

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 11: Older Youth Services	Effective Date: July 1, 2012
	Section 20: Youth Adjudicated as Juvenile Delinquents Accessing Collaborative Care (CC)	Version: 1

POLICY [NEW]

The Department of Child Services (DCS) will accept referrals from Probation Officers (PO) for youth with an open Juvenile Delinquency (JD) case who are eligible and interested in participating in Collaborative Care (CC). See separate policy, [11.18 Eligibility to Participate in Collaborative Care](#).

In order for the CC case to properly open for these youth, the following must occur in this order:

1. The JD case must close;
2. A [Voluntary Collaborative Care Agreement](#) must be signed by the youth and the Collaborative Care Case Manager (3CM) the same day as the court's JD case closes (see separate policy, [11.22 Voluntary Collaborative Care Agreement](#)); and
3. A CC petition must be filed on the same day as JD case closure.

The [Voluntary Collaborative Care Agreement](#) and petition to open the CC case shall be filed with the court of jurisdiction by the DCS Local Office Attorney.

Code References

[IC 31-30-2-1: Continuing Juvenile Court Jurisdiction](#)

PROCEDURE

The Older Youth Initiatives Team will accept referrals from POs who have identified a youth who is interested in participating in CC. An informational meeting will be held 90 days prior to the youth's 18th birthday to determine if the youth will likely be eligible for CC. This can take place at the youth's regularly scheduled Independent Living (IL)/Transition Planning Meeting held by the PO. See separate policy, [11.6 Independent Living/Transition Plan](#). If the youth chooses to participate in CC, a transition meeting will be held, including the youth, PO, and 3CM. These team members will work with the DCS Local Office Attorney to submit the completed [Voluntary Collaborative Care Agreement](#) and petition to open a CC case immediately after the JD case is closed. See separate policy, [11.22 Voluntary Collaborative Care Agreement](#).

The 3CM Supervisor will:

1. Identify a 3CM for the case;
2. Identify the appropriate Local Office Attorney for the case¹; and
3. Assign the 3CM the CC case in the Management Gateway for Indiana's Kids (MaGIK) within 48 hours of the case transition meeting.

¹ Contact the Practice Development Supervisor Attorney if unsure which Local Office Attorney to contact.

The 3CM will:

1. Meet with the youth and the youth's PO to determine whether the youth is eligible and interested in participating in CC;
2. Complete the [Voluntary Collaborative Care Agreement](#) with the youth at the transition meeting;
3. Attend the court hearing in which the [Voluntary Collaborative Care Agreement](#) and the petition to open a CC case is reviewed;
4. Thoroughly review the case file;
5. Ensure continuity of services, particularly those services that are related to the youth's physical and mental health and well-being including, but not limited to:
 - a. Psychiatric treatment/care,
 - b. Treatment/care for a chronic medical condition,
 - c. Establishing a primary health care provider, dentist, ophthalmologist, gynecologist (if applicable), etc.,
 - d. Therapeutic treatment/care, and
 - e. Continuation of service referrals through DCS.
6. Ensure that the youth does not lose contact with any siblings, family members or other informal supports due to the case transition.

PRACTICE GUIDANCE

Preparing a Youth for Collaborative Care

When the youth enters CC, ensuring a youth's safety is given the highest priority. The best way to ensure safety is to maintain consistency with services for the youth. The youth will have likely begun to develop a relationship with his or her 3CM at IL/Transition Planning meetings that took place prior to the CC case opening. At these meetings the youth and the 3CM may begin to identify formal and informal supports in the new community, if applicable. Immediately after opening the CC case, a youth may need a higher level of support from the 3CM because he or she will be adjusting to his or her new surroundings and may not have access to the same services/formal/informal support systems as before.

Placement Disruption

When a CC case is opened, the placement of the youth is not expected to be disrupted unless all parties agree that it would be in the best interest of the youth. When making a decision regarding a youth's CC placement the youth and the youth's Child and Family Team (CFT) should take into account the youth's [Independent Living/Transition Plan](#).

FORMS AND TOOLS

1. [Voluntary Collaborative Care Agreement](#)- Available in hard copy
2. [Independent Living/Transition Plan](#)

RELATED INFORMATION

Collaborative Care Agreement

The [Voluntary Collaborative Care Agreement](#) documents an arrangement between the youth in CC and DCS. The agreement outlines CC as well as youth rights and responsibilities once he or she has transferred into CC. This agreement must be signed by the youth. Any representative from the DCS Older Youth Initiatives team may review and sign the [Voluntary](#)

[Collaborative Care Agreement](#) with the potential youth. The Local Office Attorney is responsible for filing the agreement with the court of jurisdiction, which cannot be filed until the JD case is closed. This agreement is effective upon the date the last party has signed. See separate policy, [11.22 Voluntary Collaborative Care Agreement](#).

Transition Meetings

If possible, transition meetings may take place during the youth's IL/Transition Planning meeting. Both the PO and 3CM (or a supervisor/delegate) should be present at the transition meeting.

Examples of information that should be shared and discussed at the transition meeting include, but are not limited to:

1. The youth's individual strengths and needs;
2. Needs that may arise in the near future, especially with the opening of the CC case;
3. What supports are currently in place to support those needs;
4. What support will need to be in place after the opening of the CC case;
5. Review/update of the youth's IL/Transition plan;
6. Clarify expectations of what the next steps are for the case;
7. Formal and informal supports for the youth that will be utilized after the opening of the CC case;
8. Addressing steps for what could go wrong; and
9. Visitation arrangements, as applicable.