

STORIES FROM THE FIELD



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Desert Mountain Children's Center | San Bernardino County, CA

The Children and Youth Behavioral Health Initiative's (CYBHI) Stories from the Field series aims to highlight the critical work being done to address the behavioral health needs of children and youth, as well as the ongoing efforts to improve systems and create sustainable change. These stories showcase the values and vision of the Initiative through personal experiences, composite stories, and audiocasts, and demonstrate how the CYBHI can build on existing efforts, learn from them, and work toward scalable and systemic change.

Learn more about this work and listen to all the audiocasts in this series at cybhi.chhs.ca.gov/dmcc/.

STRENGTHEN- ING MENTAL AND BEHAVIORAL HEALTH SERVICES FOR YOUNG CHILD- REN THROUGH A COORDINATED, TRANSDISCI- PLINARY SYSTEM OF CARE

Early intervention supports for young children with mental and behavioral health needs can have a positive impact on their learning and development and their overall long-term health and well-being. However, navigating the multiple child- and family-serving systems that offer these services can pose considerable hurdles for families and hinder young children's access

to the care that they need, particularly when these systems are misaligned or uncoordinated.¹ This can be particularly challenging for families with young children who require support from various service providers to meet their child's complex mental and behavioral health needs. A 2015 report by the California Department of Education found that, in many parts of the state, high-quality, supportive programs that meet these needs may not exist at all.²

But some service providers are finding ways to address the fragmentation of child-serving systems, including the Desert Mountain Children's Center (DMCC) in California's San Bernardino County.

Transdisciplinary Approaches as Key Levers of Change

The DMCC serves children from birth to age 22 in the Desert Mountain Special Education Local Plan Area (SELPA).³ With a membership of over 20 school districts and charter schools and a catchment area of over 20,000 square miles, the Desert Mountain SELPA includes a diverse mix of urban, suburban, and rural communities stretching from the Los Angeles Metro area to the Arizona border. The DMCC partners with various child- and family-serving agencies to provide a coordinated system of care for children and families in the region. Its partners include the Desert Mountain SELPA, Desert Mountain Charter SELPA, California Association of Health and Education Linked Professions, San Bernardino County Superintendent of Schools, San Bernardino Department of Behavioral Health, local school districts, and other agencies.

Together, the DMCC and its partner agencies apply a transdisciplinary approach⁴ to care. They leverage a team of practitioners from multiple therapeutic disciplines and partner across agencies and with family members in working toward a shared vision of success for each child.

Serving young children with mental and behavioral health needs

One example of how the DMCC and its partners have implemented this transdisciplinary approach is through the Comprehensive Assessment, Research, and Evaluation (CARE)

“We use the term transdisciplinary team versus multidisciplinary team, and that really is the idea that what we all do overlaps for the child. No one discipline is better than the other and no one discipline is more important than another. We are all in the room so that we can help the child and we can see from different lenses about how to do that and how to integrate each modality of treatment into helping the child and the family be most successful.”

— *Linda Llamas, Director of DMCC*

program. The CARE program was developed by DMCC to serve pre-school-aged children with acute mental and behavioral health needs, including children with severe developmental delays, histories of trauma, and/or prenatal exposures to alcohol or substance misuse. CARE serves children through an intensive 10-week therapeutic program that assesses the unique needs of each child and designs targeted supports based on that assessment. The program serves 4 cohorts of 10 children per year.

The CARE program involves an extensive transdisciplinary team that includes a pediatrician, pediatric neuropsychologist, clinical psychologist, school psychologist, speech and language psychologist, occupational therapist, public health or clinical nurse, licensed clinical social worker, marriage and family therapist, and specialists in Applied Behavior Analysis. This team collaborates to create what Keri Gomez, Program

Supervisor for CARE, describes as “a mental health environment.” Working together across multiple disciplines, this team can consider the unique, multifaceted needs of each child, thereby helping them receive the differentiated supports they truly need to thrive in school and life.

The Impact

DMCC staff report a slew of positive outcomes associated with this transdisciplinary approach. For example, children regularly emerge from the 10-week program with substantially improved social, emotional, behavioral, and language skills. These skills enable them to successfully form relationships and participate in essential day-to-day activities such as engaging in classroom learning or eating a meal with family members.

As Theresa Vaughan of DMCC shares,

Our biggest measure of success is the reports that we hear back from our families and just the different things that their kiddos are doing. They're able to take their kid to the grocery store for the first time...[they're] build[ing] attachments and seeing less struggles based on the trauma [that kids have experienced]. They're able to sit in a classroom—a kindergarten classroom, a preschool classroom—and complete an assignment, things like that.

Together, the DMCC and partnering agencies are facilitating innovative transdisciplinary approaches to mental and behavioral health care that are helping to put some of the Desert Mountain area's youngest children on a path toward lifelong health and well-being.

Questions to consider while you listen...

- How might a transdisciplinary approach help strengthen your agency's efforts to serve the mental and behavioral health needs of children and youth?
- To what extent are the child-, youth-, and family-serving agencies in your community aligned and working toward a common vision for supporting children's mental and behavioral health and well-being? What conditions are needed to grow and sustain these cross-agency collaboration efforts?

“How do we know there's success? You see it. You have a kid who came in with no speech and by the end of the 10 weeks is able to tell their parent—and this is a true story—‘I love you,’ for the first time.”

— Theresa Vaughan
of DMCC

1 Powell, R., Estes, E., & Briscoe, A. (2020). *Realizing one integrated system of care for children*. Policy Analysis for California Education (PACE). <https://files.eric.ed.gov/fulltext/ED612617.pdf>

2 California Department of Education. (2015). *One system: Reforming education to serve all students, report of California's Statewide Task Force on Special Education*.

3 SELPAs are geographically defined (with the exception of Charter SELPAs, whose geographic reach is statewide), legislatively mandated memberships of local education agencies, charter schools, and county offices of education in California. SELPAs were established to ensure that all children in the state have access to the full range of special education services and related prevention, intervention, and behavioral health supports that they need to succeed.

4 King, G. (2009). The application of a transdisciplinary model for early intervention services. *Infants and Young Children*, 22(3), 211–223.