

AGENDA

Home Support Services Workgroup

Wednesday 7/15/2020
9:00 – 12:00

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

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

Location Join Zoom Meeting
<https://mt-gov.zoom.us/j/98355507450>
Meeting ID: 983 5550 7450
Dial by Telephone
+1 646 558 8656

Agenda Items

- Welcome
 - Decision to meet weekly for three hours was approved.
- Review and Approve 7/1/20 meeting minutes
 - Minutes were approved.
- Review and Approve final Medical Necessity Criteria recommendation
 - Final HSS Medical Necessity language was approved.



HSS medical
necessity proposal 7

- Group Activity – Training Option Recommendations:
 - Free and accessible
 - Across state
 - Utilize all models
 - Proven efficacy
 - Assist with workforce retention

- Skill building
- Add ons that enhance quality
- Leverage off of best practices
- Clinical supervision and self-reflective ability

- Example Models:
 - *Near At Home* – focus evidence on younger children, but applicable to CMHB
 - Includes reflective listening skills
 - *Families Youth Villages*
 - 0-18
 - Evidence based
 - *4B FBS Dollars*
 - minimize cost, but evidence based
 - *Circle of Security*
 - *Love and Logic*

- HSS Requirements – Assigned Team Member Recommendations
 - Family Teams
 - Honoring voice and choice of child
 - Who should attend
 - Values: being genuine, respect, empathy, focus on needs rather than symptoms of family
 - Define why are we looking at family teams
 - Treatment planning
 - HSS services
 - Introduction to Child and Family Teams:
 - A child and family team meeting is a gathering of family members, fictive kin, friends, and other invested stakeholders who join together to strengthen a family and provide a protection and care plan for the child to achieve child safety, permanency and well-being.
 - Child Welfare Definition:
 - “Child and Family Team” refers to a team that is comprised of family members, friends, foster parents, legal custodians, community specialists and other interested people identified by the family and agency who join together to empower, motivate and strengthen a family, and collaboratively develop a plan of care and protection to achieve child safety, child permanency, and child and family well-being
 - Would TCM compile the team?
 - Identify who you want
 - Can a child have HSS but not TCM?

- The FFPSA requires a "family and permanency team," defined as:
 - - ‘(ii) The family and permanency team shall consist of all appropriate biological family members, relative, and fictive kin of the child, as well as, as appropriate, professionals who are a resource to the family of the child, such as teachers, medical or mental health providers who have treated the child, or clergy. In the case of a child who has attained age 14, the family and permanency team shall include the members of the permanency planning team for the child that are selected by the child in accordance with section 475(5)(C)(iv).
- **Action Item (Kim):** Draft TCM Team Checklist
 - Review the TCM questionnaire/checklist for treatment planning through the HSS lens for any additions/suggestions
 - Provide recommendations during next meeting
- **Action Items (Workgroup):**
 - Chose definition for family teams,
 - Chose what operational outcome model do we want to put into rules for accountability – ex: checklist be completed (7 days prior to treatment plan meeting), treatment plan meeting is every 90 days
- Integrated Treatment Planning
 - CMHB adopted in rule
 - Program vs licensing rules – likely need to make some changes to licensing rules
 - Case manager should attend the meeting
 - *Medicaid services must not be provided to a youth at the same time as another service that is the same in nature and scope regardless of source, including Federal, State, local, and private entities. A table of services which may NOT be provided concurrently is on pages 7-9.*
 - Clarify language to make sure intent is clear
- **Action Item:** Meghan - Are there any Medicaid services that can be billed at the same time? Developing rate – be thinking operationally about cost
 - Must be identifiable and measurable
- Relational
 - Modality: based on experience
 - Who performs in home: HSS and entire treatment team

- 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
 - 7/22/20 @ 9-12
 - HSS Requirements:
 - Crisis Planning – Kim
 - Skill building/mentoring/coaching – Kim, Moyra
 - Requirements for HSS Staffing