Florida
Mental Health and Substance Abuse CBC Readiness Self-Assessment Tool
MENTAL HEALTH AND SUBSTANCE ABUSE
CBC READINESS SELF-ASSESSMENT TOOL

Instructions: Each page of this tool contains one element of the SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES SPECIAL CONSIDERATIONS TO ENSURE INTEGRATION WITH COMMUNITY- BASED CARE integration paper and guidance concerning what the district SAMH program Office should have achieved in ensuring the element is completed. There is space under each topic to describe the district SAMH efforts in completing each element. Be as complete in your answer as possible. If you need more than the space provided, please add more pages. If any element is not addressed, state why it has not been addressed and your plans to address that element in the future. For districts that have more than one CBC Lead Agency, please use a separate form for each lead agency.

Dates of Review: __________________________

Community Based Care Lead Agency: ____________________________

Counties Served: ____________________________

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Check One:

Start Up Period:  
Contract Negotiation Period:  
Fully Operational:  
1. Agreements have been developed that outline how formal and informal communications will occur between the CBC provider and the district SAMH program office.

Describe formal agreements that have been completed and identify areas that are in process of being developed or have yet to be addressed.
2. Agreements are in place to identify responsibilities of District Substance Abuse and Mental Health Program and the CBC in the implementation of CFOP 155-10, including the Single Point of Access and the Comprehensive Behavior Health Assessment.

Discuss how the Single Point of Access (SPOA) will be implemented in your district. What functions, as outlined in CFOP 155-10, will be done by lead agency staff and what will remain with SAMH staff or a contracted agency?

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<thead>
<tr>
<th>Function</th>
<th>Lead Agency</th>
<th>SAMH Staff</th>
<th>Other Contracted Agency</th>
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<tbody>
<tr>
<td>Referrals for the Comprehensive Behavioral Assessment</td>
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<td>Review and approval of the completed CBHA</td>
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<td>Entry of data in the Department’s CBHA data base</td>
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<td>Management reports concerning the CBHA</td>
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<td>Referral for behavioral health services</td>
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<td>Tracking behavioral health service initiation and quality of services</td>
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<td>Integration of the recommendations for services made in the child’s CBHA</td>
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<td>with the child’s case plan</td>
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<td>SIPP placements and continued stay reviews</td>
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<td>Other</td>
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Discussion:
3. A joint plan has been developed to determine how continuity will be maintained as children move within the system and return to families.

Describe what process has been developed to ensure that children and their families continue to receive appropriate behavioral health services when they move from one setting to another within the dependency system and when they return home to their family or achieve independence.
4. Agreements are in place that determines access to mental health case management.

Discuss the agreement between the lead agency and the SAMH program office for providing Medicaid targeted case management. What are the agreed upon referral points? Access times? Has this resulted in mental health provider contract changes? How will the services be coordinated?
5. Meetings have been held with CBC providers to prioritize mental health and substance abuse service needs, access timelines and identify critical services and supports needed during times of transition for children and their families.

Discuss the agreement developed with the CBC lead agency concerning how mental health and substance abuse service needs, access timelines and critical services and supports will continue to be provided to a child and their family during transition from the care of the lead agency and back into the permanent home of the child.
6. Meetings have been held with mental health and substance abuse child and adult providers to develop a response to CBC needs and identify those who have training and expertise necessary to provide specialty treatment services to children in the dependency system and their families.

Describe what steps the district has taken to ensure providers have staff who have the training and expertise necessary to provide specialty treatment services including, sexual & physical abuse treatment, domestic violence, infant and young children mental health issues, prevention and crisis intervention services, for children in the dependency system and their families?

Describe any system changes that have occurred as a result of these agreements.
7. ADM contract outcome measures have been reviewed with the CBC provider with a focus on services targeting dependent children and their families.

Describe any outcome measures changes that were made as a result of this review. Were additional measures included in contracts as a result of the review?
8. A contract has been negotiated with the CBC or mutually agreed upon agency of choice for Purchase of Treatment Service (100800) funds.

Identify agency with which the Purchase of Treatment Service (100800) funds are contracted. If the CBC Lead Agency is not the provider, what process is in place to access wraparound funds? If specific services have been contracted with these funds through Mental Health, please identify and discuss the process the district used to determine need and obtain CBC agreement.
9. Any waiting list information for behavioral health services has been provided to the CBC and discussions held concerning expansion of available services.

If the district has waiting lists for any services, has that information been shared with the CBC lead agency? What is the agreed upon schedule for providing ongoing updates on the waiting list information to the CBC lead agency? For children on the waiting list for residential services, what process is in place to ensure they have services and supports at the level necessary to maintain them in the community? Include any special agreements that have been developed to ensure support of the foster families where these children reside.

What steps have been taken to expand services to reduce the waiting list for community services?
10. Agreements have been reached regarding the co-location of Substance Abuse Family Intervention Specialist with child protection staff.

Describe how the Family Intervention Specialists (FIS) are/will be utilized by child protection staff? Describe how the FIS positions are funded and contracted for. Where are/will they be located?
11. CBC representation has been added to all utilization review processes including STFC, TGC, and SIPP.

Discuss how the CBC lead agency staff will be included as part of the review process for placing children in STFC, TGC, and SIPP placements and in continue stay reviews. What responsibilities have the CBC lead agency staff assumed responsibility for, what responsibilities will remain in the Child Welfare Program Office?
12. Agreements are in place concerning sharing of data between the Department and CBC Agencies.

Describe how data is/will be shared between the Department and the CBC lead agency. What issues remain to be resolved and what is the plan to resolve the problems identified.
13. *Training and materials have been provided for the CBC provider on crisis services*

Describe the training and resources that has been provided to the CBC provider and their staff on crisis services. Include information on agreements to provide ongoing training in this area for new employees.
14. A plan is in place that provides details of how and what information will be shared with mental health and substance abuse providers, as well as the courts.

Describe the information sharing protocol established between the CBC lead agency and the mental health, substance abuse providers. What agreements are in place to ensure the CBC lead agency has updated information from substance abuse and mental health (SAMH) providers to share with the courts?
15. Mental health multidisciplinary planning teams' practices and policies have been reviewed with the CBC to identify areas of needed improvement

What mental health multidisciplinary planning teams that are currently active in your district were discussed with the CBC Lead Agency?  
What is the purpose of the multidisciplinary teams discussed, what population do they serve and do they currently meet the needs of the children they serve?  
Which of these multidisciplinary teams' will the Lead Agency be a member of and what will be their role on the team?  
What improvements will be made in the districts multidisciplinary planning teams’ as a result of the review with the lead agency.
16. A joint training calendar, between the CBC providers and the SAMH program, has been completed.

Has a joint training calendar been developed between the lead agency and SAMH program. If yes, please attach. If not, what steps are being taken to accomplish this?