

## Behavioral Health Referrals for Youth: What Comes Next

Wisconsin Child Psychiatry Consultation Program (WICPCP.org)

After a behavioral health referral has been made, families often have several questions. The following informational sheet can help families feel more confident as their child starts therapy:

### **When calling an agency or insurance access line:**

- You can request a therapist with experience working with children from a particular age group.
- Also, ask for a therapist who uses, or at least is familiar with, research-supported techniques. They might not need to use these, but if they DON'T know about them, it may be best to look for other options:
  - Behavioral concerns in young children: Parent Child Interaction Therapy (PCIT)
  - Symptoms of anxiety or depression: Cognitive Behavioral Therapy (CBT)
  - Traumatic stress symptoms: Trauma-focused Cognitive Behavioral Therapy (TF-CBT)
  - Significant mood and behavioral symptoms in teens: Dialectical Behavior Therapy (DBT)

### **What to Expect at the First Visit:**

- Caregivers usually complete a several page intake history form. Arrive 15-30 minutes early to complete this.
- The child and caregiver(s) both share what they would like to work on in therapy. If possible, talk about this as a family beforehand.
- The therapist usually asks about past and present treatments. Bring a list of medications and prior therapists.
- Sometimes, it can be helpful for the therapist to contact the school, doctors or nurses who prescribe medication, or others. This requires signed permission from the child's legal guardian. If this might be helpful, have names and contact info ready at the appointment.
- The first appointment usually lasts 60-90 minutes.

### **The Treatment Plan:**

- A specific plan for "how you will know when therapy is successful" is developed at the 1<sup>st</sup> or 2<sup>nd</sup> visit.
- This includes how often sessions are scheduled and how progress is measured.
- Identify how the therapist communicates with caregivers. Some therapists meet with caregivers during sessions, others have outside contact (phone or email).
- The treatment plan works best when:
  - The child is involved in creating the goals whenever possible
  - The child and the caregiver both understand expectations for therapy, during and between sessions.

### **The Therapy Process:**

- Sessions are usually 45-60 minutes, 2-4 times per month.
- The therapist usually provides an overview of the type of strategies they use.
  - This helps kids and caregivers understand what is being accomplished.
  - It also helps families work together to support the practice of therapeutic strategies at home.
- Sessions then occur weekly to 2x/month to address one or two particular issues at a time.
- The treatment plan is usually reviewed every 3 months, but feel free to ask questions at any point.
- Therapy can last anywhere from 1-12 months or more. Talk about this when reviewing treatment plans.

### **Specific Web Resources for Parents/Caregivers:**

- <https://childmind.org/article/how-do-you-know-if-your-child-is-getting-good-care/>
- <https://childmind.org/article/what-if-my-child-resists-the-treatment-or-the-therapist/>
- <https://psychcentral.com/lib/should-parents-stay-with-their-children-in-therapy>
- <https://www.cdc.gov/childrensmentalhealth/parent-behavior-therapy.html>

