

Action Items from the BTKH Quarterly Meeting 07/8/2008 – 07/09/2009

1. Service Access and Coordination:

- Need a process to review non-custody kids OOS who might be able to return to in-state services, particularly in light of the new FCSA facility opening in August.
- Need a point person, process and formal communication with FCSA outlining the populations to develop capacity for.
- Need a policy/process/guidance on length of stay to ensure kids come home when they are clinically able, not when they complete a program.
- Need to follow up with the Providence level II diversion project to develop linkages with community diversion, mobile crisis, etc. Also, how to serve young kids needing sub-acute care.
- Still need to improve referral and access to parent navigation.
- DEED is willing to participate in RPTC site reviews. Jerry S. will work with Pam and Art to get approval for this.
- Need to engage with Northstar acute care to get them to work with us more constructively and towards our BTKH goals. Need to invite them to the BTKH meetings.
- Need to make sure that 504 plan or IEP is coordinated with BH Tx plan.
- Need to clarify that ISA can be used for kids with co-occurring disorders who may have a primary diagnosis of SA.
- OCS ABCD developmental screening project: data verify that there are not adequate services and there are gaps in service for children with a less than 50% delay. Need to lower the % delay that children experience and can access services for.

2. Workforce Development:

- Need to outline BTKH Training needs for Millie and Kathy.
- Need to develop mechanism to cover the cost of clinical supervision and figure out how to increase this in the system.
- Need to invite Robin Hobbs to the next meeting to explore how telemedicine is being used/might be expanded for training and supervision.
- Foster parents need tuition support to go to through children's residential services program to learn how to support their foster children.

3. Budget Issues:

- Is there enough money in workforce development focused on BTKH?
- Not enough money in the grant line for pilots and SED grant increases: these need to take into account not only rate increases but also that the SED grants have been left behind with COL and population increases.
- Do we need a separate item for transitional living grants? TA youth with an SED often need intensive case management to access appropriate case services and many do not qualify for Medicaid.

4. Business Practices work group:
 - Need rate increase for BH Medicaid services and need to make sure that it happens on a regular basis like for nursing homes, etc.
 - Need grant increase for COL and population increases.
 - Two trips were funded to go look at other States and how they are structured. What is the follow up from that?
 - Small group wants to meet with Chris Carson, Bill Hogan and Melissa to talk about rates, structure, administrative efficiencies.
5. Transitional Aged Youth Work Group:
 - Brita follow up on Natl Collab for WF development for youth – resource for our TA youth work group.
 - Brita follow up using the information from the TA work group on needs, gaps, issues and integrating it into the draft application for the policy academy.
 - Need follow up work to better integrate available services for kids.
6. Regulation changes:
 - Need an item to allow parents to get family therapy without a child present.
 - Need to fund services for child and family before child returns from OOS care.
 - Need to move forward on regulation recommendations from the ECCS grant.
7. Data elements and questions:
 - Can we track meth use as a factor for OOS referrals?
 - Can we define and track aggression more specifically so that we actually know what it means in our data? (group tackled this during meeting and provided some good feedback that now needs follow up).
 - Need to get UR information broken down by race.
 - Need data on how long an acute care episode lasts.
 - Need data on numbers of kids who are admitted and discharged from acute care, even if they do not become Medicaid recipients.
 - Need to come up with way to monitor success of in-state residential facilities at getting kids home to community setting.