaid clients, the Waitlist can now be used by all parties to gain a more complete picture of the demand for services in relation to capacity in the SEFBHN service area.

**(E) Provider Peer Activities**

The following information represents Peer Activities conducted by SEFBHN during the 1st Quarter:

*(1) Peer Support Activities for Quarter 1*

During the 1<sup>st</sup> quarter, Rebel Recovery engaged an average of 47 participants per month. An average of 61 participants were engaged in treatment services with a behavioral health organization. In September, 104 received Medication Assisted Treatment and 57 received abstinence-based treatment services. 22 engaged with peer services while attending abstinence-based recovery support groups. During this 1<sup>st</sup> quarter Rebel has worked with 32 participants with open Child Welfare cases, and 6 participants involved in Family Treatment Court from July-September.

Rebel Recovery Florida continues to be a Hub in the community evidenced by strong community and consumer relationships and providing individualized services. They continue to maintain strong ties with community-based behavioral health providers and refer consumers based on their individualized needs. Some of those needs include but are not limited to peer support, case management, housing (recovery residence or independent housing), treatment, and mental health. Rebel also successfully links

participants from the jail, hospitals, child welfare and the specialty courts with Medicated Assisted Treatment (MAT) providers in our network.

Through Rebel's Recovery Community Organization, they continue to promote recovery through education and harm reduction. For this past quarter, Rebel hosted or engaged in numerous trainings, groups, and activities, such as Mental Health First Aid, Harm Reduction Training, Overdose Prevention and Response Training, including Narcan administration training. In September, they held a Helping Others Heal (HOH) training with a total of 42 participants, engaged in a Trauma Informed Training, and Safety First (youth Drug Education Program). Rebel Recovery have also dealt with some barriers during the last quarter. They have been impacted by staffing shortages; they are outgrowing their office and are having difficulty in identifying affordable housing for consumers. As they welcome new staff, they will continue to find ways to navigate those barriers so that service delivery is not interrupted and their services and programs remain steady.

Through their partnership with the Department of Health, Compass Community Center, Foundcare and Health Council of Southeast Florida (HCFEF), Rebel Recovery offers HIV testing, prevention and referral to treatment. In 2020, after launching FLASH, their mobile syringe and health service program, Rebel continued to collaborate while establishing their own testing site number. Today, they are able to offer onsite confidential and limited anonymous testing through a home-self-test program. HIV services can be accessed through their recovery community center weekly/ biweekly, through their mobile syringe program daily, through remote community outreach activities, through peer navigation service referral, and through scheduling HIV test where a participant resides through our HCSEF partners.

Rite Life Services promotes recovery through education, training, recovery support and housing support services in their RCO in Okeechobee. In the 1<sup>st</sup> quarter they attended numerous community meetings and events to increase their presence in the community. They engaged and conducted many trainings and activities this quarter, some being LGBTQ youth Support Group, WRAP, and Suicide Chat. The number of consumers they have been serving continues to grow as they deliver targeted services to their consumers. Rite Life was able to distribute Narcan throughout the community, secure a pill disposal lock box and a sharps container where consumers can dispose of unwanted or unused medications. They continue to provide case management, recovery support, outreach, transitional vouchers for mental health and substance use program area. Rite Life remains linked with Medicated Assisted Treatment (MAT) providers for consumers classified as indigent that are struggling with Opioid use disorder.

Rite Life also has a Peer-run respite that serves consumers with a Mental Health and/or Co-occurring diagnosis in Port Saint Lucie. Each individual receives services tailored to their individualized need which includes but is not limited to case management, recovery support for individual and group, life skills and supported employment, to name a few. They continue to build relationships with landlords in Saint Lucie County and identify independent housing for consumers who are transitioning out. While Rite Life does not provide clinical services, they do link members to community providers to ensure that their mental health needs are being addressed as needed. They are continuing to work collaboratively with Mental Health Court, Drug Court and DCF in Okeechobee and Martin Counties. For this past quarter, Rite Life also opened a new Recovery Community Organization in PSL and help an open house on Aug. 31 to coincide with National Overdose Awareness Day. The RCO has hosted or engaged in numerous trainings, groups, and activities such as Suicide Support Chat, WRAP support chat, and GRASP. Rite Life



also conducted a presentation to DCF, PSL jail, Martin County Correctional, St. Lucie Roundtable Youth, and PSL hospital.

The Director of Network Integrity attended the ME & RCO Leadership Business meeting held in August in Orlando. This meeting was organized by Florida Association of Managing Entities and Floridians for Recovery. The purpose of the meeting was to share information among RCO's and ME's on best practices for contracts, data requirement, reimbursement options, as well as organization and workforce development.

The Chief Operating Officer attended a meeting in September the RCO/ME & Faces and Voices for Recovery meeting held in Orlando organized by DCF. Similar topics to the August meeting were discussed.

The Director of Network Integrity participates bi-monthly in the Peer Leadership Council Planning meetings for Palm Beach County. The idea for the Peer Leadership Council is to provide a voice for the peers employed in Palm Beach County. The council, once it is fully formed, will be advocating for peers as well as sharing information on available opportunities.

## (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.

SEFBHN continues to expand Care Coordination services to mothers and babies with Neonatal Abstinence Syndrome (NAS) or Substance Exposed Newborn (SEN) conditions. The Care Coordination is to establish housing and employment, and peer support programs for women with babies with NAS or SEN. Throughout the 1<sup>st</sup> quarter Drug Abuse Foundation continues to provide, care coordinator and housing/ employment service to the consumers within their program. Drug Abuse Foundation of the Palm Beaches (DAF) has a 22-bed residential treatment facility which offers substance use treatment, including Medication Assisted Treatment (MAT), for pregnant and post-partum women who can reside with their babies. The program also offers 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 program is currently serving eight (8) pregnant/post-partum mothers and their five (5) babies with a total of 14 currently residing on the unit. During this first quarter 27 pregnant/post-partum mothers and 12 babies with a total of 39 were served.

During 1st quarter, SEFBHN Network Providers (Drug Abuse Foundation of Palm Beach, Counseling and Recovery Center, Housing Partnership and Wayside House) served 88 individuals with treatment services specific to the pregnant and post-partum women struggling with substance use disorders. Out of those 88 women being served in these specialty programs, 95% were parenting children between the ages zero (0) to six (6) years of age. Moreover, 10 of the 88 women being served were pregnant.

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

During the 1st quarter, PPW Care Coordinator at Drug Abuse Foundation, shared the following success story:

“Consumer had been in treatment for about four (4) months before she was successfully discharged from the program. During her treatment she was part of Drug Court and gave birth to her beautiful baby girl. During this time her partner had also been in and out of treatment during this time. When she finally discharged from Drug Abuse Foundation in June, she was able to relocate to Port St. Lucie with a transitional voucher she had receive while working with the care coordinators at DAF. She secured a placement for herself and her child at Oxford house. Additionally, prior to her completely using the voucher she was able to move into a home with her partner and baby allowing the two of them to coparent while under one roof.”

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

During the 1st Quarter, the Clinical Supervisor at Counseling and Recovery, shared the following success story:

“This client is a 24-year-old, single, pregnant woman who completed an intervention screening to determine level of care and entered CRC’s residential program on. Unfortunately, she left AMA three days after the initial screening however, due to a Drug Court order she return a month later to start receiving services with CRC residential program. She has an extensive history of abuse (trauma), legal and mental health issues, and polysubstance misuse, which includes IV use. We offered and encouraged MAT services; yet the client had declined. While she was in CRC’s residential program, she participated in evidenced-based programs to address her past trauma, parenting classes and completed a Psychiatric Evaluation for medication management. On 6/11/2022 about 5 months after entering the residential program, she gave birth to her beautiful and healthy baby boy, whom she named Greyson. She returned to CRC where she could be monitored with her newborn son. During the transition planning process, client completed an interview at Oxford House and was accepted upon her graduating from CRC’s residential program. She successfully graduated residential on 8/3/2022, and now is residing at Oxford House for mothers and children. She is currently attending Day Treatment Phase II for continuum of care, or “step down” services, and mom and baby appear to be thriving. She is currently seeking employment and has an appointment with our Peer Support to complete the application for the transitional voucher. Upon obtaining employment, she will be transferred to CRC's Aftercare Program where she will continue sharpening her relapse prevention skills.”

**(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 1.

**(I) Monitoring for FY 21/22**

SEFBHN uses 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.

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 (if applicable) and Tier 3 reviews.

*Tier 1* – The following represents the status of Tier 1 validations as of Quarter 1 1: Tier 1 validations have been completed on all contracted providers in the first quarter.

*Tier 2 and Tier 3* - The following represents the status of Tier 2 and Tier 3 validations as of Quarter 1, July – September 2022:

Agency	Contract(s)	Date Tier 2 Begun	Date Tier3 Begun	Current Status
New Horizons of the Treasure Coast, Inc.	ZTF13	N/A	7/27/2022	Tier 3 Report Date: 9/9/2022
Legacy Behavioral Health Center, Inc.	ZNA36	9/28/22	Tier 3 Scheduled in Q2	Tier 3 Scheduled in Q2

**(J) Continuous Quality Improvement**

The following information was presented during the 1st Quarter CQI meetings which were conducted through a Virtual Platform, Microsoft Teams.

- **Lindsay Slattery-Cerny** presented regarding updates for the 988 Suicide and Crisis Lifeline.
- **Jill Sorensen** presented regarding the quarterly Wraparound Initiative and trends for FY 22-23.
- **Susan Foley** from Palm Beach Behavioral Health Coalition presented the new CRAFT program for individuals with loved ones with substance use.
- **Daniel Oria** presented regarding the SEFBHN Electronic Waitlist and provided technical assistance to the network.
- **Allison Jimenez** presented regarding the Zero Suicide Imitative for SEFBHN Network Providers for Suicide Prevention Month.
- **Sharyn Dodrill** reviewed more 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**

<b>Number of Participants Enrolled</b>	
<i>Year/Quarter</i>	<i>Number Enrolled</i>
<b>Grant Year 1</b>	
Quarter 1	97
Quarter 2	10
Quarter 3	11
Quarter 1	35
<b>Grant Year 1 Total</b>	<b>153</b>
<b>Grant Year 2</b>	
Quarter 1	14
Quarter 2	18
Quarter 3	23
Quarter 1	26
<b>Grant Year 2 Total</b>	<b>81</b>
<b>Grand Total</b>	<b>234</b>

<b>Discharge Status</b>	
<i>Status</i>	<i>Totals</i>
Deceased	3
Successful	91
Unsuccessful	33
<b>Grand Total</b>	<b>127</b>

<b>Contract Program Performance Measures</b>		
<b>Performance Measures</b>	<b>Percentage</b>	<b>Target</b>
E-1.1 For the measure in Section E-1.1, the total number of Program participants arrested while enrolled in the Program DIVIDED BY the total number of Program participants shall be LESS THAN OR EQUAL TO 40%.	<b>8%</b>	<=30%
E-1.2 For the measure in Section E-1.2, the total number of Program participants arrested within the one-year period following discharge DIVIDED BY the total number of Program participants discharged during the previous one-year period shall be LESS THAN OR EQUAL TO 30%.	<b>5%</b>	<=30%
E-1.3 For the measure in Section E-1.3, the total number of Program participants not residing in a stable housing environment at admission who live in a stable housing environment within 90 days of Program admission DIVIDED BY the total number of Program participants not residing in a stable housing environment at Program admission shall be GREATER THAN OR EQUAL TO 67%.	<b>79%</b>	67%

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E-1.4 For the measure in Section E-1.4, the total number of Program participants who are living in a stable housing one year following discharge DIVIDED BY the total number of Program participants discharged during the previous one-year period shall be GREATER THAN OR EQUAL TO <u>15%</u> . (BASED ON ALL DISCHARGED.AW)	<b>50%</b>	24%
E-1.5 For the measure in Section E-1.5, the total number of Program participants not employed at Program admission who are employed full or part-time within 180 days of Program admission DIVIDED BY the total number of Program participants not employed at Program admission shall be GREATER THAN OR EQUAL TO <u>10%</u> .	<b>46%</b>	10%
E-1.6 For the measure in Section E-1.6, the total number of Program participants who are employed one year following discharge DIVIDED BY the total number of Program participants discharged during the previous one-year period shall be GREATER THAN OR EQUAL TO <u>5%</u> . (BASED ON ALL DISCHARGED 1 YR.AW)	<b>48%</b>	24%
E-1.7 For the measure in Section E-1.7, the total number of Program participants who were eligible for, but not receiving, social security or other benefits at Program admission who are assisted in applying for such benefits DIVIDED BY the total number of Program participants who were eligible for, but not receiving, those benefits at Program admission shall be GREATER THAN OR EQUAL TO <u>65%</u> .	<b>88%</b>	65%
E-1.8 For the measure in Section E-1.8, the total number of Program participants who are not admitted to a State Mental Health Treatment Facility while enrolled in the Program DIVIDED BY the total number of individuals enrolled in the Program shall be GREATER THAN OR EQUAL TO <u>15%</u> .	<b>94%</b>	15%
E-1.9 For the measure in Section E-1.9, the total number of Program participants who graduate from the Program DIVIDED BY the total number of individuals enrolled in the Program shall be GREATER THAN OR EQUAL TO <u>40%</u> .	<b>40%</b>	40%
<b>NON-CONTRACT PERFORMANCE MEASURE:</b>		
<b>Stable Housing From Admission to Discharge (if successful discharges)</b>	<b>88%</b>	80%
<b>Percent of Participants Assessed for Benefits Upon Intake</b>	<b>99.14%</b>	65%
<b>Performance Measures</b>	<b>Number of</b>	<b>Number of Jail Days Avoided</b>

	Cases	
Misdemeanors	76	3040.00
Felonies	154	15092.00
<b>Total</b>	<b>230</b>	<b>18132.00</b>
<p><i>*Misdemeanors average 40 days in jail and felonies average 98 days in jail at \$125/day (average cost for clients with mental health disorders in jail). Cost avoidance is calculated based on the number of days avoided multiplied by the average cost of a day in jail</i></p>		
<b>Competency Status</b>	<b>Count</b>	
Competent	192	
ICP	29	
NGI	9	
<b>Grand Total</b>	<b>230</b>	

## 2. Okeechobee County

Number of Adult Participants Enrolled	
Year/Quarter	Number Enrolled
<b>Grant Year 1</b>	
Quarter 1	27
Quarter 2	3
Quarter 3	5
Quarter 1	4
<b>Grant Year 1 Total</b>	<b>39</b>
Number of Juvenile Participants Enrolled	
Quarter 1	0
Quarter 2	4
Quarter 3	17
Quarter 1	0
<b>Grant Year 1 Total</b>	<b>21</b>
<b>Grand Total</b>	<b>60</b>

<b>Program Performance Measures</b>		
<i>Performance Measures</i>	<i>Percentage</i>	<i>Target</i>
<b>E-1.1. Percent Arrested While Enrolled (<i>Adults &amp; Juveniles</i>)</b>	5%	<=40%
<b>E-1.2. Percent Arrested Within 1 Year Following Discharge (if successful discharge) (<i>Adults &amp; Juveniles</i>)</b>	11%	<=30%
<b>E-1.3. Percent with Stable Housing From Admission to 90 Days</b>	78%	55%
E-1.4. Percent of Participants <del>Assessed</del> Assisted in applying for Benefits Upon Intake ( <i>Adults &amp; Juveniles</i> )	100%	65.00%
E-1.5. Percent of Participants Diverted from Criminal Justice System and Successfully Discharged ( <i>Adults &amp; Juveniles</i> )	73%	50%
E-1.6. Percent of <u>Adults</u> with stable housing 1 Year Following Successful Discharge	No Data until 12/1/2022	50%
E-1.7. Percent of <u>Adult</u> Program Participants Employed From Admission to 180 Days Following Admission	86%	10%
E-1.8. Percent of <u>Adult</u> Program Participants Employed full or part time 1 year following program discharge (If successful program completion)	No Data until 12/1/2022	24%
E-1.9. Percent <u>Adults</u> diverted from State Mental Health Treatment Facility	97%	15%
E-1.10. Percent <u>JUVENILES</u> employed or in school at discharge. (If Successfully Discharged)	92%	40%
E-1.11. Percent <u>JUVENILES</u> w/improved relationships with parents/caregivers at discharge. (If Successfully Discharged)	100%	40%
E-1.12. Percent <u>JUVENILES</u> w/sustained negative drug test.	71%	50%

Cost Avoidance (Adults)		
Performance Measures	Number of Cases	Number of Jail Days Avoided
Misdemeanors	16	640
Felonies	23	2254
<b>Total</b>	<b>39</b>	<b>2894</b>

**(L) Consumer Satisfaction Surveys**

SEFBHN continues to collect consumer satisfaction survey data using the previous format published by DCF. Year-to-date, over 3,500 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 1st Quarter FY 22-23 LOCUS and CALOCUS Update**

SEFBHN network providers performed 1,324 LOCUS and 697 CALOCUS evaluations during the first quarter of the fiscal year. This represents a 23% decrease in LOCUS assessments and a 1% decrease in CALOCUS evaluations from the totals performed in the 4<sup>th</sup> quarter. As shown in the first table below, 12 network providers conducted adult level of care assessments using the LOCUS instrument. New Horizons of the Treasure Coast conducted 43% of the total, followed by Brighter Family Center (26%), Housing Partnership (15%), and South County Mental Health Center (9%). These 4 providers accounted for 94% of the evaluations performed, with the other 8 providers combined making up the remaining 6%.

SEFBHN 1st Quarter FY 23 LOCUS Update				
LOCUS Evaluations by Provider and Month				
Provider	July	Aug	Sept	Total
Behavior Basics, Inc.	1	1	1	3
BOYS TOWN SOUTH FLORIDA, INC.			4	4
Brighter Family Center, Inc.	190	103	57	350
Carrfour Supportive Housing, Inc.		1	1	2
Helping People Succeed Inc.	11	3	2	16
HENDERSON BEHAVIORAL HEALTH - SEFBHN	22	3	7	32
Housing Partnership	62	70	69	201
JEFF INDUSTRIES INC	5	5	4	14
NEW HORIZONS OF THE TREASURE CO - SEFBHN	205	203	167	575
SOUTH COUNTY MENTAL HEALTH CENTER	42	30	44	116
The Chrysalis Center Inc. - SEFBHN	2		1	3
THE LORD'S PLACE INC.		7	1	8
<b>Grand Total</b>	<b>540</b>	<b>426</b>	<b>358</b>	<b>1324</b>

As shown in the following table, 9 SEFBHN network providers conducted the 697 children’s assessments during the quarter. New Horizons of the Treasure Coast performed 34% of these, followed by Housing Partnership (30%) and Helping People Succeed (12%). The remaining 6 providers accounted for 24% of the total.



SEFBHN 1st Quarter FY 23 CALOCUS Update				
CALOCUS Evaluations by Provider and Month				
Provider	Jul	Aug	Sep	Total
Brighter Family Center, Inc.	10	7	5	22
FATHER FLANAGAN'S BOYS TOWN	9	13	13	35
HENDERSON BEHAVIORAL HEALTH - SEFBHN	20	20	9	49
Housing Partnership	71	97	44	212
HPS HELPING PEOPLE SUCCEED INC.	37	26	18	81
NEW HORIZONS OF THE TREASURE COAST	61	89	85	235
Our Village Okeechobee, Inc.	1	1	2	4
SOUTH COUNTY MENTAL HEALTH CENTER			1	1
The Chrysalis Center Inc. - SEFBHN	20	18	20	58
<b>Grand Total</b>	<b>229</b>	<b>271</b>	<b>197</b>	<b>697</b>

The most frequently recommended level of care was LOC 2 - Low Intensity Community Based Services, with 36% of the LOCUS evaluations and 29% of the CALOCUS resulting in this recommendation, as shown in the next two tables. LOC 5 – Medically Monitored Residential Services garnered 18% of the LOCUS evaluations, followed by LOC 3 – High Intensity Community Based Services at 15%. LOC 1 – Recovery Maintenance and Health Management (18%) and LOC 5 – Medically Monitored Residence Based Services (16%) rounded out the top three recommended LOCs in the CALOCUS evaluations.

SEFBHN 1st Quarter FY 23 LOCUS Update														
LOCUS-Recommended LOC by Provider														
LOCUS-Recommended LOC	BB	BT	BFC	CSH	HPS	HBH	HP	JI	NHTC	SCMHC	TCC	TLP	Total	%
Basic Services			15	1		1	30		13	4			64	5%
LOC 1 - Recovery Maintenance and Health Management			119		2	1	24		16	8			170	13%
LOC 2 - Low Intensity Community Based Services			139		8	4	65	14	202	49	1		482	36%
LOC 3 - High Intensity Community Based Services	1	3	54	1	5	8	69		34	19		3	197	15%
LOC 4 - Medically Monitored Non-Residential Services			9		1	5	2		14	17		1	49	4%
LOC 5 - Medically Monitored Residential Services	2	1	12			11	7		190	16	2	3	244	18%
LOC 6 - Medically Managed Residential Services			2			2	4		106	3		1	118	9%
<b>Grand Total</b>	<b>3</b>	<b>4</b>	<b>350</b>	<b>2</b>	<b>16</b>	<b>32</b>	<b>201</b>	<b>14</b>	<b>575</b>	<b>116</b>	<b>3</b>	<b>8</b>	<b>1324</b>	<b>100%</b>

SEFBHN 1st Quarter FY 23 CALOCUS Update											
CALOCUS-Recommended Level of Care by Provider											
CALOCUS-Recommended Level of Care	BFC	BT	HBH	HP	HPS	NHTC	OVO	SCMHC	TCC	Total	%
Basic Services for Prevention and Maintenance	4	1	1	57	5	3				71	10%
LOC 1 - Recovery Maintenance and Health Management	11	7	10	56	24	11	3	1	4	127	18%
LOC 2 - Low Intensity Community Based Services	5	8	14	69	42	53			12	203	29%
LOC 3 - High Intensity Community Based Services	2	6	12	17	8	4	1		16	66	9%
LOC 4 - Medically Monitored Community Based Services		1	6	2		36			13	58	8%
LOC 5 - Medically Monitored Residence Based Services		9	4	6	2	82			11	114	16%
LOC 6 - Medically Managed Residence Based Services		3	2	5		46			2	58	8%
<b>Grand Total</b>	<b>22</b>	<b>35</b>	<b>49</b>	<b>212</b>	<b>81</b>	<b>235</b>	<b>4</b>	<b>1</b>	<b>58</b>	<b>697</b>	<b>100%</b>

The correspondence between the instrument-recommended levels of care and the actual levels of care selected by the clinician is shown in the following two tables. The first table shows that the match between the Recommended and Actual LOC range from 29% to 98% for the LOCUS evaluations and 51% to 100% for CALOCUS assessments. For adults, LOC 4- Medically Monitored Non-Residential Services has the largest discrepancy with only 29% of those clients recommended for LOC 4 by their instrument scores actually being recommended for LOC 4 services by their clinician. For children, the largest discrepancy was in LOC 3 services.

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SEFBHN 1st Quarter FY 23 LOCUS Update									
Correspondence between Recommended and Actual Levels of Care									
Recommended LOC	Actual LOC							Total	% Match
	Basic Serv	LOC 1	LOC 2	LOC 3	LOC 4	LOC 5	LOC 6		
Basic Services	22	7	31	2	2			64	88%
LOC 1 - Recovery Maintenance and Health Management		132	29	1	8			170	92%
LOC 2 - Low Intensity Community Based Services	2	2	455	3	20			482	80%
LOC 3 - High Intensity Community Based Services	1	2	41	125	24	3	1	197	84%
LOC 4 - Medically Monitored Non-Residential Services			2	6	36	1	4	49	29%
LOC 5 - Medically Monitored Residential Services			7	9	26	201	1	244	98%
LOC 6 - Medically Managed Residential Services			1	3	7	1	106	118	95%
<b>Grand Total</b>	<b>25</b>	<b>143</b>	<b>566</b>	<b>149</b>	<b>123</b>	<b>206</b>	<b>112</b>	<b>1324</b>	<b>81%</b>

SEFBHN 1st Quarter FY 23 CALOCUS Update									
Correspondence between Recommended and Actual Levels of Care									
Recommended LOC	Actual LOC							Total	% Match
	Basic Serv	LOC 1	LOC 2	LOC 3	LOC 4	LOC 5	LOC 6		
Basic Services for Prevention and Maintenance	21	1	49	1				72	91%
LOC 1 - Recovery Maintenance and Health Management		1	91	32	1	2		127	99%
LOC 2 - Low Intensity Community Based Services			193	6	3			202	66%
LOC 3 - High Intensity Community Based Services	1		12	41	12			66	51%
LOC 4 - Medically Monitored Community Based Services			2	21	33	2		58	57%
LOC 5 - Medically Monitored Residence Based Services			4	9	7	94		114	98%
LOC 6 - Medically Managed Residence Based Services				1	1		56	58	100%
<b>Grand Total</b>	<b>23</b>	<b>92</b>	<b>292</b>	<b>80</b>	<b>58</b>	<b>96</b>	<b>56</b>	<b>697</b>	<b>76%</b>

Clinicians performing LOCUS and CALOCUS assessments account for these discrepancies through the use of variances. Where a clinician disagrees with the instrument-recommended LOC and assigns a different LOC they must identify the reason for this variance. The following two tables identify the variance reasons by provider for LOCUS and CALOCUS evaluations. Clinical judgment is by far the most cited reason for changing the recommended level of care – selected in 74% of the LOCUS and 98% of CALOCUS evaluations where the actual LOC differed from the recommended LOC.

SEFBHN 1st Quarter FY 23 LOCUS Update													
Variance Reasons and Rates by Provider													
Variance Reasons	BB	BT	BFC	CSH	HPS	HBH	HP	JI	NHTC	SCMHC	TCC	TLP	Total
Arrested from unit/incarcerated									1				1
Basic Services							1						1
Client chose a LOC other than the one recommended			1			1	7		8	1			18
Client denies SPMI; refuses to seek services									1				1
Client dropped out of treatment			2										2
Client is court ordered to a higher level of care			1			2					2		5
Client is court ordered to a lower LOC											1		1
Client refuses recommended level		1				7			2				10
Client waitlisted for Recommended LOC						1			1				2
Client's finances/job deter treatment level			1			1							2
Client's priority is shelter at this time							2			6			8
Clinical Judgment	1		27		4	8	59		59	26			184
No services/beds available at level of care					1								1
Patient has safe housing with family	1	1				1							3
Services at recommended LOC not what client needs						4	1		2	2			9
<b>Total Variances</b>	<b>2</b>	<b>2</b>	<b>32</b>	<b>0</b>	<b>5</b>	<b>25</b>	<b>70</b>	<b>0</b>	<b>74</b>	<b>38</b>	<b>0</b>	<b>0</b>	<b>248</b>
No Variance	1	2	318	2	11	7	131	14	501	78	3	8	1076
<b>Grand Total</b>	<b>3</b>	<b>4</b>	<b>350</b>	<b>2</b>	<b>16</b>	<b>32</b>	<b>201</b>	<b>14</b>	<b>575</b>	<b>116</b>	<b>3</b>	<b>8</b>	<b>1324</b>
<b>Variance Rate</b>	<b>67%</b>	<b>50%</b>	<b>9%</b>	<b>0%</b>	<b>31%</b>	<b>78%</b>	<b>35%</b>	<b>0%</b>	<b>13%</b>	<b>33%</b>	<b>0%</b>	<b>0%</b>	<b>19%</b>

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SEFBHN 1st Quarter FY 23 CALOCUS Update										
Variance Reasons and Rates by Provider										
Variance Reasons	BFC	BT	HBH	HP	HPS	NHTC	OVO	SCMHC	TCC	Total
Basic Services for Prevention and Maintenance				1						1
Benefits from CCT					4				1	5
Client refuses recommended level of care				2	1					3
Client waitlisted for recommended LOC		2		1		20			1	24
Clinical judgment	5	2		80		4		1	34	126
Family/guardian refuses level of care			1							1
Lower LOC not yet completed or provided		1		3		5				9
<b>Total Variances</b>	<b>5</b>	<b>6</b>	<b>0</b>	<b>87</b>	<b>5</b>	<b>29</b>	<b>0</b>	<b>1</b>	<b>36</b>	<b>169</b>
No Variance	17	29	49	126	76	206	4		22	529
<b>Grand Total</b>	<b>22</b>	<b>35</b>	<b>49</b>	<b>213</b>	<b>81</b>	<b>235</b>	<b>4</b>	<b>1</b>	<b>58</b>	<b>698</b>
<b>Variance Rate</b>	<b>23%</b>	<b>17%</b>	<b>0%</b>	<b>41%</b>	<b>6%</b>	<b>12%</b>	<b>0%</b>	<b>100%</b>	<b>62%</b>	<b>24%</b>

The overall variance rates for the first quarter of the fiscal year are 19% for LOCUS and 24% for CALOCUS.

(N) Adjustments to Required Plans and Network Management Activities

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

There were no adjustments to SEFBHN Required Plans for the first quarter of FY 22-23.

*(2) Network Management Activities*

19 amendments; 6 new subcontracts; 1 new agreement; and no terminations were completed during the 1st Quarter. The documents can be found in the Provider E-Contracting System and are listed as follows:

Amendments

PDC19 – Hanley Foundation

PNA37 – Brighter Family Center, Inc.

PDF04 – Henderson Behavioral Health, Inc.

ZNA38 – New Horizons of the Treasure Coast, Inc.

PDA56 – Rebel Recovery Florida, Inc.

PDA61 – Alternatives in Treatment, LLC d/b/a Mandala Healing Center

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

LNF01 - Catholic Charities of the Diocese of Palm Beach, Inc.

PDA44 – Sunset House, Inc.

ZNC24 – New Horizons of the Treasure Coast, Inc.

ZDA24 – RiteLife Services, Inc.

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

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

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PDA57 – The Recovery Research Network Foundation, Inc.

PNA16 – Jeff Industries, Inc.

PDA54 – Access Recovery Solutions, LLC

ZNC25 - Tykes and Teens, Inc.

PNA22 – The Lord’s Place, Inc.

PNA36 – Henderson behavioral Health, Inc.

New Subcontracts

PNC26 – The Chrysalis Center, Inc.

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

PNA36 – Henderson Behavioral Health, Inc.

ZDA14 – Counseling and Recovery Center, Inc.

ZTF13 – New Horizons of the Treasure Coast, Inc.

LDA07 – CFSATC, Inc. d/b/a Central Florida Substance Abuse Treatment Center

New Agreements

AGR57 – The Children’s Place at HomeSafe d/b/a HomeSafe

Termination

None

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

*Recurring Activities Continued in Quarter 1 - FY 22-23*

- 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. Quarterly meetings are held to update progress and address any issues. More details on this program can be found under the MAT section.
- SEFBHN is working closely with St. Lucie Sherriff’s Office, Wellpath, Rite Life Services and Public Defender’s Office Circuit 19, and Pinnacle Wellness Group on starting Medication Assisted & Peer Services (MAPS) program in the St. Lucie Jail. Bi-weekly meetings are taking place, with the expectation that services will begin in the 2<sup>nd</sup> quarter.
- SEFBHN and Carisk Partners continue to meet monthly. Due to the COVID-19 pandemic, these meetings were held virtually (Microsoft Teams). These meetings allow for robust information

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

- SEFBHN works closely with Palm Beach County Community Services department on several grants related to substance use disorder and housing.
  - The Comprehensive Opioid Stimulant and Substance Abuse Program (COSSAP) is a housing and recovery support grant for individuals with criminal justice involvement, substance use disorder and housing instability. COSSAP is a collaboration with SEFBHN, PBC Community Services Department, Florida Atlantic University and Rebel Recovery. The grant was due to end on Sept. 30, 2022, but a no cost extension was received and will extend this grant through December/January. 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. SEFBHN continues to contract with Rebel Recovery to also provide rapid re-housing and peer services to the same target population. This contract has been extended through August 31, 2022. An Amendment is currently being executed by Palm Beach County. 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 by Rebel peers to participants in each program, as well as independent assessments and care coordination as needed.

New Activities for Quarter 1 - FY 22-23

- In the **1st Quarter** of FY 21/22, 21 new referrals were received. Of these new referrals received during this quarter –17 adults and 4 adolescents. We continue to utilize the method of engaging a 3-way conference call between PBSO Staff, Care Coordinator and Program Participant to facilitate communication between Care Coordinator and Program Participant when linking Program Participants to community providers and have found this to be successful. SEFBHN sends a weekly Excel spreadsheet to PBSO depicting status update of all program participants referred within the community. We continue to refer to in-network and out-of-network providers for therapeutic, psychiatric, housing, and emotional support services.
- Furthermore, to facilitate stronger communication between SEFBHN and PBSO, we have begun to schedule Zoom meetings as needed. SEFBHN Care Coordinator will schedule zoom meetings at 3:30pm daily on the days PBSO Behavioral Services Department Therapist forward a referral to discuss case file, recommendations and to schedule the 3-way conference call between SEFBHN, PBSO and Program Participant. Furthermore, Care Coordinator will now begin attending PBSO Case Staffing every Thursday at 10:30am via zoom to discuss new case files, barriers and/or issues to with the team to work on case files that present with barriers to facilitate proper linkage within the community.
  - During this quarter SEFBHN successfully linked a participant to an out of network provider, Aspen Behavioral Health, and his Case Manager has shared program participant engages well, is attending his individual and group sessions as well as attending psychiatric services and being med compliant. Also, Participant has called Care Coordinator several times to

check-in to provide status update and to share his gratitude for being in the LINC program which is providing him a second chance to stay sober and work through his mental health barriers.

- Following last quarter there have been 12 file closures. Of those file closures, three were successful, one participant left the facility against medical advice, one was rearrested, one declined service, two did not engage in services, four no longer participated in services, therefore, files were closed. Moreover, of the 56 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 been meeting during the 1<sup>st</sup> quarter with Rebel Recovery and the Criminal Justice Center in Palm Beach County establish a new pilot program called Next Steps. This program is for those identified as frequent utilizers with behavioral health needs that are cycling through the jail. The program would establish a Jail Recovery Navigator (JRN) that would intercept individuals at First Appearance who are sentenced to 10 days or less in jail and connect them with a Certified Peer Navigator and continuing peer services in the community. The program will be starting early October.
- The Network provider for the Forensic Multidisciplinary Team (FMT) for circuit 15 will be The Recovery Research Network Foundation (TRRF). The Forensic Multidisciplinary Team (FMT) provide a 24 hour a day, seven days per week, comprehensive approach to divert individuals from commitment to Forensic State Mental Treatment Facilities (SMHTFs) and other residential forensic programs by providing community-based services and support. During the 1<sup>st</sup> quarter, SEFBHN provided technical assistance regarding required trainings, staffing requirements, development of policies and procedures, and referral forms, as well as coordinated introductory meetings with the Public Defender’s Office, Wellpath and South County’s Forensic team to plan the program’s logistics. TRRF will start serving individuals during the second quarter of the current fiscal year.

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

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

Sixty-five (65) children were enrolled in CRAVE Care during the quarter. Helping People Succeed submitted NOMs for sixty-two (62) children and Brighter Families submitted NOMs for 3. The grant goal for served unduplicated children for the 1<sup>st</sup> year was met.

The Project CRAVE Care brochure has been translated into Spanish. SEFBHN will print the brochure next quarter.

The introductory meeting of the governance board was conducted on July 21, 2022. During the August, and September meetings the group began developing the mission and vision statements. The governance board has decided to have a subcommittee to work on youth enrollment and family engagement.

In August, it was determined the contract with FAU for project evaluation could not proceed due to unforeseen circumstances. SEFBHN staff had negotiations with two potential project evaluators. We have received an acceptance from one of the evaluators. We hope to complete the contracting process for the evaluator in the next quarter.

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The Family Coordinator has completed the groundwork for the P.L.E.A.S.E. Council (Peer Leadership, Empathy, Advocacy, and Support for Everyone). Over 60 peers in Martin, St. Lucie, Indian River, and Okeechobee counties will be invited to the introductory meeting. We hope this group will open opportunities for peers to work together toward shared goals of professional development, certification and training availability, coaching sessions, community involvement, and support for the advancement of the value of lived experience that recovery peers bring to their practice of mentoring and advocating for others. We believe this will also be a way to recruit additional peers from the community and encourage non-certified peers to seek certification. The invitations will be sent to peers in the first week of October, with the first virtual meeting to be held before the end of the month.

Development began in mid-September 2022 for the F.A.M.I.L.Y. Support Initiative (Family Advocacy and Mentorship Initiative for Leadership with Youth) is a plan for encouraging community involvement by and for families. Reaching out to families to support and foster the health and well-being of their children and family, building on their strengths while working together in their community to better serve their needs. Children’s System of Care providers, PLEASE Council members, and other community stakeholders will be able to refer families and their children to participate in the FAMILY Support Initiative. SOC team will continue to develop this project, to schedule the first meeting before the end of 2022.

Additional DCF SAMHSA meetings are listed below:

- July 18, 2022, ROQI/SEFBHN monthly meeting to discuss Project CRAVE Care.
- July 19, 2022, Monthly SAMHSA meeting
- August 10, 2022, CMHI office Hours
- September 26, 2022, SAMHSA meeting.

**SEFBHN SOC team’s outreach activities for Quarter 1:**

During this quarter Project Coordinator (PC), Family Coordinator (FC), spoke to 121 individuals in the community about Project CRAVE Care.

- July 7, 2022, C19 CIT executive committee meeting - PC
- July 28, 2022, Lincoln Park Advisory Committee - PC
- August 1, 2022, presented SOC and de-escalation skills with law enforcement at Circuit 19 CIT training for school resource officers - PC
- August 6, 2022, Legacy Behavioral Health Open House in Indiantown – FC and PC
- August 6, 2022, City of Indiantown’s Back to School resource fair – FC and PC
- August 8, 2022, Sexual Assault Assistance Program of the Treasure Coast - FC
- August 8, 2022, Florida Department of Health -FC
- August 8, 2022, New Horizon of the Treasure Coast – FC
- August 19, 2022, Holy Cross Church Indiantown - FC
- August 25, 2022, Lincoln Park Advisory Committee - PC
- August 26, 2022, EASE Alumni meeting – PC and FC
- September 16, 2022, Daphney Pierre NAMI Inclusion and Diversity Coordinator – FC
- September 16, 2022, Pastor Delores Williams Kingdom Church of God – FC
- September 16, 2022, House of Hope - FC
- September 16, 2022, Goodwill Industries Martin County – FC

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- September 16, 2022, Goodwill Industries St Lucie County – FC
- September 16, 2022, Grace Way Village - FC
- September 22, 2022, Lincoln Park Advisory Committee - PC
- September 22, 2022, Supervisor System Meeting C19 – PC
- September 30, 2022, Combined Baker Act Taskforce Martin County - PC

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. Offerings for this quarter:

- July 7-8, 2022, E.A.S.E In person training/coaching for direct care staff, supervisors, and community stakeholders.

EASE training and leadership trainings calls for year 2 of the grant have been scheduled by EASE presenters and SEFBHN staff.

- October 2022 four virtual trainings every Friday (7,14,21,28) 8:30 AM-1:30 PM
- December 16, 2022, leadership call 10 AM -12 PM
- January 10 -11, 2023, in person sessions 8:30 AM- 4:30 PM training location TBD
- February 15, 2023, leadership call 1 PM-3 PM
- March 29-30, 2023, in person sessions 8:30 AM- 4:30 PM training location TBD
- May 2023, four virtual training every Thursday (4,11,18,25) 8:30 AM-1:30 PM

Project Coordinator and Family Coordinator attended the first meeting of the EASE Alumni group on August 26, 2022. This group had several graduates of EASE training who met to discuss strengths and ways to improve the EASE training. The group was led by Dr. Julie Radlauer and the group decided to meet in the future. Some goals will be to promote EASE training in the community, and to participate in community activities to promote increased utilization of behavioral health services and to decrease health care disparities for the BIPOC population.

To help build up the system of care, SEFBHN Project (PC) and Family Coordinator (FC) attended the following trainings during this 1st Quarter:

- July 12, 19, 20, 25, 29/2022, National Certified Peer Specialist CEUs training – IFS (Internal Family Systems) Approach to Trauma -FC
- July 27, 2022, FC attended NTTAC Family Exchange Peer Networking for Family Leaders - FC
- August 11, 2022, NTTAC Words Matter training – PC
- August 23, 2022, Inner Truth Project Men’s Role in Reducing Gender Violence - PC
- August 25, 2022, NTTAC Family Exchange Peer Networking for Family Leaders - FC
- August 29-30, 2022, Mental Health Academy Suicide Prevention training - FC
- August 31- September 2, 2022, Florida Children and Families Summit 2022 SEFBHN - SOC grant staff
- September 7, 2022, Maternal Mental Health Leadership Alliance Suicide and Overdoses – PC
- September 8, 2022, AMA Stigma Reduction training – PC
- September 21-22, 2022, Guardians for a New Future 4 Kids 2022 summit -PC FC
- September 28, 2022, NTTAC Family Exchange Peer Networking for Family Leaders - FC



- September 28, 2022, Florida Alcohol and Drug Abuse Association Expanding Natural Support Systems to Address Behavioral Health Needs - PC
- September 29, 2022, SAMHSA NOMs 2023 training - PC

## (b) Prevention

The following is the summary of Prevention activities and updates for the 1<sup>st</sup> Quarter:

- The Network Prevention Manager continues oversight of prevention contracts and amendments, risk assessments and agency validations. During this 1<sup>st</sup> quarter, the Network Prevention Manager continued work on FY 22/23 contract renewals for Palm Beach County Substance Abuse Coalition and The Public Defender’s Office, 19th Judicial Circuit and The Parent Academy, a new agency contracted to provide Prevention services in Martin County.
- SEFBHN Prevention Team meetings continue via Virtual Microsoft Teams formats, between the ME and all network prevention funded agencies and coalitions.
  - o July – September 2022 meeting discussions centered around:
    - Beginning of FY 22/23 Contract Required Reports
    - The PBPS transition from Version 2 to Version 3
    - Finalizing data in the PBPS to prepare for the new Version 3
    - Trainings and the New Enhancements of the data collection processes of the Performance Based Prevention System Version 3 (PBPSv3).
    - Collection of Prevention data during months of July and August 2022, while Collaborative Planning Group (CPG) migrate data from PBPS Version 2 to Version 3.
    - Delay of completion of Needs Assessments and Community Action Plans due to lack of YRBSS and FYSAS results.
    - Other sources/ resources to acquire data for Needs Assessments and Community Action Plans.
- During this 1<sup>st</sup> Quarter of FY 22/23, Prevention Activities continued to be offered via Hybrid in person/ online formats. Prevention Classroom Sessions continued this Fiscal Year to be offered in person partnerships with Classroom teachers having the option to utilize virtual formats. The Virtual option continued to be offered to County schools and communities at large.
- Principals in all 5 ME Counties continued 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 1<sup>st</sup> quarter, SEFBHN Prevention Providers continued 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 continue to be 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 with the option to engage program in an online format are offered to 8th, 9th, and 11th grade teachers/ students in partnering schools with whom HCF have agreements for FY 22/23.
    - 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” and “Botvin LifeSkills Training” school-based programs are continued in selected grades in all Elementary, Middle and High School students in St. Lucie County.
  - o Substance Abuse Council of Indian River (SACIRC):
    - “Botvin LifeSkills Training”, “Erika’s Lighthouse” and “Ever-Fi” school-based programs are offered and implemented this FY 22/23 in all Indian River County Elementary Schools
    - “Teen Intervene” Evidenced Based Program (EBP), will be offered to selected/referred Indicated students.
    - Communities That Care was initiated August 2022 with the Orientation Meeting and Key Leader Training. Quarterly Community meetings and follow up trainings will continue throughout FY 22/23.
  - o Tykes & Teens:
    - “Botvin LifeSkills Training” school-based programs continues in Martin County Elementary Schools to 4th and 5th grade students. Positive Action EBP is offered to select youth in the County’s Suspension Prevention Program.
- SEFBHN County Coalitions continued their work providing environmental community and school substance use alternative activities, both in person and through online Virtual formats.
  - o PBCSAC continues Coalition Community meetings that encouraged community partner engagement. During this 1<sup>st</sup> quarter, they continue to address substance use disorder (SUD) Prevention, HIV Prevention, and Alcohol-free Alternative Youth Activities.
    - The Coalition has convened meetings for the Palm Beach County and Martin County Youth Summits which will be held during the 2<sup>nd</sup> quarter of FY 22/23.
    - Their Middle School After-School Drug Prevention program continues to meet both in-person and virtually, addressing the Youth Summit Preparation and topics such as Alcohol and Marijuana misuse, 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 to provide in-person and online meetings and opportunities for trainings of youth in the facilitation of Substance Use youth-led Prevention programming. The sessions led by PBCSAC Teen CIA, serve the community’s youth. Recruitment of new participants to replace 21/22 graduates continued throughout the 1<sup>st</sup> quarter.
  - o PBCSAC continues their work on Opioid Prevention initiatives recommended as result of the 2019 Community Conversations convened by PBCSAC
    - They continue to refer to and recommended Opioid Education and Support Group facilitated by Hanley Center Foundation. The Project C4OPE Program continued to be implemented in the 4 Palm Beach County quadrants.
    - PBCSAC added and now continues to convene 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 to offer a monthly implementation of a Coffee and Conversation parent-to-parent forum and the environmental strategy, “No One’s House”.
  - o SAFIR continues their youth training program with their new Coalition Youth leaders through CADCA’s training program.

- o Began work with the Communities That Care initiative in August 2022 with the Orientation Meeting and Key Leader Training. They will continue to participate in the quarterly Community meetings and follow up trainings throughout FY 22/23.
- o SAFIR has also added and now convenes a monthly session of Community Reinforcement And Family Training (CRAFT) for Friends and Family members of a loved one with an addiction.
- Roundtable of St. Lucie County – Substance Abuse Prevention Network Committee – Continues their work with schools, assisting in the facilitation of the implementation of “Kids at Hope” programming in St. Lucie County schools.
  - o Roundtable continues to report the completion of the “Kids at Hope” training by educators and other community sectors within the county, including first responders and members of the business and health communities.
  - o The Executive Director and staff of the Roundtable of St. Lucie County continues to assist in the completion of the county’s Behavioral Health Task Force Needs Assessment, Logic Model and Community Action Plan which will identify and focus to the Community Behavioral Health needs/ priorities.
  - o The Task Force is comprised of the St. Lucie County School Board, Children’s Services Council, Treatment Centers, DJJ, DOH, SEFBHN and other County Coalitions.
- 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 facilitators continue to convene group sessions for discussions of Life Skill matters covered in the TUF talk sessions.
  - o Arise Life Skills Program -- A structured program with facilitated sessions continues to convene to educate youth on ways to attain positive comprehensive Behavioral Health skills.
  - o Strengthening Families
    - This Program brings youth and their family members together to discuss various topics over a Family Dinner.
    - Parents are brought 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 on resources needed to address the opioid crisis in rural counties via the collaboration between stakeholders (law enforcement, hospitals, FQHC, treatment, schools). The Grant allows Hanley to facilitate those partnerships 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 continues to assess the full spectrum of programming available (Prevention, Treatment and Recovery) to Okeechobee residents.
    - They are currently in the process of completing gathering information from Prevention, System of Care, Mental Health Court services, Behavioral Health and Substance Abuse Treatment and Recovery service providers in Okeechobee and surrounding counties.
- The FADAA/ FBHA statewide prevention team monthly brings together DCF State Representatives, Managing Entity Prevention Coordinators and Agency and Coalition leaders.

- o Conversations continue 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.
- The Network Prevention Manager continues this Fiscal Year to serve 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 have continued into this Fiscal Year, which allows Community partners to safely come together each month to address goals and work for FY 22/23. Collaborating partners include state agency representatives, county, school, and community leaders.

### (c) Care Coordination

The Care Coordination team continued, during the 1st quarter, to create opportunities for cross-system collaboration and communication between SEFBHN, community stakeholders, and the Network Service Providers (NSP). Five Network Service Providers (New Horizons of the Treasure Coast, Boys Town of South Florida, South County Mental Health Center, JFK Medical Center, and Drug Abuse Foundation) maintain full time, Children and Adult Care Coordinators. Care Coordinators are responsible for implementing internal care coordination processes and collaborating with community stakeholders for the purposes of developing a recovery-oriented system of care.

JFK Added 1 care coordinator to their team, Ms. Sherry Moody. She is in a vital role at JFK North Campus to provide adult and adolescent care coordination within the crisis stabilization unit and link to services within the community through a warm handoff.

#### **Success Story for SEFBHN Care Coordination**

##### Children’s Care Coordination

An example of a success story being presented in this 1<sup>st</sup> Quarter is by Boys Town children’s Care Coordination. Youth, a 14-year-old female was referred to Care Coordination by her guardian/grandmother. The youth had one prior stay in SIPP and one stay at a therapeutic wilderness facility for females immediately following her stay in Sandy Pines. The youth is being raised by her grandmother as her father committed suicide a few years prior and the mother lives out of state and is very uninvolved. The youth blames herself for her father's death and has become very depressed at times. Youth's grandmother discharged her from the therapeutic wilderness retreat prior to the clinical staff recommending discharge; since the youth was discharged ahead of time, she did not have any discharge plans. The youth was quickly linked with Children's Care Coordination and a referral for CAT Team was submitted the same day. The youth and her grandmother completed the intake appointment with CAT Team within 14 days and remained engaged with services. The youth was previously receiving psychiatric services from a provider that did not accept her insurance and the grandmother was having to pay significant amounts out of pocket. Grandmother was excited to learn that she would no longer need to pay hundreds of dollars each month out of pocket for medication management services for youth. Despite her shy nature, the youth built a good rapport with her therapist and case manager quickly and was looking forward to beginning services with CAT Team.

##### Adult Care Coordination

In August a High Utilizer was referred to Care Coordination at New Horizons of the Treasure Coast as a direct Care Coordination individual from South County Mental Health CC team. The individual was pending placement at an ALF however, her SSI did not cover the costs associated with the placement and she was also denied Long-Term Medicaid services. The New Horizon’s Care Coordination team assisted in finding alternative placement via group home setting in the Treasure Coast area for residential housing. The individual successfully integrated into her new home and began learning how to build healthy relationships. The HU was educated on better insurance options for benefit coverages and was linked to the insurance provider for ongoing case mgt as a warm handoff. The individual was linked to PSR, in which learning includes exercising Basic living skills, there was linkage to transportation services to get the client to and from important appointments. Individual was linked to outpatient MH services to include Medication mgt, Injections and therapy services where the client reached stabilization. The individual was able to avoid readmissions since linkage to Care Coordination. The individual came into services at risk of homelessness, struggling with linkage to outpatient services to remain with a provider to prescribe medications/injectable. The individual now has working insight on conditions, condition management and continues to build informal and formal relationships to aid in stabilization in the community setting.

***Neonatal Abstinence Syndrome (NAS) or Substance Exposed Newborn (SEN) Care Coordination***

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. During the first quarter, the NAS/SEN Care Coordination team at Drug Abuse Foundation (DAF) received 14 referrals from various referral sources. 5 of the 14 mothers successfully graduated from the program and have been linked to on-going services, 6 of the mothers continue to receive inpatient treatment through the Mommy and Me Program. Funding was added to Rebel Recovery Florida’s contract to hire a Peer Care Coordinator to work exclusively with the NAS/SEN program.

Additionally, the Drug Abuse Foundation Care Coordination team reported that a SEN/NAS consumer, who entered treatment prior to giving birth, successfully discharged from Care Coordination services after obtaining stable independent housing, developing life skills, engaging in behavioral therapy, and obtaining all necessary items for her child. The Care Coordination Team successfully linked the consumer to ongoing therapy and follow up pediatric appointments.

***Civil State Mental Health Treatment Facility Diversions***

The number of petitions has decreased across the five counties for in network receiving facilities was 2 and there were 8 individuals from out of network receiving facilities that had petitions for SFSH (South Florida State Hospital). The Care Coordinators continue to work with in and out of network receiving facilities on developing diversion plans when clinically it is determined that an individual is appropriate for a lower level of care. The SRT is still being used for High Utilizers that need longer stabilization, but a lower level of care than a SMHTF, and a petition for a SMHTF is not completed.

### *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 1st Quarter, SEFBHN approved 92 transitional vouchers – 51 for substance use and 41 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 1*

#### Recurring Activities Continued in Quarter 1 - FY 22-23

- SEFBHN staff have been receiving an influx of community calls reaching out for services for themselves and loved ones. SEFBHN staff gather as much collateral information as possible and schedules a staffing or discuss during bi-weekly meetings to make the referrals to the Care Coordinators.
- SEFBHN is committed to improving accountability in managing substance abuse and mental health funding and managing systems of care; SEFBHN has expanded Program Innovations to include a dedicated care coordinator, Dominique Patterson who joined the team in the 1st Quarter.
- 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.
- 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.
  - SEFBHN has implemented collaborative partnerships with community based and intermediary organizations to help our providers develop additional skills for effectiveness which increase/improve understanding of the core competencies necessary to do Care Coordination work. In addition to expanding referral bases for ongoing therapeutic care I.e (Craft 101 platform with Susan Foley from Palm Beach County Behavioral Health Coalition & Palm Beach Atlantic University Health & Wellness)
- The SEFBHN, Network Integrity team Care Coordinator continues to meet weekly with the substance use, network service provider (NSP) care coordination teams to provide technical assistance regarding care coordination standards and best practices, and data sharing processes. The Network Integrity Care Coordinator recently reviewed several features within the Coordination of Care Module with the two teams to improve data reporting processes.

#### New Activities for Quarter 1 - FY 22-23

- In the 1st quarter, the Program Innovations team Care Coordinator led biweekly training and provided technical assistance to the JFK Care Coordinator to provide a seamless onboarding experience. Technical assistance has included an introduction to both the COC Module, Carisk system and cross training awareness of JFK systems used to track potential/identified High Utilizers receiving acute care. The SEFBHN Care Coordinator has dedicated ample time to ensuring that the new CC is trained, and fully understands the scope of work of care coordination. Collaboration between JFK administration and the Program Innovation Care Coordinator has allowed for resource sharing and consistent usage of respite care via Mandala to assist High utilizers pending long term placement.
- In September’s monthly Care Coordination meeting there was focus on Suicide Prevention as September is Suicide Prevention Month. This collaborative care coordination meeting provided time to discuss a role play scenario with an individual at risk of suicide. The CCs were provided with limited information on the individual at risk and had to build rapport and ask pertinent questions to assist the individual with creating an evidence-based safety plan. The CCs went through with the individual and completed a Stanley Brown safety plan. The Care Coordination Children and Adult teams also connected and worked together as a strategy working with transitional age youth.
- The SEFBHN Care Coordinator is also providing biweekly technical assistance to the two other Care Coordination teams, where a formalized agenda is utilized to help maximum the effectiveness and time of the meetings.

#### (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 support 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

- During this 1<sup>st</sup> Quarter, New Horizons of the Treasure Coast received 557 MRT calls, and South County Mental Health Center received 383 calls, for a total of 940 calls.
- For both teams combined, 540 calls required an acute response with an average response time of 36 minutes.
- The average diversion rate from crisis and inpatient admissions for both MRTs was 91%.
  - New Horizon of the Treasure Coast’s diversion rate was 87%.
  - South County Mental Health Center’s diversion rate was 94%.

#### (e) Housing Activities

##### Recurring Activities Continued in Quarter 1 - FY 22-23

- In August, SEFBHN’s Network Housing Specialist resigned to pursue another career. Her last day was on August 19, 2022. The Director of Network Integrity has assigned the housing contracts to a Network

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Integrity Manager and will be working closely with them, while looking to fill the vacant position. to the Housing Specialist's responsibilities regarding the COSSAP contract. SEFBHN and it assigned Network Integrity Manager will continuing to work on engaging new FARR certified Recovery Houses to be a part of COSSAP. Currently, there are 8 approved Recovery Residences, plus all Oxford Houses.

- The SEFBHN Director of Network Integrity, and Network Housing Specialist, attended Continuum of Care (CoC) meetings for Circuits 15 in July and August.
- The Director of Network Integrity and Network Housing Specialist attended and participated in the bi-monthly statewide Managing Entity Housing calls with DCF.
- The Director of Network Integrity is a member of the Executive Committee of the Homeless and Housing Alliance (HHA), Palm Beach County's CoC and participates in monthly virtual meetings.
- The Director of Network Integrity is the Chair of the Healthcare Pillar and is responsible for holding meetings. Meetings were held in July and September. The goal of the Healthcare Pillar is to create strategic partnerships and collaborations with the medical, behavior health, and homeless systems of care.
- 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 bi-weekly calls with the Florida Association of Managing Entities and all the other MEs to prepare for a workshop presentation in October at the Florida Supportive Housing Summit to be held in Tampa.

New Activities for Quarter 1 - FY 22-23

- **Village 2 ESG Rapid Rehousing-** A individual successfully transitioned from Village 2 Rapid Rehousing Program. She moved from Village 2 into housing in the community on her own. She was unemployed at the time of move in and was able to find employment as CNA. She used the year to save money, pay off her car loan, and is now able to independently. She participated in mental health services through Housing Partnership agency as well. HMIS data are reviewed monthly, invoices and documentation were also reviewed. The only items that were addressed during their audit was rent reasonableness and to add a lease addendum. Both items were address and cleared this quarter. However, the official audit has not been provided by the county as of the first quarter.
- Housing Partnership attended all required HMIS subcommittee and HHA General Meetings.
- **Carrfour Supportive Housing (CSH)-** The Program Innovation Manager extensively met with Carrfour throughout the first quarter of the year. Even conducting a site visit to see facility and conducted a document review providing directions on how to assist a participant with zero income that is experiencing immigration issues. Technical assistance was provided for the following: Invoices, closed out inventory report, and other missing reports from FY 21/22. Along with incidentals and how it is intended to be used. The controller struggles with navigating Carisk and invoice submission and deleting. Additional, Technical assistance were provided on this and there has been some improvement. While previously struggling with staff shortage, the agency is finally fully staffed. There was one resident who needed higher level of care, the Program Director, Director of Clinical Services and Director of Special Projects came together as a team and devised a plan that ensured the participant was placed in a facility to best meet his needs.
- **Rebel Recovery Rapid Rehousing-** The Network Integrity Manager met with Rebel Recovery Florida throughout the first quarter to discuss participants, housing, and landlords. Rebel continues to work diligently to engage participants. Through their engagement they have been able to highlight a participant's success. One gentleman was pulled from the Annex in March and placed with one of the landlords that Rebel have been working with. Since his intake into the program, the consumer has opened a checking and a savings account and started new employment. He started attending a trade school as an apprentice with his employer and is working towards obtaining his electrician's license.



He is doing well, and Rebel Recovery have hopes that he will continue to do well. Rebel continues to put forth efforts in a search for new landlords so that more participants can be housed.

- Rebel recovery attended both HHA/HMIS meetings this month. HMIS data are reviewed monthly and was again reviewed, invoices and documentation were also reviewed.
- COSSAP- The Network Housing Specialist, the Network Integrity Manager and Rebel met throughout the month to discuss barriers, program, and participant updates, as well as to address concerns and provide technical assistance. The Network Housing Specialist and Rebel met with an approved recovery residence to help troubleshoot and resolve some issues. Some ROSC (Recovery Oriented System of Care) training has been offered and will be followed up in October. For the month of August, no meetings were attended as COSSAP Workgroup meeting, and HMIS (Homeless Management Information System) meeting were canceled.
- During the month of July, the Housing Specialist and Rebel met for program and participants updates. Discussions were held regarding difficulty in identifying affordable housing as well as recovery residences that are both FARR certified and accept all types of Medication Assisted Treatment. During August and September, the Network Integrity Manager attended the HMIS/CMIS New User training, and the monthly Workgroup with Palm Beach County and Rebel Recovery. During the 1<sup>st</sup> quarter, the Housing Specialist, and the Network Integrity Manager, provided technical assistance regarding invoicing, required reports and vouchers for the COSSAP grant.

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

- 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.
- **Medication Assisted and Peer Support program (MAPS) in Palm Beach County Jail:** During the 1<sup>st</sup> quarter, SEFBHN, PBSO, Rebel Recovery and The Recovery Research Network met to discuss program census, game night and staffing status. On September 1, 2022, SEFBHN, PBSO, Rebel Recovery and The Recovery Research Network met in person to discuss the overall progress of the MAPS program, as well as to review and update the Memorandum of Understanding with PBSO which needs to be renewed for October 1, 2022. Additionally, during the 1st quarter, 13

participants completed the MAPS program, 11 males and 2 females. Rebel Recovery shared the following success story:

“The consumer-initiated peer services with Rebel Recovery following his admission to the Palm Beach County Sheriff’s Office MAPS Substance Use Treatment Program. Prior to his arrest, he was unstably housed, unemployed, and had a prior history of detox and treatment. He did not complete the program. Peer services halted once he transferred to another facility. However, the consumer immediately requested to return to MAPS and reinitiated services in 2021 following his return to the program’s host facility in Belle Glade, FL.

The man who went on to complete the program was not the same person who began with us in 2020. During his time, Rebel’s team provided information on multiple recovery pathways, including Medication-Assisted Recovery. He shared that the stigma of medications had kept him from maintaining them for any substantial period beyond detox. He worked with his peer specialist to create recovery and wellness plans to prepare for his eventual release. With his fellow participants, he was able to connect in a way that allowed others to get to know him. He was soon selected to be a peer leader for a month of the program, and he learned how to better use his experience to support others by working closely with the peer team.

During his transition as a returning citizen, his peer provided a warm handoff to Rebel’s Care Coordination team. The consumer linked to a community peer navigator and, together, they focused on the consumer’s self-determined goals including reconnection with his loved ones and for him to become a father. Through COSSAP funding, Rebel was able to provide the financial support necessary for him to secure housing and obtain the documents required to find employment. Through his continued peer support, the consumer became more involved within the Palm Beach County community. He attended events and activities planned by Rebel and would also hang out in the Rebel Recovery Community Center and talk to others.

Since his release, the consumer has achieved stable housing, stable employment, and is no longer on food stamps. In addition to achieving self-sufficiency, he was able to save enough money to reinstate his license and purchase a vehicle to improve his employment. Overcoming self-stigma for having justice-involvement history and following a medication-assisted recovery path have been two significant hurdles. Maintaining a stable income and housing has improved his sense of worth. He has also successfully reconnected with the mother of his child!

The consumer success has come from his effort and dedication bolstered by the recovery supportive services that honor his right to self-determination and navigation to accessible, community-based resources. Of the goals he has achieved, the consumer feels the most joy to be a father and visit his child regularly.”

#### New Activities for Quarter 1 - FY 22-23

- In the 1<sup>st</sup> Quarter, SEFBHN’s Director of Network Integrity continued to work with Wellpaths legal department to finalize a contract for the use of Sublocade in PBSO MAPS program as well as St. Lucie County in the future. SEFBHN, Wellpath, Indivior and PBSO met a few times to discuss issues regarding pricing. It has been confirmed the Wellpath has a signed contract with Indivior for discounted pricing at PBSO, so hopefully this will move the contract in the 2<sup>nd</sup> quarter.
- In the 4<sup>th</sup> quarter, the Director of Network Integrity finalized the agreement for a discounted rate of 15% for Sublocade with Indivior. Two providers, New Horizons of the Treasure Coast (NHTC) and The

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Recovery Research Network Foundation (TRRNF) have both started providing Sublocade to their clients with great success. In the first quarter, NHTC administered 42 shots and TRRNF administered 9 shots of Sublocade.

- In the 1<sup>st</sup> quarter, the Director of Network Integrity coordinated bi-weekly meetings with St. Lucie Sheriff's office, Wellpath, Rite Life and Public Defenders Office Circuit 19<sup>th</sup> (PDA19) to establish a Medication Assisted Treatment program in St. Lucie Jail. At one of the September meetings, TRRNF and Rebel Recovery joined the call to provide input on process, logistics and types of services provided in the MAPS program at PBSO and to answer questions from St. Lucie Sheriffs, Wellpath, Rite Life Services, PD19 and Pinnacle Wellness Group. SEFBHN also met separately with the Public Defenders Office C19 to discuss their participation and our desire to combine the MAT option with the Journey Forward program, the current SUD program in the jail. We are hoping to start this program in the 2<sup>nd</sup> quarter.
- During the 1<sup>st</sup> quarter, a total of 2 individuals were served in the Hospital Bridge Program, additionally, 2 individuals were linked to treatment.

*(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 were no concerns regarding adverse fiscal impacts for the last quarter of FY 22-23; 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:

- **Drug Abuse Foundation of the Palm Beaches-** A Tier 2 validation was conducted between February 4, 2022, and March 31, 2022. The Contract Validation Review Report (CVRR) was sent out on April 8, 2022. There were 8 findings requiring 5 corrective actions and 3 Performance Improvement Plans. Corrective actions include 1) removal of 20 case management services events from the Portal that had no documentation. 2) removal of 18 assessment service events from the Portal that had no documentation. 3) Review all assessments and case management services listed under Education Level not Compatible with Service in the Data Quality Analysis section of the Portal. 4) Review and revise the Care Coordination Policy and Procedures to incorporate the utilization of the CoC Module as required by contract. 5) Provider needs to ensure that every Care Coordinator has access to the CoC Module. The Provider was also required to complete the following PIPs: 1) review and revise policies and procedures for quality assurance, data entry and proper documentation of covered services to include all requirements of Chapter 65E-14.02. 2) Provider needs to identify steps by which it will ensure the provision and adequate monitoring of Care Coordination services, according to contract requirements. 3) Provider will ensure utilization of the CoC Module by Care Coordination staff

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and monitoring of data entry into the CoC Module, according to contract requirements. SEFBHN has been providing technical assistance for completion of corrective action plans and PIPs. SEFBHN provided consistent TA surrounding the identified areas. DAF provided the completed PIP to SEFBHN with all items completed as of 7.15.22. As of this quarter DAF's PIP has been officially completed and closed.

- **New Horizons of the Treasure Coast, Inc.** – The Provider has submitted Performance Improvement Plans relating to the mobile response team, FACT, and data submission, which are currently under review by various SEFBHN subject matter experts. The plans will be implemented upon approval from SEBHN staff.
- **Mandala Healing Center** – The administrative portion of this validation is resolved/closed. We have not yet received their final Memorandum of Understanding with a Federally Qualified Health Center however the delay is on the side of the FQHC and Mandala has shown appropriate progress in keeping the process moving along.
- **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 for the Mobile Response Team remained open for the quarter as they continued to be completed. PIPs that were being completed for this quarter pertained to 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. Technical assistance has been provided to ensure successful completion.
- **Tykes and Teens** – Last quarter corrective actions were identified for missing reports, financial eligibility policies, duplicative staff Ids, and a collaborative waitlist policy. Technical assistance was provided to ensure completion of PIPS. The financial eligibility policy was submitted, and all PIPS were closed this quarter.
- **Henderson Behavioral Health (LTF10)-** Henderson Behavioral Health, Inc. for LTF10 received a Tier 2 and a Tier 3 validation in the first quarter. A report was sent that included 2 corrective actions for Henderson Behavioral Health, Inc. as they needed to complete and upload all missing Performance Outcome Measures (POMs) and discharges. The corrective actions were completed last quarter. They also received 2 performance improvement (PIP) findings for Submission of data and uploading missing records in the Carisk Portal. This is a repeat finding. The PIP was closed on July 12, 2022.
- **Brighter Family Center, Inc.** – SEFBHN completed a validation of Brighter Family Center, Inc on April 07, 2022. Corrective action plans were requested to address the following concerns: 1) Submittal of Missing Reports that include Local Match Calculation Form (with Annual Match Plan), Memorandum of Understanding with a Federally Qualified Health Center, Revised Sliding Fee Scale; and the subcontracts between Brighter Family Center, Inc. and Legacy Behavioral Health Center, Inc. and Multilingual Psychotherapy Center, Inc.; 2) Revision of Wait List Policy and Procedures for Multilingual Psychotherapy Centers, Inc. to identify details about the utilization (including data entry) and monitoring of the collaborative wait list in the Carisk portal.

Performance improvement plans were requested to address the following concerns: 1) Identification of action steps to ensure the timely submission of required reports and deliverables; 2) Identification of action steps to complete the number of satisfaction surveys required per fiscal year; 3) Identification of action steps for appropriate and timely submission of incident reports to the Department of Children and Families’ IRAS System; 4) Identification of action steps to ensure monitoring of compliance with quality and fidelity to LOCUS/CALOCUS model; 5) Identification of action steps to implement the collaborative wait list; 6) 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. These PIPs are due May 19, 2022. TA Assistance was provided by the Family Systems Manager on 5/11/2022, 5/13/2022, 6/13/2022, 6/20/2022, and 6/30/2022. An additional template was generated by the Family Systems Manager to assist with successful completion of the PIP templates on 6/15/2022. Corrective action items are still actively being processed with the subcontracts being completed. PIPs were submitted and subsequently finalized on 8/16/2022 with an estimated completion date of 11/10/2022.

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.

*(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	69.64
	Percent of adults with serious mental illness who are competitively employed	24%	45.00%
	Percent of adults with severe and persistent mental illnesses who live in stable housing environment	90%	93.00%
	Percent of adults in forensic involvement who live in stable housing environment	67%	93.00%
	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%	13.00%
	Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge	15%	-53.00%
	Percent of adults who successfully complete substance abuse treatment services	51%	65.00%

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	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge	94%	94.00%
Children's Mental Health	Percent of school days seriously emotionally disturbed (SED) children attended	86%	92.00%
	Percent of children with emotional disturbances (ED) who improve their level of functioning	64%	100.00%
	Percent of children with serious emotional disturbances (SED) who improve their level of	65%	100.00%
	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%	100.00%
	Percent of children at risk of emotional disturbance (ED) who live in a stable housing environment	96%	100.00%
Children's Substance Abuse	Percent of children who successfully complete substance abuse treatment services	48%	81.00%
	Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to	20%	-94.00%
	Percent of children with substance abuse who live in a stable housing environment at the time of discharge	93%	96.00%

SEFBHN is currently passing all of the performance measures. Guidance Document 24 is still in version 12 and needs to be updated for version 14 data reporting. These measures need to be updated correctly and published to ensure all Managed Entities are being measured the same.

*Service Category Person Served*

Program	Service Category	Quarter Unduplicated Served	Year To Date Unduplicated Served
Adult Mental Health	Residential Care	138	138
Adult Mental Health	Outpatient Care	3640	3640
Adult Mental Health	Crisis Care	1121	1121
Adult Mental Health	Peer Support Services	322	322
Adult Substance Abuse	Residential Care	306	306
Adult Substance Abuse	Outpatient Care	2347	2347
Adult Substance Abuse	Detoxification	385	385
Adult Substance Abuse	Women Specific Services	68	68
Adult Substance Abuse	Injecting Drug Users	590	590
Adult Substance Abuse	Peer Support Services	552	552
Children Mental Health	Residential Care	4	4
Children Mental Health	Outpatient Care	1013	1013
Children Mental Health	Crisis Care	148	148
Children Substance Abuse	Residential Care	45	45
Children Substance Abuse	Outpatient Care	650	650
Children Substance Abuse	Detoxification	0	0

(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 50 families have been served within the first quarter of this fiscal year by both FIT Teams. Through the first quarter, the percentage of families served who have successfully completed treatment with FIT Team services is 70% (7 successful discharges out of a total 10 discharges to date). This percentage only reflects CRC’s data since HBH has not had any discharges within this quarter. CRC and HBH each received additional funding for a 2<sup>nd</sup> FIT team for FY22/23. The providers are still trying to fill seven new positions and they have expressed difficulty in finding qualified individuals. They are actively interviewing and hoping their teams will be filled soon. SEFBHN will continue to monitor the staffing progress.

CRC managed to exceed their targets on the outcome measures for stable housing and stable employment for all families served who successfully completed treatment during the first quarter of Fiscal Year 22/23. As stated above, HBH had no discharges in the 1<sup>st</sup> quarter, therefore, there are no outcome measures.

Provider	Episodes With Stable Housing	Total Number of Episodes	Percentage
Counseling and Recovery Center	7	7	100.00%
Henderson Behavioral Health - Palm Beach			
Total	7	7	100.00%

Provider	Episodes With Stable Employment	Total Number of Episodes	Percentage
Counseling and Recovery Center	7	7	100.00%
Henderson Behavioral Health - Palm Beach			
Total	7	7	100.00%

*(2) Return-on-Investment Reporting*

The following is a summary of ROI Reporting for the 1<sup>st</sup> quarter:

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- Specific Appropriation 368 funds the Transitional Housing program operated by New Horizons of the Treasure Coast. This program provides housing for individuals stepping down from the State Mental Health Treatment Facilities (SMHTF). 17 persons were served in the 1st Quarter. The savings to the state was \$146,800.34 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 1st Quarter, the center served 1742 individuals. The center can provide lower cost services using physician trainees. As a result, the cost avoidance to the state this quarter was \$198,344.12 had the services been rendered by psychiatrists only.
- During the 1st Quarter, the walk-in center has served 640 unduplicated individuals. As a result, the cost avoidance to the state this quarter was \$734,497.92.

### (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 1<sup>st</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. The

#### Triennial Needs Assessment Activities in Quarter 1

- Analysis of all data was completed in May 2022.
- A draft report was generated in May 2022 and reviewed by SEFBHN.
- The final report was submitted to DCF in July 2022.
- The completed and formatted Triennial Needs Assessment will also be submitted to DCF on October 1<sup>st</sup>, 2022.

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

The following is a summary of House Bill 945 related activities for the 1st quarter:

- SEFBHN continues to provide an update to DCF re: activities related to HB945.
- SEFBHN has held off on additional Steering Committee meetings until a plan forward could be solidified.
- SEFBHN was able to expand Community Action Treatment (CAT) Teams in C15 and C19 this quarter.



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- C15- Chrysalis has a full 2<sup>nd</sup> team with half of the team focusing on an Early Childhood – CAT expansion (using evidence-based practice, Parent Child Interaction Therapy) and the other half of the team focusing on the original CAT population.
- C19 – has added five new team members to support additional service in rural areas as well as to help reduce waitlists previously identified.
- SEFBHN was able to add funding for additional positions to both Mobile Response Teams in C15 and C19.
  - C15 – South County Mental Health Center has 11 new positions added to their team. They are still in process of hiring.
  - C19- New Horizons of the Treasure Coast has 10 new positions added to their team. They are still in process of hiring.
  - Common to both is a new position known as a Family System Navigation Coordinator to work across Family Systems and better collaborate and integrate efforts between MRT and those systems.
- SEFBHN has been able to add a newly funded evidence-based practice (Multisystemic therapy-MST) within a team model to the region.
  - C15- Henderson Behavioral Health has begun filling positions this quarter.
  - C19- Drug Abuse Treatment Association began filling positions this quarter.
  - Both providers anticipate staff to be trained in MST in November/December, so they can start accepting referrals by Child Welfare in January 2023.
- SEFBHN continues to advocate for additional legislation to support a coordinated system of care for children.
  - Ann Berner, CEO represents Managing Entities on the Statewide Behavioral Health Commission making recommendations in support of these efforts.