

County Local TBS Meeting Facilitation Guide

As a condition of settlement of the Emily Q v. Bontá lawsuit, county Mental Health Departments are required to convene two Local TBS Meetings in 2009 and again in 2010 to bring together an array of agencies, providers, parents/caregivers and others who are involved or interested in Therapeutic Behavioral Services (TBS) for children and youth who meet Emily Q class membership criteria.

The purpose of these local meetings is to discuss four aspects of local TBS programs: access to TBS among Emily Q class members, benefits from TBS, alternatives to TBS, and local strategies to increase and improve TBS to Emily Q class members. This facilitation guide is designed to help you lead the local TBS meetings in your county – it offers talking points and suggestions for keeping the conversation focused on TBS, and for delving into key underlying issues that may impact TBS delivery in your county.

Although you are required to convene the meetings, you are not required to follow this facilitation guide; it is being provided to assist you in leading your local TBS meetings. We believe you will find this guide helpful in both leading your local discussion and in completing the narrative report to CDMH describing the findings from your meeting.

Who is eligible for TBS under the *Emily Q* settlement?

Children and youth under age 21 receiving EPSDT mental health services who:

- are placed in **or** are being considered for RCL 12 or higher, **or**
- have received psychiatric hospitalization in the past 24 months, **or**
- are being considered for psychiatric hospitalization.

You also might find it helpful to distribute the *Therapeutic Behavioral Services (TBS)* one-page fact sheet that is available on the CDMH Emily Q Web site. This sheet explains the basics of TBS and key issues associated with the Emily Q settlement.

Four Key Questions for the local TBS meetings

The local meetings are based on four questions required by the Emily Q settlement:

1. Are the children and youth in your county who are Emily Q class members and who would benefit from TBS, getting TBS?
2. Are the children and youth who get TBS experiencing the intended benefits?
3. What alternatives to TBS are being provided in your county?
4. What can be done to improve the use of TBS and/or alternative behavioral support services in your county?

This facilitation guide follows these four questions, offering questions that you can ask to promote the conversation and to ensure that the full array of TBS-related issues come out in the discussion.

It will also be important to review the TBS Data Dashboard for your county that is provided on the CDMH Emily Q/TBS Web site. The dashboard displays key statistics that describe TBS in your county for the years 2006, 2007 and 2008.

Suggested talking points and questions for the local TBS meetings

The local meetings are about children and youth in the Emily Q class. Although other children are important, it may be necessary to remind participants to stay focused on Emily Q class members when discussing the following questions.

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

The following are some possible questions to ask participants in your local meetings:

- To what extent do factors such as age, gender, language or culture affect who does or doesn't get TBS in your county?
- To what extent do the different county agencies (Child Welfare Services, Mental Health, Probation, Education, the Courts and others) refer children and youth for TBS?
- To what extent are families, parents and caregivers aware of TBS?
- To what extent is TBS available throughout the various geographic areas of your county?
- Are there any specific barriers to TBS such as lack of information, language barriers, administrative or claiming barriers, confusion about eligibility or appropriateness for TBS, lack of TBS providers, lack of funding, service wait lists or delays, lack of service coordination, poor fit with family/caregiver circumstances, court requirements, or anything else that might limit Emily Q class member access to TBS in your county?
- Are there any other access-related issues that people would like to discuss?

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

Possible questions you might ask during this part of the local meeting:

- To what extent do factors such as age, gender, language, culture or geographic area affect who benefits from TBS in your county?
- What specific benefits are children and youth referred from different county agencies (Child Welfare Services, Mental Health, Probation, Education, the Courts and others) experiencing from TBS?
- To what extent are families, parents and caregivers seeing or experiencing the benefits of TBS for themselves or their children?
- To what extent are parents/caregivers able to participate actively or take a lead role in their child's/youth's TBS program?
- Are people seeing any specific benefits from TBS such as improved self management or self control, improved coping ability, reduced stress, reduced need for placement, ability to step down from high-level placement, improved interpersonal skills, improved communication, improved relationships at home, school success, reduced delinquency, or any other benefits?
- Are there any other benefit-related issues that people would like to discuss?

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

There might be other services in your county that are equivalent to TBS. It will be important to ask participants about other behavioral treatment programs such as the following that might have a TBS-equivalent service embedded in them:

- Intensive in-home services.
- Family To Family programs.
- SB-163 Wraparound.
- School-based behavior intervention (“Hughes Bill”).
- School-based mental health services such as AB-3632.
- MHSA full service partnerships.
- Behavioral services in juvenile justice.
- Community-based programs such as Big Brothers/Big Sisters, mentoring programs, in-home therapeutic aides, etc. that could contribute toward behavioral success.

To what extent are these programs able to provide intensive, sustained and focused services equivalent to TBS in your county?

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

Different counties have different resources, needs and opportunities to address the behavioral needs of children and youth in the Emily Q class. It might be helpful to ask who in your county might offer any of the following:

- Improved outreach to children, youth, parents, families, caregivers and foster service providers of Emily Q class members.
- Training in TBS.
- Funding to match Medi-Cal.
- Cross-agency referrals.
- Improved coordination of services between agencies.
- Any other strategies to increase TBS or TBS-equivalent services.

What other strategies are people and agencies willing to explore that could increase Emily Q class member access to therapeutic behavioral services in your county?

Good luck with your local TBS meetings

We hope you find some or all of these suggestions helpful in leading the local TBS meetings in your county. The goal of the discussion is to bring together an array of people who have an interest or stake in children and youth in the Emily Q class and explore ways they can help class members in your county receive appropriate TBS or equivalent services.

Also, please feel free to discuss any additional services that your county might offer to Emily Q class members, or other class-related issues that your participant group believes are important to consider. We encourage you to explore what works best in your county. And we wish you the best of luck.