Overview of New York State’s Initiative

Although some counties in New York State have strong diversion programs, significant gaps remain for youth with co-occurring mental and substance use disorders at the initial points of contact with the juvenile justice system. The goal of New York State’s participation in this initiative was to develop and implement a successful program model for addressing the behavioral health needs of youth as part of a probation-intake diversion effort. Specific aims were to identify best practices to improve coordinated service provision for youth and to develop model protocols for identifying behavioral health needs of youth at probation-intake. Monroe County was selected as the pilot site for this initiative. Participants from New York State’s team took part in the cross-site workgroup, Implementing Evidence-Based Practices for Justice-Involved Youth with Co-occurring Mental and Substance Use Disorders.

State Diversion Activities

Process

The project began with the convening of a core team of key policymakers from state and local juvenile justice, behavioral health, and family advocacy agencies and organizations. From the Policy Academy meeting, the team learned about successful methods of cross-systems collaboration, front-end diversion models, research-based screening, and evidence-based treatment. During facilitated planning sessions at the Policy Academy meeting, the core team developed a preliminary strategy for probation-intake identification and diversion to treatment of youth with co-occurring mental and substance use disorders. The New York State effort was supported by regular team meetings and onsite technical assistance.

Strategy

Prior to this initiative, there were few protocols for juvenile probation departments to follow to ensure that youth with co-occurring mental and substance use disorders were identified and referred to appropriate community-based interventions. Following the Policy Academy meeting, the team met to finalize a diversion strategy to pilot in Monroe County. Action steps included: selection of a screening instrument; development of policies and procedures for implementing screening; assessment of current capacity to provide evidence-based services to youth identified as needing follow-up assessment and potential treatment for co-occurring mental and substance use disorders; and development of a formal process for matching youth in need of services to appropriate community-based treatment. The new model for screening and linkage to treatment begins with administration of the recently implemented MAYSI-2. Policies and procedures developed through this initiative guide probation’s response to the screening results, including emergency response, referral for follow-up assessment, and possibly treatment. The model creates linkages between the juvenile justice, mental health, and community-based service systems that provide treatment for the target population of youth and ultimately prevent further involvement with the juvenile justice system.

Accomplishments

- The team developed a model probation-intake diversion program for youth with behavioral health needs, including creating necessary linkages to community-based services, based on the Models for Change Mental Health/Juvenile Justice Action Network Front-End Diversion Initiative model. The model outlines policies and procedures for implementing behavioral health screening and for directing probation’s response to the variety of potential outcomes of the MAYSI-2.

- The MAYSI-2 was successfully implemented in the Monroe County Juvenile Probation Department. Screenings started in mid-March; several youth have since been referred to services. Safeguards were put in place to not only ensure confidentiality, but also to prevent information collected from youth from being used within fact finding by the court.

- Nine additional counties attended the MAYSI-2 training in Monroe County because of their interest in adopting the probation-intake diversion model.
A learning collaborative was held for teams of probation, mental health, social services, and providers from an additional 11 counties and New York City to learn about the model piloted in Monroe County. Following participation in the learning collaborative, funds were provided to purchase the MAYSWARE for counties interested in replicating the model. Four counties – Wyoming, Onondaga, Columbia, and Schenectady – are working to implement screening procedures and replicate the probation-intake diversion model.

Cross-Site Activities

Process

New York State elected to participate in the Action Network on Implementing Evidence-Based Practices for Justice-Involved Youth with Co-occurring Mental and Substance Use Disorders. The team identified the early stages of evidence-based practice implementation as the area for review and activity. Team members from Monroe County compiled a list of existing evidence-based practices in the county. Once that list was compiled, it became clear that more evidence-based substance abuse treatment was needed. Monroe County treatment providers discussed how to build a comprehensive treatment service system; technical assistance was provided to facilitate this conversation. Through this effort, the team selected the Seven Challenges program as an evidence-based practice to add to the Monroe County services array. An initial local provider meeting was held. Interested providers then participated in a series of local meetings with a mental health agency to develop a protocol detailing roles and responsibilities.

Accomplishments

A project participation protocol was institutionalized through memorandum of understanding (MOU). The MOU outlines roles and responsibilities of each participating entity related to screening, referral, engagement, service provision, and data collection.

Representatives of the local behavioral health system convened to identify evidence-based practices available in the county’s Office of Mental Health and Office of Alcohol and Substance Abuse Services (OASAS)-licensed clinics. The need for an additional evidence-based practice that could be offered in OASAS-licensed clinics was determined. Seven Challenges was selected as the new evidence-based practice to be offered in the county.

A process for direct and timely referrals to evidence-based practices for justice-involved youth with co-occurring disorders was developed.

Two agencies have been trained in the Seven Challenges curriculum. Implementation in Monroe County will take place soon.

Next Steps

New York State Division of Criminal Justice Services (DCJS) is currently working with the pilot site to develop a data collection plan that will allow DCJS to track subsequent juvenile and criminal justice involvement for the youth involved in the project.

Four other counties in New York have expressed interest in replicating the pilot site model. DCJS submitted an application for additional funding to support model expansion to these localities.

The use of validated behavioral health screening as part of the probation-intake process has been incorporated into new programs that DCJS is funding.

For More Information

Jacquelyn Greene
New York State Division of Criminal Justice Services
P: 518-457-3670
E: Jacquelyn.Greene@dcjs.ny.gov

The John D. and Catherine T. MacArthur Foundation and the Substance Abuse and Mental Health Services Administration collaborated on an initiative entitled Improving Diversion Policies and Programs for Justice-Involved Youth with Co-occurring Mental and Substance Use Disorders: An Integrated Policy Academy/Action Network Initiative. The goal of this initiative was to increase the number of youth with co-occurring mental and substance use disorders diverted out of the juvenile justice system to appropriate community-based services. Eight states participated in this initiative: Arkansas, Kentucky, Michigan, Minnesota, Mississippi, New York, South Carolina, and Virginia.

Using SAMHSA’s Policy Academy model, core teams consisting of senior-level state and local policymakers were convened to learn about the latest research and effective diversion strategies for youth with co-occurring disorders in contact with the juvenile justice system. Individual state teams, consisting of the core team and an expanded home team, then developed and implemented front-end diversion strategies for youth with co-occurring disorders. Ongoing technical assistance was provided to support their efforts.

Using the Foundation’s Action Network model, which supports and links teams working on similar innovations in policy and practice, the states worked to identify and implement effective practices for screening and treating youth with co-occurring disorders. National experts provided guidance and support.

This initiative was coordinated by the National Center for Mental Health and Juvenile Justice at Policy Research Associates and the Technical Assistance Collaborative.