

August 25, 2020

To: El Dorado County Behavioral Health Commission  
From: BHC Ad Hoc Committee on Children's Services

RE: COMMITTEE REPORT 082620

Committee goal:

Working with County staff, providers of services, and consumers and their families, offer recommendations to the Behavioral Health Commission that enhance the delivery of children and youth services as related to behavioral health.

Committee objectives:

- 1) To identify gaps in services provided to children and youth through El Dorado County's Behavioral Health Division.
- 2) To provide measurable recommendations that address these gaps in collaboration with County Division staff; contractors/providers of services; and consumers and their families.
- 3) Obtain adoption of these recommendations by the Behavioral Health Commission.
- 4) Present findings and subsequent recommendations to the El Dorado County Board of Supervisors.
- 5) Support the framework of a Child and Youth Commission for behavioral health.

Gaps identified based upon discussions with County staff:

- 1) Respite care
  - a. Definite need for families.
  - b. In the process of being developed for EDC.
  - c. Some funding may be available through MHSA's Community Services and Supports/Full-Service Partnership/flex funding. Part of the process in developing the program will be cost analysis and determination of how it can be funded.
  - d. Evaluate respite programs in other counties (e.g. Sacramento and Ventura) and institute their best practices into EDC's program
  - e. How do we vet a respite provider? Look to CPS for how they handle these services.
- 2) Transitioning from one county to another –
  - a. Long time dilemma for Medi-Cal
    - i. Presumptive transfer reserved for adoptive youth and foster youth.
    - ii. Transfer of Medi-Cal services is complex and takes time. There is a need for true, fair reimbursement and change in regulation to create a warm handoff and timely response.
    - iii. Parity of services (physical health, mental health, substance use) currently does not exist as access to behavioral health services (mental health and substance use) is tied to which county issues the Medi-Cal for the client.

- iv. Acknowledge gap is beyond the county.
  - b. Who does the family in need of these services contact? Evaluation of care coordination. EDC has adopted a no wrong door approach.
- 3) Inter/intra county collaboration
  - a. Work with a SMART team which is a multidisciplinary team; however, there is a struggle within the system as agencies tend to still work in silos.
  - b. A need to improve in the coordination. How well are we communicating these services to the family?
  - c. Recurring gap
    - i. Parent so exhausted and terrified of the child going through Short Term Residential Treatment Placement (STRTP) services for children.
    - ii. El Dorado County Behavioral Health partners with Child Welfare and Probation departments when out-of-home placements are needed; STRTP is considered the most restrictive treatment option and only considered when all other treatment options have not been successful;
    - iii. Parents need help navigating the system.
    - iv. There is not a comprehensive system of placement for children as there is for adults;

Next steps:

Meet with contract provider of services for input on these identified gaps as well as any other they may be experiencing that are hampering effective, efficient service delivery.

Respectfully submitted,

BHC Children Services Ad Hoc Committee