Child & Adolescent Psychiatry Portal

CAPP Bridge Care Coordination Services

Information for Primary Care Providers

What is Bridge Care Coordination?

We recognize that there is an overwhelming need for mental health resources and referrals, and that the mental health care system can be very challenging for families to navigate. Care coordination is a free and short-term service that can help identify and link families to appropriate resources and referrals. The Care Coordinator can also help patients and their families with resources to reduce stress and overcome identified barriers to accessing care, including help with education on presenting symptoms, increasing motivation for treatment, and navigating practical barriers, including language. Care coordination is available in English and Spanish, or via translation services in other languages.

Who is the Care Coordinator?

Marielle Ramsay LCSW, is a Spanish & English-speaking licensed clinical social worker who has extensive experience in providing therapy and other services for both Medi-Cal and commercially insured families with youth age 0-18. She is an early-childhood mental health specialist and has provided comprehensive services to the monolingual Spanish speaking community. While her health care background informs her role in care coordination, her focus as a Care Coordinator ("CC") is not to provide treatment, but to identify and link families to resources that may help them to better understand, access and manage their child's mental and behavioral health concerns.

What resources can CAPP help families link to?

Note: Resources vary by geography & insurance, and as indicated by clinical need. Best evidence-based practice resources, as well as accessible and available resources, will be recommended as indicated

- Parent and family support
- Therapy and/or Psychiatry
- Intensive outpatient/partial hospitalization
- Crisis support services
- Therapeutic Behavioral Services (TBS)
- Wraparound services
- Developmental/Autism resources
- Regional centers
- School-based support i.e. 504/IEP evaluation & support
- Community-based resources, including linkage to basic needs resources

Social services

How does it work?

Level 1: PCP & CAPP consultant identify need for additional resources, without any significant known barriers to accessing care. During CAPP consultation, the psychiatrist may recommend specific resources, and these are included in the CAPP consult note, which the PCP shares directly with the family.

Level 2: PCP & CAPP consultant identify need for additional resources, with additional significant barriers, i.e. language barriers, motivational barriers, family stressors, or failed previous attempts to connect to care. PCP asks the family if they are interested in the care coordination service.

How do I refer a patient for Level 2 Care Coordination?

- 1. PCP informs family about care coordination (*see suggested script below)
- 2. PCP documents verbal permission from the family. If verbal consent only, PCP's office obtains written ROI as soon as it is practically possible to do so.
- 3. PCP informs CAPP staff that verbal consent was obtained during CAPP consult, -or- confirms verbal consent after CAPP consultation via online link. PCP can identify as urgent (CC will contact within 1 business day) or non-urgent (CC will contact within 3-5 business days).

Note: Direct-to-family care coordination is not offered for patients without a prior CAPP consultation

What services will the patient receive?

- 1. Care Coordinator will reach out to the family, in partnership and communication with the PCP.
- 2. Care Coordinator will assess youth and family needs/strengths and collaborate with caregivers in addressing identified barriers to care
- 3. Care Coordinator can assist the family with linking to appropriate resources and services
- 4. Care Coordinator will provide a written summary of recommendations for resources and services to the PCP and the family
- 5. Care Coordinator will follow up with the family and PCP within 2 weeks from the date of the written summary and again on or around the two-month mark from the date of the report