

2018 Safety Net and Children & Families

Reference #	1331917
Status	Complete
Login Username	kckennel
Login Email	baeddy@jacksoncountycares.org
Applicant Organization	KC Kennel, a Certified Canine Behavioral Health Center (CCBHC)
Mailing Address	125 Fire Hydrant Ln., Blue Summit MO 64000
Name of contact person	Benji Bowser, LCSW
Contact person's direct telephone	816-928-0000 x9
Contact person's email address	bowser@kckennel.org
Funding Category	Safety Net
Amount requested	\$100,000
A. Upload signed assurance form (President/CEO and Chief Voluntary Officer)	2016Proposal_CoverPage.pdf (111k)
B. Line Item Budget (Excel)	line_item_budget.pdf (17k)
C. Service Unit Cost (Excel)	service_unit_cost.pdf (23k)
D. Personnel Summary (Excel)	personnel_summary.pdf (31k)
E. Licenses: Upload one (1) PDF that includes licenses of all credentialed staff identified in the personnel summary	License.jpg (138k)
F. Expenditure Plan (Excel)	expenditure_plan.pdf (42k)
G. Revenue & Expenditures - Agency or Behavioral Health Department (Excel Pie Charts Preferred)	Budget_Charts.jpg (52k)
H. Proof of Liability Insurance	Insurance_Cert.pdf (17k)
1. What is the value proposition of the services your agency is proposing? Include Return on Investment (ROI) if available.	KC Kennel effectively ends homelessness. Our agency has an 83% success rate in achieving permanent doghousing for homeless dogs by delivering mental health services and assuring/monitoring active connections with healthcare and social determinants services on an ongoing basis. Based on the 281 dogs served last year, the cost of homeless services to our community was reduced by \$610,000 and the cost of emergency the veterinary hospitalization was reduced by \$960,000. Based on our revenue of \$776, 883 and per capita housing costs there was a Cost/Benefit ratio of about 2:5. Data available upon request.
2. Using data, explain the long-term impact of Levy-funded services.	The long-term impact of levy funded services is measured over 24 months. There is a 14% attrition rate from new intakes to completion of agency enrollment. For those dogs who complete the enrollment process 83% remain permanently doghoused at 24 months. Financial and outcome data are maintained in our FIDO-2.0 EHR and are available upon request.

<p>3. What is the model/approach for services? How is fidelity to the model/approach assessed, overseen? Identify the individual responsible for overseeing this.</p>	<p>In 2015 KC Kennel adopted the "risking canine connections" curriculum and ongoing certification process. Lassie Labrador, LCSW, clinical director, is responsible for quality assurance, which encompasses record review for model fidelity, certification of providers, and utilization of data in examining agency effectiveness and merit review for provider staff.</p> <p>Our fido-fidelity approach applies to all levels of staff and service delivery in our Canine Behavioral Health division. The Clinical Director reviews care coordination records in the electronic health record (EHR) to confirm implementation in treatment goals, case planning, follow-up and throughout service delivery</p>
<p>4. For each service listed on the expenditure plan, briefly describe eligibility for intake and criteria for discharge. In the last column enter A, C, or A/C to indicate if the services are provided to adults, children, or both.</p>	
<p>4.1</p>	
<p>Service Unit</p>	<p>Care Coordination</p>
<p>Eligibility</p>	<p>Severe Mental Illness-SMI, non-Medicaid</p>
<p>Discharge Criteria</p>	<p>Step-down to case management</p>
<p>Adult/Children</p>	<p>A</p>
<p>4.2</p>	
<p>Service Unit</p>	<p>Peer Support</p>
<p>Eligibility</p>	<p>Enrolled in Canine Park Recreation Center-CPRC</p>
<p>Discharge Criteria</p>	<p>CPRC is opne-ended and voluntary</p>
<p>Adult/Children</p>	<p>A/C</p>
<p>4.3</p>	
<p>Service Unit</p>	<p>TelePsychiatry</p>
<p>Eligibility</p>	<p>Requires psych meds, non-Medicaid</p>
<p>Discharge Criteria</p>	<p>Ongoing: adherence is monitored; face to face meetings increase with crisis or low adherence</p>
<p>Adult/Children</p>	<p>A/C</p>
<p>4.4</p>	
<p>Service Unit</p>	<p>Evaluation</p>
<p>Eligibility</p>	<p>Potential SMI at intake screening</p>
<p>Discharge Criteria</p>	<p>Completion of Bowow -psycho-social assessment</p>
<p>Adult/Children</p>	<p>A/C</p>
<p>4.5</p>	
<p>Service Unit</p>	<p>Individual Therapy</p>
<p>Eligibility</p>	<p>In the doghouse >3 times per week</p>
<p>Discharge Criteria</p>	<p>In the doghouse <2 times per month: transfer to group therapy</p>
<p>Adult/Children</p>	<p>C</p>
<p>4.6</p>	

Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.7	
Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.8	
Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.9	
Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.10	
Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.11	
Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.12	
Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.13	
Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.14	

Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
4.15	
Service Unit	
Eligibility	
Discharge Criteria	
Adult/Children	
5. List the main outcomes for proposed programs or services and how they are measured.	
a	
Service or Program	care coordination
Measurement Used and Baseline	Doggy Living Activities – DLA 19; subscale scores are established with baseline in the severe range
Validated (Y or N)	Y
Indicator of Meaningful Improvement for Intended Outcome	change of at least 2.0 or greater in full scale score
Functional Outcome	Permanent Housing
b	
Service or Program	peer support
Measurement Used and Baseline	internal satisfaction measure; number of crisis episodes in the past quarter
Validated (Y or N)	N
Indicator of Meaningful Improvement for Intended Outcome	no more than one crisis call per quarter
Functional Outcome	Better quality of life; Using social support network for problem-solving
c	
Service or Program	individual therapy
Measurement Used and Baseline	Bark Depression Inventory-BDI; clinical range
Validated (Y or N)	Y
Indicator of Meaningful Improvement for Intended Outcome	at least two basis points
Functional Outcome	Reduced depression; independently using cognitive tools
d	
Service or Program	
Measurement Used and Baseline	
Validated (Y or N)	
Indicator of Meaningful Improvement for Intended Outcome	
Functional Outcome	
e	

Service or Program	
Measurement Used and Baseline	
Validated (Y or N)	
Indicator of Meaningful Improvement for Intended Outcome	
Functional Outcome	
6. Do you have a policy or procedure for applying outcome data to improve services?	Yes
Please upload policy or procedure for applying outcome data to improve services	data_utilization_policy.pdf (21k)
7. Upload most recent Quality Assurance (QA) report.	
Item # 74	Quality_assurance_report.pdf (23k)
8. Diagnostic Categories of Participants - Most Recent Year	
Depressive Disorders	
# Levy-funded	19
#Agency	31
Bipolar and Related Disorders	
# Levy-funded	27
#Agency	30
Schizophrenia Spectrum and other Psychotic Disorders	
# Levy-funded	13
#Agency	13
Trauma and Stressor-Related Disorders	
# Levy-funded	79
#Agency	83
Anxiety Disorders	
# Levy-funded	41
#Agency	41
Obsessive-Compulsive and Related Disorders	
# Levy-funded	0
#Agency	11
Disruptive, Impulse Control and Conduct Disorders	
# Levy-funded	0
#Agency	0
Substance-related and addictive disorders co-occurring with mental illness	
# Levy-funded	0
#Agency	49
Neurodevelopmental disorders co-occurring with mental illness	
# Levy-funded	0
#Agency	12
All others	

# Levy-funded	1
#Agency	5
9. List major agency and/or community conditions that have changed in the past year (may include payers, intake volume, severity, trauma conditions, facility conditions, etc.).	<p>DMH (Missouri Dog Mental Health) has reduced Medicaid by 1.7%- expected agency impact \$79,000; approximately 17 fewer dogs can be served in outpatient.</p> <p>HUD (Housing Underwriter for Dogs) has reduced doghouse subsidies by 18% - expected agency impact -\$14,000 resulting in three less permanent doghouse placements.</p> <p>COMBITE (drug treatment tax for dogs) has not paid invoices in the current FY contract year as of month eight. Laid off one dog biscuit recovery specialist. Reduction in co-occurring disorder services is anticipated.</p> <p>Kansas City Policer Dogs (KCPD) use a new screening tool for assessing risk of leaving a mess on the sidewalk. Anecdotally, this is causing Canine Intervention Teams (CIT) to increase referrals to our Doberman Diversion Program. Quantitative report will be produced at year-end showing monthly trends.</p>
10. Accreditation Status	Accredited
List accrediting body and current term	Kennel Accreditation Council; expires 2019
Did your recent accreditation review include a plan of correction?	No
11. What is the annual turnover rate for case management staff?	
Item # 41	29%
12. Do you track and analyze participants who drop out of service?	Yes
13. Is there a formal policy/procedure in place for keeping participants engaged in service?	Yes
If yes, please attach policy/procedure for participant engagement (PDF)	participant_engagement_policy.pdf (21k)
14. List major non-Levy sources of payment for behavioral health	
a	
Payer	Hound Care Foundation
Past FY\$ amount	\$93,000
Use of funding	Distractions: a new and different ADHD program for terriers
b	
Payer	COMBITE
Past FY\$ amount	\$18,000
Use of funding	Intensive Outpatient Dog Treat Abuse
c	
Payer	Leash Foundation
Past FY\$ amount	\$64,800
Use of funding	Immigrant Dogs

d	
Payer	Schnauzer Family Foundation
Past FY\$ amount	\$8,000
Use of funding	At-risk puppies
e	
Payer	MO Dog Mental Health (DMH)
Past FY\$ amount	\$264,000
Use of funding	Certified Canine Beh Health Center
15. List major partnerships for addressing participants' social determinants needs.	
1	
Agency Name	Cathartic Charities
Social Determinant	Food, emergency assistance
2	
Agency Name	Operation Barkthrough
Social Determinant	Head Start for at-risk puppies
3	
Agency Name	United Wag
Social Determinant	Transportation vouchers, ride sharing
4	
Agency Name	Full Employment Kennel
Social Determinant	Job Application Assistance
5	
Agency Name	Samuel Q. Terrier - Federally Qualified Husky Center
Social Determinant	Veternary Care Navigator
16. Does your organization provide psychiatric services for participants referred by other agencies?	Yes
Please list partner agencies below.	
a	
Agency Name	Puppies' Place
Formal or Informal Arrangement	Formal - receive priority appointments on Tuesday
b	
Agency Name	Heartland Hounds, Inc
Formal or Informal Arrangement	Formal - on-site consultation
c	
Agency Name	Litter Conservancy
Formal or Informal Arrangement	Informal - discount medication
d	
Agency Name	Petunia Brooks Center

Formal or Informal Arrangement	Informal - on-site appointments or tele-psychiatry with 48-hour notice
e	
Agency Name	Mutt Mart
Formal or Informal Arrangement	Informal - Saturday afternoon drop-in clinics
17. Does your agency refer participants in need of psychiatry to other agencies?	No
Please list partner agencies below.	
a	
Agency Name	
Formal or Informal Arrangement	
b	
Agency Name	
Formal or Informal Arrangement	
c	
Agency Name	
Formal or Informal Arrangement	
d	
Agency Name	
Formal or Informal Arrangement	
e	
Agency Name	
Formal or Informal Arrangement	
18. What is the telephone number for arranging initial intake appointments at your agency?	816-928-0000
19. New Enrollment	
1.	
Service	Canine screening
Time to Intake	one week
Time to Assess/Evaluation	10 days
Time to begin service	two weeks maximum
Adult and/or Child	A/C
2.	
Service	One-time consultation
Time to Intake	48 hours
Time to Assess/Evaluation	10 days
Time to begin service	two weeks maximum
Adult and/or Child	A/C
3.	
Service	Crisis
Time to Intake	24 hours

Time to Assess/Evaluation	About five days
Time to begin service	varies based on subsequent screening
Adult and/or Child	A/C
4.	
Service	Peer Support
Time to Intake	3-7 days
Time to Assess/Evaluation	About 5 days
Time to begin service	3-4 Weeks
Adult and/or Child	A
5.	
Service	
Time to Intake	
Time to Assess/Evaluation	
Time to begin service	
Adult and/or Child	
6.	
Service	
Time to Intake	
Time to Assess/Evaluation	
Time to begin service	
Adult and/or Child	
7.	
Service	
Time to Intake	
Time to Assess/Evaluation	
Time to begin service	
Adult and/or Child	
8.	
Service	
Time to Intake	
Time to Assess/Evaluation	
Time to begin service	
Adult and/or Child	
9.	
Service	
Time to Intake	
Time to Assess/Evaluation	
Time to begin service	
Adult and/or Child	
10.	

Service	
Time to Intake	
Time to Assess/Evaluation	
Time to begin service	
Adult and/or Child	
20. Number of Levy-funded participants newly enrolled last year.	163
21. Does your agency have a policy that requires screening for benefits eligibility such as Medicaid?	Yes
If yes, upload (PDF)	Medicaid_enrollment_procedure.pdf (21k)
22. Will electronic health records (EHRs) be used for Levy-funded services?	Yes
Identify the system to be used.	FIDO-2.0 EHR
Does your EHR:	
Yes	Capacity to connect to billing, Sort by payer, Sort by demographic, Interface with the Health Information Exchange (HIE)
No	Interface with payers, Interface with other agencies
23. Attach your agency's Board approved Language Access Plan	sample_language_access_plan.pdf (483k)
Item # 88	
24. Do you have documents translated in other languages? If so, list the languages.	Documents on patient rights, due process and intake/services are pre-printed and available in the following languages: *Irish Setter *German Shepherd *Pekinese *Hsi Tzu (coming fall 2018)
25. What interpreter services are used in the delivery of mental health services?	Contract with The Labrador Language Line, a telephone provider for canine interpreter services. We have a contract with Jack-Russel Verbal Services (JVS) for in-session interpretation. Two staff members are certified by National Council on Interpreting in Veterinary Care (NCIVC) . Staff have multifacet job duties that include various patient support roles.
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