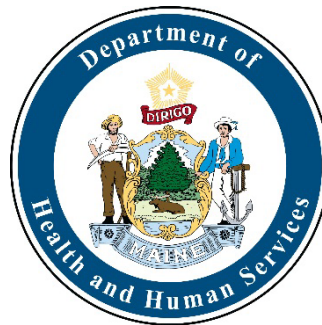
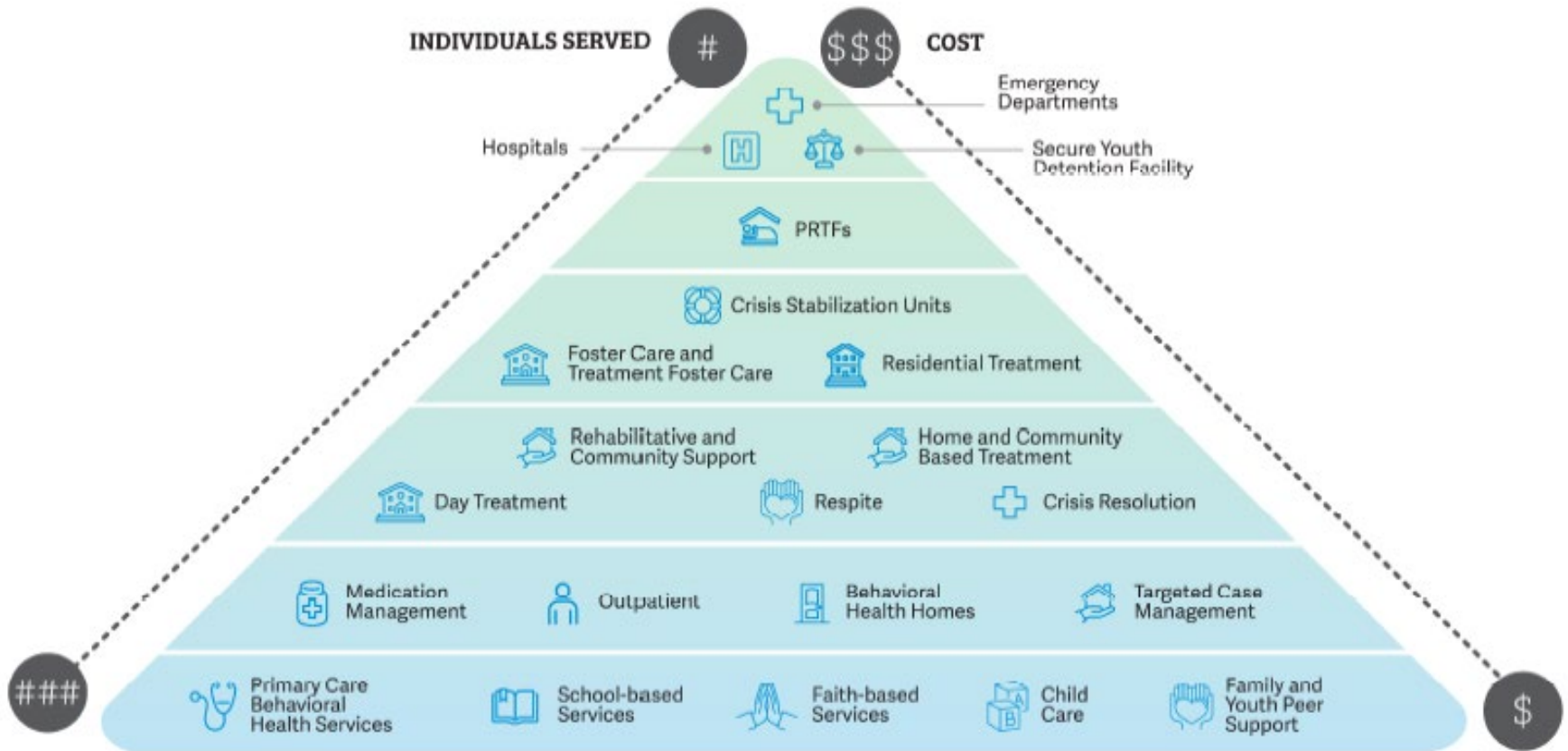


# Office of Child and Family Services Children's Behavioral Health Services (CBHS)

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November 2023



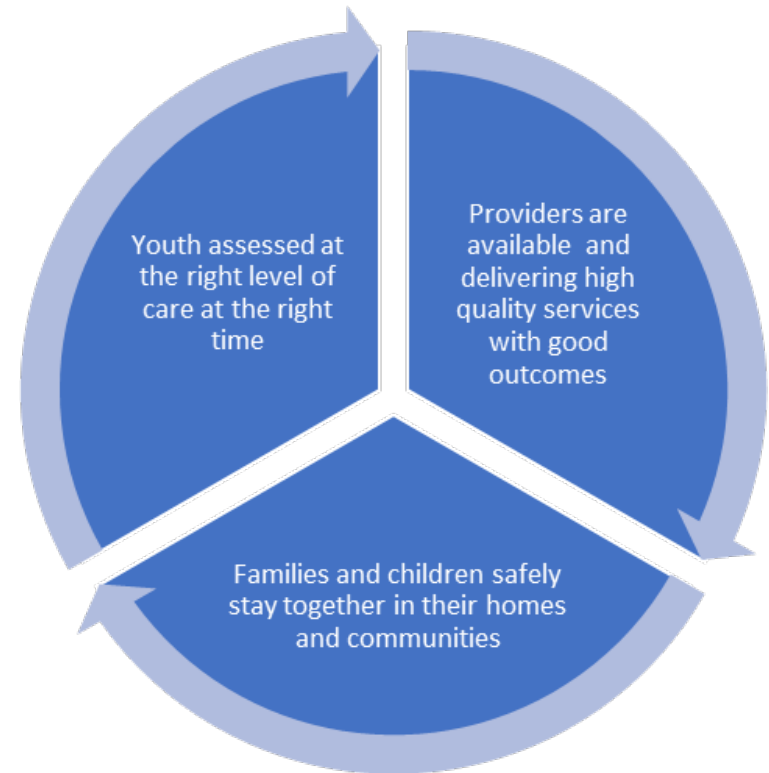
# CBHS Service Array



# 2023-2026 Strategic Priorities

Three foundational principles supporting our work over the next 4 years:

- Establish a single point of access for children's behavioral health services for youth.
- Eliminate wait times for youth seeking behavioral health services.
- Improve the quality and consistency of children's behavioral health services.



# CBHS Strategic Priorities 2023-2026

## Improve the **Accessibility** for Children's Behavioral Health Services

- Implement evidence-based screening tools and person-centered planning
- Implement improvements in the Behavioral Health Home and Targeted Case Management services to provide wrap around services and continuity of care
- Develop and implement a statewide, publicly available, behavioral health service locator tool
- Design and implement mobile crisis services
- Establish a statewide public education campaign regarding mental health and available care and resources

## Improve **Availability** of Children's Behavioral Health Services

- Develop and deploy recruitment campaigns for behavioral health professionals and reduce barriers to training
- Update the system for Therapeutic Foster Care, including the service model and funding
- Review and revise reimbursement methodology for children's behavioral health services
- Expand the variety of services available to ensure the appropriate services are available to meet the needs of children and families
- Implement High Fidelity Wrap Around Services (HFW) to address the needs of children involved in multiple systems
- Continue to pursue establishment of a Psychiatric Residential Treatment Facility (PRTF) as part of a full continuum of care

## Improve the **Quality** and **Consistency** of Children's Behavioral Health Services

- Establish a permanent system to provide oversight and quality assurance feedback to providers
- Implement and enforce licensing requirements for all providers
- Continue to furnish provider trainings in evidence-based treatment modalities
- Implement provider accountability measures to ensure consistent and safe treatment
- Ensure a comprehensive community-based approach for children with intellectual disability or autism spectrum disorder

# Bills Impacting CBHS

## LD 82 - An Act to Improve Access to Children's Behavioral Health Services

- Requires the Department to seek funding to continue the Pediatric and Behavioral Health Partnership Program and report back to the Health and Human Services Committee in January 2024 on funding sources and financial sustainability of the MPBHPP
- This program is currently housed within CDC but will be moving to OCFS and OCFS has applied for a renewal of the federal HRSA grant for this program
- OCFS received verbal notification in July of the federal grant award

## LD 155 - An Act Regarding Community-based Services for Youth Involved in the Juvenile Justice System

- Requires the Department to collaborate via a Children's Cabinet workgroup on promoting coordinated policies, finances, programs, and services for juvenile justice involved youth with an annual report on this work beginning in 2024

## LD 181 - Resolve, Requiring Progress Reports from the Department of Health and Human Services Regarding the Implementation of Secure Children's Psychiatric Residential Treatment Facility Services

- Requires continued efforts regarding updated policy and rates for PRTF services and a report back on progress in establishing rates and amended rules in January 2024
- Requires efforts to recruit a provider and report back on implementation of a PRTF in July 2024

# Bills Impacting CBHS (continued)

## **LD 231 - An Act to Support the Maine Pediatric and Behavioral Health Partnership**

- Department Bill
- Removes the requirement of a sliding fee scale for CBHS respite services

## **LD 1003 - Resolve, to Develop a So-called No Eject, No Reject Policy to Support Children Receiving Behavioral Health Services and Individuals with Intellectual Disabilities or Autism**

- Emergency Bill (work begins immediately)
- Create a stakeholder group to develop a proposal for a no eject/no reject policy that requires residential providers to receive written approval from the Department for termination of services (including executing a discharge plan or declining a referral when a bed is available)
- Report back to the Health and Human Services Committee in January 2024

# CBHS in the Supplemental (Part 2) Budget

**The CBHS initiatives proposed by OCFS/OMS and included in the Governor's budget proposal were all included in the final budget:**

- ✓ Hi-Fi Wraparound Services for children
- ✓ Established funding for public education regarding CBHS
- ✓ Funding for Multi-dimensional Family Therapy implementation while work is done to implement the service into MaineCare
- ✓ Additional funding for BHP training and certification
- ✓ Therapeutic foster care model/rate changes and implementation of TFC-Oregon model
- ✓ Establishment of an independent behavioral health level-of-care assessment process using a standardized instrument for youth seeking behavioral health services

# High Fidelity Wraparound Services

**High-Fidelity Wraparound (Hi-Fi Wrap)** is a team-based process and approach to care planning utilizing the collective action of a committed group of family, friends, community, professionals, and cross-system supports resulting in a plan of care that is the best fit between the family vision as story, team mission, strengths, culture, needs, and strategies.

## **Essential Components of Hi-Fi Wrap:**

- Intensive Care Coordination - Low Caseloads
- Wraparound Principles (family voice and choice, team based, natural supports, collaboration, community-based, culturally competent, individualized, strength based, persistence and outcome based)
- Driven by underlying needs
- Availability of Flex Funds
- Fidelity tools/measuring
- Utilizing natural supports

## **Goals of Hi-Fi Wrap:**

- Serve the youth and children with complex behavioral health needs.
- Help keep kids in their homes and communities utilizing their formal and informal supports
- Decrease out of home placements



# Hi-Fi Wraparound Implementation

- Leveraging federal funding, CBHS has been working with Innovations Institute/ National Wraparound Implementation Center (NWIC) to establish a Center Of Excellence (COE) awarded to Public Consulting Group through Request for Proposal (RFP).
  - The RFP Awardee is partnering with NWIC and CBHS in designing, implementing, and sustaining services and supports.
  - PCG will be the training, resource and fidelity hub for Hi-Fi Wraparound Implementation.
- Evidence-based Peer Support Models:
  - Youth Peer Support through certification and dissemination of Youth MOVE National's Peer Connect model.
  - Family Peer support utilizing the Innovations Institute's PEARLS model.
- Hi-Fi Wrap implementation targeting Penobscot County for initial rollout before moving toward statewide implementation.
- Hi-Fi Wraparound is being written into Mainecare policy within Behavioral Health Homes (BHH) as a higher level of care. The tentative roll out of policy for Summer 2024.

# Multi-dimensional Family Therapy

**Multi-dimensional Family Therapy (MDFT)** is home and community-based therapeutic modality designed to treat youth experiencing substance use and mental health concerns with a family-centered approach. MDFT incorporates System of Care principles, is culturally informed and validated, and uses individual, family, and family-only sessions to increase protective factors and decrease risk factors, including substance use.

- OCFS has been working with MDFT International to roll out a statewide MDFT training for 6 provider agencies.
- Each agency will be able to train 2 supervisors and 6 clinicians.
- OCFS will contract with each participating agency to continue to support each agency beyond initial training.
- Targeting January 2024 to begin training rollout.
- Sustainability - The Office of MaineCare Services is planning a rate determination in 2024.

# Therapeutic Foster Care

Funding establishes updates to the Therapeutic Foster Care program in three major ways:

- Supports updating the existing TFC model and reimbursement structure.
- Supports developing an intensive level of TFC utilizing an Evidence-based model, Treatment Foster Care-Oregon.
  - Designed for any youth identified with a high behavioral health - not just for youth in state custody.
  - Team approach to service supporting the Therapeutic Resource Family including a Team Lead, Family Therapist, Youth Therapist, Consultant/Trainer, Skills Coaches, and Parent Daily Report Caller.
  - Intended to align parenting strategies in the Therapeutic home and the youth's permanent caregiver to aid in successful transitions home.
- Includes MaineCare Rate Determination process to update existing TFC reimbursement rates and establishing a new rate for the evidence-based model.
  - Policy work aimed at updating the existing model and creating the new evidence-based model.

# Behavioral Health Level of Care Assessment

CBHS is working to develop a single assessment for youth seeking higher level community behavioral health needs. This single assessment:

- Is facilitated by a licensed Master's level clinician as an independent assessor
  - Uses a standardized assessment tool and process (LOCUS suite of assessments)
- Endorsed by the American Academy of Child & Adolescent Psychiatry
- Includes child and family voice in the assessment process
- Considers the youth's clinical needs, environmental needs, and family situation to match youth with the appropriate service appropriate to their level of care

Services included in the assessment:

- Children's Residential Care Facility Services (already in use)
- Home and Community-based Treatment
  - Multi-systemic Therapy
  - Functional Family Therapy
- Intensive Outpatient Programs
- Assertive Community Treatment
- High-Fidelity Wraparound
- Rehabilitative and Community Support Services for Children with Cognitive Impairments and Functional Limitations (Section 28)

# Pediatric Behavioral Health Partnership

## **Maine Pediatric Behavioral Health Partnership - [bhpartnersforme.org](http://bhpartnersforme.org)**

HRSA Grant funded activity:

- Providing support to pediatric practices, family medicine, and school-based health centers through an ACCESS line 1-833-672-471.
  - Psychiatric Consultation through our connected health partners at MaineHealth and Northern Light Acadia.
  - Education through ECHO Learning Sessions and webinars.
  - Support with resource connection.

Ownership of the program moved to OCFS September 30, 2023:

- Working on expansion of the program to further reach rural communities, schools, and emergency departments.
- Supporting process improvements to enhance user experience and data collection.
- Planning integrating SUD consultation and Developmental Pediatrics to the line.

Integrating OCFS staff as resources to support practices.

# System of Care Grant (SOC)

In 2020, OCFS received a four-year, \$8.5 million federal grant to improve behavioral health services available to youth with serious emotional disturbance (SED) in their homes and communities.

## **Progress/ Accomplishments:**

- HCT Referral Management review helped identify service gaps, potential evidence-based practices (EBPs), referral management practices
- System education
- Trauma Informed webinars/Trauma Informed Assessment implementation
- Supporting trainings on EBP models offered statewide (such as MATCH-ADTC)
- Statewide Family and Youth Peer Supports enhanced
- SOC principal implementation
- SOC steering committee
- Conducting quality assurance reviews and providing technical assistance to enrolled providers
- Established sustainability plan which creates QI/QA unit overseeing quality of services within the purview of CBHS

# Intercept Pilot - System of Care Grant

Utilizing System of Care grant federal funding through August 2024, the Intercept Pilot (Youth Villages) provides intensive in-home services who are at risk of being placed in a Children's Residential Care Facility (CRCF) or on the Children's Home and Community Based Treatment (HCT) waitlist.

- Intercept is an evidence-based intensive in-home skills program that was developed to prevent youth from entering out-of-home care or reunify them with family as quickly and safely as possible. The team consists of a Family Intervention Specialist, Clinical Supervisor, Regional Supervisor and License Program Experts.
- Service is delivered to eligible youth on average of three times per week in the home or in the community for an average of four to six months, with twenty-four hour on-call crisis support.
- This pilot is offered to youth and families in York, Cumberland, and Oxford County.
  - Focused on supporting Youth with Serious Emotional Disturbance
    - Transitioning from residential,
    - waiting for residential or Home and Community Based Treatment, and/ or
    - involved with the Department of Corrections.

# Tele-Behavioral Health Pilot

OCFS in coordination with the CDC and DOE are conducting a Tele-behavioral health Pilot supporting access to clinical behavioral health services in schools. Using a model developed out of Heywood Health in western Massachusetts, this pilot supports access to BH services in schools through:

- locating a community health worker in schools
  - CHW facilitates access to the clinical service and provides on-site support to the youth.
- pairing with a clinician providing telehealth counseling services

Current Locations include:

- Community Health and Counseling Services/CHCS
  - Ellsworth Middle School
  - Piscataquis Community High School
- Kennebec Behavioral Health
  - China Middle School
  - Messalonskee High School
- Northern Light/Acadia
  - Vickery Elementary School
  - Warsaw Middle School



# Certified Community Behavioral Health Clinics

Certified Community Behavioral Health Clinics are based on a model for care tied to quality measures that expand the scope of behavioral health & substance use services available to consumers in their communities.



## Staffing



## Availability & Accessibility of Services



## Care Coordination



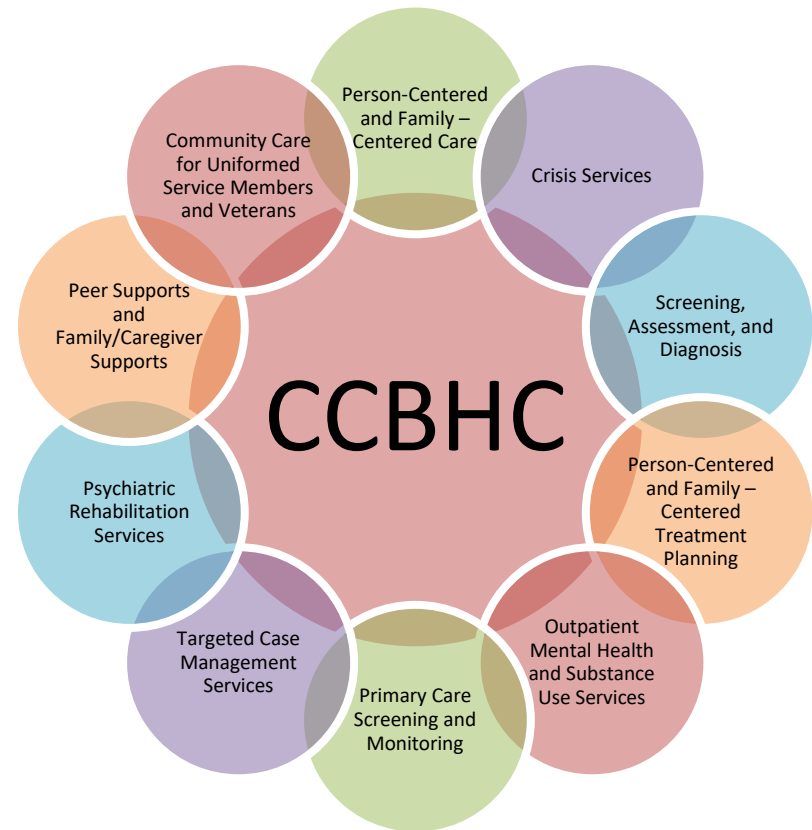
## Scope of Services



## Quality & Other Reporting



## Organizational Authority, Accreditation & Governance

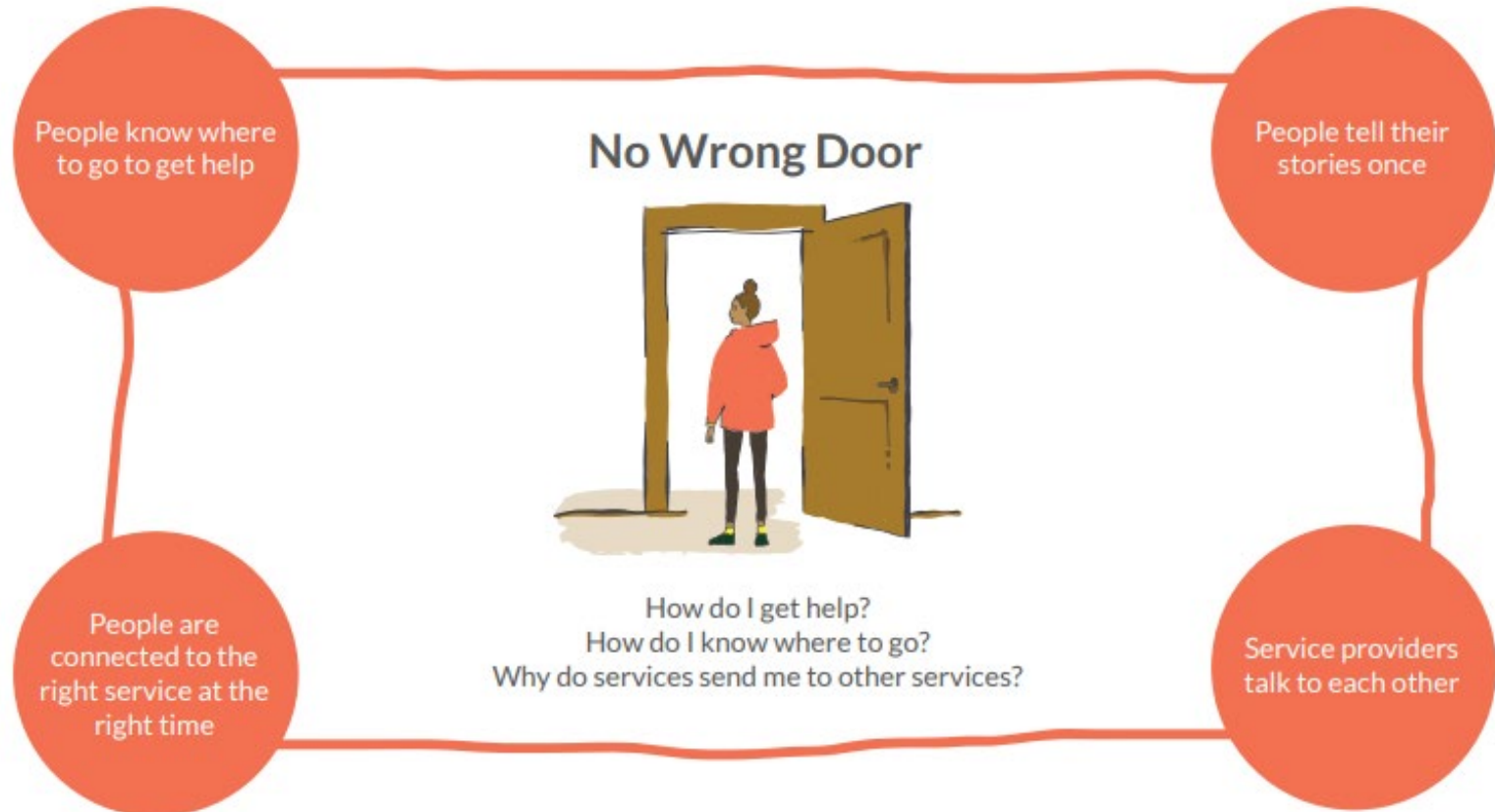


Slide adapted from the National Council for Mental Wellbeing  
[TheNationalCouncil.org](http://TheNationalCouncil.org)

# Certified Community Behavioral Health Clinics

## Behavioral Health Urgent Care Clinic Pilot

The Behavioral Health Urgent Care Clinic is part of the Certified Community Behavioral Health Clinic model which offers No Wrong Door access to behavioral health services.



# Behavioral Health Urgent Care Pilot

## Concept

- Designed for children under 18, or family/caregiver of a child experiencing real, perceived or potential disruption of stability and safety because of behavioral health issues or conditions.
- A community setting that offers immediate access to crisis intervention system and focuses on providing time-limited intervention de-escalation and observation to children under 18 years of age.

## Purpose

- Supports families in times of immediate need through education and coordination of appropriate community-based services.
- Act as a liaison to community resources, meeting with residential and facility-based treatment providers, case management services, emergency departments, and other public service and community providers for outreach and education about the service and referral process to increase utilization of the service

## Service Availability

- Walk-in behavioral health services 7 days per week, outside normal business hours.
- Services to be provided to all who present at the Behavioral Health Urgent Care Clinic, regardless of payor type
- Available to any child in need of care, including (but not limited to) children with serious emotional disturbance, substance use disorders, and complex social determinants of health profiles.