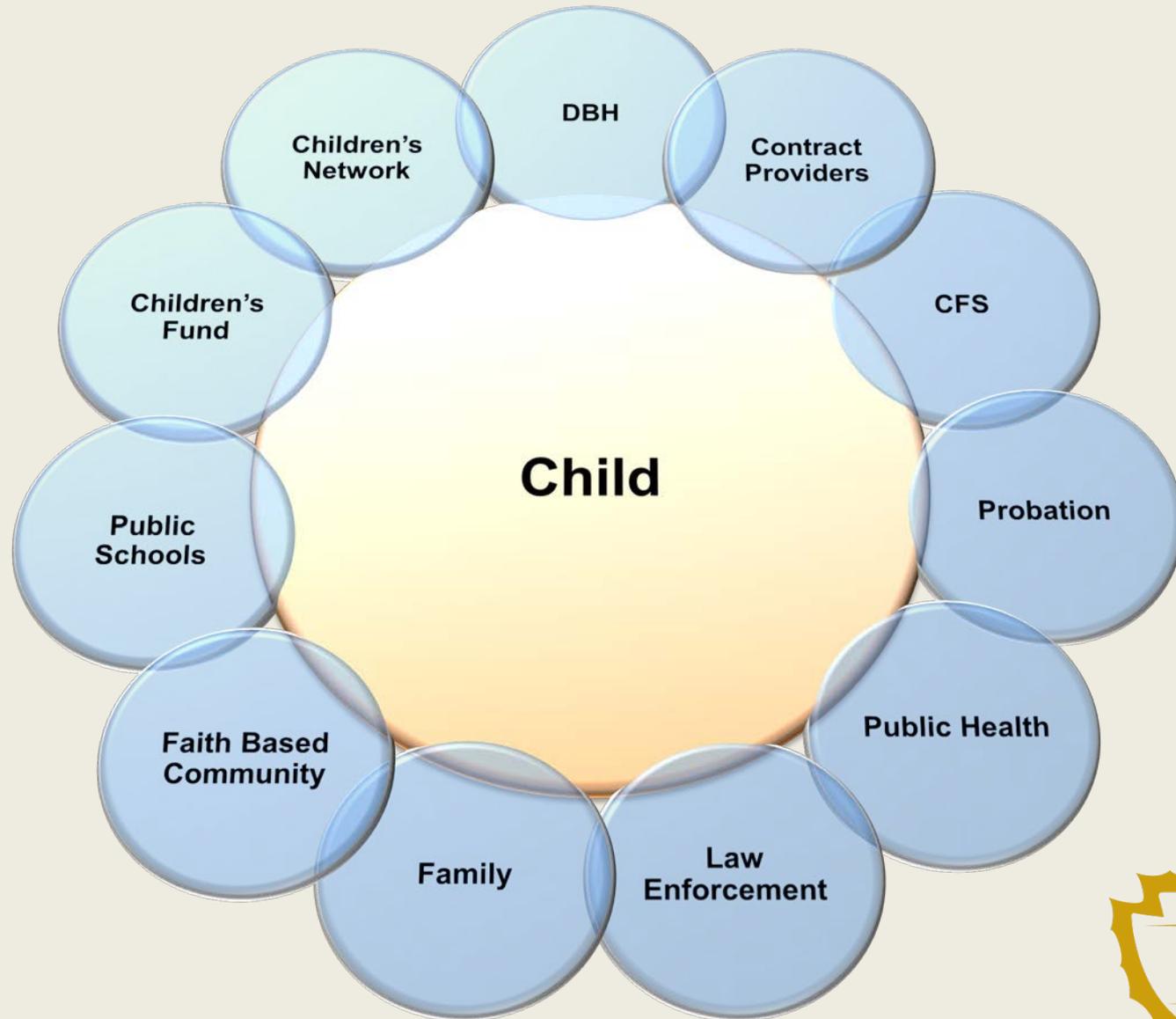


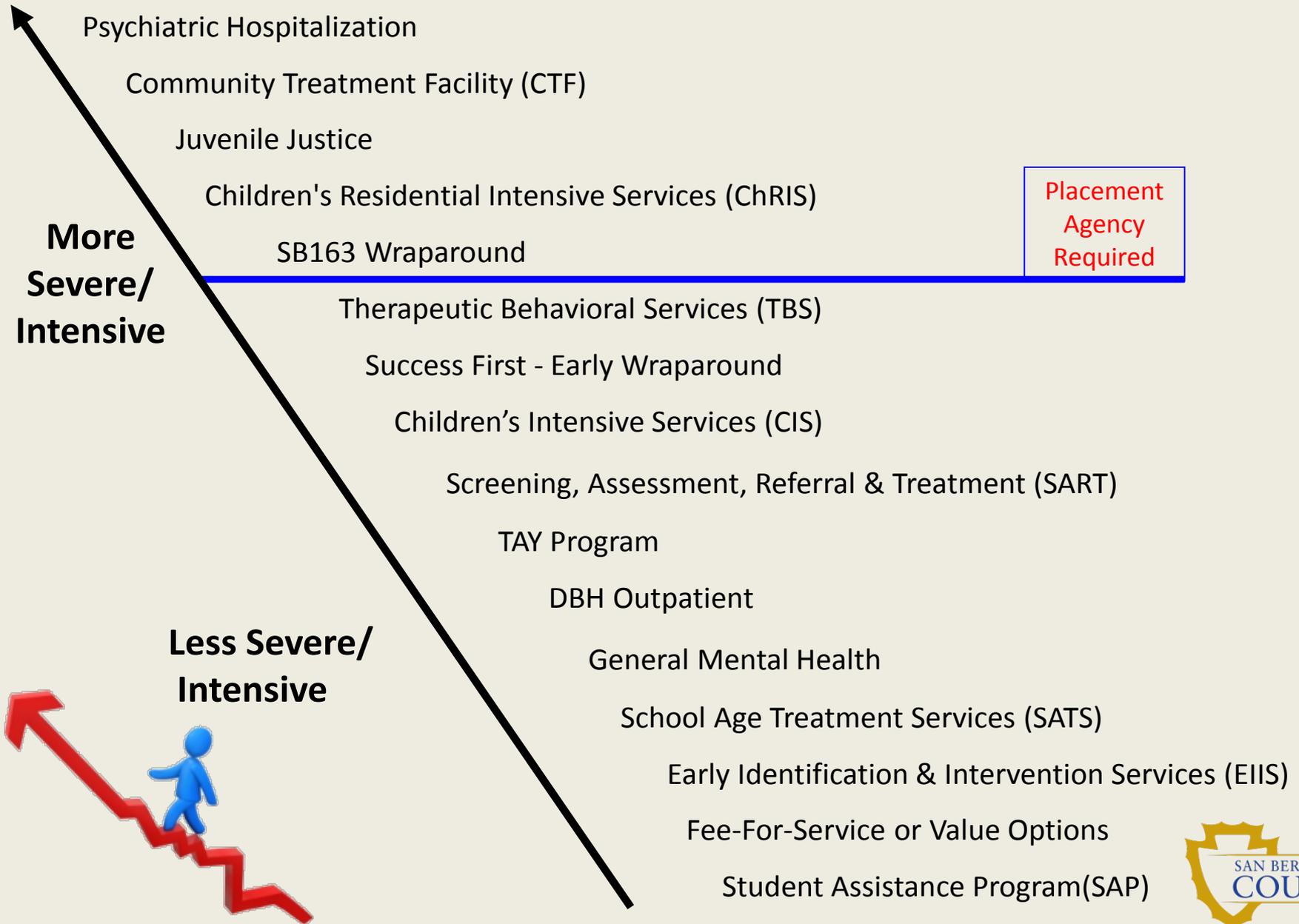
County of San Bernardino Department of Behavioral Health Children and Youth Programs Continuum of Care



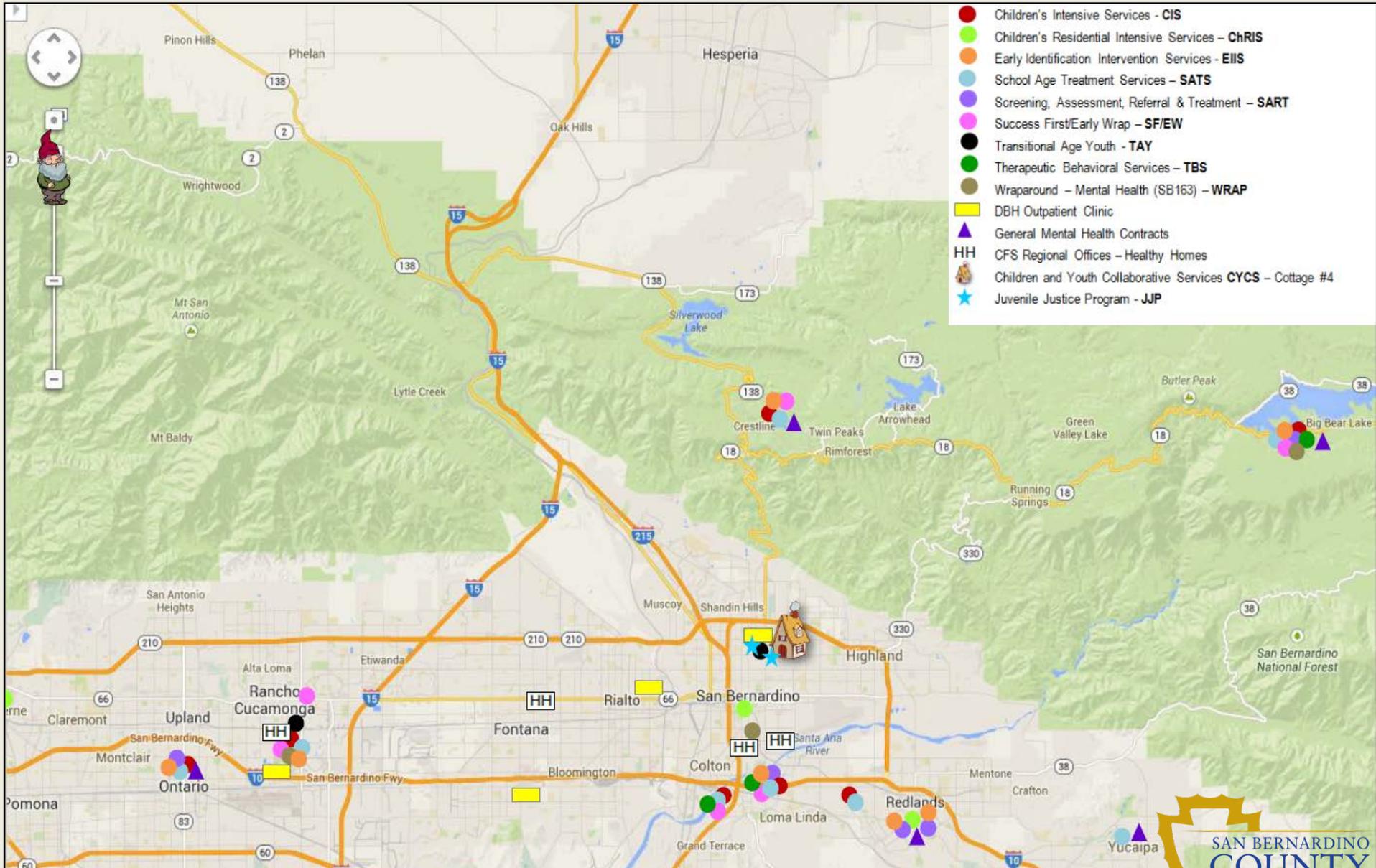
Children's System of Care



Continuum of Care-Children & Youth Services

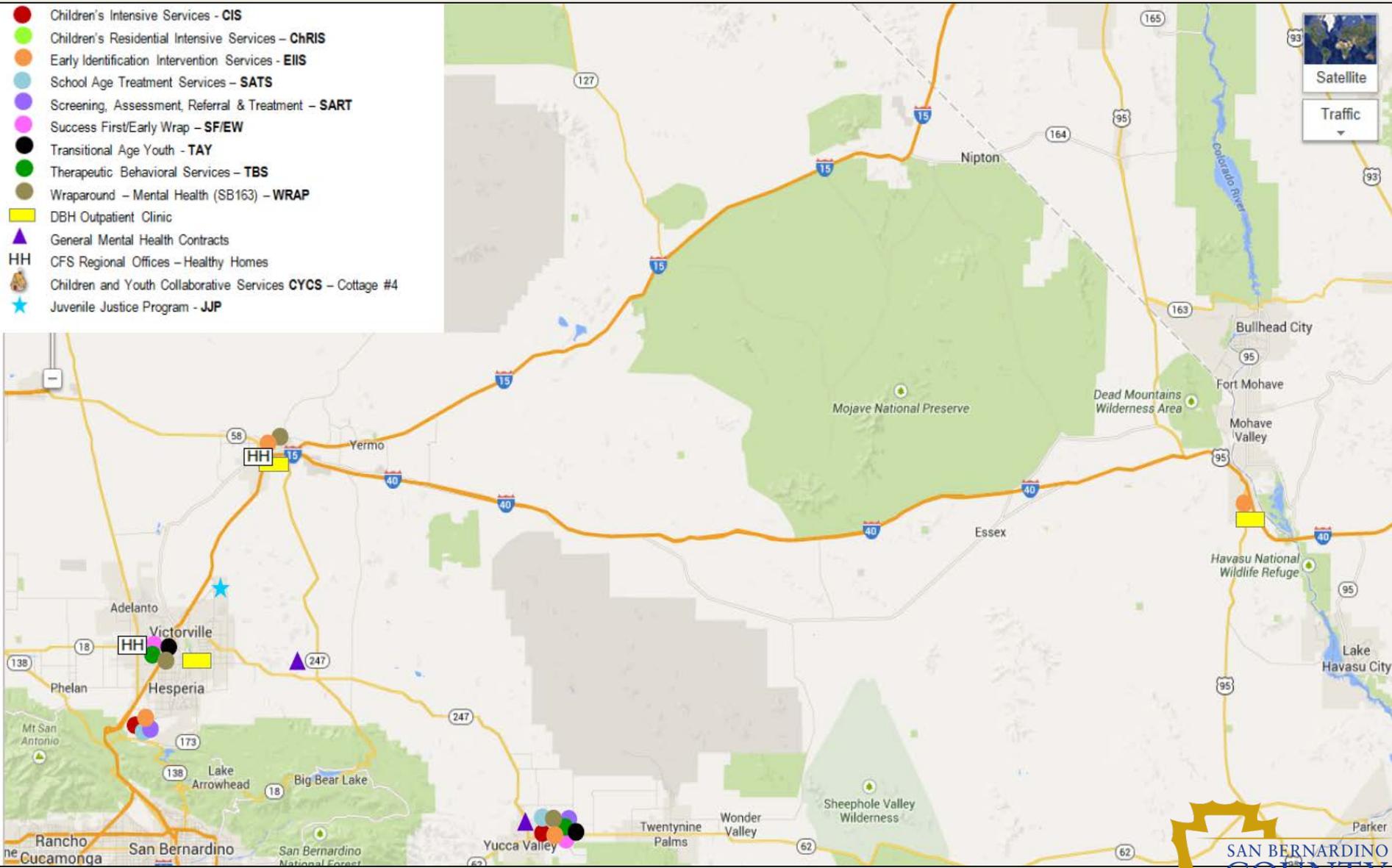


Children's Continuum of Care Office Locations

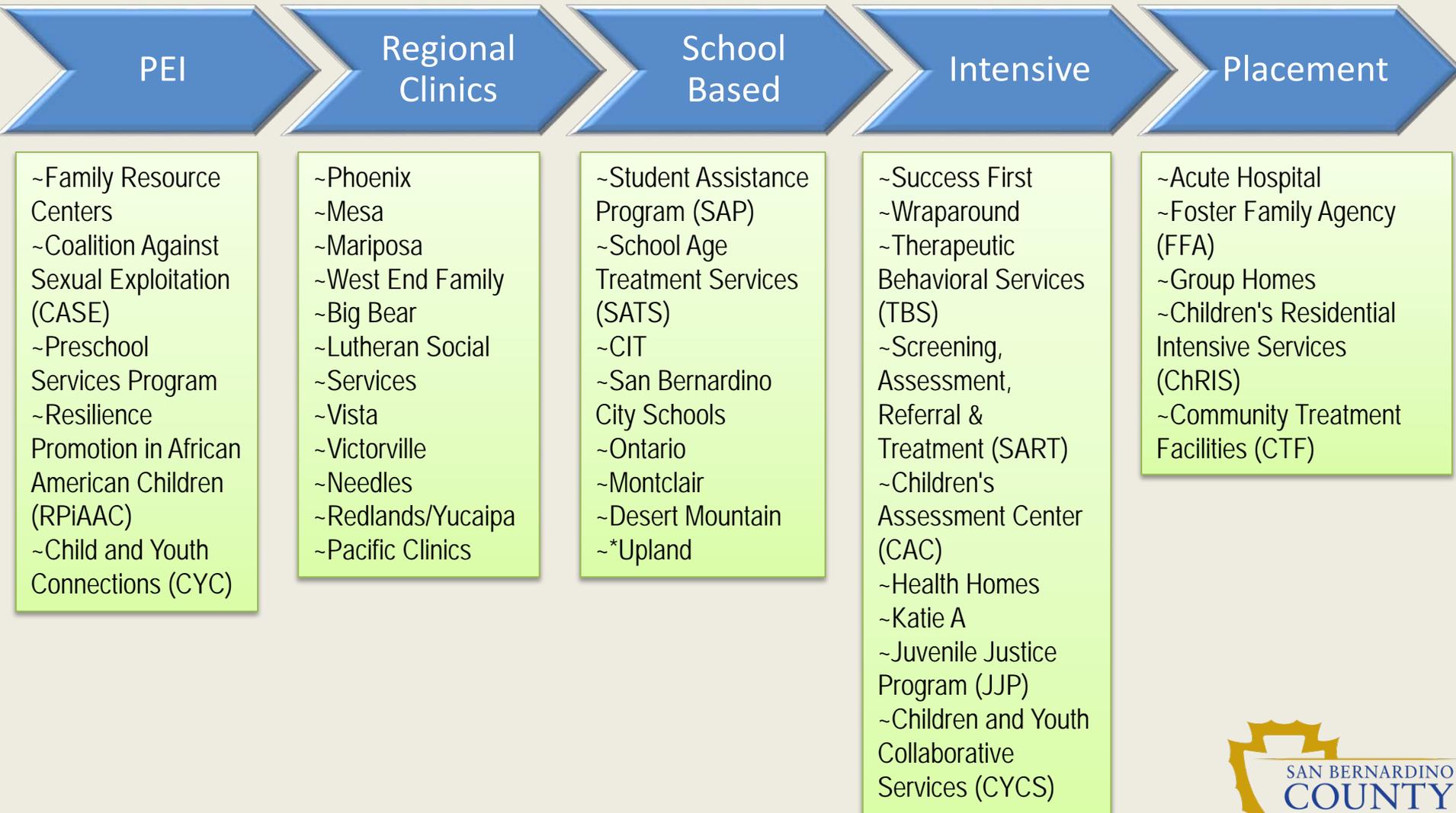


Children's Continuum of Care Office Locations

- Children's Intensive Services - **CIS**
- Children's Residential Intensive Services - **CHRIS**
- Early Identification Intervention Services - **EIIS**
- School Age Treatment Services - **SATS**
- Screening, Assessment, Referral & Treatment - **SART**
- Success First/Early Wrap - **SF/EW**
- Transitional Age Youth - **TAY**
- Therapeutic Behavioral Services - **TBS**
- Wraparound - Mental Health (SB163) - **WRAP**
- DBH Outpatient Clinic
- ▲ General Mental Health Contracts
- HH** CFS Regional Offices - Healthy Homes
- Children and Youth Collaborative Services **CYCS** - Cottage #4
- ★ Juvenile Justice Program - **JJP**

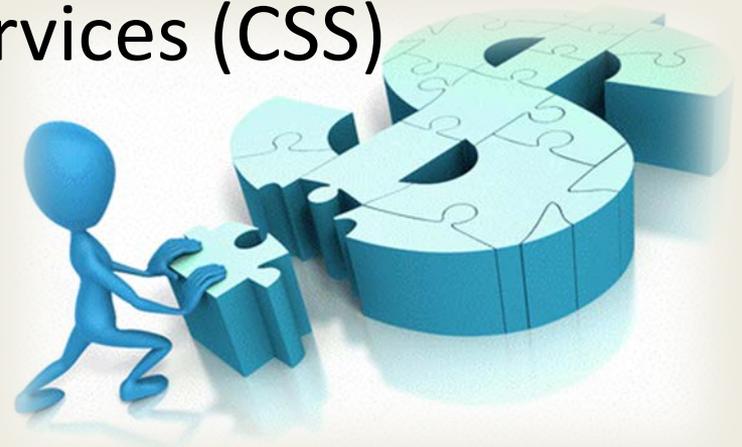


Continuum of Care



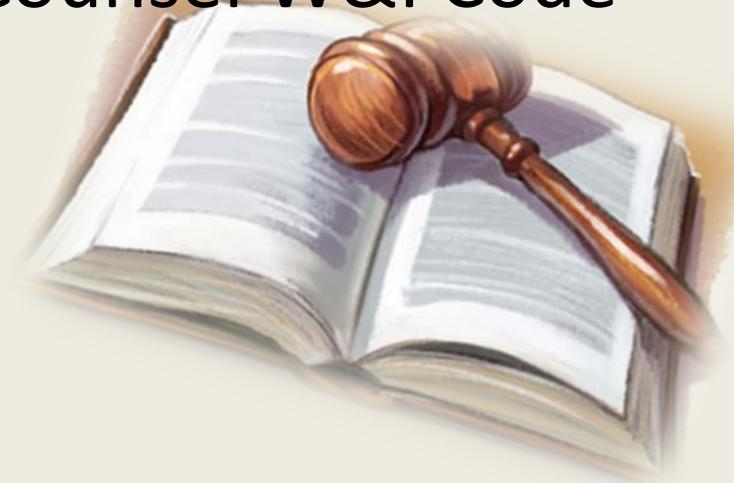
Funding of Continuum of Care

- Medi-Cal/EPSDT (Early Periodic Screening Diagnosis and Treatment)
- Mental Health Service Act (MHSA)
 - Prevention Early Intervention (PEI)
 - Innovations
 - Community Support Services (CSS)



Children's Legislative and Judicial Mandates

- Emily Q. (1998)
- Katie A. (2011)
- SB785 (Foster Children Out of County Services)
- AB114 (2012)
- AB3632/2726 (1988-2011)
- Interagency Placement Counsel W&I Code



Healthy Homes

- DBH Clinicians at CFS Offices
- Provide Consultations
- Conduct Screenings & Assessments
- Facilitate/Problem Solve Referrals to Programs & Services
- Healthy Homes Clinicians are #1 choice for help
 - Call them
 - Email them
 - Find them



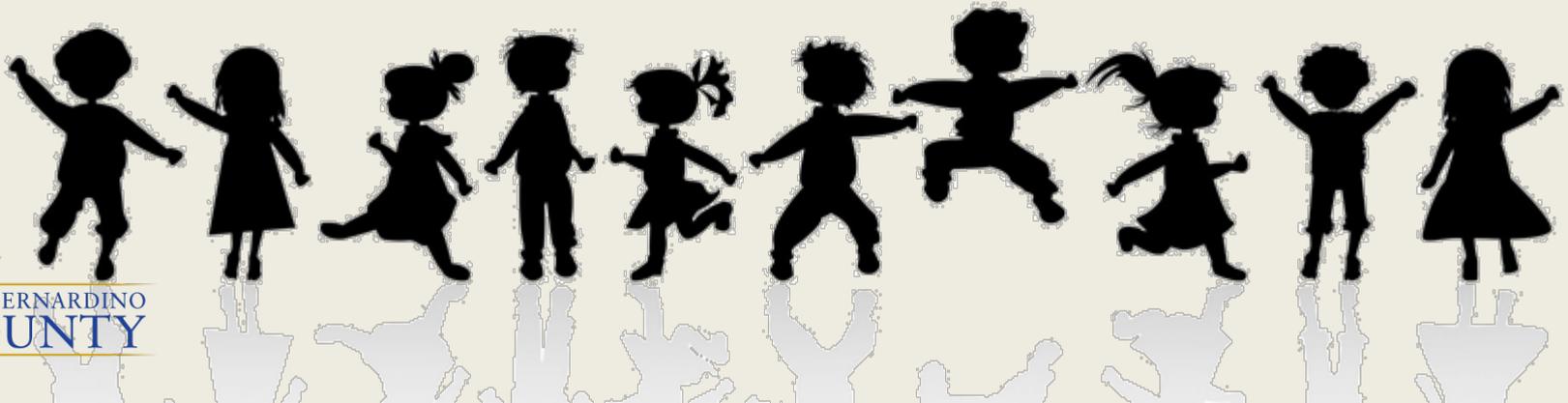
SART (Screening, Assessment, Referral & Treatment)

- First 5 & DBH program
- EPSDT Medi-Cal to children age 0-5 years who reside in SB County
- Targeting children who have been abused or prenatally exposed to alcohol or other drugs needing mental health services
- Children referred by
 - CFS children placed in foster care and the Family Maintenance Program
 - DBH's Perinatal Clinic
 - Psychiatric hospital discharges
 - Victims of natural disaster & local emergencies
 - Headstart & Preschool Staff



Early Identification & Intervention Services

- First 5 & DBH Program
- 0-5 Year Olds will have difficulties, but Medical Necessity not required
- Similar to SART, but not as comprehensive
- NOT an initial referral for CFS, but always available for children already screened by SART.



Juvenile Court Behavioral Health Services (JCBHS)

- JCBHS is a program that monitors the psychotropic medication treatment of San Bernardino County's dependent children
- A judge, attorney, public health nurse, probation officer or social worker may refer a dependent using the JCBHS referral form. JCBHS staff will address the concern through either a psychiatric consult or a mental health assessment and convey the findings to the referring party
- Services are provided for dependents of San Bernardino Court under the psychiatric care of a non-DBH-practitioner
- Referrals are accepted from:
 - Judges
 - Attorneys
 - Public Health Nurses
 - Probation Officers
 - Social Workers





School Aged Treatment Services (SATS)

- EPSDT Medi-Cal is a federally mandated Medicaid option that requires states to provide screening, diagnostic and treatment services to eligible Medi-Cal recipients under age 21
- Provides services to ascertain and treat physical and mental defects
- Problems caused by or due to a mental health disorder and may interfere with their academic performance or functioning in family, school or community
- Problems may put the child at risk of being identified as a special education student or put them at risk for a higher level of care or out-of-home placement
- Provided mainly in public schools
- Referrals are generated and evaluated according to protocol and eligibility
- Referrals from School, DBH, CFS, CCRT



Community Crisis Response Team

- Provides home & community based mental health crisis intervention, assessments, case management, intensive follow-up services & relapse prevention in all geographic areas of county
- Referrals from Clinic, Group Home, Hospital, School, Family, Law Enforcement, Contractor, CFS, Probation
- Services to anyone with a psychiatric emergency including:
 - Suicidal thoughts
 - Suicide attempt
 - Self-mutilation
 - Homicidal thoughts
 - Homicide attempt
 - Violence/weapons
 - Substance use/under the influence
 - Destroying/damaging property



DBH Outpatient Clinics

- Walk-in
- Child specialists
 - Assessments
 - Individual counseling
 - Group counseling
 - Medications



Transitional Aged Youth (TAY)

- The One Stop TAY Centers
- Assists TAY in reaching independence
- Provide Broad Range of Services
- “Drop-in” centers in all geographic areas of County



Children's Intensive Services (CIS)

- The CIS Program seeks to support the family unit, engage the family in treatment and reduce the risk of out-of-home placement, significant school problems, or involvement with the Child Welfare/Juvenile Justice System.
- Contractors and DBH staff work together to form a network of care for seriously emotionally disturbed children and their families throughout the county.
- Referrals made directly to the contractor who will notify the DBH liaison of each referral and eligibility.
- Target populations include children/youth who are dually-diagnosed, prioritized according to the following:
 - Youth who are emotionally disturbed
 - Youth in foster homes referred for assessments
 - Youth referred from DBH & CCRT
 - All youth through age 21 years eligible for EPSDT Medi-Cal
- Youth referred by:
 - DBH, ACCESS, CCRT
 - CFS
 - Outpatient clinics
 - FFS providers
 - Contract agencies
 - Acute inpatient psychiatric hospitals
 - Schools
 - Other agencies



Therapeutic Behavioral Services (TBS)

- An intensive, one-on-one face to face short-term outpatient treatment intervention, authorized for a specified period of time, designed to maintain the child/adolescent's residential placement at the lowest appropriate level by resolving targeted behaviors and achieving short-term treatment goals
- TBS contracted providers receive the referrals for processing
- Referrals made by caseworker, case manager, therapist, county social worker, CCRT, AB2726, parents, foster parents, teacher, school counselor, group home therapist or administrator or other appropriate stakeholder in child's life
- Child must be:
 - Full-scope Medi-Cal
 - Under the age of 21
 - Currently receiving specialty mental health services, AND
- Child must meet one of the following:
 - In an RCL 12 or above
 - Being considered for placement in RCL 12 or above
 - Has had at least one emergency psychiatric hospitalization or at risk for hospitalization
 - Has previously received TBS services



Success First/Early Wrap

- Success First is an early wraparound program to capture those seriously emotionally disturbed, unserved, underserved children/adolescents, age 0-15 years, to provide services, keeping them in the lowest level of care possible
- A referral is reviewed by a Referral Management Team & if enrollment approved, client assigned to an agency (contractor)
- Referrals can come from anyone including:
 - CCRT - Clinic
 - Group Home - Hospital
 - Hospital - School
 - Family - Law Enforcement
 - Contractor - CFS
 - Probation
- Seriously emotionally disturbed child or adolescent, age 0-15 years, who:
 - is in need of crisis intervention and/or at risk of psychiatric hospitalization ,
 - is at risk of removal from their home,
 - is having problems in school or is at risk of dropping out,
 - is at risk of or currently involved in juvenile justice system,
 - is homeless or at risk of homelessness,
 - has co-occurring disorders,
 - is a high user of services or multiple hospitalizations,
 - is at risk due to lack of services because of cultural, linguistic, or economic barriers,
 - is uninsured,
 - is at risk due to exposure to domestic violence, physical abuse, emotional abuse, verbal abuse, or sexual abuse.



Wraparound: Mental Health Services

- SB163 (Chapter 795, Statutes of 1997) created the opportunity for California counties to use a portion of foster care funds to flexibly and creatively implement individualized services to keep eligible children out of RCL 10-14 Group Home placement or to help them transition out of placement
- DBH provides mental health services in support of Wraparound services through its contracted providers
- Services provided to those:
 - Medi-Cal beneficiaries classified as SED, under 21 & meets DSM IV criteria/dx
 - with impaired functioning in two areas: Self-care, Behavior towards others, Family functioning, School performance, Moods or emotions, Substance abuse or Cultural adjustment
 - placed/at risk of placement in RCL10-14 group home
 - with family/guardian willing to participate in process
- Referrals requested by CFS, DBH, Probation, foster parent, legal guardian or caregiver



Children's Residential Intensive Services (ChRIS)

- Blend Wrap-Informed Full Service Partnership (FSP) services with Group Home Services (RCL 10-14)
- Augment Group Homes Services through FSP
- Facilitate Successful Transition through FSP for up to 4 months after leaving the Group Home
- Agencies:
 - Victor Treatment Services:
 - RCL14: Adolescent Girls & Boys (2 Homes)
 - East Valley C.H.A.R.L.E.E.
 - RCL12: 8-12 year old boys, Adolescent Girls & Boys (3 Homes)
 - David & Margaret
 - RCL12: Adolescent Girls – Up to 6 beds within setting



Juvenile Justice

- Juvenile Detention & Assessment Centers (JDACs)
 - Minors entering the JDACs are given a mental health assessment
- Reintegration
 - Links minors with outside resources upon release
- Integrated New Family Opportunities
 - Provides therapy to minors and families
- Coalition Against the Sexual Exploitation of Children (CASE)





Psychiatric Hospitalizations

- Two Hospitals
 - Loma Linda Behavioral Medicine Center
 - Canyon Ridge
- 5585-Civil commitment of minors for 72 hours for evaluation and treatment
- 5150-Persons who pose danger to self or others may be confined for 72 hours for evaluation and treatment

Children's System of Care Demographics

Children's Program Unduplicated Clients 2014 Under age 18		
OCCES Ethnicity	Number of Clients	Proportion
African American	2594	14.8%
Asian Pacific Islander	734	4.2%
Caucasian	6044	34.5%
Native American	131	0.7%
Other/Unknown	8032	45.8%
Total	17535	100.0%
GENDER		
GENDER	Number of Clients	Proportion
Female	6954	39.7%
Male	10476	59.7%
Other/Unknown	105	0.6%
HISPANIC ORIGIN		
HISPANIC ORIGIN	Number of Clients	Proportion
Other/Unknown	3894	22.2%
Hispanic	8063	46.0%
Not-Hispanic	5578	31.8%

Children's System of Care Demographics (cont'd)

School Based Unduplicated Clients 2014 Under age 18		
OCCES Ethnicity	Number of Clients	Proportion
African American	931	13.1%
Asian Pacific Islander	150	2.1%
Caucasian	2601	36.6%
Native American	42	0.6%
Other/Unknown	3388	47.6%
Total	7112	100.0%
GENDER		
GENDER	Number of Clients	Proportion
Female	2696	37.9%
Male	4401	61.9%
Other/Unknown	15	0.2%
HISPANIC ORIGIN		
HISPANIC ORIGIN	Number of Clients	Proportion
Other/Unknown	875	12.3%
Hispanic	3529	49.6%
Not-Hispanic	2708	38.1%

Questions?

