Juvenile Justice Policy and Data Board

Community-Based Interventions Subcommittee

Virtual Meeting
March 25, 2020
1pm – 3pm



Agenda

- Welcome and Introductions
 - Virtual Meeting Guidelines
- Review/Approval of February meeting minutes

 Presentation/Discussion re: Developing Diversion Agreements and Case Plans



Today's Overview

1) Goals

• What do we hope to achieve with the diversion agreement?

2) Understanding Context

- What do we need to know/understand to determine appropriate intervention(s)?
- How should risk/need assessment tools be used as part of diversion process?

3) Interventions

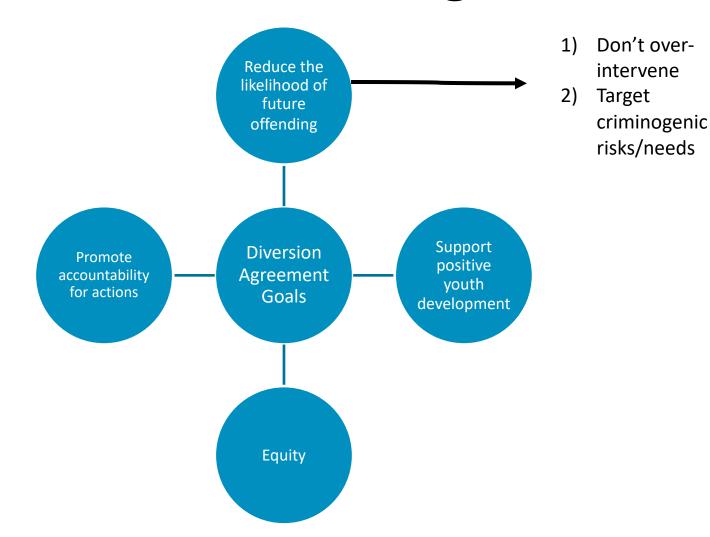
- What are examples of appropriate interventions?
- How have other jurisdictions used context to set interventions?

4) The Agreement

- What becomes a <u>condition</u> of diversion?
- What do we focus on & hold youth to?



1) Goals of Diversion Agreement



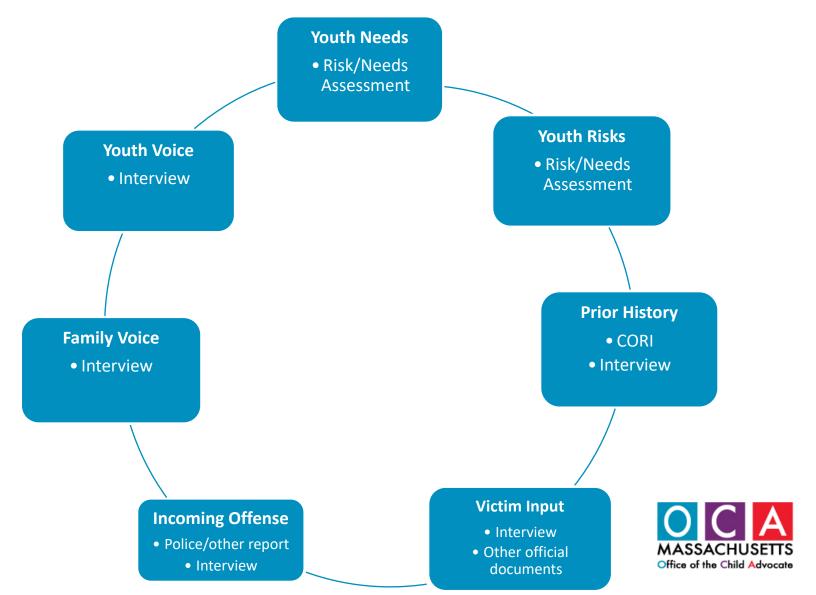


1) Goals of Diversion Agreement

Are these the correct goals to Reduce the use when developing likelihood of future diversion agreement? offending Support Diversion **Promote** positive Agreement accountability youth for actions Goals development Equity

Office of the Child Advocate

2) Understanding the Context: Sources of Information



2) Understanding the Context: Sources of Information

Youth Needs

Office of the Child Advocate

• Risk/Needs **Assessment Youth Risk Youth Voice** • Risk/Needs Interview Assessment Are all of these needed to inform diversion case planning? **Prior History Family Voice** • CORI Is anything missing? Interview Interview **Victim Input Incoming Offense** Interview Police/other Other official report documents

2) Understanding the Context: Use of Risk/Need Assessments

Pros:	Cons:
Can reduce implicit bias	Misclassification of youth of color
Can help determine interventions likely to be most effective	Interpretation of results can vary (need effective training/QA)
Can improve resource allocation (focus resources on highest risk/need)	Stigmatization of the youth
Improve practice consistency	Time/resource intensive to conduct

Office of the Child Advocate

2) Understanding the Context: Use of Risk/Need Assessments

No Assessment

(e.g. South Dakota)

Short Screen(s) Triage

(e.g. Suffolk County DA; Fairfax County) Full Assessments for All

(e.g Delaware)



2) Understanding the Context: Use of Risk/Need Assessments

Should we be using an assessment tool to inform understanding of youth risks/needs?

If yes, should all youth receive a full assessment, or is a triage approach more appealing?

What criteria would we recommend to inform tool selection process?



3) Interventions: Kentucky

Kentucky Diversion Case Plan
Parent/Guardian concerns/goals for youth & family
Youth concerns/goals for youth & family
Focus Area (Criminogenic Needs), Goal, Potential Barriers, Action Steps, Individual Responsible, Target Date

Focus Area: Goal:			Need Status:	In Progress Complete Not Currently Being	g Addressed
Poter	ntial barriers to complet	ion:			
	Action Steps	Individual Responsible	Date Assigned	Target Completion Date	Date Completed
1.					
2.					



3) Interventions: Louisiana

EXAMPLE	Anger/Aggression	Mental Health	Family Issues	School/Education		
LOW Risk/Need	Low Risk indicates low probability of future risk, violence and/or delinquent behavior. Enhance protective factors by actively recognizing strengths and strategically building upon pre-existing strengths. Remember, increased exposure to the juvenile justice system increases risk of low risk juveniles.					
MODERATE Risk/Need	Community-based cognitive-behavioral skills interventions	Community-based family and individual evidence-based practices	Community-based evidence-based practices (e.g. FFT, BSFT)	School level interventions and plans (e.g. SBLC, IEP, etc.)		
HIGH Risk/Need	Intensive community or residential options	Intensive community pr residential options	Intensive family intervention services (e.g. MST, MDFT, etc)	Intensive in-school options and/or alternative educational placements		



3) Interventions: Fairfax County VA

IUVENILE INTAKE DISPOSITIONAL MATRIX

ALL diversion eligible youth will be assessed using the Global Appraisal of Individual Needs - Short Screener (GAIN-SS) and the Youth Assessment Screening Instrument (YASI). The GAIN-SS helps identify youth who could benefit from further psychiatric and substance use assessment. The YASI assesses a youth's risk, need and protective factors. The Pre-Screen will be utilized first and if Pre-Screen results indicate moderate or high risk, the Full-Screen will be administered. The results of these assessments determine the type of intervention Juvenile Intake will utilize. Pre-Screen: Use the overall risk

GAINS: 3+ (within the past year) = CSB resource information is provided

Youth who have no indicated areas contributing to risk will be considered low need. Youth who have one or more areas contributing to risk will be considered high need.

Restitution will be encouraged to be paid within 90 days. However, no youth will be sent to court for failing to pay. Victims Services will advise victims on available civil remedies.

LOW RISK

GAIN-SS & YASI Pre-Screen

LOW NEED

Youth and family will be educated on the juvenile justice system and case will be coded as 04 (unofficial counseling). CSB resource information will be provided if the GAIN-SS score is 3 or more.

HIGH NEED

Youth and family will be educated on the juvenile justice system and the youth will be scheduled for Core Values. Case is coded as 05 (referred to other agency for services). If GAIN-SS score is 3 or more, CSB resource information will be provided.

MODERATE RISK

GAIN-SS & YASI Full Screen

All moderate risk youth will be referred to a Diversion Hearing or Monitored Diversion and case will be coded as 07 (diversion).

- All Domestic Assaults, Status
 Offenses and cases in which there is
 increased concern for community
 safety will be set for Monitored
 Diversion
- All out of jurisdiction cases will be set for a Diversion Hearing

Hearing Officers will assign a service that addresses a YASI- indicated area of need.

Note: Mental health and Substance abuse will be treated as priority areas.

HIGH RISK

GAIN-SS & YASI Full Screen

All high risk youth will be placed on Monitored Diversion and case will be coded as 07 (diversion).

 All out of jurisdiction cases will be set for a Diversion Hearing

Note: Mental health and Substance abuse will be treated as priority areas.

LOW RISK SERVICE OPTIONS BY YASI DOMAIN

MENTAL HEALTH SUBSTANCE ABUSE	Referral to Community Services Board
SCHOOL COMMUNITY/PEER FAMILY SKILLS AGGRESSION ATTITUDES	Core Values Charitable Donation Essay Firestop Letter of Apology



3) Interventions: Cambridge

Safety Net YLS/CMI Service Referral Matrix

					Need Areas			
		Family Circumstances/ Parenting	Education/Employment	Peer Relations	Substance Use	Leisure/Recreation	Personality/Behavior	Attitudes/Orientation
	Low	Recognize Family Parenting as potential strength and consider adding strong parental involvement/ oversight in treatment planning	Recognize Education/ Employment as a potential strength and consider adding school resources or job in treatment planning	Recognize Peer Relations as potential strength and consider adding peer group involvement in treatment planning	Consider whether Substance Abuse prevention programming may be helpful	Recognize Leisure/Recreation as potential strength and consider adding sports/ activities or coaches/mentors in treatment planning	Behavior as potential strength and see if these	Recognize Attitudes/ Orientation as potential strength and see if these positive attitudes and desire to do well can enhance treatment planning (e.g., goal -oriented, respect for authority, etc.)
Score	Moderate	CBHI-In-home therapy (IHT) &/or Intensive Care Coordination (ICC) Family Support & Engagement Program Mentoring program Outpatient therapy	SPED evaluation/re- evaluation Tutoring School-based behavioral supports Employment Program	Afterschool program Employment program Mentoring program	Parent-child contract on substance use Outpatient drug treatment program	Mentoring program Afterschool program Athletic Program	Outpatient Therapy Therapeutic group Medication evaluation &/ or management Mentoring program Afterschool program Athletic Program	Outpatient Therapy Therapeutic group Medication evaluation &/ or management Mentoring program Afterschool program Athletic Program
	High	Family support & engagement program DCF involvement via 51A, CRA referral, or voluntary services application Intensive IHT via DCF Therapeutic mentor	Discuss requesting SPED evaluation/re-evaluation with parent/guardian Employment Program Alternative diploma program	Therapeutic group	Intensive outpatient drug treatment program Detox & stabilization program Residential drug treatment Recovery High School Young people's AA meeting	Therapeutic mentor	Emergency mental health screening Outpatient psychological evaluation Partial Hospitalization Program Juvenile Court Involvement via CRA application DMH referral	Emergency mental health screening Outpatient psychological evaluation Juvenile Court Involvement via CRA application Life skills program DMH referral



3) Interventions: Milwaukee

	P	rogram	s and Service	s Sorted Accord	ding to YASI D	omains an	d Risk Level		
YASI DOMAINS	Family	School	Community & Peers	AODA	МН	Violence & Aggression	Attitudes	Skills	Employment & Free Time
YASI RISK = LOW	Healthy Relationships	Tutoring	Individual Therapy	GAIN Assessment (and any recommended services)	Competency Restoration	Anger Management	Healthy Relationships	Individual Therapy	Mentoring
	Family Therapy		CSRC	Celebrating Families	Individual Therapy	Individual Therapy	Individual Therapy	Employment Programs	CSRC
	FFT		Mentoring	Family Therapy	Psychiatric Evaluation	SA Group Therapy	Restorative Justice	SA Group Therapy	Employment Programs
	Parent Education			Individual Therapy	SA Group Therapy	SA Individual Therapy	SA Group Therapy	SA Individual Therapy	
					SA Individual Therapy		SA Individual Therapy		
YASI RISK = Moderate	Healthy Relationships	Tutoring	Individual Therapy	GAIN Assessment (and any recommended services)	Competency Restoration	Aggression Replacement Therapy (ART)	Healthy Relationships	Individual Therapy	Mentoring
	(CC)	cc	СС	Celebrating Families	СС	cc	Burglary/Auto Monitoring Program (BMP/AMP)	СС	BMP/AMP
	Family Therapy	JETI	CSRC	Community Connections (CC)	Individual Therapy	FA	cc	Employment Programs	cc
	Female Family Systems Intervention		FA	Family Therapy	Psychiatric Evaluation	Individual Therapy	ERC	ERC	CSRC
	FFT		Mentoring	Group Counseling	SA WI3 erapy	SA Group Therapy	FFT	FA	Employment Programs
	Girls Family Connections		SCOP	Individual Therapy	SA Individual Therapy	SA Individual Therapy	Individual Therapy	FFT	ERC
	Parent Education					SCOP	Restorative Justice	SA Group Therapy	Level II/GPS
							SA Group Therapy	SA Individual Therapy	SAS
							SA Individual Therapy	SAS	
							SAS	SCOP	
							SEP		
YASI RISK = HIGH	Healthy Relationships	Tutoring	Individual Therapy	GAIN Assessment (and any recommended services)	Competency Restoration	ART	Healthy Relationships	Individual Therapy	Mentoring
	Family Therapy	JETI	CSRC	Celebrating Families	Individual Therapy	FA	BMP/AMP	Employment Programs	BMP/ AMP



3) Interventions

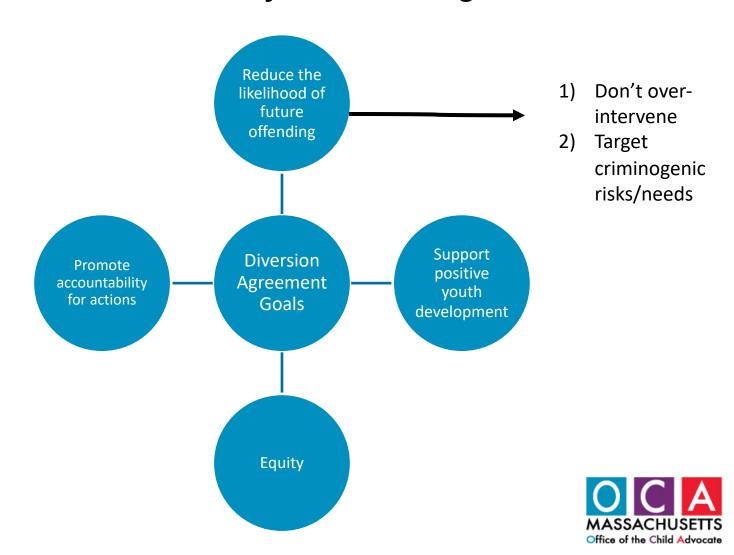
What do you like about any of the models presented?

What concerns do you have about any of the models presented?



4) The Diversion Agreement: Conditions

Reminder re: Goals of Diversion Agreement



4) The Diversion Agreement: Conditions

Examples of Conditions in Other Jurisdictions (CT, NH, NC, OH):					
Participation in Community-Based Program	Follow all school rules/regulations and policies and attend school daily				
Community Service	Not to consume any alcohol or illicit drug use				
Restorative Justice Program/Process	Drug/alcohol testing				
Restitution	Curfew				
Payment of Diversion Fee	Attend all scheduled appointments with Diversion Coordinator				
Participation in Counseling/Therapy	Check in calls with Diversion Coordinator				
Follow rules of parents/guardians	No involvement in any further offenses				



4) The Diversion Agreement: Examples of Other Non-Programmatic Conditions & Information

Basic information about the allegation	Permission for information sharing (btwn program and service provider)
Expectations for family involvement	Notifications of voluntary participation
Waiving of rights (e.g. speedy trial) Signed by youth, parent, coordinator	Accept responsibility
Expungement/record keeping process information	Signed by youth, parent, coordinator



4) The Diversion Agreement

Should there be any mandatory/universal conditions?

What guidance should we give Diversion Coordinators in developing special (individualized) conditions?

When youth have multiple/many needs, how do we choose which conditions to make mandatory?

What role, if any, should other system stakeholders have in agreement building and case planning?



Where we're headed...

Meeting Dates	Meeting Topics
4/29/20: CBI Meeting Diversion Case Management & Close-Out	 How do we determine length of intervention? What does case management/ diversion supervision entail? How do we determine success/failure? How does diversion end?
5/19/20 CBI Meeting: Diversion Coordinator Job Description & Information Sharing	 What is the role of the Diversion Coordinator? What are the necessary qualifications for a Diversion Coordinator How are referrals made (incoming?) What information needs to go back to diversion referrer (outgoing?) In what other circumstances may information need to be shared, what kind, and with whom? What legal agreements are needed to facilitate information sharing?

Next Meeting Date

April 29, 2020

1pm-3pm

1 Ashburton Place

10th Floor-Charles River Conference Room

(But stay tuned, may be virtual)



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