



CCR State/County Implementation Team Meeting
 March 23, 2016
Meeting Minutes

Purpose: Monthly meeting of the State/County Implementation Team for the Continuum of Care Reform

| AGENDA ITEM | NOTES/DISCUSSION | ACTION ITEMS |
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| <p>Welcome and Introductions (2:00-2:15) Theresa Thurmond, CCR Manager</p> | <p>This meeting was a conference call.</p> <p>Documents made available on the webinar included:</p> <ul style="list-style-type: none"> • Agenda • Meeting minutes from February 11, 2016 • Draft Implementation Guide • Calendar of meeting scheduled through 2016 | |
| <p>Feedback Implementation Guide (2:15-2:45) Sara Rogers, CCR Acting Branch Chief</p> | <p>This Implementation Guide is intended to be helpful to the multi-agency team in building their capacity for implementation. Some counties may already have an internal process that this mirrors (System of Care, Katie A). It is not a required tool.</p> <p>Feedback thus far:</p> <ul style="list-style-type: none"> • Good start as foundation, but build on it to achieve the objectives of AB 403 and CCR. • The Implementation Guide consists of seven domains: <ol style="list-style-type: none"> 1. County Leadership-Multi-Agency Team Are the identified members of the team the right ones? Are the activities right? 2. Data Collection, Outcomes and Evaluations What is needed to effectively plan implementation? 3. Systems Capacity Development of culturally relevant services and overall capacity. 4. Cultural Relevance | |

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| | <p>5. Child and Family Team (CFT) Needs its own domain.</p> <p>6. Resource Family Recruitment and Retention Overlaps with systems capacity, but still needs its own domain.</p> <p>7. Needs and Services How to ensure that an individual child's need and services are being met. Do we have the system capacity to do that?</p> <p><u>Discussion</u> Where do Family and Youth participation and Engagement fit? -Consensus that it has its own domain.</p> <p>Where to incorporate judicial system (Judges)? -Add to Multi-Agency Team. District Attorney's, Public Defenders, Minors' Attorneys minimally advisors to the CFT.</p> <p>What about youth being transitioned to STRTP's and after care returning home? -Need to ensure that the multi-agency team coordinates to make sure there is an adequate supply of what's needed for children at all levels of care (System Capacity Domain?).</p> <p>The question above resulted in a discussion of the purpose of the multi-agency team. - Does it change how counties approach the work?</p> <p>-Counties have various organizational structures that need to be addressed in the guide. Several counties have begun to use the guide.</p> <p>-Can specificity be added regarding the kinds of specialty mental health services that are needed? Page 11 under Needs and Services has some.</p> | <p>CDSS to add this to the guide.</p> <p>Rosie McCool (CPOC) will ask for best practice examples of how Judges have been engaged.</p> <p>CDSS requested feedback from the State/County Implementation Team send to Rami.Chand@dss.ca.gov or Sara.Roger@dss.ca.gov.</p> <p>CDSS to highlight how counties are approaching this work and put it in a toolkit for county use.</p> <p>Make a distinction in the guide so that social workers, FFAs,</p> |
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| | | STRTPs, and resource families know how they can access these services. |
| <p>Planning Data to inform the Implementation Guide (2:45-3:15) Sara</p> | <p>Erika Braccialini, CCR Performance and Oversight Manager presented the statewide data profile document.</p> <p>CDSS began looking a data from an Implementation Guide perspective focusing on data relating to children and youth who can be evaluated for placement in family homes in specific categories.</p> <p>CDSS is preparing individual county profiles so would like to know if this way of breaking down is helpful. -It was noted that Safe Measures offers much of this type of data.</p> <p>CDSS providing this data is a strategy for understanding that there is a structured way to approach AB 403 implementation in do-able increments (offers data to help short and long-term thinking and can be used to help multi-agency teams do their planning).</p> <p>CDSS believes RCL 5-9 placements will be the most affected by the changes. -What steps would county need to take to make sure that there are enough resource family homes for these youth?</p> <p>Bay Area Regional planning discussion led to suggestion that the placements themselves need to be informed of the impending changes. -CDSS should provide as much information as possible to the placements. -CDSS has been conducting Regional meetings with providers throughout the state. -What mental health services are being provided in RCL 5-9's since these are probably not being provide in the facility and may not change (or have to change) when the placement changes. -How would we find out that information? -Medi-Cal claims data by county would help counties know the demand level for mental health services.</p> | <p>CDSS to consider adding to the Implementation Guide: Counties work together collaboratively to release RFPs that serve the RCL 5-9 youth in family homes.</p> <p>Counties are waiting for CDSS policy decisions (certification, accreditation, etc.) and rates before they can effectively move forward.</p> |

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| | <p>-TFC and ITFC are big need for counties to have capacity for as soon as possible</p> <p>-Counties will need some help in engaging Behavioral Health as they implement their own FFA's.</p> <p>How will FFA's provide mental health services?</p> <p>-A proposal is being developed for STRTPs to have a direct contract for mental health services on site, with possibility of additional contracts for individual services.</p> <p>-FFA's would be different as some may not able to comply with Medi-Cal billing requirements.</p> <p>-The goal of CCR is that youth can obtain services where they are (vs. moving youth to obtain services) so would have direct contract with MH plan or provide evidence that they are able to make arrangements with local providers to meet the youth's needs.</p> | <p>CDSS working on helping counties create their own FFA's (in draft form).</p> <p>CWS, Probation, Mental Health and the FFA's should establish a documented process for ensuring that they are able to meet the needs of youth in their care.</p> |
| <p>County Review Process for the Program Statement</p> | <p>What would county expectations be in terms of a process?</p> <p>-County review is not a condition of licensure but county will have option of reviewing the program statement in advance of licensure.</p> <p>-Do the counties believe that a provider is able to provide the services in their county and is there a need for those services?</p> <p>How would CWS, Probation and Mental Health engage in such a process?</p> <p>-Counties that work on RFPs for FFAs can fold this into their process (but many counties do not contract with FFAs).</p> <p>-Important to have a Plan of Operation/Program Statement that is consistent; then county Mental Health, CWS, and Probation can review them.</p> <p>-Good to have one document that is used for CDSS and DHCS.</p> <p>-Bay Area used to have a process for review at the Regional level at the CWDA Regional Committee.</p> <p>-What about the existing providers?</p> <p>-Should this process wait until after the first year of implementation so that we can get through the current transition process?</p> | |

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| | <p>-Suggested a process where, when a provider submits a licensing application, the host county would receive a letter from CDSS that would ask them to evaluate the following two questions: 1. Does the provider have the capacity to provide the services that they say they will provide and 2. Is there a need for this provider? There should be a time frame for the review process.</p> <p>-Can the certification processes be combined? Need to clarify.</p> | |
| Updates | <p>Mental Health Workgroup Talked about throughout the call.</p> <p>Rates- CDSS/FCARB -Finalizing estimates methodology based on decisions that have been made about structure. -Presentations have been made, others need to come. -Webinars for rates overview will be announced to this group</p> <p>Sub-workgroup Crosswalk -Identified continued need for work on this.</p> | |
| Next Steps | <p>Next meeting:</p> <p>Thursday, April 21 3:00-5:00 PM County Behavior Health Directors Association(CBHDA) 2125 19th Street, 2nd Floor, Sacramento, CA 95818</p> | |