

## **CWAC HIGH END COMMITTEE**

**DATE:** March 23<sup>rd</sup>, 2022

**TIME:** 1:00 p.m. – 3:00 p.m.

**LOCATION:** Web-Ex

**Phone:** 312-535-8110, Code: 1331048852

### **Minutes**

#### **1:00 PM - Begin**

- **Welcome and Introductions**
  - January Minutes

#### **Department Updates**

- **Calls for Proposals** – Keith gave a brief update on new and existing calls for proposal.
- **TLP / ILO Update-** Michelle Jackson gave an update on her special project. Michelle team identified 81 TLP vacancies; this number was derived by calling agency and asking how many opening they have based on agency capacity, Not contracted beds. Her team also identified that there were 75 youth targeted to move into TLP setting. Her team/the department is in talks with providers who are utilizing there full TLP capacity to increase their capacity providing more beds for the department. The Goal of the initiative is to move the youth who are waiting into the 81 empty TLP beds by 4.30.22. If anyone has any questions, please email Michelle Jackson.
- A question was raised about the governor earmarking 7 million dollars on for youth aging out of care. The specifics of the plan were not available currently.
- **FFSPA-** Angela Hassell encouraged therapeutic residential provider to printout and review 301.100 and adjust practice to meet the requirements of Family First. Angela has asked her monitoring staff begin to have discussion at administration meetings, about admissions intake, long and short-term treatment goals, and aftercare services. There are some issue/challenges with the admission and intake process. Angela asks that provider review their internal process to ensure that 906's are done accurately and timely. The department will also review it CAPU process to identify issue that may be inhibiting intake and admission.

Angela reminded provider that when a youth is on run/interruption for more then 60 days, it will require a new 906 (qrtp INI) and a new independent assessment process. The type code QRTP INI is the trigger for the assessment. Angela also reminded provider to be mindful of moving youth internally within in agencies that have multiple contracts; if an



moves a youth from one contract to a unit that has a different contract this will require an QRTP INI type service code and assessment. Example even if the youth is being move for security reason and the new unit has a different contract, a full independent review will need to be done. Jason Keeler expressed concerns over this as it hampers provider flexibility/fluidity which may have the unintended consequences. Keith suggested that the Department review any agency that has multiple contracts that serve the same basic population, to see if those contracts can be consolidated.

Tip sheet/PowerPoints on Family First are available on the Dnet at <http://dnet2/Content/Frame.aspx?frame=http://dnet/Resources/QRTP/QRTP.html>  
In addition, the monitors have been encouraged to disseminate the tip sheets again.

Reassessment for the little's (under 13) are coming do, and a tip sheet to help with that process is being produced and will be disseminate to provider soon.

Child and Family Team Meetings (CFTM) are not happening as defined in rule 315, rule 315 clearly state that CFT should be conducted monthly/every 30 days. Angela asked provider to think about how they can modify the intake process to capture when the next CFTM is scheduled to occur. It is an expectation that independent assessor and providers participate in the CFTM. Melissa Webster expressed concerns that CFTM are still not being scheduled per rule 315, but the CFTM that she participated in do not are not CFTM, "the needs of the youth and family are not being discussed...they are kind of running like old service plans or ACR reviews". What does the department intend to do to tackle this issue? Angela explained that the department is reviewing the process, however it is incumbent on the permanency worker to facilitate this process. Should they fail agency should inform monitors to escalation to AA for next CFTM should occur. If the AA fails to help resolve the issue escalation to RA asking for next CFTM date should occur.

Youth on BMN list in QRTP's clinical will be join the team to help provided an additional level of support to help with step down issue. Jason Keller expressed concerns about how resource intensive the Comprehensive Discharge Form is and ask if the department could review this form.

- **Questions Rates / Contract Addendums/ Hiring / Work Force Feedback-** Keith asked for feedback on contract addendums and March 1<sup>st</sup> rate increases. Melissa Webster expressed issue that because the bottom wages were raised this compressed the difference in wages for staff causing issue with adequate differences in staff salary based on position and seniority. Mary Ann stated that the Union ask that all employees get raise not just front-line staff, which was not tenable.
- Program Plans are on hold for now
- **YouthCare-** Cheryl Fisher share that Shante Alexander is no longer in her position and that Cheryl will the contact in the meantime. YouthCare is about to offer trauma focused cognitive behavior therapy training, it web based and will be given on 4/21-4/22.
- Angela asked YouthCare if they had a document detailing what services YouthCare reimburses? Cheryl stated that they reimburse for all service previously cover by medicate. She stated that there is a provider and member manual on the website <https://www.ilyouthcare.com/>.

- Youthcare will pay for SPB outpatient services, however they need to meet criteria to deliver services. If a qualified provider does not want to join YouthCare network a single case agreement may potentially be worked out.