

SERVICE REFERRAL MATRIX

		SAVRY RISK/NEED AREA:					
		Report All HIGH and MODERATE in Disruptive Behaviors, Mental Health, Substance Abuse, and/or Family Need Areas					
	Disruptive Behavioral Problems & Mental Health/ Emotional Stability	Substance Abuse: Alcohol or Other Drugs	Family	Education / Employment	Peer / Pro-Social Activities	Community	
Relevant Items	P4, 17, 18, 20, 21 P6, 5, 7, 13, 22	19	P3, 6, 8, 14	P5, 10, 24	P1, P2, P3, 11, 12, 15	P2, 16	
LOW	Low Risk indicates low probability of future violence and/or delinquent behavior. Enhance protective factors by actively recognizing strengths and strategically building upon pre-existing strengths. Remember, increased exposure to the juvenile justice system increases risk of low risk juveniles.						
LOW	<p>Promote parent supervision and support adult role models/mentors working with child Refer for parenting skills training/support if needed. Refer to Community Service Worker (CSW), Recommend/Require pro-social activity (sports teams, church groups, community programs)</p> <p>Recommend pro-social activity (sports teams, church groups, community programs)</p>	<p>Promote parent supervision and support adult role models/mentors working with child Refer for parenting skills training/support if needed. Recommend pro-social activity (sports teams, church groups, community programs)</p> <p>Have youth inform guardian of SA/use, with who, when, and how achieved to increase ability to supervise.</p>	<p>Promote parent supervision and support adult role models/mentors working with child Refer for parenting skills (FINS) training/support if needed. Recommend daily activity with parent(s) / mentor (meal, supervised homework, game)</p>	<p>Parent is to maintain contact with teachers & school. P.O. to check with school/school administrators/work.</p>	<p>Recommend pro-social activity (sports teams, church groups, community programs, scouts). Reduce affiliation with delinquent peers by increasing opportunities with non-delinquent peers.</p> <p>Continue to support pro-social activity reducing barriers to participation within the community.</p>	<p>Community Service Manna House Goodwill Boys/Girls Club</p>	
MOD	<p>Refer for behavioral assessment (e.g. Court Mental Health Advocate). Possible Cognitive-Behavioral treatment to target specific behaviors and include the youth's parent/family or school-based interventions for behavior management, skills development. Parent skills training and supervised practice.</p> <p>Consider using FFT or MST.</p> <p>Obtain current MAYSI-2 report or refer for MAYSI-2 if more than 30 days since last screen.</p> <p>If MAYSI report shows "Warning" for any two (2) scales, refer for psychological, and, if indicated, psychiatric evaluation.</p> <p>Family education and develop parent advocacy for treatment services</p> <p>Service referral to cognitive-behavioral based tx with strong family component. (JWRAP)</p>	<p>Refer to Substance Abuse Services for further substance abuse screening & assessment, and if needed referral to an appropriate level of treatment Drug Court or other individual/family, motivational engagement based treatment is recommended. AA/NA and peer group therapies are not particularly effective with adolescents. (CCDC)</p> <p>Conduct random/routine drug tests (if in treatment, Urine Drug Screen (UDS) results should be handled in consult with tx provider. Even with a positive UDS, youth may be progressing in tx).</p> <p>Refer to outpatient treatment provider, Assess to Recovery (ATR) service, or as a measure of last resort, inpatient tx with strong aftercare/re-entry services.</p>	<p>Refer to Strengthening Families program or other similar evidence-based family/parent skills development program.</p> <p>Consider family therapy, such as MST or FFT, J-Wrap. Use FFT with high ratings on disruptive behaviors or mental health. Use MST for high ratings on disruptive behaviors, mental health, or substance abuse</p>	<p>Obtain educational evaluations, if available. Recommend tutoring through community or school-based program.</p> <p>P.O. to monitor school behavior and attendance with disciplinarian, teacher, or school counselor. Consider using a daily behavior checklist.</p> <p>Refer to After-school tutoring program, obtain IEP, & speak/coordinate with Behavior Strategists.</p> <p>If out of school, refer to employment training and placement services, GED or Vocational Technical education.</p>	<p>Possible services include Life Skills and Mentoring. Increase leisure activities and pro-social activities. Strongly encourage or consider assigning parent/guardian to engage juvenile in community recreational opportunities, faith-based organizations, an after-school program, volunteerism, or other suitable pro-social activity.</p> <p>Increase positive social interactions by referring to faith-based organizations, youth groups, or youth community centers.</p> <p>If social skills issues and not peer associations, consider also referring to cognitive-behavioral treatment that can target interpersonal skills.</p> <p>Reduce barriers to participation by finding groups willing to supplement activities, etc. Assign a mentor if positive parent figure is unavailable or involve in mentored activities through the Boys/Girls Club or other such entities.</p>	<p>With high disruptive behavior scale and 16 years old or older, refer for individual therapy.</p> <p>If 15 years old or under, refer to family therapy or refer for mentoring.</p> <p>Increase exposure to opportunities outside immediate neighborhood, including Community Service Worker (CSW), jobs, sports and/or youth group activities.</p>	

Rapides Parish Dept. of Juvenile Services (Rev. 05/29/09) / **KRH's revisions 09/22/09**

***Has Disruptive Behavioral probs & mental/emotional stability columns combined and the peer/social skills & pro-social activity/recreation columns combined.**

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	<p>Indicates need for a psychosocial assessment and plan targeting both mental health and delinquency risk facts. If diagnosed with mental illness, refer to a psychiatric rehabilitation provider, or MST. Combine any psychopharmacological intervention with indiv/family cognitive-behavioral based treatment (medication alone will have limited effectiveness)</p> <p>If outpatient services fail, refer to inpatient/residential services with strong aftercare/reintegration components: Crossroads Central Hospital Briarwood</p>						
HIGH	<p>Indicates need for behavioral specific psychosocial evaluation if mental health scale is moderate.</p> <p>Use individual/family cognitive-behavioral therapy with strong continency management, FFT, or MST.</p> <p>If community-based services fail, evaluate and consider out-of-home placement with a strong family and reintegration/aftercare component. (e.g. Crossroads)</p>	<p>Refer to Substance Abuse Services for substance abuse assessment, and referral to an appropriate level of treatment (Drug Court, MI/CBT/RP tx provider,</p> <p>Conduct random/routine drug tests (if in treatment, UDS results should be handled in consult with tx provider. Even with a positive UDS, youth may be progressing in tx).</p> <p>Refer to outpatient treatment provider, Assess to Recovery (ATR) service, or as a measure of last resort, inpatient tx with strong aftercare/re-entry services.</p>	<p>Refer for FFT or MST. If services ineffective, consider an evaluation assessing the level of violence, abuse, neglect that might necessitate out of home placement.</p>	<p>Engage youth in school-related services to target improving learning, study, classroom skills. Consider possible changes in classroom and/or school settings. After hour treatment for mod/high scores in other risk areas may interfere with completion of homework, so be mindful in referring. Consider adult ed., Youth Challenge Program (YCP), and/or alternative schools. Assist in managing admissions and other processes that may be a barrier to the youth and family.</p> <p>Consider: Adult Ed. AMI Kids Slocum Aiken 504 Classfction/Homebound Job Corp</p>	<p>Consider more intensive services such as FFT, MST or other cognitive-behavioral or systems treatment to target social skills and improve interpersonal relationships.</p> <p>For girls, be particularly aware of delinquent boyfriends. This is a particular risk factor for females.</p> <p>Require increased structured pro-social activities. Establish a mentor for the youth. Link to after-school activities when possible to increase access when available through the community.</p>	<p>Engage parent/guardian in housing assistance programs, when available. Facilitate community programs that can do outreach to the family. Involve the family in community services beyond their neighborhood.</p>	
Acronyms							