



California Institute for Behavioral Health Solutions  
**Katie A. Technical Assistance Webinar Series Presents**  
**“Implementing Katie A: Small County Perspective, Part 2”**  
**June 30, 2015**

**Questions & Answers**

***In order to obtain a TF-CBT certification, do you have to do training and then the telephone conferences? Are there any links or information for training?***

Mariposa County: it is one-year training by tele-conference. You do have to go to the initial one week training. I believe at the six month point they do a booster one day training to reconnect you back to the facilitator and all the resources provided. After 12 months you receive the certification. We can provide the link for the training.

***Do you have only one ICC coordinator for the whole case load? How does that person work in collaboration with MH providers for the child?***

At BHS, once the client has been identified, our licensed clinical social worker meets with them and is the primary and the case worker. We then meet to discuss the case. Thereafter, we meet with the family to introduce who I am and discuss my role. We also discuss parameters and meetings.

***Either county: how are you using your forms and how are they shared? Is this done electronically or by sharing paper? If electronically, can you explain how and what system you are using?***

Mariposa County: presently it is by sharing paper. We utilize the scoring tool, which is a hand written tool. We attach the scoring sheet. Some changes we would like to make to our process are: attaching consent forms and releases, and attach them to our referral to BH for assessment of appropriate services. After we receive a BH referral, we send a confirmation to CW via email in receipt of the referral and inform them that the client has been assessed, and if they are in treatment or if they refuse services. We also receive hard copy bi-monthly reports from BH on the progress of the client, therapy attendance, and therapy participation.



Madera County: all our forms are online, which our staff can access those forms. Mostly, our packet consists of the MHST. The Katie A. referral is also located online, and BH provided us their e-versions consent forms. These three things are sent to our licensed clinical social worker daily before 2pm. After their review, they send us back a form indicating that the child has been assessed and if they met medical necessities. We keep a log and track all these processes.

***Are foster care public healthcare nurses involved in Katie A. screening and assessment in your counties?***

Mariposa County: we do have a public healthcare nurse two days per week in CWS. She is not really involved in Katie A. referrals. She follows-up entering information into the Health and Education Monitor, and also works with social workers on facilitating medical and dental services for children.

Madera County:

We have two nurses on our team. When we send the 0 to 5 population over to the Healthy Beginnings Program (HBP), those cases get assigned. The agencies that consist of the HBP are: Public Health, Early Start Education, and MH in our department. When we send a referral to HBP it gets assigned. The public healthcare nurse then can screen to see if that child needs Katie A. or a mental health referral.

Our public health nurse does not have any contact with those particular cases. In the past, the public health nurse has documented for us. However, since implementation of the Katie A., it's been my job to document the CWS referrals and what type of services they are receiving.