



BH Service Delivery to Children in Foster Care

August 7, 2017

Proprietary and Confidential



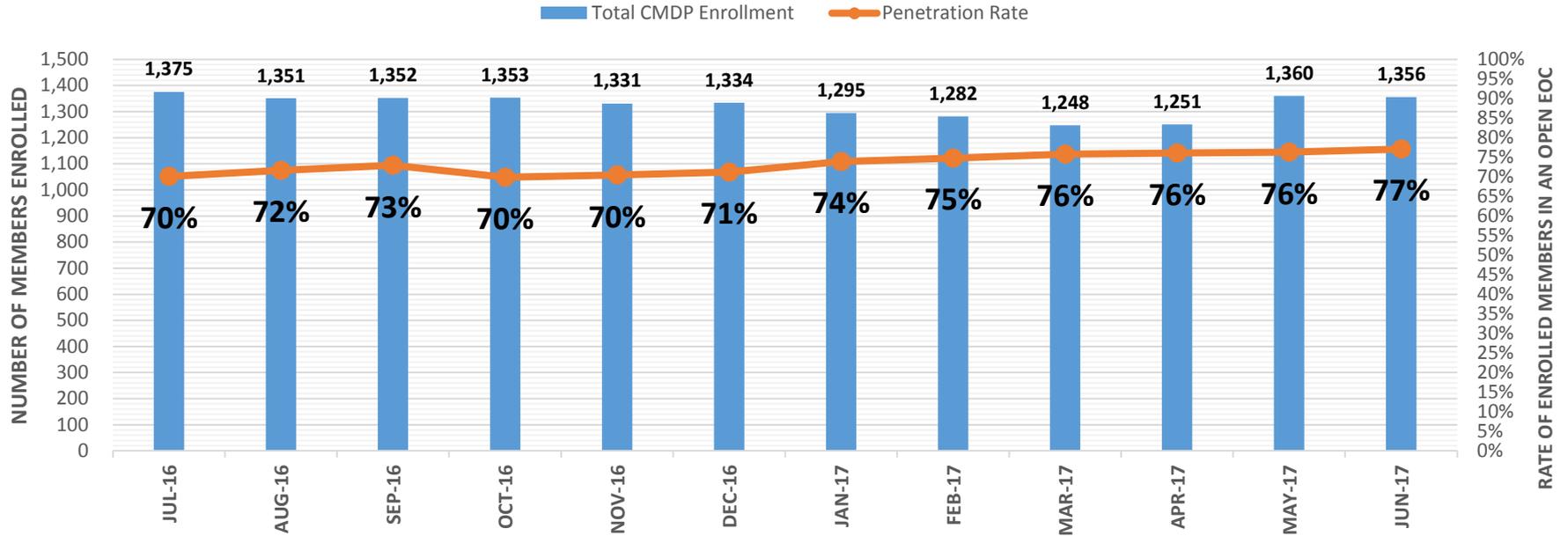
SUMMARY OF MEASURES

Quarterly trend Data for 4/1/2016-3/30/2017

- Penetration Rate
- Top 5 Utilized Services by Units
- Crisis Services Utilization-2 hour response (performance vs contract requirement)
- Rapid Reponse-72 hour response (performance vs contract requirement)
- HCTC Utilization- # of foster children, average length of stay
- Respite Utilization
- Reunification Services
- Network Development
- Stakeholder Engagement
- Training

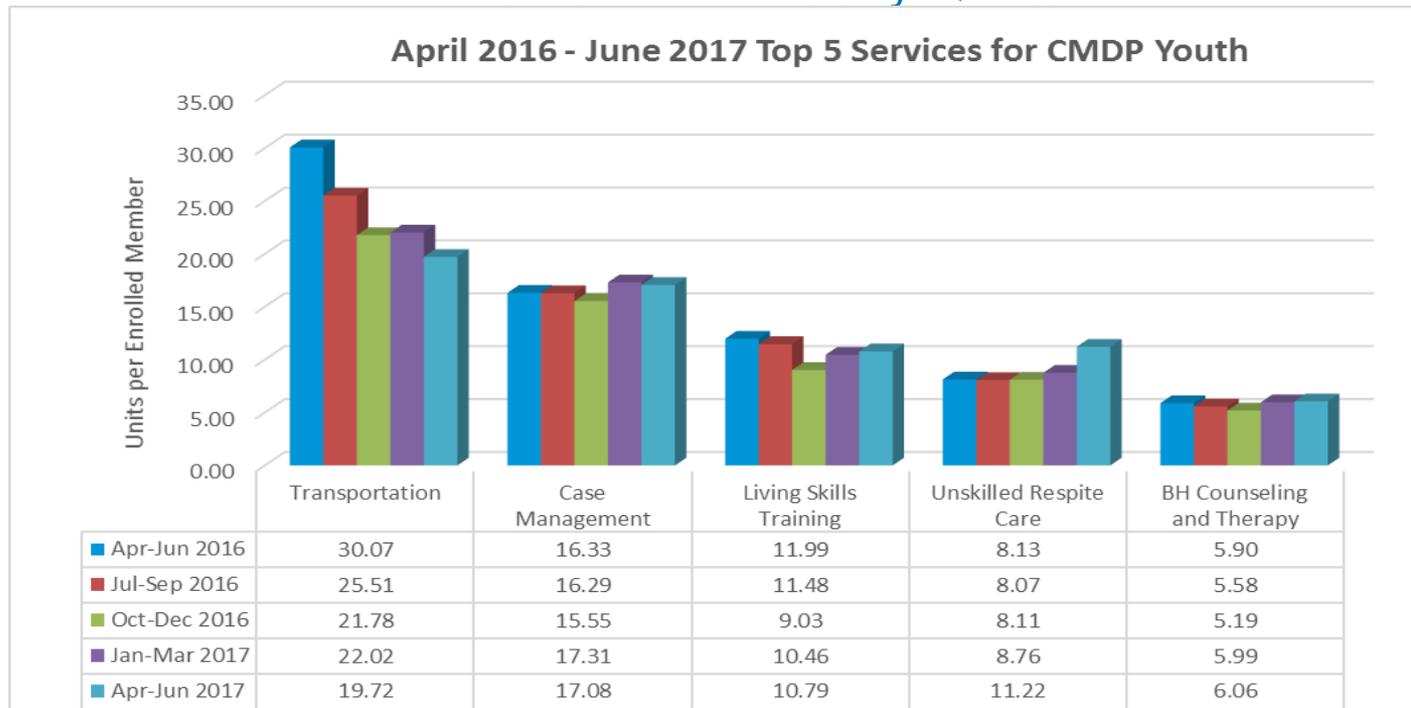
MONTHLY HCIC CMDP PENETRATION RATE

July 2016- June 2017



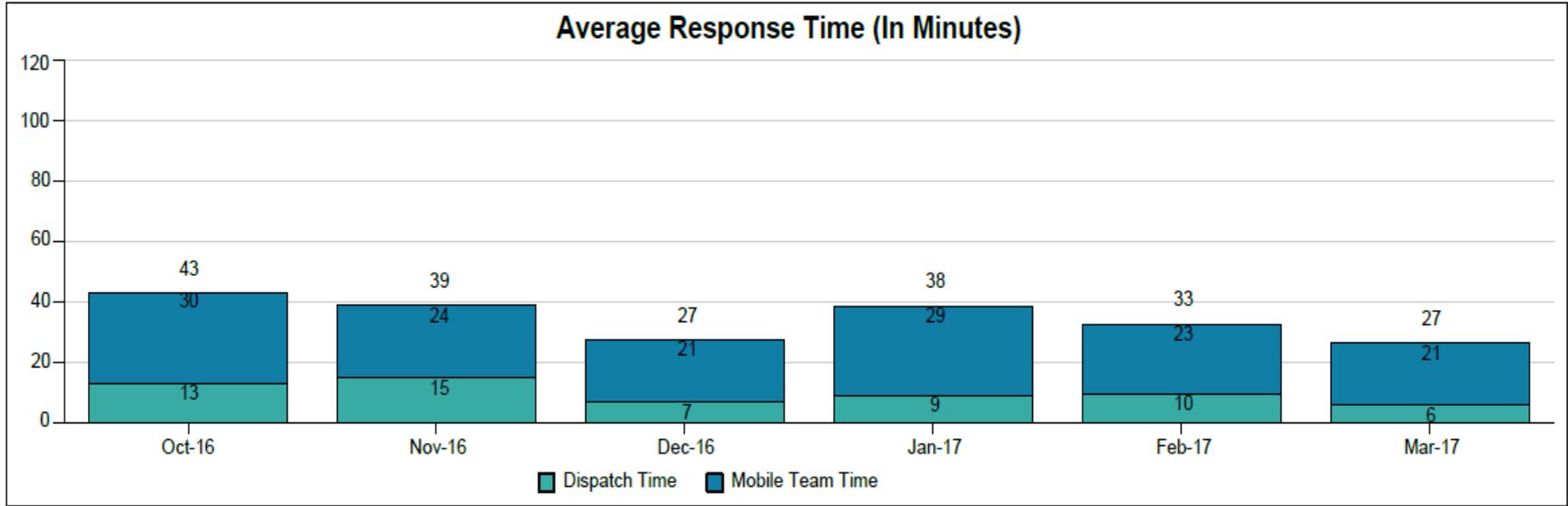
TOP 5 SERVICES- UNITS PER CMDP CHILD SERVED

CMDP Utilization By Quarter



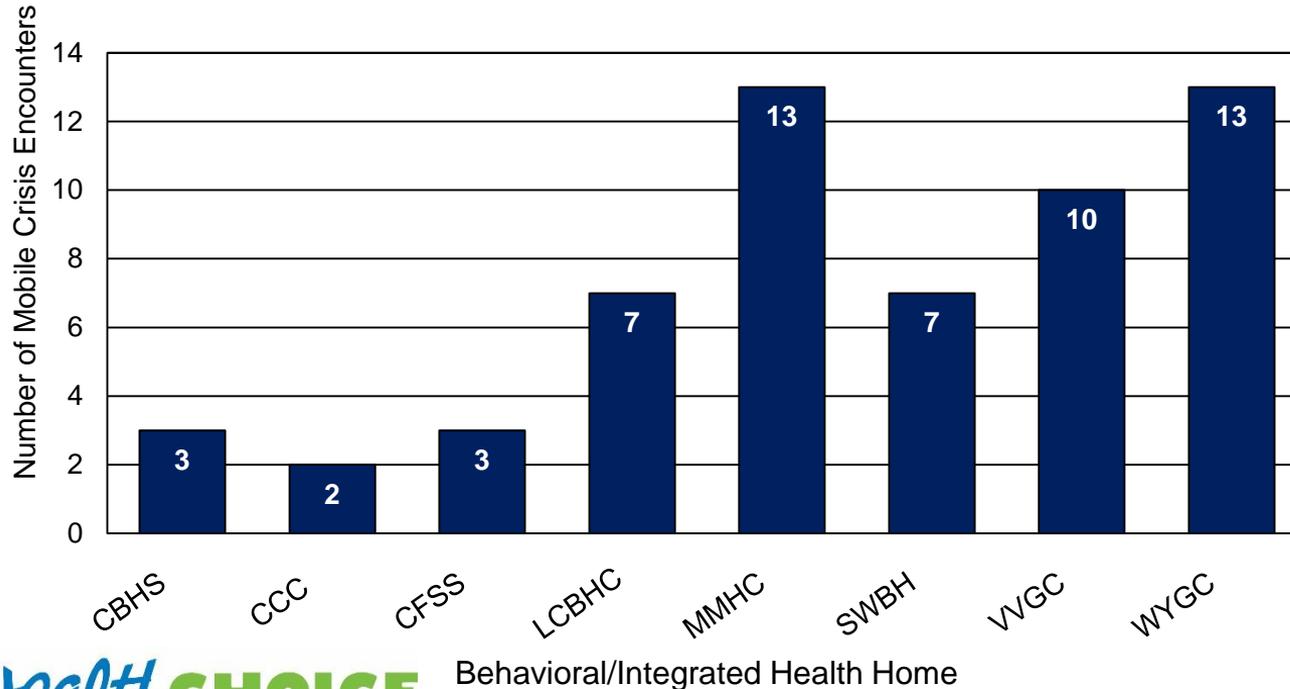
CRISIS SERVICES

Average Mobile Crisis Team Response Times- CMDP October 2016- March 2017



CRISIS SERVICES

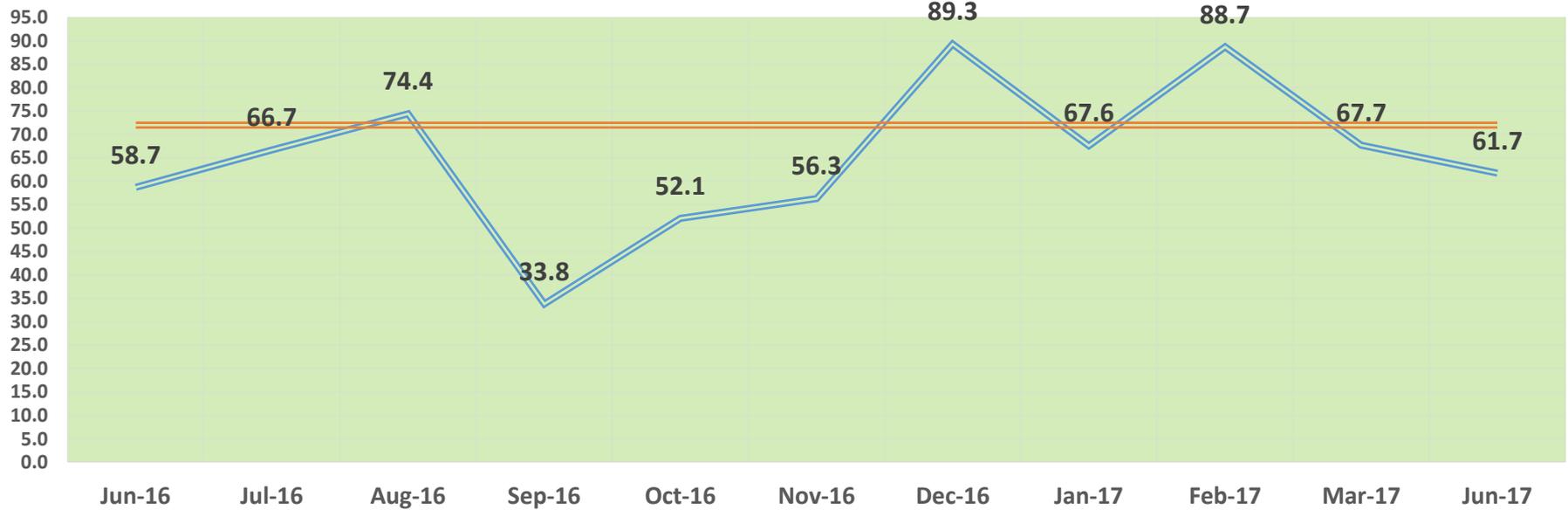
Mobile Crisis Services for CMDP Members by Health Home
October 2016- March 2017



4.8 Mobile
Crisis
Services for
CMDP
children per
month

HCIC AVERAGE RAPID RESPONSE TIME (HOURS)

Average RRT Standard (72 Hrs)



HCTC UTILIZATION AND LENGTH OF STAY APRIL 2016- MARCH 2017

CMDP Members		
Quarter	Unique CMDP/HCTC Members	HCTC ALOS
FY2016Q3	59	161
FY2016Q4	59	186
FY2017Q1	60	237
FY2017Q2	63	198
<i>Total</i>	<i>99</i>	<i>192</i>

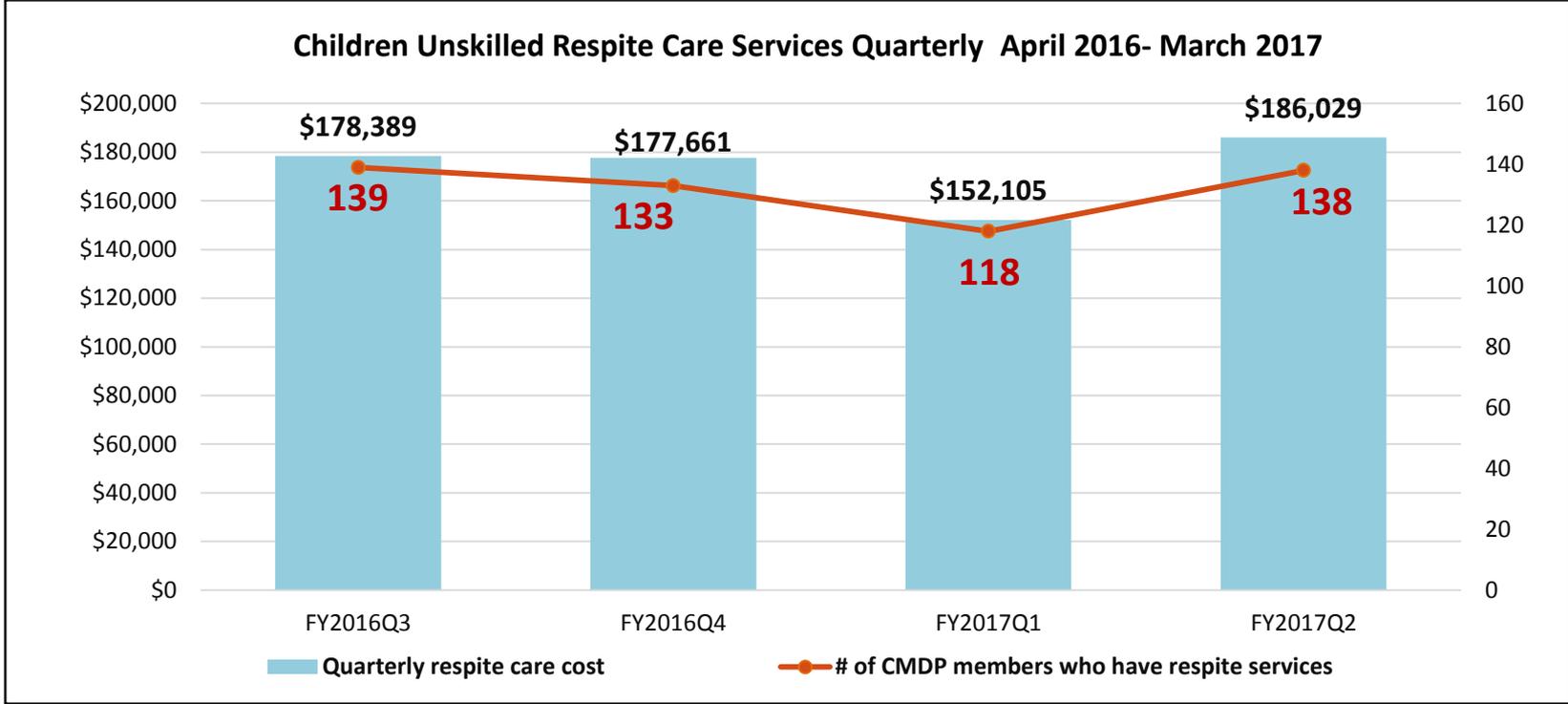
Note:

- Time frame is 04/01/2016 to 03/31/2017, e.g., FY2016Q3 is the time period from 04/01/2016 to 06/30/2016;
- Unique CMDP/HCTC Members is the number of CMDP members who have used HCTC service in the quarter;
- HCTC ALOS = (Total LOS) / (# of Discharged) in the quarter, and excluded the days before 10/01/2015.

Average Length of Stay for CMDP child in HCTC is about 6 ½ months.

About 72% of HCIC children in HCTC are CMDP.

RESPITE UTILIZATION



Note: Time frame is 04/01/2016 to 03/31/2017, e.g., FY2016Q3 is from 04/01/2016 to 06/30/2016.

REUNIFICATION SERVICES – HCIC PARENT SUPPORT NOW PROGRAM

- Immediate support, education and assistance to families navigating various systems and DCS involvement after an emergency custodial removal.
- PSN assists in the creation of a collaborative relationship with:
 - Family
 - Department of Child Safety
 - County Court of Jurisdiction
 - Family Run Organization that assists the family
 - HCIC contracted health homes
- Based on the SAMHSA Peer and Family Support Model –
and Arizona Vision and Principles
- Value-Based Purchasing Incentive program



GOALS- increase the number of successful reunifications of the child with their family of origin & decrease amount of time child is in DCS custody

REUNIFICATION SERVICES-PARENT SUPPORT NOW

- **Mohave County – Kingman and Bullhead City - MIKID**
 - Serves families with children, birth to 17 yo.
 - **201 children (sibling groups included) referrals** from February 2015 to August 2017
 - The average length out-of-home was **4.9 months** for families reunified.
 - MIKID has earned a six month reunification **Value Based Service Incentive** for 10 families
- **Yavapai County – Family Involvement Center**
 - Initiated in January 2017
 - Serving families with children, birth to 12 yo
 - **68 referrals to date**
- **Coconino County Planning Underway**
 - Preliminary planning meetings with Coconino Court and Behavioral Health Homes underway

REUNIFICATION SERVICES- SENSE PROGRAM

Substance Exposed Newborn Safe Environment Program

- Collaboration between HCIC, DCS, Arizona Families First Provider (Catholic Charities), Yavapai Regional Medical Center and HCIC Behavioral Health Homes (BHH) to streamline access to services for families with substance exposed newborns.
- The BHH model supports full wraparound services for the family, including in-home nursing services
 - **Nurses from the BHHs are fully trained in the model by DCS**
- Began March 1, 2017
 - 4 Referrals



REUNIFICATION SERVICES - FAMILY FINDING & NATURAL CONNECTIONS

- **Family Finding Training -- October 2017**
 - **Kevin Campbell**, an internationally known youth permanency expert, founder of the Center for Family Finding and Youth Connectedness and developer of the Family Finding model
 - Engagement strategies for Providers, DCS and Juvenile Court, foster and kinship families to access permanency
 - HCIC and Coconino Coalition for Children and Youth are partnering
- **Project Connections**
 - Not a defined service but a **philosophy of practice** that is individualized to each child developed by HCIC Provider Child and Family Support Services
 - Specialized clinical program to maintain stability to prevent disruptions and actively promote the power of permanency for youth
 - Creates and cultivates long-term supportive relationships within family and community
 - Utilizes staff with specialized knowledge and skills and relies on developmental partnerships
 - Ongoing development for replication



NETWORK DEVELOPMENT

- **HCTC/Therapeutic Foster Care Added:**

- Christian Family Care
- Human Services Consultants
- HRT

- **Respite Added:**

- Kingman through MIKID (day respite)
- Gila County through Caring Connections
- Prescott Valley through Family Involvement Center (soon)
- Flagstaff through Az Children's Association
- Maricopa County through Four Directions (overnight respite)
- Additional overnight respite resources are provided through BHRF, TFC and BH Respite Homes

- **BHRFs Added:**

- NEW Mohave Mental Health 10-bed adolescent BHRF in Kingman (opened July 2017)
- Specialized BHRF for youth with ASD/ID in Tucson through Intermountain Centers for Human Development (Angel House).



STAKEHOLDER ENGAGEMENT

- Ongoing training for **72 hour Rapid Response assessments** in and out of area provided to Health Homes
- Training on **Jacob's Law ARS** for Health Homes: Ensuring foster families understand their rights
- **HCIC Member Advisory Council for Foster Families** (5 FF, 3 HH) meets quarterly
- **Quarterly Foster and Adoption Network** meetings on the BH system in HCIC's GSA and how to access services
- Collaboration with **Coconino Coalition for Children and Youth** to improve outcomes for individuals in foster care and for foster care parents to include community engagement, development of foster mentorship programs and bridge child abuse prevention with foster care outcomes.

STAKEHOLDER ENGAGEMENT

- **Monthly process improvement meetings with CMDP** to collaborate on resolving issues at a system level and case staffing bi-weekly
- **Monthly High Cost/High Needs** Collaboration with CMDP for children meeting HC/HN criteria
- **Quarterly meetings with local DCS and HCTC** providers to address questions/concerns
- **Consultation** with Health Homes and CMDP for children who have been in treatment for extended periods of time. Assisting on working toward permanency for child.
- **Behavioral Health Homes meet with DCS** field representatives on going and as needed. HCIC attends when requested or when necessary.

TRAINING BY HCIC

- HCIC's Clinical Trainer, is a Masters Level Clinician, traveling to rural areas of our GSA to ensure ease of access for foster families and HCTC families.
- **Lunch and Learns** also available in the evenings and weekends. (15-20 foster families and HCTC parents attend)
 - Ease of access for families to register for upcoming trainings
HCIC website Children Services tab and Trainings
HCIC Website on HCIC Classes and Events Calendar
- **Trauma Informed Care Training Philosophy**

HCIC's trainings for clinical staff and foster families are developed and facilitated from a trauma-informed perspective based upon an understanding that many people have endured traumatic experiences (including historical trauma) and the provider and parent is responsible for having a working knowledge of trauma experiences and being sensitive to these experiences.

TRAININGS FOR HCTC, KINSHIP, FOSTER AND ADOPTIVE FAMILIES

- **HCTC, Foster Families, Kinship Families new and on-going trainings include:**
 - Welcoming a Child to Your Home: Strategies for Comfort and Consistency
 - Youth Mental Health First Aid
 - Attachment Based Family Therapy: Techniques for HCTC Providers and Families
 - Building Attachment through Expressive Art
 - Sexualized Behavior
 - Elopement Behavior
 - Transitions – Out of home placement, returning to family of origin, transition age
 - Co-Parenting as a mission of HCTC
 - Grief and Loss Experiences in Fostering



TRAINING FOR BEHAVIORAL HEALTH HOMES

- **Child and Family Team Series** July 2017
 - Understanding the CFT: Engagement, Facilitation and Conflict Management
 - Crisis and Safety Planning, Transitions, Birth to Five, DDD and Out of Home trainings to follow.
- **Leadership Series** June 2017
 - Cultivating Excellence: How to Hire and Build a Team
 - Effective Communication and Conflict Management
 - Understanding and Navigating Network Systems
- Sand Tray and Advanced Sand Tray Therapy Techniques for Trauma
- Grief and Loss Training: Effective interventions for grief and loss
- CBT 101: Theory, Interventions and Documentation
- Relational Psychotherapy
- DSM-V: Child and Adolescent Disorders Training
- Ethical Principles of Practice in Arizona by Mental Health Professionals
- Family Therapy: Theory and Interventions
- Assessment, Interventions and Techniques for Sexualized Behavior
- Compassion Fatigue: Ethics and Implications for Productivity

COMMITTEE PRESENTATIONS: ACCESS TO BH SERVICES FOR FOSTER FAMILIES

- **Northern Arizona Children's Council:**
 - Jacob's Law presentation
 - AZ Children's Services
 - Young Adult Presentation on experience in DCS Custody
 - Overview of the DCS/CMDP System
 - Foster Family Forum updates
- **HCIC Provider Adult & Child Clinical Directors Committee:**
 - Foster Family Forum
 - Jacob's Law
 - Adult Child Committee : Jacob's Law and 72 hr RR Assessment Flow
- HCIC Leadership: Jacob's Law and ACOM 449
- Provider and HH CEO Meeting: Jacob's Law
- Best for Babies Committee
- Foster Adoption Network Committee
- HCIC Member Advisory Council for Foster Families

THANK YOU

Questions?

