

## North Dakota Dual Status Youth Policy and Protocol

### I. Introduction

The term “dual status youth” refers to youth who have come into contact with both the child welfare and juvenile justice systems.

Research suggests that dual status youth have experienced “complex trauma” (complex trauma is exposure to varied and multiple traumatic events, often of an invasive, interpersonal nature) at a higher rate than general population youth. For many of these youth, exposure to these traumatizing experiences causes behavior problems, resulting in contact with the juvenile justice system.

Once involved with the juvenile justice system, dual status youth are more likely to be detained, detained for longer periods of time, and are more likely to be formally processed and placed outside the home than youth without child welfare involvement. Detention, court processes, and placement are costly interventions. These interventions often contribute to re-traumatization of dual status youth – subjecting them to interruptions in their education, placements, and services. In addition, research shows that dual status youth experience poor long-term outcomes despite these traditional interventions.

The goal for these children is to change the trajectory of alleged abused and/or neglected children from going into the Juvenile Justice System (including Juvenile Court, Probation, and Corrections) by establishing child and family-centered multi-disciplinary policies and practices.

### II. Definitions

- a. **Dually-identified youth:** youth who are currently involved with the juvenile justice system and have a history in the child welfare system but no current involvement
- b. **Dually-involved youth:** youth who have concurrent involvement (diversionary, formal, or a combination of the two) with both the child welfare and juvenile justice systems
- c. **Dually-adjudicated youth:** youth who are concurrently adjudicated in both the child welfare and juvenile justice systems (i.e. both dependent and delinquent)
- d. **Active Involvement** – any current involvement with a child welfare or juvenile justice entity; i.e. an “open case or assessment”
- e. **Previous involvement** – past involvement with a child welfare or juvenile justice entity; i.e. a “closed case or assessment”
- f. **Open assessment** – child protection report in follow up that hasn’t been approved or denied by the Department of Human Services regional representative

- g. Services required** – decision that is made by the Department of Human Services as a result of a child protection assessment that child abuse/neglect is confirmed

**III. Target Population:** *a youth who has an “open assessment” or “services required” finding and an unruly/delinquent referral.*

**i.e. A youth who has an open CPS assessment or In Home/foster care case management (Child Welfare) and an open unruly/delinquent referral, probation or custody to DJS; currently with a history in either system since 2010.**

**IV. Protocol**

a. Identification

- i. All youth meeting the definition of the target population specified above will be identified regularly through an automated process.

1. Weekly report

- a. An automated report will be generated cross referencing Juvenile Court CMS database and DHS frame database. The report will identify youth that meet the target population. The report will be emailed to the Dual Status Coordinator and the Court Improvement Coordinator on a daily basis. The Dual Status Coordinator or the Court Improvement Coordinator will then send the names to the appropriate counties to the appropriate email addresses designated by that County at a minimum of twice a week.

b. Documentation

- i. When a youth is identified as a dual status youth, the youth will be designated a dual status youth within Juvenile Court CMS database by the Court Improvement Coordinator. This should be flagged for the Juvenile Court Officer III (JCO III) to help expedite actions on behalf of a dual status youth.

c. Identification

- i. Prior to making an intake decision on a new referral, the JCO III and/or support staff checks the court database (CMS) for any entries of the youth, determining whether the youth is dual status.
- ii. If any youth are on the report that either Juvenile Court or Social Services are currently working with or have previously worked with, they will make contact with each other within 48 hours.

- b. Actions Following Identification
  - i. For a new Delinquency or Unruly Referral/Citation
    - 1. If a youth is determined to have active involvement with child welfare, the JCO III will contact the local social service office and the assigned social worker and/or supervisor on the youth's case prior to making an intake decision.
    - 2. If youth is determined to have previous involvement with child welfare, the JCO III will contact the local social service office to request information that will assist the JCO III prior to making an intake decision.
  - ii. For a new Child Protection Services (960) referral
    - 1. If a youth is determined to have a current active delinquency or unruly case, the CPS worker will contact the Juvenile Court to make contact with the assigned court officer as part of the initial assessment within one week.
    - 2. If a youth is determined to have a previous delinquency or unruly case active or inactive, the CPS worker will contact the Juvenile Court to request a courtesy update on the youth.
  - iii. Information to be shared between agencies
    - 1. **Juvenile Court to Social Services:**
      - a. Current and historical delinquent/unruly referrals
      - b. Probation case plan (services being provided)
      - c. Current/ongoing concerns regarding youths behaviors (e.g., trauma screen)
      - d. Parental cooperation with assisting in the completion of the case plan
      - e. Safety issues in regards to the parents and/or youth
    - 2. **Social services to Juvenile Court**
      - a. Type of abuse – current and historical (e.g., trauma screen)
      - b. Status of assessment
      - c. The subject of the report
      - d. Services being provided or offered
- c. Multi-Disciplinary Team Meetings (MDTs)
  - i. Criteria
    - 1. MDTs are required to be held in the following circumstances:
      - a. When there is active involvement of the youth in both systems
      - b. When there is a youth in detention or another placement who cannot return home
    - 2. MDTs can also be held whenever the social worker and court officer feel, within their discretion, that an MDT would be necessary to the youth and/or family's success.

ii. Purpose

1. Although each MDT will define its own unique purpose, the following are guidelines for the goals of an MDT meeting:
  - a. Determine if placement of the child outside the home is necessary and/or appropriate
  - b. Engaging families and youth in services to avoid further involvement or deepening their involvement in the Juvenile Court system
  - c. To jointly assess the risk, needs and strengths of the family
  - d. To assure the MDT members adopt a trauma-informed response to youth and family, including consideration of trauma-specific treatment if appropriate
  - e. Determine roles and responsibilities to accomplish and support the completion of a jointly developed plan.
  - f. Plan for follow up meetings (this could be meetings that are already in place by the agencies working with the family) to check on the status of the case plan.

iii. Attendees

1. Required:
  - a. Parents
  - b. Youth
  - c. Social Services
  - d. Juvenile Court
2. Invited:
  - a. Personal supports identified by youth and/or family
  - b. Other professionals working with the youth/family

iv. Procedures

1. If available and the case meets criteria, a referral can be made to Family Centered Engagement and that program can be utilized as the MDT. If Family Centered Engagement is not available the traditional MDT format will be utilized (Format attached – appendix A).
2. Guidelines for information sharing:
  - a. Parent/legal guardian will be asked to sign a multi-agency release of information in preparation for the MDT

**V. Court Procedures**

A Draft bench card has been developed and has been provided to all Judges and Judicial Referees.

**VI. Training**

Trainings to be held in the 4 Units of the Courts: Fargo, Grand Forks, Minot and Bismarck. The training will also be recorded and available online.

**VII. Tribal Partnership**

Tribal custodians and ICWA workers will be invited to attend all MDT's for any child that is enrolled or eligible for enrollment in a Native American tribe.

**VIII. Evaluation Process**

Court Improvement grant will provide external contract for evaluation.

Appendix A: MDT Process

## **Multi Disciplinary Team (MDT) Facilitator Task Checklist**

**Upon determination that an MDT should be convened the Juvenile Court Officer (JCO) and County Social Services (CSS) worker should go through the following tasks and identify who will complete them. Place of name of the person who will be completing each task in the line provide so there is no confusion. Ensure that each task is assigned prior to the meeting.**

### **Before the Meeting**

- Identify an MDT facilitator. \_\_\_\_\_
- MDT facilitator will follow up with the JCO/CSS worker and ask for any additional clarification or information if needed \_\_\_\_\_
  - The MDT facilitator and JCO/CSS worker will be in contact during the pre-meeting preparation. The facilitator will ask questions to ensure clarity regarding the purpose, expectations and decisions that need to be made. The facilitator may also inquire about information or concerns the JCO/CSS worker has with any potential conflicts, safety, and the non-negotiables for the meeting. In rare circumstances, a meeting location change may be necessary to ensure safety of the attendees.
- Confirm the meeting date and time \_\_\_\_\_
- Visit with parent/caregivers to review process, purpose and invite list  
\_\_\_\_\_
- Contact people on the invite list to prepare them for the MDT meeting. In talking with potential attendees, the MDT facilitator discusses:
  - Why they are calling
  - The purpose of the MDT
  - Their role as a neutral facilitator
  - The agenda for the meeting
  - Whether they have any concerns about participating
  - If a family member identifies someone for the meeting who the parent has not listed on the referral form, the MDT facilitator will re-contact the parent/caregiver to secure their consent \_\_\_\_\_
- Arrange for any security needs, language access, and disability access  
\_\_\_\_\_
  
- The MDT facilitator will pre-staff with JCO/CSS worker to inform her/him of all the participants invited and prep the referral worker with any information they may need to be productive in the meeting. The facilitator may share

with the referral worker their perception of the family's feelings about participating in the MDT meeting. \_\_\_\_\_

- Check in with child/youth as appropriate \_\_\_\_\_

### **During the Meeting**

- Introduction \_\_\_\_\_
- Review purpose and ground rules \_\_\_\_\_
- Focused and diligent on ensuring the safety concerns for the child are fully addressed \_\_\_\_\_
- Keep meeting on track by redirecting participants as needed \_\_\_\_\_
- Encourage meeting participants to share any strengths, supports, concerns and ideas \_\_\_\_\_
- Utilize group process for consensus agreement \_\_\_\_\_
- Document discussion and action/safety plan and make copies for all participants \_\_\_\_\_

### **After the Meeting**

- Hand out and collect satisfaction surveys \_\_\_\_\_
- Complete data checklist and enter data into the reporting system \_\_\_\_\_
- Follow up with the referring worker approximately 3 months after the meeting to collect outcome data on the referred case and enter the outcome data into the reporting system \_\_\_\_\_

## **Meeting Agenda**

Total Time: 1.5 – 2.0 hours

### **Opening (approximately 15-20 minutes)**

- Introductions/welcome
- Sign-in
- Meeting guidelines, rules and boundaries
- Identify situation – Why are we here? (presented by both workers)
- Purpose /goal of the meeting

### **Discussion (approximately 30 minutes)**

- Strength and supports
- Safety, needs and concerns
- Trauma history, impact, and relevant services
- Ideas
- Non-negotiables

### **Creating a Plan (approximately 15-20 minutes)**

- Private Family Time

### **Wrap up (approximately 15 minutes)**

- Plan presentation and clarification
- Plan acceptance
- Satisfaction survey/data collection, if applicable

## **Suggested list of who should be invited to an MDT**

MDT's are family driven. If a parent(s) objects to the attendance of any potential participant other than County Social Services and/or Juvenile Court staff, the referring worker and/or facilitator will discuss with the parent(s) the advantage of the participant's presence in the process. If the parent(s) continues to object, then the parents' wishes should be honored.

- Parent(s) and/or legal guardians
  - Mother
  - Father
  - Step-Parent
    - They are the expert on the family's needs and strengths
    - Presence and involvement is essential
- Child(ren)
  - Over the age of 12 and developmentally appropriate.
  - Under the age of 12 should be considered on a case-by-case basis
  - If the child(ren) are not able to attend, the referring worker/facilitator can obtain the child(ren)'s view prior to the MDT.
- Current Caregivers and Kin Providers
  - Key team members who assist in providing information regarding:
    - Child(ren)'s adjustment
    - Progress
    - Needs
    - Discuss placement ideas
  - Mother
  - Father
  - Step-Parent
  - Sibling(s)
  - Grandparents (Maternal and Paternal)
  - Aunts, Uncles and Cousins (Maternal and Paternal)
- Extended Family and Non-Relative Supports
  - Identified by parent(s) or referring worker to provide support, assistance or resources to the child(ren) and/or parent(s)
  - Participate in developing ideas and reaching a placement decision
- Community Resource Representatives
  - Defined as a member of the family's 'community' whether based on neighborhood, ethnicity, religion or other natural connection
  - Identified by referral worker and/or parent(s) based on an existing partnership, to provide support, resource expertise, cultural understanding and an external perspective to decision making

- Service Providers (currently or previously involved with the family):
  - Chemical Dependency Professionals
  - Domestic Violence Experts
  - Mental Health Clinicians
  - Public Health Nurses
  - Educational Provides
  - Guardian Ad Litem
  - Private Agency Staff
  - Human Service Center Staff
  - Youthworks Staff
  - Foster care case manager and/or foster parent(s)
  - Placement Facility Staff
  - Juvenile Court Staff
  - Police Youth Worker
  - Division of Juvenile Services Staff
  - ICWA Workers
    - When the family is eligible or a member or identifies with a tribe or band.
  - Attorney's in a supportive role.
    - These meetings are not legal proceedings and are not Court actions.

# **DSYI Multi-Disciplinary Team Release/ Exchange of Information Form**

The following information will be shared with all conference participants

**Goal/purpose of the conference:**

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**Persons to be invited to the conference** (family, friends, and service providers):

<b>Name</b>	<b>Address</b>	<b>Phone Number</b>	<b>Relationship to child/parent</b>

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**Parent or Custodian Consent:**

I consent that the persons listed above who have been invited to participate in the Multi-Disciplinary Team Meeting, may hear information about me and my child(ren). In addition, I specifically authorize the County Social Services Board, Juvenile Court, other service providers, family members and other conference participants to freely exchange information about me and my child(ren), between and among each other so that the meeting facilitator can be fully informed. This authorization is voluntary and may be revoked at any time upon written request. Any information released prior to your written revocation of this authorization will not be a breach of confidentiality.

Information shared at this meeting will not be used for the purpose of prosecuting a participant for criminal behavior, unless the information creates a mandatory duty to report.

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date

## Referrals and Timeframes

In order to maintain MDT model fidelity, it is important that eligible referrals are made in accordance with the timeframes noted below. If an eligible referral has multiple reports across multiple categories, the provider will follow the timelines of the highest need/category.

TYPES OF REFERRALS	REFERRAL TIMELINE	FCE MEETING TIMELINE
<p style="text-align: center;"><b>Emergency Removal</b></p>	<p style="text-align: center;">Immediately</p>	<p style="text-align: center;">Within 96 hours of the referral being received by the provider</p>
<p style="text-align: center;"><b>Reports of Suspected Child Abuse or Neglect (CPS)</b></p> <p style="text-align: center;"><i>NOTE: The MDT meeting should precede any staffing that occurs</i></p>	<p style="text-align: center;">Within 7 calendar days from receipt of a child maltreatment report (i.e. SFN 960)</p>	<p style="text-align: center;">Within 7-12 calendar days of the referral being received by the provider</p>
<p style="text-align: center;"><b>In-Home Case Management</b></p>	<p style="text-align: center;">As soon as appropriate</p>	<p style="text-align: center;">Within 7-12 calendar days of the referral being received by the provider</p>
<p style="text-align: center;"><b>Dual Status Youth</b></p>	<p style="text-align: center;">Within 7 calendar days from receipt of a child maltreatment report (i.e. SFN 960) or as soon as appropriate</p> <p style="text-align: center;"><i>NOTE: The agency first assigned to the child/family will submit the referral to the provider (i.e. either the county worker or juvenile court officer)</i></p>	<p style="text-align: center;">Within 7-12 calendar days of the referral being received by the provider</p> <p style="text-align: center;"><i>NOTE: If a shelter care hearing is imminent the case would be considered 'emergency removal' and would fall under those timelines.</i></p>

## **As a Facilitator, how can I make the most of the MDT process?**

- **Be familiar with the case history.**
  - Be prepared to talk about the referral history and findings along with the issues of concern. Be prepared to talk about the immediate dangers as well as the risks. Identifying the family strengths and supports and being familiar with the history and services offered to date, is critical to making the best and most informed plan.
  - Assure case is reviewed from a trauma-informed perspective and services and supports address any trauma-related responses/behaviors.
- Do your best to assure youth and family feel safe by outlining the agenda for the meeting, orienting them to the physical space, offering choices when possible, and asking them if there is anything that can be done to make them feel comfortable or psychologically safe during the meeting.
- **Have an open discussion regarding any rules and boundaries of the MDT.**
  - These rules may to be written down where everyone can see them throughout the meeting.
- **Talk directly to the parents and other participants. Make eye contact.**
  - And do your best to refrain from addressing all your comments to the facilitator.
- **Be encouraging.**
  - Keep in mind that families are frequently in crisis at the time of the FCE. They are under a great deal of stress and are often not at their best. By being respectful and encouraging you can help turn a crisis into an opportunity for positive change.
- **Use the parent and child's name. Refrain from using words like "the mother" or "the youth".**
  - This implies the person in question isn't present or that they are not a full participant in the meeting and could be off-putting. Remember one of the keys of an MDT is to create "team" out of the group of individuals at the meeting.
- **Watch your nonverbal behavior.**
  - This includes obvious things like sighing or rolling your eyes but also includes arriving late to the meeting or checking your cell phone. Keep in mind, when people are stressed, seemingly innocuous behaviors can take on a heightened meaning.
- **Present information clearly, fairly and completely.**

- Laying out the facts in a complete and unbiased fashion will facilitate understanding and create credibility.
- **Avoid using acronyms or jargon.**
  - Not everyone will ask questions or ask for clarification when a term is used that they do not understand. In order to make people feel a part of the "team" remember to use language that everyone can understand.
- **Recognize strengths and commend the family's efforts to make positive change.**
  - Successes are built on small accomplishments. Families need to have even the smallest step in the right direction acknowledged, amplified and celebrated by the department as well as themselves.
  - Write out the strengths and supports of the family or youth for all participants to see throughout the meeting.
- **If the facilitator is also the case worker for the youth and family, it is recommended that a supervisor also be present, as the supervisor may need assist in facilitating the meeting as a neutral party.**