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DEPARTMENT OF MENTAL HEALTH

http://dmh.lacounty.gov

July 15, 2011

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director

Donald Blevins, Chief
Probation Department

SUBJECT: **JUVENILE JUSTICE TRANSITION AFTERCARE SERVICES PROGRAM IMPLEMENTATION PLAN 30-DAY REPORT (AMENDMENT TO ITEM 24, JUNE 7, 2011)**

On June 7, 2011, your Board approved Motions by Supervisor Gloria Molina and Supervisor Mark Ridley-Thomas' related to the Department of Mental Health (DMH) Prevention and Early Intervention (PEI) Juvenile Justice Transition Aftercare Services Board Letter that was adopted on that date.

More specifically, the Directors of DMH and Probation were requested to provide 30-day, 60-day, and 90-day reports regarding the implementation of juvenile justice aftercare services including the following:

- Ensure that a realistic mental health case plan is developed during the minor's transitional Multidisciplinary Team Meeting (MDT) and that the MDT is held far enough in advance of the minor's release to ensure family involvement is possible and the transition is seamless.
- Ensure that the minor is connected to a community mental health provider upon release.
- Ensure that the identified community mental health provider can provide service access and that transitional mental health and prescription refill requirements are documented.
- Develop recommendations for coordination of care among the mental health agency, the family, and the assigned Deputy Probation Officer.

DMH and Probation staff have been working to implement the new aftercare program that addresses the needs of Probation youth, transitioning from juvenile justice camp facilities to their communities and families. The attached tracking document will provide you with the status of each element identified above. Should you need further information, please contact me, or your staff can contact Sandra D. Thomas, Deputy Director, at (213) 738-4644.

MJS:SDT:lmw

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JUVENILE JUSTICE TRANSITION AFTERCARE SERVICES PROGRAM
IMPLEMENTATION PLAN
REPORTING PERIOD: JUNE 7, 2011 – JUNE 30, 2011
JULY 14, 2011

DIRECTIVE	PLAN	DELIVERABLE	STATUS
I. Ensure that a realistic mental health case plan is developed during the minor's transitional Multidisciplinary Team Meeting.	Department of Mental Health (DMH) camp primary clinician, camp navigator, and Transition Aftercare Services staff shall participate in the transitional Multidisciplinary Team (MDT) meeting to provide input into the case plan development.	1. Probation will notify the Department of Mental Health (DMH) camp clinician, navigator, and Aftercare staff when the Transition MDT is scheduled. 2. During the MDT meeting, for open mental health cases, the DMH camp clinician summarizes the treatment progress, makes treatment recommendations, and discusses community referrals for ongoing mental health treatment. 3. As appropriate, recommendations for the continuation of the youth's psychotropic medications are discussed. Upon release from camp, the youth is provided with a prescription, a list of pharmacies to fill prescriptions, and a list of outpatient clinics with medication services. 4. During the MDT meeting, the Aftercare staff assesses the youth's case for participation in an EBP delivered in the community. 5. The participating parent/caregiver is encouraged to take part in developing the plan and attending the MDT meeting. 6. A written summary is developed that incorporates the results of the MDT meeting. The MDT summary document is provided to DMH, LACOE, Probation Camp Community Transition Program (CCTP), and in some cases to the receiving school district. The Discharge Planning Services form, as per Probation Directive 1200, goes to the youth and family.	Deliverables 1, 2, 3, 5, and 6 are currently implemented except for Aftercare Services staff participation. Aftercare staff will participate upon being hired and trained. Deliverables 1 and 4 will be implemented as Transition Aftercare Services program staff are hired and trained.
II. Ensure that, when appropriate, the minor is connected to a permanent mental health provider in the community prior to the minor's	DMH Aftercare staff will coordinate with camp clinical and navigator staff to make a solid connection for youth to community mental health resources as	7. Upon notification of a youth's release, Aftercare Services staff will follow up with DMH camp clinician and navigator regarding the status of	Deliverables 7-11 will be implemented as Transition Aftercare Services program staff are hired and trained.

DIRECTIVE	PLAN	DELIVERABLE	STATUS
release, to ensure a seamless transition from probation camp mental health services to community services.	appropriate.	referrals to community mental health services. 8. Identify and resolve barriers to youth connecting to community mental health resources. 9. Aftercare staff will consult with DMH camp clinicians about transitioning youth participating in EBPs delivered in the youth's community. 10. Youths referred to the Aftercare Services program are assigned to a treatment team for the appropriate EBP. 11. Youth referred to more intense outpatient directly operated or contracted agency mental health services, as appropriate, Aftercare staff will coordinate with camp clinical and navigation staff by following up on the status of the referral and resolving the barriers to the youth being connected. 12. Provide support to the parent/caretaker prior to the youth transitioning from camp to encourage continued participation in mental health services as the youth returns to his/her community.	Deliverable 12 is currently implemented by DMH camp clinical staff, and will be enhanced by aftercare staff.
III. Ensure that identified provider has an opening for the minor and that the confirmation is recorded and tracked in the minor's chart, along with the minor's mental health needs and prescriptions refills that will be occurring during the minor's transition into the community.	Mental health and medication services are voluntary, youth agreeing to participate in mental health and medication services, the appropriate providers are notified of the referral. The contact with the mental health provider is documented in the youth's mental health chart.	13. DMH camp clinician/navigator provides youth needing additional services a list of referrals for mental health services. As possible, parent/caretaker is also provided with the referral information. 14. Referral recommendations are provided at the MDT meeting and documented in the transitional MDT summary. 15. Treatment recommendations are documented on a progress note in the youth's camp mental health chart. 16. Youth on psychotropic medications, DMH	Deliverables 13-19 is currently implemented by DMH camp clinical staff. Deliverable 20 will be implemented as Transition Aftercare Services program staff are hired and trained.

DIRECTIVE	PLAN	DELIVERABLE	STATUS
		psychiatrists prepare medication prescription and document it in the youth's camp mental health chart. 17. Upon the youth's release a prescription and list of pharmacies to fill the prescriptions are provided to the youth and parent/caretaker. The family is also provided referrals for continued medication services. 18. DMH Parameter 02.9 – Access To Mental Health Services After Discharge From Psychiatric Hospitals and Juvenile Justice Programs – relates to timely and appropriate access to mental health services. The parameter indicates that individuals receiving psychotropic medications from a hospital or juvenile justice program shall be seen by the appropriate level of staff within seven (7) days. 19. The prescription and referral lists are documented in the youth's mental health chart. 20. Aftercare staffs are notified of the referrals provided to the youth and family by the camp clinician or navigator, through the MDT meeting and written summary, and the Discharge Planning Services form. As appropriate, Aftercare staff will assist in follow up with youth, family, Probation Officer, mental DMH camp navigator and clinician, and mental health provider regarding available appointment slots and referrals.	
IV. Develop recommendations for better coordinating the minor's mental health provider, the minor's family, and the Deputy Probation	DMH and Probation Departments to develop and implement policies, procedures, guidelines for the coordination of services.	21. Develop guidelines to mental health providers and DPO to ensure coordination of services.	Deliverable 21 is in progress.

DIRECTIVE	PLAN	DELIVERABLE	STATUS
Officer, to ensure that the minor's needs are being addressed to successfully support the minor and reduce recidivism.			
V. Ensure that the multidisciplinary team meeting (MDT) is scheduled far enough in advance of the minor's release for a prompt and seamless transition to community service providers and include the minor's parents or legal guardians in the MDT meeting and transition planning.	DMH to support the Probation Department's efforts to ensure that parents/legal guardians are notified at least 30 days in advance of the transition MDT and encourage participation.	22. Probation notifies parents/legal guardians of the scheduled transition MDT in writing or by telephone at least 30 days in advance. 23. DMH case management staff will follow up with parents/legal guardians by phone at least 2 weeks prior to the scheduled transition MDT to encourage participation. 24. DMH aftercare case management staff will follow up by phone with the parent/legal guardian 30 days prior to the youth's release to support the family's participation in community mental health services, identify and resolve barriers to treatment. 25. DMH aftercare staff will follow up with the community mental health provider by written notification of the pending referral 30 days prior to the youth's release from camp.	Deliverable 22 is currently implemented by Probation. Deliverable 23-25 will be implemented as Transition Aftercare Services program staff are hired and trained.