



JUVENILE DRUG TREATMENT COURT GUIDELINES

CASE MANAGEMENT/PLANNING FOR YOUTH & FAMILIES

DISCLAIMER

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MODULE OBJECTIVES

- Describe the research behind the risk/needs/responsivity model and why application is useful with JDTC populations.
- Discuss types of assessments and screening tools and how such tools should be utilized in practice to drive case outcomes.
- Learn how to develop case and treatment plans that best meet the needs of youth and families

ASSESSMENT AND CASE MANAGEMENT

Guideline 4.1

Needs assessments should include information for each participant on:

- Use of alcohol or other drugs.
- Criminogenic needs.
- Mental health needs.
- History of abuse or other traumatic experiences.
- Well-being needs and strengths.
- Parental drug use, parental mental health needs, and parenting skills.

ASSESSMENT AND CASE MANAGEMENT

Guideline 4.2

Case management and treatment plans should be individualized and culturally appropriate, based on an assessment of the youth's and family's needs.



**CREATING
EFFECTIVE CASE
PLANS FOR
YOUTH AND
FAMILIES**

GUIDELINE 4.1

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RISK/NEEDS/RESPONSIVITY: SCIENTIFIC REVIEW

- Risk: Who to treat
- Need: What to treat
- Responsivity: How to treat
 - Because criminal behavior can be predicted, services should be matched to each person's risk of reoffending
 - To reduce recidivism: Higher risk youth need additional services, lower risk youth need little to no intervention



RISK/NEEDS/RESPONSIVITY: SCIENTIFIC REVIEW

“The Central Eight”

The Big Four (Tier I)

- antisocial personality traits, thinking, and attitudes
- criminal associations

Tier II

- Substance use disorders
- Family/marital relationships
- Education and employment
- Positive leisure activities



Source: Andrews & Bonta (2010) *The Psychology of Criminal Conduct*

RISK

- Decades of research has identified both static and dynamic risk factors that can be used to understand and predict criminal behavior.
- Tools generally use static items (criminal history, warrants) to evaluate for risk

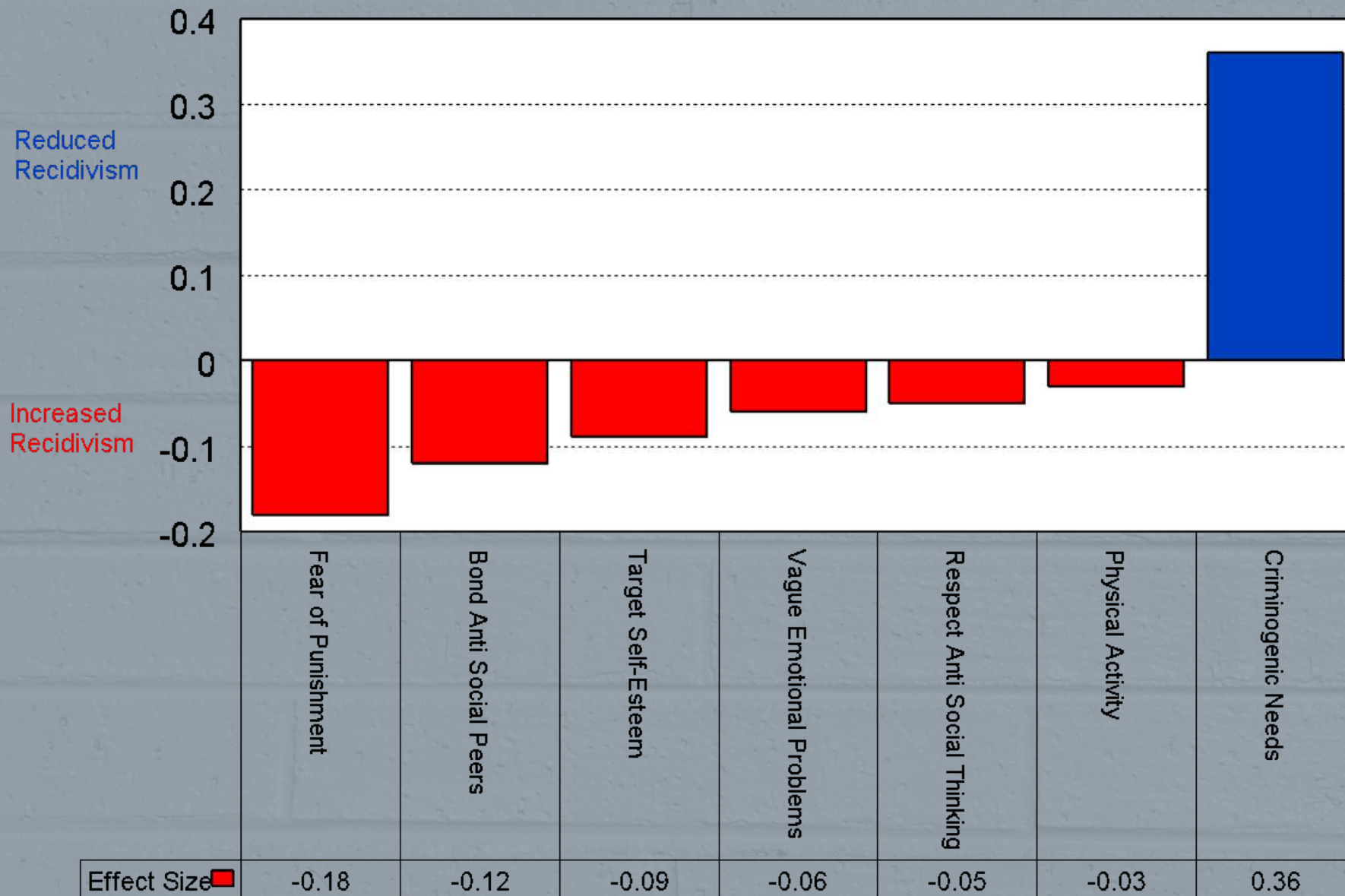
Source: Andrews & Bonta (2010) *The Psychology of Criminal Conduct*

CRIMINOGENIC NEEDS

- Most Effective Treatment Models
 - Targeting the “Big Four”
 - Family based approaches
- Use of evidence-based treatment approaches
- Individualize treatment matching to meet developmental and cultural needs.



Needs Targeted & Correlation with Effect Size for Youthful Offenders



RESPONSIVITY PRINCIPLE

- Service delivery should be responsive to the learning style and capabilities of each individual youth
- What protective factors does the youth possess that will assist with participation in and completion of services?



GUIDELINE 4.1

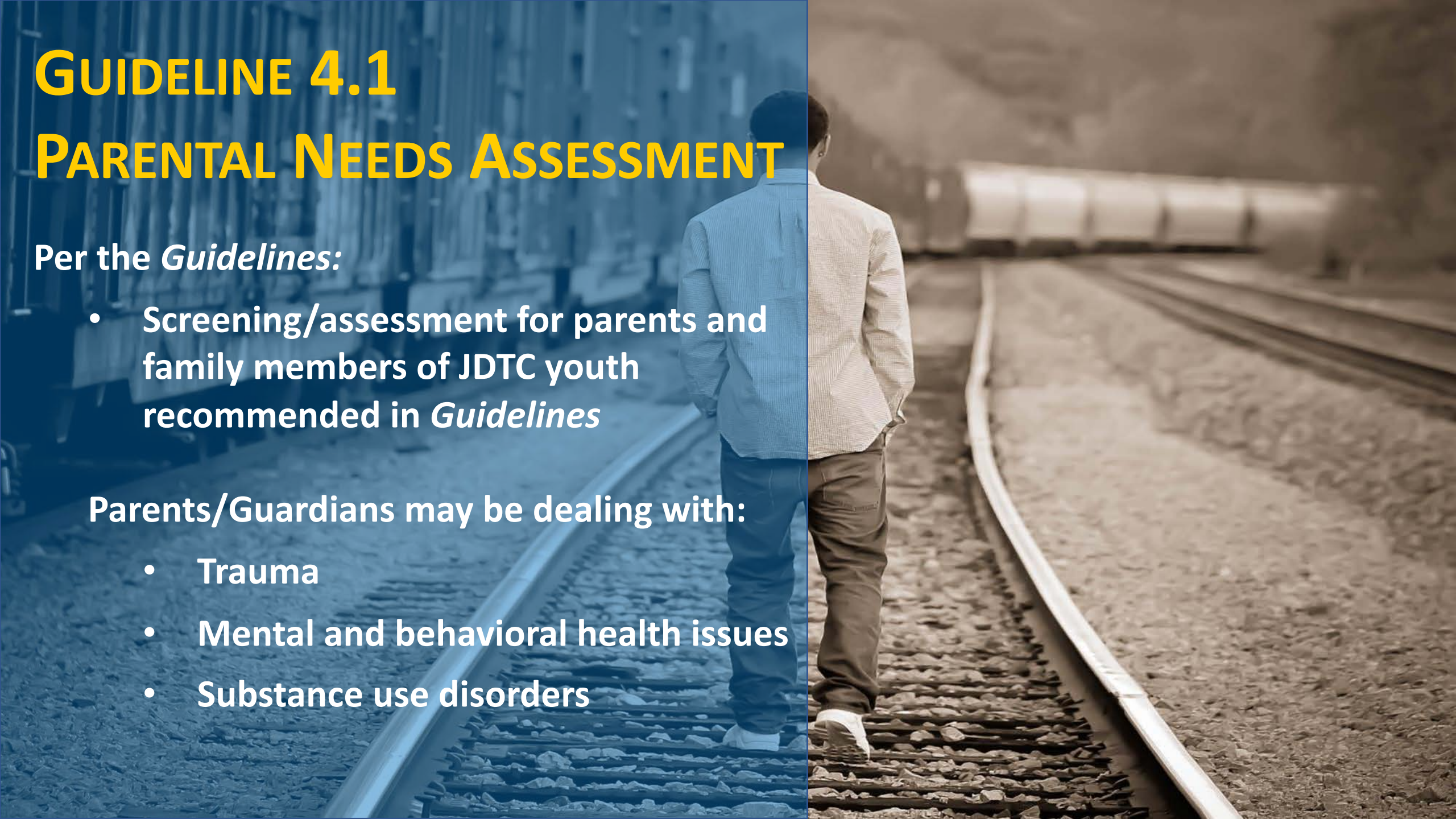
PARENTAL NEEDS ASSESSMENT

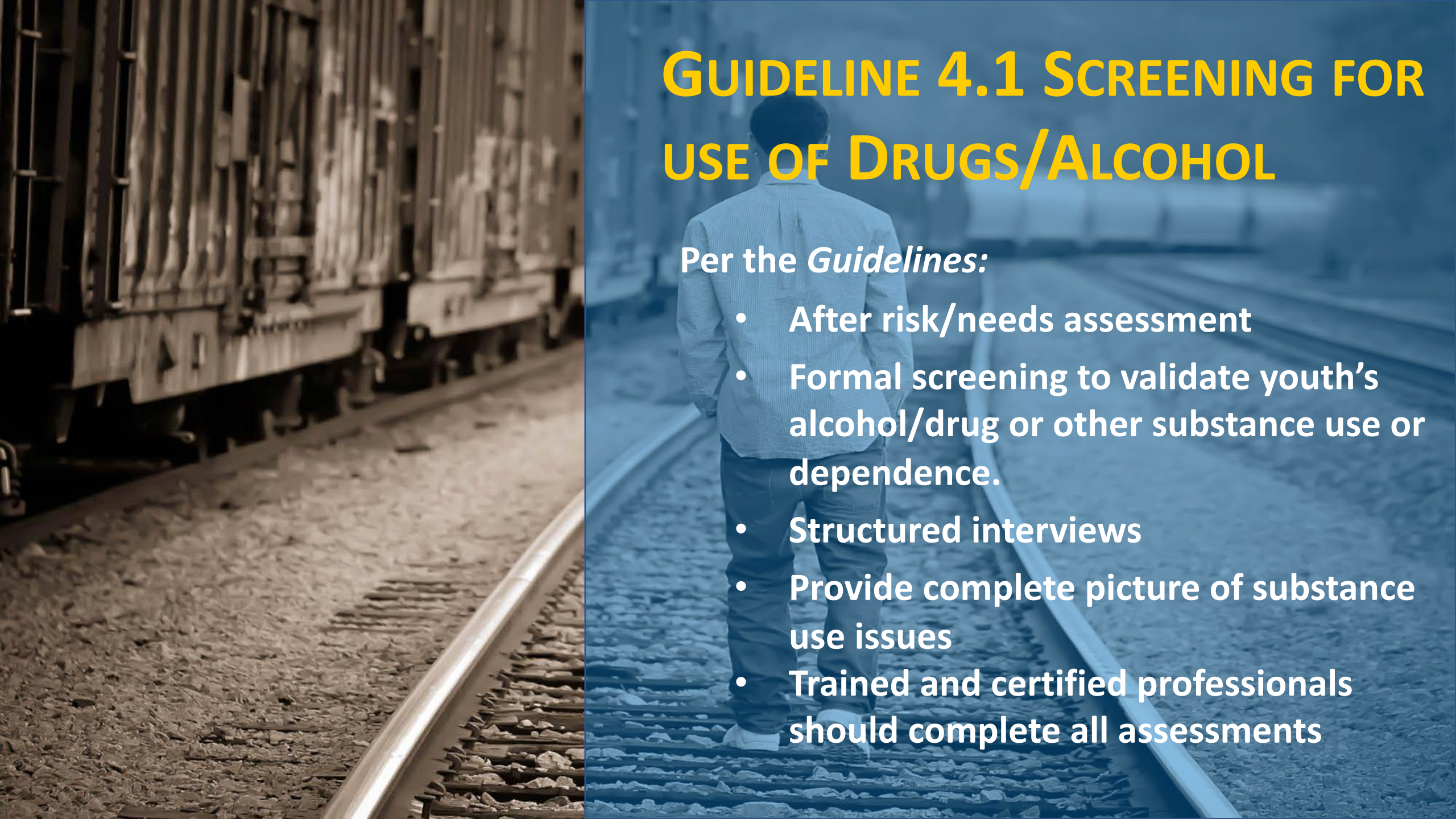
Per the *Guidelines*:

- Screening/assessment for parents and family members of JDTC youth recommended in *Guidelines*

Parents/Guardians may be dealing with:

- Trauma
- Mental and behavioral health issues
- Substance use disorders



A person in a light-colored shirt and dark pants stands with their back to the camera on a set of train tracks. To the left, a train car is visible. The right side of the image is overlaid with a blue semi-transparent panel containing text.

GUIDELINE 4.1 SCREENING FOR USE OF DRUGS/ALCOHOL

Per the *Guidelines*:

- After risk/needs assessment
- Formal screening to validate youth's alcohol/drug or other substance use or dependence.
- Structured interviews
- Provide complete picture of substance use issues
- Trained and certified professionals should complete all assessments

GUIDELINE 4.2

INDIVIDUALIZED CASE MANAGEMENT & TREATMENT PLANS

- **Identify psychosocial needs**
- **Focus on strengths**
- **Assess motivation for treatment**
- **Utilize multiple treatment components/options to meet needs of youth**
- **Outline intensity of services**
- **Use flexible approach, while ensuring fidelity**

CASE MANAGEMENT VS CASE PLANNING

Case management:

- On-going
- Single point of contact that advocates for participant
- Comprehensive & flexible
- Partnering with community based providers & schools
- Based on assessment of risk/need
- Engages youth and families
- Reflected in a case plan that matches to needs/goals
 - Course: CSAT (2015)

CASE MANAGEMENT VS CASE PLANNING

Case Planning:

- **Focused on goals**
- **Detailed steps for how to reach goals**
- **Time-bound**
- **Written document**
- **Informed by youth and family = agreement**
- **Tied to risk/needs assessment**

CRAFTING THE CASE PLAN

Clear expectations/no surprises

Small, time-limited goals that are agreed upon by all parties

Use OARS technique:

- Open-ended questions;
- Affirmations;
- Reflection
- Summarizing

Reviewing and rewarding results

OFFICE/FIELD INTERACTION

Per the *Guidelines*: Interactions youth should focus less on detecting violations, and instead focus finding opportunities to praise on goal attainment.

- Check-in (building rapport)
- Review weekly goals
- Identify successes or obstacles
- Determine if new goals are needed/desired
- Review court conditions
- Provide written materials/instructions
- Close

- Source: The Carey Group (2010)

CASE PLAN EXERCISE

- Review case plan scenario
- Working in groups of 4-5 develop/write-up a goals attached to a case plan for the youth and family.
- Role play the following positions:
 - Probation
 - Youth
 - Parent



PRACTICE IMPLICATIONS

- Review your current policies and procedures
- Collect information on all assessment & screening tools
- Analyze current case management/planning process flow
- Who can lead this effort?
- What are the strengths of the team in following the Guidelines related to topic? What improvements are needed?
- Timeline for changes?



SUMMARY AND QUESTIONS

- JDTCs should adopt research informed case management that takes into account participants' special needs
- Adoption of correct assessment tools and screeners important for program operations.
- Case plans should allow for flexibility in the application of case management practices.
- The case plan is developed between the professional, the participant, and his or her family and includes services delivered in the participant's community.



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