

# **Exhibit F: 241.1 MDT Assessment and Decision-Making Materials**

**MDT 241.1 Joint Assessment Worksheet**  
**Working Draft 5/14/07**

**A. Dependency History**

- The background of the abuse/neglect, including any relevant history from past referrals.
- A summary of the specific circumstances which led to the filing of a 300 petition—important facts to provide a sense of how severe the situation has been so that the court can understand what type of treatment needs were present and still exist

**B. Personal Information**

- Citizenship status—provide Alien Registration # if not a citizen
- Age of youth
- Does the Indian Welfare Act apply
- Attach Birth Certificate. If not available, give the county and state of birth

**C. Family Dynamics**

- A concise, but thorough description of the child's relationship with his/her biological parents, siblings, and extended family
- The last date the child resided with the family
- Note any drug use, family dysfunction or crisis
- Parent/caregiver's criminal history

**D. Placement History**

- For each placement since the date of detention, include the dates and duration of each placement and the type of placement(s)
- A brief evaluation of the child's experience in each of the placements and the reasons for the child's removal

**E. School Information**

- Name, address, and telephone number of school youth is currently attending or last attended.
- Was this youth ever eligible for special education?
  - No
  - Yes → Was an IEP ever completed?
    - No
    - Yes—Date of Most Recent IEP: \_\_\_\_\_
- Current levels of educational functioning (grade level, reading level, performance)
- Summary of past and/or current school-related problems
- Current educational placement and services plan offered (NOTE: Refer to IEP if available)
- Status of the provision of services by school and the student's participation in services
- Who is the holder of educational rights? \_\_\_\_\_

**F. Case Plan**

- Current 300 case plan (disposition) orders
- Status of the provision of services by DCFS and parent compliance to orders
- Describe obstacles encountered when the plan was implemented, strategies to overcome, and the results

**G. Services**

- Name of agencies/programs to which the child was referred
- Name of agencies/programs from which the child is receiving services
- Addresses and phone numbers of contact persons from each involved agency
- Summarize the child and/or parent(s) participation in each program
- The dates of services in which the youth participated

**H. Mental Health/Emotional Status (includes Substance Abuse)**

- **Did the dependency attorney authorize JCMHS to report assessment findings to the delinquency court?**
  - No
  - Yes, Information was Reviewed
  - Yes, Information was Not Reviewed due to Lack of Time
  - Yes, Information was Not Reviewed because \_\_\_\_\_
  
- **Did the delinquency attorney authorize JCMHS to interview the minor?**
  - No
  - Yes, Assessment Completed and Reviewed
  - Yes, Assessment Not Completed due to Insufficient Time
  - Yes, Assessment Not Completed because \_\_\_\_\_
  - Not Applicable (due to dependency attorney's refusal to authorize)
  
- **Description of Mental Health and/or Substance Abuse Problem**
  - 1. Indicate history of suicide attempts, dates and location of any hospitalizations, and prescribed psychotropic medications (note: indicate whether medications appear to be helpful and whether further assessment for medication is necessary)**
  - 2. Brief narrative describing clinician's assessment of the youth's mental health and/or substance abuse problems (type and/or severity) from information available**
  - 3. Brief narrative describing the clinician's assessment of the relationship between the mental health/substance problem and problem behavior**
  
- **Does youth need further assessment (justification for assessments should be provided in #2 above)?**
  - No further assessment is necessary
  - Psychological testing
  - Psychotropic medication assessment
  - Neuropsychological testing

- Neurological assessment (EEG, movement disorders etc.)
- Substance abuse assessment
- Other medical concerns impacting mental health
- Academic testing
- Developmental assessment
- Other: \_\_\_\_\_

➤ **Additional recommendations necessary to facilitate treatment (e.g., legal status change, recreation, etc.):**

**I. Health Information**

- Assessment of youth’s health, including any special health or medical needs
- Name, address and telephone number of youth’s health care provider
- Dates of last and next medical exam
- Dates of last and next dental exam

**J. Safety Issues**

➤ **Results of the LARCC and risk level**

<b>LARCC</b>	<b>Domain</b>	<b>Protective Factor Score</b>	<b>Risk Factor Score</b>
	Delinquency		
	Education		
	Family		
	Peer		
	Substance Use		
	Individual		
	Total		
	Total Resiliency Score		

➤ **State any child or community safety issues that impact the child being placed**

**K. Joint Recommendation**

Disposition Recommendations:

This case is a [redacted] new/[redacted] continuing 241.1 referral. Based on the information provided in the 241.1 joint assessment report and all supporting documents, the 241.1 MDT recommends [redacted] as a disposition in this case. The recommended lead agency is [redacted].

Placement, Supervision, and Treatment Recommendations:

The MDT determined that this youth requires a [redacted] level of supervision and falls into Level [redacted] for treatment care. The most appropriate placement for this youth is [redacted]. Specifically, the probation intervention(s) for this youth should be [redacted], and the treatment service(s) for this youth should be [redacted]. Given that the recommended treatment service(s) are difficult to access, appropriate (even if not ideal) treatment service(s) include: [redacted]. Additional services and/or issues related to this youth include the following: [redacted].

The current recommendations [redacted] are limited/[redacted] are not limited based on the information available at the time of the MDT review. The appropriateness of these recommendations [redacted] need to/[redacted] do not necessarily need to be reevaluated after additional assessment is conducted. The additional assessments recommended for this youth include: [redacted].

Family Intervention Recommendations:

The recommended modification(s) to the current case plan for family intervention(s) is/are [redacted].

Educational Plan Recommendations:

The recommendation(s) for an educational plan is/are [redacted].

**241.1 MDT Decision-Making Grids for Supervision and  
Treatment Recommendations**

**Working Draft 6/28/07**

**Los Angeles Superior Court—Juvenile Court  
241.1 Multi-Disciplinary Team  
Edmund D. Edelman’s Children’s Court  
201 Centre Plaza  
Department 425  
Los Angeles, CA 91754**

# 241.1 MDT Decision-Making Grids

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## 241.1 MDT Decision-Making Grids

**Directions:** The grids provided in this document should be used in conjunction with the completion of the MDT 241.1 Joint Assessment Worksheet in order to assist in decision-making. These tables will be most useful once the supervision level and treatment need level for a youth has been determined. Once this information is known, the tables will help guide MDT recommendations related to type of supervision interventions, treatment services, and further assessment.

### **Important Definitions:**

Levels of Care are case management levels that were developed by the Department of Mental Health to categorize services. The following are definitions for each level (NOTE: These are predefined categories by DMH largely for adults. I will work with DMH to alter these as necessary to be more reflective of youth):

*Level I:* Clients with a mental health problem that is neither acute nor serious and persistent or which is unclear

*Level II:* Clients with an acute disorder, which responds to a relatively brief clinical intervention without the need for intensive rehabilitation services

*Level III:* Clients with serious and persistent mental illness who need rehabilitative services, especially case management to achieve the desired level of functioning. Also included are clients experience their first acute episode of severe mental illness

*Level IV:* Clients who meet the criteria for (at a minimum) Level 14 group homes

Supervision Levels:

*Low:* To Be Inserted by Probation

*Moderate:* To Be Inserted by Probation

*High:* To Be Inserted by Probation

Availability Ratings (see Appendix B): A rating for availability of all services and placements and services by placement was determined based on experience and anecdotal information. This rating is provided next to each placement and service in parentheses ( ). The availability ratings are based on a 1-10 rating scale, where 1=easiest to obtain & 10=hardest to obtain. NA=Not Available and a “?” indicates that the availability rating is not known at this time.

## Probation Supervision Intervention and Placement Options by Risk Level

	<b>Low Risk</b>	<b>Moderate Risk</b>	<b>High Risk</b>
<b>Probation Supervision Interventions Options</b>	<ul style="list-style-type: none"> <li>• Probation Contact (1x/Mo.)</li> <li>• Juvenile Alternative Work Service (JAWS)</li> <li>• Referrals to community-based agencies (e.g., LA Bridges, Girls Today/Women Tomorrow, Boys &amp; Girls Club)</li> </ul>	<ul style="list-style-type: none"> <li>• Probation Contact (at least 2x/Mo.)</li> <li>• Drug Court</li> <li>• Mental Health Court (Dept. 203)</li> <li>• Electronic Monitoring</li> </ul>	<ul style="list-style-type: none"> <li>• Intensive Supervision Probation (3x/Mo.)</li> <li>• Electronic Monitoring</li> <li>• Drug Court</li> <li>• Mental Health Court (Dept. 203)</li> <li>• Probation Camp</li> <li>• Placement with the Department of Corrections &amp; Rehabilitation— Juvenile Division</li> </ul>
<b>Probation Placement Options</b>	<ul style="list-style-type: none"> <li>• Home with parent/relative/guardian</li> <li>• Group Home (less than Level 10)</li> </ul>	<ul style="list-style-type: none"> <li>• Home with parent/relative/guardian</li> <li>• Level 10 Group Home</li> <li>• Level 12 Group Home</li> <li>• Level 14 Group Home</li> </ul>	<ul style="list-style-type: none"> <li>• Level 14 Group Home</li> <li>• Dorothy Kirby Center</li> <li>• Probation Camp</li> <li>• Placement with the Department of Corrections &amp; Rehabilitation— Juvenile Division</li> </ul>

# **Decision Grids for Further Assessment and Treatment Services by Level of Treatment Need**

## Placement Type: Home, Relative, or Regular Foster Home (1)

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level of Treatment Care</b>				
<b>Level 1</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (5) c. Neuropsychological assessment (5) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> —None	c. Individual Treatment Casual (2) d. <b>Medication Monitoring (--)</b> p. Other Treatment (7)	b. AOD Outpatient (5) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (--) c. School Based Individual Tx (6)
<b>Level 2</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (5) c. Neuropsychological assessment (5) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> —None	a. Individual Tx Intensive (10) b. Individual Tx Regular (3) e. Group Tx (4) f. Family Tx (4) h. TBS (6) c. Individual Tx Casual (2) d. <b>Medication Monitoring (--)</b> p. Other Treatment (7)	b. AOD Outpatient (5) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (--) c. School Based Individual Tx (6) d. School based 1:1 behavioral aide(7) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>
<b>Level 3</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (5) c. Neuropsychological assessment (5) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> —None	a. Individual Tx Intensive (10) b. Individual Tx Regular (3) c. Individual Tx Casual (2) d. <b>Medication Monitoring (--)</b> e. Group Tx (4) f. Family Tx (4) g. Day Tx (7) h. TBS (6) i. MST (?) j. MDTFC (?) k. MSFT (?) l. FSP (5) m. Eating D/O Tx—Outpatient (7) n. Sexual perpetrator Tx—Outpatient (6) p. Other Tx (7)	b. AOD Outpatient (5) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (--) c. School Based Individual Tx (6) d. School based 1:1 behavioral aide(7) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>

## Placement Type: Home, Relative, or Regular Foster Home, Continued

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level 4/5</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (5) c. Neuropsychological assessment (5) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (8)	a. Individual Tx Intensive (10) b. Individual Tx Regular (3) c. Individual Tx Casual (2) d. <b>Medication Monitoring (--)</b> e. Group Tx (4) f. Family Tx (4) g. Day Tx (7) h. TBS (6) i. MST (?) j. MDTFC (?) k. MSFT (?) l. FSP (5) m. Eating D/O Tx—Outpatient (7) n. Sexual perpetrator Tx—Outpatient (6) p. Other Tx (7)	b. AOD Outpatient (5) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (--) c. School Based Individual Tx (6) d. School based 1:1 behavioral aide(7) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>

## Placement Type: Group Home—Less than a Level 12 (3)

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level of Treatment Care</b>				
<b>Level 1</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 2</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 3</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (5) c. Neuropsychological assessment (5) d. Other medical concerns (3) e. Developmental assessment (2) <b>f. Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (8)	a. Individual Tx Intensive (10) b. Individual Tx Regular (3) c. Individual Tx Casual (1) <b>d. Medication Monitoring (--)</b> e. Group Tx (4) f. Family Tx (4) g. Day Tx (7) h. TBS (6) i. MST--? (?) j. MDTFC--? (?) k. MSFT--? (?) l. FSP--? (5) m. Eating D/O Tx—Outpatient (7) n. Sexual perpetrator Tx—Outpatient (6) o. Sexual perpetrator Tx—Residential (NA) p. Other Tx (6)	a. AOD Residential (NA) b. AOD Outpatient (5) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (6) d. School based 1:1 behavioral aide(7) e. School Based Intensive Educational Instruction (?) <b>f. AB 3632 Assessment (1)</b> <b>g. AB 3232 MH Services (varies)</b>
<b>Level 4/5</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (5) c. Neuropsychological assessment (5) d. Other medical concerns (3) e. Developmental assessment (2) <b>f. Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (8)	a. Individual Tx Intensive (10) b. Individual Tx Regular (3) c. Individual Tx Casual (1) <b>d. Medication Monitoring (--)</b> e. Group Tx (4) f. Family Tx (4) g. Day Tx (7) h. TBS (6) i. MST--? (?) j. MDTFC--? (?) k. MSFT--? (?) l. FSP--? (5) m. Eating D/O Tx—Outpatient (7) n. Sexual perpetrator Tx—Outpatient (6) o. Sexual perpetrator Tx—Residential (NA) p. Other Tx (6)	a. AOD Residential (NA) b. AOD Outpatient (5) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (6) d. School based 1:1 behavioral aide(7) e. School Based Intensive Educational Instruction (?) <b>f. AB 3632 Assessment (1)</b> <b>g. AB 3232 MH Services (varies)</b>

## Placement Type: Level 12 Group Home (5)

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level of Treatment Care</b>				
<b>Level 1</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 2</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 3</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (4) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (7)	a. Individual Tx Intensive (7) b. Individual Tx Regular (1) c. Individual Tx Casual (1) d. <b>Medication Monitoring (--)</b> e. Group Tx (3) f. Family Tx (3) g. Day Tx (4) h. TBS (6) i. MST--? (?) j. MDTFC--? (?) k. MSFT--? (?) l. FSP--? (5) m. Eating D/O Tx—Outpatient (6) n. Sexual perpetrator Tx—Outpatient (5) o. Sexual perpetrator Tx—Residential (8) p. Other Tx (5)	a. AOD Residential (8) b. AOD Outpatient (5) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (4) d. School based 1:1 behavioral aide(6) e. School Based Intensive Educational Counseling (?) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>
<b>Level 4/5</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (4) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (7)	a. Individual Tx Intensive (7) b. Individual Tx Regular (1) c. Individual Tx Casual (1) d. <b>Medication Monitoring (--)</b> e. Group Tx (3) f. Family Tx (3) g. Day Tx (4) h. TBS (6) i. MST--? (?) j. MDTFC--? (?) k. MSFT--? (?) l. FSP--? (5) m. Eating D/O Tx—Outpatient (6) n. Sexual perpetrator Tx—Outpatient (5) o. Sexual perpetrator Tx—Residential (8) p. Other Tx (5)	a. AOD Residential (8) b. AOD Outpatient (5) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (4) d. School based 1:1 behavioral aide(6) e. School Based Intensive Educational Counseling (?) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>

## Placement Type: Level 14 Group Home (7)

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level of Treatment Care</b>				
<b>Level 1</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 2</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 3</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (3) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (6)	a. Individual Tx Intensive (4) b. Individual Tx Regular (1) c. Individual Tx Casual (1) d. <b>Medication Monitoring (--)</b> e. Group Tx (1) f. Family Tx (2) g. Day Tx (1) h. TBS (?) i. MST--? (?) j. MDTFC--? (?) k. MSFT--? (?) l. FSP--? (5) m. Eating D/O Tx—Outpatient (6) n. Sexual perpetrator Tx—Outpatient (8) o. Sexual perpetrator Tx—Residential (8) p. Other Tx (2)	a. AOD Residential (8) b. AOD Outpatient (NA) b. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (3) d. School based 1:1 behavioral aide(4) e. School Based Intensive Educational Instruction (?) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>
<b>Level 4/5</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (3) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (6)	a. Individual Tx Intensive (4) b. Individual Tx Regular (1) c. Individual Tx Casual (1) d. <b>Medication Monitoring (--)</b> e. Group Tx (1) f. Family Tx (2) g. Day Tx (1) h. TBS (?) i. MST--? (?) j. MDTFC--? (?) k. MSFT--? (?) l. FSP--? (5) m. Eating D/O Tx—Outpatient (6) n. Sexual perpetrator Tx—Outpatient (8) o. Sexual perpetrator Tx—Residential (8) p. Other Tx (2)	a. AOD Residential (8) b. AOD Outpatient (NA) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (3) d. School based 1:1 behavioral aide(4) e. School Based Intensive Educational Instruction (?) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>

## Placement Type: Secure Residential Treatment (8)

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level of Treatment Care</b>				
<b>Level 1</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 2</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 3</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (2) d. Other medical concerns (3) e. Developmental assessment (2) <b>f. Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (5) b. WIC 6500 Commitment (10)	a. Individual Tx Intensive (4) b. Individual Tx Regular (1) c. Individual Tx Casual (1) <b>d. Medication Monitoring (--)</b> e. Group Tx (1) f. Family Tx (2) g. Day Tx (1) h. TBS (?) m. Eating D/O Tx—Outpatient (6) n. Sexual perpetrator Tx—Outpatient (NA) o. Sexual perpetrator Tx—Residential (8) p. Other Tx (2)	a. AOD Residential (8) b. AOD Outpatient (NA) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (1) d. School based 1:1 behavioral aide(4) e. School Based Intensive Educational Instruction (?) <b>f. AB 3632 Assessment (1)</b> <b>g. AB 3232 MH Services (varies)</b>
<b>Level 4/5</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (2) d. Other medical concerns (3) e. Developmental assessment (2) <b>f. Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (5) b. WIC 6500 Commitment (10)	a. Individual Tx Intensive (4) b. Individual Tx Regular (1) c. Individual Tx Casual (1) <b>d. Medication Monitoring (--)</b> e. Group Tx (1) f. Family Tx (2) g. Day Tx (1) h. TBS (?) m. Eating D/O Tx—Outpatient (6) n. Sexual perpetrator Tx—Outpatient (NA) o. Sexual perpetrator Tx—Residential (8) p. Other Tx (2)	a. AOD Residential (8) b. AOD Outpatient (NA) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (1) d. School based 1:1 behavioral aide(4) e. School Based Intensive Educational Instruction (?) <b>f. AB 3632 Assessment (1)</b> <b>g. AB 3232 MH Services (varies)</b>

## Placement Type: Dorothy Kirby Center (9)

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level of Treatment Care</b>				
<b>Level 1</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 2</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 3</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (2) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (6) b. WIC 6500 Commitment (10)	a. Individual Tx Intensive (5) b. Individual Tx Regular (3) c. Individual Tx Casual (1) d. <b>Medication Monitoring (--)</b> e. Group Tx (1) f. Family Tx (2) g. Day Tx (1) h. TBS (NA) m. Eating D/O Tx—Outpatient (1) n. Sexual perpetrator Tx—Outpatient (NA) p. Other Tx (3)	a. AOD Residential (NA) b. AOD Outpatient (1) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School based individual treatment (NA) d. School based 1:1 behavioral aide(8) e. School Based Intensive Educational Instruction (?) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>
<b>Level 4/5</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (2) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (6) b. WIC 6500 Commitment (10)	a. Individual Tx Intensive (5) b. Individual Tx Regular (3) c. Individual Tx Casual (1) d. <b>Medication Monitoring (--)</b> e. Group Tx (1) f. Family Tx (2) g. Day Tx (1) h. TBS (NA) m. Eating D/O Tx—Outpatient (1) n. Sexual perpetrator Tx—Outpatient (NA) p. Other Tx (3)	a. AOD Residential (NA) b. AOD Outpatient (1) c. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School based individual treatment (NA) d. School based 1:1 behavioral aide(8) e. School Based Intensive Educational Instruction (?) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>

## Placement Type: Probation Camp (5)

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level of Treatment Care</b>				
<b>Level 1</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 2</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 3</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (5) c. Neuropsychological assessment (2) d. Other medical concerns (2) e. Developmental assessment (6) <b>f. Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (6) b. WIC 6500 Commitment (10)	a. Individual Tx Intensive (10) b. Individual Tx Regular (5) c. Individual Tx Casual (1) <b>d. Medication Monitoring (--)</b> e. Group Tx (5) f. Family Tx (6) g. Day Tx (NA) h. TBS (NA) m. Eating D/O Tx—Outpatient (NA) n. Sexual perpetrator Tx—Outpatient (NA) p. Other Tx (NA)	a. AOD Residential (NA) b. AOD Outpatient (7) c. AOD Assessment (1)	a. Academic testing (2) b. Speech and Language Rx (?) c. School based individual treatment (NA) d. School based 1:1 behavioral aide(8) e. School Based Intensive Educational Instruction (?) <b>f. AB 3632 Assessment (1)</b> <b>g. AB 3232 MH Services (varies)</b>
<b>Level 4/5</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (5) c. Neuropsychological assessment (2) d. Other medical concerns (2) e. Developmental assessment (6) <b>f. Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (6) b. WIC 6500 Commitment (10)	a. Individual Tx Intensive (10) b. Individual Tx Regular (5) c. Individual Tx Casual (1) <b>d. Medication Monitoring (--)</b> e. Group Tx (5) f. Family Tx (6) g. Day Tx (NA) h. TBS (NA) m. Eating D/O Tx—Outpatient (NA) n. Sexual perpetrator Tx—Outpatient (NA) p. Other Tx (NA)	a. AOD Residential (NA) b. AOD Outpatient (7) c. AOD Assessment (1)	a. Academic testing (2) b. Speech and Language Rx (?) c. School based individual treatment (NA) d. School based 1:1 behavioral aide(8) e. School Based Intensive Educational Instruction (?) <b>f. AB 3632 Assessment (1)</b> <b>g. AB 3232 MH Services (varies)</b>

## Placement Type: Developmental Center (10)

	Further Assessment Services/Legal Services	Treatment Services		
		MH Services	AOD Services	Educational Services
<b>Level of Treatment Care</b>				
<b>Level 1</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 2</b>	Not Applicable	Not Applicable	Not Applicable	Not Applicable
<b>Level 3</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (2) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (5)	a. Individual Tx Intensive (5) b. Individual Tx Regular (3) c. Individual Tx Casual (1) d. <b>Medication Monitoring (--)</b> e. Group Tx (1) f. Family Tx (2) g. Day Tx (1) h. TBS (NA) m. Eating D/O Tx—Outpatient (NA) n. Sexual perpetrator Tx—Outpatient (NA) o. Sexual perpetrator Tx—Residential (5) p. Other Tx (NA)	a. AOD Residential (8) b. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (?) d. School based 1:1 behavioral aide(?) e. School Based Intensive Educational Counseling (?) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>
<b>Level 4/5</b>	<u>Assessment</u> a. Psychological Testing (2) b. Neuropsychological testing (4) c. Neuropsychological assessment (2) d. Other medical concerns (3) e. Developmental assessment (2) f. <b>Psychiatric consultation for medication (1)</b>  <u>Legal</u> a. LPS Conservatorship (5)	a. Individual Tx Intensive (5) b. Individual Tx Regular (3) c. Individual Tx Casual (1) d. <b>Medication Monitoring (--)</b> e. Group Tx (1) f. Family Tx (2) g. Day Tx (1) i. MST--? (?) j. MDTFC--? (?) k. MSFT--? (?) m. Eating D/O Tx—Outpatient (?) o. Sexual perpetrator Tx—Residential (5) p. Other Tx (3)	a. AOD Residential (8) b. AOD Assessment (2)	a. Academic testing (3) b. Speech and Language Rx (?) c. School Based Individual Tx (?) d. School based 1:1 behavioral aide (?) e. School Based Intensive Educational Counseling (?) f. <b>AB 3632 Assessment (1)</b> g. <b>AB 3232 MH Services (varies)</b>

# Appendix A: Services List Used to Generate Grids

NOTE: Additions can be made to this list as long as they are relevant and not repetitive.

## **1. Assessment Services**

- 1.a Psychological testing**
- 1.b Neuropsychological testing**
- 1.c Neurological assessment**
- 1.d Other medical concerns**
- 1.e Developmental assessment**
- 1.f **Psychiatric consultation for medication****

## **2. Legal Services**

- 2.a LPS Conservatorship**
- 2.b WIC 6500 Commitment**

## **3. MH Services**

- 3.a Individual Tx Intensive**
- 3.b Individual Tx Regular**
- 3.c Individual Tx Casual**
- 3.d **Medication Monitoring****
- 3.e Group Tx**
- 3.f Family Tx**
- 3.g Day Tx**
- 3.h TBS (Therapeutic Behavioral Services)**
- 3.i MST (Multi-Systemic Therapy)**
- 3.j MDTFC (Multi-Dimensional Therapeutic Foster Care)**
- 3.k MSFT (Multi-Systemic Family Therapy)**
- 3.l FSP (Full Service Partnership)**
- 3.m Eating d/o Tx (Outpatient)**
- 3.n Sexual perpetrator Tx Outpatient**
- 3.o Sexual perpetrator Tx Residential**
- 3.p Other Tx**
- 3.q Children's Comprehensive Services Program (CCSP)**

## **4. AOD Services**

- 4.a AOD Residential**
- 4.b AOD Outpatient**
- 4.c AOD Assessment**

## **5. Educational Services**

- 5.a Academic testing**
- 5.b Speech and Language Rx**
- 5.c School based Individual Tx**
- 5.d School based 1:1 behavioral aide**
- 5.e School based intensive educational counseling**
- 5.f **AB 3632 Assessment****
- 5.g **AB 3232 Mental Health Services****

## **Appendix B: Service Availability Grid**

**Relative Ease/Difficulty of Obtaining/Implementing MH Treatments in Different Residential Settings**

(5 - 7- 07)

[ 10 pt scale: 1 = easiest to obtain & 10 = hardest to obtain – NA = Not Available ]

Treatment Type	Residential Setting →	Regular FH, relative, HOP	Therapeutic FH (D rate)	Other GH	Transitional Age Program	Level 12	Level 14	Secure Residential Tx	DKC	Probation Camp	Developmental Center	Out of State
	Residential Setting Access (Ease/Diff)	1	2	3	5	5	7	8	9	5	10	10+
Individual Tx Intensive	10	10	10	8	7	4	4	5	10	5	4	
Individual Tx Regular	3	3	3	3	1	1	1	3	5	3	1	
Individual Tx Casual	2	1	1	1	1	1	1	1	1	1	1	
Group Tx	4	4	4	4	3	1	1	1	5	1	1	
Family Tx	4	4	4	4	3	2	2	2	6	2	?	
Day Tx	7	7	7	7	4	1	1	1	NA	1	?	
TBS	6	6	6	6	6	?	?	NA	NA	NA	?	
School based Individual Tx	6	6	6	6	4	3	1	NA	NA	?	?	
School based 1:1 behavioral aide	7	7	7	7	6	4	4	8	NA	?	?	
MST, MDTFC, CCSP	?	?	?	?	?	?	?	NA	NA	?	NA	
AOD Residential	NA	NA	NA	NA	8	8	8	NA	NA	8	?	
AOD Outpatient	5	5	5	5	5	NA	NA	1	7	NA	?	
Eating d/o Tx (Outpatient)	7	7	7	7	6	6	6	1	NA	?	?	
Sexual perpetrator Tx Outpatient	6	6	6	6	5	NA	NA	NA	NA	NA	?	
Sexual perpetrator Tx Residential	NA	NA	NA	NA	8	8	8	NA	NA	5	?	
Other Tx	7	7	6	6	5	2	2	3	NA	3	3	
Psychotropic Med Assessment	5	5	5	5	3	1	1	1	1	1	?	
AOD Assessment	2	2	2	2	2	2	2	1	1	2	2	
Psychological testing	2	2	2	2	2	2	2	2	2	2	2	
Neuropsychological testing	5	5	5	5	4	4	4	4	5	4	4	
Neurological assessment	5	5	5	5	4	3	2	2	2	2	?	
Other medical concerns	3	3	3	3	3	3	3	1	2	3	3	
Academic testing	3	3	3	3	3	3	3	1	2	3	3	
Developmental assessment	2	2	2	2	2	2	2	1	6	2	2	
LPS Conservatorship	8	8	8	8	7	6	5	6	6	6	NA	
WIC 6500 Commitment	10	10	10	10	10	10	10	10	10	10	NA	

**Placement Settings**

1. Regular foster home, relative, HOP
2. Therapeutic (D rate) foster home (with in home Tx services)
3. Other group home (with in home Tx services)
4. Level 12 residential Tx (incl. day Tx, on-grounds school)
5. Transitional Age Program
6. Level 14 residential Tx (incl. day Tx, on-grounds school)
7. Dorothy Kirby Center (DKC)
8. Secure (locked) Residential Tx (MSH, HV, SV, CTF)
9. Developmental Center
10. Out of state placement

**Mental Health Treatment Services**

1. Individual Tx Intensive (multiple x/week)
2. Individual Tx Regular (weekly)
3. Individual Tx Casual (< weekly)
4. Group Tx
5. Family Tx
6. Day Tx
7. TBS
8. School based Individual Tx
9. School based 1:1 behavioral aide
10. **Multisystemic Therapy (MST)**
11. **Multidimensional Treatment Foster Care (MTFC)**
12. **Children's Comprehensive Services Program (CCSP)**

**Specialty Tx Services**

1. AOD Residential
2. AOD Outpatient
3. Eating d/o Tx
4. Sexual perpetrator Tx Outpatient
5. Sexual perpetrator Tx Residential
6. Other Tx (art, recreational, movement, music, socialization etc.)

**Assessment needs**

1. Psychotropic Medication
  2. AOD
  3. Psychological testing
  4. Neuropsychological testing
  5. Neurological assessment
  6. Other medical concerns impacting mental health
  7. Academic testing
  8. Developmental assessment
- Other Service Needs**
1. LPS Conservatorship
  2. WIC 6500 Commitment

