

Juvenile Justice Community Based Services for Probation Involved Youth & Families		CommuniCare Health Centers	Melissa Marshall, Chief Executive Director
Program Purpose	To provide Community Behavioral Health Services to Juvenile Justice Youth for the Child, Youth, and Family Branch.		
Program Information	The Community Behavioral Health Services will include mental health, family counseling, and/or substance abuse treatment services for up to 50 Juvenile Justice Youth at any given time who are under 21 years of age and are residents of Yolo County or have system involvement in Yolo County. Services and treatment will be community-centered rather than facility-based and patterned upon evidence-based or best practice-based models of treatment, incorporating principles of resiliency and recovery. Services will be informed by Probation Case Plans and often driven by court orders.		
PM1: How much did we do?			
1.1	Number (#) of open clients		
1.2	Number (#) of Intakes		
1.3	Number (#) of unplanned discharges		
1.4	Number (#) of successful discharges		
1.5	Number (#) of referrals received		
1.6	Number (#) of closed out referrals		
1.7	Number (#) of families served with non-English speaking caregivers		
PM2: How well did we do it?			
2.1	% of clients who received an intake assessment within 10 days of referral		
2.2	% of clients assessed with Child and Adolescent Needs and Strengths (CANS) within 30 days		
2.3	% of discharged clients with a CANS completed at discharge		
2.4	% of clients assessed with a CANS every 6 months.		
2.5	% of clients with a facilitated CFT every 90 days		
PM3: Is anyone better off?			
3.1	# of clients with decrease in # of items needing action on the Child Behavioral/Emotional Need section of CANS from intake to discharge. % of clients with decrease in # of items needing action on Child Behavioral Emotional Need section of CANS from intake to discharge.		
3.2	# of clients with decrease in # of items needing action on Life Domain Functioning section of CANS from intake to discharge. % of clients with decrease in # of items needing action on Life Domain Functioning section of CANS from intake to discharge.		
3.3	# of clients with decrease in # of items needing action on Risk Behaviors section of CANS from intake to discharge. % of clients with decrease in # of items needing action on Risk Behaviors section of CANS from intake to discharge.		
Continued below			

3.4

of clients who remained in their home (without juvenile hall, psychiatric hospital, or STRTP) or maintained foster home placement.

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