

FY17 JUVENILE JUSTICE Addendum

Submission Instructions: Email completed addendum file to cjapplications@nctcog.org no later than
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Agency Name: Collin County / Juvenile Probation Services
Application title: Mental Health Services for Referred Juveniles
Application #: 3060901

CJD amount requested for this project: \$92,250

AGENCY HISTORY:

Location of Agency Headquarters:

4690 Community Avenue, McKinney, TX 75071

Mission Statement:

As the cornerstone of its philosophy, the Collin County Juvenile Probation Department will promote a balanced and restorative justice approach throughout the juvenile justice continuum to include both sanctions and rehabilitation through intervention services. Such efforts will address both offender accountability and provide for a safe and secure community. An individualized assessment in partnership with the offender, the family, and partner agencies will be utilized to achieve these goals. Assessment will directly address the offense, behavior pattern and their contributing factors to the offense. The department will provide the juvenile offender with opportunities to develop into a responsible citizen and lead a productive life in the family environment, whenever possible, while making the necessary restitution to both the victim of their crime and to the community at large. All of these endeavors are to be initiated by department personnel charged to provide quality, innovative, and comprehensive services to the offender and their family in a professional, dignified and caring manner, within a quality work environment.

Experience: Explain how your agency is qualified to provide proposed services.

Collin County Juvenile Probation Services department, with over 130 trained staff positions, provides probation and intensive supervision services for deferred and adjudicated juveniles, pre- and post-adjudication detention and rehabilitation services, and alternative education services for expelled juveniles throughout the county. Each year approximately 1,000 juveniles are referred to CCJPS for delinquent conduct and/or Child in Need of Supervision (CINS) offenses, with over 200 adjudicated for misdemeanor and felony offenses and more than 80 admitted to the post-adjudication detention program.

Describe how long your agency has been providing this service and what funding is currently used to operate the project. Describe what additional funds you have applied for to support the project, and why CJD funds are necessary at this time.

In 2014, the Texas Juvenile Justice Department allocated funding for mental health services support. These funds were utilized to hire a bilingual, licensed mental health counselor to provide community-based assessments and counseling services for youth and families. Additionally, funding was used to fund residential placement in privately-operated, secure, post-adjudication facilities for juveniles whose mental health needs exceeded local resources. Funding is exhausted annually with needs going unmet. Local departmental (county tax revenues) funds are used to pay for psychological evaluations provided by a contract licensed clinician. Pursuant to TAC 343, every youth who is placed in post-adjudication detention must receive a psychological evaluation. The remainder of the local budget is used to provide evaluations for juveniles who are suspected or confirmed to have a diagnosable mental health disorder

but that do not warrant commitment to the post-adjudication detention facility. Funding is exhausted annually with needs going unmet. At this time, no mentoring services are provided.

1. LOCAL PRIORITIES (Up to 20 points): Select which local priority(ies) this project will address.

- Programs that improve life skills and/or family stability (including parent education)
- Prevention / intervention programs focused on reducing the use of alcohol, tobacco, and illicit drugs
- Counseling/therapy programs to address mental health issues in juveniles
- Drop-out prevention programs and/or diversion programs
- Programs focused on employment skills/job training for juveniles

Thoroughly describe how this project addresses the priority(ies) selected.

Youth with unmet mental health and substance abuse needs are at greater risk of contact with the juvenile justice system. Prevalence studies have found that 65-70% of youth in the justice system meet the criteria for a mental health disorder, a rate that is more than three times higher than that of the general youth population. Many of these youth land in the juvenile justice system because their conditions are unrecognized, community services aren't available, or families are unable to access care for financial reasons. CDC data shows that fewer than half of youth with disorders receive treatment. Left untreated, these youth have an increased risk of social problems, violence, and escalating delinquent behaviors, which can lead to engagement with the justice system.

During intake, all juveniles referred to Collin County Juvenile Probation Services (CCJPS) complete the Massachusetts Youth Screening Instrument (MAYSI-2), a 52-question behavioral and substance abuse screening tool, administered by a juvenile probation officer who has been trained to conduct and score the screening tool. Immediate screening allows CCJPS to provide a more effective response to youths with mental health needs. In addition to the screening, officers observe the youth during intake and obtain information regarding mental health history, past and current treatment, and any medications taken. When an officer suspects mental health needs for a juvenile and no previous diagnosis exists, a psychological examination is often scheduled with a licensed clinician. This assessment generally identifies whether the youth has mental health and/or co-occurring disorders, the type and extent of any disorders, behavior resulting from these issues, and may make psychiatric diagnoses and recommendations for treatment. Results from the evaluation are used to assist the department with planning for supervision and community protection, developing a treatment plan, and providing community –based support service referrals for the juvenile and his/her family.

Screening, followed by more thorough evaluation, of juveniles with treatment needs can identify the youth's level of needs. When developing treatment plans and making referrals, CCJPS accounts for both the youth's level of needs as well as departmental and community resources available. Diversion to the community is considered appropriate for many youth with mental health needs, especially those who have committed minor offenses; however, effective diversion is improved when community-based mental health services are available. CCJPS actively cultivates partnerships with the mental health community and other youth-serving organizations to improve care and treatment prompting healthier, long-term results for youth and their families. With additional grant funding, CCJPS will be able to fund community-based treatment for 50 additional juveniles. Additionally, youth with needs that exceed local resources will be placed in residential facilities for treatment until they are stable enough to return for community-based treatment. Grant funding will provide up to 100 days of residential treatment. The number of juveniles and length of residential, in-patient stay will be based on individual need. For example, funding may provide for a 100-day stay for 1 individual with greater needs or 3 individuals with lesser needs for 33 days each.

Following termination of justice system interactions, many juveniles with mental health issues will need continued access to services afterward. Without ongoing treatment, many children are more vulnerable to behaviors that prompt their return to the system. Community-based mental health services, family- and home-based therapy, mentoring, and recreational and social opportunities are options that can help create a continuum of care for young people. Mentoring has the capacity to enhance protective factors and foster resiliency through the development of meaningful relationships, opportunities for involvement, and strengthening of positive social attitudes and peer relationships. Studies of mentoring programs show that mentoring relationships also reduce negative youth behaviors, such as truancy and delinquency. Utilizing grant funds, juveniles receiving community-based treatment will also be provided with unlimited mentoring services through a local mentoring organization. Research shows

that the longer the mentoring relationship lasts, the greater the value for youth. Therefore, mentoring services provided with grant funding will last indefinitely, without further need for funding for that individual, until the youth desires to terminate the relationship.

Research has shown that when youth with disorders are identified early and they received needed treatment, they can avoid going deeper into the system. Juvenile justice systems in which screening, treatment, and referrals are well coordinated have the greatest likelihood of successful intervention and ongoing wellness. In an effort to provide access to mental health services for referred juveniles, improve behavioral outcomes, and prevent further involvement with the justice system, CCJPS works to identify vulnerable youth with mental health disorders through consistent use of evidence-based screening and assessment and ensure comprehensive treatment, support, and services.

2. PROBLEM STATEMENT (up to 20 points): Respond to the three sections below:

Describe the target population.

Mental health services will be provided to youth, ages 10 – 17, who have been referred to Collin County Juvenile Probation Services for delinquent conduct and/or Child in Need of Supervision (CINS) offenses and have a confirmed mental health disorder identified through appropriate psychological / psychiatric assessment

Describe the geographical target area to be served by the project.

The geographical target area is Collin County, which has a population of approximately 885,241 covering 841 square miles.

Describe the problem and its negative impact on the community to be served.

A growing body of research demonstrates that youth experiencing mental health challenges are disproportionately represented within the juvenile justice system. Many of these youth are referred to the juvenile justice system for relatively minor, non-violent offenses. Mental health issues often present chaotic situations in the home, resulting in law enforcement intervention, as opposed to the more appropriate response for mental health support / intervention. Experts have suggested that many youth with mental health needs end up in the juvenile justice system not because they have committed a serious offense, but because their need for mental health treatment has not been met.

However, the mental health services typically available to youth in the juvenile justice system are often inadequate or unavailable. Standard juvenile probation supervision is often ineffective and can exacerbate the youth's mental health conditions, resulting in a higher risk for technical violations and recidivism than "standard" probationers. A recent study found that when compared to youth without mental health needs, those with mental health challenges were more likely to receive a violation of probation resulting in their removal from the home. Alternatively, as mental health needs are frequently related to continued offenses, identifying and providing appropriate treatment could reduce future delinquency and future justice system involvement. The initial engagement with the juvenile justice system represents a valuable point at which youth with mental health needs can be identified and linked with needed services. Instead of relying on the justice system to address a youth's mental health needs, the more appropriate and effective response involves community-based treatment interventions that engage youth and their families. Providing community-based mental health services has been shown to assist families with appropriately and safely managing youth in the home and reducing law enforcement interventions.

3. SUPPORTING DATA (up to 5 points): Provide at least three (3) years of locally relevant and verifiable statistical data. Describe how the data supports the problem to be addressed.

Youth in the juvenile justice system experience mental health disorders at a rate that is more than three times higher than that of the general youth population. Studies have consistently documented that 65-70% of youth in contact with the juvenile justice system have one or more diagnosable mental health disorders, with almost 30% having a serious emotional disorder leading to functional impairments.

In Collin County, the number of youth referred to the Juvenile Probation Services department with mental health issues continues to increase, and the budgets for psychiatric evaluation and placement in private in-patient

facilities are completely exhausted each year. Pursuant to TAC 343, every youth who is placed in post-adjudication detention must receive a psychological evaluation. Over the past three years, these evaluations have accounted for 244 (51.8%) of the 417 evaluations provided to referred juveniles. The remaining 173 were provided to juveniles who were suspected or confirmed to have a diagnosable mental health disorder but that did not warrant commitment to the post-adjudication detention facility. Unfortunately, these 417 evaluations only represent 13.7% of the 3,041 juveniles who were referred to Juvenile Probation Services from 2013 to 2015.

CCJPS Referrals and Evaluations				
	2013	2014	2015	Total
Juveniles Referred	1,119	978	944	3,041
Total Psychological Evaluations	152	124	141	417
Detained Juveniles (per TAC)	87	80	77	244
Non-detained Juveniles	65	44	64	173

Collin County Juvenile Probation Services Reports, 2013 – 2015.

In some cases, Collin County Juvenile Probation Services receive youth with specialized mental health needs that exceed what can be adequately addressed in the county’s post-adjudication program. These cases are placed in a privately-operated, secure, post-adjudication, residential facility as funding allows. In 2014, five juveniles were provided with residential services, and six in 2015. In-patient treatment is costly, and funding was exhausted both years with needs going unmet. While youth managed significant improvement in areas of stabilization and functioning in the residential setting, the service gap for community-based support once juveniles returned to their homes remains.

4. GOAL STATEMENT (up to 5 points): *In 100 words or less, describe the overall project goal.*

The goal of this project is to provide access to mental health services for referred juveniles with mental health needs to promote mental health stability, improve behavioral outcomes, and prevent further involvement with the justice system.

5. PROJECT DESCRIPTION (up to 20 points):

Using the table below, list activity(ies) to be performed with grant funds. Describe the activity’s planned flow of services for individuals served by the project.

eGrants Activity	<p>Flow of Services – Describe the planned flow of services for individuals served by each activity. Descriptors may include but are not limited to: type of client to be served, explanation of target levels for new project, function of grant-funded staff in carrying out the project, frequency services will be provided, length of time a person remains in the program, how long a client receives a specific service, involvement of other entities, how budget items associated with this activity are necessary and will be used in carrying out services.</p> <p>Within each activity’s description, explain how the activity avoids duplication or overlapping of existing resources or programs available within the project’s proposed service area and target population.</p>
Professional Therapy and Counseling	<p>Following delinquent conduct and/or Child in Need of Supervision (CINS) offenses, juveniles between the ages of 10 and 17 are referred to the Collin County Juvenile Probation Services (CCJPS) department. During intake, all referred juveniles complete the Massachusetts Youth Screening Instrument (MAYSI-2), a 52-question behavioral and substance abuse screening tool, which is administered by a certified juvenile probation officer who has received mandated training to conduct and score the screening tool. This questionnaire helps to identify needs in areas of somatic complaints, alcohol and drug use/dependence, anger and irritability, and thought disturbance (mental health). In addition to the screening, officers observe the youth during intake and obtain information regarding mental health history, past and current treatment, and any medications taken.</p> <p>If the youth has a previous diagnosis or is currently receiving services from an established provider, the probation department seeks to monitor and enforce continued treatment compliance with the juvenile and family. However, when an officer suspects mental health needs for a juvenile and no</p>

	<p>previous diagnosis exists, a psychological examination is often scheduled with a licensed clinician - either the department's contract psychologist or a private clinician in good standing with the State. If the juvenile meets the criteria for a Diagnostic and Statistical Manual of Mental Disorders (DSM-5) diagnosis, results from the evaluation will be used to assist the department with planning for supervision and community protection, developing a treatment plan, and providing referrals for support services for the juvenile and his/her family.</p> <p>Juvenile probation officers will collect supporting documentation to substantiate service needs, including intake information, psychological evaluation, treatment records (when available), and parental interviews regarding mental health manifestations in the home that have or could lead to law enforcement intervention. This information will be forwarded to the department's program coordinator for evaluation and review. In conjunction with CCJPS team members, a departmental recommendation will be made regarding supervision and the appropriate types of services (community-based or residential). In-patient services are recommended for youth who are in crisis, in need of mental health stabilization, or whose needs exceed community resources until they are deemed ready to return for community-based treatment. Grant funding will provide up to 100 days of residential treatment. The number of juveniles and length of residential, in-patient stay will be based on individual need. For example, funding may provide for a 100-day stay for 1 individual with greater needs or 3 individuals with lesser needs for 33 days each.</p> <p>Juveniles whose needs can be met locally will be referred to a community-based provider for treatment and a community-based mentor. Grant funds will provide 50 juveniles with six treatment sessions with a licensed community-based clinician and unlimited mentoring services. Mentoring is designed to promote healthy development and functioning by reducing risk factors and enhancing protective factors. CCJPS will contract with a local mentoring organization to provide screened and trained adults to meet regularly with and establish positive relationships with referred youth. Mentors will be an advocate for the youth and provide them with life skills, coaching, and support for both the youth and family. Additionally, mentors will help youth engage in prosocial behaviors, such as participation in community service, group events, and sporting activities. Mentoring costs are a one-time expense. The mentoring relationship will last indefinitely, without further need for funding for that individual, until the youth desires to terminate the relationship.</p> <p>Throughout the project, a juvenile probation officer will coordinate with both the treatment provider and mentor to monitor the youth's participation in services. In addition to monthly in person contact monitoring by the officer, service providers will convey in monthly reports if the juvenile has been available for/participating in services and report any treatment issues or needs that require attention. Services provided and recidivism will be tracked for participating youth. CCJPS will conduct a 6-month post-project follow up interview/survey and database check to determine if the juveniles have had any further law enforcement interactions and/or show improved/positive mental health/behaviors.</p> <p>By referring juveniles to community-based resources, CCJPS will be able to avoid duplication of existing services.</p>
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Using the table below, describe proposed grant-funded staff (including contracted services): provide title, and indicate new or existing position. Describe the experience, education, and knowledge required of the grant-paid position.

Title	New/Existing Position (N or E)	<i>Describe experience/education/knowledge required of grant-paid position (not of the person currently in that position).</i>
Caseworkers	E	Contracted vendor to provide mental health out-patient treatment. Caseworkers possess Master's degrees in Social Work or Professional Counseling and are licensed as either Licensed Clinical Social Worker (LCSW) or Licensed Professional Counselor (LPC).
Mentors	E	Contracted community-based mentoring organization. Mentors are adults who possess experience in working with at-risk youth and juvenile mental health services training.

Residential Facility	E	In-patient facilities and staff are licensed and trained as required by the State of Texas.
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- 6. MEASURES, PERFORMANCE MANAGEMENT AND DATA MANAGEMENT (up to 10 points): DO NOT TYPE IN THIS SECTION – COG WILL INSERT INFORMATION FROM EGRANTS IN ADDENDUM**
- 7. BUDGET (up to 15 points): DO NOT TYPE IN THIS SECTION - COG WILL INSERT EGRANTS BUDGET IN ADDENDUM**