



Behavioral Health Partnership Oversight Council

Child/Adolescent Quality, Access & Policy Committee

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Co-Chairs: Steve Girelli & Jeff Vanderploeg

Meeting Summary

Wednesday, March 17, 2021

2:00 – 4:00 p.m.

Next Committee Meeting Date: Wednesday, April 21, 2021 at 2:00 PM via Zoom

Attendees: *Dr. Jeff Vanderploeg (Co-Chair), Kris Adam, Dr. Lois Berkowitz (DCF), Jeana Bracey, Maria Brereton, Tasha Calloway, Mary Cummins, Melissa Deasy, Kim Davis (OHA), Kitty Foley Tyrol, Stacey Forrest, Tammy Freeberg, Andrea Goetz (Beacon), Jessica Guite, Gabrielle Hall, Brenetta Henry, Aleece Kelly, Joy Kaufman, Tanja Larsen, Valerie Lilley (OCA), Stephanie Luczak, Tim Marshall (DCF), Maureen O'Neil Davis, Kelly Phenix, Donyale Pina (DCF), Seth Poole, Eric Schwartz, Erika Sharillo (Beacon), Janerssa Stawitz, and Dr. Stephney Springer (DCF)*

Introductions

The meeting was called to order at 2:02 pm. Co-Chair Jeff Vanderploeg reminded participants that the meeting was being recorded and will be posted to the CTBHP Website.

Comments and Discussion from the March 2021 Meeting

There were no follow-up questions or comments on last month's presentation

Care Coordination Services in Connecticut—Tim Marshall (DCF) provided an introduction to the presentations: Connecticut's Care Coordination Landscape, Wraparound Coordination Outcome Data, Medicaid Cost Savings Analysis for Care Coordination, and Key Takeaways/Q&A. Tim introduced the slide presentation (which accompanies this summary).

Aleece Kelly (CHDI) provided a definition of Care Coordination and discussed the need for Care Coordination and how to reduce stressors for the family dealing with complex behaviors. She referenced providers' increasing efficiency within and across practices and emphasized system integration and coordination being core components of helping families. She presented the importance of looking at social, economic, and environmental factors to a child and family's health. Aleece presented several examples of care coordination in CT. She reviewed the policy and system development recommendations and practice recommendations, such as using wraparound principles, cross training between and across sectors, and addressing social determinants of health.

Mary Cummins (DCF) provided an explanation of wraparound care, stating that it is high fidelity

and home-based model. Additionally, wraparound care is a trauma-informed process that identifies a family's strengths, needs, and vision in developing a plan of care. She talked about Intensive Care Coordination (DCF involved) and provided an overview of providers, referrals, model fidelity, and workforce development of staff and community training.

Joy Kaufman (The Consultation Center, Yale) provided an overview of outcome data collected from the families at entry into services, 6 months later, and after discharge. All data are entered into DCF's PIE. Data collection began in November of 2016 and is through October 2020. The data set includes over 1200 families. There are three methods/screeners: the National Outcome Measures, CRAFFT and Child Trauma Screen. Outcome measures include Pediatric Symptom Checklist, Caregiver Strain Questionnaire, Columbia Impairment Scale, and Ohio Scales. Joy shared pie charts on the number served by region, race, ethnicity, and age, and gender, as well as a bar graph on trauma history by age, rate of substance abuse, and risk for substance abuse. She reviewed a bar graph from the Columbia Impairment Scale for the caregiver report and youth report, the Pediatric Symptom Checklist for the caregiver report and the youth report, the Caregiver Strain Questionnaire and the Ohio Scales. She then reviewed the data on racial/ethnic disparities in care coordination outcomes. She reviewed a bar graph on the Ohio Scales for the caregiver report at intake, the Caregiver Strain Questionnaire: Global Strain Score at Intake, the Child Trauma Screen: Exposure to Traumatic Events at Intake, the length of stay, the average number of child and family team meetings. She reviewed a line graph on the Caregiver Strain Questionnaire Global Scale Change Scores, the Ohio Score Problem Behavior Caregiver Report Change Scores, the Ohio Scale Functioning Caregiver Report. She reviewed perceptions of care from the caregivers. In summary, across every measure there are statistically significant improvements in outcomes for children who receive wraparound care coordination services, there are no racial/ethnic disparities in the rate of improvement and caregivers report high levels of satisfaction.

Kris Noam (Beacon) shared the Medicaid Cost Savings Analysis for Connecticut's Statewide Care Coordination Program. She reviewed the history and context of statewide care coordination and described the families served. The study comparing service utilization and cost with and without care coordination covered the period from September 2015 through October 2018, and examined a sample of 1636 cases. Specifically, Kris reported findings related to the pre- to post-care coordination impact on several variables: a decrease in total spending on lower and higher levels of care; a decrease in expenditures in several specific level of care services; a decrease in total number of youth utilizing lower and higher levels of care; and a decrease in total number of youth utilizing several specific level of care services.

Tim Marshall provided key takeaways, including that wraparound care coordination 1) utilizes a family-driven and youth-guided approach, 2) improves child outcomes regardless of race/ethnicity, and 3) leads to demonstrable cost savings and a decrease in spending for both higher- and lower-levels of care. Tim said it is very important that families are at the center of their treatment and feel their needs are being heard and addressed.

Jessica Guite recommended sharing this information with the CT Five-Year State-Wide Health Information Technology Plan, which Jeff and David agreed to do.

CFAC Update-Brenetta Henry said there was a presentation from Coordination of Care at the last meeting and indicated that CFAC is looking forward to another presentation from one of the subcommittees from the BHPOC. There will also be a focus group in the month of April, partnering with the Department of Public Health. Jeff said there has been discussion with Brenetta and others at CFAC about having a youth from CFAC join this committee as a tri-chair. Brenetta shared that the ICAN Conference will be on the third Thursday of September. The first planning meeting will be in March, and there will be more information to come.

Other Business, Announcements, and Adjournment-Maureen O'Neill-Davis shared that Family Forward Advocacy CT now has a website: www.familyforwardadvocacyct.com. They will be offering trainings on parenting through trauma, helping parents learn advocacy on public policy reform, and helping parents advocate for their child. They also launched a podcast, entitled "Parenting Through Trauma" and the first episode dropped on March 10th which is Child on Parent Violence. They are expecting to drop new podcasts every two weeks. A link to the podcast can be found on the website.

Co-Chair Jeff Vanderploeg thanked everyone for their presentations and participation and adjourned the meeting at 3:30 PM.

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