Integration with Child Welfare

The purpose of this document is to provide guidance for the planning and delivery of integrated services with Community Based Care Lead Agencies and other child welfare stakeholders. Coordinating efforts between these various contractors and their network of subcontractors is essential to ensuring there is access to comprehensive and cohesive publicly funded child welfare and behavioral health services. There is significant overlap between families served in both systems, and implementation of the following framework will improve continuity of care and positive outcomes.

Network Service Provider Responsibilities

Any Network Service Provider contracted for a designated Family Intervention Specialist position(s) shall participate in the development of a working agreement between Community Based Care Lead Agencies, and other child welfare stakeholders to address the needs of common individuals served and provide a framework for communication and resolution of problems. The initial Working Agreement must be approved by the Department Regional Office and reviewed annually. The Working Agreement must include:

- **a.** A plan for ongoing assessment of the current array of services available to the population served by Managing Entity and Community Base Care Lead Agency, identify community needs, and realign services and funding to address gaps within available resources.
- **b.** A referral and behavioral assessment process that addresses the needs of child welfare. This process must include:
 - A centralized referral route and point of contact,
 - A process to obtain required releases of information,
 - Information to be shared with the behavioral health providers at time of referral, and
 - Established timeframes for assessments to be shared with child welfare.
- **c.** A communication protocol to facilitate timely information sharing and concurrent planning between all parties involved in the family's care.
- **d.** Service delivery practices that ensure the coordination of care among child welfare, Network Service Providers and other stakeholders in the case.
- **e.** A plan to provide child welfare-specific behavioral health services for families in the child welfare system. Network Service Providers with a child welfare focus will complete assessment, outreach, engagement, integrate parenting interventions and maximize retention in treatment for families involved in the child welfare system.
- f. A plan to ensure continuity of care in the community following child welfare involvement.
- **g.** A process to share data, measure mutual outcomes and mechanisms to track referrals to services, entry to services, length of stay and completion outcomes for families.

Family Treatment Coordinator (FTC)

The purpose of this program is to:

- 1. Engage and retain child-welfare involved families in behavioral health treatment; and
- 2. Keep families together by preventing at-risk children from receiving an out-of-home placement.

Core Principles:

- Identify a clearly targeted population with child welfare involvement. To be effective, and to manage expectations, the contract must have a defined population.
- Family Treatment Coordinators will enter information into Florida Safe Families Network (FSFN).
- Family Treatment Coordinators will have the ability to make appropriate referrals for services that support and enhance recovery.
- Family Treatment Coordinators will have the skills and resources needed to motivate and encourage the entire family in ways that support their engagement and retention in treatment. Implementation of engagement strategies, flexibility to remove barriers, and the use of Recovery Peer Support are recommended.
- Family Treatment Coordinators will provide ancillary support to the Child Welfare professionals and behavioral health treatment providers to promote engagement and retention in treatment.
- Services are provided primarily in-home, and in the community, including joint response with child welfare professionals when appropriate.
- Family Treatment Coordinators will work with all relevant stakeholders to identify and resolve all systematic and programmatic barriers to client engagement and retention in treatment in a process of continuous quality improvement.

Network Service Providers will implement and administer services to assist child welfare professionals with behavioral health consultation, referral, and entry into services for eligible families in the child welfare system who present with behavioral health issues and shall:

- a. Consult with the child welfare professionals regarding behavioral health conditions of family members,
 - i. The consult will include elements that satisfy the requirements of Department CFOP 170-5, Chapter 11 and Chapter 12.
 - The consult will be documented in Florida Safe Families Network (FSFN) within 24 hours for Present Danger cases and within 72 hours for cases with Impending Danger,
- b. Assist in referrals to behavioral health providers,
- c. Provide priority access to services, and
- d. Engage child welfare-involved families in behavioral health treatment.
- e. Staff are co-located with child welfare professionals or dependency courts

Network Service Providers contracted for designated FIS positions are listed on and will follow the guidelines for implementation as outlined in the "LSF Health Systems Child Welfare Integration Manual" or the latest version thereof which is incorporated herein by reference.

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Network Service Providers contracted for a Behavioral Health Consultant (BHC) position must follow the guidelines for implementation as outlined in their specific Attachment.

Required Reports

FTC's are responsible for submitting the following reports to the managing entity in a timely and accurate manner:

- 1. <u>FTC Report</u>: Data points will be reported on a monthly basis in the format provided by the Managing Entity and submitted to the Network Manager and Clinical Department by the 8th of the month. The Template for this report is incorporated herein.
- 2. Ad Hoc and additional reporting may be required as determined necessary by LSF Health Systems or the Department of Children and Families.

The Integration with Child Welfare will be administered according to DCF Guidance 19, which can be found at following link using the applicable fiscal year: https://www.myflfamilies.com/services/samh/samh-providers/managing-entities