Mental Health and Juvenile Justice: Facing the Challenge in Washoe County

> Judge Frances Doherty 2nd Judicial District Washoe County

Mental Health Difficulties are the <u>Rule</u> not the Exception for Youth in the Washoe County Juvenile Justice System

% of Screenings Indicating
Significant Mental
Health/Substance Abuse Concerns
For Detained Youth

64%

% of Screenings Indicating Significant Concerns Regarding Suicide

20%

Number of Youth in Wittenberg Hall Who Are on 5 Minute Checks Due to Current/Past Suicidal Statements or Behavior

19 Out of 54

Number of Mental Health and Substance Abuse Evaluations Performed in One Year's Time

1912

EXHIBIT J Health Care

X Entire document provided.

Document consists of 6 pages.

Due to size limitations, pages ____ provided. A copy of the complete document is available through the Research Library (775/684-6827) or e-mail <u>library@lcb.state.nv.us</u>). Meeting Date 1/23/08

Probationers Placed in Out of Home Mental Health Treatment

66

Human Faces Behind the Numbers

.*These descriptions are composites drawing from many individuals in order to protect confidentiality

A 17 year old male with Bipolar and Intermittent Explosive Disorder is detained after assaulting a staff member at an out of state RTC where he has resided for the last 18 months. He is on 10 different types of medications. He spends 60 days in detention because no other facilities will take him. He is too impaired for correctional placement. He is ultimately placed with adult mental health 2 days after he spends his 18th birthday in detention.

A 16 year old girl with depression and learning disabilities is detained for a probation violation after running away from home for 6 weeks. She has taken Meth every day for the last week. She sleeps for the bulk of her first 3 days in detention. She is afraid the detention workers are in league with the DEA and has auditory hallucinations. She picks at her skin to the point of bleeding and reports suicidal ideation. She divulges that she has been raped by a drug dealer. She is hospitalized for a week and returns to detention for 20 days before a bed opens up in a locked RTC.

A 12 year old boy with bipolar disorder and PTSD has been arrested for tantrums at school during which he threatened his Special Ed teacher with a pencil and threw a computer across the room. He has been arrested 12 times in the past. He spends 30 days in detention awaiting placement in an out of state treatment center. He is taking 3 different psychotropic medications. He becomes close friends with a 16 year old gang member. His mother visits him a total of 3 times during his stay.

Meeting the Mental Health
Challenge at Washoe County
Department of Juvenile
Services

Contract Treatment Services

- Emergency Mental Health Evaluations, Psychiatric Evaluations, Psychological Evaluations, and Substance Abuse Evaluations
- Purchased services for early intervention mental health counseling
- Purchased services for a continuum of substance abuse treatment services

Delinquency-Specific Evidenced-Based Treatment

- Aggression Replacement Training
- Thinking for a Change
- Multidimensional Family Therapy
- Juvenile Drug Court

Referrals to Public and Private Providers

- Referrals to State Mental Health Services:
 Northern Nevada Child and Adolescent
 Services
- Accessing state supported treatment for Juvenile Sex Offenders
- Referral to third party providers if the youth is covered under insurance
- Referral to Medicaid and Nevada Check Up providers for covered youth

Referrals to Public and Private Providers

- Referrals to state granted substance abuse providers: Substance Abuse Prevention and Treatment Agency
- Referral to private and not for profit substance abuse treatment providers

Community Collaboration

- Washoe County Mental Health Consortium
- Team Meetings with Washoe County Social Services
- Close Collaboration with state and private sector mental health and substance abuse providers
- Intensive Service Coordination with Washoe County School District Special Education, the Children's Cabinet, and School Police

Community Collaboration

- Collaboratively Served Work Group with Sierra Regional Center
- Juvenile Sex Offender Unit works collaboratively with public and private specialists to assess and treat juveniles who commit sex offenses.
- Collaborative Efforts with the Children's Cabinet for Case Management, Truancy, Treatment, and Educational Transition

Continued Challenges Facing Seriously Emotionally Disturbed Juvenile Justice Involved Youth

The Ideal System of Care

Juvenile justice involved youth with Serious Emotional Disturbance are best served with intensive service coordination in the wraparound model in which a service coordinator works with the family to identify and coordinate evidence-based treatment and community supports to keep youth in their home community when possible, while successfully treating their mental health conditions and insuring community safety

Framing the Challenge

- Intensive Service Coordination such as Wraparound Services are only available to youth in the Child Protection System.
- The complete array of services spelled out in Nevada Medicaid's Behavioral Health Care Redesign is only provided to youth with Fee-for-Service Medicaid. Most youth in the juvenile justice system are not eligible for this type of Medicaid while living at home.

Framing the Challenge

- Managed Care Medicaid, Nevada Checkup, and state mental health services do not provide for wraparound services and the full array of service in the Behavioral Health Care Redesign.
- There is an over reliance on restrictive and expensive locked residential treatment centers in and out of state as opposed to community-based treatment.

Framing the Challenge

- Detained youth who access Medicaid for placement in out of home care, lose this coverage when they leave facilities which makes follow-up tenuous and increases the risk for return to out of home care.
- Children can move between Nevada Checkup, Fee for Service Medicaid, Managed Care Medicaid, and medical indigency, leading to disruption of services and changes in providers.

Future Directions

- Support state and local efforts to restructure the fiscal support for medically indigent youth and youth covered by Managed Care Medicaid and Nevada Checkup to make the Behavioral Health Care Redesign available to SED youth in the juvenile justice system.
- Support DCFS in pursuing federal grants to develop a system of care for Seriously Emotionally Disturbed Juvenile justice involved youth.

Future Directions

Providing a comprehensive system of care for Seriously Emotionally Disturbed youth in the Juvenile Justice system promotes community-based treatment as opposed to residential treatment, reduces the use of secure detention as a means of accessing mental health treatment for youth, provides effective treatment, and insures community safety.