



County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

510 S. Vermont Avenue, Los Angeles, California 90020
(213) 351-5602




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May 31, 2024

To: Supervisor Lindsey P. Horvath, Chair
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Supervisor Janice Hahn
Supervisor Kathryn Barger

From:  Brandon T. Nichols
Director, Department of Children and Family Services

Lisa H. Wong, Psy.D. 
Director, Department of Mental Health

REQUIRED QUARTERLY REPORTING, PURSUANT TO THE NOVEMBER 29, 2023 JUDGMENT APPROVING SETTLEMENT IN THE KATIE A. LAWSUIT, REGARDING REVIEWS OF PLACEMENT CHANGE REQUESTS MADE DUE TO "CHILD'S BEHAVIOR"

On November 29, 2023, the United States District Court for the Central District of California entered a judgment approving the parties' settlement agreement and ending the *Katie A.* lawsuit; however, the judgment requires ongoing publishing of information from the County of Los Angeles for a period of 18 months.

The 60 attached case review forms constitute the second quarterly publishing of the County of Los Angeles Department of Children and Family Services (DCFS) and Department of Mental Health (DMH) joint reporting pursuant to the settlement, covering the period from January 1, 2024 through March 31, 2024. Per the settlement, the 60 reviews were chosen randomly from the children/youth/non-minors who experienced a placement change request within the quarter and the reason for the placement change was indicated as "child's behavior." Also per the settlement, the reviews specify whether Intensive Care Coordination, Intensive Home Based Services, and/or Child and Family Team Meetings were provided during the 30 days prior to and 30 days after the placement change date, as well as the duration and intensity of intensive service provision that each child received

"To Enrich Lives Through Effective and Caring Service"

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during that same timeframe. Demographics and the total number of moves are also reported.

When applicable, other information is included on the review form to elucidate the circumstances that impacted service provision, describe what efforts were made to prevent the replacement (if there was prior placement change included in this reporting), and explain whether the placement change was due to another reason besides the child's behavior.

The settlement agreement also requires the County to report on what, if any, new measures it has implemented, or intends to implement, based on the findings in the immediately prior Quarterly Report. There are no new measures to report at this time.

These reports will be publicly available and can be accessed on the Los Angeles County Board Correspondence website: (<https://lacounty.gov/government/board-of-supervisors/board-correspondence/>). The reports will also be posted on the DCFS and DMH public websites.

If you have any questions, you may contact us, or your staff may contact Aldo Marin, DCFS Board Liaison, at (213) 454-6652, or Crystal Kibby, DMH Board Liaison, at (213) 700-2521.

BTN:JF:DI
LW:jn

Attachments

c: Department of Probation
Los Angeles County Commission for Children and Families
Los Angeles County Mental Health Commission

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	61	Age	9
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Metro North	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	2/5/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	4	126	2	170
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	4	126	2	170

IV. ICC/IHBS SERVICES PROVIDED

During review period from 01/06/2024 through 03/06/2024, the client received the following ICC services: Assessment and targeted case management, including collateral session with caregiver, psychoeducation, and linkage to additional mental health services. The client transitioned to a new Mental Health Provider on 1/22/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This placement change was not due to the child's behavior. Rather, the child was court-ordered to be returned to the home of their parent.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	62	Age	15
Race/Ethnicity	White	Gender	Female
DCFS Office	BSRS	Total Number of Placement Moves	7
Resided Out of County	No	PLACEMENT CHANGE DATE	2/2/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	2/1/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	20	1,740	1	60
Intensive Home Based Services (IHBS)	14	845	1	70
TOTAL	34	2,585	2	130

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 1/03/2024 through 3/03/2024, the following IHBS and ICC services were provided to client: Assessment, medication support, team collaborations to meet the needs of the client, referral to Regional Center, and individual therapy. Intensive Care Coordination Services included team collaboration with DCFS via regular team meetings, and coordination of follow-up Child and Family Team Meetings (CFTMs) to discuss client's progress. CFTMs were held to discuss the client's goal, trauma history, and transition plans. CFTMs were also held to review the client's progress in treatment and to support placement stability. IHBS included therapy sessions and practicing interventions to support client's mental health stability. Clinician worked collaboratively with client to identify triggers and coping strategies to improve mood stability. Clinician provided psychoeducation to help client's overall mental health functioning. Clinician assisted client in identifying and practicing assertive communication skills without using aggression. Clinician modeled conflict resolution skills, utilized a trauma narrative, and incorporated the use of expressive arts and music. The clinician supported the client to expand their positive peer social network and provided psychoeducation about trauma. The client received services from the Mental Health Provider until 2/02/2024, when client transitioned to an aftercare program.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

An additional CFTM was held on 3/12/2024; however, that was outside of the review period. In addition to their primary caseworker, this child/youth has been assigned a specialized secondary worker through DCFS's Placement Stabilization Team, which supports the youth and caregiver 24 hours per day, seven days per week.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	63	Age	6
Race/Ethnicity	Asian/Pacific Islander	Gender	Male
DCFS Office	Asian Pacific	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/2/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS services from a Los Angeles County Mental Health Provider during the designated review period of 12/03/2023 through 2/01/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This was not a placement change due to the child/youth's behavior. Rather, this child was placed into their adoptive home.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	64	Age	5
Race/Ethnicity	Black	Gender	Male
DCFS Office	Lancaster	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/8/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	1/18/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	7	710	14	1,243
Intensive Home Based Services (IHBS)	5	239	9	476
TOTAL	12	949	23	1,719

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/09/2023 through 02/07/2024, the following IHBS and ICC services were provided to client: Assessment, individual therapy, referral to Regional Center, referral to medication support, and collaboration with DCFS. Intensive Care Coordination Services included teaming with DCFS, targeted case management, scheduling Child and Family Team Meetings (CFTMs), and coordinating follow-up CFTMs to discuss client's successes and challenges. The CFTMs were held to discuss the client's goals, trauma history, to review the client's treatment progress, and support placement stability. The treatment team provided support for the caregiver after learning that client had a difficult time transitioning from daycare to the home setting. IHBS were delivered in the home and at daycare to support the client and caregiver. Additional support through Therapeutic Behavioral Services (TBS) was provided numerous times per week at the daycare to assist with impulsivity. The treatment team utilized the following coping strategies and interventions to support the client: Behavior chart to help with communication, reward system, breathing skills, self-regulating through play therapy, and the utilization of praise and validation. The treatment team provided collateral support to caregiver by accommodating services according to her work schedule, and met with her at the home, as needed to support and help meet the client's needs. Client continues to receive services from the Mental Health Provider.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This was not an actual placement change. Rather, the home was converted to a different type of placement on the electronic case management system. The child/youth remained in the home throughout the conversion process.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	65	Age	7
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Hawthorne	Total Number of Placement Moves	7
Resided Out of County	No	PLACEMENT CHANGE DATE	1/17/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	12/19/2023 and 2/08/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	2	140	0	0
Intensive Home Based Services (IHBS)	22	1,052	44	3,123
TOTAL	24	1,192	44	3,123

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/18/2023 through 2/16/2024 the following IHBS and ICC services were provided to client: Intake Assessment, Comprehensive Multidisciplinary Evaluation, Plan Development, Individual Therapy, and Targeted Case Management. Mental Health Clinician introduced sensory objects to aid client in self regulation. Client utilized sensory objects as a coping skill when feeling overwhelmed. In-Home Support Counselor modeled appropriate behavior when playing board games in order to help client manage frustration. While out in the community, In-Home Support Counselor engaged client on walks to illustrate healthy boundaries. Client transitioned to second Mental Health Provider on 1/30/2024 of the current review period.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	66	Age	4
Race/Ethnicity	White	Gender	Female
DCFS Office	Belvedere	Total Number of Placement Moves	6
Resided Out of County	No	PLACEMENT CHANGE DATE	1/24/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates			

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 12/25/2023 through 2/23/2024. Client started to receive services from the current Mental Health Provider on 3/13/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This was not a placement change. Rather, the child was placed into this home temporarily to accommodate the caregiver's need for respite, and then the child returned to the placement when the caregiver was ready to receive them back.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	67	Age	14
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Glendora	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/5/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	2
CFT Meetings Dates	12/07/2023, 1/11/2024, and 1/30/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	4	190	8	710
Intensive Home Based Services (IHBS)	6	817	9	1,796
TOTAL	10	1,007	17	2,506

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/06/2023 through 2/04/2024 the following IHBS and ICC services were provided to the client: Individual Therapy, Targeted Case Management, Plan Development, and Rehabilitation. Clinician helped client explore and amplify strengths, and further develop coping skills such as meditation. The cultivation of these skills minimized behaviors that interfered with client's success at school. Additional services included: multiple weekly sessions, grounding exercises, redirection, journaling, and assertive communication skills to support the client's goals. Clinician also supported transitions by discussing changes and expectations with the client and coordinating with the caregiver. The mental health team also coordinated mental health treatment, including staff engagements, Child and Family Team Meetings and consultations.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	68	Age	7
Race/Ethnicity	White	Gender	Male
DCFS Office	Lancaster	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/9/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	1/23/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	1	75	8	411
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	1	75	8	411

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/10/2023 through 2/08/2024 the following ICC services were provided to client: Targeted Case Management. The Assessor evaluated client for mental health services, coordinated staff engagement, consulted with team members and participated in a Child and Family Team Meeting. Client transitioned to a second Mental Health Provider on 1/19/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	69	Age	17
Race/Ethnicity	White	Gender	Female
DCFS Office	Hawthorne	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/4/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	2	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	12/06/23, 1/11/24, and 2/08/24		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	3	307	1	123
Intensive Home Based Services (IHBS)	27	2,490	15	1,176
TOTAL	30	2,797	16	1,299

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/05/2023 through 2/04/2024 the client received the following IHBS and ICC services: Assessment, Plan Development, Treatment Planning, and Targeted Case Management. The Rehab Specialist worked with client to develop coping skills and strategies which included journaling, drawing, grounding exercises, identifying feelings, and engaging in safety planning. The Parent Partner assisted the caregiver in implementing routines, conducting safety planning, and promoting placement stability. The parent partner assisted the caregiver in developing an understanding on how behaviors relate to trauma. The clinician focused on providing psychoeducation on trauma and reviewing safety skills. The Intensive Care Coordinator discussed linkage with the formal team members and DCFS, facilitated Child and Family Team Meetings (CFTMs) to discuss placement, and develop a plan to meet the client's underlying needs.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	70	Age	13
Race/Ethnicity	Black	Gender	Female
DCFS Office	Lancaster	Total Number of Placement Moves	4
Resided Out of County	No	PLACEMENT CHANGE DATE	3/14/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	2/27/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive Intensive Care Coordination (ICC) services or Intensive Home Based Services (IHBS) from a Los Angeles County Mental Health Provider during the designated review period from 2/13/2024 through 4/13/2024.

**Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.*

V. DCFS NARRATIVE

The youth refuses to consent to, or participate in, mental health services.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	X	

Explanation of Services Provided After Previous Placement:

The client did not receive mental health services after the prior placement change date of 1/03/2024. The client participated in a Child and Family Team Meeting (CFTM) on 2/27/2024, where client declined to participate in mental health services.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	71	Age	16
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Metro North	Total Number of Placement Moves	5
Resided Out of County	No	PLACEMENT CHANGE DATE	2/28/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	2
CFT Meetings Dates	2/28/24, 3/07/24		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	1	8
Intensive Home Based Services (IHBS)	6	285	0	0
TOTAL	6	285	1	8

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 2/28/2024 through 3/07/2024 the client received the following IHBS and ICC services: Treatment Planning and Targeted Case Management. The Rehab Specialist worked on strategies that included increasing self regulation, stress reducing skills such as deep breathing, communication skills, and role playing. The Parent Partner assisted the caregiver in increasing communication skills, improving listening skills, and practicing re-directing. The Parent Partner also worked on strategies to create a more structured in-home setting and modeled how to deliver praise and positive feedback. The Intensive Care Coordinator discussed linkage with the formal team members and DCFS, facilitated meetings to discuss placement, and helped develop a plan to meet the client's underlying needs. Client continues to receive mental health services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	72	Age	5
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Wateridge	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/31/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)				
Intensive Home Based Services (IHBS)				
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS services from a Los Angeles County Mental Health Provider during the desingated review period of 1/01/2024 through 3/01/2024. Client started to receive mental health services from the current Mental Health Provider on 3/21/2023 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This placement change was not due to the child's behavior. Rather, the child was court-ordered to be returned to the home of their parent.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	73	Age	21
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	El Monte	Total Number of Placement Moves	3
Resided Out of County	No	PLACEMENT CHANGE DATE	1/31/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS during the designated review period of 1/01/2024 through 3/01/2024 from any Los Angeles County Mental Health Provider.

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 1/01/2024

V. DCFS NARRATIVE

This was not a placement change due to the youth's behavior. Rather, this youth's case terminated since they reached the age of majority.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	74	Age	14
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Santa Fe Springs	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/23/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	1/17/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 12/24/2023 through 2/22/2024. Client was referred for services and is pending linkage with Mental Health Provider.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This placement change was not due to the child's behavior. Rather, the child was court-ordered to be returned to the home of their parent.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	75	Age	15
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Van Nuys	Total Number of Placement Moves	3
Resided Out of County	No	PLACEMENT CHANGE DATE	1/10/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	6	560	6	485
Intensive Home Based Services (IHBS)	2	150	3	51
TOTAL	8	710	9	536

IV. ICC/IHBS SERVICES PROVIDED

Client received ICC and IHBS during the review period from 12/11/2023 through 2/09/2024. During the review period the client received the following IHBS and ICC services: Assessment, Mental Health Service, Plan Development, Treatment Planning, Crisis Interventions, and Targeted Case Management. The Rehab Specialist provided the following IHBS services including utilizing mindfulness skills, psychoeducation on trauma and identifying feelings. The Rehab Specialist supported the client's placement transition by discussing changes, challenges, and expectations. The Rehab Specialist explored the development of positive relationships to assist the client's successful functioning in the home and at school. The Rehab Specialist utilized trauma interventions, psychoeducation, feelings identification, art and music to support client's goals. The Intensive Care Coordinator provided weekly treatment updates with DCFS to promote placement stability. Client continues to receive mental health services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

It was difficult to schedule a CFTM due to the youth experiencing multiple psychiatric hospitalizations during this review period. A 1:1 behavioral aide was offered and assigned to the youth.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	X	

Explanation of Services Provided After Previous Placement:

The prior placement change date was on 1/8/2024 when client moved from one resource home to a different resource home. After this placement change date, the following mental health services were provided to the client: The Intensive Care Coordinator consulted with DCFS and the mental health team to identify skills to assist client in the placement. The Intensive Care Coordinator maintained the team informed of client's progress. The Intensive Care Coordinator and team explored alternative resources and mental health treatment to ensure continuity of care and to reduce the number of placement changes. The Rehab Specialist worked with the client on developing positive communication and mindfulness skills. The client also received therapy and medication support. The therapist assisted client in processing multiples changes and identifying triggers. The therapist provided intervention strategies including breathing techniques and grounding exercises to support client with decision making skills.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	76	Age	5
Race/Ethnicity	Black	Gender	F
DCFS Office	Lancaster	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	2/29/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	4/18/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 1/30/2024 through 3/30/2024. Client started to receive mental health services from the current Mental Health Provider on 3/4/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

The previous relative caregiver refused to accept intensive services; however, the new caregiver (with whom the child was placed on the "placement change date") accepted mental health services.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	77	Age	3
Race/Ethnicity	Hispanic	Gender	F
DCFS Office	Belvedere	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	1/12/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates			

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)			1	57
Intensive Home Based Services (IHBS)			0	0
TOTAL	0	0	1	57

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 12/13/2023 through 02/11/2024 the following ICC services were provided to client: Coordination of services, care planning and psychoeducation. The Intensive Care Coordinator facilitated discussion with previous Clinician on client's behaviors and trauma. The Intensive Care Coordinator helped support the caregiver's understanding of behaviors impacting placement, explored caregiver's awareness of crisis and emergency services, and explained available specialized services. The Intensive Care Coordinator facilitated meetings to coordinate the Mental Health treatment for the week. The Intensive Care Coordinator maintained communication with caregivers, DCFS and the Child and Family Team related to treatment updates and a plan for services. The Intensive Care Coordinator provided support and validation to caregiver to help develop trust and a collaborative relationship for client's needs, with the goal of permanency in the home. The client began services with a Mental Health Provider on 2/02/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

CFTMs were held outside of this period of review on March 5, 2024, and April 9, 2024.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?		X

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	78	Age	4
Race/Ethnicity	Black	Gender	M
DCFS Office	Lancaster	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/9/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	2/8/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 12/10/2024 through 2/8/2024. Client started to receive mental health services from the current Mental Health Provider on 12/20/2023 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	79	Age	16
Race/Ethnicity	Black	Gender	Female
DCFS Office	Hawthorne	Total Number of Placement Moves	27
Resided Out of County	No	PLACEMENT CHANGE DATE	1/9/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	1/09/2024 and 1/30/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	7	405	0	0
Intensive Home Based Services (IHBS)	1	40	0	0
TOTAL	8	445	0	0

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 12/10/2023 through 2/8/2024, the clinician provided IHBS weekly in-person sessions. The clinician supported the client in addressing behaviors that interfere with being successful at school and home. When the client became upset, the clinician explored ways in which client could communicate needs in a positive way to others. The clinician assisted client in identifying feelings and utilizing cooking as an outlet for coping. The clinician explored activities that supported positive peer engagement and positive communication skills such as cinema time. The clinician provided psychoeducation on exploring future career interests, such as cosmetology, and assisted client in identifying positive peers and positive activities within the surrounding community. The clinician conducted an assessment of the client's strengths and needs; assisted the client in developing goals; conducted plan development with formal supports to collaborate in client's treatment; supported the formation of a Child and Family Team, and conducted case management and care coordination with DCFS and Regional Center. The clinician also coordinated educational support to address the client's educational needs.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

The youth has been offered services, however the youth is refusing to engage or participate. In addition to their primary caseworker, this child/youth has been assigned a specialized secondary worker through DCFS's Placement Stabilization Team, which supports the youth and caregiver 24 hours per day, seven days per week.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	80	Age	14
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Torrance	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	1/2/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	1/11/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	13	662
Intensive Home Based Services (IHBS)	0	0	4	315
TOTAL	0	0	17	977

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 12/3/2023 through 2/1/2024, the treatment team provided IHBS weekly in-person and via telehealth sessions. The treatment team supported the client in addressing behaviors that interfered with being successful at school and at home. The treatment team provided psychoeducation on planning for future career interests, and assisted client in identifying feelings and using sports as an outlet for expressing feelings. The treatment team helped client explore how to become more independent and organized in daily living skills, and supported the transition of client's placement by discussing changes, challenges, and expectations. The treatment team conducted an assessment of the client's strengths and needs; assisted the client in developing goals; conducted plan development with formal supports to collaborate in client's treatment plan; supported the formation of a Child and Family Team, and provided case management and care coordination. Client started to receive services from the Mental Health Provider on 1/4/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

Another CFTM was held on 2/28/2024, which was outside of this period of review.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	81	Age	16
Race/Ethnicity	Black	Gender	Female
DCFS Office	Vermont Corridor	Total Number of Placement Moves	4
Resided Out of County	Yes	PLACEMENT CHANGE DATE	1/23/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	9	584
Intensive Home Based Services (IHBS)	0	0	1	50
TOTAL	0	0	10	634

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/24/2023 through 2/22/2024, the clinician, conducted an assessment of the client's strengths and needs; assisted the client in developing goals; conducted plan development with formal supports to collaborate in client's treatment plan; supported the formation of a Child and Family Team, provided case management and care coordination. The clinician provided IHBS weekly in-person services. The clinician supported the client in addressing behaviors that interfered with being successful at school and home, and explored activities such as art and working out as an outlet for identifying and expressing feelings and grounding activities. The clinician also supported the transition of client's placement by discussing changes, challenges, and expectations. Client started to receive services from the Mental Health Provider on 1/24/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

CFTMs were held on 03/06/2024, 03/12/2024, and 4/1/2024; however, they were outside of the current review period.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	82	Age	17
Race/Ethnicity	Black	Gender	Female
DCFS Office	Torrance	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	3/21/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	4/12/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	14	764
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	14	764

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 2/20/2024 through 4/20/2024, the treatment team conducted an assessment of the client's strengths and needs; assisted the client in developing goals; conducted plan development with formal supports to collaborate in the treatment plan; supported the formation of a Child and Family Team, and provided case management and care coordination. The treatment team worked with the caregiver to promote an environment where the client could feel safe and supported. The treatment team collaborated with psychiatrist to support client's engagement in services. The client continues to receive mental health services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	83	Age	18
Race/Ethnicity	White/Caucasian	Gender	Male
DCFS Office	Pasadena	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	3/21/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	3/12/2024		

III. MENTAL HEALTH SERVICES DATA

	<i>Pre*</i>		<i>Post*</i>	
Service Category	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	2	95	0	0
Intensive Home Based Services (IHBS)	23	991	11	572
TOTAL	25	1,086	11	572

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 2/20/2023 through 4/20/2023, ICC services included the facilitation of a Child Family Team Meeting (CFTM), the coordination of staffings to promote care coordination and increase consistency with medication management, and the facilitation of collateral sessions with the client's school and Regional Center. IHBS interventions consisted of implementing methods for blocking negative thoughts, teaching deep breathing techniques, using outdoor activities such as taking walks to promote self-regulation, modeling self-calming skills, and implementing co-regulation. The Clinician assisted the client during the transition, when client returned home to the care of parent. Client continues to receive mental health services.

**Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.*

V. DCFS NARRATIVE

This was not a placement change due to the child's/youth's behavior. Rather, this youth reached the age 18 and returned to the home of their parent.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	84	Age	14
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Belvedere	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/8/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	1	35
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	1	35

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 12/09/2023 through 2/07/2024, the client received one ICC service in the form of a Staff Engagement to prepare for the Child and Family Team Meeting (CFTM) process. Services concluded shortly thereafter due to client moving to a resource home outside of Los Angeles County.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

A CFTM was held on 3/15/2024; however, that was after the current review period. The youth has been referred for mental health services in their current county.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	85	Age	10
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Pasadena	Total Number of Placement Moves	5
Resided Out of County	No	PLACEMENT CHANGE DATE	1/17/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	2	Number of CFT Meetings (Post*)	2
CFT Meetings Dates	12/21/2023, 1/16/2024, 1/24/2024, and 2/01/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	17	2,480	5	641
Intensive Home Based Services (IHBS)	10	513	13	518
TOTAL	27	2,993	18	1,159

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 12/18/2023 through 2/16/2024, the ICC services included the facilitation of multiple Child and Family Team Meetings (CFTMs); the coordination of staffings to promote care coordination and increase consistency with medication management; collaboration with DCFS; and coordination with the school to support the client's education. IHBS interventions included delivering psychoeducation to caregiver and assisting caregiver to view and place behaviors in the context of client's trauma history. IHBS interventions also included teaching self-calming techniques, modeling coping skills, implementing community outings, practicing sportsmanship, developing social skills, and modeling how to ask for help. The client continues to receive mental health services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	86	Age	7
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Wateridge	Total Number of Placement Moves	1
Resided Out of County	NO	PLACEMENT CHANGE DATE	1/18/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	4	134
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	4	134

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 12/19/2023 through 2/17/2024, the ICC services consisted of facilitating Staff Engagements, Family Engagements, and preparing for Child and Family Team (CFT) meetings. The Intensive Care Coordinator collaborated with DCFS regarding crisis and safety needs. The treatment team worked with caregiver to identify the family's needs for promoting stability and family connections. The Intensive Care Coordinator explored the best ways to support the family assisted with visitation schedules. The client started to receive services from the Mental Health Provider on 1/11/2024.

V. DCFS NARRATIVE

A CFTM was held on 02/22/2024; however, that was after the current review period.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	87	Age	16
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Santa Fe Springs	Total Number of Placement Moves	6
Resided Out of County	No	PLACEMENT CHANGE DATE	1/3/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 12/4/2024 through 2/2/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

The youth graduated from intensive services on or about June 2023, and no longer consented to receiving additional services after that.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	88	Age	1
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Santa Fe Springs	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	3/21/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 2/20/2024 through 4/20/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This placement change was not due to the child's behavior. Rather, the child was court-ordered to be returned to the home of their parent.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	89	Age	19
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Metro North	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/16/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 12/17/2024 through 2/16/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

The nonminor refuses to consent to, or participate in, mental health services.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	90	Age	5
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Wateridge	Total Number of Placement Moves	1
Resided Out of County	Yes	PLACEMENT CHANGE DATE	2/22/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 1/23/2024 through 3/23/2024. The client was referred for a MAT assessment during this review period.

**Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.*

V. DCFS NARRATIVE

This was not a placement change due to child's behavior. Rather, there was a licensing issue in their placement and the child was moved to another relatives's home.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	91	Age	16
Race/Ethnicity	Black	Gender	Female
DCFS Office	Hawthorne	Total Number of Placement Moves	30
Resided Out of County	No	PLACEMENT CHANGE DATE	3/6/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	2
CFT Meetings Dates	2/6/2024; 3/12/2024; and 4/2/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	11	915	19	1,393
Intensive Home Based Services (IHBS)	6	856	6	696
TOTAL	17	1,771	25	2,089

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 2/05/2024 to 4/05/2024 the following ICC and IHBS were provided to the client: Case management, care coordination, plan development, and rehabilitation. The Intensive Care Coordinator facilitated collaborative meetings with the mental health team and DCFS and coordinated Child and Family Team Meetings. The Intensive Care Coordinator used grounding exercises, psychoeducation, problem-solving, feelings identification, and positive communication skills to support the client's goals. The Intensive Care Coordinator also supported transitions to each of the client's placements by discussing changes and expectations with the client, and coordinating supportive services with caregivers. The Intensive Care Coordinator facilitated weekly meetings with the mental health team to share updates and coordinated on-going mental health treatment to address client's changes in placement. Client continues to receive services from the Mental Health Provider.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

In addition to their primary caseworker, this child/youth has been assigned a specialized secondary worker through DCFS's Placement Stabilization Team, which supports the youth and caregiver 24 hours per day, seven days per week.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	92	Age	9
Race/Ethnicity	White	Gender	Female
DCFS Office	South County	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	2/7/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	1	22
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	1	22

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 1/8/2024 through 3/8/2024, the client was provided with one ICC service. The purpose of the service was to link the client to a Mental Health Provider. The client started to receive services from the Mental Health Provider on 3/11/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This was not a placement change due to the child's behavior. Rather, the child's caregiver passed away so another placement had to be identified. A CFTM was held on 3/9/2024. This child is receiving services from the Regional Center and was referred to mental health services.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	93	Age	5
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Glendora	Total Number of Placement Moves	7
Resided Out of County	No	PLACEMENT CHANGE DATE	2/8/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	2/28/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	24	1,814	21	1,650
Intensive Home Based Services (IHBS)	6	733	13	1,352
TOTAL	30	2,547	13	3,002

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 1/09/2024 through 3/09/2024, the client received the following ICC and IHBS: Case management, rehabilitation, and individual therapy. The Intensive Care Coordinator supported the client and caregivers with coordinating visits with other biological siblings. The In-Home Behavioral Specialist used age appropriate interventions including: Role modeling, breathing techniques, and emotion identification to support the client's well-being in placement. The mental health team and DCFS held a Child and Family Team Meeting to coordinate services, support placement stability, and support the caregivers in meeting the client's needs. Client continues to receive services from the Mental Health Provider.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	94	Age	17
Race/Ethnicity	Black	Gender	F
DCFS Office	Torrance	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	1/26/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	1/25/2024		

III. MENTAL HEALTH SERVICES DATA

	<i>Pre*</i>		<i>Post*</i>	
Service Category	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	2	105	3	121
Intensive Home Based Services (IHBS)	34	1,838	28	1,144
TOTAL	36	1,943	31	1,265

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 12/27/2023 through 02/25/2024, the client received the following IHBS interventions: Anger management, life skills, crisis work, coping skills, psychoeducation on trauma, and collaboration with caregivers to identify realistic expectations. The following ICC services were provided: Weekly team meetings to address placement concerns and to prepare client and caregivers for the upcoming Child and Family Team Meeting. The Child and Family Team Meeting identified strengths, safety concerns, and strategies to meet underlying needs. IHBS and ICC services were provided twice a week, once in person and the other via telehealth. The Child and Family Team collaborated with the DCFS Children's Social Worker to address safety concerns and to support placement stability.

**Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.*

V. DCFS NARRATIVE

An additional CFTM was held on 3/29/2024; however, that was outside of the period of review.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	95	Age	16
Race/Ethnicity	Hispanic	Gender	M
DCFS Office	Santa Fe Springs	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/4/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	1/31/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	4	445	36	1,554
Intensive Home Based Services (IHBS)	7	344	18	831
TOTAL	11	789	54	2,385

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 12/05/2023 through 02/03/2024, the following IHBS were provided to client: Anger management, development of social skills, and weekly sessions with caregivers that supported family reunification. The following ICC services were provided to client: Multiple Staff Engagements, collaboration with the DCFS Children's Social Worker, and sessions with caregivers to clarify staff roles and explain mental health services. ICC services assisted client in transitioning between placements and coordinated services with the resource family. Child and Family Team members met with client several times per week to provide these services in the community. Interventions were tailored to account for client's trauma history and underlying needs.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	96	Age	14
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Pomona	Total Number of Placement Moves	3
Resided Out of County	No	PLACEMENT CHANGE DATE	2/14/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	01/30/2024 and 02/14/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	47	2,131	2	155
TOTAL	47	2,131	2	155

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 01/15/2024 through 03/15/2024, the following IHBS were provided to client: Staffings to address the engagement of client into treatment and to discuss strategies to promote client's success in placement. Strategies included creating an environment for positive corrective experiences to encourage client's participation in treatment. Treatment team also met to support client's transition into placement, and to address the client's unique cultural needs. The treatment team provided interventions that took into account the client's trauma history and underlying needs. The Intensive Care Coordinator facilitated the Child and Family Team Meetings (CFTMs) to address client's needs and support placement stability.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to be reported.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	97	Age	16
Race/Ethnicity	Black	Gender	F
DCFS Office	Torrance	Total Number of Placement Moves	1
Resided Out of County	Yes	PLACEMENT CHANGE DATE	2/7/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 1/8/2024 to 3/8/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

Youth is receiving individual counseling services in the county where they reside.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	98	Age	15
Race/Ethnicity	Black	Gender	F
DCFS Office	Lancaster	Total Number of Placement Moves	4
Resided Out of County	No	PLACEMENT CHANGE DATE	3/20/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 2/19/2024 to 4/19/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

Youth refused intensive services but was open to participate in individual counseling. Therefore the youth was referred to the latter.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	99	Age	21
Race/Ethnicity	Hispanic	Gender	F
DCFS Office	Van Nuys	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	1/12/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 12/13/2023 to 2/11/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This was not a placement change due to the child's/youth's behavior. Rather, this youth's case terminated since they reached the age of majority.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	100	Age	14
Race/Ethnicity	Hispanic	Gender	F
DCFS Office	Lancaster	Total Number of Placement Moves	12
Resided Out of County	No	PLACEMENT CHANGE DATE	3/27/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 2/26/2024 through 4/26/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

The youth refuses to consent to, or participate in, mental health services.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	101	Age	9
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Metro North	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	1/8/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	12/21/2023;1/30/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	13	792	7	428
Intensive Home Based Services (IHBS)	1	28	6	292
TOTAL	14	820	13	720

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/09/2023 through 2/07/2024, the following IHBS and ICC services were provided to client: Psychotherapy. The Rehabilitation Specialist met weekly with the client and caregiver. The Rehabilitation Specialist provided psychoeducation, led role-plays to decrease conflict in the home, and helped to practice positive communication skills. The Intensive Care Coordinator facilitated Child and Family Team Meetings as needed. The Intensive Care Coordinator teamed with DCFS and the formal supports to actively engage the resource parent. The Intensive Care Coordinator also supported client during the transition to a new provider. The client transitioned to the Mental Health Provider starting on 1/29/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	102	Age	16
Race/Ethnicity	Black	Gender	Female
DCFS Office	Wateridge	Total Number of Placement Moves	29
Resided Out of County	No	PLACEMENT CHANGE DATE	1/30/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	2
CFT Meetings Dates	1/31/2024 and 2/28/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	12	795	12	869
Intensive Home Based Services (IHBS)	15	1,256	20	1,432
TOTAL	27	2,051	32	2,301

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/31/2023 through 2/29/2024, the following IHBS and ICC services were provided to client: Rehabilitation services, individual therapy, family therapy. The Rehabilitation Specialist helped the caregiver increase communication skills and worked with client to develop positive coping skills, including breathing techniques and thinking before reacting. The Intensive Care Coordinator facilitated Child and Family Team Meetings and teamed as needed with DCFS, Regional Center, and a special advocate. The Intensive Care Coordinator also worked with the team to connect client to community resources to help support client's placement stability. Client continues to receive services from the Mental Health Provider.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This youth has a 1:1 behavioral health aid. In addition to their primary caseworker, this child/youth has been assigned a specialized secondary worker through DCFS's Placement Stabilization Team, which supports the youth and caregiver 24 hours per day, seven days per week.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	103	Age	16
Race/Ethnicity	HISPANIC	Gender	FEMALE
DCFS Office	PASADENA	Total Number of Placement Moves	9
Resided Out of County	NO	PLACEMENT CHANGE DATE	1/3/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	2
CFT Meetings Dates	1/17/2024 and 1/30/2024		

III. MENTAL HEALTH SERVICES DATA

	Pre*		Post*	
Service Category	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	5	388
Intensive Home Based Services (IHBS)	0	0	1	40
TOTAL	0	0	6	428

IV. ICC/IHBS SERVICES PROVIDED

From the review period of 12/04/2023 through 02/02/2024 the client received the following IHBS and ICC services: Targeted Case Management and Psychosocial Rehabilitation Services. The Intensive Care Coordinator communicated and collaborated with the mental health team and DCFS to participate in the Child Family Team Meeting. The Intensive Care Coordinator engaged the client in the Child and Family Team process and assisted with identifying the client's strengths and underlying needs. The Intensive Care Coordinator worked with the mental health team and medical providers to aid client with school enrollment, access to medical equipment, and housing stability. The Intensive Care Coordinator also coordinated care between providers such as psychiatry support, the after school program, and Regional Center. The Intensive Care Coordinator engaged client in exploring and identifying strengths and interests. Intensive Care Coordinator assisted in individualizing resources, linkages, and services to meet the client's needs. The Rehab Specialist met with client in a community setting to assist client with workforce opportunities and resources to aid client in obtaining and securing employment. The Rehab Specialist supported client with transitioning to a new placement and engaging with her peers. The Rehab Specialist supported client in implementing healthy and effective communication through the use of role modeling and role play. The clinician provided psychoeducation and implemented trauma informed interventions to aid the client with building peer relationships. The clinician supported client in building healthy relationships by role playing conflict resolution. Client started to receive services from the Mental Health Provider on 01/29/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	104	Age	9
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	South County	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	2/23/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period from 1/24/2024 through 3/24/2024. Client started to receive mental health services on 3/12/2024 and continues to receive services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

A CFTM was held on 04/23/2024, which was outside of the review period. This child is nonverbal with autism. A 1:1 aide was setup to assist the child.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	X	

Explanation of Services Provided After Previous Placement:

The prior placement change date was 2/18/2024 when the client moved to a new resource home. After placement, the client was linked to outpatient services with a Los Angeles County Mental Health Provider. The Mental Health Provider collaborated with CSW to aid with appropriate referral and linkage to Regional Center and an Individual Education Plan (IEP) at school for support services. In addition, the client received individual therapy, medication support, and case management to support client with the identified needs.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	105	Age	6
Race/Ethnicity	HISPANIC	Gender	MALE
DCFS Office	GLENDORA	Total Number of Placement Moves	8
Resided Out of County	NO	PLACEMENT CHANGE DATE	2/8/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	2/28/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	27	1,992	28	2,908
Intensive Home Based Services (IHBS)	7	942	10	1,367
TOTAL	34	2,934	38	4,275

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 01/09/2024 through 03/09/2024, the client received the following IHBS and ICC services: Case management, Rehab Services, and Individual Therapy. The Intensive Care Coordinator collaborated with the mental health team, DCFS, and natural supports to facilitate the Child and Family Team Meeting, explore and identify the client's underlying needs, and promote placement stability. The Rehab Specialist collaborated with school staff and DCFS to advocate for an Individualized Education Plan (IEP) to support client's education. The Rehab Specialist met with client in the school setting to support client with engaging with peers through the use of modeling and coaching. The Intensive Care Coordinator collaborated with DCFS and the mental health team to support client in processing the new home transition, and provided psychoeducation to resource parents to promote placement stability. The Intensive Care Coordination assisted in coordinating services such as medication support, school tutoring support, and sibling family visits to aid with client's needs. The Intensive Care Coordinator engaged client in implementing de-escalation techniques and effective communication skills. Client continues to receive services from the Mental Health Provider.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	106	Age	7
Race/Ethnicity	Black	Gender	Male
DCFS Office	Torrance	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	1/16/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	12/22/2023		

III. MENTAL HEALTH SERVICES DATA

	<i>Pre*</i>		<i>Post*</i>	
Service Category	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	2	120	1	60
Intensive Home Based Services (IHBS)	3	240	4	215
TOTAL	5	360	5	275

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/17/2023 through 2/15/2024 the following IHBS and ICC services were provided: Coordination of Child and Family Team Meetings, transition planning, obtaining resources for client and family, and collateral support to resource parent and biological mother. The Child and Family Specialist utilized a variety of techniques that included: art and play therapy, utilizing visual aids and videos to assist client with sharing thoughts and feelings, using positive coping skills, setting boundaries, and using stop and think. The Mental Health Rehabilitation Specialist utilized role play interventions, communication skills, deep breathing techniques, and creating a calming space at home. The Parent Partner helped biological mother and resource parent by identifying age-appropriate expectations and consequences for client, and assisting with the transition from resource to biological family home. The interventions also focused on how to include client in family activities and how to reinforce positive behaviors. The Parent Partner also assisted biological mother to complete court orders, obtain basic resources, and employment assistance. Client continues to receive services from the Mental Health Provider.

**Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.*

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	107	Age	15
Race/Ethnicity	Hispanic	Gender	Male
DCFS Office	Vermont Corridor	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	1/2/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	1/18/2024		

III. MENTAL HEALTH SERVICES DATA

	<i>Pre*</i>		<i>Post*</i>	
Service Category	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	7	112	22	886
Intensive Home Based Services (IHBS)	11	105	10	542
TOTAL	18	217	32	1,428

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/3/2023 through 2/1/2024 the following IHBS and ICC services were provided: Assessment, planning, monitoring, teaming, engagement, prevention, and transition support. The Facilitator maintained communication with the client, mother, caregiver, and DCFS to address safety concerns, transition to new home, and linkage to services. The Facilitator and Parent Partner assisted client and mother by participating in an Individualized Educational Plan (IEP) meeting. Parent Partner supported mother and caregiver by collaborating with the Special Education Coordinator to establish a safety plan and assist client with additional supportive services at the school. The mental health team supported and empowered mother to advocate for client's educational needs and to prepare for court hearings. The mental health team and DCFS utilized resources to link client to recreational activities and additional counseling services. The therapist utilized a variety of therapy techniques to reinforce positive communication skills to express feelings and self-regulate. The Child and Family Specialist assisted client by practicing positive communication and coping skills to manage feelings. The Child and Family Specialist assisted client by using mindfulness to help with body language and personal space. The client continues to receive services from the Mental Health Provider.

**Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.*

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	108	Age	19
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Van Nuys	Total Number of Placement Moves	1
Resided Out of County	Yes	PLACEMENT CHANGE DATE	1/26/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

	<i>Pre*</i>		<i>Post*</i>	
Service Category	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	22	1,160	28	1,301
Intensive Home Based Services (IHBS)	5	288	7	355
TOTAL	27	1,448	35	1,656

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 12/27/2023 to 2/25/2024 the following IHBS and ICC services were provided: Assessment, planning, monitoring, teaming, engagement, prevention, and transition support. The Facilitator maintained collaboration with resource family, DCFS, Foster Family Agency Social Worker, Regional Center, and psychiatrist to assist with safety planning, medication monitoring, crisis intervention, and addressing placement strategies. During client's transition to out of county, the Facilitator assisted client with transferring to out of county Regional Center, special education and mental health services. The Clinician utilized a variety of therapy techniques to assist with practicing coping skills, communication skills, expression of emotions, thoughts and needs, and self-regulation. Parent partner met with resource parents to assist with safety planning, parenting skills, and communication skills. The Child and Family Specialist utilized art and play techniques with client to practice problem solving and to maintain safety.

**Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.*

V. DCFS NARRATIVE

This youth was frequently absent from their placement, making it challenging to conduct CFTMs.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	109	Age	14
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Glendora	Total Number of Placement Moves	1
Resided Out of County	Yes	PLACEMENT CHANGE DATE	2/13/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period from 1/14/2024 through 3/14/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

The youth refuses to consent to, or participate in, mental health services.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	X	

Explanation of Services Provided After Previous Placement:

The prior placement change date was 1/23/2024 when client moved to a new resource home. The client did not receive mental health services after this placement change date. Client started to receive mental health services from the current provider on 3/20/2024; however, services were closed on 4/26/2024 when client declined to participate in services.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	110	Age	12
Race/Ethnicity	Hispanic	Gender	F
DCFS Office	BSRS	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	3/7/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)				
Intensive Home Based Services (IHBS)				
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive ICC or IHBS Services from a Los Angeles County Mental Health Provider during the designated review period of 2/6/2024 through 4/6/2024. Client was referred for mental health services on 4/11/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This placement change was not due to the child/youth's behavior. Rather, on 3/6/2024, the child was removed from their parents and placed into a temporary emergency placement, until the next day when relatives were located and available to accept the child into their home.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	111	Age	14
Race/Ethnicity	Black	Gender	M
DCFS Office	Torrance	Total Number of Placement Moves	4
Resided Out of County	No	PLACEMENT CHANGE DATE	2/5/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	1/22/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)				
Intensive Home Based Services (IHBS)				
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive ICC or IHBS Services from a Los Angeles County Mental Health Provider during the designated review period of 1/06/2024 through 3/6/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

The youth refuses to consent to, or participate in, mental health services. However, the youth has been connected to a mentor and was referred to non-traditional mental health supportive services, which includes basketball, through DCFS's Level Up program.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	112	Age	17
Race/Ethnicity	Black	Gender	F
DCFS Office	Lancaster	Total Number of Placement Moves	4
Resided Out of County	No	PLACEMENT CHANGE DATE	3/14/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	2/27/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)				
Intensive Home Based Services (IHBS)				
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive ICC or IHBS Services from a Los Angeles County Mental Health Provider during the designated review period from 2/13/2024 through 4/13/2024. The client started to receive mental health services on 4/16/2024 and continues to receive services.

**Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.*

V. DCFS NARRATIVE

The placement change was not due to the youth's behavior. Rather, the placement change was made so that this youth could be placed with their sibling.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	X	

Explanation of Services Provided After Previous Placement:

The prior placement change date was on 1/3/2024. The client did not receive mental health services after the placement change date of 1/3/2024. The client started to receive mental health services from the provider on 4/16/2024.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	113	Age	19
Race/Ethnicity	Black	Gender	Female
DCFS Office	BSRS	Total Number of Placement Moves	3
Resided Out of County	No	PLACEMENT CHANGE DATE	1/2/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	12/14/2023		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 12/03/2023 through 2/01/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This non-minor dependent refuses to participate in services and the provision of support is sometimes impacted by the youth running away from placement frequently. In addition to their primary caseworker, this youth has been assigned a specialized secondary worker through DCFS's Placement Stabilization Team, which supports the youth and caregiver 24 hours per day, seven days per week.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	114	Age	17
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	Vermont Corridor	Total Number of Placement Moves	3
Resided Out of County	No	PLACEMENT CHANGE DATE	3/7/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	2	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	2/12/2024 and 2/26/24		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	1	120	0	0
Intensive Home Based Services (IHBS)	7	467	14	1,030
TOTAL	8	587	14	1,030

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 2/6/2024 through 4/6/2024, the client received both ICC and IHBS, which included teaming for transition planning, coordination of sibling visits, and individual and family therapy. The mental health team assisted the client by identifying and enrolling the client in a sports camp to improve self-esteem and increase self-efficacy. The mental health team assisted by teaching conflict resolution skills, stress reduction techniques and tools for assertive communication. The mental health team supported the client to preserve the placement by identifying additional supportive services for the client and resource family. A Child and Family Team Meeting (CFTM) was conducted, resulting in next steps including developing a daily routine, working on boundary setting, and coordinating homework support when needed. Client continues to receive services with the Mental Health Provider.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

An additional CFTM was held on 4/23/2024; however, that was outside of this review period.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	115	Age	8
Race/Ethnicity	Black	Gender	Male
DCFS Office	Vermont Corridor	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	3/14/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	3/13/2024 and 3/15/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	1	40	0	0
Intensive Home Based Services (IHBS)	0	0	1	39
TOTAL	1	40	1	39

IV. ICC/IHBS SERVICES PROVIDED

During the review period from 2/13/2024 through 4/13/2024, client received both ICC and IHBS, which included: Targeted case management, rehabilitation services, and individual therapy. The Intensive Care Coordinator assisted client and family by linking them with a crisis housing program. The Intensive Care Coordinator maintained contact with caregiver to ensure maintenance of progress and to identify additional supportive services to preserve the placement. The Rehab Specialist worked to teach the client coping skills, art activities and create a sensory toolbox to increase use of self-soothing and self-regulation techniques. The mental health team assisted client by coordinating sibling visits and transitioning to out of county mental health services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

No additional information to report.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	116	Age	14
Race/Ethnicity	Hispanic	Gender	Female
DCFS Office	BSRS	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	3/20/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

The client did not receive ICC or IHBS Services from a Los Angeles County Mental Health Provider during the designated review period of 2/19/2024 through 4/19/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

The provision of services and supports for this youth is sometimes impacted by the youth running away from placement frequently. A DCFS Runaway Outreach Unit (ROU) worker was assigned to support this youth. The ROU worker used a harm reduction approach to encourage the youth to return to their placement. A CFTM was held on 2/5/24 (which was prior to the date range under review).

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	117	Age	15
Race/Ethnicity	Black	Gender	Female
DCFS Office	Vermont Corridor	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	2/22/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	12	576	0	0
TOTAL	12	576	0	0

IV. ICC/IHBS SERVICES PROVIDED

During the review period of 01/23/2024 through 03/23/2024 the following IHBS services were provided to the client: Psychosocial Rehabilitation and Community-Based Services. The Clinician and Rehabilitation Specialist provided IHBS via weekly in-person and telehealth sessions. The Rehabilitation Specialist met with the caregiver to develop strategies to better engage the client. The Clinician and Rehabilitation Specialist conducted weekly engagement sessions with the DCFS Children's Social Worker (CSW), and treatment team to address barriers to client's engagement in services, and develop strategies to overcome these barriers.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

A CFTM was held on 1/05/2024; however, that was prior to the current reporting period. In addition to their primary caseworker, this child/youth has been assigned a specialized secondary worker through DCFS's Placement Stabilization Team, which supports the youth and caregiver 24 hours per day, seven days per week.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	118	Age	9
Race/Ethnicity	White	Gender	Male
DCFS Office	Van Nuys	Total Number of Placement Moves	2
Resided Out of County	Yes	PLACEMENT CHANGE DATE	2/6/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	1	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	1/22/2024, 3/7/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 1/7/2024 through 3/7/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This child is receiving mental health services in the county where they reside.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	119	Age	3
Race/Ethnicity	Black	Gender	Male
DCFS Office	Lancaster	Total Number of Placement Moves	1
Resided Out of County	No	PLACEMENT CHANGE DATE	3/3/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	0
CFT Meetings Dates	N/A		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 2/2/2024 through 4/2/2024. Client was enrolled with a provider on 1/03/2024 and continues to receive mental health services.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

A CFTM was held on 4/5/24 (which was slightly outside of the period under review).

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.

County of Los Angeles
Departments of Children and Family Services & Mental Health
DCFS TA 280 Client - DMH Mental Health Services Pre & Post Placement Change

I. CLIENT DEMOGRAPHIC INFORMATION

Unique Client ID#	120	Age	9 mos
Race/Ethnicity	Black	Gender	Female
DCFS Office	Lancaster	Total Number of Placement Moves	2
Resided Out of County	No	PLACEMENT CHANGE DATE	1/10/2024

II. CHILD AND FAMILY TEAM (CFT) INFORMATION

Number of CFT Meetings (Pre*)	0	Number of CFT Meetings (Post*)	1
CFT Meetings Dates	2/8/2024		

III. MENTAL HEALTH SERVICES DATA

Service Category	Pre*		Post*	
	Service Count	Total Minutes	Service Count	Total Minutes
Intensive Care Coordination (ICC)	0	0	0	0
Intensive Home Based Services (IHBS)	0	0	0	0
TOTAL	0	0	0	0

IV. ICC/IHBS SERVICES PROVIDED

Client did not receive ICC or IHBS from a Los Angeles County Mental Health Provider during the designated review period of 12/11/2023 through 2/09/2024.

*Pre: 30 days before Placement Change Date; *Post: 30 days after Placement Change Date.

V. DCFS NARRATIVE

This was not a placement change due to the child's behavior. Rather, the child was replaced into a home with their sibling.

VI. PRIOR PLACEMENT INFORMATION

	Yes	No
Prior Placement Change in this Reporting?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explanation of Services Provided After Previous Placement:

Not applicable due to no prior placement change in this reporting.