



**Texas Department of
Criminal Justice**

TCOOMMI

**Program Guidelines and Processes
for Juvenile Case Management**

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Revision 2**

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2013**

Subject: Special Needs Diversionary Program (SNDP)

Applicability: Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) staff and contracted Local Mental Health Authority (LMHA) TCOOMMI program staff.

Purpose: To provide a case management process to TCOOMMI contract programs for identified juvenile offenders on criminal justice supervision who may be considered for, or are receiving, Case Management services.

Authority: Texas Health and Safety Code, Chapters 614.013, 614.016, 614.017, 614.018

Discussion: TCOOMMI Special Needs Diversionary Program (SNDP) provides a higher level of mental health services to youth clients with a DSM-V diagnosis who are being supervised in the community by the juvenile probation department.

Procedures:

I. Screening and Referral

- A. TCOOMMI referral records are maintained in the TCOOMMI WebApp and should be monitored daily for new referrals. Contracted service providers are required to request and maintain access to the WebApp, as appropriate. Access requests or issues with the WebApp should be emailed to TDCJ TCOOMMI Programs at programstcoommi@tdcj.texas.gov.
- B. At least monthly, the TCOOMMI Program Director and/or designee shall meet, face-to-face when possible, with a representative of the local Juvenile Probation Department to review possible referrals to TCOOMMI Case Management.
- C. Target Population: The program shall serve only those juveniles who:
 1. Have received a disposition of deferred prosecution, juvenile court-ordered probation or who have been released under court ordered conditions of release and are being supervised in the community by the juvenile probation department; and

2. Have met the population of juveniles who have a DSM-V diagnosis other than or in addition to substance abuse, intellectual developmental disorder, and/or autism spectrum disorder as determined by a licensed mental health professional as a result of the completion of a standardized mental health assessment.

D. Clinical Assessment

1. Each juvenile's case file shall include a clinical assessment that has been signed and dated by a licensed professional of the healing arts (LPHA) completed within 90 calendar days prior to enrollment in the SNDP. In the event the clinical assessment and enrollment occur on the same day, it may be signed and dated within two business days of enrollment.
2. The clinical assessment establishing eligibility shall contain the following information:
 - a) DSM-V diagnosis other than or in addition to substance abuse, intellectual developmental disorder, or autism spectrum disorder.

E. Family Suitability Interview

1. The SNDP juvenile probation officer and Licensed Mental Health Professional assigned to the juvenile's case (core team) shall complete a family suitability interview for each juvenile found to meet the requirements for services through this program prior to, or at the same time as, the juvenile's enrollment into the SNDP.
2. The family suitability interview shall document the following:
 - a) Whether the juvenile has an adult family member (parent, guardian, or custodian) available for participation in the program;
 - b) Whether the family is willing to participate in the program; and
 - c) That an explanation of the goals and requirements of the program was provided to the juvenile and family.

II. Benefit Coordination

- A. All juveniles shall be screened for medical insurance coverage prior to, or upon enrollment into the SNDP.
- B. If third party insurance, Medicaid, or Children's Health Insurance Program (CHIP) does not already cover the juvenile, then the mental health team member shall ensure that an application for Medicaid or CHIP is completed and submitted within five (5) calendar days of the juvenile's enrollment into the SNDP.

III. Case/Treatment Plan

- A. The core team shall meet with the juvenile and family to develop an initial case/treatment plan within 72 hours of the juvenile's enrollment into the SNDP.
- B. The case/treatment plan shall be developed by the core team with input from the juvenile and the family (parent, guardian, or custodian).
- C. The case/treatment plan shall be written in terms that are specific and measurable and shall document each of the following criteria:
 1. All identified areas of need for the juvenile and family;
 2. What activity/intervention is to be completed;
 3. Who is responsible for completing the activity/intervention;

4. When the activity/intervention is to be conducted and/or completed;
 5. How the activity/intervention is to be conducted;
 6. What services will be made available to the juvenile and family to assist them in acquiring skills and resources to meet their needs;
 7. All required contacts; and
 8. What long-term community supports will be utilized.
- D. A copy of the plan shall be provided to the juvenile and family within seven (7) calendar days of the juvenile's enrollment into the program.
- E. The core team shall formally review and update case/treatment plans monthly with the juvenile and family, and a copy shall be provided to the family within seven (7) calendar days from the date of completion of the review. Monthly reviews should occur within 21 to 35 days of the initial case/treatment plan development or previous review unless a significant event in the juvenile or family's circumstances occurs that necessitates an earlier review and update to the plan.
- F. Transition planning shall be incorporated by the core team into the juvenile's monthly case/treatment plan review at least 30 days prior to the juvenile's discharge from the program. The Transition Plan should outline the network of formal and informal community supports and services the family will use once released from the program.
- G. Out of Home Placement
1. Juveniles may be enrolled in the SNDP if they meet the requirements under Section I.B. upon discharge from an out of home placement.
 2. A juvenile may remain enrolled in the SNDP if the juvenile is being placed in an out of home placement, as long as their absence from the home does not exceed 45 calendar days. The core team shall continue to provide services to the juvenile and family according to the juvenile's case/treatment plan during this 45 day period.

IV. Team Requirements

- A. The core team shall maintain a minimum caseload of 12 juveniles and their families, and shall not exceed 15 juveniles and their families at any one time.
- B. The mental health core team member shall have at least one face-to-face in-home contact with the juvenile per week during the first thirty days of enrollment. Every other week, the in-home contact shall be with the juvenile and family. The frequency of contacts shall be addressed in the case/treatment plan.
- C. The first 30 day case plan review and all subsequent case plan reviews shall determine, based on need, the number and type of contacts with the juvenile and family to be made by the mental health core team member.
- D. Based upon the core team meeting, the team shall collaborate to determine level of intensity based upon the criminogenic risk score and recommended level of care. The number and types of contacts shall be made as a result of the recommendations of the core team:
 1. Low intensity- A minimum of two times monthly face to face with youth, as needed face to face with youth and family, and phone contacts as needed.
 2. Moderate intensity- A minimum of one time weekly face to face with youth, one time monthly face to face with youth and family, and phone contacts as needed.
 3. High intensity- A minimum of one time weekly face to face with youth, two

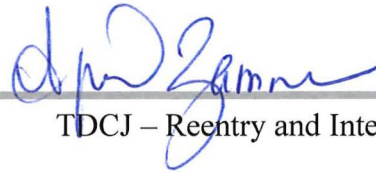
- times monthly face to face with youth and family, and phone contacts as needed.
- E. The core team shall establish a unified enrollment date for each juvenile enrolled in the SNDP
 - F. The core team shall provide services to the juvenile and family for the period the juvenile is enrolled in the SNDP.
 - G. Weekly communication between core team members is required to monitor the progress and needs of each juvenile enrolled in the SNDP.

V. Crisis Assistance

- A. The family shall be provided contact information for a local crisis hotline that may be reached 24 hours a day, seven days a week and 365 days a year for assistance with crisis resolution.
- B. The core team members will review the circumstances surrounding any call the family makes for crisis intervention within 2 business days of notification regarding the event.
- C. The core team will conduct a crisis debriefing with the juvenile and/or family member(s) within five (5) business days of notification regarding the event to discuss antecedents, actions taken during the crisis, and possible further steps or learning opportunities when the crisis situation:
 - 1. Involves the juvenile or family member being hospitalized for medical or psychiatric purposes,
 - 2. Includes police involvement, or
 - 3. The core team determines follow-up is needed.

VI. Discharge/ Aftercare Plan

- A. On the day of the juvenile's discharge from the SNDP, the core team shall complete a written discharge/aftercare plan with the juvenile and family, which shall:
 - 1. Outline the ongoing support systems and community linkages to these resources for the family;
 - 2. Identify specific recommended family services and community linkages to appropriate resources; and
 - 3. Provide the juvenile and family a copy of the discharge/aftercare plan.
 - 4. Juveniles may be re-enrolled into the SNDP after previously completing the program, or having been discharged from the program, if the requirements under Section I.B. are met.



TDCJ – Reentry and Integration Director