

MEMORANDUM OF UNDERSTANDING

Between the Texas Juvenile Justice Department, the Texas Department of Public Safety, the Department of State Health Services, the Department of Aging and Disability Services, the Department of Family and Protective Services, the Texas Education Agency, and local juvenile probation departments

This Memorandum of Understanding (MOU) is entered by and between the Texas Juvenile Justice Department (TJJJ), the Texas Department of Public Safety (DPS), the Department of State Health Services (DSHS), the Department of Aging and Disability Services (DADS), the Department of Family and Protective Services (DFPS), the Texas Education Agency (TEA), and local juvenile probation departments for the purpose of establishing a continuity of care and services program for juveniles with mental impairments in the juvenile justice system. A single signatory to this MOU will be referred to as a "Party" and collectively TJJJ, DPS, DSHS, DADS, DFPS, TEA, and the local juvenile probation departments will be referred to as "the Parties" in this MOU.

1. AUTHORITY AND PURPOSE:

Texas Health and Safety Code, §614.018 authorizes TJJJ, DPS, DSHS, DADS, DFPS, TEA, and the local juvenile probation departments to identify methods for:

- a) Identifying juveniles with mental impairments in the juvenile justice system for the purpose of collecting and reporting relevant data to the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI);
- b) Developing interagency rules, policies, and procedures for the coordination of care and the exchange of information on juveniles with mental impairments who are committed to or treated, served or supervised by TJJJ, DPS, DSHS, DFPS, DADS, TEA, local juvenile probation departments, Local Mental Health Authorities (LMHAs) or Local Authorities (LAs), and school districts and open-enrollment charter schools; and
- c) Identifying the services needed by juveniles with mental impairments in the juvenile justice system.

2. DEFINITIONS:

- a) Continuity of care and service program refers to the process of
 - 1) Identifying the medical, psychiatric or psychological care or treatment needs and educational or rehabilitative service needs of a juvenile with mental impairments in the juvenile justice system;
 - 2) Developing a plan for meeting the needs identified under Subdivision (1); and

3) Coordinating the provision of continual treatment, care, and services throughout the juvenile justice system to juveniles with mental impairments.

b) Mental impairment is defined at Section 614.001(6) of the Health and Safety Code.

3. MUTUAL RESPONSIBILITIES OF THE PARTIES:

a) Institute a continuity of care and service program for juveniles with mental impairments consistent with the scope of programs administered by each Party.

b) Follow the statutory provisions in Health and Safety Code Section 614.017 relating to the exchange of information, including electronic information regarding juveniles with mental impairments in the juvenile justice system for the purpose of providing or coordinating services among the Parties consistent with state and federal laws governing confidential education, health and juvenile justice records. When appropriate, the Parties shall include such requirements in any relevant rules, policies, contracts or grants.

c) Develop rules, policies, procedures, or requirements that describe their respective roles and responsibilities in the continuity of care and services program for juveniles with mental impairments.

d) Develop procedures that provide for the exchange of assessments or diagnostics prior to the imposition of juvenile probation, detention, commitment, parole or discharge, and the transfer of such diagnostics between local and state entities described in this MOU consistent with state and federal laws governing confidential education, health and juvenile justice records.

e) Participate in cross training or educational events targeted for improving each Party's knowledge and understanding of the roles and responsibilities of the juvenile justice and local mental health and intellectual and developmental disability systems.

f) Inform and provide each Party with proposed policy, procedure, requirement, or rule changes that could affect the continuity of care and service program. After receipt of the proposed changes, each Party will have 30 calendar days to respond. Adoption of a change will not proceed until those 30 calendar days have expired.

g) Provide written status reports to the Texas Correctional Office on Offenders with Medical or Mental Impairments Advisory Committee on the implementation of initiatives outlined in this MOU.

h) Actively seek federal funds to operate or expand the service capability to include local and state juvenile justice entities contracting with the public mental health system for the purpose of maximizing Medicaid and other entitlements.

i) The Parties recognize that each Party has limited resources and that this MOU does not authorize the commitment of another Party's staff or resources.

4. TJJD SHALL:

a) Maintain a portal to the DSHS data system for county juvenile probation departments to query and to determine if a referred juvenile is receiving mental health services from a Local Mental Health Authority.

b) Establish a process to cross-reference detention facility intake and admission data with the DSHS data base system. This process shall include an internal mechanism for distributing the information to the appropriate managed care, contract entities, or other providers as deemed necessary and allowed by law.

c) Develop rules, policies, or procedures that describe the local probation departments' responsibility in identifying juveniles with mental impairments who are entering the juvenile justice system.

d) Develop rules, policies, or procedures that describe the local probation departments' requirements for continuity of care for juveniles with mental impairments being transferred from one location to another. This would include – juveniles being placed in pre-adjudication facilities, post-adjudication facilities, contract residential facilities, inpatient psychiatric placement or from one county to another.

e) Develop rules, policies, or procedures that describe the requirements for continuity of care for juveniles with mental impairments being transferred from one detention facility location to another. This would include – transfers between residential facilities, halfway houses, contract residential facilities, and inpatient psychiatric placement or from one county to another while on TJJD parole.

f) Develop rules, policies, or procedures which require local probation departments to submit relevant psychiatric, diagnostic or treatment information to TJJD when juveniles with mental impairments are committed to TJJD.

g) Develop standards for specialized mental health caseloads and routinely provide training/technical assistance to specialized probation officers and parole officers on mental health issues.

h) Develop rules, policies, or procedures which require those supervising TJJD youth in the community to coordinate with the treatment provider of youth with mental impairments.

i) Develop rules, policies, or procedures to ensure that medical, psychiatric or psychological care, treatment needs, educational or rehabilitative service needs, pertaining to juveniles with mental impairments be exchanged with relevant local

and state juvenile justice, mental health, or other providers prior to each juvenile's release from custody or those placed on parole.

j) Ensure that juveniles with mental impairments being released from TJJD facilities have access to a thirty-day supply of medications upon release.

k) Establish, in cooperation with DSHS, a process in accordance with Health and Safety Code Chapters 574 and 593 for State Hospital admissions for juveniles with mental impairments under the supervision of TJJD who require civil commitment.

l) Grant TCOOMMI access to TJJD's Electronic Medical Records (EMR) in accordance with a separate MOU between TJJD and TCOOMMI.

5. DPS SHALL:

a) Leverage existing Texas Law Enforcement Telecommunications System (TLETS) methodologies to facilitate electronic communications between authorized local and state juvenile justice agencies and the DSHS for the purpose of providing real-time, contemporaneous identification of individuals in the DSHS client database.

6. DSHS SHALL:

a) Develop, in cooperation with the Parties, written requirements for a continuity of care and services program that is specific to juveniles with mental impairments who are involved in the juvenile justice system. In addition to the requirements set forth in Health and Safety Code §614.018 (c), the requirements shall address:

1) The roles and responsibilities of the LMHA and State Hospitals in the continuity of care services program; and

2) Crisis service access or state hospital admissions guidelines for a) juveniles with mental impairments referred from the juvenile justice system and b) juveniles with mental impairments placed in residential facilities including, but not limited to, pre-adjudication and post-adjudication facilities.

b) Require that LMHAs adhere to the relevant provisions outlined in this MOU, including the statutory provisions, related to the exchange of information.

c) Require LMHAs to provide to TCOOMMI the name of the designated staff member who will serve as the contact for all juvenile justice referrals.

d) Require LMHAs to coordinate with the probation or local providers of juvenile parole supervision on activities including:

1) Participation in and providing for, the development of joint supervision and treatment plans; and

2) Coordination with the development of new conditions of supervision that may affect treatment services and/or compliance (e.g., sanctions and motions to revoke) to ensure appropriate alternatives to incarceration are considered.

e) Coordinate with TJJD to establish a data interchange system that allows those agencies to cross reference juvenile offender data with the DSHS database and exchange information as needed or required.

7. DADS SHALL:

a) Ensure medical, psychiatric or psychological care or treatment needs and educational or rehabilitative service needs pertaining to juveniles with mental impairments are exchanged with local authorities, relevant local and state juvenile justice, mental health or other providers.

8. DFPS SHALL:

a) Ensure that information regarding medical, psychiatric or psychological care or treatment needs and educational or rehabilitative service needs pertaining to juveniles with mental impairments, who are currently in DFPS conservatorship, shall be exchanged with relevant local and state juvenile justice, mental health or other providers. For young adults 18 and older who are in the DFPS extended foster care program, DFPS will exchange the above information only if the young adult or the young adult's guardian provides a written authorization for DFPS to release the information.

9. TEA SHALL:

Develop a process to ensure that medical, psychiatric or psychological care or treatment needs and educational or rehabilitative service needs pertaining to juveniles with mental impairments shall be exchanged with relevant local and state juvenile justice, mental health or other providers consistent with state and federal laws governing confidential education, health, and juvenile justice records.

10. LOCAL JUVENILE PROBATION DEPARTMENTS SHALL:

a) Query the DSHS database via the TJJD portal to determine if a juvenile is currently receiving services from an LMHA at the time a juvenile is referred to a juvenile probation department.

b) Facilitate the coordination of supervision with LMHAs, LAs, or other treatment providers when appropriate. This includes:

- 1) Joint staffing's of mutual juveniles to review compliance with treatment and supervision;
 - 2) Input on modifications of conditions;
 - 3) Coordinate with treatment providers on imposing new conditions or sanctions, and/or filing motions to revoke/adjudicate in order to explore all possible alternatives to incarceration; and
 - 4) Coordinate on the development of a joint supervision and treatment plan if governing standards for the respective participants can be adhered to in the proposed plan.
- c) Provide technical assistance and training to LMHA and LA staff on criminal justice issues specific to community supervision.
- d) Contract with LMHAs and LAs when possible for mental health/developmental or intellectual disability assessments or other treatment services in order to minimize duplication of effort and maximize Medicaid or other federal benefits.

11. REVIEW AND MONITORING:

- a) Subsequent to adoption of this MOU, each Party shall provide status reports to TCOOMMI.
- b) Amendments to this MOU may be made at any time by written agreement of the Parties.
- c) The Parties to this MOU shall cooperate with each other to resolve any conflicts or disputes regarding this MOU.
- d) The Advisory Committee, consisting of each Party to this MOU, shall develop a standardized process for collecting and reporting this MOU's implementation activities and outcomes by local and state juvenile justice agencies, and LMHAs. The findings of these reports shall be published as part of the meeting minutes from the quarterly Advisory Committee meetings. Unless otherwise indicated above, by September first of each even-numbered year all information shall be consolidated and included in recommendations to the legislature in TCOOMMI's biennium report.

12. REVIEWED:

This MOU may be renewed biannually, beginning September 1, 2014, by mutual agreement of all the Parties.

13. CERTIFICATION

IN WITNESS WHEREOF, the Parties have executed this MOU by the signatures of the duly authorized representative of each on the dates indicated. A photocopy signature is as valid as the original.



David Reilly, Executive Director
Texas Juvenile Justice Department

1/22/15
Date



Lauren Lacefield, Assistant Commissioner
for Mental Health and Substance Abuse Services
Department of State Health Services

FEB 10 2015
Date



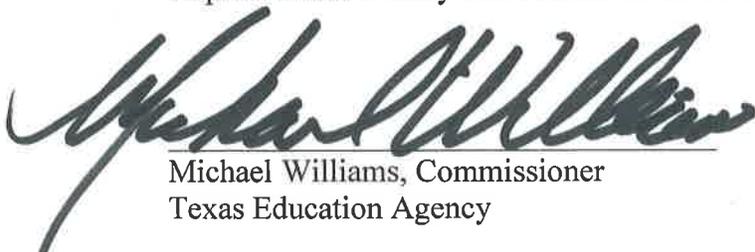
Jon Weizenbaum, Commissioner
Department of Aging and Disability Services

2-25-15
Date



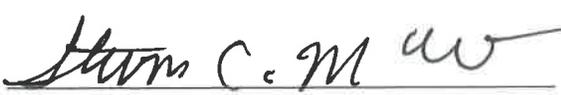
Lisa Black, Assistant Commissioner
Department of Family and Protective Services

3/2/15
Date



Michael Williams, Commissioner
Texas Education Agency

4/15/2015
Date



Steven C. McCraw, Director
Texas Department of Public Safety



3/27/15
Date

Local Juvenile Probation Department

Date