

County Decision-Maker Learning Conversation
Santa Barbara

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

The Service Director of the TBS Provider Group clarified that a child at RCL 12+ is not the only eligibility criteria, but that if RCL 12+ is considered as ONE of the options, the child is eligible.

To clarify, the Service Director stated that if a child is referred, they must be considered.

Required documentation includes why a child is denied TBS.

What is the method for notifying the referring party if services are denied?

The Service Director responded that the contact (ie Team Supervisor, Case Coordinator, or Provider reviewing the case should be notifying the referring party.

ADMHS oversees forwarding the appropriate form showing acceptance or denial to the referring sources.

What exactly is the best method of initiating TBS for a child?

The Manager of Santa Barbara ADMHS QA/UR and the TBS Provider Group Program Manager lead a discussion reviewing the steps:

- Referring party refers child to TBS.
- Clinic assesses child for TBS eligibility (behavior problems, specific needs of child, other less intensive services, success/failure, family commitment to TBS service, payor source and the like)
- Program Manager signs off on review form
- Clinic Care Coordinator faxes to Casa Pacifica
- TBS Care Coordinator calls to set up initial appointment
- Clinic Care Coordinator, Social Worker, parents, and child, if appropriate, meet. Initial goals are established at first meeting.

Are there key factors that make a child a good candidate for TBS?

The TBS Provider Group Program Manager responded by leading a discussion including:

"If behaviors such as aggression, defiance, etc., that are a direct result of their mental health condition exist, that makes them a good candidate"

"This is short term, intensive, and very behaviorally focused."

Additional discussion included information of the following:

Underserved children are primarily those from group homes who are not covered by 163, as well as those coming out of jail, juvenile hall, etc.

The MHP may authorize TBS services when class membership cannot be established or approved (30 day unplanned contact). This is intended to make therapeutic contact with children in a timely fashion.

Meeting attendees were encouraged to discuss any potential barriers to TBS access.

The group responded by noting that the TAY group (18-21 yr olds) are utilizing these services less. It was agreed that there is a need to aggressively reach out to this age group going forward.

ADMHS Children's Service Chief Suzanne Grimmersey-Kirk, MFT reported that Santa Barbara County ADMHS is working to put in TAY teams with a clinician from ADMHS, a clinician from a partner agency and one that spans both in Lompoc and Santa Maria (caseloads will hold 45 at a time max) starting July 1st.

*****Probation children- looking to move them on, so one solution would be to develop a system where an agency would pick up those cases and get them the services- possibly use THP+ or create a new group that handles the ones outside of THP+.

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

The TBS Provider Group presented statistics showing outcomes. (See Attached)

Feedback from those in the audience who have referred to TBS was very positive.

"Sometimes it is the only way to keep the children in school or placement."

"The parents and children are very willing to work on it."

"Referral process is going very well."

Negative comments reported by referral sources present at the meeting were related to the time commitment required of families.

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

While TBS is defined as a unique service, a number of related services are available in Santa Barbara County.

Other services include:

- HOPE- in home service for children who are part of court system- provides intensive support to foster parents and the child so they don't bounce in and out of homes.
- Screener team as part of HOPE to screen for mental health needs when child is coming from CWS and Public Health.
- IIH- Intensive in Home for children in their own homes
- SAFTY, School based counseling
- Wraparound services- SPIRIT teams at each regional site.
- SB163 WRAP program through Casa Pacifica.
- Children without Medi-Cal- IBS (Intensive Behavioral Services)- TBS services as an intervention for those children- usually Healthy Families.

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

Issues with child seeing therapist in the County. TBS referral tends to turn into a clinic referral. ADMHS perspective- need to determine individual needs. If child has a huge need for services, we need to get them into the clinic and then re-assess. If child gets recommended for higher level placement, we need to see what is happening if they are not open to the system. It may be time to bring them into the system at that point. Clinic has seen a few cases where TBS was appropriate rather than the clinic referral. Clinic requests that referring party speak to the Program Manager at the clinic to discuss. New reason for TBS referral may be when a child is coming out of a higher placement and is not open to the clinic yet. Provides background for both referring party and clinic for when the child is placed at a higher level of care or hospitalized and there is a written history of events. Casa Pacifica tries to use outreach to the staff to get the information out on TBS services and how it can be beneficial. Casa Pacifica is very willing and open to meet with any staff and do a presentation on TBS and answer questions. Linda Tuttle, MFT, the Santa Maria Regional Program Manager recommended that the clinic go out to the locations to present together so she may include the additional services as a broad spectrum of care resources. CWS worker feels that it is important that social workers are part of the initial reviews so the family and children know that the social workers are committed and involved. Plus, she has the information that TBS does not have, so she can provide info such as reunification processes. CWS worker informed panel that the initial referral is the most difficult part of getting into TBS, and that the service itself is great. It would also be beneficial to be informed on more services in neighboring counties so when children are transferred between counties, they can set them up with neighboring county services as a supplement to TBS.