



Child Welfare System Interim Study Committee

County Priorities to Address Colorado's Continuum Crisis
August 22, 2023

Commissioner Scott James, Weld County

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CHSDA Data

Children in inappropriate, stopgap settings when out of home placement is being searched for- CHSDA Monthly Data Collection

	County Offices/Hotels	Hospitals		Detention		Monthly Totals
	# of children/youth in county custody that spent time in county offices or hotels as a stopgap setting (at least overnight) <i>*does not include FYIT</i>	# of children/youth in county custody that spent time in hospitals past medical necessity while placement was being searched for	the # of children/youth <i>not in county custody</i> but where the county was involved, that spent time in hospitals past medical necessity while placement was being searched for	the # of children/youth in county custody that remained in detention but were releasable to a placement, but no placement was located	the # of children/youth <i>not in county custody</i> but where the county was involved, that remained in detention but were releasable to a placement, but no placement was located	
Nov22	12	8+	<i>Not collected</i>	<i>Not collected</i>	<i>Not collected</i>	n/a
Dec22* <small>(56 of 64 counties reporting)</small>	7	5	<i>Not collected</i>	<i>Not collected</i>	<i>Not collected</i>	n/a
Jan23* <small>(54 of 64 counties reporting)</small>	4	10	<i>Not collected</i>	<i>Not collected</i>	<i>Not collected</i>	n/a
Feb23* <small>(51 of 64 counties reporting)</small>	5	18	7	14	24	68
March23* <small>(51 of 64 counties reporting)</small>	15	13	6	16	23	73
April 23* <small>(51 of 64 counties reporting)</small>	7	14	6	11	28	66
May 23* <small>(54 of 64 counties reporting)</small>	7	10	6	14	16	53
June 23* <small>(54 of 64 counties reporting)</small>	14	20	6	11	18	69

County Priorities

- Sustainable funding for the existing CDHS-managed pilot beds at a couple residential providers with an enhanced rate and no eject/no reject policy AND funding to expand and guarantee these types of beds.
- Increase rates for QRTP providers while also adding enhanced licensing or contract provisions
- Increase the number of and supports for treatment, therapeutic and professional foster homes, kin, and families supporting children/youth with complex needs
- Invest in a statewide children's behavioral health system of care
- Establish a point person at the Governor's office in a leadership position dedicated solely to this topic to expedite existing efforts, or establish another mechanism to expedite work, ensure accountability, and clarify roles.

Treatment Continuum for Out-of-Home Placement

Family-like Settings	Short-term Stabilization	Specialized Group Settings	Treatment-focused Residential Settings
<ul style="list-style-type: none"> ● Kinship ● Foster Care <ul style="list-style-type: none"> ○ Traditional ○ Therapeutic ○ Treatment ○ Professional 	<ul style="list-style-type: none"> ● Assessment and stabilization ● Respite, foster ● Respite, residential 	<ul style="list-style-type: none"> ● Non QRTP-RCCFs ● Laradon- IDD ● Prenatal, postpartum or parenting ● Survivors of or those at risk of sex trafficking ● Supervised independent living 	<ul style="list-style-type: none"> ● Qualified Residential Treatment Programs (QRTPs) ● Psychiatric Residential Treatment Facilities (PRTFs) ● Division of Youth Services Facilities

CDHS- Managed Pilot Beds

18+

~\$4.7million annually to maintain 18 existing beds

- 12 at Southern Peaks
- 6 at Third Way

+ Additional provider incentives to expand the capacity dedicated to kids with the most complex needs

Increase Rates for QRTP Providers

Capacity: 17 Providers that are licensed to operate up to 177 beds.

- 137 are operational (17% of those that are operational are available)
- 40 (22%) of all licensed beds are non-operational due to staffing shortages.

A Focus on Quality

“At this early stage of QRTP implementation, states are primarily focused on implementing the core components (assessment for eligibility, court oversight, claimability, length of stay). However, to know whether a reformed congregate care system vis-a-vis QRTPs work, QRTPs need to be evaluated against quality/outcome benchmarks such as evidence of or fidelity to trauma-informed treatment, family engagement and involvement, the readiness of youth to return to the community, maintenance of family-based settings and connection to the community, and progress towards permanency goals.”

-2023 Report from the American Academy of Pediatrics and Chapin Hall

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Enhance Supports for Specialized Foster Care Settings, Kin, and Families

Specialized Foster Care



Professional
\$311 base rate

2

Treatment
\$231 base rate

14

Therapeutic
\$178 base rate

118

Traditional

Crisis Resolution Team (CRT) Pilots

19

of 64 counties

Invest in a Statewide Children's Comprehensive Behavioral Health System of Care

County vision: Implement a single, statewide, coordinated System of Care that serves all children, youth, and young adults in Colorado, under the age of 21, regardless of payor, insurance or income, through a single point of access.

Families will experience seamless access to trauma-informed, necessary services and supports including:

- Intensive and moderate levels of care coordination, using a High-Fidelity Wraparound approach that includes: Low staffing ratio of care coordinator to child/family; Delivered by an independent entity/provider (conflict-free /no conflict of interest)
- Standardized Screening and Assessment – using CANS followed by an additional clinical assessment if determined to be medically necessary.
- Intensive, Evidence-informed in-home and community-based services (for example: MST, FFT, TF-CBT)
- Out-of-home treatment services (PRTF)
- Mobile crisis response and stabilization
- Parent and youth peer support services
- Respite care
- Flex funds to support individualized needs that are otherwise not reimbursable

Invest in a Statewide Children's Comprehensive Behavioral Health System of Care

System of Care Outcomes & Return on Investment

- Decreased behavioral and emotional problems, suicide rates, substance use, and juvenile justice involvement
- Reduced use of inpatient psychiatric hospitalization, emergency rooms, residential treatment, and group care
- Reductions in children going out of state to access care
- Increased school attendance and grades
- Fewer school failures
- Improved family functioning and stability in living situation

**Invest in a
Statewide
Children's
Comprehensive
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of Care**

How much will it cost?

Next Steps: Fund an analysis of utilization and expenditures of the populations of children, youth, and young adults to be included in the System of Care

Expediting Existing Efforts

- Governor's office point person
- Data analysis needs
- CDHS-contracted, specialized PRTF facility at Fort Logan expected in early 2025
- Timothy Montoya Task Force
- State-level staffing process



Thank you!

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