

The Emily Q Nine-Point Plan

Emily Q Case Background

The *Emily Q. v. Diana Bonta* (Director of the California Department of Health Services) federal class action lawsuit was filed in 1998, seeking positive behavioral intervention services for a young woman and others who were in a locked mental health hospital.

The Federal Court issued a permanent injunction in 2001, ordering the California Department of Mental Health and County Mental Health Plans to provide Therapeutic Behavioral Services (TBS) to all California children who are members of the Emily Q class.

After years of TBS underutilization and unresolved litigation, the plaintiffs and defendants reached a consensus agreement in 2008 through a process of Interest-Based Decision Making.

In November 2008, the Federal Court approved the Emily Q Nine-Point Settlement Implementation Plan (Point Nine is pending Court decision).

Plan implementation began in January 2009.

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Emily Q Class Members

As of November 2004, the Emily Q class is defined as:

All current and future beneficiaries of the Medicaid (Medi-Cal) program below age 21 in California who

- Are placed in a Rate Classification Level (RCL) facility of 12 or above and/or a locked treatment facility for the treatment of mental health needs, or
- Are being considered for placement in these facilities, or
- Have undergone at least one emergency psychiatric hospitalization related to their current presenting disability within the preceding 24 months, or
- Are at risk of admission to a hospital for acute psychiatric inpatient hospital services or to a psychiatric facility for acute care.

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There are nine inter-related sections in the Emily Q Settlement Implementation Plan.

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Streamline
Administrative
Requirements

Point 1: Streamline the TBS Administrative Requirements

Eliminates many administrative requirements that have burdened counties in the past and have reduced the use of TBS.

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Streamline
Administrative
Requirements

Clarify
Eligibility

Point 2: Clarify Criteria for TBS Eligibility

Presents simple and direct language to clarify
TBS eligibility requirements.

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Clarify
Eligibility

Point 3: TBS Accountability Structure

Establishes an accountability process and
structure the California Department of Mental
Health (CDMH) will use to monitor and improve
TBS utilization in every county.

Accountability
Structure

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Streamline
Administrative
Requirements

Clarify
Eligibility

Point 4: Define TBS Best Practice to Promote Service Integrity

Accountability
Structure

Describes a TBS best practice approach from assessment through service delivery and termination.

TBS Best
Practice

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Streamline
Administrative
Requirements

Clarify
Eligibility

Point 5: Create TBS Coordination of Care Process

Accountability
Structure

Proposes a multiagency coordination strategy to engage Social Services and Juvenile Justice agencies at the state and county levels in order to increase and improve TBS service access and delivery.

TBS Best
Practice

Coordination
Of Care

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Streamline
Administrative
Requirements

Clarify
Eligibility

Point 6: TBS Training

Establishes a statewide TBS training program.

Accountability
Structure

TBS Best
Practice

TBS
Training

Coordination
Of Care

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Streamline
Administrative
Requirements

Clarify
Eligibility

Point 7: TBS Manuals

Outlines technical assistance manuals covering
both TBS practice and chart documentation.

Accountability
Structure

TBS
Manual

TBS Best
Practice

TBS
Training

Coordination
Of Care

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Streamline
Administrative
Requirements

Clarify
Eligibility

Point 8: TBS Outreach

TBS
Outreach

Accountability
Structure

Outlines an outreach strategy to increase awareness of TBS and expand its utilization statewide.

TBS
Manual

TBS Best
Practice

TBS
Training

Coordination
Of Care

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Streamline
Administrative
Requirements

Clarify
Eligibility

Court
Exit

Point 9: Termination of Court Jurisdiction

TBS
Outreach

Accountability
Structure

Defines a process that will result in Court exit from the Emily Q matter.
(A final Court decision regarding the exit plan is anticipated by March 2009.)

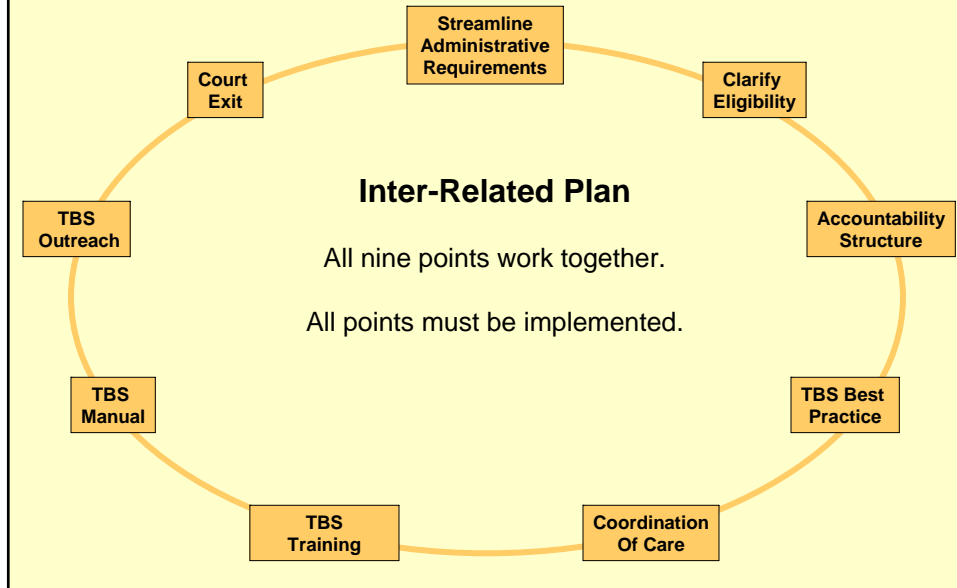
TBS
Manual

TBS Best
Practice

TBS
Training

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Of Care

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The Role of the California Department of Mental Health

Ensure implementation of the Nine-Point Plan.

Provide guidance and support to counties to increase TBS utilization among Emily Q class members.

Maintain transparency statewide.

Demonstrate increased utilization of TBS by county Mental Health Plans.

Satisfy all requirements of the Court.

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The Role of County Mental Health Plans

Apply the streamlined administrative procedures and clarified eligibility guidelines described in Points 1 and 2.

Implement the accountability structure process described in Point 3.

Employ the TBS best practice approach presented in Point 4.

Seek participation of other agencies and stakeholders in local TBS efforts as outlined in Point 5.

Participate in the TBS trainings and use the TBS manuals described in Points 6 and 7.

Support TBS outreach efforts outlined in Point 8.

Achieve the TBS utilization benchmarks described in Point 9 (pending final Court determination).

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The Settlement Team, ASIS and TACT

The Nine-Point Plan implementation is led by several task groups, operating under the authority of the Court and CDMH.

The Settlement Team is the core group that developed the Nine-Point Plan. It includes representatives for the plaintiffs, defendants, county MHPs, parents of children in the Emily Q class, TBS providers, and the Court.

The Accountability Structure Implementation Strategy (ASIS) task group is assisting CDMH in developing a TBS accountability structure (Point 3).

The Technical Assistance, Communication and Training (TACT) task group is assisting CDMH in developing the training process, manuals, and outreach strategy (Points 6, 7 and 8).

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ASIS and TACT Mission Statements

The ASIS mission: Develop a TBS accountability structure that achieves: 1) better outcomes, 2) an improved review process, and 3) increased utilization.

CDMH has contracted with APS HealthCare to provide technical assistance and support to the accountability effort.

The TACT mission: Develop a TBS Training and Technical Assistance Plan, corresponding training and documentation manuals, and an electronic strategy outreach plan to reach all class members, their families, provider organizations and agencies serving members of the class.

CDMH has contracted with the California Institute for Mental Health to provide technical assistance and support to the training and outreach effort.

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ASIS and TACT Membership

Both the Accountability Structure Implementation Strategy (ASIS) and Technical Assistance, Communication and Training (TACT) task groups include members of the Settlement Team plus additional CDMH staff, contractors, providers, and county representatives who were recruited for their technical expertise and assistance.