

# AGENDA

## Home Support Services Workgroup

Wednesday 7/1/2020

10:00 – 12:00

**Meeting called by** Meghan Peel, Children's Mental Health Bureau Chief

**Attendees:** Meghan Peel, Rebecca de Camara, Rebecca Corbett, Phil Quinn, Jake Henderson, Jeff Folsom, Nicole Tucker, Moyra Anthony, Kim Chouinard, Barbara Cowan, Mike Chavers, Eden Roberts, Marie Matthews  
Excused: Erin Williams, Nikki Grossberg, Lacey Hunt

**Location** Join Zoom Meeting  
<https://mt-gov.zoom.us/j/98355507450>

Meeting ID: 983 5550 7450

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## Agenda Items

- Welcome
- Review and Approve 6/24/20 meeting minutes
  - 6/24/20 minutes were approved.
- Summary of SFY 2018 Children's Mental Health Bureau Youth Served
  - Approximately 21,932 youth that received a mental health service. This includes all levels, including services at physicians, FQHCs, etc with a MH diagnosis as primary.
  - 676 received TGH 3.1%
  - 636 received PRTF 2.9%
  - 990 received inpatient acute hospitalization 4.5%
  - 1,337 received HSS 6.1%
  - 171 received TFC 0.7%
  - 4,713 received TCM 21.5%



CMHB - FY 2018  
Expenditures by Pro

- Medical Necessity Criteria recommendation (including CASII) from Jake, Barb, and Kim



HSS medical  
necessity proposal 7

- Team decision based on:
  - Level 3 includes intensive outpatient (SUD/IOP comparison) – in home, at risk of higher level of care.
  - The Continuum of care in Montana does not currently include intensive outpatient services.
  - CASII Level 4 – the child is likely already leaving home
- What makes a child need TGH level of care (Comparison to AMDD IOP tiered structure):
  - ASAM level 2.1, IOP tier for adults, based on number of hours they are provided during a week – high/low tiers
  - IOP for children – one rate, six hours of services or more
- Brainstorming Activity – Service Duration
  - OIP – incentivize to be more family-driven in the home?
  - In lieu of out of home placement
  - More flexibility
  - Skill building
  - Telehealth
  - Training – (*Near At Home* offers free training online, age 0-3), boost level of expertise we are putting into homes
    - **Action Item:** Research other training options for older ages – Barb, Moyra, Mike
  - Frequency
  - Intensive in-home therapy component (more family-systems) – incentive for providers to bring therapists into home, work with CBPRS, modeling, skill building
    - difficulty hiring (agency) therapists, private practice not always willing to go in-home
      - what about utilizing therapist outside of agency
      - Workforce, specifically agency – how can we be sensitive but not limit
      - Eliminate CSCT – alleviate lack of therapist capacity
    - reimbursement issues – but think about incentives
    - bundling home support services
    - caution against mandating hours per week
- Consider how we may be able to look at outpatient therapy to make it a more viable menu option to include intensive family services
- Program Design Template – Service Requirements

- Identify what service will look like in the home?

**Action Item:** Assigned team members will review the manual and program template and determine what the requirements should be and will present to the group in two weeks (7/15) @ 9-12

- Family Teams – Jeff, Nicole
  - Crisis Planning – Erin, Kim
  - Integrated Treatment Planning – Jake, Eden
  - Relational – Phil
  - Skill building/mentoring/coaching – Kim, Moyra
- 
- Child and Family Team – who is here to support the child
    - Guardians, family, child, case manager, natural supports, CSCT, school representative, outpatient therapist, psychiatrist, OT/PT/ST, CFS, JPO, CASA, attorneys
      - Family-identified supports
      - Provider of the service will help the family to identify other supports
    - Child - Skills Building / Mentoring / Coaching
      - Frequency:
      - Duration:
      - Modality:
      - Performed by:
      - Other: important to have consistency within team members (clinical lead, home support specialist, natural supports, teacher, attorney) delivering services in the home – is everyone on the team “on the same page”, treatment plan
      - HSS Service team
    - Family - Skills Building / Mentoring / Coaching
      - Frequency:
      - Duration:
      - Modality:
      - Performed by:
      - Other: important to have consistency within team members (clinical lead, home support specialist, natural supports, teacher, attorney) delivering services in the home
      - HSS Service team
    - Crisis Planning / Intervention / Post-vention
      - Frequency:
      - Duration:
      - Modality:
      - Performed by:
      - Other:

- Family dynamics / Family Therapy
  - Frequency:
  - Duration:
  - Modality:
  - Performed by:
  - Other:
  
- Relational / Time / Respite
  - Frequency:
  - Duration:
  - Modality:
  - Performed by:
  - Other:
  
- Parking Lot Items
  - Transitioning home
    - Facilitating a warm hand-off (keeping skills, relationships)
    - Think about overlap period
  - Children in foster care/custody situations working toward unification
    - How to balance birth and foster parents
  - What level of telehealth do we want to allow?
  - How much should HSS be geared toward foster kids
  
- Next Meeting
  - 7/15/20 @ 9-12