

Print This Page

Agency Name: Collin County

Grant/App: 4245505 **Start Date:** 9/1/2025 **End Date:** 8/31/2026

Project Title: Juvenile Mental Health Court FY25

Status: Application Pending Submission

Narrative Information

Introduction

The purpose of this funding is to support specialty court programs as defined in Chapter 121-126 and Chapter 129-130 of the Texas Government Code.

Program-Specific Questions

Court Name and Number

Court name and number as registered with the Office of Court Administration (OCA).

Collin County Juvenile Mental Health Intervention Program (CCJMHIP) OCA Registration Court ID:323

Participant Fees

Does this specialty court collect participant fees pursuant to Sec. 123.004 of the Texas Government Code?

☐ Yes

☒ No

If yes, what is the current dollar amount charged to participants?

0

In the last fiscal year, how many participants were charged a fee?

0

Of those participants charged, how many paid the fee?

0

Risk Assessment Tools

List the risk assessment tool(s) and clinical assessment tools(s) that are utilized by this specialty court? Please provide: 1) The name of each assessment tools used; 2) Why the assessment tools were selected for this specific program and the role it plays in this specialty court's case management process; and 3) The position title(s) of the team member(s) responsible for conducting each assessment. If there are any factors limiting the use of additional assessment tools such as the cost associated with an assessment, familiarity with available assessments, etc., please make note of these factors.

Additional assessments: CSE-IT MAYSI ACES

Certifications

In addition to the requirements found in existing statute, regulation, and the funding announcement, this program requires applicant organizations to certify compliance with the following:

Constitutional Compliance

Applicant assures that it will not engage in any activity that violates Constitutional law including profiling based upon race.

Information Systems

Applicant assures that any new criminal justice information systems will comply with data sharing standards for the Global Justice XML Data Model and the National Information Exchange Model.

Program Income

Applicant agrees to comply with all federal and state rules and regulations for program income and agrees to report all program income that is generated as a result of the project's activities. Applicant agrees to report program income through a formal grant adjustment and to secure PSO approval prior to use of the program income. Applicant agrees to use program income for allowable costs and agrees to expend program income immediately after PSO's approval of a grant adjustment and prior to requesting reimbursement of funds.

Deduction Method - Program income shall be deducted from total allowable costs to determine the net allowable costs. Program income shall be used for current costs unless PSO authorizes otherwise. Program income which the grantee did not anticipate at the time of the award shall be used to reduce the PSO award and grantee match rather than to increase the funds committed to the project.

Asset Seizures and Forfeitures - Program income from asset seizures and forfeitures is considered earned when the property has been adjudicated to the benefit of the plaintiff (e.g., law enforcement entity).

Twelve-Step Programs

Grant funds may not be used to support or directly fund programs such as the Twelve Step Program which courts have ruled are inherently religious. OOG grant funds cannot be used to support these programs, conduct meetings, or purchase related materials.

Specialty Court Certifications

If the applicant is a specialty court operated under Ch. 121 of the Texas Government Code, the following certifications apply:

1. The specialty court will develop and maintain written policies and procedures for the operation of the program.
2. The applicant will submit a copy of any project evaluations, evaluation plans, recidivism studies, or related reports that are completed during the grant period to PSO.

Adoption of Adult Drug Court Best Practice Standards

Applicants operating an adult drug court certify that they are working towards full compliance with and adoption of Vol. I & II of the Adult Drug Court Best Practice Standards.

Adoption of Family Drug Court Best Practice Standards

Applicants operating a family drug court certify that they are working towards full compliance with and adoption of the Family Treatment Court Best Practice Standards.

Veterans Treatment Programs

Applicants providing mental health services to veterans or veterans' families must demonstrate a) prior history of successful execution of a grant from the Office of the Governor; and b) that the entity provides training to agency personnel on military informed care or military cultural competency or requires those personnel to complete military competency training provided by any of the following: the Texas Veterans Commission; the Texas Health and Human Services Commission; the Military Veteran Peer Network; the Substance Abuse and Mental Health Services Administration within the U.S. Department of Health and Human Services; the U.S. Department of Defense; the U.S. Department of Veterans Affairs; or a nonprofit organization that is exempt from federal income taxation under Section 501(a), Internal Revenue Code of 1986, by being listed as an exempt entity under Section 501 (c) (3) of that code. with experience in providing training or technical

...training entity, must demonstrate (a) (b) or (c) (d) that entity, their experience in providing training or technical assistance to entities that provide mental health services to veterans or veterans' families.

Cybersecurity Training Requirement

Local units of governments must comply with the Cybersecurity Training requirements described in Section 772.012 and Section 2054.5191 of the Texas Government Code. Local governments determined to not be in compliance with the cybersecurity requirements required by Section 2054.5191 of the Texas Government Code are ineligible for OOG grant funds until the second anniversary of the date the local government is determined ineligible. Government entities must annually certify their compliance with the training requirements using the [Cybersecurity Training Certification for State and Local Government](#). A copy of the Training Certification must be uploaded to your eGrants application. For more information or to access available training programs, visit the [Texas Department of Information Resources Statewide Cybersecurity Awareness Training](#) page.

Criminal History Reporting

Entities receiving funds from PSO must be located in a county that has an average of 90 percent or above on both adult and juvenile dispositions entered into the computerized criminal history database maintained by the Texas Department of Public Safety (DPS) as directed in the *Texas Code of Criminal Procedure, Chapter 66*. The disposition completeness percentage is defined as the percentage of arrest charges a county reports to DPS for which a disposition has been subsequently reported and entered into the computerized criminal history system.

Counties applying for grant awards from the Office of the Governor must commit that the county will report at least 90% of convictions within five business days to the Criminal Justice Information System at the Department of Public Safety.

Uniform Crime Reporting (UCR)

Eligible applicants operating a law enforcement agency must be current on reporting complete UCR data and the Texas specific reporting mandated by 411.042 TGC, to the Texas Department of Public Safety (DPS) for inclusion in the annual Crime in Texas (CIT) publication. To be considered eligible for funding, applicants must have submitted a full twelve months of accurate data to DPS for the most recent calendar year by the deadline(s) established by DPS. Due to the importance of timely reporting, applicants are required to submit complete and accurate UCR data, as well as the Texas-mandated reporting, on a no less than monthly basis and respond promptly to requests from DPS related to the data submitted.

Entities That Collect Sexual Assault/Sex Offense Evidence or Investigate/Prosecute Sexual Assault or Other Sex Offenses

In accordance with Texas Government Code, Section 420.034, any facility or entity that collects evidence for sexual assault or other sex offenses or investigates or prosecutes a sexual assault or other sex offense for which evidence has been collected, must participate in the statewide electronic tracking system developed and implemented by the Texas Department of Public Safety. Visit [Sexual Assault Evidence Tracking Program](#) website for more information or to set up an account to begin participating. Additionally, per Section 420.042 "A law enforcement agency that receives evidence of a sexual assault or other sex offense...shall submit that evidence to a public accredited crime laboratory for analysis no later than the 30th day after the date on which that evidence was received." A law enforcement agency in possession of a significant number of Sexual Assault Evidence Kits (SAEK) where the 30-day window has passed may be considered noncompliant.

Compliance with State and Federal Laws, Programs and Procedures

Local units of government, including cities, counties and other general purpose political subdivisions, as appropriate, and institutions of higher education that operate a law enforcement agency, must comply with all aspects of the programs and procedures utilized by the U.S. Department of Homeland Security ("DHS") to: (1) notify DHS of all information requested by DHS related to illegal aliens in Agency's custody; and (2) detain such illegal aliens in accordance with requests by DHS. Additionally, counties and municipalities may NOT have in effect, purport to have in effect, or make themselves subject to or bound by, any law, rule, policy, or practice (written or unwritten) that would: (1) require or authorize the public disclosure of federal law enforcement information in order to conceal, harbor, or shield from detection fugitives from justice or aliens illegally in the United States; or (2) impede federal officers from exercising authority under 8 U.S.C. § 1226(a), § 1226(c), § 1231(a), § 1357(a), § 1366(1), or § 1366(3). Lastly, eligible applicants must comply with all provisions, policies, and penalties found in Chapter 752, Subchapter C of the Texas Government Code.

Each local unit of government, and institution of higher education that operates a law enforcement agency, must download, complete and then upload into eGrants the CEO/Law Enforcement Certifications and Assurances Form certifying compliance with federal and state immigration enforcement requirements. This Form is required for each application submitted to PSO and is active until August 31, 2026 or the end of the grant period, whichever is later.

Overall Certification

Each applicant agency must certify to the specific requirements detailed above as well as to comply with all requirements within the PSO Funding Announcement, the *Guide to Grants*, the *Grantee Conditions and Responsibilities*, any authorizing or applicable state and federal statutes and regulations to be eligible for this program.

X I certify to all of the application content & requirements.

Project Abstract :

Collin County is the sixth largest county in Texas with a population of citizens exceeding one (1) million and lies just north east of the Dallas-Fort Worth Metroplex. While Collin County ranks sixth in terms of overall population, statistics for referral metrics show Collin County juvenile-age population shows Collin Juvenile Probation Services serves more youth than youth than Travis County which is the fourth largest county in the state by approximately 39%, (1,123 vs. 781) per legislative budget board data provided by the Texas Juvenile Justice Department in April of 2022. Juvenile-age population for Collin County metrics show Collin to be a mere 6% difference to numbers of Travis County (Collin, 118,765 vs Travis, 126,078). The county has 13 District Courts. The 417th District Court is designated as a juvenile court for Collin County and presides over cases for the Juvenile Mental Health Court (JMHC) which provides probation and intensive supervision services for deferred and adjudicated juveniles, pre- and post-adjudication detention, rehabilitation services, and alternative education services for expelled juveniles. The mission of the Collin County Juvenile Mental Health Court Program (JMHC) is an evidence-based treatment court program designed to reduce recidivism by connecting defendants experiencing mental illness to supportive services and appropriate treatment as an alternative to incarceration by utilizing a multidisciplinary approach. The program allows the juvenile defendant to make significant changes in their lives so that they can avoid further involvement with the criminal justice system. The team effectively addresses mental health problems by connecting participants and their family's to treatment providers and community resources. JMHC aims to hold participants accountable for their actions while building on their strengths and reconnecting them to healthy peers, family and adult relationships as well as prosocial activities. The program's purpose will be continue to serve the needs of youth who are at risk of being removed from their homes due to mental health issues that result in behaviors that make them unmanageable. The program will assess the issues in the home that impact the mental health of the youth and the functionality of the family and work with the family and community resources to address the identified problems and provide the rehabilitative and supportive services that will allow the juvenile to remain in their home with a decreased risk of removal as well as lessened risk of recidivism, thereby keeping the juvenile and community safe. The JMHC Program is a court-centered, outpatient treatment program. The program will be 12 months, with intensive follow-up and is open to 20 youth between 12 to 17 years of age who have been diagnosed with mental illness or intellectual disability. Eligibility criteria for the JMHC will be juveniles diagnosed with the following but not limited to: mood disorder; psychosis; mania; anxiety; anger issues; and ADHD (other mental health diagnosis not listed, will be accepted such as juveniles diagnosed Intellectual and Developmental Disability (IDD)). Also, in order to be eligible into the program, juveniles must meet the following target population. Juveniles must have a DSM-5 diagnosis other than or in addition to substance abuse, ADHD, IDD, autism, pervasive developmental disorder, and an IQ of 65 or greater. Reasons for

exclusion include adjudication for a sex crime, severe mental or emotional problems not stable on medication at the time of admission, requiring inpatient mental health care, and youth whom have a history manufacturing and/or distribution of illegal and synthetic drugs (drug dealing).

Problem Statement :

Mental illness in the juvenile justice system has become an increasingly obvious problem. The National Center for Mental Health and Juvenile Justice found that 70 percent of youths in the juvenile justice system are afflicted with a mental health disorder, and 27 percent suffer from a disorder so severe it significantly impairs their ability to function (Cocozza and Shufelt, 2010). Challenges to meet the growing need of this increasing population have been well-documented across the state of the Texas and locally. In 2024, departmental data for all referred youth showed an increase of 48% for youth screened using the departmental validated mental health screening instrument required referral for additional mental health consultation at the time of preliminary mental health screening (Collin County Techshare Database, 2024). Additionally, data showed youth who were identified as actively exhibiting signs of suicidal-ideation increased by 41% over the same period. The juvenile justice system of Texas has not been exempt and has been characterized as "the mental health provider" for delinquent youth in Texas as local departments find themselves ill-equipped to safely supervise and manage these youth in the local community. Dual-status youth or youth who have involvement in multiple state-systems, e.g. county probation and Department of Family and Protective Services (DFPS), are also increasing in number overall with a common thread of youth who have significant mental illness and intellectual disabilities. This has become increasingly problematic as many therapeutic-foster homes and the number of overall DFPS placements where shuttered during the pandemic and these children who require mental health treatment and case management support in the conservatorship on DFPS are being supervised in hotels by DFPS staff. This situation is consistently leading to these youth, commonly referred to by acronym (CWOP), children without placement, acting out violently and being referred to local juvenile detention facilities for delinquent conduct. The Collin County Juvenile Probation Department operates multiple secure, post-adjudication programs for youth who cannot be safely supervised and/or treatment in the community. The program population of one of the programs alone consisted of nearly 50% of the program population being CWOP youth from Collin County and the region, and all of these youth having severe mental health and intellectual disability needs. Children should not have to be incarcerated to receive needed services. Youth who become involved in the juvenile justice system are more likely than their peers to have been exposed to not just one or two traumatic stressors, but multiple types of traumatic victimization (American Psychological Association, Jan. 6, 2023). These are not just incidents, but types of adverse stressors (e.g., physical abuse, sexual abuse, domestic violence, community violence, life-threatening neglect) that impact youth before they first come to the attention of law enforcement. These youth experience what has been described as "poly-victimization," which is defined as prolonged or multiple exposures to traumatic events (American Psychological Association, Jan. 6, 2023). The brain and nervous system are altered by poly-victimization in childhood (American Psychological Association, Jan. 6, 2023) in ways that increase stress reactivity, anger, and impulsivity while reducing the youth's ability to self-regulate. A trauma-informed juvenile justice system contributes to restoring order and safety by enabling juvenile justice staff to effectively participate in a youth's recovery from traumatic experiences. This benefit includes potentially substantial long-term economic and social cost savings, as well as the immediate satisfaction of being able to effectively contribute to the public's safety and welfare. Youth and families with a history of mental illness often find challenges acquiring mental health services needed within their respective communities. Although the need for mental health services and the negative stigmas previously associated with seeking and obtaining care has been targeted for improvement in the public domain, this population continues to be underserved as it relates to community-based treatment. Managing day-to-day family dynamics with untreated mental illness drastically affects, influences and impacts the family's ability to successfully identify and obtain services. These families require needed assistance in navigating what are often complex service systems. This support proves even more critical for families with limited financial resources, leaving law enforcement and the traditional criminal justice system to provide temporary interventions for unlawful acts directly driven by illness. Please refer to attachment of JMHC Grant for full statement.

Supporting Data :

Along with the county population, the number of referrals to Collin County Juvenile Probation Department (CCJPD) increased by 45% overall from FY 2016 (n=995) to FY 2019 (n=2,033) in FY2021 (n=1,593) in FY2022 (n=1,392) in FY2023 (n=1,626) and in FY2024 (n= 1,765) referrals. The nature of the felonies committed has also increased in degree of violence, as opposed to just statutory element. The number of youth referred for aggravated assault, sexual assault, murder, deadly conduct/discharge firearm, and injury with intent increased from FY16 to (with 218) to FY 2024 (with 628). The number of misdemeanor assault

charges in FY24 (n=441). With the serious and violent felonies, the department has and continues its primary function of ensuring community protection for county citizens but attempts to do so in the least restrictive means available for youth and families. A critical component in making informed decisions in this balance requires the agency to look beyond just the criminality of offense and use evidence-based risk and needs assessment findings and targeted-rehabilitation strategies to promote both community- protection and good outcomes. Without a community-based, mental health focused strategy to work with potentially violent, youthful offenders whose behavior can be directly correlated to mental illness, many youthful offenders are left to the counties most cost-prohibitive remedy, which is post- adjudication detention services. Although the program provides clinical services for youthful offenders, the department has seen an increase of approximately 300% for youth whose mental health needs exceeded what could be adequately treated at the time of court disposition. All the youth in sample received some level of community-based services prior to being removed from the home although all current local remedies were proven to be unsuccessful. These youth were ultimately placed in secure-mental health treatment facilities across the state and region pursuant to increased efforts to divert felony, violent-offenders away from state commitment pursuant to Senate Bill 1630. The importance of mental health and access to services is profound as mental health contributes to the crime being committed and the increasing numbers of juveniles. Mental Health is a huge factor in a child's emotional, behavioral, and cognitive well-being. The need for and lack of comprehensive, coordinated mental health services throughout the life cycle, and especially for children, is underscored by the following information regarding the incidence and prevalence of mental health needs:

- The need for Mental Health Screening is essential and the need for additional consultation for referred youth to the juvenile probation department is entered in the (Maysi Assessment Data, Techshare case management data, 2023);
- 41% increase in youth showing signs of suicidal-ideation during preliminary screening (Maysi Assessment Data, Techshare case management data, 2023);
- 70% of youth in the juvenile justice system have a diagnosable mental health illness (NAMI, 2022).
- 60% of the justice involved youth have a co-occurring mental illness and substance use condition (National Center for Mental Health and Juvenile Justice, 2020)
- 1 in 6 U.S. youth aged 6-17 experience a mental health illness each year (NAMI, 2022).
- 50% of all lifetime mental illness begins by age 14, and 75% by age 24 (NAMI, 2022).
- Suicide is the 2nd leading cause of death among people aged 10-14 (NAMI, 2022).
- In 2021, 51,000 Americans died by suicide (Plan Street, 2022).
- Nearly 50 million or 19.86% of Americans experienced a mental illness in 2019 (Mental Health America, 2022).
- 10.6% or over 2.5 million youth in the U.S. have severe major depression (Mental Health America, 2023).
- 15.08% of youth experienced a major depressive episode in the past year (Mental Health America, 2023).
- 60% of youth with major depression do not receive mental health treatment (Mental Health America, 2022).
- Almost two million youth are arrested in the US every year. Of these youth, 70 percent have a mental health condition.
- 1.2 million children in Texas have a chronic mental illness (TexMed, 2018).
- 1 in 6 U.S. children aged 2-8 years (17.4%) had a diagnosed mental, behavioral, or developmental disorder (Centers for Disease Control and Prevention, 2022).
- 50% of all youth aged 6-17 experience a mental health disorder each year (CDC, 2022).
- Teen depression has increased 59% since 2007 (world Health Organization, 2020).
- 3.2% of children aged 3-17 years (approximately 1.9 million) have diagnosed depression (Center for Disease Control and Prevention, 2021).
- Adolescent children of military parents have greater emotional and behavioral problems than adolescents without military parents (SAMHSA, 2022).
- Nearly 8 in 10 children (78.1%) aged 3-17 years with depression-received treatment (Centers for Disease Control and Prevention, 2018).
- Six in 10 children (59.3%) aged 3-17 years with anxiety-received treatment (Centers for Disease Control and Prevention, 2018).
- More than 5 in 10 children (53.5%) aged 3-17 years with behavior disorders received treatment (Centers for Disease Control and Prevention, 2018).
- 10.6 % or over 2.5 million youth in the U.S. have severe major depression (CDC, 2022).
- 15.08% of youth experienced a major depressive episode in the past year (CDC, 2022).
- Over 60% of youth with major depression do not receive any mental health treatment (CDC, 2022).
- Left undetected, mental health disorders can have serious consequence such as school failure, teenage childbearing, unstable employment, early marriage and marital instability and violence. Additionally, untreated disorders can lead to more frequent and more severe episodes and are more likely to become resistant to treatment (NIMH, 2023).
- Among children living below 100% of the federal poverty level, more than 1 in 5 (22%) have a mental, behavioral, or developmental disorder. Age and poverty level affected the likelihood of children receiving treatment for anxiety, depression, or behavior problems. The Center for Disease Control and Prevention (2022) analyzed the long-term effect of childhood and adolescent traumatic experiences on adult health, mental health, healthcare costs and life expectancy. Adverse Childhood Experience (ACE) such as emotional, physical, or sexual abuse, emotional or physical neglect, witnessing abuse, household substance abuse or mental illness, parental separation or divorce, incarceration of a family member strongly correlate with an adult's depression, alcohol abuse, illicit drug use, risk intimate partner violence, suicide attempts. Furthermore, 20% of children have a diagnosable mental disorder with only 1 in 6 receiving help (National Association of Mentally Ill, 2021).
- Depression is the second largest killer following heart disease (Mental Health Statistics, 2022).
- In fact, mental disorders represent four of the top 10 leading causes of disability (Centers for Disease Control, 2022).
- In 2021, 14% of U.S. children between the ages of 5 and 17 years had received mental health treatment. In total 12% of children had received counseling or

therapy from a mental health professional and 8.7% had taken prescription medication for their mental health (NAMI, 2022). At the present time Collin County has 24 juveniles with mental health needs that need assistance with others waiting to be assessed and placed.

Project Approach & Activities:

The overall goal of the Juvenile Mental Health Court Program will continue to be the following but not limited to: 1) Treat the underlying cause of criminal behavior; 2) Keep the community safe and decrease recidivism; 3) Hold the juvenile (and parent) accountable and 4) Find solutions that are strength-based, child-centered, family-focused, and culturally appropriate to address mental illness. The JMHC Program will utilize the multisystem approach to help participants with mental health needs. This multidisciplinary team will effectively address the many unique and significant needs of the youths. JMHC will combine mental health treatment with frequent court appearances, home visits, academic advocacy, case management, counseling, and community based support. The team will consist of a judge, law enforcement, prosecutors, defense attorneys, probation officers, case manager, director of education, treatment providers (psychiatrist and psychologist), and the families. Each member on the team plays a vital role in helping the participant successfully complete the program in his or her home as well as providing protection for the community. Community resources will be used to provide supportive services for the family while decreasing the need of out of home placements. JMHC will be an intensive supervised program, which will focus on addressing the participant's behavior and mental health problems within the home that impacts the participant's ability to be successful while on probation. The program will not only address how mental illness affects the participants but also how mental illness impacts the entire family. JMHC uses an integrated treatment approach to address participant's needs. Including but not limited to psychological evaluations, substance abuse assessments, and other behavior assessment tools as directed by the treatment provider. The youth is required to do the following but not limited to: •Be honest with the JMHC team; •Commit to 12 months to 24 months of participation (exact program length depends on your progress); •Attend all Court appearances; •Attend all appointments with JMHC Team; •Remain law abiding; •Abstain from the use of drugs, non-prescribed medications, alcohol and mood-altering chemicals; •Submit to random substance testing; •Maintain treatment with the agency or provider with which established; •Take all medications prescribed; •Comply fully with mental health and chemical dependence treatment recommendations; •Remain informed and in compliance with all program rules, policies, procedures, and requirements; •Pursue education and/or employment if applicable; •Complete and submit a travel request form for any out-of-county travel prior to any planned travel. The JMHC program will be a twelve (12) month program with extensive follow-up depending on compliance with the rules and treatment. There are (4) levels/phases to the JMHC Program. The following will explain the phases in detail: Phase 1 – Bronze Bronze is known as the orientation level. During this level, the participant will be introduced to their support team. The strengths and needs will be assessed to help both the participant and family develop a treatment plan. Participants will go through an extensive assessment, followed by individual and family therapy interventions. The participant will meet the case manager for assistance in connecting with community resources. Phase 2 – Silver Silver is known as the stabilization level. The participant will begin to work on maintaining their treatment and probation goals, which will map their success toward probation termination. During this level, the participant will work closely with their psychiatrist to assure all medication is working effectively. The participant will be required to attend all doctor appointments and follow all treatment instructions. The participant must show progress before moving to the next phase. Progress towards goals will be determined by status reports from treatment providers. Phase 3 – Gold Gold is known as the transition level. The participant will continue to work on coping skills that they have learned to help them function in their community. The participant will continue to take medication as prescribed and attend all counseling as directed by treatment provider. The participant and parent will attend monthly court hearings. During this phase the participant will complete all of the program goals and discharge plans will be developed. The participant will be assisted in sustaining treatment, increasing compliance with terms and conditions of probation, and identifying factors that may affect mental status upon release from the program. Phase 4 – Platinum Platinum is known as the skills level. The participant will continue with working on coping skills. Coping skills that the participant learned throughout the program. The program will also have the following: Expectations, Incentives, and Sanctions. Please refer to upload files/phase

Capacity & Capabilities:

All of the personnel on the JMHC team not only have professional expertise in their field but also have (or will have) significant experience and understanding of mental health and developmental disabilities and how this will manifest within a youth's behavior and within the justice system. JMHC Treatment Team: Judge: the Judge will conduct status hearings as ordered. The Judge will encourage the participant to do well and stay on target. The Judge will hold the participant accountable if they fail to comply with the program and/or probation requirements. The Judge will speak with the participant and family to see how they are doing in treatment, at

home, school and in the community. They will also ask what the team can do for them and their family to keep on track.

- Honorable Cynthia M. Wheless, Judge 417th Juvenile District Court Program Coordinator: The Coordinator is responsible for coordinating all of the court activities and serves as a member of the JMHC team. The Coordinator also works directly with the Judge to ensure that the activities of the JMHC are coordinated which include preparing dockets, scheduling and notifying all staff members of review hearings, meetings and screenings.
- Sheila Shaw, JMHC Program Coordinator Case Manager: the Case Manager is responsible for interviewing participants and family. The case manager will assess their needs, coordinates care within the community, and conducts educational groups. Communicates with treatment providers to determine client participation. Maintains accurate up-to-date documentation. Case Manager will conduct intensive management skills, monitor the progress of clients served, act as an advocate for client with medical professionals, aid in the development and coordination of treatment plans, and ensure communication with family and agencies.
- Juvenile Probation Officer: the Juvenile Probation Officer will meet with each participant to create an individual case plan that will work for them and family so that they will remain focused on completing their goals. The probation officer will be tracking each participants progress within the program and assist them when necessary in order for them to complete the program successfully. The duties of the probation officer also include providing intensive supervision to ensure that they are doing what they are supposed to be doing. The JPO will counsel and confer with juveniles, parents, schools and agencies in order to provide adequate resources. The probation officer will conduct random and observe drug testing on participants based on their level of probation. The Juvenile Probation Officer also attends team meetings, weekly staffing and weekly status court hearings.
- Treatment Provider: The Treatment Provider will establish and comprehensive, community-based treatment plan for the participant and for the family pursuant to their mental health evaluation(s)/assessment(s). The treatment provider will also have a designee assigned to the JMHC team. They will provide group, individual and family counseling sessions, and medication management services. They will also provide parenting skill classes and a designee to attend program staffing. Program participants will learn various copings skills on how to manage their emotions as well as ways to become free of drugs. The treatment provider will review the progress towards goals as well as provide weekly reports to the JMHC team regarding progress towards treatment goals, attendance and participation, and provide insight to the team on how best to provide program participants and families support for treatment compliance.
- LifePath Systems Defense Attorneys: The defense attorney will advocate for the participant and assist with legal matters for the participant that relate to the JMHC program. They will advocate for the participant in court and during JMHC team staffing. The attorney will help to make sure that the participants stay on track to reach their treatment and case plan goals.
- District Attorneys: The Assistant District Attorneys serve as members of the JMHC team and assist in assessing cases that appear appropriate for the JMHC. The Assistant District Attorney will have a non – adversarial approach when serving as a JMHC Member.
- Kelly Ludy • Paul Anfosso Director of Education: The Director of Education serves as a member of the JMHC and will coordinate educational guidance for participants and parents. The Director of Education will review transcripts, grades, and classes to assure participants education needs are met. Director of Education will attend and ARD meetings or educational meetings as needed.
- Parents/Family: The JMHC relies heavily on the participation of the parents. Parents will play a key role in the success of the program. Parents will be expected to attend all court hearings, family counseling sessions, parent skills group, and JMHC family activities. They will also be expected to share information regarding the participant's behavior and progress at school, home and in treatment. Parents will be expected to report all probation violations including JMHC program compliance. Family participation is important and is required as part of the program.
- Collaborative Partnerships: The program has identified and developed relationships with local resources and organizations that provide ongoing support for the participants and their families. The JMHC Program has a strong partnership with the following but not limited to: (please refer to attachment A for other Community Partnerships)
 - Collin County Child Protective Services
 - Collin County Child Advocacy Center (CAC)
 - Traffick 9-1-1
 - A Family Place, Grace to Change, Waterford Academy (Substance Abuse Treatment)
 - Texas Department of Family and Protective Services
 - Specialty Courts of Education Wraparound Services has been recognized as a model for collaboration, integrating mental health, juvenile justice, and child welfare and education systems to provide services to youth (Resource Center Partnership, Models for Change). A model that works and serves the juveniles within the county. The integrated, multi-service approach to meeting the needs of juveniles will include a focus on the family's strength and culture, as well as those of the community. The treatment plans will be tailored to address the unique needs of each juvenile and family.

Performance Management :

Goal: Deliver services to youth with cases in the criminal justice system. **Objectives:** 1. Ensure minimum of 95% of juveniles (youth) seeking assistance will be served. 2. Demonstrate maximum 10% increase yearly in youth enrollment. 3. Graduate 15 from program. **Measures:** 1. Provide assistance/services to 20 juveniles (over the course of the grant). 2. Provide case management and advocacy for 20 juveniles (over the course of

the grant). 3. Provide advocacy and assistance for juveniles. 4. Provide treatment referrals for 20 individuals (whether ultimately accepted into the JMHC Program or not) (over the course of the grant and aftercare). 5. Assist 20 juveniles with developing plans (over the course of the grant). Client outcome measurements will be used to establish and evaluate the program's progress in achieving service goals. The Case Manager along with the Probation officer will analyze the outcomes and an action plan will be developed and implemented as needed to ensure that objectives are being met. Performance measurement/data will be collected, reported and submitted in a timely matter. Data Management: The software applications will provide a platform (Techshare/Noble Software Application) to enter all screenings and account for recidivism rates to track program success, number of youth screened, identified, and served in the program. The department's case management system also tracks and records all demographic information for youth including race, age, gender and educational status. The Collin County Juvenile Probation Services department utilizes Techshare Juvenile Case Management System to collect, report, and manage program data. Techshare provides enhanced productivity tools and data sharing capabilities; strong security and data integrity. In addition to data maintained in Techshare, the project coordinator will maintain an Excel spreadsheet with the PID of youth obtaining services, offense level committed, dates of services provided, school attendance, grade point averages, re-offense during project, and 1-year post-project recidivism results.

Target Group :

The JMHC Program accepts referrals for juveniles, aged between 12 and 17 years, who reside in Collin County and demonstrate mental health issues. The JMHC Program will serve 20 juveniles with mental Health issues over the next twelve to eighteen months. As mental health participants, all are considered high risk and high need. Requested funding will be able to provide services for these participants who would otherwise be unable to participate in the program or receive the assistance they much need. The program will use a multidisciplinary approach to service delivery, working with all community-based stakeholders serving the youth throughout the community. Some of the agencies that Collin County will be utilize will include but not limited to: • Collin County Juvenile Probation Department will provide officers to assist with the participants and family. • Collin County Advocacy Center to provide counseling services to both the participants and family. • Traffick 911 to provide counseling and education services. • LifePath Systems to provide mental health services. • A Family Place, Grace to Change, Waterford Academy to provide outpatient IOP/Substance Abuse services. • Parents/family: the program will rely heavily on the participation of the family. The family will play a key role in the success of the program. Parents will attend Parent Project (Parenting Classes).

Evidence-Based Practices:

The Collin County JMHC Program recognizes the importance in incorporating current theory, best practice, and evidence-based service delivery. As such, the program staff maintains an updated knowledge base through research and training, informally reviews the program on a continual basis, and formally reviews the program annually, changes are made as needed. The therapist will utilize the evidence-based treatments that best suit the needs of the juveniles through the phases they need to follow once exiting program. The participants along with family will continue to be monitored. The following are a few of the therapeutic evidence-based service models they will be able to choose and incorporate into their daily lives in order to be productive citizens within the community: • Group therapy • Substance abuse • Support System • Family Treatment • Treatment planning (ongoing treatment) • Alternative therapies (art therapy, music therapy, community service projects, etc.) • Family Treatment Court Best Practice Standards (NADCP) The JMHC also recognizes the importance of including the framework and staffing as a best practice. The team members should have the following but not limited to: •Commitment •Strong leadership •Willing to Champion the program •Leaders within their sector •Have knowledge and experience with mental health and criminal justice system

You are logged in as **User Name:** lindariggs

[Print This Page](#)

Agency Name: Collin County

Grant/App: 4245505 **Start Date:** 9/1/2025 **End Date:** 8/31/2026

Project Title: Juvenile Mental Health Court FY25

Status: Application Pending Submission

Project Activities Information

Introduction

This section contains questions about your project. It is very important for applicants to review their funding announcement for guidance on how to fill out this section. Unless otherwise specified, answers should be about the EXPECTED activities to occur during the project period.

Selected Project Activities:

ACTIVITY	PERCENTAGE:	DESCRIPTION
Specialty Court - Juvenile	100.00	Program will serve juveniles who are suspected by a law enforcement agency or court of having a mental illness or Mental Intellectual Disability.

CJD Purpose Areas

PERCENT DEDICATED	PURPOSE AREA	PURPOSE AREA DESCRIPTION
-------------------	--------------	--------------------------

You are logged in as **User Name:** lindariggs

Print This Page

Agency Name: Collin County

Grant/App: 4245505 **Start Date:** 9/1/2025 **End Date:** 8/31/2026

Project Title: Juvenile Mental Health Court FY25

Status: Application Pending Submission

Measures Information

Objective Output Measures

OUTPUT MEASURE	TARGET LEVEL
Number of carry-over individuals participating.	5
Number of individuals NEWLY participating.	15

Objective Outcome Measures

OUTCOME MEASURE	TARGET LEVEL
Number of individuals who will successfully complete the program.	18

Custom Output Measures

CUSTOM OUTPUT MEASURE	TARGET LEVEL
------------------------------	---------------------

Custom Outcome Measures

CUSTOM OUTCOME MEASURE	TARGET LEVEL
-------------------------------	---------------------

Agency Name: Collin County

Grant/App: 4245505 **Start Date:** 9/1/2025 **End Date:** 8/31/2026

Project Title: Juvenile Mental Health Court FY25

Status: Application Pending Submission

Budget Details Information

Budget Information by Budget Line Item:

CATEGORY	SUB CATEGORY	DESCRIPTION	OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL	UNIT/%
Personnel	Case Manager	Case Manager Duties: Intensive case management skills. Monitor the progress of clients served. Conducts special projects for the Director and the Department for this program. Performs all other related duties involved in the operation of Juvenile Services as assigned or required to this grant. The case manager will coordinate service delivery, ensure communication among providers internally and externally; ensure follow up of any recommended assessments or services; act as an advocate for client with medical professionals, aid in the development and coordination of	\$115,155.00	\$0.00	\$0.00	\$0.00	\$115,155.00	100

		<p>treatment plans; and ensure communication with family and agencies... Bachelor's degree required and a minimum of three (3) year's experience. Valid Texas Driver's License. Base Pay: \$78,346.00 with fringe benefits at \$36,809.00 for 12 months at \$115,155.00. The Juvenile Court Mental Health Case Manager will be at 100%. (C.S.)</p>						
Personnel	Probation Officer	<p>JPO/Duties: Juvenile Probation Officer (Specialized-Mental Health Caseload) The Juvenile Probation Officer (JPO) will meet with each participant to create an individual case plan that will work for client and family so that they will remain focused on completing their goals. The JPO will be tracking each participants progress within the program and assist the clients when necessary in order for them to complete the program</p>	\$100,049.00	\$0.00	\$0.00	\$0.00	\$100,049.00	100

successfully. The duties of the JPO will also include providing intensive supervision to ensure that they are doing what they are supposed to be doing. Perform counseling, guidance in the operation of the County's Juvenile Program. Counsels and confers with juveniles, parents, schools and agencies in order to provide adequate resources. Investigates, monitors and reports on cases involving juveniles with mental illness within the program that need assistance who have violated the law. Investigates referrals and formulates a treatment plan for the client. The probation officer will conduct random and observe drug testing on participants based on their level of probation. The Juvenile Probation Officer also attends team meetings, weekly staffing

		and weekly status court hearings. Base pay \$65,568.00 with fringe benefits at \$34,481.00 for 12 months at \$100,049.00. The Juvenile Court Mental Health JPO will be at 100%. (R.L.) \$						
--	--	--	--	--	--	--	--	--

You are logged in as **User Name:** lindariggs

[Print This Page](#)

Agency Name: Collin County

Grant/App: 4245505 **Start Date:** 9/1/2025 **End Date:** 8/31/2026

Project Title: Juvenile Mental Health Court FY25

Status: Application Pending Submission

Budget Summary Information

Budget Summary Information by Budget Category:

CATEGORY	OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
Personnel	\$215,204.00	\$0.00	\$0.00	\$0.00	\$215,204.00

Budget Grand Total Information:

OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
\$215,204.00	\$0.00	\$0.00	\$0.00	\$215,204.00

You are logged in as **User Name:** lindariggs

Agency Name: Collin County

Grant/App: 4245505 **Start Date:** 9/1/2025 **End Date:** 8/31/2026

Project Title: Juvenile Mental Health Court FY25

Status: Application Pending Submission

Resolution from Governing Body

Applications from nonprofit corporations, local units of governments, and other political subdivisions must include a resolution that contains the following:

1. Authorization by your governing body for the submission of the application to the Public Safety Office (PSO) that clearly identifies the name of the project for which funding is requested;
2. A commitment to provide all applicable matching funds;
3. A designation of the name and/or title of an authorized official who is given the authority to apply for, accept, reject, alter, or terminate a grant (Note: If a name is provided, you must update the PSO should the official change during the grant period.); and
4. A written assurance that, in the event of loss or misuse of grant funds, the governing body will return all funds to PSO.

Upon approval from your agency's governing body, upload the approved resolution to eGrants by clicking on the **Upload Files** sub-tab located in the **Summary** tab.

Contract Compliance

Will PSO grant funds be used to support any contracts for professional services?

Select the appropriate response:

☒ Yes

☐ No

For applicant agencies that selected **Yes** above, describe how you will monitor the activities of the sub-contractor(s) for compliance with the contract provisions (including equipment purchases), deliverables, and all applicable statutes, rules, regulations, and guidelines governing this project.

Enter a description for monitoring contract compliance:

All County contractors submit monthly reports and/or invoices, including programmatic reports, which are reconciled and audited to ensure contractor is fulfilling statement of work and expenses match receipts. SOAR Program contractors will be required to submit a detailed invoice including date and type of service for participants.

Lobbying

For applicant agencies requesting grant funds in excess of \$100,000, have any federally appropriated funds been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant loan, or cooperative agreement?

Select the appropriate response:

☐ Yes

☒ No

☐ N/A

For applicant agencies that selected either **No** or **N/A** above, have any non-federal funds been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress in connection with this federal contract, loan, or cooperative agreement?

Select the appropriate response:

☐ Yes

☒ No

☐ N/A

Fiscal Year

Provide the begin and end date for the applicant agency's fiscal year (e.g., 09/01/20xx to 08/31/20xx).

Enter the Begin Date [mm/dd/yyyy]:

10/1/2025

Enter the End Date [mm/dd/yyyy]:

9/30/2026

Sources of Financial Support

Each applicant must provide the amount of grant funds expended during the most recently completed fiscal year for the following sources:

Enter the amount (in Whole Dollars \$) of Federal Grant Funds expended:

16171898

Enter the amount (in Whole Dollars \$) of State Grant Funds expended:

4246620

Single Audit

Applicants who expend less than \$1,000,000 in federal grant funding or less than \$1,000,000 in state grant funding are exempt from the Single Audit Act and cannot charge audit costs to a PSO grant. However, PSO may require a limited scope audit as defined in 2 CFR Part 200, Subpart F - Audit Requirements.

Has the applicant agency expended federal grant funding of \$1,000,000 or more, or state grant funding of \$1,000,000 or more during the most recently completed fiscal year?

Select the appropriate response:

☒ Yes

☐ No

Applicant agencies that selected **Yes** above, provide the date of your organization's last annual single audit, performed by an independent auditor in accordance with the State of Texas Single Audit Circular; or CFR Part 200, Subpart F - Audit Requirements.

Enter the date of your last annual single audit:

9/30/2024

Debarment

Each applicant agency will certify that it and its principals (as defined in 2 CFR Part 180.995):

- Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal Court, or voluntarily excluded from participation in this transaction by any federal department or agency;
- Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; or
- Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in the above bullet; and have not within a three-year period preceding this application had one or more public transactions (federal, state, or local) terminated for cause or default.

Select the appropriate response:

☒ I Certify

☐ Unable to Certify

If you selected **Unable to Certify** above, please provide an explanation as to why the applicant agency cannot certify the statements.

You are logged in as **User Name:** lindariggs