



Therapeutic Behavioral Services Accountability Structure Report to the Department of Mental Health

Purpose: The goal of the Therapeutic Behavioral Services (TBS) Accountability Structure is to identify and develop a statewide practice and performance improvement structure. This structure will include outcome and utilization measures and a continuous quality improvement process that will allow the California State Department of Mental Health (CDMH) to effectively ensure that TBS are accessible, effective, and sustained for the Emily Q class members as outlined in the Court-approved TBS Plan.

The accountability structure, to be implemented by CDMH, will be accomplished through annual reports submitted by the county Mental Health Plans (MHPs). This new report utilizes a quality improvement process based on principles and accountability activities that focus on practice and service coordination, rather than compliance and disallowances. The report is designed to increase Emily Q class access to appropriate TBS services. This approach requires an interagency review of relevant data in response to four questions, utilizing a standard report format.

—Nine Point Plan, Appendix C

Directions: Please provide a brief summary of the answers to the following four questions as discussed in your local learning conversation (both Level I and Level II counties). Per the Nine Point Plan, it is the Mental Health Director's responsibility to submit the completed form. Please save this form to your computer then submit, along with a list of attendees, to TBS@dmh.ca.gov.

County MHP: Kern

Date of Meeting: 12-29-09

MHP Contact (name, phone, e-mail): Deanna Cloud; 661-868-6707, dcloud@co.kern.ca.us

Was this a Stakeholder or Decision-Maker meeting? Stakeholder

1. Are the children and youth in the county who are Emily Q class members and who would benefit from TBS, getting TBS?

- Not all Emily Q class members are receiving TBS. Now that the criteria for TBS has broadened, we expect more referrals.
- Progress has been made now that there is an increased awareness about TBS. Currently, Kern County is at .62% for TBS services. State data showed Kern at .38 in 2007.
- Agencies have identified a need for TBS.

Suggestions:

- Link youth to mental health services at the beginning of placement.
- Discuss the youth at the SMART Committee before the youth is sent to placement.
- Educate agencies about TBS.

Barriers:

- Documentation requirements.

- Level 12 group homes are not linking youth to mental health treatment.
- Lack of understanding on how the group home and the mental health department are suppose to work together to provide needed services.
- Host letter in incorporate group home expectations to link youth to mental health treatment.
- How to maintain current workload and increase TBS.

2. Are the children and youth who get TBS experiencing the intended benefits?

- Yes, youth who are receiving TBS and other intensive services are finding benefits.
- Hospitalizations have decreased for youth who have received TBS.

Suggestions:

- Implement a satisfaction survey to see if the youth feel that they are benefiting from services.
- Begin tracking the intended benefits of TBS.

3. What alternatives to TBS are being provided in the county?

- Dialectical Behavioral Therapy (DBT)
- SB 163
- School based services
- Wraparound
- Multidimensional Treatment Foster Care (MTFC)
- Functional Family Therapy (FFT)
- Community based services

4. What can be done to improve the use of TBS and/or alternative behavioral support services in the county?

- Educate group homes.
- Educate partner agencies.
- Education on TBS and changing perceptions.
- Train staff in TBS.
- Create TBS templates for assessment and Plan of Cares in Anasazi
- Track outcomes
- Red Flag notification in Anasazi

- Assess current caseloads to determine if there are any current youth who would benefit from TBS.
- Communicate with other counties such as San Diego and San Bernardino to learn how they increased their percentage.

Additional Comments: