

# CHILDREN AND YOUTH SERVICES:

## Therapeutic Mentoring

<b>Target Population</b>	Children/youth currently in treatment or who have completed treatment for a mental health and/or substance disorder (MH/SUD).
<b>Expected Outcomes</b>	<p>Expected outcomes of this service include:</p> <ul style="list-style-type: none"> <li>• Child/youth is participating in recommended wellness/recovery activities</li> <li>• Increased child/youth empowerment</li> <li>• Child/youth is in school or employed</li> <li>• Reduced recidivism and involvement in the juvenile justice system</li> </ul>
<b>Service Definition</b>	<p>Therapeutic mentoring is a structured, one-to-one, strength-based support service between a therapeutic mentor and a youth for the purpose of addressing daily living, social, and communication needs. The objective of these services are to support and extend therapeutic gains made during treatment; and monitor and, if necessary, re-intervene to provide additional services to prevent or address additional problems. Therapeutic mentoring services include supporting, coaching, and training the youth in age-appropriate behaviors; interpersonal communication; problem-solving and conflict resolution; managing and actively participating in recovery; and relating appropriately to other youth, as well as adults, in recreational and social activities pursuant to either a treatment or wellness/recovery plan.</p>
<b>Program/Service Requirements</b>	<p>Activities for this service may include:</p> <ul style="list-style-type: none"> <li>• Ongoing monitoring, including motivational interviewing</li> <li>• Psychosocial skill training, e.g., communication, problem solving, relapse prevention, anger management, employment skills and job finding</li> <li>• Relationship skill-building and support between adolescent and caregiver</li> <li>• Providing/facilitating linkages to community-based recovery supports and activities to promote wellness</li> <li>• Transporting youth to needed services</li> <li>• Assisting the youth to develop coping and problem-solving strategies to improve self-management of disability/condition</li> <li>• Contacting youth in-person and by phone to offer support and assistance and to encourage and support engagement in mutual support groups and other mental health/recovery services</li> <li>• Organizing structured leisure and recreational activities – based on participants’ preferences – in order to provide opportunities for participants to practice social and coping skills</li> <li>• Assisting in the development, review and updating of Wellness/Recovery Action Plans</li> </ul>

	<ul style="list-style-type: none"> <li>• Assisting in identifying needed services and supports to sustain recovery and work with individuals in navigating social service systems</li> <li>• Acting as advocate/liaison when necessary at court hearings, child welfare, environments that might invoke trauma reactions, etc.</li> </ul> <p>For the first three months, a progress review should take place monthly. Following this time, a review should be conducted every three months/quarterly.</p>
<b>Staffing Requirements</b>	<p>Required staff education/qualifications:</p> <ul style="list-style-type: none"> <li>• Minimum of bachelor’s degree in MH/SUD or related human services field</li> <li>• Completion of training program focused on therapeutic mentoring</li> <li>• Successful background checks</li> </ul> <p>Therapeutic mentoring requires regular staff supervision by a licensed MH/SUD professional, with at least a Master’s degree in a relevant field.</p> <p>Required staff competencies:</p> <ul style="list-style-type: none"> <li>• Understanding of the MH/SUD delivery systems and community and alternative support systems</li> <li>• Knowledge of child/youth MH/SUD</li> <li>• Collaboration, coordination and negotiation skills that are required to work with children/families and families/systems</li> <li>• Motivational engagement skills</li> <li>• Understanding of child/youth development</li> <li>• Knowledge of consumer rights and regulations of MH/SUD system</li> <li>• Knowledge of technological supports</li> </ul> <p>Ongoing/continuing staff training should include:</p> <ul style="list-style-type: none"> <li>• Topics related to motivational skills, service activities, child/youth development, recognizing signs and symptoms of MH/SUD, and relapse prevention.</li> <li>• Current community resources and how to access them on behalf of clients</li> </ul> <p>Staff caseload size should not exceed 20 youth, depending on the extent of services required and the extent of case mix (e.g. some children/youth require more intensive services and/or are being seen on a more frequent schedule).</p>
<b>Location Requirements</b>	<p>Therapeutic mentoring can be delivered through multiple media, including by phone and through electronic media. These services are provided to youth in any setting where the youth resides, such as the home (including foster homes and therapeutic foster homes), and other community settings such as a school, child care centers, and respite settings.</p>

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	Services should not be delivered in locations where client confidentiality or safety of client or service provider may be jeopardized.
<b>Recommended Duration</b>	Frequency and length of service is determined through a treatment plan on a case-by-case basis.
<b>Service Exclusions</b>	Activities should not include: <ul style="list-style-type: none"><li>• Diagnosis of MH/SUD</li><li>• Provision of clinical therapeutic services</li><li>• Provision of any service for the youth or family that they are capable of doing for themselves</li></ul>
<b>Documentation Requirements</b>	Required progress notes, created from contact made with the client family, or others on behalf of the client, demonstrate how the service activities support the treatment plan.