

COUNTYWIDE CHILD MHSA NEWSLETTER

LPS Designation:

Is Your Agency Authorized?

According to the FSP Performance Criteria, providing quality 24 hour-a-day, 7 day-a-week crisis support includes having the capacity to write a WIC 5585 involuntary hold, when necessary. Due to the increasing need for field based Child Crisis Evaluations, especially for DCFS involved children, it is more important than ever for Child FSP contract providers to build their capacity to respond to children in crisis.

Seasoned LPS designated staff report that having a trusting relationship with the client allows them to make the accurate and well informed assessment necessary for determining whether an involuntary hold is warranted or not.

This insight emphasizes the importance of each Child FSP treatment team having an LPS designated member who not only knows the child's history and needs intimately, but has built a relationship with the child and the capacity to truly assess that child's need for hospitalization.

Unfortunately, a large percentage of Child FSP providers do not yet have an LPS designated member on their treatment teams.

The good news is that DMH is prepared to assist its providers with enhancing their capacity to respond to children in crisis. An expansion of LPS Designation trainings is underway and, under specific caveats, license-eligible staff who have completed at least 75% of their required

licensure hours will be granted provisional LPS authorization for up to 12 months. For specific details, please contact your Age Group Lead Manager.

Agencies who lack LPS authorized staff or who have license eligible staff that have not completed the LPS Designation Training should contact Training Coordinator, Lisa Song, at (213) 251-6788 or lsong@dmh.lacounty.gov.

In the interim, there are several best practices that providers can use to minimize after hour crisis calls while their staff is being trained for LPS authorization:

- Help clients identify and learn how to utilize effective coping strategies
- Teach clients how to recognize triggers and respond with de-escalation techniques
- Encourage the use of peer support
- Ensure that Crisis Plans are written in the client's first language



The LPS Designation training addresses the legal and clinical aspects of writing a 5150 hold, NOT LPS Policy & Procedure.

Before enrolling and attending a LPS Designation training, participants should ensure they have a thorough knowledge and understanding of their respective agency's policies and procedures such as:

- How to locate a hospital bed
- Arranging for ambulance transportation
- Being familiar with hospitals they will be utilizing

In addition, participants should be familiar with 5150 related paperwork including property sheets and other relevant forms required for writing a hold.



FCCS Implementation

Transformation opportunities resulted in the initiation of specialized field-based children's services, formally known as Field Capable Clinical Services and commonly known as FCCS. Community Partnerships are an essential feature of FCCS and include the co-location of FCCS multi-disciplinary treatment teams in community settings.

Services are provided to unserved and underserved populations in their preferred languages with crisis support available 24/7. Since FY 2008-09:

- Nearly \$44 million dollars in Child FCCS services have been provided
- Approximately 78 Child FCCS programs have been implemented, bringing the total number of Child FCCS providers in Los Angeles County to 95
- There has been an 8% increase in field-based mental health services to children Countywide.

Upcoming Trainings

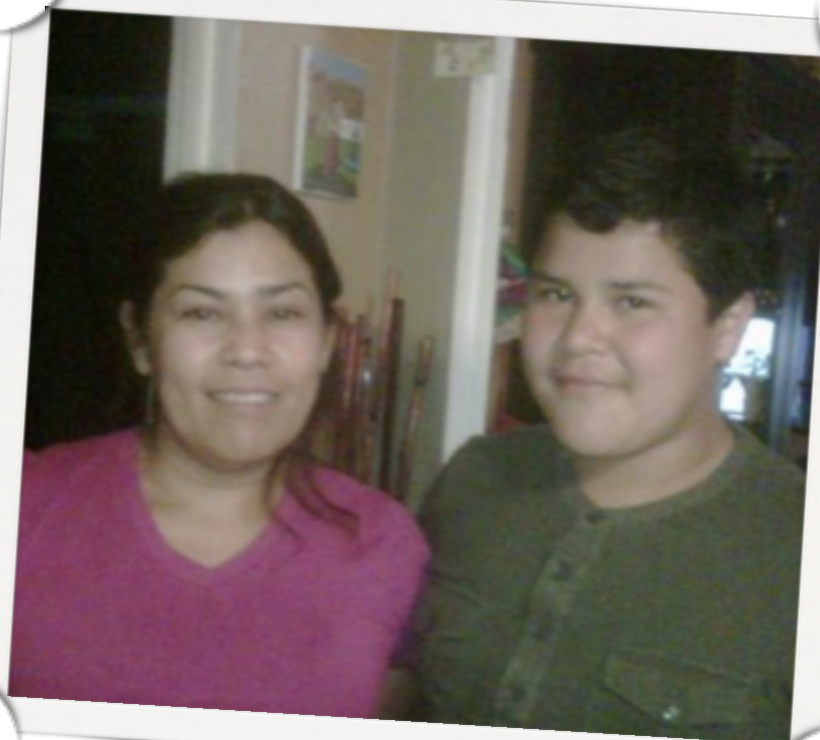


Each year CWCA conducts a Training Needs Survey in an effort to provide truly meaningful training and technical support. The information collected was used to design a training curriculum that includes the following up and coming trainings:

- Documentation Training: Strengthening Families & Resiliency
- Parent Advocate / Partner: The Basics Training Program
- Ending on a Positive - Exploring Termination in MHS
- Introduction to Motivational Interviewing
- Emotional Intelligence and Diversity Skills in Clinical Practice
- Assessment of Axis (DC:0-3) Social, Emotional Functioning & DIR (Developmental, Individual Difference Relationship-based) / Floor Time Model

Dylan's Story

"Dylan's FSP Program was like a magic wand!"



Dylan grew up in an environment of severe domestic violence and recurring involvement with the Department of Children and Family Services. By the time he was 15, Dylan had become a very angry and hostile adolescent. His aggression and hostility was so consuming that he routinely punched holes in the walls of his family's home, kicked in doors and set his younger siblings' toys on fire.

Over the years Dylan became extremely possessive of his mother. He would pin his mother's arms and block the doorway with his body whenever she attempted to leave the house. Dylan demanded 100% of his mother's attention and would often fly into fits of rage, punching his three-year-old sister out of jealousy when his mother was attending to the young toddler's needs. Communication was non-existent between Dylan and his mother. She would give Dylan orders, but he consistently became oppositional and defied her.

In November 2009, Dylan was enrolled in Hathaway-Sycamores' FSP Program. The treatment team immediately began providing individual therapy to Dylan, as well as family counseling that included his mother and sisters.

Dylan was also enrolled in a local martial arts program where he has been able to learn discipline and develop his self-control. Martial arts also provide him with an appropriate outlet for venting pent up aggression and anger.

Hathaway Sycamores' FSP Parent Partner worked diligently with Dylan's mother, providing her with guidance and support as she learned to communicate more effectively with Dylan and garner the respect she deserved from him.

Dylan's mother reports that Dylan has made many positive changes. "He is much more independent, is interested in school and is very helpful with chores around the house."

"I have learned how to express myself much better. Instead of just giving orders, I ask for his help and he responds much better."

"I feel different now", confides Dylan, "I am calmer and don't get in so much trouble anymore."

"Dylan's FSP program was like a magic wand!" exclaims his mother, "We have a much closer relationship now that we have learned to communicate with one another."

Both Dylan and his mother agreed that programs like FSP are very important in helping kids stay out of gangs and keeping families together.

Dylan's story is just one example of how Child FSP programs promote hope, wellness, and resiliency and help keep families together.

Fast Tracking OMA Cleanup



There are several simple steps that Child FSP providers can take to fast track their OMA clean up process.

Adhere to Dis-enrollment Requirements

It is very important to request authorization for dis-enrollment within 30 days of losing contact with a client. Not only is it a contract requirement, it is vital to maintaining client flow and reducing OMA cleanup.

Verify OMA Entries Before Requesting Authorization to Dis-enroll

Reviewing and verifying OMA entries to ensure a single baseline and that all required KECs and 3Ms have been entered before requesting authorization to dis-enroll will significantly reduce OMA cleanup later on.

Close Using Countywide Dis-enrollment Authorization Date

When closing a case, use the Countywide authorized dis-enrollment date

Return Calls Promptly

If you receive a call from Countywide or the Implementation Unit regarding your OMA issues, it means that they have your Deletion Request or other related paperwork in front of them and are ready to take the necessary steps to resolve your issues. Failure to return the call in a timely manner will result in the status of your paperwork going from active to pending as staff move on to the next provider.

Test Your LPS Knowledge



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WORD LIST

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| AMBULANCE | MENTAL |
| ASSESSMENT | PETRIS |
| CHILD | POLICY |
| CRISIS | PROCEDURE |
| DANGER | PROPERTY |
| FIELD | RESPONSE |
| GRAVELY | SHORT |
| HOLD | TRAINING |
| HOSPITALIZATION | TRANSPORTATION |
| LANTERMAN | WELFARE |