



# Voluntary Care Management Program

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Implementation and Rollout Plan

# If not now, when?

- **Families have been asking for this for a long time**
- **DCF is changing its focus**
- **Desire for families to have consistent treatment statewide**
- **Better together- partnering with families and communities**



# Voluntary Care Management Program:

**A program designed to work with families that are in need to be connected to the appropriate services and supports with no financial barriers or child welfare stigma**

**change.  
challenge.  
opportunity.**

# DCF's Response to Families:

DCF will focus on families that require Protective Service Intervention.

Voluntary referrals going to Beacon will:

- Increase and improve access to care for all families
- Improve consistent statewide practice
- Increase and improve meeting the needs of families



# Eligibility Criteria for VCM

- An individual who is a child or youth through the age of 18
- Child/youth has been diagnosed with an emotional, behavioral or substance use disorder
- Child/youth with a developmental disorder has one of these presenting needs:
  - An emotional, behavioral or substance use disorder that is the primary purpose of the request for voluntary services.
- The family is willing to engage in services and provide necessary documentation (including financial information)

# Eligibility Criteria for VCM (Cont.)

- Necessary participation of parents/caregivers in both treatment planning and treatment is expected
- Once involved if a child/youth needs placement outside the home to address behavioral health needs, there must be a treatment plan that outlines a comprehensive plan for the child's return to the home

# Exclusionary Criteria for Voluntary Care:

The family shall **not** be eligible for the VCM under the following conditions:

The family has any active DCF involvement including:

- An active investigation or ongoing services involvement
- Involvement in the Integrated Family Care and Support (IFCS) program
- Involvement in the Family Assessment Response (FAR) program

The child or youth is:

- Subject of a pending delinquency petition or has been adjudicated delinquent and is awaiting disposition, on probation, committed to the department, or on parole.
- Currently involved with the adult criminal justice system due to arrest, conviction, probation or parole.

# Exclusionary Criteria for Voluntary Care

- The child has a Department of Developmental Services (DDS) case manager, a current Individual plan, through DDS and has services implemented as defined in the plan.
- Out of home placement of the child or youth was made prior to the request for VCM.
- The family refuses to engage in the program.



# Referral Process



- Call made to Careline by family
- Brief questionnaire/referral form
- Forward referral form to:
  - Beacon Health Options
  - Office of Health Care Advocate to ensure all potential alternative insurance resources have been explored
- Voluntary Care Managers (VCM) will contact the family to:
  - Provide a brief overview of the program and respond to questions
- VCM will be available to support and assist the family in getting the appropriate treatment.

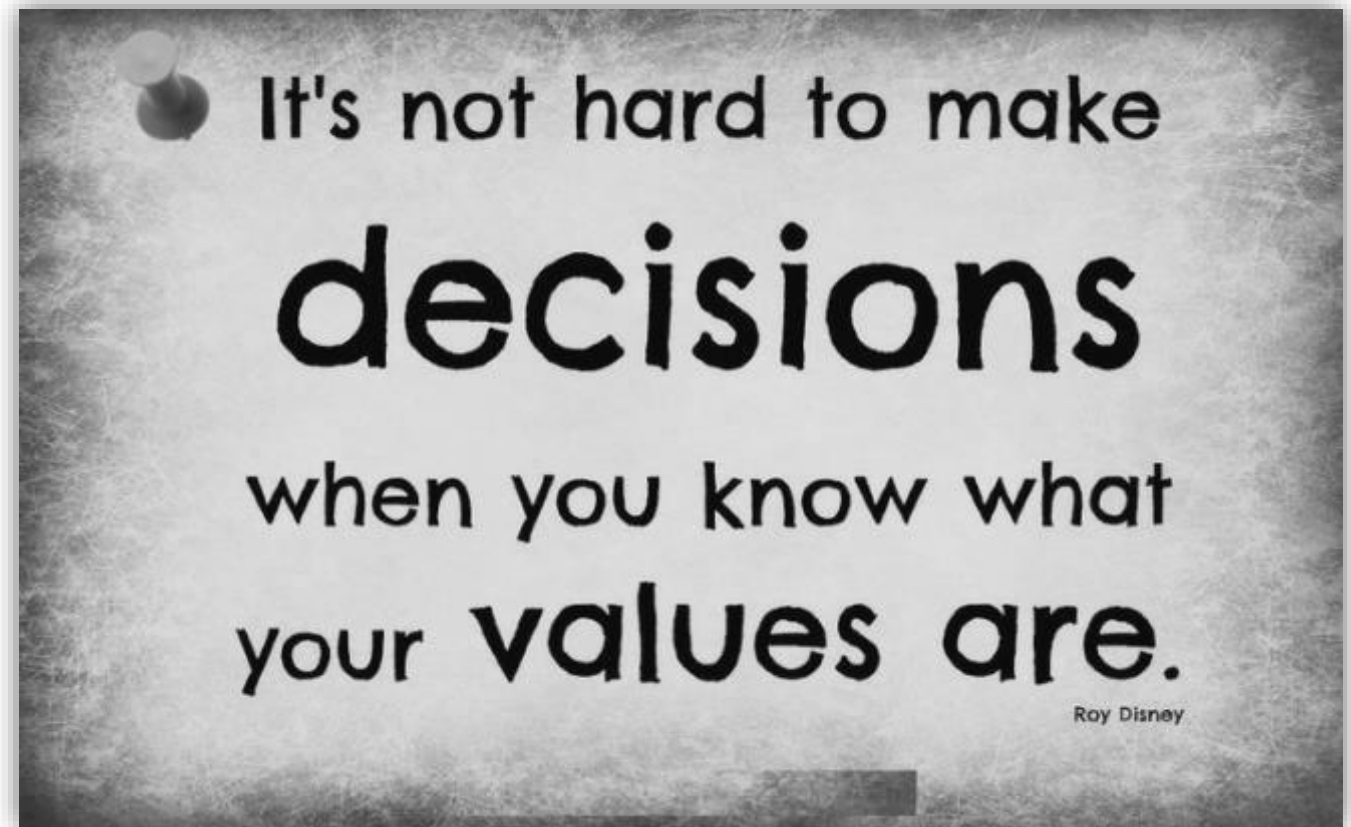
# DCF & Beacon Partnerships

- CT Behavioral Health Partnership (CTBHP)
- Access Mental Health
- Intensive Care Management
- Intensive Care Coordination (ICC)
  - Network of Care Development
- First Episode Psychosis Specialty Program (FEP)
- Integrated Family Care and Support (IFCS)



# Family Values, Practice, and Foundation

- Family Centered
- Strength Based
- Unconditional Care
- Needs Driven
- Community Based
- Least Restrictive
- Collaboration
- System Integration
- Cultural Humility
- Normalization



# Focus of Intervention and Value

- Families and Children in our Community



- Keep children safely at home and in their community
- Meeting families' needs
- Removing stigma of DCF involvement
- Connection to supports and services without DCF involvement



# Voluntary Care Management General Information

## Service Description

- Engage families and connect them to concrete, traditional and non-traditional resources and services in their community

## Capacity

- Each Voluntary Care Manager (VCM) will work with the referrals that come through the referral process.

## Average LOS:

- Based on need of child

## Program Staffing Model

- Licensed Clinical Voluntary Care Managers
- Clinical Liaison
- Claims Processor
- Supervisor

# VCM Key Outcome Measures

- 80% of engaged families will have an initial Care Plan within 30 days of episode start date
- 80% of families discharged will have met treatment goals as defined by the agreed upon initial care plan
- 80% of families who were engaged and discharged are satisfied with the program as evidenced by a Family Satisfaction Survey (based upon an agreed upon minimum sample)



# Implementation Plan

## Intro Communication Plan

- ✓ Meeting with stakeholders (i.e. OHA, OCA)
- DCF orientation meetings
  - Statewide

## Target Community Outreach

- Inform and educate larger community
  - Families, providers, other stakeholders
- ✓ Council Meetings
- ✓ Community Meetings
- ✓ Creation of marketing materials

## Onboarding

- ✓ Updated VCM referral form and testing
- ✓ Hiring and training of VCM staff
- **Go live May 1, 2020**

## Sustainability

- Regular check ins
- Ongoing support
- Monthly/quarterly meetings with Carline and contract management

# Voluntary Care Management Program

## Contacts:

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# Thank you

