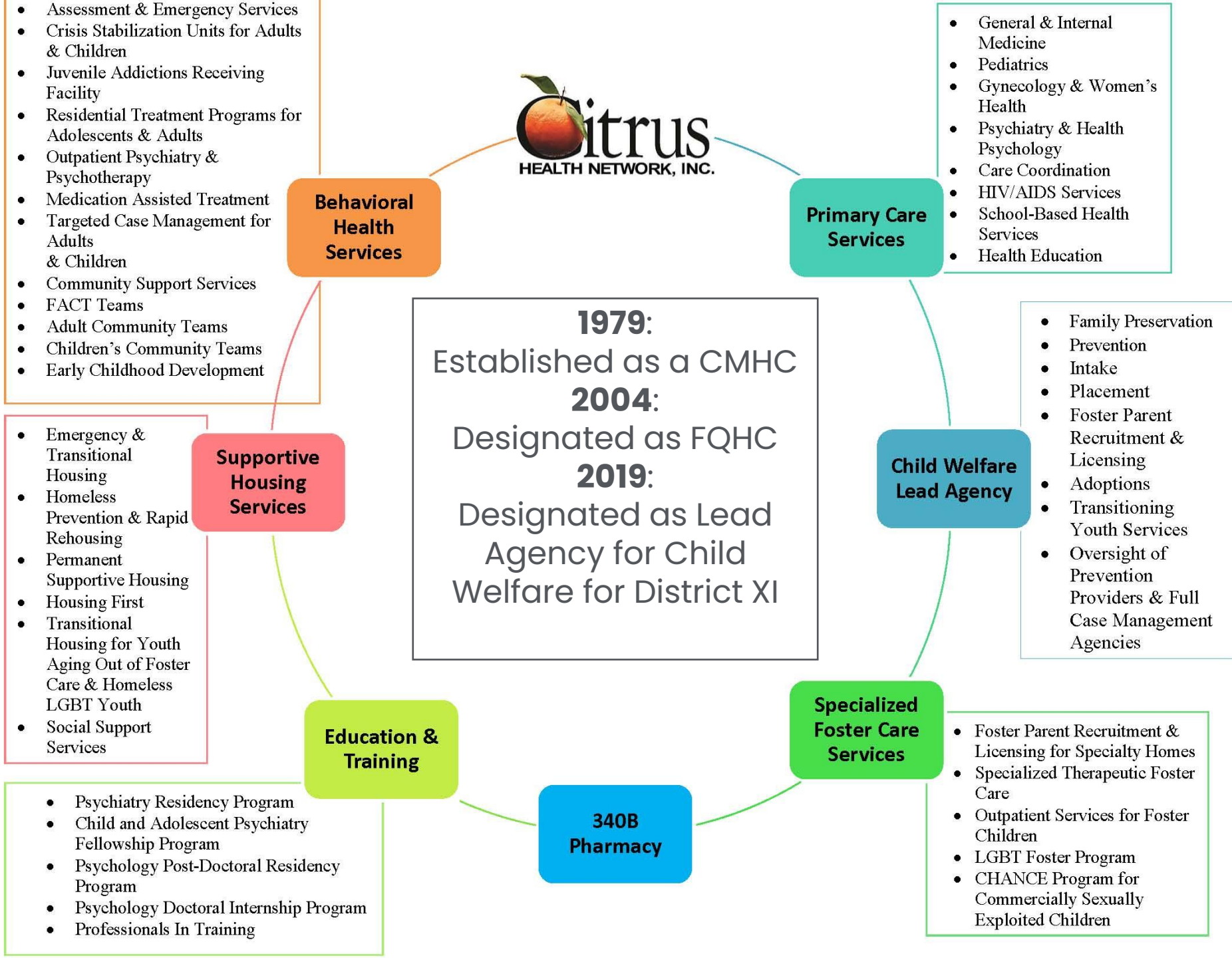


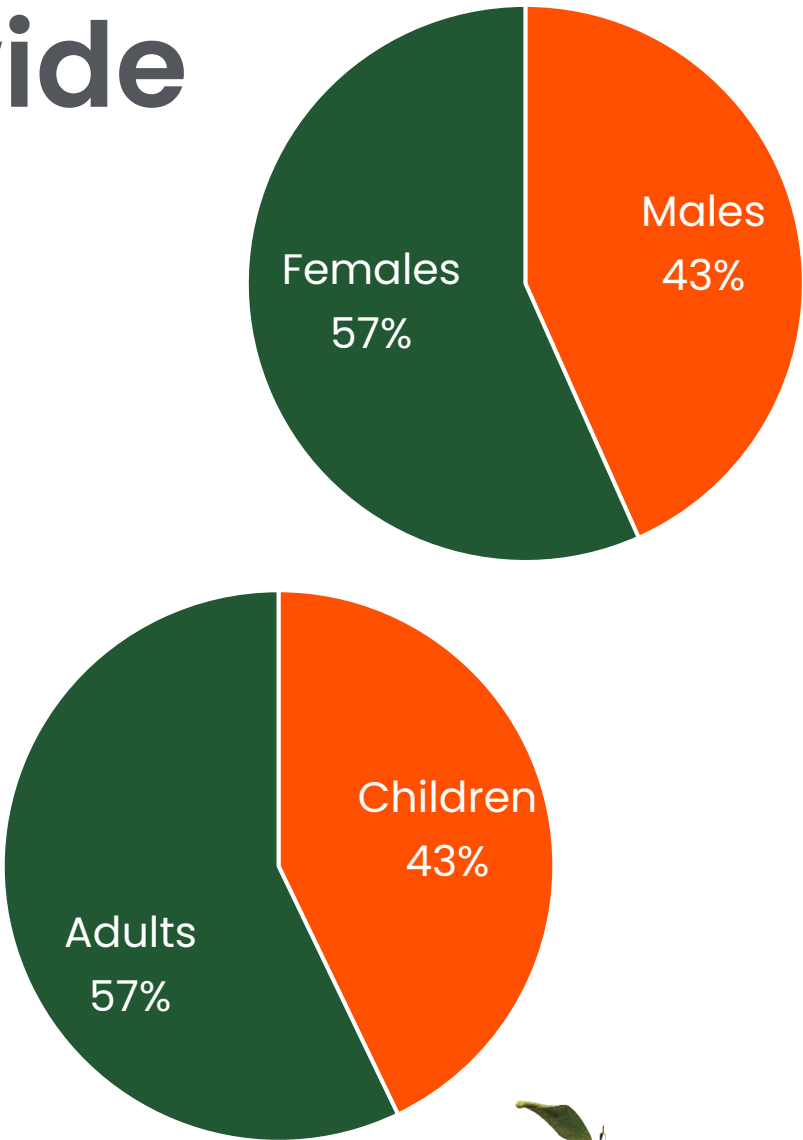
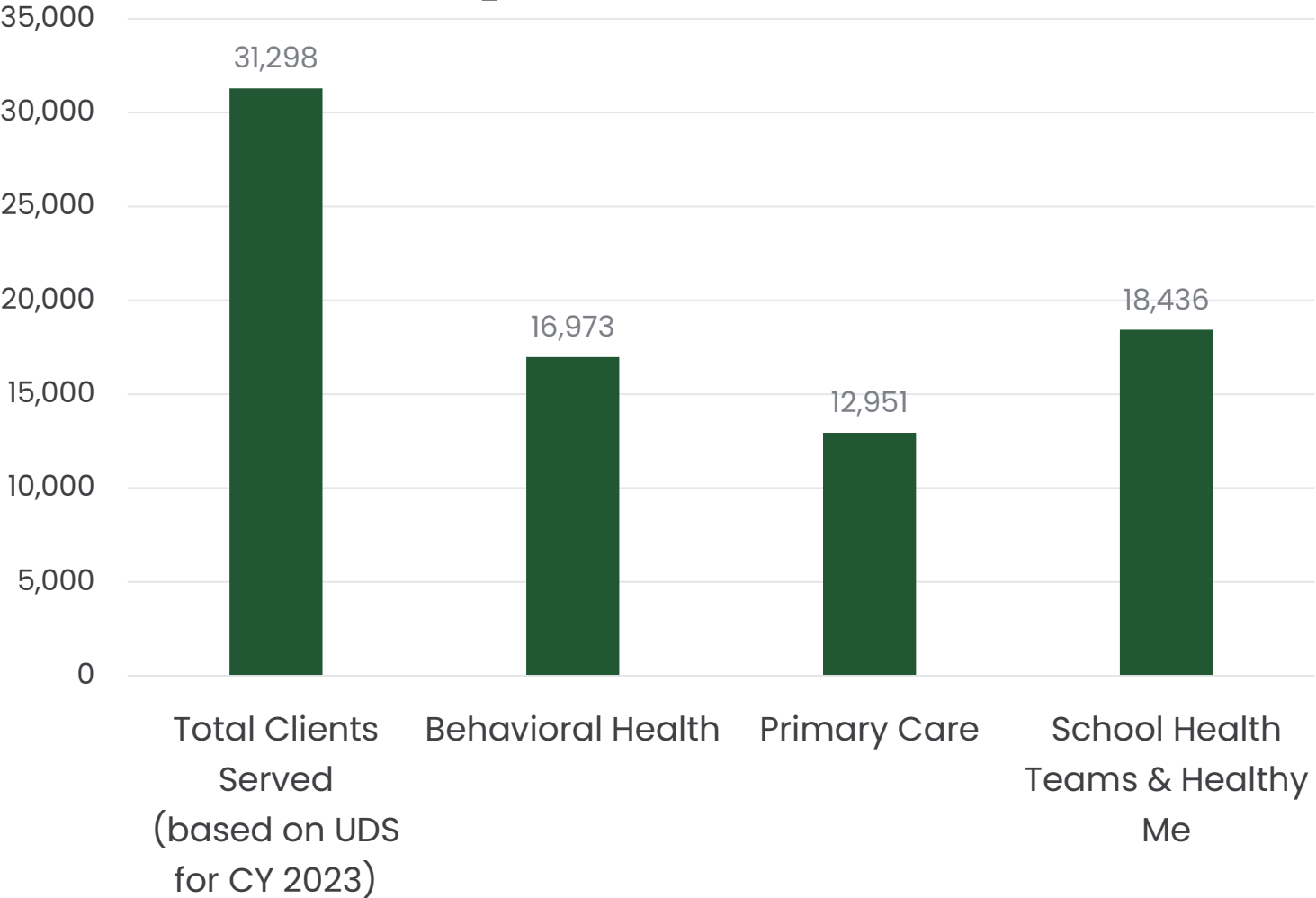


Children and Adolescents  
Integrated Continuum of  
Behavioral Health  
Services

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# Client Population Centerwide



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# Children's Community Teams

- The Children's Community Teams are multidisciplinary teams that provide services to children, adolescents, young adults (ages 5-21) and families with mental illness, emotional concerns or co-occurring disorders who are in need of more intensive services than a traditional outpatient setting. The Teams provide in home or community services, to youths and their family, assessing, developing and implementing a recovery plan that focuses on stabilization, skill building, and continued participation in the community. There are 8 Children's Community Teams providing intensive in-home services as well as other programs providing specialized services.

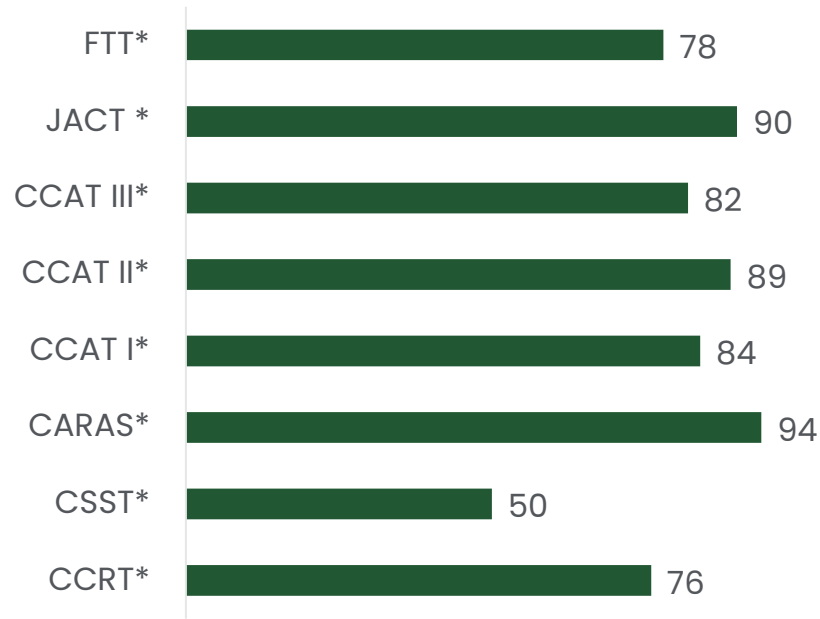
## Clients Served by CCTs (847 total)

During FY 23-24:

**92.34%**

of all children receiving CCT services were diverted from out-of-home placement or completed treatment goals successfully for discharge.

**\*Program Goals- Child Remains in the Community**



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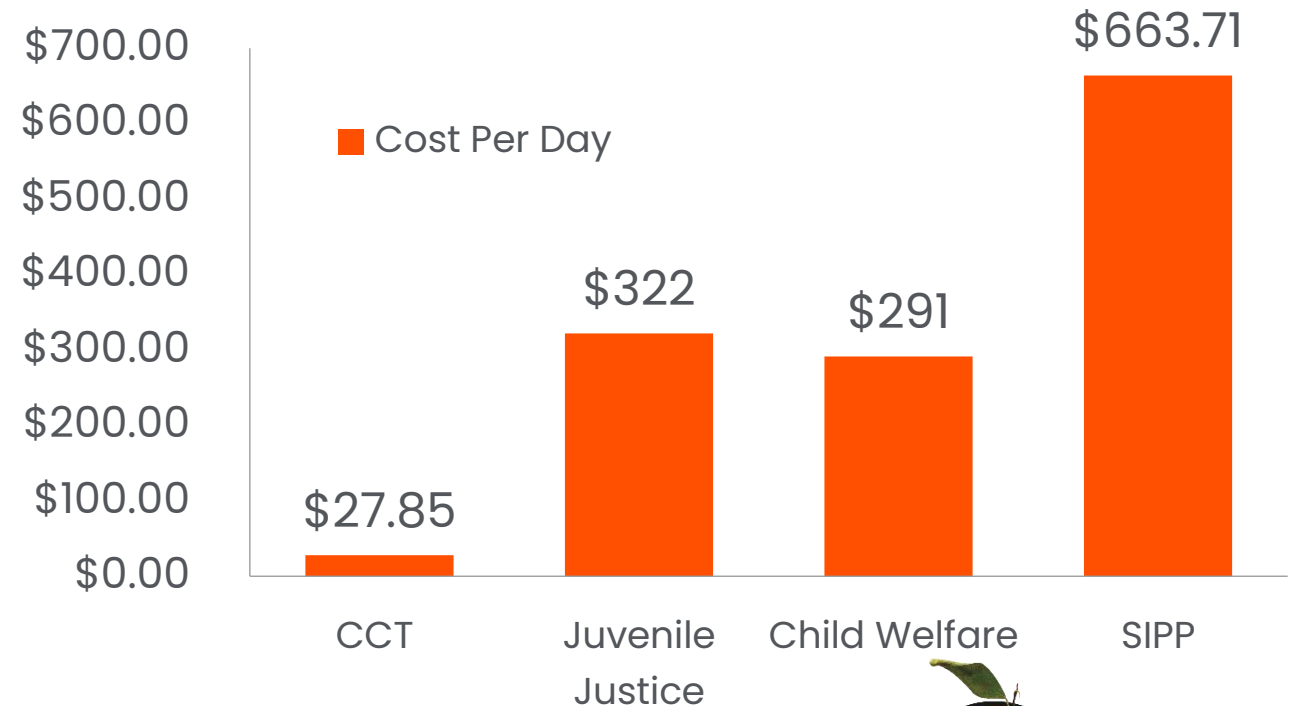


# Children's Community Teams

- The Children's Community Teams (CCT) are significantly more cost effective to the State of Florida when compared to other levels of care or placements, including child welfare, juvenile justice, and Statewide Inpatient Psychiatric Program (SIPP) Services.

**Children's Community  
Teams Approximate Total  
Return on Investment  
Differential for the State of  
Florida  
(FY23-24):  
➤\$26.9 million**

**Cost Comparison: CCT vs. Other Levels of Care**

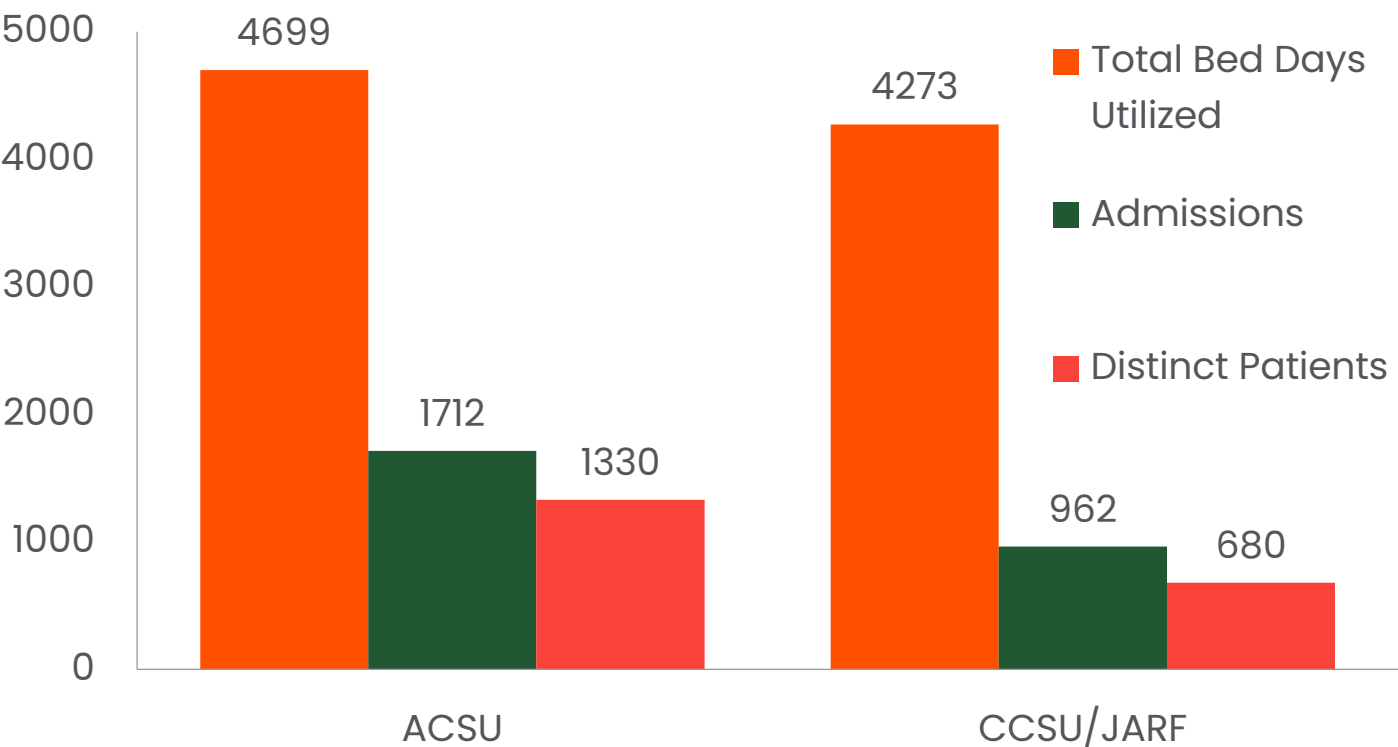


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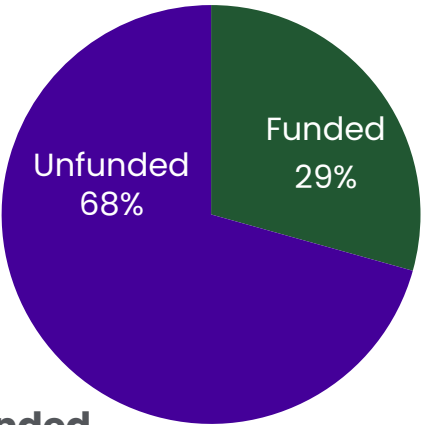


# Crisis Stabilization Units

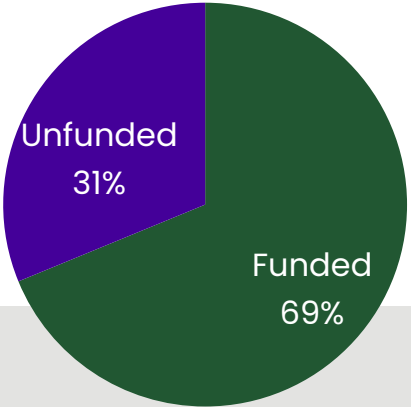
- The Crisis Stabilization Units (CSUs) for adults and children are open 24 hours a day, seven days a week to receive individuals experiencing an acute mental health crisis. The CCSU is co-located with a Juvenile Addictions Receiving Facility (JARF) for adolescents with substance abuse concerns. The ACSU operates 24 beds. The CCSU/JARF operates 16 beds.



ACSU Funded vs. Unfunded



CCSU Funded vs. Unfunded  
(does not include JARF)

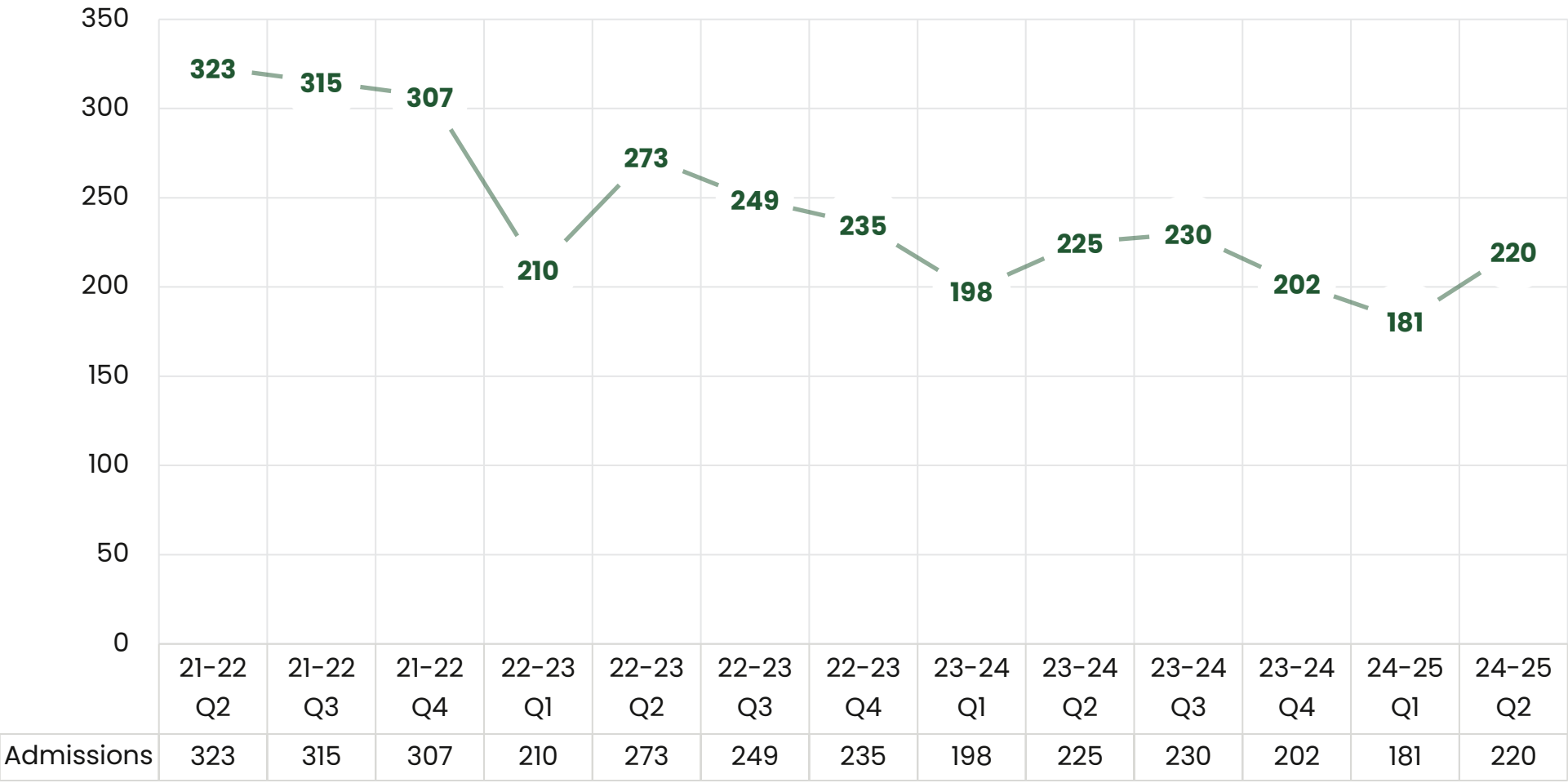


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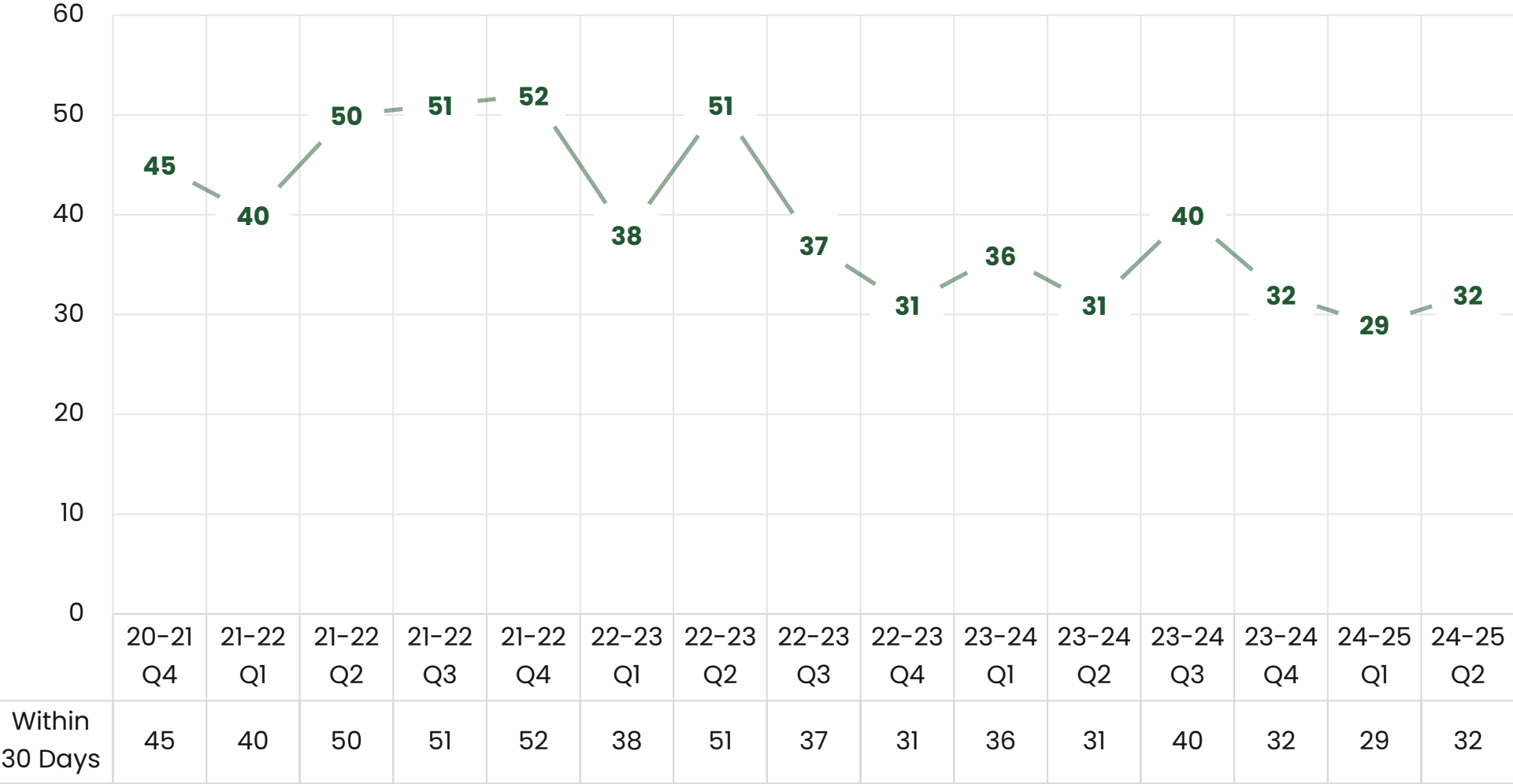


# CCSU Admissions

(Q2 of FY 21-22 to Q2 of FY 24-25)



# CCSU Readmissions (Q2 FY 21-22 to Q2 of FY 24-25)



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## **RITS Adolescent Short Term Residential Treatment Program**

**Introduction & Overview**



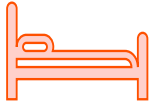
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# RITS



## Location

Citrus Health Network Main Center– 3<sup>rd</sup> Floor  
4175 West 20<sup>th</sup> Ave, Hialeah, FL 33012



## Beds

- 16 Beds Total
  - 8 Beds for Miami-Dade & Monroe (*Thriving Mind*)
  - 8 Beds for Broward (*Broward Behavioral Health Coalition*)



## Population

- Youth between the ages of 13– 17 years old
- Mental health diagnosis and/or co-occurring substance abuse diagnosis who are experiencing an acute or subacute crisis
- RITS 2 is the first SRT for children in Florida.

# Crisis Stabilization & Baker Act



SRTs must be affiliated with a designated Baker Act Receiving Facility, in this case the Citrus Health Network Children's Crisis Stabilization Unit.



SRTs provide a state-supported acute care residential alternative service for patients of CSUs, inpatient units, or designated public or private receiving facilities needing additional treatment for psychiatric conditions.



The youth must be actively admitted to a CSU, inpatient unit, or a designated public or private receiving facility to be eligible for admission to the SRT. A discharge from the CSU, inpatient unit, or a designated public or private receiving facility setting would nullify the referral to RITS.

# Court Order



A physician or psychiatrist order is required for admission to RITS.



In accordance with 65E-5.270(2), a minor may be admitted on voluntary status with proper assent of the minor and consent of the parent/legal guardian.



In accordance with F.S. 394.467(1) The physician from the SRT or CSU or designated public or private receiving facility where the youth is admitted may petition the Baker Act/Probate court for the youth to be ordered for involuntary placement to RITS.

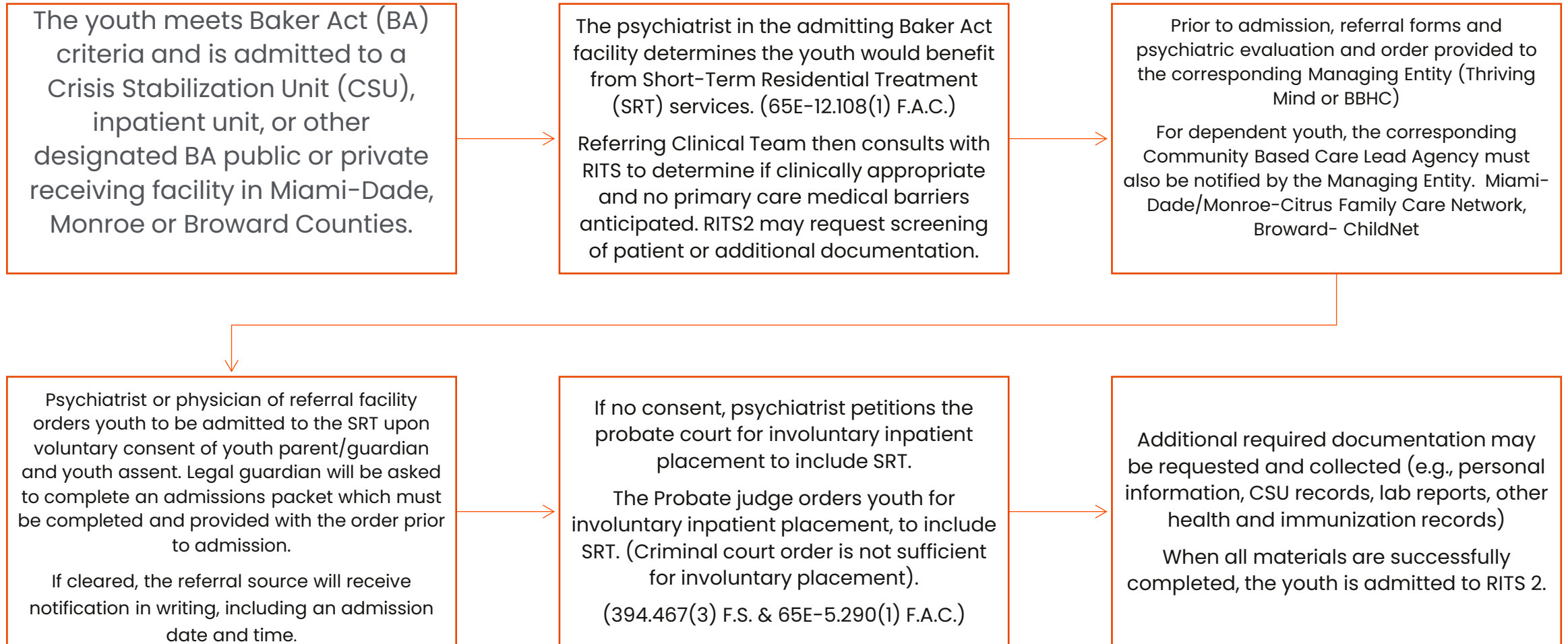


## Average Length of Stay

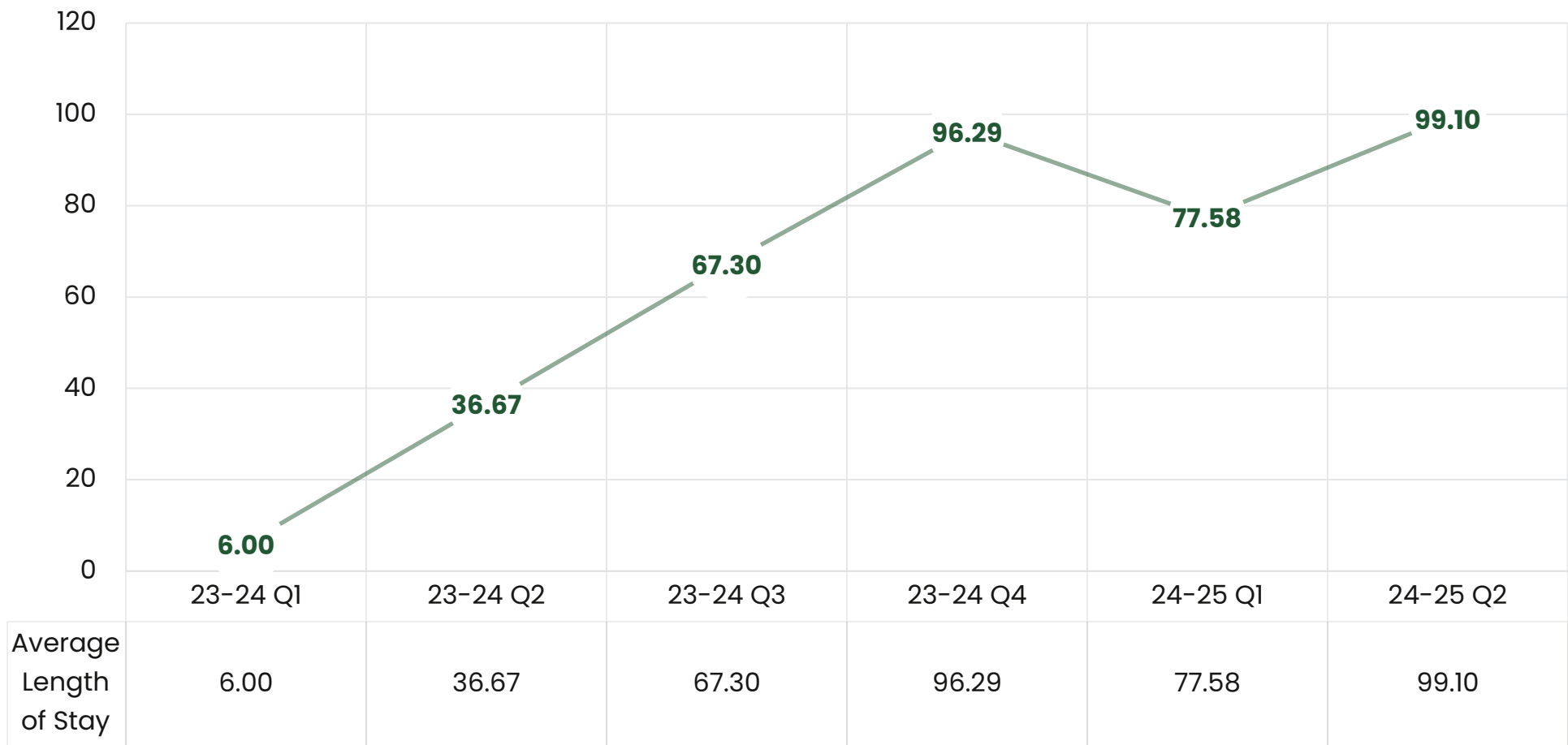
**The average length of stay will be between 30–90 days depending on the court order and physician's clinical opinion.**

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# RITS: SRT Admissions Process



# RITS Average Length of Stay (Q1 of FY 23-24 to Q2 of FY 24-25)



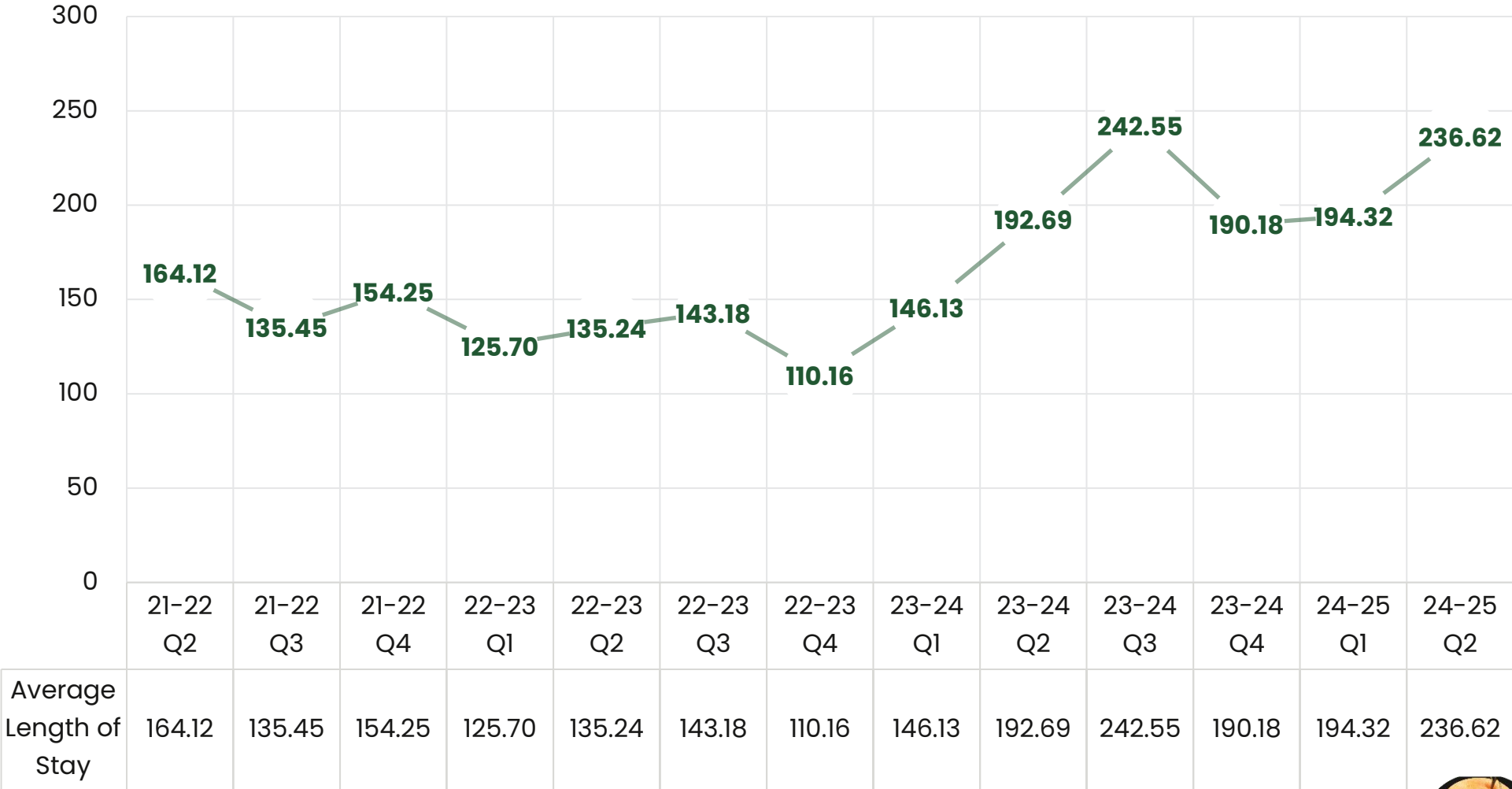
# Center for Adolescent Treatment Services (SIPP)

- Citrus Health Network's Statewide Inpatient Psychiatric Program (SIPP) located at the Center for Adolescent Treatment Services in Pembroke Pines is a locked residential program for adolescent boys and girls that provides a structured treatment environment.
- The program is licensed by the Florida Agency for Health Care Administration and accredited by The Joint Commission.
- The Program serves adolescent boys and girls, ages 13-17 ½ who:
  - Have a history of emotional disturbance and acting out behavior
  - Have not been successful in less intensive community-based services
  - Would potentially benefit from mental health services in a structured, residential setting

# Center for Adolescent Treatment Services (SIPP)

- Services at the Center for Adolescent Treatment Services include:
  - Psychiatric and Medical Services, including medication management and primary care
  - Intensive individual, group, and family therapy
  - Individualized behavior modification programs
  - Individualized treatment planning and aftercare planning with linkages to community resources
  - Peer support, group interaction and recreational activities
  - Individualized educational services provided by certified teacher from Broward County

# CATS Average Length of Stay (Q2 of FY 21-22 to Q2 of FY 24-25)



# Differences Between SRT and SIPP

	Short Term Residential Treatment (SRT)	Statewide Inpatient Psychiatric Program (SIPP)
<b>Required for Admission</b>	A physician or psychiatrist order and Court order from Baker Act Probate Court if child is involuntary.	Suitability Assessment for youth in DCF custody. Psychiatrist recommendation for youth in parent/guardian custody.
<b>Approximate Length of Stay</b>	30–90 days, based on court order and physician’s clinical opinion. (394.467(6)(b) F.S.)	6 months or longer
<b>Treatment Setting</b>	SRT provides a high level of care for individuals who are no longer experiencing an acute or immediately subacute crisis but need additional stabilization services prior to community placement or admission to a SIPP facility.	Intensive Residential Setting

# Behavioral Qualified Residential Treatment Program (BQRTP)

- Placement of a child in a qualified residential treatment program (BQRTP) is for the specific purpose of addressing the child's emotional and behavioral health needs through observation, diagnosis, and treatment in a treatment setting.
- Admission Criteria:
  - The primary reason for placement in a BQRTP is based on:
    - Serious emotional or behavioral disorders, **or**
    - Significant demonstrated behaviors, with or **without a formal mental health diagnosis.**
- Exclusionary Criteria
  - Emergency placements
  - Secure (long-term/temporary) shelter for the child
  - Children requiring services and placement for acute emotional or behavioral disorders or disturbances; children needing this level of care should be referred to a residential treatment center licensed under 65E-9, F.A.C.

# Behavioral Qualified Residential Treatment Program (BQRTP)

- Basic Service Requirements.
  - 1. Substance abuse and mental health screening and treatment, if applicable;
  - 2. Family/group/individual therapy;
  - 3. Behavioral management;
  - 4. Psychiatric services;
  - 5. Support groups;
  - 6. Specialized intervention services;
  - 7. Social & rehabilitative services; and
  - 8. Psycho-educational services.
- Emphasis on participation of family members in the child's treatment program including:
  - 1. Inclusion in family therapy;
  - 2. Outreach to family members, including siblings;
  - 3. Documenting how family members are integrated into the treatment process for the child, including post-discharge; and
  - 4. Documenting how sibling connections are maintained.

# Behavioral Qualified Residential Treatment Program (BQRTP)

- For placement in a behavioral qualified residential treatment program (BQRTP) licensed pursuant to Rule 65C-46.0211, F.A.C. the assessment must be completed by the Qualified Individual (QI).
- A Qualified Individual is:
  - The child's treating licensed clinical professional, or
  - A Qualified Evaluator outlined in s. 39.407(6), F.S., or
  - A Comprehensive Behavioral Health Assessor who meets the qualifications as required in the Agency for Health Care Administration, "Specialized Therapeutic Services Coverage and Limitations Handbook,"

# Behavioral Qualified Residential Treatment Program (BQRTP)

## Length of Stay

- A child may not be placed in a BQRTP for more than 12 consecutive months or 18 nonconsecutive months, or in the case of a child who has not attained age 13, for more than six consecutive or non-consecutive months, without approval of the Department.

## Discharge and Aftercare Support

- Aftercare support must be provided for a minimum of six months post discharge. Aftercare support is not required for youth who discharge to another QRTP setting or higher level of care such as a residential treatment program, also known as Statewide In-Patient Psychiatric Program (SIPP), or therapeutic group home which are defined in s. 39.407(6), F.S.
- The BQRTP must provide after care support to all children discharged if placed within a 50-mile radius of the BQRTP. The child-welfare professional is responsible for aftercare support when a youth is discharged to a placement setting outside a 50-mile radius of the BQRTP.