

Integrated Case Management 101

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Disclaimer

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Goals of case management and planning

Support behavior/lifestyle change through:

- Goal setting
- Skill building
- Motivation and encouragement

Same goal as the juvenile justice system's commitment to reduce recidivism

Risk, Need, Responsivity

Case planning and management should be guided by three things:

- Risk (Intensity of interventions)
- Need (What interventions)
- Responsivity (How to apply interventions)

Risk

- We can predict the risk of re-offending by measuring certain factors in a youth's life
- Examples of risk factors
 - Prior offenses
 - Age at first offense
 - Performance in school
- Research has proven that the degree of supervision needs to be matched to a young person's risk of re-offending
 - Why might this be?

Matching risk level and intensity of intervention

Risk score

- Low

Level of supervision

- Little to no formal supervision-
diversion from the justice
system
-

- Medium

- Scheduled probation,
community service, matched
interventions
-

- High

- Frequent contact with
probation, matched
interventions, incarceration as a
last resort

Need

- If we know what factors contribute to a young person's risk of re-offending then we should attempt to intervene and change factors
- The “Big Four”
 - Antisocial personality traits** (impulsive, quick to anger, low social/problem-solving skills)
 - Antisocial thinking** (rationalizing behavior, blaming others)
 - Antisocial attitudes** (sense of entitlement, thinking the world is against them)
 - Criminal associations** (negative peers)
- The Central Eight
 - Substance use disorders**
 - Family/marital relationships**
 - Education and employment**
 - Positive leisure activities**

Matching needs to interventions

Need

- Substance use disorder

-
- Peer associations

-
- Anti-social personality

-
- Family functioning

Intervention

- Clinical drug treatment

-
- Sports teams enrollment, religious community, mentoring

-
- Anger management, problem-solving skills, interpersonal skills

-
- Parent counseling, Functional Family Therapy, safety plans for abuse

Responsivity

- Each young person has unique characteristics and environmental factors that affect how they learn or how open they are to change
- Examples of responsivity factors:
 - Strengths- Skilled athlete or musician, close to a trusted adult, has an orientation toward accomplishments
 - Challenges- Learning disability, mental health diagnoses, is homeless
 - Neutral- LGBTQ status, second generation immigrant

Responding to responsivity

Responsivity Component

- Close relationship with a family member
-

- Talented musician
-

- Identifies as LGBTQ

Tailored response

- Include the family member in decision making

- Encourage music therapy, participation in school/community music groups, make music lessons an incentive

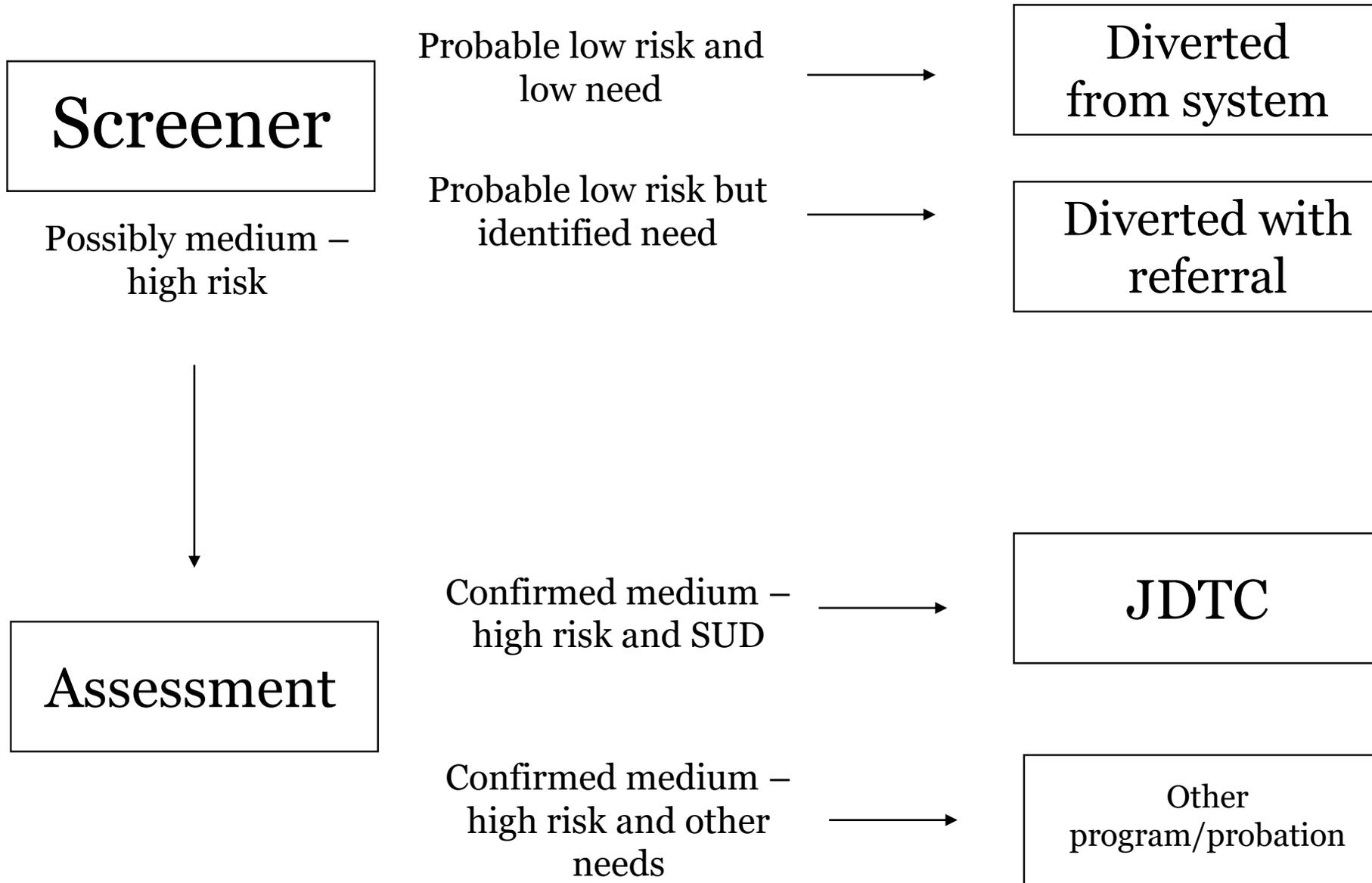
- Ask about identity, with permission make judge and other staff aware of specific pronoun or dress code exceptions, refer to LGBTQ community groups

Screening and Assessing R-N-R

- A screener is a short set of questions (usually can be given by anyone) to determine if a longer assessment is needed
 - Massachusetts Youth Screening Instrument-Version 2 (MAYSI-2)
 - Global Appraisal of Individual Needs-Short Screener (GAIN-SS)
 - Global Appraisal of Individual Needs-Q3
 - Problem Oriented Screening Instrument for Teenagers (POSIT)
 - Personal Experience Screening Questionnaire (PACT)
- An assessment is an extensive set of questions (usually administered by someone trained) to determine the risk of recidivism, criminogenic needs, family setting etc. In a treatment setting, an assessment determines the severity of treatment and type of therapy.
 - Comprehensive Adolescent Severity Inventory (CASI)
 - Global Appraisal of Individual Needs-I (GAIN-I)
 - Youth Assessment and Screening Instrument (YASI)
 - Youth Level of Service/Case Management Inventory (YLS/CMI)

Screening and Assessing R-N-R

- Assessment should collect information on
 - Antisocial personality traits, thinking, and attitudes
 - Peer associations
 - Substance use disorders
 - Family functioning and behavior
 - Education/employment
 - Mental health
 - Trauma
- Assessments should be followed up with structured interviews to collect more information on responsivity, etc



Case Planning and Management in a JDTC

Eligibility:



JDTCS are a higher intensity intervention, designed to serve medium to high risk/need youth



JDTCS specifically treat mild, moderate or severe substance use disorders (among other needs)



14 to 17 years of age

Case Management

On-going

Designated point of contact that advocates for participant

Comprehensive and flexible

Partnering with community based providers and schools

Advocate for youth and family

Case planning

- Case planning is where the actual plan is built and how criminogenic needs will be addressed.
- On-going process; continually updated
- It is not just a duplication/reiteration of phases or dispositional order
- Research shows that individualized case plans (coupled with motivational interviewing/engagement) reduce new arrests and technical violations of youth under supervision



Building a case plan



Solicit youth and family buy-in by including them in the decision-making process

OARS technique

Open-ended questions

Affirmations

Reflection

Summarizing



Write case goals down



Case plan establishes expectations

Case Plans and Treatment Plans



**Risk and needs assessment
is reviewed with youth and
family**

Utilize visual tool to engage



**Targeted areas of
change/improvement are
identified**

Ask youth to identify the
targets (domains) to work on



Case plan is developed

Case Plans and Treatment Plans

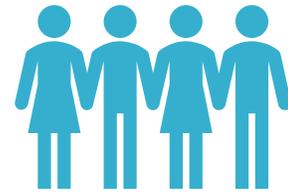


SMART goals set

Set 2-3 manageable goals

Have youth identify incentives

Process barriers



General case plan and goals shared with treatment team

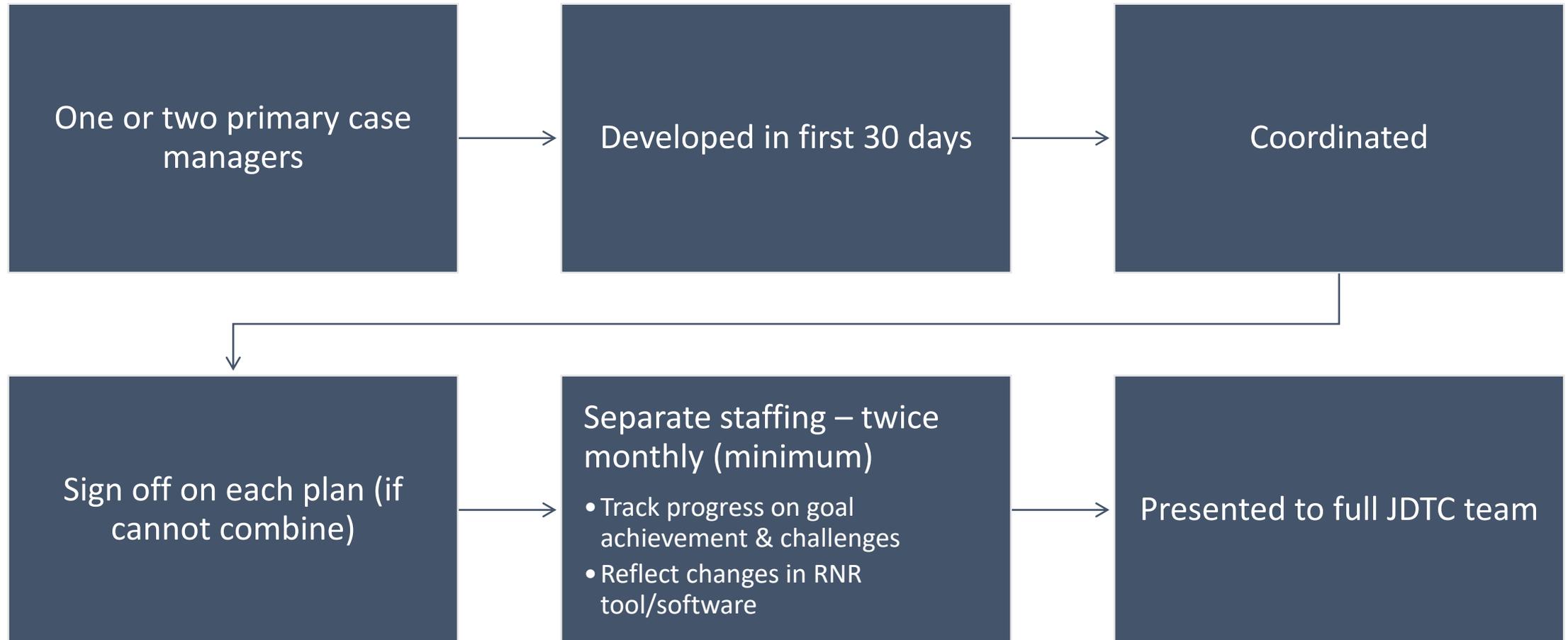
Office/Field Interaction

- Interactions youth should focus less on detecting violations and instead focus finding opportunities to skill build and praise on goal attainment.
 - Check-in (building rapport)
 - Review weekly goal progress
 - Identify successes or obstacles
 - Determine if new action steps are needed/desired
 - Review court conditions
 - Provide written materials/instructions
 - Apply brief intervention as needed – use tools such as Carey Guides, NCTI Crossroads, BITS

(Source: Carey et al, 2010)



The JDTC Case Management/Treatment Team



Staffing & Court

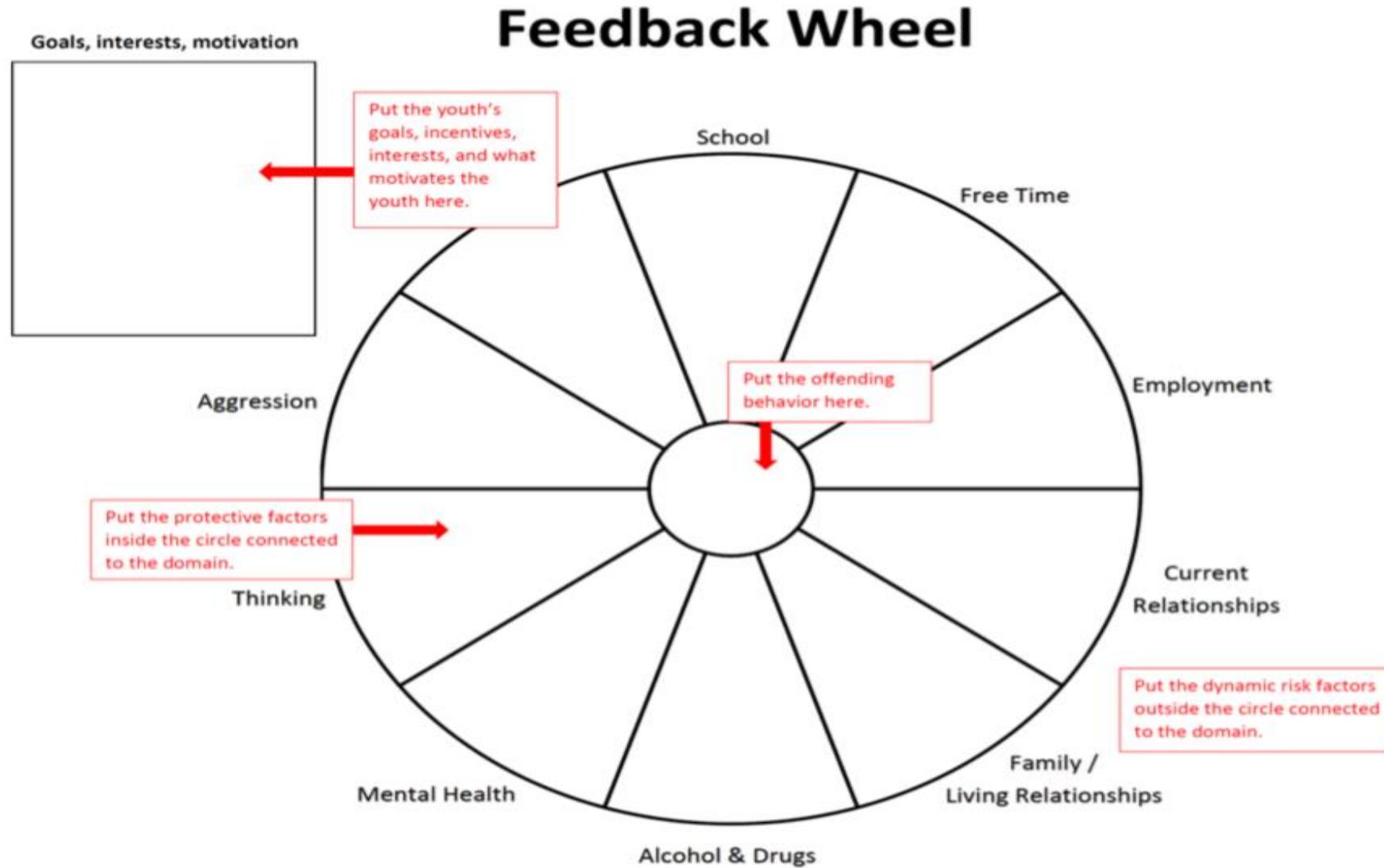
Staffing is focused on domains and goals

- Reward for success based on youth input of incentives
- Adjust plan as needed
- Continually assess for barriers

Judge engages from bench on weekly goals and progress/challenges

- Direct conversation with youth
- Parent/guardian stands with youth and also reports on progress

Reinforced by other team members

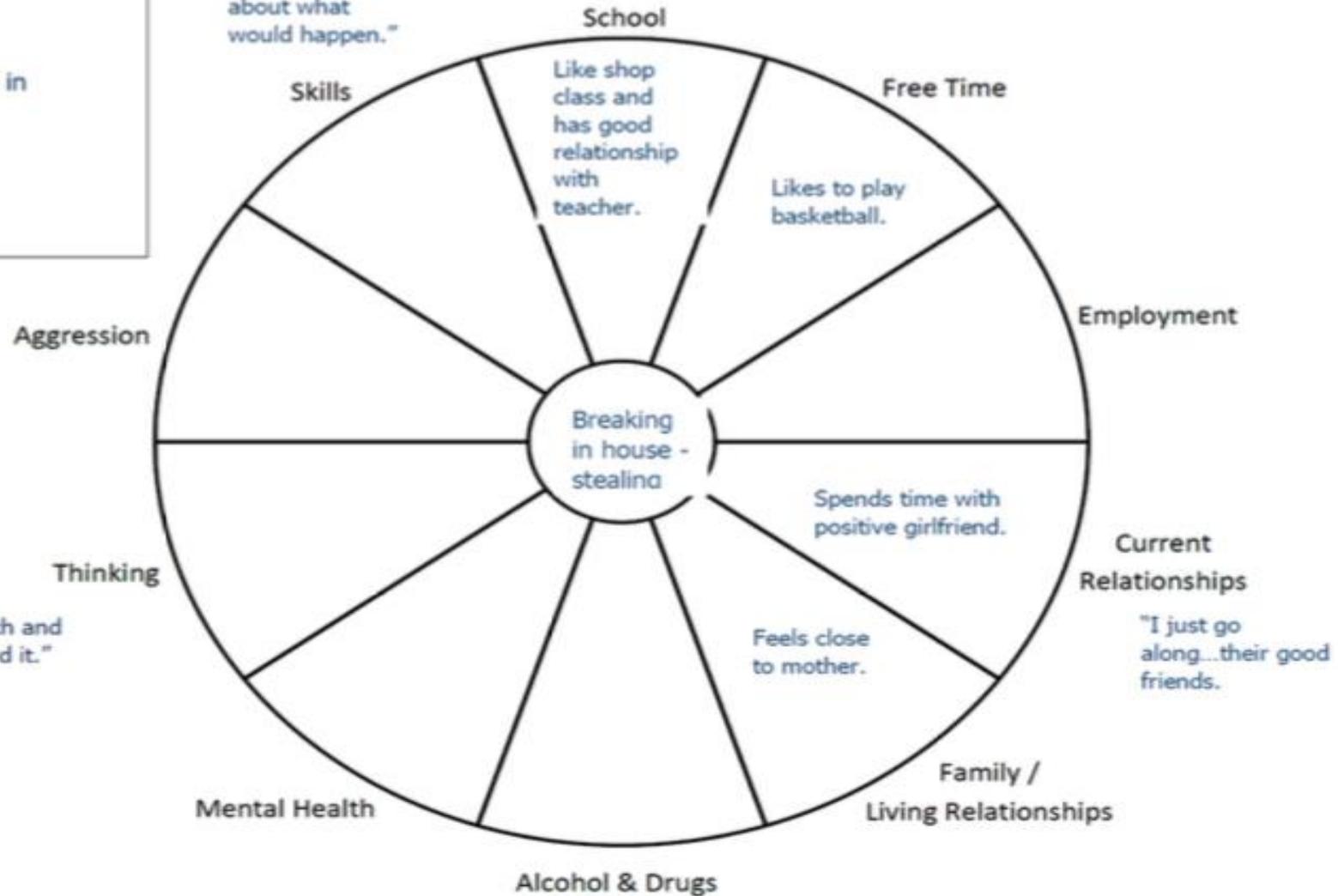


Feedback Wheel

Goals, interests, motivation

- Be a carpenter – own business
- Freedom
- No more time in detention

"I didn't think about what would happen."



Source: Washington Association of Juvenile Court Administrators; CMAP Training Manual (2018)

Steps to Prioritizing	
1. Identify the dynamic risk factor(s) to work on first.	Ask the youth what item he or she would like to work on first, as identified in the feedback, to accomplish his or her goals or interests.
2. Ensure youth has a clear understanding of the problem behavior.	If the youth does not understand how the risk factor contributes to his offending behavior, conduct a situational analysis: <ul style="list-style-type: none">• When does the problem occur?• Where does the problem occur?• What does the problem look like?• With whom does the problem occur?• What happens as a result of the problem?
3. Identify incentives, barriers, stage of change, and increase change talk for working on identified risk factors.	Work with the youth on identifying the incentives and barriers to working on the risk factor. The JPC should also identify the stage of change (pre-contemplative, contemplative, preparation, etc.) to working on the particular dynamic risk factor. This does not have to be verbalized to youth. It is important to know as it will help strategize next steps to take in the case planning. It would be also be helpful to use MI strategies to help strengthen youth's change talk as to the benefits of working on that particular dynamic risk factor and how it would help reach his/her goals.

My Plan

Name _____

JPC _____

Strengths/Protective Factors:

My short term goal:

Benefits of goal:

Who	Start Date	Due Date	Date Completed
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Action Step:

Action Step:

Action Step:

Barriers:

Support:

Incentives/rewards:

Consequences:

Participant Name:

Program Start Date:

Date:

Moderate or High Risk Factors from Risk Assessment– Date of Assessment:

	Risk Factor	Details
X	Substance Use	
<input type="checkbox"/>	Education/Emp/Financial	
<input type="checkbox"/>	Social Support (Family)	
<input type="checkbox"/>	Neighborhood Problems	
<input type="checkbox"/>	Peer Associations	
<input type="checkbox"/>	Criminal Attitudes and Behavior Patterns	

GOALS PHASE ____ Review in ____ Days	Treatment Objectives	Case Management Objectives
Area of Focus: <i>SUBSTANCE USE</i> GOAL: Responsivity factors to address:		
Area of Focus: GOAL: Responsivity factors to address:		
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A CAUTIONARY NOTE

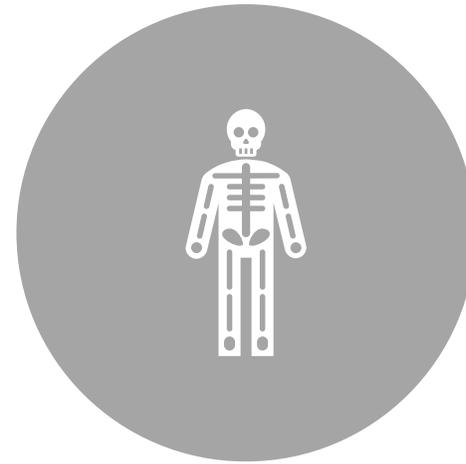
- Be careful not to make the Integrated Case Plan too difficult
- Plans with too many components may be impossible to achieve
 - Take into account important barriers, like cost, insurance, location of services, transportation, homelessness, employment, and physical and mental disabilities
 - If an average person can't do it, how can your clients?
- Account for client factors such as motivation, truthfulness, support systems, relapse triggers, oppositionality, ability to organize
- Treat youth as a resource to be developed, not a problem to managed! More success when connect youth to positive adult role models, and build social/emotional/behavioral competence

- Source:
- Dr. Shannon Carey and Dr. Jacqueline van Wormer, NPC Research
- Brian L. Meyer, Ph.D., LCP

Positive Youth Justice



REPLACE LANGUAGE AND
ASSUMPTIONS:



“THIS KID HAS SO MANY
CHALLENGES, HE IS SO DAMAGED..”

Learning/Doing

- Place youth in situations where they can:
 - Take on new roles
 - Build positive connections
 - Engage in continuous learning
 - Deeply engage to develop leadership

Two Core Assets

Learning/Doing

- Developing new skills and competencies
- Actively using new skills
- Taking on new roles and responsibilities
- Developing self-efficacy and personal confidence

Attaching/Belonging

- Becoming an active member of pro-social group(s)
- Developing and enjoying the sense of belonging
- Placing a high value on service to others and being part of a larger community

Attaching/Belonging

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Learning/Doing

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Positive Youth Justice Model

CORE ASSETS

PRACTICE DOMAINS	Domain-Specific Example*	Learning / Doing		Attaching / Belonging	
		Activity or Opportunity	Outcome Measures	Activity or Opportunity	Outcome Measures
Work	Job readiness	Resume writing workshop	Resume submitted to potential employer	Job-seeker support group	Frequency or length of group participation
Education	Computer skills	One-on-one skill building in HTML or other language	Youth has an operating web site	Youth-to-youth tutoring program	Number of successful tutoring matches
Relationships	Communication skills	Training in conflict management	Youth completes training program	Youth-adult mentor program	Frequency and duration of mentoring relationship
Community	Youth-led civic improvement campaign	Prepare and present formal testimony	Youth speaks at public hearing	Launch new advocacy organization	Number of meetings attended
Health	Physical Fitness	Weight training	Number of training circuits completed	Team sports	Number of games played
Creativity	Self-expression	Mural art program	At least one mural designed or completed	Group performance, music or theater	Number of performances in which youth participated

Practice Domains

Learning/Doing

Attaching/Belonging

Work

Education

Relationships

Community

Health

Creativity

Local Positive Youth Justice Model

Questions?



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