# LARIMER COUNTY | Larimer County Interagency Oversight Group

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# LARIMER COUNTY INTERAGENCY OVERSIGHT GROUP

Date: June 10, 2021 Time: 11:30 AM – 1:00 PM

Location: Meeting held virtually via Zoom platform

Contact: Marci Pilon, <a href="mpilon@larimer.org">mpilon@larimer.org</a>

# Minutes

Date: June 10, 2021

**Location: Virtual** Meeting held via Zoom

Members Present via Zoom Platform: Thad Paul, Averil Strand, Linda Ott, Mel Jensen, Rachel Blanton,

Maria Campos, Michael Ruttenberg, Mark Burke, Charlie Carter, Greg Otte, Ruben Chacon, Troy

Bowman, Cyndi Dodds, Michele Christensen, Amanda Duhon **Members Participating by Phone:** all virtual participation.

Members Absent: Andrea Clement-Johnson, Sarah Olsen, Jan James, Laura Walker, Meg Taylor,

Michelle Brinegar, Pat Carney, Ali Wright

Other Non-Voting Members Present: Sue Statz, Louisa Wren, Matthew Zehe, Pam Jones, Deb DeLuca-

Forzley

Guests Present: Jody Shadduck-McNally, Veronica Bechara, Stephanie Seng

Recorder: Marci Pilon

- I. Call to Order by Averil Strand at 11:34 a.m.
- II. Introductions: Agency Updates Announcements
  - Maria Campos: Working on opening access to new state detention bed only facility and are also working on a new treatment model.
- III. Review and Approval of Minutes from the May 13<sup>th</sup>, 2021, meeting
  - A motion for approval was made by Cyndi Dodds and seconded by Maria Campos, Motion approved and passed.
- IV. Spotlight: CTRAC (Child Trauma & Resilience Assessment Center) Veronica Bechara & Stephanie Seng
  - CTRAC Offerings: Assessment, Training & Community Collaboration
  - Who is our community? University partners, Larimer County Partners, Statewide Partners
  - CROP/SAMHSA Grant: CTRAC is the primary provider for the SAMHSA grant. The grant ends 9.30.21. The concept behind the work is a resilience-based approach. Attachment, regulation, Competency
  - A new paradigm: moving from event/diagnostic-focused paradigm to a trauma informed paradigm.
  - SAMHSA Grant in review: article: Child Welfare Journal (Vol. 98. No.4)
  - We have screened 3301 youth from 2015 to 2019.

- We focus on Complex Trauma.
- How is the trauma impacting the child? We do interviews with cognitive screeners, surveys and look at psychosocial aspects. Multi step process aims to understand and effectively evaluate the impact of trauma.
- Healthy brain and the abused brain looking at brain scans. The Limbic System is taking everything in. A brain affected by trauma has increased activity in the Limbic System and less ability to interpret stimuli in the temporal lobes.
- Working on areas of attachment, regulation & competency
- "Collective Impact Framework" can be used to organize all parts of a team working together.
- Next steps:
  - i. LCDHS relationship: training, adult assessment, school collaboration, New SAMSHA grant (we will be applying to feds for a 6–9-month extension. New grant is focused just on Larimer County.)
- Thank you for the great partnership and work you have done, we can see growth in the understanding of trauma, and how to address it. It is not about judging the behaviors but seeing what is really going on.
- We are willing to do another Community 101 or Trauma 101 in the next few months.
- We hope to expand work with kids before too much trauma.
- Open to other collaborations

## V. Next Year's Budget Discussion

- Budget subcommittee meets 1-2x/year.
- Send Marci an email if interested in joining this committee.
- \$263,328 = Money to use from the State. Have note used this yet.
- Meaning Minimum & HB 1451 Outcomes Dollars is what we get from the state the State has a formula for this.
- \$444K coverage FY21 Projection
- \$584,672 total money for carryover
- Rate increases are changing across child welfare.
- Potential to have a lot of carry over in the coming years.
- May have different opportunities to support kids and families.
- VI. Budget Committee Membership/July Meeting These will be virtual.

#### VII. Budget Review – Sue Statz (See attachment)

- Report of our expenditures through month of May
- YTD 338K paid down/paid back.
- Total expenditure: 517K = under budget than anticipated
- Overusing home based services, we will see a shift back now with the Covid change.

## VIII. Placement Data review – Sue Statz (see attachment)

- Two full years of data
- Number of referrals was 576 in April 2021, with 166 screened in
- What is this change linked to?

## IX. Spotlight:

- July there will be no meeting.
- August: Mark Burke The Matthews House Youth Advisory Board and other programs will present.
- Go into an executive session to maintain confidentiality of youth coming.
- Going to be an amazing event with kids coming.
- Send questions, or what you want to hear to Marci. She will send to Mark Burke so the youth know what is coming.
- Email Marci with speaker ideas for September.

## X. Old Business

None

#### XI. New Business

- Family First: Build a pilot program for kids in RTC. Qualified RT programs
  must be certified. Federal funds pay for Residential cost, but as of
  September, this will change. Partnering with ASO to do the assessments
  and they will make recommendations. There will be a pilot across the state
  to practice. Starts officially Oct. 1st.
- We are different from other counties because we only have four kids in residential care.

## XII. Adjourn

- Motion to Adjourn was made by Cyndi Dodd's, Motion accepted and approved.
- Adjourned at 12:50 PM

## **Next Meeting:**

August 12<sup>th</sup>, 2021 11:30 AM – 1:00 PM Zoom Meeting

# **Larimer County ADP\* by Placement Type**

		Medicaid			New		CYDC (Co				Other							Congrega							Family Se	
Psychiatric	Residential		New Commitments	Commitment (ADP)	New Detent. Admissions	Detention (ADP)	CYDC (Colorado Youth Deten. Continuum)	DHS Total	Run Away	Independent Living		Sub Total	Psych Hospital	Psych Residential	Residential	Group Center	Group Home	egate Care	Sub Total	Private Foster Care	County Foster Care	***Kin Foster Care	**Kinship Care	Trial Home Visit	tting	
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21	4							303	2	2		12	I⊢	0	4	7	0		287	24	76	24	157	6		May'21

Key
\*ADP = Average Daily Population

\*\*Kinship Care = Child in the home of Kin and not in Custody of DHS
\*\*\* Kinship Foster Care = Child in home of Kin and in Custody of DHS

# of Referrals Screened In

185(28%)	669	Apr'19
89(29%)	306	Apr'20
152(25%)	599	May'19
103(35%)	293	May'20
132(31%)	420	Jun'19
125(40%)	312	Jun'20
146(32%)	456	Jul'19
		July'20
150(29%)	525	Aug'19
125(34%)	363	Aug'20
162(24%)	662	Sep. '19
121(29%)	419	Sep'20 Oct.'19
170(26%)	660	Oct.'19
151(29%)	517	Oct. '20
169(29%)	584	Nov. '19
130(26%)	491	Nov. '20
163(27%)	596	Dec. '19
102(29%)	351	Dec. '20
144(26%)	553	Jan. '20
141(32%)	442	Jan. '21 Feb. '20 I
171(28%)	601	Feb. '20
%) 129(26%) 11.	504	Feb. '21
117(28%)	420	Mar.'20
142(27%)	524	Mar. '21
89(29%) 1		Feb. '21 Mar.'20 Mar. '21 Apr.'20 Apr. '21
166(29%) 1	576	Apr. '21
103(35.2%)149(28.8	293 517	May'20 May'21

EXPENDITURES THRU MAY-21				
LCIOG BUDGET / EXPENDITURES SFY 20-21	HB1451	1451 EXP	DHS COVERED	TOTAL
	BUDGET	YEAR TO DATE	YEAR TO DATE	PROJECTED EXPENDITURES
PROGRAM / SERVICE - FAPT				
COACHES - FAPT	117,450	11,255	93,190	125,334
20% COORDINATOR SALARY - FAPT	15,435	5,961	10,885	15,435
FAMILY ADVOCATE - FAPT	69,055	3,896	81,175	87,975
HOME BASED - (FFT/MST/FCC/SAFY/IFT)	67,100	14,227	116,747	142,881
SPECIALIZED SERVICES (DD, TRUMPET, MOSAIC)	21,475	8,982	-	13,473
DAY TREATMENT	10,066	-	-	-
HARD SERVICES FUNDING (RENT, GAS, TRANS, FOOD)	33,554	12,429	-	13,559
SUB TOTAL FAPT	334,135	56,750	301,997	398,657
PROGRAM -				
PLATTE VALLEY THERAPIST	3,923	-		-
TRAUMA INFORMED CARE	-	-		-
LCIRC (OFFENSE SPECIFIC PROGRAM)	53,422	27,324	36,914	53,422
PREVENTION PLUS PATHWAYS	114,589	27,600		36,800
SCHOOL TRUANCY PROGRAMS	28,260	15,046		28,260
SUB TOTAL PROGRAM	200,194	69,970	36,914	118,482
TOTAL	534,329	126,720	338,911	517,139
		DHS reinvestment		
Samuela nan MOU		based on YTD resid.	Ć402.057	
Formula per MOU:		Utilization	\$402,857	
17- # residential placements				
multiplied by ave. cost of residential				
multiplied by 46% = Reinvestment				

# **Definitions for Placement Type**

Family Setting:

<u>Trial Home Visit</u>: A child in DHS custody, living away from their parent, is transitioning home. Prior to the trial home visit, criteria and expectations for the visit are defined and submitted to the court.

**<u>Kinship Care:</u>** A child is **not** in the custody of the Department and is in the care of relatives or friends of the family.

**<u>Kinship Foster Care:</u>** A child is in DHS custody and is placed with a relative or family member that has been certified, or is in the process of being certified, by the Department.

<u>County Foster Care</u>: The child is in DHS custody and is placed in a Larimer County licensed foster home. The caregivers are not related to the child.

**Private Foster Care:** The child is placed in a foster home that is licensed by a Child Placement Agency (CPA). That CPA provides oversight and monitoring of the home.

# Congregate Care:

<u>Group Home:</u> home-like setting, in which a number of unrelated children live for varying periods of time with a single set of house parents,

<u>Group Center:</u> placement where a number of unrelated children live for varying periods of time with a rotating staff of trained caregivers.

<u>Residential Child Care Facility (RCCF):</u> facility that provides 24-hour care, with rotating staff coverage.

<u>Psychiatric Residential Treatment Facility (PRTF):</u> non-hospital facility offering intensive <u>inpatient services</u>

**<u>Psychiatric Hospital:</u>** Hospitalization services for youth that are displaying mental health concerns, threatening to self-harm or may pose a risk to the safety of others.

## Other:

<u>Independent Living</u>: Adolescent who is in DHS custody and is being assisted to become independent. They may be living in their own apartment or sharing housing with another individual or family.

**Run Away:** A child or adolescent that is in DHS custody and has left the home of their caregiver, without consent, and their whereabout is unknown.