I. POLICY:

The Office of Behavioral Health Services shall ensure that quality services are provided to youth housed in all DJJ secure facilities. Each secure facility shall have a Designated Mental Health Authority that shall be responsible for ensuring that quality behavioral health services are accessible to youth.

II. DEFINITIONS:

Behavioral Health Services: Programs and services required to meet the mental health needs of youth including but not limited to: individual, group and family counseling, crisis intervention, screening, assessment and evaluation, substance abuse treatment, psychological services, psychiatric services, treatment planning and other specialized behavioral health services.

Behavioral Health Staff: At a minimum, Social Service Provider, Juvenile Detention Counselors, Sex Offender Treatment Specialist, Sex Offender Treatment Supervisor, Institutional Program Directors, Social Services Coordinator, Psychologist, Psychiatrist, nurse trained in mental health duties, Professional Social Service Worker, Social Service Worker, substance use treatment staff, and master’s and doctoral level mental health students, and other staff with the education, training and experience adequate to perform the duties required in accordance with professional standards, as authorized by the Designated Mental Health Authority.

Chief of Psychiatric Services: The licensed psychiatrist within the Office of Behavioral Health Services who oversees the delivery of psychiatric services statewide.

Chief of Psychological Services: The licensed psychologist who oversees the delivery of psychological services statewide.
Consulting Psychiatrist: The licensed psychiatrist who is available to facility psychiatrists for consultation on matters related to clinical practice and psychotropic medication related issues.

Designated Mental Health Authority (DMHA): The individual responsible for the facility’s behavioral health services, including ensuring the quality and accessibility of all behavioral health services provided to juveniles. The designated mental health authority must be a mental health professional with at least a master’s degree in a mental health related field.

Designated Responsible Clinician (DRC): The individual responsible for the clinical quality of the facility’s behavioral health services and makes final decisions on matters. The designated responsible clinician must be a licensed mental health professional with at least a master’s degree in a mental health related field.

Licensed Mental Health Professional (LMHP): A licensed psychiatrist, licensed psychologist, Licensed Clinical Social Worker (LCSW), Licensed Professional Counselor (LPC), Licensed Marriage and Family Therapist (LMFT), or Clinical Nurse Specialist (CNS) in psychiatry/mental health. Licensure at the independent practice level is required in order for a clinician to be considered an LMHP.

Mental Health Intern: A master’s or doctoral level student completing a clinical field placement in a DJJ secure facility.

Qualified Mental Health Professional (QMHP): Mental health staff with education, training, and experience adequate to perform the duties required in accordance with professional standards. When the QMHP is required to complete assessments, or provide individual counseling to youth with mental illness, the QMHP must have at least a master’s degree in a mental health related field, training, and experience in the provision of mental health assessment and counseling procedures. A master’s-level student under the supervision of a QMHP may perform the functions of a QMHP.

Regional Behavioral Health Services Administrator (RBHSA): Mental health staff who provide support to facility behavioral health staff and oversight to ensure the quality and accessibility of all behavioral health services provided in the facility.

III. PROCEDURES:

A. The Director of Behavioral Health Services will oversee the design, development, and delivery of behavioral health services.

1. The Chief of Psychiatric Services will oversee the delivery of psychiatric services statewide.
2. The Consulting Psychiatrist will be available to consult on clinical and psychotropic medication related issues.

3. The Chief of Psychological Services will oversee the delivery of psychological services statewide.

4. The Regional Behavioral Health Services Administrators (RBHSA) will provide support and oversight to facility behavioral health staff members and ensure the quality and accessibility of all behavioral health services provided in the facility. Duties shall include:
   a) Assess the behavioral health service delivery system;
   b) Assess resource needs;
   c) Oversee staffing issues such as hiring, training, coaching, performance management, and disciplinary actions for clinical issues, etc.
   d) Monitor the facility’s behavioral health quality assurance processes and assist with the development of corrective action plans, as needed;
   e) Develop monthly reports for department administrative staff;
   f) Participate in regional planning of mental health services;
   g) Work with the facility Director and Designated Mental Health Authority (DMHA) to develop and co-sign LOPs for behavioral health policies;
   h) Act as a liaison to other departmental staff;
   i) Advocate for special needs youth;
   j) Participate in and model treatment team processes;
   k) Monitor the use of best practices and OBHS treatment models; and
   l) Ensure that the Director of OBHS is informed in a timely manner of serious and/or significant situations, events, or incidents that involve mental health concerns, interventions, or treatment.

B. The Director of OBHS or designee and the facility Director will identify a Designated Mental Health Authority (DMHA) for each facility.
1. The DMHA’s duties will include:
   a) Coordinate individualized behavioral health services (e.g., substance abuse services, mental health care, etc.);
   b) Ensure the accessibility of behavioral health care services to youth;
   c) Make recommendations regarding facility operation and conditions that may affect the quality of behavioral health services;
   d) Advocate for special needs youth (e.g., referral to the Behavioral Health Placement Review Panel, referral for outside services, special considerations within the facility, etc.); and
   e) Ensure that the RBHSA is informed in a timely manner of serious and/or significant situations, events, or incidents which involve mental health concerns, interventions, or treatment.

2. The DMHA will ensure the completion of Local Operating Procedures (LOP) for all behavioral health policies that require a procedure. The LOPs and all subsequent versions will be signed by the DMHA, Regional Behavioral Health Services Administrator, and the facility Director. The LOP need not be signed on the same day by the above-mentioned signatories, but they must all sign before the effective date of the LOP. The DMHA can make recommendations on all procedures and practices that affect behavioral health services for the youth in order to ensure compliance with professional standards and accepted practice.

3. Provide administrative supervision for facility behavioral health staff.

C. The Director of OBHS or designee, in collaboration with the facility Director, will identify a Designated Responsible Clinician (DRC) for each facility. The Director may designate the same individual as both the DMHA and DRC if that individual meets all of the criteria for both roles. In a facility in which the DMHA and DRC are separate individuals the DRC has final authority over matters of clinical judgment. In cases where facility treatment team members are in clinical conflict and the conflict cannot be resolved at the facility level, the Regional Behavioral Health Services Administrator and the Director of Behavioral Health or designee will work with the facility to resolve the issue.

D. The DMHA, in collaboration with the facility Director, will ensure that all behavioral health services are delivered as appropriate. In addition, the facility Director will provide administrative support to ensure the availability of
necessary behavioral health services for all youth, including any necessary transportation. (See DJJ 12.3, Behavioral Health Autonomy.)

E. Behavioral health staff will make every effort to maintain effective communication with other service providers within DJJ (e.g., health services, community case manager, etc.) and in the community to ensure continuity of needed services and programs.

F. The DMHA will specify in the facility’s behavioral health program plan the staff authorized to perform various behavioral health functions, based on education level, experience, and policy requirements (e.g., daily checks of youth on safety protocols and special management plans, mental health treatment, assessment, behavioral health evaluations, etc.) in accordance with DJJ 12.2, Scope of Behavioral Health Services.

G. The OBHS Chief of Psychology and Chief of Psychiatric Services will provide oversight of the credentialing process (Attachment A). This will include initial and annual review of credentials.

H. The facility Psychiatrist(s) and Psychologist(s) will review and sign the appropriate credentialing documents (see Attachments B and C) within 30 days of his/her hire date and annually between December 1st and January 31st. If the provider has been hired on or after October 1st, he/she does not need to complete the annual credentialing documents for that year.

I. Credential files for all psychologists and psychiatrists will be maintained in the Office of Behavioral Health Services. Following initial and annual credential reviews, facilities will receive notification of results to be included in the clinician’s local file.

J. Qualified mental health staff (e.g., Psychiatrist, Psychologist, Social Service Provider, etc.,) with concurrence by the DMHA and DRC, will make all decisions related to the delivery of access to or the quality of behavioral health services including assessment and diagnostic services.

1. Non-clinical personnel will not make decisions on matters requiring clinical judgment or interfere in clinical decisions.

2. The Director of Behavioral Health Services will have final clinical decision-making authority regarding behavioral health services.

3. For conflicts between security concerns and clinical management of the youth that cannot be resolved at the local level; the DMHA and Director of Behavioral Health Services (or designee) will work in conjunction with
the facility Director to ensure that the youth’s needs are met within security constraints. The Director of Behavioral Health Services may involve the DJJ Medical Director, District Director, Regional Administrators from other areas, Assistant Deputy Commissioner or Deputy Commissioner of Support Services, as necessary.

K. The local operating procedure for this policy will indicate the name and title of the DMHA and the DRC for the facility.

IV. LOCAL OPERATING PROCEDURES REQUIRED: YES

- Designated Mental Health Authority (DMHA) for each facility.
- Identify a Designated Responsible Clinician (DRC) for each facility.