- 1. Guidance Clinic (GC) clinicians ("Clinicians") support youth on secure track units.
- 2. Clinicians work with youth to develop appropriate treatment goals.
- 3. Treatment goals may include individual and family therapy.
 - a. Individual therapy may integrate cognitive behavior therapy, dialectical behavior therapy, motivational interviewing, and other techniques correspondent to youth's needs and within the competency of the Clinician.
 - b. Clinicians apply various theoretical orientations to alleviate symptoms caused by distress. The components of the therapeutic relationship are often premised on empathy, advocacy, and compassion.
- 4. Clinicians meet with youth based on clinical necessity which is determined by each youth's treatment needs.
- 5. If a youth requires treatment but is not engaging in treatment, the clinician will attempt to engage with the youth at least once per week.
 - a. Clinicians respond to youth who have difficulty engaging in services by attempting to interact and build rapport in the milieu (e.g., the unit). While in the milieu, Clinicians may assist youth by supporting reframe statements, challenging automatic thoughts, and facilitating behavioral modification and redirection. In this way, Clinicians are doing the work of teaching, developing, and coaching, all of which can be done individually, or in tandem with partners.
- 6. When needed, clinical consultation is provided to GC Clinicians by the GC Manager and the Director of Juvenile Justice Health Services.
- 7. GC Clinicians consult with GC psychiatrists when appropriate. Psychiatric services offered through the GC include psychotropic medication evaluation and monitoring. Monitoring occurs at a frequency determined by the treating physician.
- 8. Clinicians participate in care coordination convenings and secure track multi-disciplinary team (MDT) meetings.
- 9. Clinicians may, with permission from youth and signed release of information, support connection to Community Based Organizations (CBOs), educational and vocational programs, and Regional Center.

Note: Youth may receive behavioral health treatment from providers contracted by other agencies (e.g., Alameda County Probation Department, Alameda County Office of Education). Care Coordination between GC clinicians and non-GC clinicians may occur through weekly Care Coordination, huddles (e.g., for substance use), and SB 823 multi-disciplinary team meetings, with appropriate release of information.