



# OREGON YOUTH AUTHORITY



## Policy Statement

### Part III – Youth Services (Community)

*Subject*

**Alcohol and Drug Screening, Assessment, and Treatment in Community Settings**

*Section – Policy Number:*

**C: Case Planning and Review – 3.1**

*Supersedes:*

**N/A**

*Effective Date:*

**10/25/2010**

*Date of Last*

*Review:*

**10/31/2014**

**Related Standards and References:**

- [ORS 182.515](#) –182.525 (Evidence-based Programs)
- [ORS 419C.486](#) (Consideration of recommendations of committing court; case planning)
- [ORS 420A.125](#) (Youth offenders; intakes assessments; reformation; placement)
- [ORS 420A.135](#) Secure regional youth facilities
- [ORS 420A.145](#) Regional youth accountability camps
- [ORS 420A.155](#) Regional residential academies
- [OAR 309-032](#) (Community Treatment and Support Services)
- Diagnostic and Statistic Manual 5 TR ([DSM 5](#))
- OYA policy: I-A-11.0 (Assessment, Multidisciplinary Teams, and Case Planning)
- OYA forms: JJIS YA 3002CP (Comprehensive Case Plan)  
JJIS (Risk/Needs Assessment)  
YA 4465 (JJIS Assessment Offender AOD Diagnostic)

**Related Procedures:**

- None

**Policy Owner:**

Treatment Services Director

**Approved:**

Colette S. Peters, Director

#### I. PURPOSE:

This policy outlines the type of drug and alcohol assessment, treatment curriculum and treatment dosage OYA staff may refer OYA youth offenders to in community settings.

## II. POLICY DEFINITIONS:

**AOD:** Alcohol or other drug

**AOD treatment:** Interventions that include evidence-based curricula to treat alcohol and other drug addictions and other program supports based on the OYA Principles of Effective Interventions. Treatment will be based on individual assessment. Treatment will vary in dosage and duration based on assessed need.

**Assessment:** A process of evaluating, diagnosing, and determining an appropriate level of intervention based on information obtained from the client in a personal interview and from other sources, which may include substance abuse screening and assessment instruments.

**Case Plan:** A formal plan with prescribed interventions and documentation requirements and a tool to assist staff in managing cases, setting goals and reviewing youths' interventions and progress. A Case Plan constitutes and fulfills the requirements of the Reformation Plan as defined in ORS 420A.005, 420A.125 and 420A.010 and is created and maintained in the statewide Juvenile Justice Information System (JJIS).

**Community AOD Programs:** AOD treatment provided in a community-based setting (e.g. community mental health centers, private practice) that varies in frequency, duration, and intensity.

## III. POLICY:

OYA's work with youth offenders includes protecting the public by ensuring youth offender accountability, promoting change, developing and improving skills, and reducing recidivism. Consistent with best practice, assessment identifies key criminogenic risks and protective factors. Psychological, sociological, cultural, and other factors are considered during assessment in addition to underlying reasons for criminal and problem behaviors. An essential part of the assessment process is to appropriately safeguard against making inappropriate referrals, duplicating, or unnecessarily restricting placements.

Youth offender alcohol and drug problems are often related to their criminal activity. Youth offenders with untreated alcohol and drug problems have been found to return to alcohol and drug use, and criminal activity, at higher rates than those who have been treated. Providing effective alcohol and drug treatment is difficult. Adolescents appear to be at particularly high risk for relapse, even after treatment.

The relationship between juvenile alcohol and drug use, treatment, and crime is complex. Programmatic efforts to break the juvenile drug-crime cycle must be based on knowledge gained from past work and research. This policy defines a continuum of evidence-based response to the needs of youth offenders who have alcohol or drug involvement in their law-breaking behavior.

#### IV. GENERAL STANDARDS:

##### A. Screening and Assessment

Youth offenders must be screened for alcohol or drug problems upon commitment to OYA community supervision. The OYA Risk/Needs Assessment (RNA) instrument, administered in conjunction with other assessments that meet American Society of Addiction Medicine (ASAM) criteria used to determine placement and case planning, determines whether further assessment is needed.

1. The RNA must be completed on each youth offender by a trained OYA staff member and is based on all available information (e.g. self-report, family report, police reports, previous assessments, supervision reports).
  - a) A youth offender scoring 3 or more on either the Alcohol and Drug History (Section 13) or Current Alcohol and Drug History (Section 14) risk factors must be referred for a screening or assessment of the alcohol and drug problem. The screening or assessment tool must meet ASAM criteria.
  - b) Current Alcohol and Drug History (Section 14) must be scored reframing the question to “Alcohol and drug use during the four weeks prior to lockup” for those youth offenders who have been incarcerated prior to their screenings.
2. Medicaid-eligible youth offenders screened as in need of an AOD assessment will be referred by their juvenile parole/probation officers (JPPO) to community AOD programs contracted with the Division of Medical Assistance Programs (DMAP), or with an Oregon Health Plan (OHP) prepaid health plan.

Non-Medicaid-eligible youth offenders will be referred to OYA-contracted AOD counselors or programs. A referral for assessment will occur as soon as possible after screening and as part of treatment referral.
3. OYA contracts with providers who conduct alcohol and drug assessments must require credentials of Certified Alcohol and Drug Counselor in accordance with Oregon Health Authority (OHA), Addictions and Mental Health Division rules.

##### B. Treatment Matching

Employing evidence-based practices associated with the OYA Principles of Effective Interventions, high-risk youth offenders must be prioritized for services. The level of service assignment must match the youth offender’s presented level of criminal risk related to alcohol or drug abuse.

1. JPPOs must match youth offenders to community treatment intensity according to the AOD assessment.
2. JPPOs must prioritize services to high risk youth offenders and match the level of service to the individual's level of risk to re-offend.
3. JPPOs must refer youth offenders to community programs that emphasize evidence-based curricula focused on criminogenic risk and substance abuse. Treatment services must emphasize treatment engagement and retention as reflected in the treatment referral.
4. AOD treatment referrals for individualized services must include the following documents and information:
  - a) OYA Case Plan;
  - b) Specific treatment goals to be addressed (interventions, services);
  - c) Previous evaluations and assessments (if available);
  - d) Previous treatment records (if available); and
  - e) Educational information (if available).
5. JPPOs may refer a youth offender for a reassessment or re-screening if additional information becomes available. A youth offender's priority group assignment for alcohol and drug treatment may change based on the new information.
6. JPPOs must ensure youth offenders' case plans reflect AOD treatment outcomes, and AOD treatment goals are reviewed and updated during regularly scheduled Multidisciplinary (MDT) meetings.

C. Treatment

1. OYA contracts with providers must require specific credentials and training experience in accordance with OHA rules.

It is recommended that the OYA contracted AOD treatment be integrated with additional evidence-based interventions to further address criminal attitudes, beliefs, and peer associations.

2. JPPOs must work closely with community treatment providers to improve treatment outcomes by monitoring the offender's relapse prevention plan, case plan, and reviewing the discharge summary.

**V. LOCAL OPERATING PROCEDURE or PROTOCOL REQUIRED: NO**