

Children's Treatment & Recovery Meeting

June 16, 2009

TBS Stakeholder Discussion

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

- One foster parent stated foster children are not being provided TBS. She was told on two separate occasions that her foster child did not qualify. One child was hospitalized. She would like to see TBS services be implemented before the child is hospitalized.

Action Step: KCMH to ensure the hospitals are distributing the EPSDT Brochure notifying families of TBS services.

- Clinica Sierra Vista has a 4% increase in TBS services. They meet frequently with Leah (Covenant Community Services TBS Provider) regarding TBS.
- Clinica Sierra Vista puts TBS as a separate item in their budget.
- TBS should be considered before a child comes through the Special Multi-Disciplinary Agency and Referral Team "SMART".
- Probation officers and social workers will generally not be interested in TBS until they see it as useful for them. People are dealing with huge case loads so don't think to refer.
- Probation youth leaving the juvenile institutions rarely go to a placement lower than a 12. A lower level placement is not going to take youth that have issues associated with the juvenile institutions. Maybe negotiating with lower level group homes to offer TBS and give them the appropriate resources would open them up to accepting these high-risk kids.
- Department of Human Services and Mental Health meet monthly to help improve services to foster youth.
- There are a whole host of new TBS support systems that will be coming soon from the State.
- There can be administrative barriers, i.e., too much paperwork, etc. Make the process less complicated, more streamlined and user friendly.
- Parents and families are not aware of TBS. Employees are not aware of TBS.
- Parents do not like the thought of someone coming in to the home, a commitment to mental health, CASA, probation, DHS. Parents need to be educated about what to expect with TBS, that the provider is there to coach the parent, not tell them what to do.

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

- A parent stated TBS was effective and she was happy with the services.
- A TBS provider stated overall there is a tremendous amount of success.
- When Mental Health authorized TBS services, you could see behavior improve.
- Working with a TBS provider has helped identify challenges and help link the families to services.
- There is no one age group that does better with TBS. The cost of TBS may be large up front, but in the end it saves money by decreasing placement changes, hospitalizations, etc.
- Cannot measure success because there is no control group for comparison.

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- There are not enough people trained to provide the TBS service the State is requiring.
- 3. What alternatives to TBS are being provided in Kern County?**
- A consumer stated that DBT has been effective for her and has kept her out of the hospital. She also received a service similar to TBS (may have been TBS) that was not effective. DBT therapy was most effective.
 - MTFC is a similar model that is available 24 hours a day. It is a costly service, but has good outcomes. A social worker commented that the MTFC model needs to be expanded.
 - Wrap 163 also targets high-risk youth and has been helpful.
- 4. What can be done to improve the use of TBS and/or alternative behavioral support services in Kern County?**
- A social worker stated "outreach". Get information out there to foster parents. Foster parents often cannot handle the behaviors that accompany the foster children (allegations, bizarre behaviors, overmedicated, etc.) People need to be trained to deal with the foster care population. She suggested including information in a newsletter that is distributed to foster parents would be beneficial.
 - If parents and caregivers do not understand how TBS will affect their youth's treatment, they are less likely to ask for it.
 - Mental Health is struggling overall to get foster kids in to services.
 - Overcoming barriers would include streamlining authorizations, cutting out complicated processes and paperwork. TBS is often dealing with one or two behaviors, very focused and used to augment other treatment. Brief services, anything beyond 6 months should require justification. Part of the intent is to transfer the skills to the caregiver.
 - TBS should begin one day after receiving a request for services.
 - A big barrier is the budget and supplemental services. Those services are usually the first to go. Funding jeopardy creates pressure on the work we do.
 - High-risk youth will be high cost one way or another. It is important to discuss the most effective coordinated forms of treatment.
 - Training and documentation should help with interventions. Training needs to be ongoing due to high turnover rate.
 - State wants to make sure that other agencies (DHS, Probation) are aware of TBS services. Mental health can do trainings at Public Health, Probation, etc.

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Sign-In Sheet**

<u>Signature</u>	<u>Name</u>	<u>Department</u>
Present	Baker, Susie	Parent Partner
	Blaine, Barbara	Dept Public Health
Present	Brooks, Bill	College Community Services
	Christman, Bethany	Department Human Services
Present	Cloud, Deanna	Kern County Mental Health
	Conrad, Chris	Parent
Present	Cornell, Cathy	NAMI / Consumer
Present	Corson, Tom	Kern County Network for Children
	Curry, Linda	Dept Public Health
	Del Pellegrino, Vikki	District Attorney's Office
	DeVore, Steve	Kern County Mental Health
Present	Dutton, Lyn	Dept Human Services
	Eviston, Linda	STEPS
Present	Garza, Leah	Covenant Community Services TBS Provider / Faith Community
	Gill, Cindy	NAMI / Consumer
	Gill, Susan	County Counsel
	Greenstein, Marsha	Kern County Mental Health

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<u>Signature</u>	<u>Name</u>	<u>Department</u>
	Guilford, Carl	Department of Human Services
Present	Harp, Caroline	Kern County Mental Health
	Hoyle, Linda	Child Guidance Clinic
Present	Humecky, Michelle	Kern County Network for Children
	Lee, Adam	Kern County Mental Health
	Markovits, Raquel	Kern County Mental Health
Present	Matthew, Bill	Behavioral Health Board Member/Education
	McNally, Terry	Officer of the Court
	Monsibais, Cathy	Kern County Mental Health
Present	Orren, Kathy	C.A.S.A
	Patel, Amisha	Clinica Sierra Vista
	Ranes, Randall	Bakersfield City School District
Present	Reilly, Christopher	Clinica Sierra Vista / Unicorn Garden Group Home
Present	Rodriguez, Marti	Kern County Mental Health
	Sempell, Russ	Good Samaritan SouthWest/NAMI
	Sill, Jennie	Kern County Mental Health
	Sinnette, Jennifer	Kern County Mental Health

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<u>Signature</u>	<u>Name</u>	<u>Department</u>
	Springer, Meseret	Kern County Dept. Public Health
Present	Turjanis, Vija	Kern County Mental Health
Present	Walton, Joel	Kern County Probation Dept.
Present	Williamson, Greg	Behavioral Health Board Member/ Committee Chair / Law Enforcement
Present	Bobbie Rufus	Foster Parent
Present	Jenisha Crawford	Transition Age Youth
Present	Steven Johnson	NAMI-Out Spoken Young Minds
Present	Karen Moniz-Smith	Child Guidance Clinic
Present	Tammy Boen-Padilla	Kern County Mental Health
Present	Harriet Hamilton	
Present	Vija Turjanis	Kern County Mental Health
Present	Barabara Blaine	Kern County Public Health Dept.
Present	S. Biscoe	

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