

Service Comparison: Katie A Intensive Services Program (Katie A) and Full Service Partnership Continuum (FSPC)



The purpose of this document is to describe and compare services provided by Katie A and FSPC and help guide clinicians in determining the appropriate program to provide ICC services for their beneficiaries.

	Katie A Intensive Services Program (Katie A)	Full Service Partnership Continuum (FSPC)
Age criteria	<ul style="list-style-type: none"> Age 0 to 21 	<ul style="list-style-type: none"> Age 6-15 for youth Age 16-25 for transitional age youth (TAY)
Service duration	<ul style="list-style-type: none"> Average 1-2 visits per week (or 10 hours per month), for about 8 months, depending on the clinical needs 	<ul style="list-style-type: none"> Higher intensity service delivery, dependent on the needs of the individual. Can be between 12-17 hours per month, and for up to 18 months of services, depending on clinical needs.
Service setting	<ul style="list-style-type: none"> Community-based mental health services 	<ul style="list-style-type: none"> Community-based mental health services
Service type and approach	<ul style="list-style-type: none"> Strength-based teaming model May be a standalone program or supplement individual therapy Services will include Intensive Care Coordination (ICC), and may include Intensive Home Based Services (IHBS), case management, therapy, and psychiatry 	<ul style="list-style-type: none"> 24/7 hour support available High frequency and intensive community based services Interdisciplinary Team approach with therapist, case manager, family or peer support, psychiatrist, occupational therapist as part of the team Therapist assigned to the individual/family Assertive and persistent outreach phase of 30 days to engage a client Services include clinical services, assessments, plan development, medication and medication support, peer support, personal service coordination, and case management Consistently engage family/natural supports to provide regular involvement of adults to support clients who may not currently have strong family involvement Emphasis on preventing placement disruption

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Service criteria	<p>All criteria to be met</p> <ul style="list-style-type: none"> • Child is believed to have full-scope Medi-Cal. • Referent believes the family would benefit from a team approach with their Child and Family Team (CFT). • Referent believes that the child or youth will not benefit from traditional outpatient therapy services or needs more support than what outpatient can offer (typically 1 time a week). • Referent has discussed the possibility of referral to the Katie A program to the family, explained the program, and child/youth or family are in agreement with the referral. • Referent believes that the child/youth and family will be well-supported with about 8 months of intensive services, for about 10 hours a month (1-2 visits per week). • Referent has provided referrals for additional services (e.g. TBS, substance use, educational services, SARC, medical services, medication management) as appropriate. • Referent agrees to support the addition or transition to Katie A services, by introducing the family to the new team, and by sharing relevant assessments and treatment plans with the new provider, if the child/family is in agreement. 	<p>Client and/or family is open to team approach, and willing to meet with provider regularly to begin intensive behavioral health services.</p> <p>And meet a minimum of 2 criteria below:</p> <ul style="list-style-type: none"> • Client may have one or more crisis encounters in the last six months and the level of service need is higher than what Intensive Outpatient (IOP) can offer • Client has been placed on at least one 5150 psychiatric hold in the last 12 months or may currently present a significant risk of harm to self/others, or is gravely disabled or client may cycle between utilizing crisis services • Client may have history or current Child Welfare or Juvenile Justice involvement • Client is identified as Severely Emotionally Disturbed (SED). • Client may be at risk of losing school placement due to missing a significant amount of days at school or due to at-risk behaviors • Client and/or family may be homeless, or at high risk for becoming homeless due to the severe mental illness. • Client may not be able to leave home due to severe mental illness. • Client is leaving home without caregiver’s permission and exhibiting at-risk behaviors. • Client may have a history of refusing or on-going struggles with accessing mental health services. • Client may have severe mental health needs.