OREGON YOUTH AUTHORITY

Policy Statement

II-E-1.8 - Case Planning

Approved

Bob Jester, Director

Effective: December 10, 2004

Supersedes:

Interpretation: Program Office

REFERENCE

ORS 419C.486 (Consideration of recommendations of committing court; case planning)
ORS 420A.125 (Youth offenders; intake assessments; reformation; placement)
ORS 182.515 – 182.525 (Evidence-based programs)
Performance-based Standards (PbS), *Juvenile Correction and Detention Facilities* Programming

OYA forms: YA 3002 (Reformation Plan)
JJIS YA 3002CP (Comprehensive Case Plan)
JJIS YA 3003CP (Case Plan Review)
JJIS YA 3004CP (Referral Case Plan)
JJIS YA 3005CP (Youth and Family Case Plan)
JJIS YA 3006CP (Youth and Family Case Plan –DOC Youth)
JJIS YA 3007CP (Short Term Goal List)
JJIS YA 3008CP (Court Report-Full Report)
YA 3009CP (Court Report-Probation Violation)
YA 3011CP (CRB Case Review Data Sheet)
JJIS YA 3012CP (CRB Report)
Juvenile Parole Agreement
JJIS YA 4099CP (DOC Quarterly Review Report)
JJIS YA 4104CP (Agency Case Review)
JJIS YA 4105CP (DOC Return Request Compliant Transfer or Release)
JJIS YA 4106CP (DOC Return Request Non-Compliant)
JJIS YA 4107CP (ACR Findings and Orders)
JJIS Risk Pre-Screen
JJIS Risk/Needs Assessment
YA 4409 Mental Status Assessment
YA 4408 Initial Health Screening

DEFINITIONS

Case Plan: A Case Plan is a formal plan with prescribed interventions and documentation requirements and is a tool to assist staff in managing cases, setting

goals and reviewing offenders' 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.

Administrative Review Board (ARB): The ARB is a committee that reviews and is responsible for all major decisions concerning an offender who resides in an OYA close custody facility. The ARB approves the initial placement of each offender, length of stay, transfer to other levels of custody, and initial placement on parole, foster care, or to the community.

Multidisciplinary Team (MDT): An identified group of persons responsible for developing a comprehensive case plan for each offender. The MDT process is a collaborative effort between OYA staff, families and service providers. The MDT is responsible for ensuring that culturally competent and gender-specific case plans are developed, reviewed and revised.

Substitute Care Placement: Any community out-of-home care and treatment programs authorized by the OYA to serve offenders in OYA custody, including contracted residential treatment programs and certified foster homes.

POLICY

The ultimate goal of OYA's work with offenders is to protect the public by ensuring offender accountability, promoting change, developing/improving skills, and reducing the likelihood that offenders will commit more crime.

The OYA will conduct a Risk/Needs Assessment and develop a Case Plan based on the offender's profile of risks, needs, strengths, and available interventions. All Risk/Needs Assessments will be conducted by trained/certified staff using the OYA tool and Case Plans will be prepared and recorded in JJIS.

OYA Case Planning Principles:

- A case plan is developed and implemented for every offender in OYA custody.
- The OYA Parole/Probation Officer (PPO) is the primary case manager for all OYA offenders.
- The OYA Treatment Manager is the primary case manager for all DOC offenders.
- Case plans are reviewed regularly to update the current goals of the offender.
- A case planning process is built on assessment. It focuses on the needs and strengths of the offender and directs cultural- and gender-specific interventions to reduce risk of future criminal conduct.
- A case plan targets specific reformation areas including offense-specific, family, mental health, substance use, education, vocation, social skills, and medical.

- A case plan is developed and monitored by a MDT which is inclusive of the offender and family.

- Each MDT member provides case planning recommendations to the MDT according to their specific domain (area of expertise). The MDT collaborates to develop, coordinate, and monitor case plans.

- The MDT regularly reviews and documents progress toward meeting reformation goals of the case plan as evidenced in domain documentation – long-term goals, competencies, and interventions.

I. Intake Assessment

All offenders will receive a Mental Status Assessment (YA 4409) by a health care practitioner within one hour of presentation for admission to a facility and, based on the results of the assessment, will be assigned a Suicide Risk level. The Suicide Risk Level will be recorded in the JJIS Population Group "OYA *Suicide Documentation." In addition, all offenders will receive an Initial Health Screening (YA 4408) within one hour of admittance to the facility. This screening will be completed by a health-trained staff (OYA transition camps only) or a qualified health care professional.

The identification of areas of risk and need is the first step in case plan development. Risk and needs assessment is accomplished through a formally guided interview process and the use of an instrument that has been scientifically validated to identify areas of risk and needs.

All OYA offenders will be assessed for criminogenic areas of risk, protective factors, and resource need with the OYA Risk/ Needs Assessment. The Risk/Needs Assessment will be completed as specified in this policy and OYA protocols for workflow related to case planning.

The OYA Risk/Needs Assessment has been implemented at two levels. The OYA Risk Pre-Screen is designed to identify the offender's relative risk to re-offend. The full OYA Risk/Needs Assessment identifies a wide variety of risk factors/protective factors in a number of domains, including:

- Offense Specific
- School
- Use of Free Time
- Employment
- Relationships
- Family
- Living Arrangements
- Alcohol and Drug Use
- Mental Health
- Attitudes and Behaviors
- Aggression
- Skills

A. Within 30 days of intake, PPOs will administer the OYA Risk Pre-Screen on all offenders committed to OYA probation.

1. Offenders who score LOW or MODERATE on the Risk Pre-Screen will have case plans developed using information from that screen.

2. Offenders who score HIGH on the OYA Risk Pre-Screen will be administered the full OYA Risk/Needs Assessment.

3. Offenders who score high in the Alcohol and Drug or Mental Health domains will be referred to community providers for a more complete clinical assessment.

B. Prior to the development of a case plan and the first ARB review, offenders admitted to an OYA Youth Correctional Facility (YCF) will be administered the full OYA Risk/Needs Assessment.

1. YCF Intake will complete the assessment for offenders committed directly to OYA close custody and for DOC commitments.

2. The PPO will complete the assessment for offenders who are committed to close custody from OYA probation or for parole revocations.

3. Offenders who score high in the Alcohol and Drug or Mental Health domains will be referred for a more complete clinical assessment by a QMHP or a drug/alcohol counselor.

4. In addition to the Risk/Needs Assessment and subsequent assessment, ORS 420A.125 requires intake assessments that include the following:

a) A physical health evaluation;

b) If appropriate, a psychiatric evaluation;

c) A psychological evaluation if a psychological evaluation of the offender has not been done in the six months prior to the offender's commitment to OYA;

d) A comprehensive drug and alcohol abuse evaluation *if the offender's screen shows high risk in the substance abuse domain;*

e) If appropriate, a sex offender evaluation; and

f) If appropriate, a vocational evaluation.

g) For an offender, the intake assessment must also include an educational evaluation to be provided by the Department of

Education. The educational evaluation must include evaluations for special education as required by the Individuals with Disabilities Education Act.

II. Case Plan Development

The development of the case plan will integrate the Risk/Needs Assessment findings and the expertise from a variety of people, including educators, medical/mental health professionals, community treatment providers, and vocational specialists in addition to the offender's primary case manager.

A. An MDT will develop an initial comprehensive integrated case plan based on the needs identified in all assessments within 30 days of an offender's commitment to or placement in the OYA.

B. The plan will address problems and strengths and focus on goals, competencies and interventions necessary to mitigate public safety risk and develop prosocial skills and may be based in one or more of the following domains:

- Offense-specific
- Family
- Mental health
- Substance Use
- Education
- Vocation
- Life/Social skills
- Medical

Because offenders may not be likely to have problems in all domain areas, not every domain will be active for each offender. In the JJIS Case Plan, ratings from the OYA Risk/Needs Assessment display in the appropriate Case Plan domain. Staff will develop case plans which focus on those domains that have high criminogenic risk and need factors and low protective factors.

C. Each Case Plan Domain will consist of the following:

1. **Problem statement:** Problems will be described in terms of functional deficit or symptoms presented by the offender in an assessment. Problem statements will be written so the behavior to be targeted is well-defined and concrete. Findings from the Risk/Needs Assessment can be used when writing the problem statement.

2. **Strengths/Assets:** Offenders committed to OYA come with a variety of personal strengths that can assist them in achieving identified goals. When identifying strengths, the protective factors that have been identified from the Risk/Needs Assessment as well as cultural attributes can be considered.

3. **Long-Term Goals:** The Long-Term Goal is the expected outcome of behavior change and/or skill improvement that should be achieved over time. A goal for one offender may not apply to another offender. Goals may not be needed in all domains for every offender.

   a) JJIS has been programmed with a selection of the most commonly used goals for each case plan domain. If none of the goals meet the needs of a specific offender, staff may develop unique goals.

   b) It is not desirable for all offenders to be working on multiple long-term goals in multiple domains. Offenders in the community identified as low-risk to re-offend may likely have few long-term goals they are working on to achieve. Offenders in close custody, on the other hand, may have a number of goals identified as needing to be met.

4. **Competencies:** Competencies are the skills necessary for an offender to reach the long-term goal. Competencies will be written in positive, observable, and measurable terms.

   a) Since knowledge and skills are often attained in steps of recognition/identification, awareness, and behavioral change, long-term goals are often comprised of more than one competency.

   b) JJIS has been programmed with a selection of core competencies associated with specific long-term goals. If none of the competencies meet the needs of a specific offender, staff may develop unique competencies.

5. **Short-Term Goals:** Short-term goals are small linear steps designed to help the offender reach the long-term goal. They outline realistic incremental achievements an offender is expected to accomplish within the 30-90 day periods between MDT meetings.

   a) Short-Term Goals are individualized and entered into JJIS as free form text.

   b) When developing short-term goals, the ability of the offender to respond will be considered.

6. **Interventions:** Interventions are services or supports provided to the offender in order to successfully develop competencies and assist the offender meet the long-term goals. Interventions can be delivered by staff, service providers, and others in either a structured format or curriculum (program), or in a less formal, non-program format.

a) The services and supports (interventions) are provided or overseen by a member of the team and may include treatment groups or individual interventions.

b) When selecting interventions, the ability of the offender to respond will be considered. (e.g. offenders have different levels of intellectual functioning and/or mental health disorders and may require different intervention strategies).

D. Transition Goal

1. Two Transition Goals will be identified at the outset of the initial case plan development: Placement at Termination of OYA Custody and the Next Planned Placement. The Transition Goals will be established collaboratively with the offender and his/her family to identify where the offender will be when OYA involvement ends – a number of possibilities exist, including returning home to family or living independently. These goals will be updated in JJIS as they change. The primary case manager will enter these goals in JJIS.

a) Even though goals may change, the early identification of intermediate and ultimate transition goals provides the case manager (i.e., PPO or Treatment Manager) and the offender with a target toward which to work. It allows the case manager to identify activities that need to occur to ensure smooth transitions from one placement to another.

b) The JJIS Case Plan includes a series of pre-programmed, drop-down selections for “Placement at Termination of Custody” and “Next Placement.”

2. Transition Activities, specialized activities designed to assure a smooth transition to the next placement, will be identified and recorded prior to transition to the next placement. The primary case manager will generally enter these activities.

a) These activities may be recorded when transitioning to different levels of care within close custody.

b) These activities will be recorded when returning to the community from either close custody or residential care.

III. Monitoring Long-Term Goals and Case Plan Progress

A. **Progress Notes – Long-Term Goal Progress** - Progress on each Long Term Goal in each active domain in the offender’s case plan will be documented by entering Long Term Goal Progress Notes in JJIS.

1. For offenders in close custody, the appropriate staff will enter Long-Term Goal Progress Notes as needed but not less than weekly.

2. For offenders on probation or parole, the appropriate staff will enter Long-Term Goal Progress Notes as needed and appropriate.

B. **Progress Notes – Case Plan Progress - Progress** related to the offender's general progress, (not related to specific Long Term Goals), will also be documented in JJIS by entering Case Plan Progress Notes.

1. For offenders in close custody, the appropriate staff will enter Case Plan Progress Notes as needed.

2. For offenders in close custody, the PPO will enter a Case Plan Progress Note after every MDT and after every 30-Day Case Review.

3. For offenders on probation or parole, the PPO will enter a Case Plan Progress Note as needed and appropriate. Contact notes that relate to the Case Plan should be included as Case Plan Progress Notes.

IV. Reviewing Long-Term Goals and Case Plan

A. 30-Day Review

1. Each active Long-Term Goal in the Case Plan will be reviewed every 30 days and documented in JJIS by briefly summarizing the progress the offender made in the previous 30 days, including any information provided by the service provider.

a) The PPO or Assistant will conduct and document this review in JJIS at 30 and 60 days for probation and parole offenders.

b) The Treatment Manager, Youth Corrections Unit Coordinator or Service Provider will conduct and document this review in JJIS at 30 and 60 days for offenders in close custody.

2. Case Plans for offenders in close custody will be reviewed every 30 days and the review documented by summarizing general progress the offender made in the previous 30 days. The Treatment Manager, YCUC, or designee, will conduct and document this review in JJIS.

B. Quarterly Review

1. Each active Long-Term Goal in the Case Plan will be reviewed every 90 days and documented in JJIS by summarizing the progress the offender made in the previous 90 days. This will

summarize the 30-Day Reviews in the quarter. Short-Term Goals, Interventions and Competencies will be updated at this time.

a) The PPO or Assistant will conduct and document this review in JJIS at 90 days for probation and parole offenders.

b) The Treatment Manager, Youth Corrections Unit Coordinator or Service Provider will conduct and document this review in JJIS at 90 days for offenders in close custody.

2. Each Case Plan will be reviewed quarterly by the offender's MDT and documented by summarizing general progress the offender made in the previous 90 days. This review will summarize any Plan Progress Notes entered during the quarter.

a) The PPO or Assistant will conduct and document this review in JJIS after every Quarterly Review for probation and parole offenders.

b) The Treatment Manager or Youth Corrections Unit Coordinator will conduct and document this review in JJIS after every MDT for offenders in close custody.

3. Changes or recommendations resulting from Quarterly Plan Reviews conducted for offenders in close custody will be approved by the close custody facility or camp designee.

4. Quarterly Plan Reviews conducted for probation and parole offenders will be approved by Parole/Probation Supervisors.

C. Other Reviews

1. When an offender transitions from one placement to another, progress toward Long-Term Goals will be documented in a Long-Term Goal Review and Competencies will be rated. Short-Term Goals and Interventions will be updated if needed.

2. At this time overall case plan progress (not related to the Long-Term Goals) will also be documented in a Plan Review.

V. Re-Assessment

A. All OYA offenders will be re-assessed prior to termination from OYA custody. DOC offenders will be re-assessed at the time of return to DOC. Offenders on probation who only had a Risk Pre-Screen will be re-assessed with the Risk Pre-Screen. All others will be reassessed with the full Risk/Needs Assessment.

B. Reassessment may also be done as needed for case planning purposes.