



SB 207

Part VI. Juvenile Court Mental Health Assessments

For the convenience of all, all participants will be Muted throughout the presentation.

Please use the Chat for all Questions

Please write in the Chat your name, position/agency, and best contact email.

We will do our best to get to all your questions and concerns today or by email in the next several days.



Presentation Agenda

Overview of SB 207

Peter Kuhns, JJ Director of Clinical Services

Severe Emotional Disturbance

Benjamin Locklear, Ph.D.

DHHS Justice Systems Innovation Section

CCA Suggested Language

Sonja Frison, JJ Psychological Program Manager

Care Review Team Process

Maxine Armwood, JJ Director of Court Services

Question and Answer

All



Juvenile Court Mental Health Assessments

(SB 207, Part VI)

November 17, 2021



SB 207, Part VI

- Substantially amends G.S. 7B-2502
 - Evaluation and treatment of undisciplined and delinquent juveniles
 - Legislative changes conform the statute to current clinical practice
 - And address confusion caused by *In re E.M.* (N.C. App. 2019)
- Effective Date
 - Applies to “*petitions filed*” on or after December 1, 2021.



Comprehensive Clinical Assessment (CCA)

- The court must order a CCA or equivalent evaluation whenever a juvenile:
 - Has been adjudicated delinquent;
 - Has a suspected mental illness, developmental disability, or intellectual disability; and
 - CCA or equivalent assessment was not completed w/n last 45 days before adjudication.

G.S. 7B-2502(a2)



Care Review Team

- If a CCA or equivalent assessment is court ordered, the court must review it before disposition.
- The court must order JJ to convene a Care Review Team if, the court finds that:
 1. Juvenile has a severe emotional disturbance, developmental disability, or intellectual disability;
 2. The severe emotional disturbance, developmental disability, or intellectual disability *substantially contributed to the delinquent behavior*; and
 3. The juvenile is eligible for a Level 3 disposition and/or is recommended for a PRTF.

G.S. 7B-2502(a3)

Severe Emotional Disturbance – G.S. 7B-1501(24a)

“A diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the DSM-5 that resulted in functional impairment which substantially interferes with or limits the child's role or functioning in family, school, or community activities in a person who is under the age of 18.”



Severe Emotional Disturbance

- ▶ Requires individual to be:
 - ▶ Under the age of 18; or
 - ▶ be a person between the ages of 18 and 21 who was receiving services prior to 18th birthday and that must be continued for therapeutic benefit.
 - ▶ A clinically significant disorder of thought, mood, perception, orientation, memory or behavior that is listed in the current edition of the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders (DSM) (Exclude IDD/DD and Substance Use Only)
 - ▶ Functional Impairment for 1 year (or a professional prediction of impairment for 1 year without clinical intervention) in at least 2 of the following areas: Self-Care; Interpersonal Relationships; Family Life; School/Work; Self-Direction

Intellectual
Disability
G.S. 122C-3(17a)

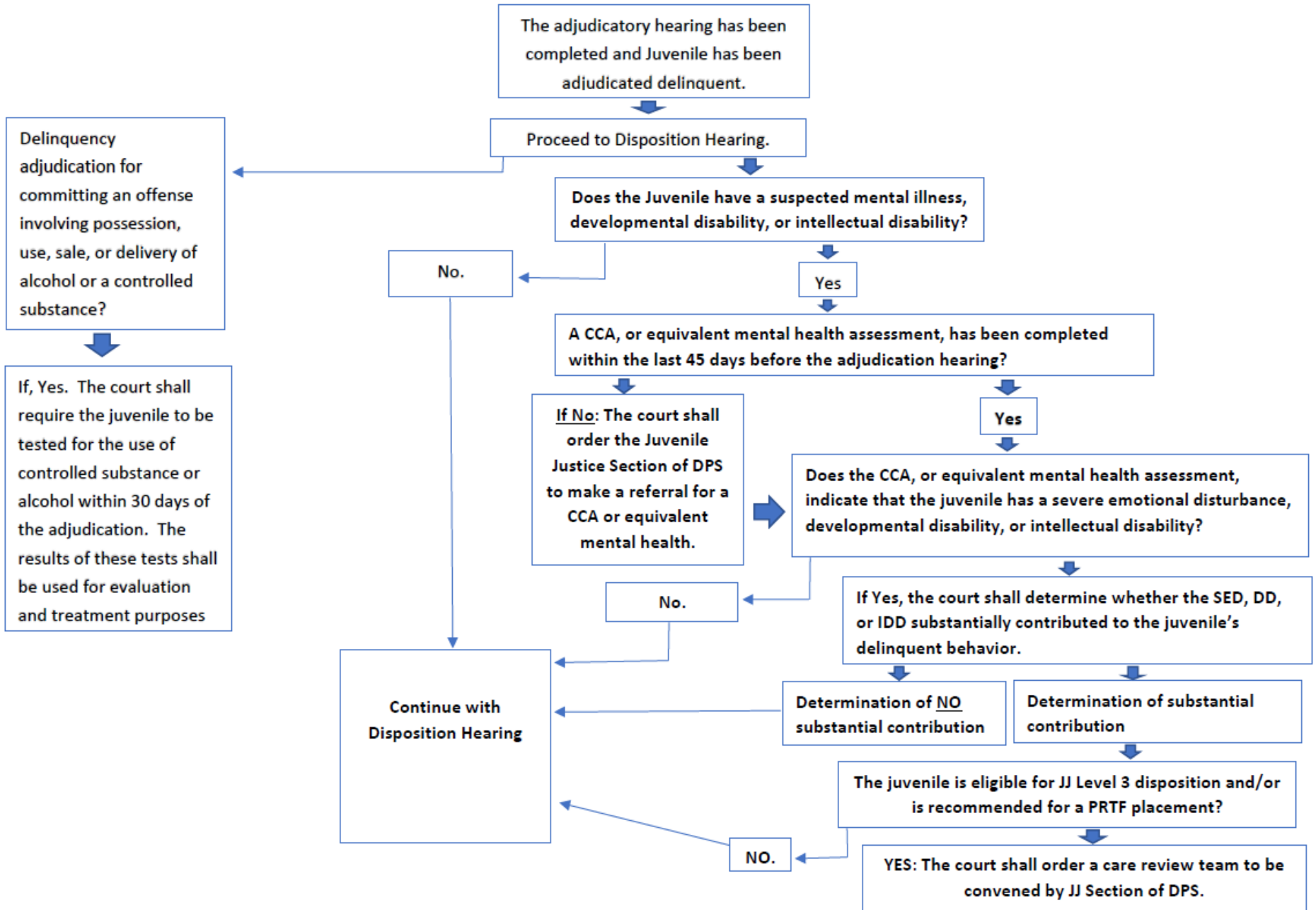
A developmental disability characterized by significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested before age 22.

Developmental Disability G.S. 122C-3(12a)

A severe, chronic disability of a person that satisfies all of the following:

- a. Is attributable to one or more impairments.
- b. Is manifested before the person attains age 22, unless the disability is caused by a traumatic brain injury, in which case the disability may be manifested after attaining age 22.
- c. Is likely to continue indefinitely.
- d. Results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, capacity for independent living, learning, mobility, self-direction, and economic self-sufficiency.
- e. Reflects the person's need for a combination and sequence of special interdisciplinary, or generic care, treatment, or other services that are of a lifelong or extended duration and are individually planned and coordinated; or when applied to children from birth through age four, may be evidenced as a developmental delay.

JUVENILE COURT MENTAL HEALTH ASSESSMENTS AND CARE REVIEW PROCESS FLOWCHART





Care Review Team

- The team must include (at a minimum):
 - Juvenile
 - Juvenile’s parent, guardian, or custodian
 - Representatives of Juvenile Justice Section
 - Representative of LME/MCO or prepaid health plan (PHP)
 - Representatives of any State agency or local DSS currently providing services to juvenile
- Recommendations must be submitted to the court w/n 30 days of court order convening the team.
- Court must review the recommendations when determining the juvenile’s disposition.

G.S. 7B-2502(a4)



Payment for Treatment

- If juvenile does not have insurance, court must conduct a hearing to determine who should pay, and it can order the county to pay, if county has notice and opportunity to be heard.
- Court must allow parent to arrange for evaluation and treatment, but if parent is unwilling, it can order any needed treatment and order the parent to pay.

G.S. 7B-2502(b)



Commitment to State Hospital

- The court shall not commit a juvenile directly to a State hospital or developmental center and any orders purporting to do so are void, except for an order requiring an examination to determine capacity to proceed.

G.S. 7B-2502(c1)



Benjamin Locklear, Ph.D.

Senior Psychologist
Justice System Innovation Section
DHHS



Sonja Frison, Ph.D.

Psychological Program Manager
NC Juvenile Justice



Maxine Armwood

Juvenile Justice Director of Court Services

Care Review Facilitation Coordination Services



- ▶ Court Services is working to hire a Care Review Facilitator to coordinate and assist JCC with care review process
- ▶ JCC will notify Care Review Facilitator and provide the following Information
- ▶ Begin working with Facilitator to start the Care Review Process
- ▶ QA/QI staff will notify Facilitator when commitment parameters have been submitted for review for a juvenile eligible for commitment

Care Review Team Shall

Develop a recommendation plan for appropriate services and resources that address the identified needs of the juvenile

Submit recommendation to the court within 30 calendar days of the order requiring the team



Payment for Treatment–

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- ▶ If the juvenile does not have insurance for the recommended treatment, the court SHALL conduct a hearing to determine who should pay the cost of assessment, evaluation, or treatment
- ▶ County manager, or any other person who is designated by the chair of the board of county commissioners, of the county of the juvenile's residence shall be notified of the hearing, and allowed to be heard

CARE REVIEW MANUAL

will include....

- Care Review Referral Form
- What to Expect at Care Review
- Care Review Recommendation Plan
- Care Review Meeting Confidentiality Sign-In Sheet
- JJ Care Review Process Checklist
- Additional Resources



Paradigm Shift

- ▶ New way we will assess juveniles prior to recommending commitment or PRTF placement
- ▶ Ensuring a current CCA has been completed if suspected Mental Illness (MI), Developmental Disability (DD) or Intellectual Disability (ID)
- ▶ Completion of a Care Review to assess services and treatment needed; ensuring means for payment



Questions?

Latoya.Powell@ncdps.gov

Peter.Kuhns@ncdps.gov

Maxine.Evans.Armwood@ncdps.gov