

IV.D. PROJECT NARRATIVE

“The right combination of serv
ess of treat services for juveniles with a
urring disord
nd Orange (WAO) – a federally and locally
zed Coordination Project for youth ages 12
th’s first contact with the Juvenile Justice
uth who are in, or at risk of, entering the

Detention Center and representatives from State Probation and Orange County Probation / Pre-trial Diversion.

Day-to-day operations, budgeting and strategic planning for WAO is conducted by a Management Team comprised of 32 leaders from various child-serving entities across Orange County including DJJ, DCF, the local CBC, the Sheriff's Office and the Public School System. The WAO Management Team reports directly to the Governing Board. Additionally, members of the Governing Board also serve on the WAO Management Team helping to ensure coordination between the two entities.

Supporting the efforts of the Governing Board and Management Team is the Youth Mental Health Commission which was appointed by Orange County Mayor Teresa Jacobs this past summer. The Commission was create

State. However, the total number of youth being ar

Percentage with Mental Health, Substance Use, or Co-occurring Disorders –
Approximately 13% of youth live with a serious mental illness. Unfortunately, only about
20% get the treatment they need. Instead, all too o

teaching the family how to continue the wraparound model even after formal services end.

Department of Health Services will be the administr

crucial to good clinical decision-making for mental health service interventions. The CSPI formed the basis for the development of the CANS. The CANS has been used to distinguish needs of children in rural and urban settings (Anderson & Estle, 2001), to predict service use and costs, and to evaluate outcomes of services (Lyons, 2009). The CANS-C screens for mental health, substance use and co-occurring disorders and helps to standardize outcomes for work with the youth and family. Those who meet criteria for intervention will be assigned to a Wraparound Specialist and Family Partner, with the goal of establishing the necessary community and natural supports needed to avoid deeper penetration into the juvenile justice system. The results of the CANS-C assessment are used to identify the strengths and the prioritization of needs of the youth and his/her family. Re-assessment of the CANS-C occurs at-least every 90 days to determine the success of the intervention and allow for real-time assessment of the strengths and needs of the youth and family.

Law Enforcement Strategies to Identify and Respond – The proposed initiative includes an enhancement of WAO which focuses on law enforcement and their ability to identify and respond to youth with mental health, substance use and co-occurring disorders. For some youth, contact with law enforcement is their first call for help and may be the first time they have the opportunity to get the help they need. For others, it is the last resort after exhausting all other options to accessing care. Schools have often proven to be a pipeline into the juvenile justice system in part due to the integration of School Resource Officers into many school’s faculty and staff. All too often, when untrained officers intervene with students engaged in disruptive behaviors, including cases involving mental health and substance use disorders, the opportunity for communities to intervene with quality services is lost.

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Partners. The Center has extensive experience providing co-occurring treatment services to adolescents. Since 1997, The Center has operated a Level II Adolescent Residential Program serving youth ages 13-18. The program serves youth with a primary substance use disorder but also treats co-occurring disorders including conduct disorder, depression, anxiety, attention-deficit / hyperactivity disorder, eating disorders, including anorexia and bulimia and trauma related behaviors. The practical experience of working with these youth has produced a familiarity and capability to address common behavioral issues including anger management, attention seeking and manipulation, compulsiveness and suicidal ideations.

In addition to the services provided by the Wraparound Teams, WAO participants will receive priority placement within The Center's continuum of services for adolescents with substance use and co-occurring disorders. This includes outpatient and residential treatment as well as school-based interventions. As a founding member of ASPIRE Health Partners along with Lakeside Behavioral Healthcare, participants served by The Center's Wraparound Teams can also access Crisis Intervention services, case management and pharmacological services provided by Lakeside. The Center's services for youth have been recognized by CARF as "Exemplary" for their ability to provide innovative services, engage youth and their families and deliver strong outcomes. The Center's staff will provide training to other WAO teams to ensure that these ancillary services, as well as those services

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insurance and income that is critical for family stabilization. Historically, an average, only 37% of eligible individuals have their initial applications approved and appeals can take year72(e)-5.070753658(i)1.d [(t)-2.53597(a)-5.07194(k)-0.95.e,