Butler County Family and Children First Council Shared Plan SFYs 2020-2022
Shared Plan Update Report SFY 20

Current FCFC Initiatives: Anti-Human Trafficking Coalition; Butler County Coalition & Addiction Taskforce; Census County Committee; Community Health Improvement Plan (CHIP); Cross Systems Training; Engage 2.0 SW Ohio; LIVE (Social Determinants & implicit Bias Workgroup); Multi-System Youth Collaborative/Wrapperound; No Wrong Door; Opiate Mapping Project; Parent Project; Partnership to Reduce Infant Mortality (PRIM); PAUSE Respite; Resiliency Project; Resource Expo; SENSE Committee (Lakota Social-Emotional Workgroup); Suicide Prevention Coalition; Trauma Informed Organizational Change; Trauma Workgroup Southwest Ohio (DD and OHMHAS).

Shared Priorities

Become a Resilient, Trauma Informed Community
Build capacity for trauma informed care (TIC) through increased training and improved understanding of trauma, social emotional learning, and resiliency in cross-sector systems.

Improve Outcomes for Transition Age, Multi-System Youth
Increase system collaboration and enhance resources to improve outcomes for multi-system youth (especially transition-aged 14-21 yrs.).

Shared Outcomes

Increase # of trauma trained individuals & organizations and move towards a community-wide standard and shared language for TIC

Strengthen care coordination, supports and systems collaboration for high need, multi-system youth to improve individual/community outcomes

Shared Measurement

-# of individuals & organizations trained
-% of increase in knowledge and/or implementation of TIC practices

-# of individuals served in Wraparound.
-% of referrals, enrollments, & exits by system (s)

Mutually Reinforcing

-Define Trauma Informed Community components
-Train cross sectors
-Infuse trauma informed care in youth/family serving systems
-Survey training/service gaps
-Select, implement, & measure TIC standard

-Fiscal mapping of systems funding to support these youth
-Monitoring data for enrollment & successful exits
-Studying system-specific and shared challenges with this population including service gaps & resources for youth behavioral health, education/employment, life skills, mentoring, justice system involvement, prevention, post-secondary options.
-Collect baseline data & create dashboard for shared data
-Target empathy gap towards youth/improve warm-hand off
-Study/implement best practices
1. Identify any barriers in implementing the plan (i.e. data collection, data tracking, funding, infrastructure, etc.)

Shared Plan goals were integrated into council meetings and trainings, sub-committees, and meetings with like-interested partners were scheduled for the spring and summer of 2020. Unfortunately the COVID-19 pandemic had many partners scrambling to meet basic needs of the youth & families that we serve and re-inventing the way they complete service delivery. This has delayed some key partner meetings, scheduled trainings that would not translate to the Zoom platform, and decreased the number of Wraparound youth typically served per year due to decreased referrals from the courts, children services, and schools.

- **Resilient Trauma-Informed Community Goals:** Trauma workgroup and intensive trauma trainings were re-structured or postponed as needed while responding to the unique circumstances and challenges that COVID-19 has brought. In SFY 21, efforts will be re-focused on surveying for training needs and gaps, selecting & measuring TIC standards, and hosting additional Trauma Informed Care Train-the-Trainer sessions when it is safe to train in-person.

- **Transition-Aged, Multi-System Youth** - Fiscal mapping of systems funding to support youth was started through the region’s Engage 2.0 grant project and is in the data collection phase. Monitoring data for enrollment & successful exits is on-going. For SFY 21, focus will increase on studying system-specific and shared challenges with this population. Training is being hosted in July 2020 for youth in the summer employment program and in August 2020 to help inform providers who work with the Ohio Means Jobs System and subcontractors working with youth in summer employment on trauma informed practices and developmental relationships. The Wraparound team is studying best practices in resiliency and peer work from SAMSHA and the national wraparound initiative to learn more about best practices for transition-aged youth, including helping youth advocate and find their voice.

2. Identify any successes/how implementing this plan has worked to strengthen the council and county collaboration.

As shared above, Shared Plan goals were integrated into council meetings to start the process of informing partners and gathering a team to support trauma-informed communities and transition aged youth goals.

- **September 2019** - Focused on approving goals and understanding the next steps set forth in the plan.
- **November 2019** - Completed 2020 Shared Plan Activity on Transition-Aged Youth.
- **January 2020** - Hosted Resilient Community mini training and completed 2020 Shared Plan Activity on Trauma-Informed Care.
- **March 2020** - Hosted Systems Leaders Roundtable with Directors from Butler County Children Services & Job and Family Services, Department of Disabilities, Educational Service Center, Juvenile Justice, and Mental Health & Addiction Services.
- **May 2020** - Originally scheduled to complete facilitated trauma informed care discussion & workgroup, but re-scheduled due to Zoom platform and needed to provide space for COVID 19 provider updates. Council members asked to serve on summer workgroup to complete trauma-informed goals (due to meeting restrictions and vacations-kick-off was moved to the fall 2020).

Additionally the Butler County Family & Children First Council received a 5 year SAMSHA Strategic Prevention Framework grant that started on October 1, 2019. This grant builds on these shared plan goals to help prevent & reduce alcohol & marijuana use for youth ages 9-20, increase prevention capacity, collect cross sector data, and stop the cycle of intergenerational trauma & substance use. Grant funding also provides a budget for training and data collection components. Another success this year was that the 2 mental health providers that provide services to the majority of youth in Wraparound began meeting to discuss ways they can work with Butler FCFC to become trauma-informed with a shared language among agencies and be better prepared for Wraparound meetings. Schools have also been interested in learning how to incorporate trauma informed practices with social-emotional learning while increasing resiliency in staff & students, this allowed for the training of 3 new school districts (including counselors, teachers, administrators & support staff) and social workers who serve in all the Butler County school districts.
Report on Indicator Data # 1 (Provide data for each outcome indicator listed on the Shared Plan. List only ONE outcome per page. This page can be duplicated as needed).

**Shared Outcome 1: Trauma Informed Community**
Build capacity for TIC through increased training and improved understanding of trauma, social emotional learning, and resiliency in cross-sector systems.

<table>
<thead>
<tr>
<th>Shared Measurement Indicator(s):</th>
<th>Baseline Data</th>
<th>Current Year Data</th>
<th>Direction of Change (+, -, NC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>G1A: Individuals Attend Trauma/Resiliency Trainings (572 individuals/131 organizations/7 trainings)</td>
<td>Data: 421 Year of Data: 2019</td>
<td>Data: 952 Year of Data: 2020</td>
<td>126%</td>
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<tr>
<td>G1B: Number of Trauma “Train the Trainers” completing comprehensive training (5 sessions targeting: Social Service/Health; Educators/Counselors/Administrators; Early Home Visitors/CHWs that served a total of 110 individuals)</td>
<td>Data: 91 Year of Data: 2019</td>
<td>Data: 165 Year of Data: 2020</td>
<td>81%</td>
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<tr>
<td>G1C: Number of Agencies Meeting Trauma Community Standard (shared standard not yet chosen/tracked-goal was postponed due to COVID-19)</td>
<td>Data: 0 Year of Data: <strong>2019</strong></td>
<td>Data: 0 Year of Data: 2020</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**List the data source(s) for the indicator(s):**
Sign-in sheets and pre/post-tests collected by FCFC Training Coordinator.

**Identify any key findings (explanation of data findings; FCFC actions taken in response to key findings, etc.):**
The Butler County FCFC held 46 trainings that trained 3,030 professionals and community members from over 150 partner agencies in topics including Casenotes & Documentation, Developmental Relationships, Early Intervention, Gambling & Gaming, Gangs, Implicit Bias, Infant Mortality, Motivational Interviewing, Prevention, Substance Use, Suicide Prevention and Trauma & Resiliency. Whenever possible the theme of using a “trauma-informed” mindset and awareness of Adverse Childhood Experiences (ACES) and Protective Factors for Resilience was highlighted and discussed.

There were 10 trauma & resiliency trainings that trained 952 participants from 131 agencies. Additionally 7 intensive Trauma/Resiliency “Train the Trainer” and/or Learning Circles were hosted that trained 165 individuals this focused on staff members working in early intervention, infant mortality reduction, 3 school districts, Success Liaisons who serve as social workers in the Butler County Schools, and FCFC Staff. As many trainings have been hosted and are becoming more readily available in a virtual format, the FCFC will survey about training needs and next steps to take this work to the next level. Qualitative data points to a need for on-going training including how to respond to trauma behaviors and increase self-care during a pandemic.
**Shared Outcome 2: Systems Integration For Transition-Aged Youth**
Increase system collaboration and resources to improve outcomes for complex need, multi-system youth (especially transition-aged 14-21yrs).

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<tr>
<td>G2A: Number of Youth Referred to Wraparound</td>
<td>Data: 75 Transition Aged (164 Total) Year of Data: 2019</td>
<td>Data: 48 Transition Aged Youth (112 Total) Year of Data: 2020</td>
<td>-36%</td>
</tr>
<tr>
<td>G2B: Number of Youth Enrolled in Wraparound</td>
<td>Data: 45 Transition Aged (164 Total) Year of Data: 2019</td>
<td>Data: 68 Transition Aged (200 Total including carryover from previous year) Year of Data: 2020</td>
<td>51%</td>
</tr>
<tr>
<td>G2C: Monitoring of Youth Barriers/Success by System-Quantitative &amp; Qualitative Data</td>
<td>Data: Of the 45 Transition Aged Wraparound Youth Enrolled: 24 carryover clients still enrolled &amp; receiving services and 21 exits: 9 Successful &amp; 12 Unsuccessful (Dropped out, state custody, moved out of county, etc.) Year of Data: 2019</td>
<td>Data: Of the 68 Transition Aged Wraparound Youth Enrolled: 21 carryover clients still enrolled &amp; receiving services and 47 exits: 33 Successful &amp; 14 Unsuccessful (Dropped out, state custody, moved out of county, etc.) Year of Data: 2020</td>
<td>12.5% Decrease in Carry-over clients 266% Increase in Successful Discharges 16% Increase in Unsuccessful Discharges</td>
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Discussion of the SFY 20 Results and needs & gaps for youth will be completed in August 2020 with clinical committee and systems directors.
System Involvement/Area of Need for Youth Served in Wraparound FY19

- Mental Health (229): 91%
- Job & Family Services (195): 77%
- Special Education (187): 39%
- Developmental Disabilities (98): 32%
- Physical Health System (80): 31%
- Children Services (79): 8%
- Addiction Services (20):

System Involvement or Area of Need for Youth Served in Wraparound FY20

- Mental Health (196): 98%
- Job & Family Services (172): 86%
- Special Education (140): 70%
- Developmental Disabilities (70): 35%
- Physical Health System (59): 30%
- Children Services (62): 31%
- Addiction Services (13): 7%
3. List the data source(s) for the indicator(s):
   Apricot which is the Wraparound database; Fiscal Mapping which is in-process by consultant in collaboration with Engage 2.0 grant.

Surveys seeking input from families, youth, providers, and systems leaders will be reviewed for SFY 20 in Fall 2020. Additionally, systems leaders will share their data points & benchmarks that will be helpful in improving overall outcomes for this population during these significant transitional years. These meetings including systems Directors and Clinical Committee will be completed in August/September 2020.

4. Identify any key findings (explanation of data findings; FCFC actions taken in response to key findings, etc.):

   Butler County had fewer youth referred this year, which we believe is a direct result of COVID as referrals from children's services, juvenile court and schools decreased (as well as from other partners). We did see an increase in youth enrolled in the program and an increase in the number of transition aged-youth. We will continue to track these numbers for trends. Mental Health was the number one referral source, followed by Developmental Disabilities, hospitals and parents/young adults in SFY 20; however, last year referrals were from Juvenile Courts, Mental Health and DD. Mental Health has been the number one area of need for the youth we serve, followed by job & family services involvement and special education in SFY 19 & 20. To increase Wraparound enrollment and support of transition aged youth, we are working with children services and local schools to re-educate staff members about the service, meeting with managed care (starting with Caresource) to try to engage their care managers and members earlier before a crisis arises & discussing ways to engage with court referrals for an improved warm-hand off.

   Multi-system Youth Funding availability has increased conversations with systems partners on how to ensure youth are best served in the community in the least restrictive environment whenever possible. COVID-19 highlighted the difficulties when therapies and home-based services ended or were suspended for a period of time and increased difficulties in group home & residential treatment placements. Meetings were held with Children's Services to explore the gap in prevention services as the complexity of cases increases. More families have been referred with little system involvement in deep crisis who have not engaged or are not eligible for service & are requesting residential treatment for their youth.