

Client Categories Maintenance

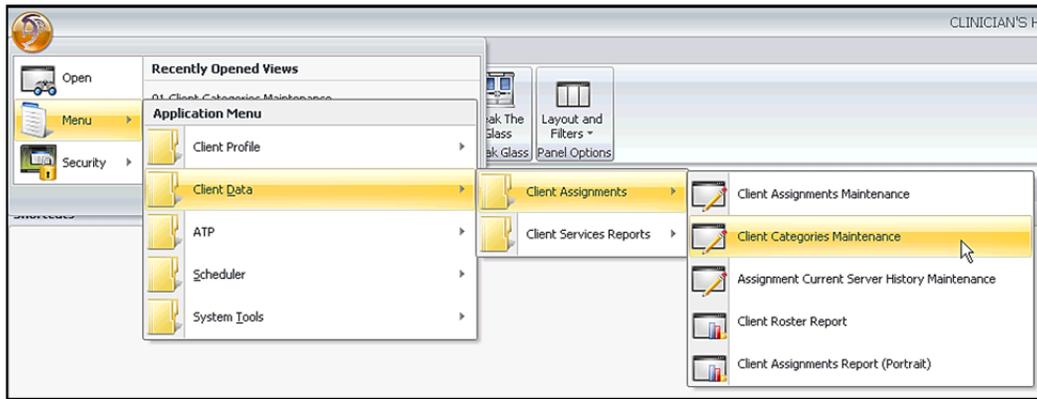
Entering Client Categories Maintenance:

Once the program has confirmed that a client is truly AB109/ Assertive Community Treatment (ACT)/ Augmented Services Program/ Emergency Bed/ Katie A / or Strength-Based Management (SBCM), programs must make the appropriate designation in CCBH. There is a brief glossary attached about each category.

This is done through the “Client Categories Maintenance” screen.

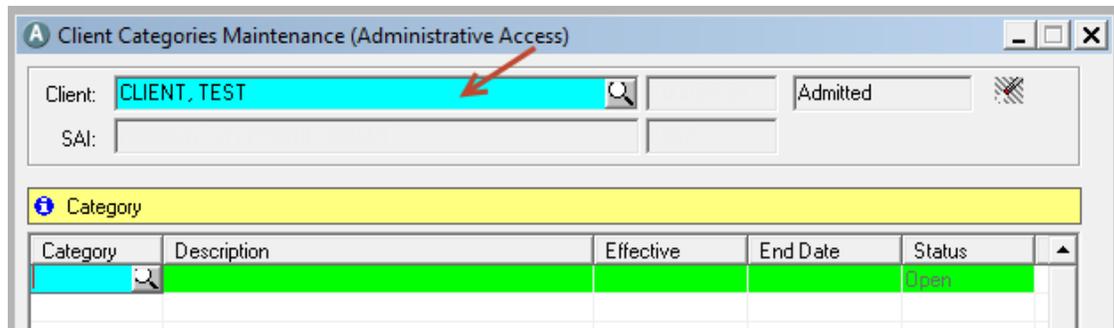
Once the client’s name has been selected from the CHP (and the Client Panel is open), follow these steps:

1. From the Clinician’s Homepage (CHP), go to the Systems button in the top left-hand corner.

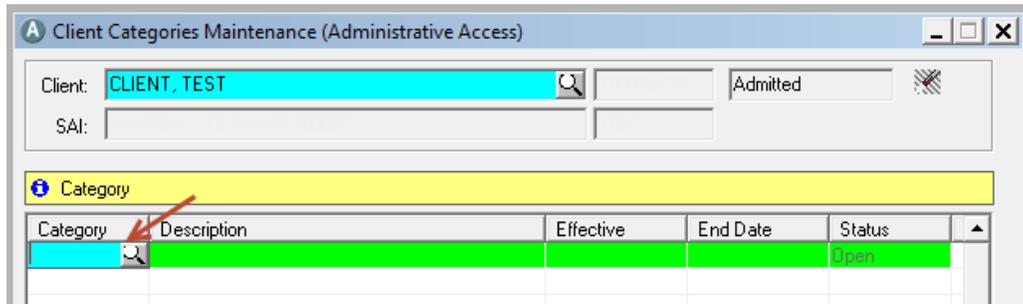


Select Menu → Client Data → Client Assignments → Client Categories Maintenance

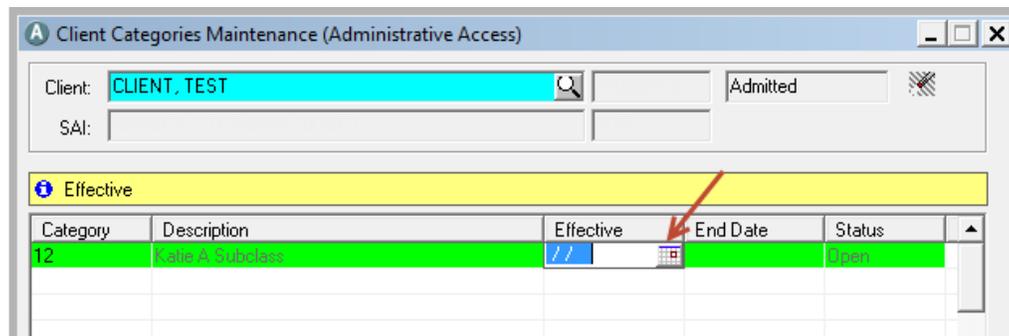
2. The “Client Categories Maintenance” window will launch, with the name of client you selected on your CHP pre-populated in the “Client” field. (If you did not select a client prior to this step, simply enter the client number in this field and select “Tab” to populate the client’s name).



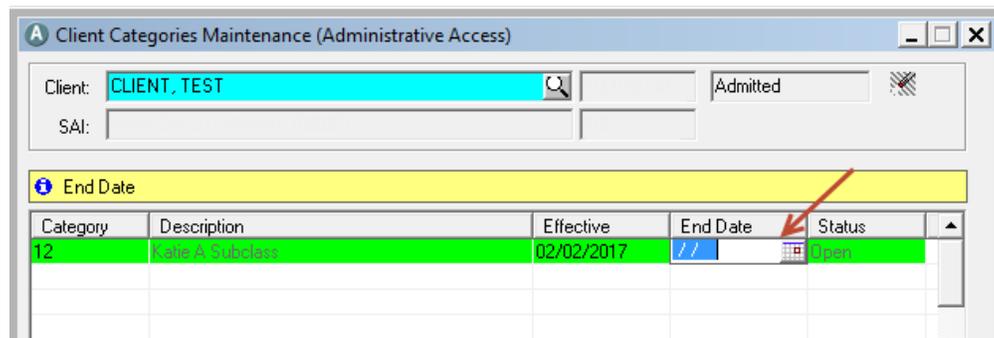
- Click in the "Category" column. This will activate the field for data entry. Use the magnifying glass icon at the end of that field to launch the "Client Categories Lookup" table. Select the appropriate option for your client.



- Your selection will now populate the "Client Categories Maintenance" window tab. Using your mouse, click in the "Effective" column to add the date it was determined the client was eligible. Once the date has been entered, make sure to tab out of the field, and **tab until you are taken to the line below your entered information**. This saves the information just entered. If you do not tab until you reach the line below the line of your entered information, your entry will not be saved. Then, select the "Exit" button at the bottom of the screen.



- When the program has confirmed that the client is no longer eligible, the program must return to the "Client Categories Maintenance" screen to enter an end date. It is the same steps as 1-2 & 4, except the program is entering information into the "End Date" instead of the "Start Date" column). Once the end date is entered, make sure to TAB out of the field and **tab until you are taken to the line below your entered information**. This saves the information just entered. If you do not tab until you reach the line below the line of your entered information, your entry will be lost!



- Then, select the "Exit" button at the bottom of the screen.

Glossary

AB109

A funding source for clients that are low risk offenders released from State custody to the County of San Diego for supervision and services. Alcohol, Drug & Mental Health services at various programs are provided to those that qualify for them. The goal is to provide supportive and rehabilitative services to these individuals to help them meet their needs and stay out of the justice system.

“AB109 Funded” are those programs that have a contract with the County to provide services to this population, and the “AB109 Non-Funded” are programs that an AB109 designated client may go to if the funded programs are full and impacted, but the program is not receiving contract funding for the services. The “Funded” programs are: CRF HEARTLAND CENTER, CRF MARIA SARDINAS WELLNESS & RECOVERY, EXODUS CENTRAL, and TELECARE PROPS.

Assertive Community Treatment (ACT)

ACT Services are provided in a multi-disciplinary team-based model of service that uses a comprehensive team approach and provides treatment 24 hours a day, 7 days a week, 365-days a year. The services are targeted for **homeless** persons with a severe mental illness who may have a co-occurring disorder, are unconnected to outpatient services, may be referred by the justice system, have multiple major areas of impairment, have more than one long term care episode, and multiple ER and acute care hospitalizations and justice related episodes.

The ACT program provides **integrated** mental health and medication services, rehabilitation and recovery services, intensive case management and have a staff-to-client ratio of approximately 1:10. Clients are typically provided services in person at a minimum of four (4) times per week to meet with the client’s clinical needs and meet ACT fidelity rating. Services may be provided on a much more frequent basis, depending on client need.

Augmented Services Programs (ASP)

Strive to enhance and improve client functioning through augmentation of basic Board and Care (B & C) services to specific individuals living in specific B & C facilities with which the County has an ASP contract. Emphasis is on developing client strengths, symptom management, and client self-sufficiency. Priority for ASP services is given to those people in most need of additional services. Any BHS funded case management services program may refer to ASPs.

Emergency/Transitional Shelter Bed

The goal of ETSB is to provide short term housing assistance to individuals connected to the respective clinic while stable income is sought. Emphasis is on securing stable income, symptom management, and client self-sufficiency. Priority for ETSB services is given to those people with a pending SSI claim.

BHS Regional Clinics (North Central, East County, North Inland, and North Coastal) are the designated locations for referrals to the Emergency & Transitional Shelter Bed (ETSB), through the respective clinic Homeless Outreach Worker (HOW).

Katie A.

A shorthand way of referring to the settlement agreement for a class action lawsuit brought against the County of Los Angeles and the State of California. The result is that specific collaboration between County Behavioral Health Systems and Children’s Welfare Services is mandated so that certain children in both

systems of care are guaranteed to receive intensive services to address their needs of safety, permanency and well-being. It is for Children's programs only. In San Diego County, we refer to Katie A. as Pathways to Well-Being or the acronym **PWB**, so you may hear this language in your program. The class action lawsuit settlement defined members of the class and members of the subclass. These are legal terms that spell out what criteria need to be met in order to receive the specialty mental health services that the settlement defines.

A clinician in your program will give you a form that says if the client meets criteria for Katie A Class or Subclass. This is the information you will put into Client Categories Maintenance. There have been several trainings on PWB, so if you are unfamiliar with this and the services provided (and you work in the Children's System of Care) talk to your program manager for more specific information.

Strength-Based Case Management (SBCM)

Strengths-Based Case Management services are delivered through BHS contracted service. Programs assist clients with severe mental illness who may have a co-occurring disorder to **access** needed mental health, medical, educational, social, prevocational, vocational, housing supports and rehabilitative or other community services. The service activities may include, but are not limited to case management, care coordination, referral and linkage to needed services; monitoring services delivery to ensure beneficiary access to services and the services delivery system, monitoring of the client's progress, and plan development