

Montgomery County Juvenile Court

Center for Adolescent Services

Chapter: Social Services
Subject: Scope of Services
Policy: 5C-01
Pages: 1 of 3
Standards: ACA 3-JCRF-5C-01
Issue Date: 1/2001
Reviewed: September 2020, April 2021, August 2022
Authorized by: William Shaffer, Director

- I. **Policy:** It is the policy, procedure, and practice of the Center for Adolescent Services (CAS) to provide for a social services program that makes available a range of resources appropriate to the needs of juveniles, including individual, group and family counseling; drug and alcohol treatment; family planning; HIV and AIDS education; and special offender treatment.

- II. **Procedure**
 - A. **Individual Counseling**
 1. The Family Specialist assigned to a youth will be responsible for providing regular and documented individual counseling sessions.
 2. When the Family Specialist is not available, the youth's Unit Supervisor and/or Unit Counselor will be available to provide counseling, guidance and direction on an emergency basis.
 3. Individual counseling sessions generally will be focused on, but not limited to, the following kinds of issues and concerns:
 - a. Personal concerns and problems;
 - b. Youth's progress according to his/her overall Treatment Plan and measures he/she might take to make improvements;
 - c. Review of youth's status in program;
 - d. Discussing and coordinating plans with community resources for re-entry and adjustment back to his/her home community.

 - B. **Group Counseling**
 1. The Family Specialist Supervisor is responsible for organizing, developing and providing for regular structured and documented group counseling sessions within the facility.
 2. The Treatment Specialists, under supervision of the Family Specialist Supervisor, will facilitate these group sessions.
 3. Group counseling may take on a wide range of topics and will include but not be limited to, the following kinds of issues and concerns:
 - a. Motivation to Change;

- b. Anger Management;
 - c. Pro-Social Skills;
 - d. Decision-Making;
 - e. Family Communication & Supervision;
 - f. Problem Solving/Conflict Resolution skills;
 - g. Gender-Specific concerns
4. The group facilitator will document juvenile participation in groups with group progress sheets.
 5. The group facilitator will document significant issues that arise during the course of the group meetings.
 6. Conduct, participation and progress in groups will be included in treatment team discussions and treatment planning for each youth.

C. Family Counseling

1. Family Specialist is responsible for providing family counseling.
 - a. A youth's parent(s)/guardian(s) will participate in at least two (2) family counseling sessions each month.
 - b. When a family is not able to independently arrange transportation to the facility, the Family Specialist will make arrangements for transportation.
2. Family counseling sessions will include a focus on, but not limited to, the following:
 - a. Family history and family structure;
 - b. Youth's behavior and family dynamics;
 - c. Identification of problems and associated strategies for resolution;
 - d. Planning for release and reintegration at home.
3. The Family Specialist will document sessions, including progress notes in the JCS Placement Module, detailing issues, topics, resolutions and plans.

D. Drug and Alcohol Treatment

1. Youth who have been evaluated as a part of the Montgomery County Juvenile Court Formal Review process and found to have a primary substance problem, with secondary delinquency, are not suitable candidates and are not accepted for admission.

E. Special Offender Treatment

1. In the event that a circumstance or characteristic arises with a youth that cannot be addressed through our established program of treatment, the Family Specialist is responsible for bringing the matter to the attention of the Program Manager and Director.
 - a. The Administration Team will consider all available options for intervention and will implement when available on an as needed basis.

F. Family Planning, HIV and AIDS Education

1. All youth in the program participate in regular groups designed to educate and encourage discussion of STDs, including HIV and AIDS. These groups are developed and coordinated by the medical department and/or CAS Academy.
2. The Nurse provides information and education to youth on pregnancy, family planning, and serious and infectious diseases during the initial health screening.

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Chapter: Social Services
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Policy: 5C-02
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III. Policy: It is the policy, procedure, and practice of the Center for Adolescent Services (CAS) to provide that each juvenile is assigned a facility staff member who meets with and counsels that juvenile.

IV. Procedure

A. Counseling & Programming

4. The Family Specialist assigned to each youth is responsible for providing regular and documented individual counseling sessions. These sessions are logged within JCS as Therapeutic notes.
5. When the Family Specialist is not available, a Unit Supervisor, Unit Counselor, and/or staff will be available to provide counseling, guidance and direction on an emergency basis.
6. Individual counseling sessions generally will be focused on, but not limited to, the following kinds of issues and concerns:
 - a. Personal concerns and problems;
 - b. Youth's progress on Treatment Plan and measures he/she might take to make improvements;
 - c. Review of youth's status in the program and discussions of how to make improvements;
 - d. Discussing plans for release and adjustment back to his/her home community.
7. The results of these sessions will be shared and reviewed in treatment team meetings, shift briefings, with youth's Unit Supervisor, and with the Administration Team.
8. Documentation of these sessions with Family Specialist will be written within the JCS Placement Module and are available to all staff members.

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Chapter: Social Services
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V. Policy: It is the policy, procedure, and practice of the Center for Adolescent Services (CAS) to provide that staff members are available to counsel juveniles at their request; provision is made for counseling juveniles on an emergency basis. Such services may include individual and family counseling, family planning and parent education, and other progress release planning for juveniles with drug and alcohol addictions.

VI. Procedure

A. Staff is available twenty-four (24) hours a day to counsel youth.

1. UC's, Supervisors, Treatment Specialists, and Staff will document in the Permanent Log any verbal or written request by a youth for counseling.
2. Staff providing counseling with a youth will document the subject of any discussion in this context within the Permanent Log.
 - a. The Permanent Log is then transcribed into JCS for all Court staff to review.
3. Youth are provided opportunities to request to speak with their assigned Family Specialist, by completing and submitting to staff a "Family Specialist Request" form. The form is placed in the Family Specialist box on the assigned unit. These boxes are checked daily and the forms are given to the assigned Family Specialist in order to follow-up.
4. Staff will document issues or concerns of a suicidal, self-harm, or violent nature in the form of a Special Incident Report.
 - a. Staff immediately notify the Supervisor on-duty
 - b. Appropriate measures are taken in accordance with policy and procedure, to ensure the safety and security of the youth and other youth in the program.
 - c. Staff completes a Behavior Report form and ensures that all staff is alerted to the situation.
5. Information requiring in-depth counseling will be referred to the Family Specialist or Therapist for follow-up and additional support.
6. In the event the further counseling and/or intervention are indicated, the youth will be referred for mental health counseling provided by the South Community Individual Therapist or by the SOPP practicum students. The South Community Therapist provides individual counseling for referred youth. The SOPP practicum students provide individual and group counseling, as well as cognitive testing and are clinically supervised. Finally, if a

youth is in Crisis, after hours or on the weekends, the facility is contracted with Good Samaritan Crisis Care to provide clinical services.

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Chapter: Social Services
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VII. Policy: It is the policy, procedure, and practice of the Center for Adolescent Services (CAS) to provide that, in its use of community resources, the agency maintains and periodically updates an inventory and evaluation of functioning community agencies that can provide services to juveniles.

VIII. Procedure

- A. The Program Manager will maintain an inventory of functioning agencies in the Montgomery County area that provide services to juveniles.
- B. The Program Manager periodically will survey CAS staff for the purpose of evaluating the quality of services received from the agencies being used, and use the evaluation results to update the inventory.

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IX. Policy: It is the policy, procedure, and practice of the Center for Adolescent Services (CAS) to provide that the staff use community resources, either through referrals for service or by contractual agreement, to provide juveniles with services to meet their developmental needs.

X. Procedure

- C. CAS will maintain contracts for necessary and emergency medical services with appropriate medical facilities as well as hospitals in the Greater Dayton area.
- D. CAS will maintain contracts for psychiatric care and therapy through South Community Incorporated.
- E. CAS will maintain a contract with Wright State School of Professional Psychology for therapeutic services.
- F. CAS will maintain a contract with Lighthouse Youth Services for sexual offender counseling services.
- G. CAS will maintain a contract with Good Samaritan Crisis Care for crisis intervention services.

H. The Program Manager or designee will maintain and regularly update an inventory of community resources available for the provision of services including, but not limited to, the following:

- 1. Independent living skills;
- 2. Transportation;
- 3. Medical;
- 4. Dental;
- 5. Mental Health Counseling
- 6. Psychological counseling;
- 7. Job searches and applications.

I. When a service required to address the needs of a youth cannot be provided internally, the Family Specialist(s) will identify community resources that may be available for provision of services.