





To:	BHS CYF Contracted Service Providers
From:	Behavioral Health Services
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Date:	June 1, 2022
Title	Group Therapy - Addressing Access to Care and Workforce Challenges

Supporting the behavioral health needs of children and youth is a local priority shared by the County of San Diego and community-based organizations that contract with Behavioral Health Services (BHS) to care for kids. An alarming trend of increased behavioral health needs among school-aged children has been evident across the nation for some time and has been exacerbated due to the COVID-19 pandemic.

The San Diego County Board of Supervisors have taken numerous steps to care for children across the county. In September 2021, mental health school-based treatment contracts were obtained to enhance access to care and services. However, as the demand for care increases, and the workforce challenges persist, families are facing challenges in accessing services with long wait times in both the private and public behavioral health systems.

While national and local solutions implemented by service providers are addressing timely access to care, the behavioral health system is emphasizing the utility of group treatment. Group therapy is a well-documented and clinically recognized treatment modality that brings valued peer-to-peer interactions and maximizes the utilization of the existing workforce. Emphasizing group services through mental health treatment providers, especially those located on school campuses, presents administrative challenges. However, creating and strengthening workflow pathways that establish consistent utilization of group treatment modality will lead to increased access to care.

Group treatment is shown to be effective across various age groups. Although the group modality may not be appropriate for every client or situation, it is an overall efficient intervention at various stages of treatment. Contractors should evaluate making groups available at the early, middle, or end stages of treatment as it offers different benefits. Both open and closed groups should be considered to focus on various areas of needs. The group modality can be offered at treatment and rehabilitation level, as well as delivered in person or virtually.

Though SchooLink mental health contracts are designed with group framework, BHS encourages all treatment providers to explore the utilization of group treatment beyond the following minimum requirements (when possible):

- Offer a group therapy cycle of at least six sessions at a minimum of 10% of designated schools.
- At discharge, a minimum of 25% of clients (at clinic and school sites) participate in at least six group therapy sessions.
- Offer, at a minimum, monthly open or closed groups utilizing artistic expression with goal of increasing youth's self-sufficiency, independence, resiliency, hope, and sense of self-worth.

Preliminary data identified that from August 2021 to April 2022 (eight months) of the 2021-2022 school year, only 245 (or 3%) obtained a group session out of the 7,478 youth who received outpatient services. Of those 245 youth who did receive group service, 91 received only one group session; 90 youth received two to five group sessions; 39 youth received six to ten group sessions; and 25 youth received ten or more group sessions. This data encompasses psychotherapy group (code 31), rehabilitation group (code 35), and collateral group (code 40).

The data suggests that as a system of care there is a collaborative opportunity to be change agents and develop the administrative infrastructure, as well as support program staff to promote the delivery of group services. Legal entities

For More Information:

Contact your Contracting Officer's Representative (COR)

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Behavioral Health Services (BHS) - Information Notice

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and programs can evaluate how to best promote group services while maintaining quality of care and recognizing the positive impact on the much-needed access to care.

With the closure of the fiscal year 2021-2022, programs are urged to move beyond planning and early implementation of workflow systems and launch consistent provision of group services. Starting in fiscal year 2022-2023, data of group services delivery will be reviewed monthly. Programs that require formal planning can initiate a mitigation plan to ensure that group modality is consistently available and utilized.

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