

Juvenile Rehabilitation Division Policy

4.10 Case Management, Treatment, and Future Planning Responsibilities

Original Date: February 1, 1999
Revised Date: November 15, 2023
Sunset Review Date: November 15, 2027
Approved by: Frank Ordway, DCYF Chief of Staff

Purpose

The purpose of this policy is to provide guidance to determine treatment, services, and reentry supports based on Risk, Need, and Responsivity (RNR) principles to support the health, education, resilience, and successful transition to adulthood of young people across the JR continuum of care.

Scope

This policy applies to all JR employees and supervisors working directly with young people in the custody and care of JR.

Laws

RCW 13.40.210 Setting of release date—Administrative release authorized, when—Parole program, revocation, or modification of, scope—Intensive supervision program—Parole officer's right of arrest

Policy

1. Residential Programs: Counseling, Service Coordination, and Reentry Responsibilities
 - a. For all individuals on their caseload, Residential Counselors will:
 - i. Conduct counseling and service coordination duties within the established timelines, as detailed in the following procedures:
 1. Conducting Initial Counseling/Case Management
 2. Ongoing Case Management
 3. Structuring and Documenting Counseling/Case Management
 - ii. Consult regularly with DBT Specialists (Institution), Aftercare Liaisons (Community Facility), and other specialized treatment providers to support behavioral health treatment transition to community facilities, and aftercare treatment and services.
 - iii. Actively contribute to the residential therapeutic milieu in the unit or facility following the principles and strategies in DBT Standard 3.
 - iv. Participate in Future Planning Meetings (FPM's) following Future Planning Meeting Guidelines, including:
 1. Develop, update and distribute Future Plans using the Future Plan Guidelines.
 2. Document progress using the Future Plan Progress Note Documentation

2. Community Programs: Aftercare Support, Service Coordination, and Reentry Responsibilities
 - a. JR regional and residential staff must communicate with each other, the young person, and their family/natural supports to coordinate a reentry process informed by reentry plans, risk and need assessments, and other treatment reports.
 - b. JR Regional staff must participate in Future Planning Meetings to help prepare young people for release to the community, follow Community Case Responsibilities for JR Youth in Residence, and:
 - i. Conduct in-reach, at least quarterly, with young people to build a relationship and understand their reentry goals with at least one contact 45-60 days prior to release.
 - ii. Contact young peoples' families and natural supports to engage them in the future planning process and coordinate with residential staff.
 - iii. Communicate with residential staff to make community connections and referrals.
 - c. For all young people releasing from residential placement, JR Regional Staff work as a team to provide community support including:
 - i. Therapeutic support for those with a parole aftercare obligation; as indicated in Community Counselors Working with their Assigned Residential Caseloads and Community Counselors Working with Young People on Parole Aftercare.
 - ii. Connections to community-based services and supports for all young people releasing without an obligation to JR Parole Aftercare, Juvenile Probation, Department of Corrections, or moving out of state, as indicated in Community Support for All Youth FAQ

3. Specialized Treatment and Resource Coordination
 - a. Coordinating Treatment and Services:
 - i. Counselors, specialists, coordinators, and other designated staff will connect young people with additional programs and specialized treatment services based on the Integrated Developmental Evaluation and Assessment (IDEA) and other behavioral health screens and assessments.
 - b. Providing Specialized Treatment:
 - i. Program Specialists, Clinicians, JR Consultants, and other designees will deliver specialized treatment to address needs identified in the IDEA and other behavioral health screens and assessments following applicable standards and best practices.
 - ii. DBT Specialists will consult with clinical and program staff to determine treatment levels for all youth at intake and modify levels as described in Establishing and Modifying DBT Treatment Levels.
 - iii. DBT Specialists will provide treatment to young people on DBT Level 1 and Consultation services for young people on DBT Level 2 based on the following DBT Standards:
 1. Individual Counseling
 2. Consultation Team and Didactics
 3. Milieu Management
 4. Skills Groups
 5. Skills Group Graduation
 - iv. Mental Health Clinicians and Substance Use Dependence Professionals will provide specialized treatment based on procedure Providing Mental Health, Substance Use Dependence and Co-occurring Disorder Treatment Services.

- c. Documenting Client Activity and Service Tracking (CAST):
 - i. Specialists, Coordinators, and designees follow the CAST Grid and CAST FAQs to document activities and services in ACT.
 - ii. CAST QA is outlined in the CAST Supervisor Addendum and reviewed in Service Plan Report.
- 4. Supervisors will follow guidance in Supervising Program Personnel to oversee, support, and document adherence to this policy.
 - a. Managers will regularly review supervisor oversight for adherence to the guidance listed in item 4.
- 5. Quality Assurance (QA) and Continuous Quality Improvement (CQI) activities for JR program and services will be conducted according to individual plans.

Forms

JR Release Checklist DCYF 21-005

JR Reentry Essential Documents Checklist DCYF 27-173

Resources

CAST FAQs

CAST Grid

CAST Supervisor Addendum

CAST Training Material

Community Counselors Working with their Assigned Residential Caseloads

Community Counselors Working with Young People on Parole Aftercare

Community Support for All Youth FAQ - STAFF

Conducting Initial Counseling/Case Management

DCYF AP 11.04 Developing and Training Employees

DCYF AP 11.05 Employee Performance Evaluations

Establishing and Modifying DBT Treatment Levels.

Future Plan Guidelines

Future Plan Progress Note Documentation

Future Planning Meeting Guidelines

JR Policy Definitions

Ongoing Case Management

Providing Mental Health, Substance Use Dependence and Co-Occurring Disorder Treatment Services.

Structuring and Documenting Counseling/Case Management

Supervising Program Personnel