

St. Augustine Youth Services, Inc.

Annual Management Report

July 2019 – June 2020



Final – Updated January 2021

ST. AUGUSTINE YOUTH SERVICES, INC.
ANNUAL MANAGEMENT REPORT FOR 2019-2020

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ST. AUGUSTINE YOUTH SERVICES, INC.
ANNUAL MANAGEMENT REPORT FOR 2019-2020

A. INTRODUCTION AND EXECUTIVE SUMMARY

The Annual Management Report of St. Augustine Youth Services, Inc. for July 2019 - June 2020 summarizes the results of the agency's services and strategic initiatives for the last twelve months and includes analyses of those results and recommendations for the coming year. The Annual Report provides evaluative data and information that the Board of Directors and Management Team use to assess the agency's effectiveness at meeting the needs of persons served and to develop strategies and plans for the improvement and expansion of services in the future.

The organization revised its performance and outcome measures during the past five years and has prepared quarterly evaluation and quality improvement reports based on those revisions. The last four quarterly outcome reports, which were used to continuously monitor results and improve services, were part of the foundation for this Annual Management Report.

SAYS had a very successful year in its efforts to deliver culturally competent and effective services to its target population of children with serious emotional and behavioral problems, the majority of whom have been abused or neglected and are in the state's child welfare system. The data and outcome information contained in the Annual Report demonstrate that the agency met most of its objectives related to demographics of clients served, the effectiveness and efficiency of its services, and the satisfaction of its children, their parents and guardians, and the agency's key stakeholders. SAYS also met the performance and outcome measures required for contract agencies by the Florida Department of Children and Families (DCF) and Community-Based Care Organizations. These are shown in Section F.

In its residential programs, which have been the foundation of the organization for 30 years, SAYS provided comprehensive behavioral health and group care services to 52 children and adolescents during the year. The demographics profiles, which are described in detail in the report, are consistent with the expectations of the agency and with national data related to the target populations. The residential programs served 25 white children, 22 African American children, 3 bi-racial children, 1 American Indian child and 1 Hispanic child. The percentage of minority children was 56% of the children served, which was higher than the percentage of minorities in the community's population and children in the DCF circuit's foster care system. The residential programs demonstrated many successes during the year. They are described later in the report.

Our programs that began in the last five years demonstrated that they have reached a solid maturity in staffing and the effectiveness of their services. These programs, which demonstrate SAYS commitment to meeting the needs of the broader community, have shown outstanding successes and accomplishments. A sample of the accomplishments are shown below with a complete description by program in the body of the report.

Mobile Response Team

- ❑ Provided 358 risk assessments to children in St. John's County.
- ❑ Diverted Baker Acts by 82 percent for the year.

- ❑ Modified services in response to COVID-19 pandemic and conducted services face-to-face and by using virtual platforms to conduct assessments, individual and family counseling, psychiatric evaluations, medication management and case management.
- ❑ Implemented Medication Management Services and Outpatient Clinic with a Board-Certified Child Psychiatrist for individuals assessed by MRT.
- ❑ Had 2 youths graduate from high school.
- ❑ The number of assessments fell dramatically from March through June 2020 due to the community's Covid-19 responses and school closures. SAYS' leaders will watch this trend closely and implement strategies as indicated.
- ❑ Clinicians began the certification process for Trauma-Focused Cognitive Behavioral Therapy (TFCBT).

Community Action Team (CAT)

- ❑ Expanded the CAT Program with new funding.
- ❑ Expanded to a new office on the northside of St. Augustine.
- ❑ Added a family partner position.
- ❑ Added telehealth services.
- ❑ All clinical positions (3 therapists and team lead) have taken the pre-requisite TF-CBT course and 3-day training. All clinical staff will be participating in the supervision calls toward certification in Trauma Focused Cognitive Behavioral Therapy.
- ❑ Eight staff are trained in the Wraparound Model. Team lead, clinical supervisor began process for wraparound coach certification.
- ❑ Successfully met monthly program outcomes and performance measures.

COACHES Program

- ❑ Had 4 youths graduate from high school.
- ❑ Targeted Case Management provided services to 56 children in 2019 /2020.
- ❑ Program supervisor and administrator obtained certification as Wraparound Coaches.
- ❑ All case managers completed required training and are seeking board certification for behavioral case management as well as certification as Wraparound Facilitators.
- ❑ Increased outreach and referrals in all four counties.

Residential and Clinical Services

- ❑ Had 3 youth graduate from high school and all other youths advance to the next grade.
- ❑ Implemented significant changes on campus in response to COVID-19.
- ❑ Improved computer and internet access for youth in all four houses to enable online learning.
- ❑ Added specialized services for youths in the new AB House to meet the needs of the unique population.
- ❑ Therapists in all SAYS Programs completed 11-hour Basic Trauma Focused Cognitive Behavior Therapy Training (TF-CBT).
- ❑ Therapist completed Wraparound 101 training (designed for clinical staff).
- ❑ Residential staff began certification process for Redirecting Children's Behavioral/Parenting.

With its previous programs and its new services, SAYS provided services to 560 children and adolescents this fiscal year.

The organization met many of its goals and objectives identified in its Strategic and Performance Improvement Plan 2018-2021. The Annual Report contains a section that describes the organization's achievements of goals and objectives identified in the Strategic Plan, including those highlighted below.

- ❑ SAYS had a successful audit with a new CPA firm. Due to the increase in federal funds, SAYS had to have a Federal Single Audit (FSAA) completed in addition to the regular audit. SAYS was in compliance with the FSAA as well.
- ❑ SAYS conducted a large marketing campaign to assist in reaching the families/young adults that may need the MRT team during COVID-19. An MOU with 211 was reached so that consumers could call for help and MRT services. A commercial and billboard advertisement were created and will air for 12 months.
- ❑ SAYS Clinical Director, House parent and CEO received award from the Florida Coalition for Children in 2019.
- ❑ SAYS helped write two House Bills. The first was for foster care transitional youth and housing and the other for child welfare residential reform.
- ❑ SAYS provided a national Trauma Informed Cognitive Behavioral training with Dr. David Hong, a nationally certified trainer and practitioner.
- ❑ 13 SAYS staff are becoming certified to training Redirecting Children's Behavior parenting workbook.
- ❑ Started a parent support group during COVID-19 using telehealth.
- ❑ Received funding from United way.
- ❑ Supplied food to families during COVID-19.
- ❑ Supplied baby items for new young mothers during COVID-19.
- ❑ Helped author the State COVID-19 plan.
- ❑ Presented on Florida's plans to deal with COVID-19 on an Association of Children's Residential Centers policy webinar.
- ❑ Successful CBC/ME monitoring.
- ❑ Continued efforts to work on development activities with significant increase in net income.
- ❑ Passed all health inspections.
- ❑ Provided resources for families to help them be able to participate in telehealth and school
- ❑ Two staff have completed requirements to become Certified Wraparound Coaches.
- ❑ Notable upgrades to SAYS technology, which are described later in this report and in the Technology Plan.
- ❑ Received a \$50,000 grant from the Community Foundation to support the COACHES Program.
- ❑ Effectively became integrated with United Way of Northeast Florida 211 through execution of Memorandum of Understanding.
- ❑ SAYS was very effective at home-schooling residents due to closures as a result of Covid-19 pandemic.

- ❑ SAYS was able to secure and effectively utilize lapse funds from LSF that were taken back from providers that could not spend their allocations.
- ❑ SAYS was able to provide cash cards for our families that lost jobs during the year as a result of the pandemic.

In its Strategic Plan for 2018-2021 SAYS set access, effectiveness, efficiency and satisfaction measures for its programs for the fiscal year. The evaluation results demonstrate that the agency met most of those measures, and in the situations in which the measures were not achieved, the results were close to the objectives. The results demonstrate that the agency's services were:

- ❑ Effective in assisting children to improve functioning, reduce symptoms and change negative behaviors;
- ❑ Effective in assisting children to perform in school;
- ❑ Delivered in a cost-efficient manner; and,
- ❑ Received with high levels of satisfaction by the children, their family members, and key community stakeholders.

SAYS has used the knowledge gained from its analyses of its performance and outcome during the year and other information related to internal and external issues to develop recommendations for changes and improvements. The recommendations will be incorporated into next year's plans and are listed in the last section of the Report. In addition, that section describes planned changes to outcome measures, based on our knowledge gained during the past year, which will more effectively demonstrate the organization's performance and outcomes.

SAYS has eliminated the section of the Annual Report that described key external environmental factors, like legislative actions, but they are summarized below. More comprehensive descriptions are included in the Strategic Plans.

External Environmental Factors

The five important trends or environmental factors are summarized below:

1. COVID-19 Pandemic and its Impact
2. The Family First Prevention Services Act was signed into law by the president in February 2018. This law, which is summarized below, will have profound effects on group care providers like SAYS. It has clear intent to reduce funding for residential providers with funds going to prevention services that attempt to keep the families intact and prevent removal to foster care or group homes.
3. The state's strategic change in the child welfare system away from residential group care.
4. The statewide implementation of managing entities for behavioral health services. The Department of Children and Family Services now outsources most contract and system management functions to managing entities.
5. The statewide implementation of Medicaid managed care, which has caused major financial and administrative challenges for all publicly funded providers.
6. The significant impact on the child welfare system as a result of the opioid epidemic, which has affected Florida greatly.

COVID-19 Pandemic and its Impact

SAYS' employees have planned and implemented numerous strategies in response to the COVID-19 epidemic's many impacts on personal, social, health and economic issues. The agency held numerous planning meetings since January 2020 and have implemented strategies that to date have been highly effective.

SAYS' staff developed or enhanced several policies including the following:

- Communicable Diseases Plan and Policies
- Telehealth and Telehealth Consent
- "Bulk" Admissions and Quarantines to Residential Treatment Facilities
- Transportation (of clients)

SAYS greatly expanded the capacity for the youth in residence to access computers, internet and schools' online teaching approaches. In addition, SAYS helped families in its community-based services with securing computers and internet access for both school needs and with telehealth services provided through SAYS. SAYS staff also delivered food and supplies to these families to limit their exposure in the community.

SAYS shifted to mostly telehealth services for the community-based services in March 2020. Staff are able to see youths and parents in person if needed. This has gone well in most situations. SAYS has chosen to utilize Zoom for Healthcare as its primary means of video communication with clients, families, and other stakeholders. Zoom for Healthcare has multi-layer security with AES-256 encryption. It also has closed captioning to help with accessibility.

SAYS has the ability to use other applications like Skype, Microsoft Teams, etc. if needed. In addition, some children and their families may not have access to smart phones, computers, or other devices, and they may not have internet capability, whether hardwired or via Wi-Fi. In those cases, employees may use telephones. For example, Face Time through cell phones was used to facilitate dependency case worker visits. SAYS will ensure children and their families and guardians understand how to use the technology.

SAYS conducted a large marketing campaign to assist the agency in reaching the families/young adults that may need the MRT team during COVID-19. An MOU with 211 was reached so that consumers could call for help and MRT services. A commercial and billboard advertisement were created and will air for 12 months.

The Department of Health agreed to test everyone on the residential campus including staff and kids. In addition, SAYS has the ability to have employees and youths tested off campus when indicated. All kids entering the program are tested and quarantined until results are known. The quarantine is limited to one section of one of the four homes. SAYS purchased PPE equipment for youth and staff in the quarantine area as well as a protective cover (floor to ceiling) to establish a safe boundary between the two sides.

SAYS participates in statewide calls weekly with the Secretary of Department of Children and Families and participates in weekly calls with the residential care providers in the state. It is following guidelines for nursing homes as directed by DCF and is following CDC and OSHA guidance as well; e.g., masks, social distancing, tests, washing hands, etc. SAYS CEO helped Florida Coalition for Children prepare a draft COVID-19 Plan for DCF.

SAYS is required to send daily COVID-19 reports to DCF, AHCA, LSF and DOH. It looks as though DCF is developing changes to hurricane evacuation plans for residential programs because of COVID-19. SAYS staff are working with hotels that have generators as well.

SAYS does have concerns about teachers not having “eyes on” kids with school being conducted remotely. The social and health systems’ leaders are all concerned about domestic abuse during this period.

We are also concerned about the long-term impacts on funding because the agency is so dependent on federal and state funding. Some estimates have the State of Florida losing 20% of its tax revenues. We are hopeful that the federal government will continue to help states, and that Florida can utilize its trust funds at least temporarily to offset some of the revenue reductions.

Additional Responses by Programs

Upon state and federal guidelines for COVID-19 response, CAT transitioned to Telehealth services. CAT developed a Telehealth Authorization for informed consent in transitioning from Face-to-Face methods to video conferencing and/or services via telephone. Anticipating increased stress on families, treatment planning reflects increased contact by CAT to families. This included phone calls by case managers, peer mentors or increased therapy sessions. As the federal and state mandates continued, 9 weeks into the Tele-health services, CAT identified advantages and challenges to the Telehealth model including:

Advantages:

- ❑ Flexible scheduling.
- ❑ Some older clients participate better.

Challenges:

- ❑ Difficult to engage clients and families with limited internet and computer access.
- ❑ Wrap Around meetings are harder to conduct with Zoom and contain fewer participants.
- ❑ Clients are harder to engage if there is no or little rapport.
- ❑ Clients with difficulty maintaining focus are harder to engage and keep engaged in session.
- ❑ Family members are reluctant to leave the client alone with electronic devices and will remain present during sessions.
- ❑ Younger clients are hard to engage in telehealth sessions leading to superficial sessions.
- ❑ Clients are more reluctant to engage in trauma work online.

- ❑ Some families have declined telehealth and will only allow for telephone sessions making communication and client assessments more difficult.
- ❑ Family sessions are difficult to conduct due to lack of or limited available electronic devices.
- ❑ CAT Clinical supervisor and SAYS Registered Nurse reviewed CDC and state regulations on phasing and developed a phasing plan for re-integrating into Face-to-Face interactions with clients.

Child Welfare System

DCF began outsourcing most child welfare system functions to Community Based Care Organizations several years ago. More recently, DCF and CBC's across the state have implemented DCF strategies to reduce the use of residential treatment. This strategic shift has resulted in reduced utilization in providers' facilities across the state. This shift comes at the same time as the Medicaid managed care strategies are reducing the length of treatment for children and revenue for providers. In addition, the utilization of SIPP services, the state's intensive alternative to full hospitalization, is falling. The SIPP service is expensive at \$400 plus per day. However, the state does not appear to be shifting funds to less expensive alternatives.

The Family First Prevention Services Act, which became law in February 2018, changes child welfare financing streams and aims to prevent children from entering foster care by allowing federal reimbursement to be used for services like mental health services, substance abuse treatment and in-home parenting skills. Importantly, it redirects funding from residential providers to prevention services and encourages the use of family foster homes. Further, it introduces the requirement for Qualified Residential Treatment Programs (QRTP) and provides criteria for such a determination. It also requires assessment and documentation of the need for placement in a QRTP conducted by a qualified professional or licensed employee as well as a case plan. The congregate care limitations changes are effective in 2020 unless states request a delay until 2022. However, a delay would result in elimination of access to the new prevention services funds during the delay period. A complete outline of the Act was provided by First Focus's publication, *Campaign for Children* and by Children's Defense Fund's *Family First Prevention Services Act, Historic New Reforms in Child Welfare*. These publications are available for review. In addition, states and providers are to use Evidence Based Practices identified in the California Evidence Based Clearinghouse for Child Welfare when planning services.

DCF implemented changes to FAC 14C-14.023, which increased the requirements for background screening of applicants and employees. The new requirements are more stringent than previously required of providers and have caused numerous delays in hiring and recertification. They are expensive to manage and have resulted in the loss of numerous candidates because of the delays. Florida's agencies, AHCA and DCF, have not coordinated the new requirements well and have not developed good processes. There are numerous delays and issues with the out-of-state components, as well as checking 911 databases, school background checks and civil cases. Other states are not cooperating, in some cases because laws prevent the release of relevant information. A summary of the issues, prepared by Florida Coalition for Children Group and Residential Sub-Committee, which is chaired by Schuyler Siefker, has prepared a report on these challenges. It is available for review.

Managing Entities (Substance Abuse and Mental Health Services)

The Department of Children and Families completed the expansion of managing entities throughout the state during the fiscal year 2012-2013. DCF selected Lutheran Services of Florida (LSF) as the managing entity in Northeast Florida, an area which includes St. Johns County. Since the implementation of these changes, DCF has issued numerous Guidance Documents, which function as formal Florida Administrative Codes that govern how most services are delivered, dictate outcome measures, and increase reporting and administrative requirements for providers. LSF has added its separate requirements.

This initiative is very controversial among many providers and even state employees in that it has removed about \$35 million in the state's funds annually from provider service contracts in order to pay for much of the costs of Managing Entities. Managing entity costs range from 3.5% to 5.0% of provider contracts. These funds are now a line item in the appropriations bills, but the funds were taken from provider funds.

Medicaid Managed Care

The Governor and legislature approved the expansion of the so-called Medicaid Reform initiative throughout the state, with some exceptions. This shift, which occurred in the 2013-2014 fiscal year, resulted in the demise of Prepaid Mental Health Plans (PMHP) and Medicaid fee-for-service payments with the responsibility for behavioral health being contracted to Medicaid HMO's. AHCA currently contracts with Sunshine Health Plan – Child Welfare for kids in the system. The intent is to have these services authorized and managed through one organization that can recognize the importance of medical and behavioral health services for these children. There are, however, problems for providers with authorizations, payments and late payments. In addition, the Medicaid rates are the same as 2004.

Affordable Care Act

SAYS Strategic Plan for 2014-2017 included a comprehensive review of the ACA and its implications for behavioral health services. While its primary impact has not been of great significance to SAYS, it nonetheless is important in the context of SAYS' funding from DCF and CBC's for residential care. There had been discussion at the state level about the state's ability to replace current DCF funding for substance abuse and mental health services with Medicaid because of the huge number of new people that might be enrolled in Medicaid beginning in 2014 (subject to Congressional budget approval). This shift was clearly logical in the context many DCF funded services, like outpatient, but could cause significant problems if DCF were to try to eliminate funding for room and board with the concurrent assumption or requirement that Medicaid pay for that service. Medicaid and its managed care organizations do not pay for room and board now and it is highly unlikely they would willingly do so in the future. This funding is crucial to SAYS' ability to operate successfully.

In 2013, the Florida Legislature and Governor Scott did not approve the expansion of eligibility for Medicaid as is permitted under the provisions of the ACA. The expansion would have

permitted persons with incomes up to 138% of the federal poverty guidelines to be enrolled in Medicaid. In Florida children are eligible either for Medicaid or the Healthy Kids Insurance up to 200% of poverty, and almost all children in the child welfare system are also enrolled in Medicaid.

Opioid Epidemic

The national opioid epidemic has impacted Florida tremendously. The purpose of this section is not to fully describe the current situation and its causes, but to describe its impact on families and the child welfare system. Heroin is more potent and less costly, fentanyl is more prevalent, and carfentanyl is also being used, though not quite as much as the others.

Local child welfare systems across the state have seen a significant increase in the number of children removed from their homes due to substance use, overdoses and deaths of their parents. Parents have died shortly after their kids entered the system. The Community Based Care Organizations, which manage the child welfare system on behalf of DCF, have had to appeal to the legislature and governor for additional funds to cover operations and placements of so many new admissions.

Priority Areas for Future

The focal areas for the new year, 2020-2021 (and beyond), include:

- ❑ Adapting practices to meet client’s therapeutic needs during COVID-19
- ❑ Minimize health risk to persons served and staff by providing PPE and Up-To-Date information about COVID-19 plans.
- ❑ Adapt all corporate functions to meet demands of greatly expanded organization.
- ❑ Adapt to requirements of The Family First Prevention Services Act and the Quality Standards for Group Care (2018) developed by Workgroup established by DCF.
- ❑ Continue planning and fund raising for new buildings – Independent Living Program - Build the recreation/evacuation building, Storage Facility and Outpatient Program Offices.
- ❑ Acquire funding to assist in meeting the goals outlined in the Technology Plan.
- ❑ Consider recommendations of USF Cultural and Linguistic Study.
- ❑ The Quality Assurance Team recommends continuing to find ways to reduce physical restraints and adverse incidents.
- ❑ Continue efforts to work with school professionals to implement strategies aimed at improving academic performance.
- ❑ Work with the managing entities throughout the State of Florida to acquire contracts with each of them.
- ❑ Improve SAYS marketing to consumers, donors, and partners.
- ❑ Continue focus on staff competency development.
- ❑ Track legislation related to Medicaid, community-based care, and other issues related to children’s services.
- ❑ Increase the number of grants for which SAYS applies and apply to at least four.
- ❑ Work with leadership on creating effective procedures for Medicaid Managed Care (MMA) requirements.

- ❑ Provide Trauma-Informed Care leadership to the community-based care agency.
- ❑ Increase advocacy efforts with staff and parent involvement in local and state legislature.
- ❑ Categorize survey data by program.
- ❑ Adapting practices to meet client's therapeutic needs during COVID-19.
- ❑ Minimize health risk to persons served and staff by providing PPE's and up-to-date information on COVID-19 plans.
- ❑ SAYS had 3 residential youths graduate from high school this year. Two are going to college and one to technical school.

Program Specific Priorities include:

- ❑ Coaches – funding for sustainability, partnering with schools like Richard Milburn Academy, retaining staff, transitioning to Medicaid services, and obtaining case management certification through the Florida Certification Board.
- ❑ CAT – Improve utilization of assessment tools available with youth and caregivers. In particular Parenting Stress Index, Trauma Assessment Tools, and ANSA-T for adult and youth. Fill Family Partner Position. Analyze referral and waitlist process for patterns acceptances and denials.
- ❑ Mobile Response Team – Maintain safety in community by having adequate staffing pool to meet 60-minute requirement; improve and integrate electronic health record throughout SAYS; improve emergency response to capture every crisis call to hotline.
- ❑ Residential and Clinical – Maintain occupancy levels in all houses; ensure safety of all residents and staff; and enhance graduation rates.

In summary, SAYS had a very successful year. The organization's new community-based services demonstrated very strong performance and showed SAYS' success in expanding its array of services beyond residential. It provided needed services to 52 children in residential and 480 in the community programs, which consist of Mobile Response Team, Community Action Team and Coaches Program. Outcomes were very favorable for the kids, the financial performance exceeded expectations, staff met performance requirements, and parents, children and key stakeholders were very satisfied with services.

B. MISSION

St. Augustine Youth Services shapes the future of Florida's youth by providing trauma informed coaching, counseling and care in family style therapeutic group homes and outpatient community services.

C. AGENCY DESCRIPTION

St. Augustine Youth Services is private not-for-profit corporation, incorporated in 1988 by the State of Florida. The agency is licensed by the State Department of Children and Families to provide residential group care services. For children with no family support, it is the intent of St. Augustine Youth Services to prepare the individual child to function more effectively in a less restrictive setting within the community. Transitions to Relative Placements, Foster Homes, Adoption Placements or Independent Living Situations will be pursued with consideration to each child's needs and goals.

SAYS provides residential services to young boys and adolescents with behavioral, emotional and mental illness problems. Most of the children served by SAYS' residential programs are in the custody of the State of Florida, though the organization will accept children from other states and children who are not in state custody.

The organization has expanded its array of services in the last four years to include several community-based programs: Case Management, Mobile Response Team, and Coaches Program (outreach and wrap-around services). SAYS competed for and was awarded funding for a Community Action Team, which will be implemented in January 2019. The organization's budget has increased by 200% in the last three years. It receives funding from the state and local government agencies, Medicaid, private donations, and can charge fees for services on a sliding scale based on income and family size.

Residential Programs

SAYS offers therapeutic services to boys ages 6-17 in our residential homes. It is our goal to build self-esteem in these young men to help them lead a positive, full life. We offer three Specialized Therapeutic Group homes and one Traditional Group Home (with BHOS) to these services. As mentioned above, SAYS began expanding its array of services with a focus on community-based care. A summary of those programs is provided below. Each program has a complete program description and goals.

Therapeutic Group Homes - We have three therapeutic group homes for boys, ages six to 17, who have been referred by the Department of Children & Families or a private agency providing case management services. This program helps children to develop socially acceptable behaviors and build self-esteem. We offer a homelike environment, therapy, recreational activities, social skills training, and psychological and psychiatric services.

Traditional Group Home with BHOS - We have one foster care group home for young men, ages 14 to 18, who have grown up as wards of the state. This program teaches them independent living skills to prepare them for future success. We offer independent living skills training, therapy, job skills training, and psychological therapies and psychiatric services.

Mobile Response Team (Began March 2015)

MRT provides on-site risk assessments to students in St. Johns County with Behavioral Health needs. MRT operates 24 hours per day, 365 days per year. . The team consists of Licensed Mental Health Counselors and/or Licensed Clinical Social Workers experienced in the assessment and treatment of youth with mental health issues, and a certified Targeted Case Manager experienced with coordinating wrap-around services to youth . SAYS has three licensed clinicians (North, Middle and South) and can receive referrals and/or crisis calls 24/7 from various sources including schools, child serving agencies, and law enforcement. In 2020 SAYS expanded the service to provide medication management for youth served in this program.

Case Management Services (Began 2013-2014)

Targeted Case Management services is available to all eligible SAYS clients. Children's mental health targeted case management services assist recipients in gaining access to medical, social and educational programs, assessment of functional abilities and needs, and several other services. The TCM will work with the child's formal and informal supports (i.e., family, case worker, GAL, SAYS team, etc.) to develop and implement a service plan. The TCM carries out the essential tasks of case management including linking, coordinating, planning advocating, and monitoring. All case managers are trained in High Fidelity Wraparound and possess, or are seeking, board certification from the Florida Certification Board to become Certified Behavioral Health Case Managers.

Community Action Team (Began 2018)

Funded by DCF and Lutheran Services (Managing Entity), the CAT Team provides crisis intervention and treatment to children and families that are experiencing behavioral health situations that place the children at high risk of removal. The CAT Team is made up of a child psychiatrist, nurse, licensed team lead, masters level therapists, case managers, peer/family support, and administrative assistant. Each family is assigned a “mini” team designed to address the variety of unique needs. The team attempts to remove all barriers to treatment, providing in home services and care coordination. The family is empowered to develop a plan of care and create a system of supports that will provide continuity once services are terminated.

Coaches Program (Began 2017)

The Coaches Program

The Coaches Program is funded through a SAMHSA Grant to DCF that is fiscally managed by SAYS Annual Report 2019 – 2020

LSF. It is System of Care grant and covers Flagler, St. Johns, Putnam and Volusia Counties. This program is funded as a Transitional Youth System of Care (TYSOC) grant. It provides outreach and care coordination to youth and young adults transitioning to independence. There is also a component of community education and provider coordination. The team is made up of a program supervisor and Transitional Life Coaches (TLC) that have a caseload of 12-15 kids. Each TLC is certified and/or trained in High Fidelity Wraparound. This program will be completely Medicaid funded in 2020-2021, as all TLC's will seek board certification as behavioral health case managers. Since it began in 2017, the Coaches program has provided services to youth and outreach to the communities in all four counties.

D. NEEDS ASSESSMENT AND SUMMARY OF KEY STAKEHOLDER SURVEY AND DISCUSSIONS

St. Augustine Youth Services requested information, as part of its Needs Assessments for the previous several years, regarding the need for and satisfaction with its services from numerous funders, referral sources, schools, providers, and others in St. John's County and in the Northeast Florida area. The organization used a survey to obtain the data and discussed its services with several key informants in the area.

The responses reflect a very high satisfaction level with the quality and outcomes of SAYS' services. 100% of the respondents that have direct professional relationships with SAYS rated the services as outstanding. In addition, the responses indicate that the respondents agree that there is a high demand for SAYS' services.

Needs Assessment

St. Johns County Behavioral Health Consortium

The St. Johns County Behavioral Health Consortium was established on October 11, 2012 with the mission to identify, prioritize, and advocate for the substance abuse and mental health needs for children, adolescents and adults. The Consortium wanted to ensure access to quality and affordable mental health and substance abuse prevention and treatment services for our country's residents. This included the maintenance of exemplary program services we currently had in place as well as the identification of any gaps in service needs.

The Consortium represents more than 35 entities spanning behavioral health providers, law enforcement, the school district, county and state government, criminal and juvenile justice agencies, Flagler Hospital, FQHC (Federally Qualified Health Clinic) and other health care providers, social service agencies serving homeless, victims of domestic violence, child welfare, and seniors, as well as members of the addiction recovery community and NAMI (National Alliance for the Mentally Ill).

Each year since its inception, the Consortium membership has published a list of the behavioral health priorities as it relates to youth and adults. The list has provided the membership with relevant issues to be addressed for the greater health of our community. This has included maintenance of current efforts, key legislation, funding priorities and/or identification of

significant gaps in care to be pursued. By working together on these priorities, we have been successful!

Funding for substance use and mental health disorders has increased during these past six years. The St. Johns County Behavioral health system of care has been expanded to include:

- ❑ 16-bed adult inpatient substance abuse treatment facility (detox and residential treatment)
- ❑ Mobile Response Team to intervene and divert youth from the possibility of a Baker Act and subsequent hospitalization
- ❑ Florida Assertive Community Team (FACT) for individuals with a severe and persistent mental health disorder
- ❑ Community Drop-In Center for adults with a mental health disorder

The Consortium held its first public event, the Children’s Behavioral Health Summit, in October of 2015, which has become an annual event. We advocated for the passing of Senate Bill 12 in Florida 2016 legislative session. It was specifically intended to improve the behavioral healthcare system throughout Florida. The Consortium established the following priorities in 2019:

- ❑ Seek support for funding to expand capacity for additional detox, residential treatment and outpatient/recovery support services.
- ❑ Seek support for the funding of a Central Receiving System in St. Johns County that will provide a “no wrong door” approach to those suffering from a mental health or substance use disorder.
- ❑ Support an increase in children’s mental health funding for psychiatric and outpatient treatment services.
- ❑ Restore non-recurring state funding provided for the establishment of a Florida Assertive Community Treatment team (FACT) serving St. Johns County.

These priorities were also adopted by the St. Johns County Board of County Commissioners and *A Healthier St. Johns* Political Action Committee.

St. Johns County Behavioral Health Consortium Report
Substance Abuse and Mental Health Priorities – 8th Edition

The Consortium regularly evaluates community needs and establishes priorities. The full report is available in a separate folder. The top current priorities of the consortium, based on this previous report, for children services were:

1. Increase funding for the Mobile Response Team to include after hours and weekends.
2. Implement a Wraparound Integrated Care Service Delivery Model for Children and their Families.
3. Secure a Baker Act receiving facility locally for children.
4. Increase timely access to Psychiatric Services and Mental Health Outpatient Treatment.

Three of these priorities are aligned with SAYS expanded service delivery model and will continue to be strategic initiatives for the organization in the future. In addition, the Consortium adopted the strategies below for children's service funding.

- ❑ Secure funding to execute the Children's Behavioral Health Strategic Plan.
- ❑ Collect data to show need and gaps in system of care to assist when seeking funding.
- ❑ Seek new resource and funding opportunities through corporations and community partnerships with larger group to assist in creating funding streams.

In addition, the Consortium conducted a needs-assessment type survey of members during 2019-2020 which resulted in a list of prioritized needs for the county. This list, dated June 2019, contained similar priorities and the SJCBC Priorities 8th Edition described above and is available for review. It did contain a strong recommendation regarding youth that have experienced trauma.

The Consortium held the Children's Behavioral Health Summit in October 2019. The Evaluation Report is available. Participants were asked to name their top priorities. The two with the highest response were:

1. Preventative services 97.7%
2. Suicide prevention 90.9%

Analysis of Referrals and Denials

SAYS analyzes its referrals, acceptances and denials for the purpose of assessing if it is meeting its monthly objectives and identifying trends in referral patterns and demand for its services. Referrals to SAYS has far exceeded its expectations and many of the boys have more challenging behavioral health issues than in previous years. This has occurred for at least two reasons. First, DCF and the community-based care organizations have attempted to refer only the more challenging boys, some of whom have failed multiple foster care placements. Second, the number of kids entering the child welfare system has increased significantly in the past year due to the number of families experiencing opioid misuse and overdoses.

Examples of Reasons for Denials:

Little Boys Home – Needs higher level of care than SAYS offers, too young, sexual aggression, diagnoses conduct disorder and extensive substance use issues.

Big Boys Home – Engrained substance abuse, recommended for SIPP, violent and paranoid, extensive sexual issues and fire starter.

Pre-Independent Living – Acts out sexually, chronic runaway, substance abuse issues, low IQ, awaiting DJJ commitment.

Coaches Program- Too young/too old (below age of 16/over age of 21), IQ below 60, lived out of service area, did not meet criteria for a mental health diagnosis.

CAT Team - Does not meet eligibility criteria, No response, Caregiver declined services, Already established in services, Looking for higher level of care, Custody/Legal considerations.

Community Needs Assessment

SAYS has historically conducted Community Needs Assessment Surveys of key community stakeholders. In previous years, this process has included written survey, personal interviews with stakeholders, and an all-day workshop of stakeholders. The most recent needs assessment demonstrated the continuing demand for SAYS services as well as other mental health services for children and adolescents with behavioral health and trauma issues. There is also significant need for new programs to provide services to children and adolescents that are sexually reactive and aggressive, and regionally for homes that accept girls. The most recent Needs Assessment is available for review.

SAYS anticipated that LSF would have published its Needs Assessment Report for the region prior to the completion of this report. We will reference it in next year's annual report. This year SAYS utilized Survey Monkey to facilitate responses to its internal satisfaction surveys. The complete results are available for review. Of importance 90% of the stakeholders rated their relationships with SAYS as Excellent (70%) or Good (20%). The results of the remaining five responses are available in a separate folder. They are not shown here but described in Satisfaction Section later and are available for review. The questions are:

1. How would you describe the relationship between our organization?
2. In what areas could SAYS improve to better meet the needs of the community?
3. What is the most pressing unmet need in the community?
4. How could SAYS better meet the needs of your organization?
5. Would your organization be interested in collaborating with SAYS on a community project?
6. What obstacles does your organization face in getting a child into SAYS – residential or community?

E. STATUS REPORT ON STRATEGIC AND PERFORMANCE IMPROVEMENT PLAN FOR 2017-2020 AND OBJECTIVES FOR 2019-2020

This section of the Annual Management Report on Services summarizes the organization's progress toward meeting its goals and objectives in the Strategic Plan for 2017-2020 and its performance measure for the fiscal year. In general, SAYS has done very well in meeting its goals and objectives. Based on the results of this year's Plan and analyses of other issues, goals and objectives will be continued and others added to next year's revision to the Strategic Plan. This section summarizes results for the following areas:

1. Goals and Objectives
2. Business Improvement Objectives

3. Outcome Measures
4. Other Accomplishments

1. Results of Goals and Objectives from Strategic and Performance Improvement Plan 2018 - 2021 for Fiscal Year 2019-2020

- a. SAYS will identify and adopt best practice models/EBP's from the clearing house within the three-year period for residential and C.A.T. services. (National Center for Child Welfare Excellence)

Results: SAYS has identified and implemented Cognitive Behavioral Therapy (CBT) and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). CAT utilizes Motivational Interviewing and Dialectical Behavioral Therapy (DBT).

- b. SAYS will develop mature and effective formal processes and infrastructure to meet the needs of all services within three years.

Results: SAYS has addressed this objective in several ways. This effort was led by SAYS' CEO, COO and the rest of the leadership of the organization and included a focus on improving systems during the period of tremendous growth of the organization. SAYS has significantly improved its IT infrastructure for staff and the children in its residences. This has helped make staff communication more effective and timelier and has enabled children to become more computer literate and in some cases savvy. This knowledge is crucial for the children's success for their future in the workforce. The electronic health record, Kaleidacare, has been improved and is used agency wide. We are looking into the use of electronic signatures for parents and guardians on existing tablet devices. The finance department has worked diligently to strengthen its expanded role by having numerous planning meetings with leadership and has implemented improvements in reporting financial and contract information. In conjunction with the Contract Manager, the CFO has assisted in improving reporting to community-based care organizations and managing entities. The HR Manager has worked on streamlining the hiring processes, improving the tracking of training and on related issues. As a continuing objective, leadership will focus on continuing with these strategies. In addition, it will work on ensuring the organization is prepared to bill Medicaid for new community-based services and on the timeliness of financial reporting.

In addition, SAYS has expanded technology to use auto text and robo messages to staff to improve communication and to ensure important information reaches staff in a timely manner. SAYS was able to secure some of the federal CARES Act funding and has used that to address related issues and retain staff. The financial department has upgraded

QuickBooks and has developed the methodology to track this new funding. The fiscal department has contracted with a fiscal consultant for assistance with FFPSA alignment and to streamline fiscal systems.

- c. SAYS will increase facility size and expand office capacity within the three-year period.

Results: SAYS expanded the community services office in 2019, but due to the growth we needed to have the offices redesigned to add office space. In addition, SAYS has plans for a Recreation / office building that can also provide a living space for after a hurricane. This building will allow us to get rid of the office trailer we rent and provide additional office space.

- d. Plan to Reduce the Use of Seclusion and Restraint – SAYS developed and implemented the Plan during the 2014-2015 fiscal year. The goal is to reduce the use of seclusion and restraint by 10% each year.

Results: The residential programs continue to work on this objective. In fiscal year 2019-2020, there were 137 emergency holds, a reduction of 32 compared to the previous year. This number is reflective of the challenges with kids that have severe trauma experiences and emotional disturbances, and DCF’s move to fewer residential beds in the state. Based on analyses during the year, leadership concurred that a significant number of the holds were due to 3 very challenging youths who were referred to higher levels of care; e.g., SIPP. The youths represented kids that were previously referred out-of-state because no provider would take the risk. Further, leadership believes there was a slowdown in aggressive behaviors after Covid-19 stay-at-home orders began. Another promising aspect of the results is that the AB House, which opened in the previous year, had more residents this fiscal year. SAYS’ leadership continues to view this objective as highly important and will continue to review strategies to reduce holds. The Residential administrative staff will be researching other crisis intervention programs to help explore other practices that might help improve outcomes.”

- e. Continue to modernize computer and digital technologies including the electronic health records. Acquire funding to assist in meeting the goals outlined in the Technology Plan 2018-2021.

Results: SAYS has been able to upgrade staff computers, software, phones, and wireless access points. SAYS continues to utilize a network server, electronic health records via Kaleidacare, and web conferencing. SAYS continues to explore funding opportunities to further expand technology use.

SAYS made significant improvements during the past year and beyond in this area, including those shown below. Completed.

1. Uniformity with Lenovo Brand desktop and lap top computers.
 2. Upgraded to cloud-based server (Amazon Web Services-AWS)
 3. Upgraded email format and office software to Microsoft Office 365.
 4. Utilizing Azure encryption software.
 5. Replaced and/or upgraded laptops, desktops, and phones agencywide.
 6. Secured agreement to install fiber internet connection (completion scheduled for Fall 2020).
 7. Purchased and upgraded Zoom Web Conferencing to include encryption.
 8. Purchased upgraded monitors and webcams agency wide.
 9. Purchased EZ Claim Trizetto Clearinghouse to improve billing process
 10. Purchased a second license for QuickBooks to expand use of bookkeeping and payroll.
 11. APC battery backups for desktop workstations.
 12. Purchased Go-To Meeting annual license.
 13. Purchased Bluetooth headset for handsfree communication when in transit.
 14. Purchased/upgraded printers in each building.
 15. Purchased large screen television for use during trainings.
 16. Increased installation and use of VPN for remote staff.
 17. Added second fax line.
 18. Increased use of electronic forms.
 19. Expanded use of on-line training platform (Relias Learning).
 20. Purchased portable hot spots (jetpacks) for remote internet access for staff and clients.
 21. Enrolled in Mobile Iron to manage and monitor company smart phones.
- f. Fundraising – SAYS will continue Capital Campaign efforts to expand services at the Hutson Family Campus. SAYS will develop additional strategies to increase donor engagement as individual donors account for nearly 70% of all SAYS fundraising. The Development Plan and Development Calendar is available for review.

Fundraising - Fundraising efforts will continue to build Recreation/Evacuation Building, Independent Living Village, and Outpatient Program Offices. SAYS will develop additional strategies to increase donor engagement as individual donors account for nearly 70% of all SAYS fundraising.

Results: The SAYS Development Board was created and announced at the 30th Anniversary Celebration which cultivated new relationships for the Independent Living Village campaign. Approximately 50% of the IL Village campaign goal has been reached. Significant, new, grant opportunities were identified and awarded for 20-21 (Example: \$50,000 from Community Foundation). Santa Suits on the Loose 5k was named Best 5k in St. Augustine.

- g. Marketing of SAYS Services - SAYS will develop additional strategies for marketing its services. The plan will focus on engaging the community as donors and volunteers, in addition to reaching potential clients for SAYS community services.

Results: An improvement in shared content, including the use of video, has caused social media engagement to increase by 250%. Working with Hybrid Media, an advertising campaign was created to inform the community of the Mobile Response Team. The campaign includes new platforms including a commercial and billboard. This campaign targets both youth and adults in St. Johns County.

- h. Incorporate a best practice model for residential campus.

Results: The Residential administration team has begun researching various programs found on the Excellence for Child and Youth site; Evidence In-Site: Best Practices in Providing Residential Treatment. The most promising programs that fit our existing structure are “Positive Peer Culture”, “the Sanctuary Model”, and the “Teaching Family Model.”

- i. Continue to improve safety measures including fencing the campus.

Results: SAYS has received several quotes for adding a gate and fencing for the property around SAYS. The funding needed would be well over \$100,000. Have received \$15,000 so far with several grants still pending. In addition, the Board is evaluating the need to use some of the funding raised from the fundraisers for this project as it appears to be a difficult item for donors to want to fund. During the COVID-19 it was determined that this building could also be used as a quarantine site if needed in the future.

- j. Designated staff will obtain High-Fidelity Wraparound Certification to provide training to partner agencies.

Results: The two staff (Dennis Maneja, and Fred Baker) are on target to complete certification in Wraparound Case Management Facilitator, Wraparound Coaching, and Wraparound Trainer (Wraparound 101 thru the coaching from Daniel’s Kids the provider identified as our Wraparound Trainer by mid-2020. Amanda Callahan with the Community Action Team will be in position to complete her training to be a Wraparound Coach in 2020. There was a delay due to her pregnancy. There was a slight delay in the overall process due to logistical issues with Daniel Kid’s and their ability to provide time for their staff to be available.

Upon completion of the certifications identified above Mr. Maneja, and Mr. Baker will be in a position to train new staff in Wraparound 101 and certify St. Augustine Youth Services staff as Wraparound Facilitators.

In May of 2020, SAYS’ staff earned their certification as Wraparound Facilitators, and Wraparound Coaches through collaboration with Daniels Kids, the Ronick-Radlauer Group

and the Department of Children and Families. This certification allows for Staff to train and certify the remaining SAYS' case management staff as Wraparound Facilitators.

Additionally, this past year SAYS' staff facilitated a portion of the Wraparound 101 training process thru a collaboration with Daniels Kids. The Covid-19 outbreak has put this process on hold. The goal for the upcoming year is to certify the remaining designated SAYS staff as Wraparound Facilitators and continue the process of becoming Certified Wraparound 101 trainers.

Covid-19 has also delayed the certification process for Community Action Team personnel as it relates to Wraparound Facilitator certification. The goal is to continue the process with expectation that this can be accomplished with internal staff during the 2020-2021 fiscal year.

- k. Continue to improve trauma informed care initiative beginning with an agency-wide survey.

Results: SAYS leadership focused considerable effort on this objective during the year through ongoing training, discussions on topic during meetings and on specific cases. In addition, a staff member of the MRT began a support group utilizing Dialectical Behavioral Therapy (DBT) and trauma-informed approaches. Therapists in all SAYS Programs have completed an 11-hour Basic Training on Trauma Focused Cognitive Behavior Therapy. In June 2020 multiple Therapists across all SAYS Programs received Advanced Training in TF-CBT. Upon completion of a 12-month Consultation period, those Therapists will be Certified TF-CBT Therapists. Several Therapists in the SAYS CAT Program are already participating in the Consultation process in order to become Certified TF-CBT Therapist.

- l. Continue to expand community-based services, such as Targeted Case Management, Coaches Program, Mobile Response Crisis Team and others when identified.

Results: SAYS determined it was best for the agency to not start any new activities during 19/20 to dedicate time in enhancing the services we currently provide to meet the need. Due to FFPSA, SAYS has started to look at implementing a Specialized Therapeutic Foster Home program in 2021.

- m. Independent Living Program - Create an Independent Living Program for men ages 18 – 23.

Results: SAYS has continued efforts to raise funding for an Independent Living Building. In addition, SAYS assisted Senator Hutson in writing a Housing Bill that supports Independent Living Programs for youth 18 and up that was passed in 2020, creating an opportunity to fund IL programs in Florida.

- n. Major Legislation - Track legislation related to Medicaid, community-based care, and other issues related to children's services. If warranted, the organization will advocate with local representatives on specific issues. SKY

Results: SAYS' CEO has worked closely for the last few years with statewide behavioral health and children's service providers on several important issues. She helped write two bills for the recent legislative session. The first was for foster care transitional youth and housing and the second for child welfare residential reform

- o. Organizational Performance - SAYS will continue to focus on improvements to its organizational performance and quality of services; it will strengthen its Quality Assurance activities; and it will continue to meet the requirements of CARF – Commission on Accreditation of Rehabilitation Facilities. Dennis

Results: SAYS continues to monitor quality and performance of its residential and community-based programs including Community Action Team, Mobile Response Team, and Transitional Life Coaches. It is the goal of SAYS to seek CARF accreditation for these community programs in 2020. SAYS has used the past two years to prepare the new programs for accreditation. They will participate in the survey in November 2020.

- p. Provide CFARS training to SAYS' employees to improve inter-rater reliability.

Results: MCRT, CAT, Coaches and Residential Therapists who are responsible for reporting CFARS must be Certified CFARS Raters. Newly hired Therapists or Case Managers who are required to report CFARS Scores will be required to take the on-line USF CFARS Training within 30 days of being hired. The SAYS Clinical Director will provide an annual Training to help assure inter-rater reliability for all staff who report CFARS Scores. This objective will remain for the future.

- q. Goals Specific to C.A.T.

1. Continued training on wraparound and trauma-informed care for every member of the team.
2. Determining policy around financial eligibility guideline.
3. Improve utilization of assessment tools available with youth and caregivers. In particular Parenting Stress Index, Trauma Assessment Tools, and ANSA-T for adult youth.

Results:

1. CAT has provided the case manager hired in 2020 with Wraparound 101 training and continues to monitor additional Wraparound trainings offered virtually during COVID-19 to maintain the fidelity to the model. Every member of the team has

- completed trainings related to trauma-informed care, trauma-informed treatment and crisis planning.
2. A policy was developed for the financial eligibility guideline and the documents needed for the file.
 3. The Parenting Stress Index was implemented for new intakes in 2020. Trauma assessment tools, including the Trauma Symptom Checklist and Child Behavior Checklist have been utilized.

Status Report on Business Process Improvement Objectives

St. Augustine Youth Services (SAYS) has historically planned and implemented strategies to improve its service, operational and business performance. Based on the enhanced standards in the CARF Behavioral Health Manuals, SAYS developed more formalized goals related to certain business improvement functions. These are described below and complement or expand those that already exist.

CARF identifies certain business functions that organizations should consider when setting goals for improvement. Organizations are not required to set goals for each category. The functions include:

- a. Human Resources
 - b. Accounting and Financial
 - c. Health and Safety
 - d. Quality of Care
 - e. Technology
1. Human Resources - SAYS has historically included goals related to hiring, training and retaining highly qualified professionals in its Strategic and Performance Improvement Plans, including the current version. To clarify or add to existing goals and objectives, SAYS will:
 - a. Maintain staff turnover at 25% or less for the fiscal year.
 - b. Ensure 100% of state required competency-based training is offered or available to all staff.

Results:

- a. Staff turnover rate was 25%; retention rate was 75%. This is exceptional in the behavioral health and social services field, and especially in the middle of COVID-19.
 - b. Not Achieved. SAYS had 55 of 68 full-time employees that met the training requirement. The result is 81%. Part-time employees, though not part of the objective, showed a 33% result.
2. Accounting and Financial – To existing goals and objectives, SAYS will:

- a. Ensure that the Balance Sheet, Income Statement, related budgets, and other relevant reports are reviewed, compared, or approved.
- b. Ensure that all receivables are paid within 45 days (MMA, Medicaid, ME, CBCs, etc.).
- c. Ensure that SAYS is billing for therapeutic services as budgeted.
- d. Collect 95% of all fees due from Medicaid, DCF and CBCs.
- e. Ensure annual audit is prepared by the DCF deadline and have no more than one item identified in the Management Letter.
- f. Ensure expenditures are made in accordance with contractual requirements and schedules so that corresponding revenues can be earned, e.g., salaries and incidental expenses for clients.

Results:

- a. Goal met – Income statements were bound and reviewed by both the CEO and COO. A new budget was developed to reflect inclusion of new programs, COACHES and CAT. Board approved the budget.
- b. Goal partially met – see exceptions below
 - (1) FSS paid their October & November invoices in January due to a change in personnel in their office.
 - (2) Late TCM billing for three clients from June to September in October creating longer payment times, some due to timeliness.
 - (3) ChildNet, both Broward & Palm Beach, had a change in personnel so Oct – Jan invoices were not processed in a timely manner, but caught up in February 2020.
 - (4) Staywell had an internal system error issue with prior authorizations resulting in sometimes as much as a 120-day payment receipt.
- c. Goal met – all of SAYS’ invoicing was complete within the required time period. Below are the Actual vs. Budgeted Revenue:
 - ❑ BH – 74.6%
 - ❑ BBH – 102.2%
 - ❑ ABH – 42.8%
 - ❑ PIL – 104.2%
 - ❑ CAT – 99%
 - ❑ MRT – 100%
 - ❑ COACHES – 100.5%
- d. Goal met – SAYS collected 96.3% for the fiscal year.
- e. Goal partially met – Our auditor passed away during the audit period. SAYS eventually retained Abare, Kresge & Associates, LLC. Final Audit was complete 43 days beyond the required 9 months. All required recipients of the Audit were kept apprised of our delayed status and ETA for the Final Audit. Federal Single Audit was successfully submitted and accepted in a timely manner. SAYS maintained adequate accounting records for the size of the agency with no items identified in the Management Letter.
- f. Goal met - New reports, checks and balance measures put in place to oversee accuracy of Account assignment and proper department Classification.

2. Health and Safety – To existing plans, SAYS will:

- a. Ensure that no child is harmed, harassed or abused in any way by staff or other children.
- b. Meet 100% of the Health and Safety requirements of the State Fire Marshal, AHCA (Medicaid), DCF and Health Department (both for residential treatment facilities).
- c. Review QA Safety Reports to identify trends and ensure safe environment for residents and staff. Deb
- d. Implement other aspects of Risk Management Plan.

Results:

- a. There have been no instances of founded DCF abuse/neglect/exploited children investigations at SAYS for 2019-2020.
- b. Health Department- SAYS Health Department Inspection was completed on 3/13/2020 for all residential Programs. Each received a Satisfactory result. Minor infractions to code included Violation #8. Preparation/Protection. Observed items in refrigerator not dated. Must date and label all items. Observed chicken above ready to eat items. Must arrange by cooking temps in freezer. In addition, at 1 location there was an infestation of drain flies observed. All minor violations were immediately corrected.
- c. Fire Department- The St. Johns County Fire Inspection occurred on 2/4/2020. All noted infractions were corrected and SAYS received an approval on 2/20/2020.
- d. Risk Management plan was revised to reflect content of Zero Suicide training and material. Significant effort went into developing and implementing a COVID-19 response and related policies and procedures for universal precautions, stay-at-home and internet-based school.

4. Quality of Care – To existing plans, SAYS will:

- a. Comply with DCF, AHCA, Managing Entity and Lead Agency contract and monitoring requirements.
- b. Continue to provide ongoing training on cultural competency issues. Cultural Competency Plan is available for review.

Results:

- a. SAYS strives to comply with not only the guidelines established by DCF, AHCA, the M.E, and the Lead Agency in all aspects of contract management but also with all state, federal and county rules and regulations. Program monitoring requirements are carefully identified and reviewed by staff to ensure all programs are compliant with standards. The contract manager works closely with supervisors and staff and shares contract or monitoring information as contracts are amended and items are updated/changed.

SAYS was monitored by Lutheran Services on 1/28/2020 – 1/29/2020. SAYS received a Corrective Action Plan, CAP on 2/28/2020. The CAP focused on providing training to the staff on reporting of Incident Reports within 24 hours and ensuring the CAT Team eligible client families are assessed for financial eligibility. The was closed by 4/20/2020.

- b. This SAYS continually provides training opportunities to staff on cultural competency issues both on campus and in the community. Additionally, we use the Relias computer-based training application to train staff on a yearly basis in culturally competence issues.
5. Technology Plan - SAYS has utilized its annual Technology Plan, which is included in Strategic Plan 2018-2021, to improve its direct services and its business functions. The Technology Plan has several objectives and the progress toward them is shown below.
- a. Consider Cloud Based Server.
SAYS has upgraded to a cloud-based server, Amazon Web Services-AWS. This initiative is in its early implementation stage.
 - b. Increase use of electronic health records agency wide. SAYS has increased the volume of use with Kaleidacare, as our client population has increased. Programs have added forms and increased use of features. However, SAYS will continue to increase utilization of the EHR as there is a lot of room for improvement. This objective relates closely with the increase in telehealth services. SAYS is also reviewing how it assigns case record numbers to all clients.
 - c. Interface agency billing with electronic health records.
SAYS has purchased EZ Claim Trizetto Clearinghouse to improve billing process.
 - d. Purchase and interface human resource software with QuickBooks.
SAYS purchased a second license for QuickBooks to expand use of bookkeeping and payroll.
 - e. Improve competency and increase use of electronic health records and Office 365 agency wide.
SAYS has made some progress increasing Kaleidacare use. Training for staff has been provided as needed. This remains a need and goal for SAYS.
 - f. Increase use and development of electronic forms agency wide.
Electronic forms have been added as needed for all program, specifically community-based programs. This remains a goal for the agency.
 - g. Upgrade WIFI and internet connection campus wide.
Access points agency wide have been upgraded. SAYS also purchased portable hot spots (jetpacks) for remote internet access for clients and staff. Agency is considering a fiber connection.
 - h. Implement use of telehealth for community programs.
SAYS has greatly expanded its use of telehealth services as described earlier in the COVID-19 Response section.

4. Other Achievements

In addition to the achievements described above, which were specifically identified in the Strategic Plan for 2018-2021, SAYS had other significant accomplishments and unexpected challenges. They include those shown below and in Attachment 1:

- ❑ SAYS had a successful audit with a new CPA firm. Due to the increase in federal funds, SAYS had to have a Federal Single Audit Act (FSAA) completed in addition to the regular audit. SAYS was in compliance with the FSAA as well.
- ❑ SAYS conducted a large marketing campaign to assist in reaching the families/young adults that may need the MRT team during COVID-19. An MOU with 211 was reached so that consumers could call for help and MRT services. A commercial and billboard advertisement were created and will air for 12 months.
- ❑ SAYS Clinical Director, House parent and CEO received award from the Florida Coalition for Children in 2019.
- ❑ SAYS helped write two House Bills. The first was for foster care transitional youth and housing and the other for child welfare residential reform.
- ❑ SAYS provided a national Trauma Informed Cognitive Behavioral training with Dr. Hong.
- ❑ 13 SAYS staff are becoming certified to training Redirecting Children's Behavior parenting workbook.
- ❑ Started a parent support group during COVID-19 using telehealth.
- ❑ Received funding from United way.
- ❑ SAYS leadership continued its involvement in advocacy efforts for persons served and as part of its corporate citizenship role in our community. The activities are shown in Attachment 2.
- ❑ Supplied food to families during COVID-19.
- ❑ Supplied baby items for new young mothers during COVID-19.
- ❑ Helped author the State COVID-19 plan.
- ❑ Presented on Florida's plans to deal with COVID-19 on an Association of Children's Residential Centers policy webinar.
- ❑ Successful CBC/ME monitoring.
- ❑ Continued efforts to work on development activities with significant increase in net income.
- ❑ Passed all health inspections.
- ❑ Provided resources for families to help them be able to participate in telehealth and school Two staff have completed requirements to become Certified Wraparound Coaches. Notable upgrades to SAYS technology, which are described later in this report and in the Technology Plan.
- ❑ The Residential Clinical Team received a Sunshine Health Grant to provide therapeutic tools and distance learning supports for residents during the Covid Pandemic. The Clinical Staff was able to purchase therapeutic books, stress management materials, noise cancelling headphones, computers and other learning aids to help the residents better cope during the pandemic.

F. PROGRAM AND SERVICE PERFORMANCE, AND OUTCOME MEASURES AND RESULTS INCLUDES MEASURES OF SATISFACTION, EFFECTIVENESS, EFFICIENCY, AND ACCESS INCLUDES OUTCOME MEASURES OF MAJOR PAYERS

SAYS has developed a system to measure program and service effectiveness, efficiency, and client satisfaction. The agency utilizes the results of the performance and outcome measures to identify strengths and weaknesses of its programs and services and as a method to improve services. In addition, the information is used to identify strategic initiatives for the organization.

The summary of the results for the year July 2019 - June 2020 is shown below. The results reflect specific performance in relationship to the measures and include additional information that is helpful to the organization as identifies trends and issues to be addressed in the future. The report is separated into four sections – client satisfaction, effectiveness, access and efficiency. Within those categories are shown internal objectives and results and externally imposed objectives by the agency’s major payers and those results. Outcome measures are monitored through quarterly management reports, which are distributed to the Management Team and the Board of Directors throughout the year.

Demographic Profile of Children and Adolescents Served and Identification of Trends

SAYS provided services to 52 children and adolescents in its residential programs during the year. The number was slightly higher than the previous year. The demographic profile of children and adolescents served during the fiscal year is shown below.

RESIDENTIAL

| <u>Age</u> | | <u>Race</u> | |
|------------|----------|------------------|----------|
| 6 Years | 0 | White | 25 |
| 7 Years | 0 | African American | 22 |
| 8 Years | 1 | Bi-Racial | 3 |
| 9 Years | 5 | American Indian | 1 |
| 10 Years | 1 | Hispanic | <u>1</u> |
| 11 Years | 4 | Total | 52 |
| 12 Years | 5 | | |
| 13 Years | 4 | | |
| 14 Years | 3 | | |
| 15 Years | 3 | | |
| 16 Years | 10 | | |
| 17 Years | 7 | | |
| 18 Years | 6 | | |
| 19 Years | <u>3</u> | | |
| Total | 52 | | |

CAT

Age

| | |
|----------|----------|
| 6 Years | 0 |
| 7 Years | 2 |
| 8 Years | 1 |
| 9 Years | 4 |
| 10 Years | 4 |
| 11 Years | 5 |
| 12 Years | 11 |
| 13 Years | 4 |
| 14 Years | 13 |
| 15 Years | 6 |
| 16 Years | 8 |
| 17 Years | 7 |
| 18 Years | 3 |
| 19 Years | 3 |
| 20 Years | <u>1</u> |
| Total | 72 |

Race

| | |
|------------------|----------|
| White | 63 |
| African American | 5 |
| Bi-Racial | 0 |
| American Indian | 0 |
| Hispanic | <u>3</u> |
| Total | 72 |

COACHES:

Age

| | |
|----------|----|
| 16 Years | 11 |
| 17 Years | 17 |
| 18 Years | 30 |
| 19 Years | 12 |
| 20 Years | 06 |
| 21 years | 02 |

Race

| | |
|-----------------|----|
| White | 44 |
| Black | 23 |
| Multiracial | 05 |
| Native American | 01 |
| Hispanic | 05 |

Total: 78

Mobile Response Team:

- ❑ Provided 358 assessments during the fiscal year.
- ❑ Diverted hospitalizations in 85% of the cases compared to situation when police intervened before MRT Program began.
- ❑ The number of assessments fell dramatically from March through June 2020 due to the community's Covid-19 responses and school closures. SAYS' leaders will watch this trend closely and implement strategies as indicated.

Outcome Management System

Satisfaction

It is the goal of SAYS to provide a quality service delivery system of care. To maintain quality, SAYS will survey the children to determine their level of satisfaction with the

program and make improvements when indicated. SAYS will survey parents and guardians once a year for satisfaction and recommendations. Refer to Section D. for stakeholder survey and input. Detailed survey reports are available for review. This section also includes some information related to previous surveys, as a means of providing an historical perspective.

Measure:

80% of children, adolescents, families and guardians will be satisfied with SAYS' services.

Measurement will be based on client surveys conducted twice per year, and Parent/Guardian and Stakeholder Surveys twice per year.

Time Frame and Persons Responsible:

For the children, data will be collected in September and March through an approved survey instrument and a report will be issued. The stakeholder survey (See Section D, Input and Recommendations of Stakeholders) is also administered in September and March.

Results:

Family/Guardian Satisfaction and Input

Residential - In March 2020, SAYS conducted its survey of parents and guardians with children in the residential programs. The complete survey reports are available in a separate folder. Highlights of the results of the surveys are shown below.

Of the 11 respondents to the survey, 91% rated the staff as excellent or good to the question about being friendly and courteous; at least 82% rated the facilities as being clean, odor free and homelike; 90% rated the agency as excellent or good; and 82% said they would recommend SAYS to others. In addition, 90% rated the agency as excellent or good and 91% would recommend the agency to others.

Child Client Satisfaction and Input

The complete survey results are available for review in a separate notebook. Highlights of the survey is shown below.

In March 2020, 71% of the 17 children responding thought the staff treated them with respect; 71% thought they received services when they needed them; and 82% thought they were doing better in school.

The community-based programs have used the LSF survey process but will develop alternatives in 2020-2021 fiscal year.

Lutheran Social Services Community Consumer Satisfaction Survey

Lutheran Social Services (LSF) is the managing entity for behavioral health services funded by DCF in Northeast Florida. It conducts numerous monitoring and quality functions of its contracted non-profits including an annual or quarterly satisfaction survey. Many organizations use the LSF survey, which is mandatory for providers, as their sole survey. During fiscal year 2019-2020, LSF had numerous difficulties with the survey software, Behavix, and discontinued its use. Furthermore, DCF announced that it was discontinuing surveys for the 4th quarter due to COVID-19. SAYS is showing only the results of the second quarter survey for these reasons. (We did receive the 1st quarter's report but are not using it because it had only one respondent. We also received a 3rd quarter report, but it had no data for SAYS.)

LSF scored SAYS 95% for 20 completed surveys for Oct-Dec 2019. Below are the individual domains.

| | |
|--------------------------|------|
| General Satisfaction | 100% |
| Access to Care | 94% |
| Involvement in Treatment | 94% |
| Functional Satisfaction | 93% |
| Quality of Care | 93% |
| Outcome of Care | 100% |
| Social Connectedness | 100% |
| Overall Satisfaction | 95% |

Effectiveness Measures and Results for 2019-2020

SAYS provides the most clinically effective therapeutic environment for youth in need of residential care. SAYS will monitor the following effectiveness measures:

Satisfaction Surveys

Measure:

Residential

80% of children, adolescents, families and guardians will be satisfied with SAYS' services.

Community Programs - 80% of consumers, families and stakeholders will be satisfied with community-based services.

Measurement will be based on client surveys conducted twice per year, and Parent/Guardian and Stakeholder surveys once per year. In addition, Lutheran Social Services conducts an annual survey of providers which includes SAYS. This survey will also inform staff of strengths and potential needs for improvement. SAYS will ensure completion of surveys for Lutheran-funded

community programs. Lutheran will complete survey assessments and produce scores. SAYS scores residential satisfaction levels.

Results:

Residential Programs - Accomplished. See Satisfaction Section on page 23.

Community Programs – Have used the LSF survey process but will develop alternatives in 20-21 fiscal year.

Effectiveness Measures

Measure:

Youth placed in SAYS group care will be assured a safe and respectful environment in which to live.

Threshold:

Results: SAYS had 13 calls for abuse this fiscal year with none founded. Further SAYS had 137 emergency holds during the year. SAYS leadership is looking for ways to reduce this number including alternatives to de-escalation training.

Threshold: SAYS expects that youth will attend school at least 80% of the days available without unexcused absences.

Results: Results are shown below.

Little Boys House and Big Boys House Goal Met

1st Qtr – Data not available

2nd Qtr – Students missed only 8 days out of 722 total days.

3rd Qtr – Students missed only 1 day out of 540 total days.

4th Qtr – Students missed no days out of 540 total days. (Possibly related to Covid-19 response)

PIL House

80% of the students achieved this objective.

AB House

80% of the students achieved this objective with few unexcused absences shown.

Measure: It is important that SAYS youth obtain a good education and succeed in their academic goals.

Threshold: SAYS expects that 70% of youth in group homes will receive grades of 2.0/S or better in academic subjects each reporting period.

Results: Successfully home-schooled residents during the closure as a result of Covid-19 pandemic. Three youths graduated from high school this year and all of the other youths advanced to the next grade. The detailed results of grades and attendance are available. The results are summarized below.

Little Boys House and Big Boys House

1st Qtr – Data not available

2nd Qtr – 84% of students exceeded the 2.0 objective, some significantly higher (5 = or >3.0)

3rd Qtr – 75% of students exceeded the 2.0 objective, some higher.

4th Qtr – 100% of students exceeded the 2.0 objective, several higher.

PIL

100% of students exceeded the 2.0 objective for the year and 67% had at least a 3.0 GPA. This was an outstanding achievement for our kids and for SAYS.

AB House

100% of students exceeded the 2.0 GPA Objective for the past school term. No AB clients received a 3.0 GPA or higher.

=====
Measure: It is important that the therapeutic group home environments and support at SAYS provide insight that discourages the youth from running away and give them coping mechanisms to handle their life situations.

Threshold: It is expected that 80% if the youth at SAYS will remain at the program and not have a need to run away.

Results: 60%. Client’s Biopsychosocials will be used to identify youths who have a pattern of running away. Behavior Plans will be implemented early in Treatment to help these individuals develop alternatives to running away.

=====
Measure: SAYS therapeutic intervention will assure that the average post-admission days spent in the community will be 350 for SED clients.

Threshold: It is expected that 80% of the youth admitted to SAYS’ group residential care and 80% of youth in ongoing community care in the C.A.T. Program will stay successfully in the community for at least 350 days per year, which means no hospitalizations, detentions or SIPP placements.

Results: Residential: TBD

CAT: 97% Met

Res: 83%

Measure: Each child in the Pre-Independent Living Program will complete his individual curricula in basic living skills from intake until their discharge.

Threshold: It is expected that 80% of the youth will successfully complete their Independent Living curricula by the time of discharge. The results from the assessment will determine the curriculum.

Results: The data on this measure was not available for this report.

All Programs

Measure: To show improvement over the level of admission scores at discharge on the C-FARS.

Threshold: It is expected that 80% of youth receiving ongoing treatment from SAYS show improved C-FARS score from admission to discharge. The Program Supervisors will report each quarter.

Results: 66%. CFARS will be Administered every six months in order to assess ongoing progress and the possible need for an alternative intervention.

C.A.T. Measures

1. Youths receiving ongoing care will attend school 80% of the days.
2. Youths receiving ongoing care will show improved level of functioning as measured on:
 - CFARS (80%)
 - Living in a Community Setting (90%)
 - Improved Family Functioning based in Child Well-being Domain, NCFAS-G+R (65%). (North Carolina Family Assessment Scale for General Services and Reunification)

Results:

1. Met.
2. Improved functional level
 - CFARS – Met
 - Living in community setting – Met
 - Unproved Family Functioning - Met

Efficiency:

SAYS maintains an efficient service delivery system. It will monitor the following measures to assure that efficiency is kept at a satisfactory quality level.

Measures:

1. Residential - To operate SAYS at a 95% bed capacity each quarter to maintain revenues based on unit costs at a positive cash flow level (Bookkeeper's Report).
2. Residential - Each full-time staff member will complete 40 hours of in-service training each year. Part-time employees will complete 20 hours. This outcome will be monitored every six months, in June and December.
3. TCM - 80% of service plans will be completed within 30 days of admission into the program.
4. Coaches - 80% of wraparound meetings will occur at least every 30-45 days. Nine months due to COVID-19 issues.
5. C.A.T. - Will maintain 35 clients enrolled per month.

Results:

1. Not met
2. Not met
3. Mostly achieved. 75.7% for year.
4. For the year 2019-2020 (February 2020) the COACHES program held Wraparound Meetings every 30 to 45 days 71% of the time. Covid-19 has impacted the wraparound process and ability to hold consistent wraparound meetings. Youth are expressing frustrations with the state's mitigation plans as well as zoom fatigue. The duration of virtual visits is decreasing as youth express a lack of desire for virtual meetings.
5. Met
6. Met

=====

Discharge Criteria Residential:

SAYS has established discharge criteria for each child in the programs. Each child must meet these criteria to be considered for an approved discharge prior to discharge:

Measures:

70% of children in residential group care will need to meet 75% of their treatment objectives. Threshold: These discharge criteria, assigned at intake, will be evaluated and met before a youth will be officially discharged, except in those circumstances in which the discharge criteria is required by the courts or some other authority.

Results: 38%. During the year, SAYS' Therapeutic Group Home accepted several "hard to place children." Several of these youths were previously placed outside of the State of Florida due to other agencies denying them admission. This impacted the measure this year, The expectation is that this result was an anomaly. Therefore, this measure will remain the same.

Coaches

SAYS has established for each young adult in the program a care plan. Each young adult must meet the care plan goals to be considered for an approved discharge.

Threshold: 80% of persons discharged will have met 75% of their care plan goals.

Results: This objective was not measured for the year.

TCM

SAYS has established for each youth in the program a service plan. Each young adult must meet the service plan goals to be considered for an approved discharge.

Threshold: 80% will meet 75% of their service plan goals.

Results: 95 % of the Targeted Case Management population were discharged for goal attainment in the 2019-2020 fiscal year.

C.A.T._- 65% of children will show improvement based upon the NCFAS-G+R Child Well-being Domain. (North Carolina Family Assessment Scale for General Services and Reunification)

Results: Met.

=====
Post-Discharge Residential:

It is the goal of SAYS to follow children served after discharge to ascertain their ability to maintain or improve in a less restrictive setting.

The youths successfully discharged from Therapeutic Group Care will remain in a less restrictive setting for 12 months after discharge. SAYS will be successful 50% of the time in tracking clients and 75% successful in maintaining placements (of those tracked) in less restrictive environments.

Threshold: SAYS expects that the therapeutic interventions provided will assist 80% the youth to avoid more restrictive settings for at least 12 months after a planned discharge.

Results: No overall results. therapists have had a difficulty tracking clients after discharge due to multiple changes in youths' Legal Guardians and difficulty reaching Guardians/Clients after multiple attempts. A new Tracking system will be developed using Support Staff, Student Interns and possibly an additional staff member to help track the continued success of Clients discharged from the SAYS Residential Program.

Post Discharge

Ensure that 80% of the children remain in the community and do not require placement in SIPP, involvement with the Department of Juvenile Justice or inpatient substance abuse treatment for twelve (12) months following conclusion of services from the program.

Results: Met. Only 1 youth was admitted to SIPP.

Access

Residential Goal: SAYS will provide access to the community and to the children and families we serve.

Threshold:

1. SAYS will accept 95% of the children who match admission criteria.
2. SAYS will assess non-admissions for future services. SAYS will track denials major categories not meeting admission criteria; e.g., girls, ADP, wrong level of care, substance use, and too difficult to manage.

Results: TBD

Community Programs' Goal: CAT and Coaches will maintain a waitlist, analyze it, and use for future planning and funding needs.

Results: Met.

G. FINANCIAL REPORT

SAYS had a good year financially in fiscal year 2019-2020, as it did in previous years. The Revenue & Expense Report for the entire organization is shown below. Financial reports by program are not included in the Annual Report, but are available, as is the CPA's Independent Auditors Report (the audit).

SAYS retains an independent CPA firm to conduct an annual audit of the organization. The auditor must utilize federal and state auditing standards and must address certain requirements that related specifically to SAYS grants and contracts, e.g., OMB Circular A-133 and Government Auditing Standards. The auditor found that SAYS accounting and financial practices were acceptable, its financial statements presented in the audit present fairly the financial position of the organization, and that its internal control practices were acceptable, with only one recommendation. The audit report is not attached but is available for review.

| | | | |
|---------------------------------------|----------------------------|--|--------------|
| St. Augustine Youth Services, Inc. | | | |
| Statement of Activities | | | |
| Year Ended June 20, 2020 (Summarized) | | | |
| | | | |
| Revenue and Public Support | | | |
| | Contributions | | \$ 666,961 |
| | United Way | | \$ 700 |
| | Grants | | \$ 1,999,106 |
| | Program Fees | | \$ 2,701,612 |
| | Gain on Sale of Asset | | \$ 1,000 |
| | Interest and Dividends | | \$ 1,747 |
| | Other | | \$ 1,307 |
| | Total | | \$ 5,372,433 |
| | | | |
| Expenses | | | |
| | Program | | \$ 4,274,308 |
| | General and Administration | | \$ 479,121 |
| | Fundraising | | \$ 139,769 |
| | Total | | \$ 4,893,198 |

H. RECOMMENDATIONS FOR CHANGES AND IMPROVEMENTS FOR 2020-2021 AND BEYOND

SAYS has identified activities and functions, based on the results of its outcome and performance measures and its progress toward meeting key goals and objectives of its Strategic and Performance Improvement Plan, which should be addressed in the coming year. In addition, it has identified other issues, based on analyses of its internal and external environments that should be addressed. The sections below summarize some, but not all, of these important issues and provide recommendations for changes and improvements, which will be incorporated into next year's plans.

- ❑ Adapt all corporate functions to meet demands of greatly expanded organization.
- ❑ Adapt to new requirements of The Family First Prevention Services Act and the Quality Standards for Group Care developed by Workgroup established by DCF.
- ❑ Continue planning and fund raising for new buildings – Recreation/evacuation, Independent Living, , Storage Facility and Outpatient Program Offices.
- ❑ Acquire funding to assist in meeting the goals outlined in the Technology Plan.
- ❑ Consider recommendations of USF CLC Study.
- ❑ The Quality Assurance Team recommends continuing to find ways to reduce physical restraints and adverse incidents.
- ❑ Continue efforts to work with school professionals to implement strategies aimed at improving academic performance.
- ❑ Work with the managing entities throughout the State of Florida to acquire contracts with each of them.
- ❑ Improve SAYS marketing to consumers, donors, and partners.
- ❑ Continue focus on staff competency development.
- ❑ Track legislation related to Medicaid, community-based care, and other issues related to children's services.
- ❑ Increase the number of grants for which SAYS applies and apply for at least four.
- ❑ Work with leadership on creating effective procedures for Medicaid Managed Care (MMA) requirements.
- ❑ Provide Trauma-Informed Care leadership to the community-based care agency.
- ❑ Increase advocacy efforts with staff and parent involvement in local and state legislature.
- ❑ Categorize survey data by program.

Program Specific Challenges include:

- ❑ Coaches – sustainable funding, staff turnover (loss of continuity of services), managing waitlist in multiple counties and transitioning to Medicaid billing while maintaining fidelity to wraparound model.
- ❑ CAT – Adjusting to the ever-changing climate in regard to COVID-19 and teletherapy services, Developing a tracking system for referrals and denials for analyzation purposes., continuing the ongoing training for the wraparound model
- ❑ MRT – hiring qualified staff for evenings and weekend coverage; covering large county within 60-minute time requirement; utilization by law enforcement during evenings, medical records upkeep; and reliability of personal vehicles.

Program Specific Priorities and Objectives include:

- ❑ Coaches – funding for sustainability, partnering with schools like Richard Milburn Academy, retaining staff, transitioning to Medicaid services.
- ❑ CAT –Maintain 42-45 clients at a time to decrease waitlist times, Develop and implement referral tracking system, maintaining services amidst the COVID-19 pandemic by staying up to date on health data and laws pertaining to telehealth services.
- ❑ Mobile Response Team – Goals of the Program:
 1. Reduce the rate of children hospitalized under the Baker Act in St. Johns County by 30% the first year, 50% the second year and 70% by year three.
 2. To provide a qualified counselor on site to evaluate children who may be a danger to themselves or others.
 3. To collaborate with families, mental health providers and school personnel to develop safety plans and linkage to needed services.
 4. Achieve an 80% client satisfaction rate for consumers, families, stakeholders.
 5. Increase access to mental health, medical and substance abuse services for children and their families.
 6. Ensure that 80% of the children remain in the community and not require placement into SIPP, Department of Juvenile Justice or inpatient substance abuse treatment program 12 months after service end.
- ❑ Residential and Clinical – Maintain occupancy levels in all houses; ensure safety of all residents and staff; and enhance graduation rates.
- ❑ Adapt all corporate functions to meet demands of greatly expanded organization.

Technology Challenges:

- ❑ Staff need ongoing training on software and web-based tools
- ❑ Use of staff email is not consistent
- ❑ Slow Wi-Fi and internet
- ❑ Reporting external data is tedious and not streamlined (e.g., LSF)
- ❑ Remote access via VPN is not always dependable
- ❑ Under-utilization of electronic health records features and capabilities

Attachments

1. Other Accomplishments 2015-2020

Participate in training the Law enforcement (Sheriffs, City and Beach Police) CIT training. 2015, 2016, and 2017, 2018, 2019 and 2020

Developed a partnership with Boys Town, Sherriff's Youth Ranch and SAYS to work on Legislative issues to advocate for the children we serve 2015, 2016, 2017, 2018, 2019 and 2020

Held a Legislative education day on campus for the North East Region local, state and national political representatives 2016

Invited politicians to have lunch with the kids on campus 2015

Developed a positive relationship with law enforcement 2016-2018

Traveled on several occasions to the state capital to speak with legislators on child welfare issues 2015, 2016, 2017, 2018, 2020

Assisted County Commission 2015, 2016, 2017, 2018, 2019 City Commission 2016-2019 and School Board 2017-2019 to provide proclamations during Child Abuse Prevention Month. 2020 canceled due to COVID-19

Chaired the committee and raised the funding to hold two St. Johns County Behavioral Health Summits 2015, 2016, 2018, 2019, 2020

Children and Staff participated in Dancing with the Stars St. Johns County to raise money for local art education program 2016. Therapist in 2019. Development Director in 2020 although canceled due to COVID-19

Evacuated for the Hurricane and returned to a campus with manual damage. Evacuation plan worked 2016 and 2017

Social Media Presence has increased to raise awareness of mental health issues, reduce stigma and let people know about services SAYS provides 2016, 2017, 2018, 2019 and 2020

SAYS received a Wellness grant from United Way for Staff and Children 2017

Participate on Circuit Human Trafficking taskforce 2016, 2017, 2018

Paneled with MMA insurance companies 2015, 2016, 2017, 2018, 2019 and 2020

Worked with Flagler College to assist with the Soapy Tales Business and mentoring project 2015, 2016, 2017, 2018, 2019

Received a grant for SAYS Employs program- a program that teaches youth employment skills 2016/2017 and 2019 from United way

Successful DCF licensing 2015, 2016, 2017, 2018, 2019 and 2020

No CAP for our Community Based Care monitoring 2016, 2017

Started the Coaches program 2017

Increased Grants 2016,

Added new Board member 2017

Added a graduate to the Board of Directors

Each child got to go to at least one summer camp 2016, 2017, 2018, 2019

Upgraded our SAYS newsletter to an outside printing company. 2016, 2017, 2018, 2019 and 2020

Trained staff in Trauma informed care 2015, 2016, 2017, 2018, 2019 and 2020

Trained staff Wraparound in 101 and 201 2016, 2017, 2018, 2019 and 2020

Staff started a LGBTQ support group for ST. Johns students in High school. 2016

Board member became a trained Peer Specialist 2016

Board member spoke at children's summit as a parent to the community 2016

SAYS Annual Report 2019 – 2020

Participated with writing quality standards for residential groups home for the State of Florida
Co-Chair the FCC Residential Committee 2017, 2018 , 20219 and 2020
Participated in National Pinwheel Parade for Child Abuse Prevention on SAYS campus. Invited
community partners 2015, 2016, 2017, 2018, 2019 and virtually in 2020 due to COVID-19
Implemented Electronic Health Records 2015
Upgraded computers and software 2015, 2017, and 2018, 2019, 2020
Implemented Wraparound on campus and in the community
Trained PTO on Suicide Prevention 2017
Collaborated with community partners to advocate for kids
Clean audit 2015, 2016, 18
Bookkeeper streamlined purchasing process 2017
Invoice process is becoming more automated 2017
Flagler College social media class picked SAYS for two semesters as a class project. Helped with Website
design and social media platforms and post. 2016 -2017
Increased membership/partnership on community committees PACT, St. Johns Behavioral Health
Consortium, Circuit 7 Continuum of Care, Chamber of Commerce ADHA 2015-2020
Expanded community-based services (Coaches Program) into 3 more counties 2015
Added Comprehensive Behavioral Health Assessments to our service array
Started MRT 2015 – reported only county to reduce Baker Acts in state of Florida
Successfully completing insurance authorizations for TGH and BHOS
Participated in Flagler College Job Fairs 2016, 2017, 2018, 2019

Attachment 2
List of Staff External Activities

This document is available for review but is not attached.

Attachment 3
MRT ANNUAL REPORT INFORMATION
Accomplishments, Challenges and Priorities
2019-2020

Accomplishments

- Provided 358 risk assessments to children in St. John’s County.
- Diverted Baker Acts by 82% for the year.
- Provided behavioral health services to the community including mental health and targeted case management services.
- Modified services in response to COVID-19 pandemic and conducted services face to face and using virtual platforms including assessments, individual and family counseling, psychiatric evaluations, medication management and case management.
- Implemented Medication Management Services with a Board-Certified Child Psychiatrist for individuals assessed by MRT.
- Conducted MRT clinical staffing face to face and then through zoom to ensure safety and linkage to needed services.
- Collaborated with 211 to direct all mental health crisis for youth to Mobile Response Team.
- Public service announcement to contact MRT for mental health screening distributed to St. Johns County Schools youth receiving free and reduced lunches.
- Commercial for television and radio is being made.
- Helped facilitate parent support group to all parents served by SAYS.
- At least 11 clinicians received Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) training and 3 Clinicians received additional face to face training with TF-CBT to pursue certification. Most will continue to pursue certification in this best practice. The Targeted Case managers received TF-CBT training.
- Provided Training to Law Enforcement about Suicide Prevention and to Youth about Stress Management and Bullying.
- Expanded to three office locations.
- Youth and Families were provided with needed supplies during hurricanes and during COVID-19 pandemic.
- Prioritized needs of youth in Foster Care by providing care givers consultation for youth experiencing behavioral issues.
- Providing ongoing field placement to graduate students in the mental health field and Clinical Supervision to a registered intern seeking licensure.
- Facilitated the DBT group weekly for teens in the community.
- Provided trainings each summer to students at Southwoods Elementary School summer camp.
- Partnered with Law Enforcement and did “ride alongs” in the community with law enforcement.

- Completed trainings on treatment of trauma and other required trainings including HIPAA and Security Awareness.
- Provide quarterly updates to the Health and Human Services Committee.
- MRT provided services 24/7.
- All of the MRT Clinicians have completed 11-hour online TF-CBT training including case manager. Supervisor, case manager, evening and weekend staff have completed face to face training which was hosted by our MRT Administrative Assistant on virtual format.

Challenges

- Identifying qualified staff for weekday and prn coverage.
- Covering such a large county and meeting the demand to provide an assessment for individuals within 60 minutes or less to ensure safety in the community, 100 percent follow up and providing stabilizing interventions including mental health counseling, targeted case management and psychiatric consultation.
- Law enforcement not contacting MRT when there is a behavioral health crisis in the community.
- Distance of crisis stabilization unit from individual's residence.
- Identifying quality prn staff to support MRT when full time employees have time off for vacation, illness, personal and holidays.

Priorities

- Maintaining quality standard of care and providing access and time for regular trainings for MRT clinicians including TF-CBT certification, if desired.
- Maintain safety in the community by having an adequate staffing pool to meet demand of responding within 60 minutes instead of deferring to law enforcement.
- Continue trainings in the community to increase awareness about suicide prevention and the importance of wrap around services for safety and wellness.
- Emergency response system to capture every crisis call made to hotline.

Note: A longer version of this report is available in the MRT Office.

Attachment 4

CAT FY 2019-2020 Annual Report

(1) accomplishments/successes-

- Performance measures met each month for the fiscal year . This includes:

Performance Measure School Attendance *Target:80% SAYS YTD 92%*

Performance Measure: Improved Level of Functioning, based on CFARS or FARS: Target 80% SAYS YTD: 100%

Performance Measure: Living in a Community Setting, *Target: 90% SAYS YTD: 97%*

Performance Measure: Improved Level of Functioning, based on Child Well Being Domain, NCFAS-G+R Target: 65% SAYS YTD: 100%

- Number of Discharges Living in a Community Setting YTD 2018-2019: 37/41= 90%
- 5 staff members have completed the TF-CBT 11-hour online course. All clinical staff are completing requirements for certification for TF-CBT.
- Lorri Thompson nominated for an FCC award "Champion for Children."
- Anja Lazic nominated for an FCC award "Therapist of the Year."
- Cherryanne Willis nominated for an FCC award "Support Staff of the Year."
- Waitlist data: Number of Individuals on waitlist who ended up in RTC or SIPP services while waiting or CAT services: 0.
- Successful ME monitoring, including praise for leading the way among peer CAT programs in the state in regard to utilization of the respite model and implementing wraparound.
- Every team member had the opportunity for trauma-informed care training and parent support training.

(2) challenges

- Adjusting to changes in the current climate in regard to COVID-19 for service delivery and crisis support. *Challenge will be addressed by maintaining up to date with the latest health data, utilizing best practice protocol for staff and family safety and advocate for continued telehealth provisions under the Public Health Emergency.*
- Reducing waitlist times. *Challenge will be addressed by developing a more effective referral tracker and analyzing referrals and denials.*

(3) priority areas

- ❑ CAT –Maintain 42-45 clients at a time to decrease waitlist times, Develop and implement referral tracking system, maintaining services amidst the COVID-19 pandemic by staying up to date on health data and laws pertaining to telehealth services.

Attachment 5

COACHES FY 2019-2020 Annual Report

(1) Accomplishments

- Wraparound Facilitator and Wraparound Coaching certification earned. This allows SAYS to certify staff as Wraparound Facilitators through an internal process.
- My Life programs expanded and are now in three counties (Volusia, Putnam, and St. Johns). Also, the COACHES program was integral in the development and implementation of a statewide My Life Virtual Fest that was developed in response to the Covid-19 Pandemic.
- Four youth were selected to attend the Youth Leadership Conference at the University of Florida. This allowed for the youth to attend a three-day, two-night peer lead leadership conference that introduced youth to high education possibilities, expanded their system of support, as well as their circle of experiences.
- Partnership with Richard Milburn Academy in Volusia County was expanded. This partnership allowed for case management services to be housed at the school which enabled better client engagement. The COACHES program was also able to provide weekly life skills groups for the students and facilitate a network of support for the students.
- The Wraparound Community has strengthened and expanded. The Monthly Wraparound Champions meeting has included Clay Behavioral, St. Augustine Youth Services, Halifax Behavioral Services, and the Florida United Methodist Children's Home. The growth in the community has contributed to SAYS wraparound taking a leadership role in the community.
- The COACHES program has worked to implement youth engagement strategies designed to address Covid-19 guidelines and the need for physical distancing. The use to technology **and** the emphasis in youth voice have positively impacted youth engagement.

(2) Challenges

- The most impactful hurdle has been Covid-19 and its effects on our youth. Physical distancing has impacted their mental health, and the ability to deliver services. Youth speak of "Zoom" fatigue, and over all frustrations with having to stay at home.
- Coordination with service providers during a pandemic is difficult. It takes longer for service providers to address a particular issue. Housing in particular was a challenge as many transitional youth housing facilities were not taking new clients. Our youth face increased challenges with regards to housing, employment, education, and accessing mental health services.

- Developing a system of support during a pandemic is a significant challenge> As society becomes increasing distant the difficulty in building a team of supports increases accordingly.
- Reducing waitlist (Volusia County in particular) is a challenge. Volusia County is our largest county by population and our largest source of referrals. The waitlist is a chronic issue due to caseloads.
- Funding beyond the System of Care grant is a challenge and maintaining the creativity and flexibility of our program in a Medicaid world.

(3) Priority Areas

- Adapting to Covid-19 as it has an over-reaching impact on our youth, our community partners and our staff.
- Expanding our Peer Support program. Peer support is even more important now as supports fall away from our youth due to Covid-19
- Funding for sustainability
- Maintaining continuity within the staff as they deal with Covid-19 and the impact it has on their lives and the lives of their family. (IE: The potential for staff who are out with Covid-19 for a prolonged period of time, how to care for youth who come down with Covid-19)
- Obtaining Wraparound Facilitator Certification for the team of case managers