

YOUTH SERVICES POLICY

Title: Secure Care Mental Health Screening, Appraisal, and Evaluation	Type: B. Classification, Sentencing and Service Functions Sub Type: 6. Medical/Mental Health Number: B.6.5
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References: ACA Standards 4-JCF-4D-01, 4-JCF-4D-02, 4-JCF-4D-03, 4-JCF-4D-04, 4-JCF-4D-05 (Performance Based Standards for Juvenile Correctional Facilities) and YS Policy Nos. B.2.1 “Assignment, Reassignment, and Release of Youth”; B.2.2 “Youth Classification System and Treatment Procedures”; B.2.12 “Fast Track Program”; B.2.14 “Secure Care SAVRY”; B.2.16 “Assessment and Treatment of Youth Who Demonstrate Sexual Behavior Problems”; B.6.1 “Health Care”, B.6.6 “Secure Care Mental Health Program”; B.6.7 “Secure Care Suicide Prevention”; B.7.1 “Education”; and C.2.11 “Prison Rape Elimination Act (PREA)”; OJJ/WP D-2 “Mental Health Screen”, D-3 “Mental Health Appraisal”, D-4 “Mental Health Evaluation”, and D-5 “Mental Health Treatment Plans”	
STATUS: Approved	
Approved By: Otha “Curtis” Nelson, Jr., Deputy Secretary	Date of Approval: 12/21/2022

I. AUTHORITY:

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

II. PURPOSE:

To ensure that the following occurs:

- A. All youth (both inter- and intra-system transfers) receive an initial mental health screening within one (1) hour of admission to a secure care facility by a Qualified Mental Health Professional (QMHP) or a staff person qualified to conduct the initial mental health screening.
- B. All youth transferred inter-system receive a mental health appraisal (also known as assessment in Performance Based Standards) within seven (7) days of arrival by a QMHP; and
- C. Any youth needing further mental health evaluation or treatment have evaluations completed within 30 days of arrival by a QMHP.

III. **APPLICABILITY:**

Deputy Secretary, Assistant Secretary, Chief of Operations, Youth Facilities Director - Statewide, Regional Directors, Facility Directors, Regional Managers, Health Services Director, Director of Treatment and Rehabilitation, Director of Education, Contracted Health Care Provider (CHP) staff members that have a role in the secure care intake and/or the screening, appraisal and evaluation process.

IV. **DEFINITIONS:**

Community Based Services (CBS) - Includes all regional probation and parole offices located throughout the state.

Contracted Health Care Provider (CHP) - Contracted licensed practitioners responsible for the physical and mental well-being of the secure care youth population. Services include medical, dental and mental health services, nursing, pharmacy, personal hygiene, dietary services, health education and environmental conditions.

Intersystem Transfer – The transfer of a youth from one distinct correctional system to another.

Intrasystem Transfer – The transfer of a youth from facility to facility within a correctional system.

Massachusetts Youth Screening Instrument Version - 2 (MAYSI-2) – A standardized, reliable, 52-item, true-false method for screening all youth 12 to 17 years of age entering the juvenile justice system, in order to identify potential mental health problems in need of immediate attention. The MAYSI-2 does not require administration by a QMHP.

Mental Health Appraisal (also known as “assessment” in Performance Based Standards) – the systematic review of a youth’s prior mental health and substance abuse records, history of inpatient and outpatient treatment, history of abuse, potential for violence, suicide risk and educational history. In addition, a youth’s current mental status will be assessed and referral for a mental health evaluation, as indicated. The Mental Health appraisal is completed, by a Qualified Mental Health Professional, on all newly admitted, inter and intra transfer youths within seven (7) days of admission to an OJJ secure care facility. The QMHP will not only review available records, but will interview the youth and the youth’s parent or guardian to obtain all relevant information for treatment.

Mental Health Evaluation -- a comprehensive evaluation by a qualified mental health Professional on all youth entering the facility. The evaluation includes review of the mental health screening and appraisal data; clinical interview; review of the youth's mental health history; and collection and review of additional data from individual diagnostic tests, such as personality, intelligence, coping, substance abuse and psychosexual, etc. The mental health evaluation is completed by the psychologist within 30 days of a youth's admission to an OJJ secure care facility.

Mental Health Screening – A screening conducted by a Qualified Mental Health Professional, that uses empirically-validated and evidence based test, tools and psychological screening instruments to identify current mental health symptoms and status. The mental health screening does not diagnose or identify causes of particular mental health conditions. The screening takes place during the intake process within one (1) hour of admission to the facility and is applied to all youth entering an OJJ secure care facility and inter and intra system transfers.

Mental Health Treatment – An ongoing multi-disciplinary approach which prioritizes, tracks and addresses a youth's strengths, risks, and needs identified in the Mental Health Evaluation. The treatment regimen includes health, behavioral health, educational/vocational, recreation, daily living, family and aftercare strategies, resources and therapies.

Multidisciplinary Team (MDT) Staffing – A multidisciplinary treatment team which meets quarterly and consists of representatives from at least three disciplines, (e.g., treatment, custody, education, mental health or medical, probation and parole) responsible for developing comprehensive case plans for treating a youth's specific needs and to determine a youth's suitability for placement to, removal from, or progress in a Program.

Probation and Parole Officer/Juvenile (PPO/J) - PPO/J's assist youth and families in locating, accessing and coordinating networks of support to address needs. PPO/J's shall coordinate case management services in accordance with need assessments, as well as monitor, compliance with the services provided and court ordered requirement while the youth is in the custody or under the supervision of YS.

Qualified Mental Health Professional (QMHP) – Contracted Mental Health professionals who perform clinical duties for mentally ill patients, i.e. licensed counselors, social workers, psychiatrists, psychologists and nurses, in accordance with each health care professional's scope of training and applicable licensing, certification, and regulatory requirements. Primary duties are to provide mental health services to youth commensurate with their respective levels of education, experience, training and credentials.

Reintegration/Transition Plan - A plan prepared by the youth's assigned field or secure care Case Manager, and entered into JETS, which identifies follow-up services needed by the youth upon release to facilitate a successful transition and reintegration back into the community, pursuant to YS Policy No. B.2.1. The plan is coordinated with Community Based Services Probation and Parole Officers and shall be used when completing an aftercare plan.

Structured Assessment of Violence Risk in Youth (SAVRY) - An evidence-based assessment designed to assist professionals in making judgments about a youth's needs for case planning. The SAVRY utilizes a structured, professional judgement method of assessment, meaning that the individual completing the assessment rates the youth on a number of evidence-based risk factors and then weighs all the information to come to a final judgement that the youth has a Low, Moderate or High Summary Risk Rating for future reoffending. (Refer to YS Policy No. B.2.14)

Substance Abuse Subtle Screening Inventory-A2 (SASSI-A2) – The “Adolescent Substance Abuse Subtle Screening Inventory - A2” identifies high or low probability of substance dependence and substance abuse disorders for clients 12 to 18 years of age. The SASSI-A2 also provides clinical insight into family and social risk factors, level of defensive responding, and consequences of substance misuse.

Transmittal Memorandum – A pre-prepared memorandum that is in place at the Secure Care facilities and is used by staff of YS and CHP as a component of the “Mental Health Evaluation Report” to record assessments of treatment needs of a youth. The memorandum shall be stamped “CONFIDENTIAL”.

Trauma System Checklist for Children (TSCC)/Trauma Symptom Inventory-2 (TSI-2) – A brief self-report inventory which assesses post traumatic stress in 8 (eight) to 16 year olds (TSCC), and 17 year olds and older (TSI-2), who have experienced traumatic events such as physical or sexual abuse, major loss, natural disaster, or violence.

Wechsler Abbreviated Scale of Intelligence-II (WASI-II) – A reliable, brief measure of intellectual ability in a variety of settings, which is suitable for six (6) through 89 years of age.

V. POLICY:

It is the Deputy Secretary's policy that all youth entering secure care custody shall receive an initial mental health screening conducted by a QMHP or a qualified staff person within one (1) hour of arrival to the facility. The initial mental health screening addresses the items required for the initial mental health screening, as well as the mental health appraisal.

Necessary referrals for additional mental health and psychiatric care shall be made based on the results of the evaluation. Recommendations shall also be made if concern exists regarding a potential for self-harm, or the youth's ability to adequately manage the intake placement, due to the presence of mental health issues.

All youth, regardless of findings from the initial mental health screening and appraisal data, shall undergo a mental health evaluation, to be conducted by a licensed Psychologist and completed within 30 days of arrival to the secure care facility; however, it shall be completed within 14 days of arrival if the youth is assigned to the Fast Track Program (refer to Y. S. Policy No. B.2.12).

VI. PROCEDURES:

A. Mental Health Screening

During the admission process, a QMHP or a qualified staff person shall conduct an initial mental health screening within one (1) hour of the youth's arrival at the facility utilizing the CHP's "Initial Mental Health Screening" form. The mental health screening shall follow the policy and procedures enumerated in OJJ/WP Joint Policy D-2, Mental Health Screen.

B. Mental Health Appraisal

The Mental Health Appraisal shall be conducted by a QMHP within seven (7) days after arrival for all youth who are newly admitted or inter- and intra-system transfers and shall follow the policy and procedures enumerated in OJJ/WP Joint Policy D-3, Mental Health Appraisal.

C. Initial Classification Multidisciplinary Team Staffing

1. An initial classification staffing shall be held within seven (7) working days of the youth's admission to the facility (refer to YS Policy No. B.2.2).

The team shall consist of the following:

- a. The youth's assigned Case Manager;
- b. The Group Leader;
- c. A JJS from the youth's assigned housing unit;
- d. CHP medical/QMHP (if applicable);
- e. Education;
- f. Parent/guardian;
- g. Youth's assigned Probation and Parole Officer/Juvenile (PPO/J); and,
- h. Other applicable staff.

Should the family and/or PPO/J be unable to travel to the facility, a teleconference or video-conference may be arranged.

2. Prior to the youth's transfer from the Direct Admission Unit to the youth's assigned housing unit, the youth's initial "Reintegration/Transition Plan" (refer to YS Policy Nos. B.2.1 and B.2.2) shall be completed and entered in JETS.

The youth's assigned Case Manager shall review and update the Reintegration/Transition Plan specific to the needs of the youth within seven (7) days of receipt of the CHP's Psychological Evaluation.

D. Mental Health Evaluation

Within 30 days of admission (14 days for youth admitted to the Fast Track Program), a complete mental health evaluation shall be completed for each youth in the OJJ secure care facility. The CHP Psychologist shall review all records, conduct clinical interviews, and administer psychological tests and inventories in order to develop a comprehensive psychological evaluation on all youth to guide treatment needs.

E Mental Health Treatment

Mental Health Treatment of all youth in OJJ secure care facilities shall follow the policy and procedures enumerated in OJJ/WP Joint Policy D-5, Mental Health Treatment Plans.

F. Immediate Referrals for Treatment

1. If the youth presents concerns regarding an imminent risk of self-harm or psychological deterioration at any time during the screening, appraisal or evaluation process, the QMHP shall initiate the following suicide prevention protocol pursuant to YS Policy No. B.6.7, or other emergency intervention as necessary:
 - a. A psychiatry consultation shall be obtained;
 - b. CHP's nursing personnel shall be notified of the clinical need to initiate suicide prevention protocol; and
 - c. Appropriate custody and other applicable facility staff shall be notified of the clinical need to initiate suicide prevention protocol.
2. All necessary referrals shall be completed at the time of the screening, appraisal and evaluation as appropriate, which shall include referrals to the next available psychiatry clinic if the youth has psychiatric treatment needs, and/or the need for continuation of psychotropic medication.
3. Members of the Multidisciplinary Team, including the Admissions Treatment Coordinator, and the CHP Mental Health Coordinator shall provide input for appropriate placement for the youth.

Previous Regulation/Policy Number: B.6.5
Previous Effective Date: 09/29/2021
Attachments/References: