November 24, 2015

PRELIMINARY REGINALIZATION FUNDING PROTOCOLS

The following preliminary Regionalization funding protocols are based on feedback from the Regionalization Task Force, internal Texas Juvenile Justice Department (TJJD) discussions, conversations with stakeholders, and communication with leadership offices. TJJD reserves the right to change these protocols as the Regionalization planning process unfolds.

- **Total Funding Available**: Up to $11,324,895 for Fiscal Years (FY) 2016 and 2017

Source	FY 2016	FY 2017	TOTAL
Budgetary Strategy A.1.8, Regional Diversion Alternatives	$435,490	$9,139,405	$9,574,895
Other Sources[1]	Up to $875,000	Up to $875,000	Up to $1,750,000
TOTAL	Up to $1,310,490	Up to $10,014,405	Up to $11,324,895

- **Startup Funds**: Up to $125,000 per region each year for four years
  - Each region's plan will identify a core programmatic, placement, or aftercare need with the goal of improving outcomes/achieving diversions for the Regionalization target population.
  - The region may consider needs for youth outside the Regionalization target population and/or not eligible for individual support (see "Remaining Funds") in its startup proposal, and such youth may benefit from programs or services created with startup funds.
  - TJJD will provide up to $125,000 to each region to support its startup proposal. The amount of funds provided will consider statewide needs and impact to system outcomes.
  - Startup funds will be provided annually at least through FY 2019, contingent on continued appropriations and a positive review by TJJD staff prior to FY 2018 and FY 2019.

- **Remaining Funds**:
  - The use of remaining funds will be limited to youth meeting Regional Diversion[2] eligibility criteria.
  - Requests for funding will be based on the needs of individual youth and will include a specific plan for use of dollars,[3] and will include aftercare in cases involving residential placement.
  - Eligible youth will be prioritized using a check-list document[4] that will include narrative information and a certification that without Regional Diversion program funding the department's recommendation would be commitment to TJJD.
  - TJJD's regional coordinators will be available to provide assistance in completing applications. Applications will be reviewed by TJJD staff and a decision issued in no more than five business days unless a shorter timeframe is requested due to exigent circumstances.[5]
  - Approved requests will indicate a "not-to-exceed" (NTE) funding level based on the specific plan for use of dollars. Departments will continue to separately provide or contract for services and will request reimbursement against the NTE amount for expenditures under the approved plan.

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[1] Primarily the Supplemental and Emergent Needs program.
[2] Note that "Regional Diversion" is distinct from the Commitment Diversion component of State Aid.
[3] E.g., placement for up to X months including Y services, and intensive supervision for Z months upon release.
[4] Currently being developed in consultation with the Regionalization Task Force and other field practitioners.
[5] Such as an impending court date.

March 23, 2016

PROPOSED REGINALIZATION FUNDING PROTOCOLS

Regionalization funding protocols were discussed over the course of several meetings of the Regionalization Task Force, with preliminary protocols distributed in November 2015 (attached). The focus of subsequent discussion with stakeholders and practitioners, and internal work by TJJD staff, has been the logistics of contracting practices and reimbursement requests under the new grant. Along those lines, the following proposal is submitted for consideration. Of chief importance in the development of this proposal was TJJD's need to maintain effective oversight and accountability over Regionalization funding and data reporting while also managing the impact to agency staff resources.

- **Startup/"Core Need" Funds**:
  - Contracting practices for startup/"core need" funding will be flexible and adaptable to the specific approved proposals contained in regional plans.
  - As appropriate and allowable, TJJD may issue contracts with a single or multiple probation departments within a region or directly with service providers.
  - Funding may be attached to resulting contracts and/or TJJD may serve as the "contract hub" to facilitate procurement processes.[1]
  - Data reporting requirements and fiscal monitoring will be similarly flexible and based on specific approved regional proposals.

- **Funds for Individual Youth Diversions**:
  - TJJD will contract with, provide funding to, and require data reporting from the home jurisdiction of youths approved for regional diversion.
  - The agency will develop and distribute a new contract specific to the Regional Diversion Program for approval by the juvenile board of each department that intends to participate.
  - Included with the contract will be a suggested Resolution of Approval that delegates authority to increase the contract amount to the board chair and/or the department chief.[2]
  - TJJD will establish a dedicated accountant position within the Regionalization Department to facilitate timely processing of reimbursement requests and accurate tracking of payments against approved "not-to-exceed" (NTE) funding amounts.
  - To receive reimbursement a department must submit proof of payment for services consistent with an approved individual youth diversion plan. In the case of exigent circumstances[3] TJJD may consider an approved invoice in lieu of proof of payment.
  - Requests for reimbursement will be paid between 15 and 45 business days[4] based on the timing of submission to TJJD and the accuracy of the request.
  - Data reporting and fiscal monitoring will model current practices for general State Aid.

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[1] In the latter case, TJJD would issue a contract on which it will not expend funds, but under a design that allows probation departments to "piggy back" as needed.

[2] This approach models current practice for reimbursement grants to minimize required approvals by juvenile boards.

[3] E.g., intractable cash flow challenges.

[4] Tentative; internal TJJD processes still under development.

TREATMENT LEVELS OF CARE FOR POST-ADJUDICATION FACILITIES

TEXAS JUVENILE JUSTICE DEPARTMENT

3-22-16 Draft

All levels of care require the facility to meet applicable standards under Title 37 Texas Administrative Code, is registered with TJJD, and certified by the local juvenile board.

Basic Level of Care (General Offender)

- Consists of a structured, supportive residential setting that is designed to maintain or improve the child's functioning.
- Includes routine supervision and guidance to ensure the child's safety, involvement in age-appropriate structured activities, educational and rehabilitative services, and guidance from professionals or paraprofessionals to help attain or improve functioning appropriate to the child's age and development.

Moderate Level of Care

- Consists of a structured, residential treatment setting that is designed to improve the child's functioning.
- Includes routine supervision and guidance to ensure the child's safety, involvement in age-appropriate structured activities, educational and rehabilitative services, and guidance from professionals and paraprofessionals to help attain or improve functioning appropriate to the child's age and development.
- Services reflect a full range of educational, social, recreational and rehabilitative/treatment interventions and may include a focus on specialized populations not limited to: substance abuse, sexual behavior, or mental health treatment, programming for pregnant females, female offenders, young offenders, or offenders with intellectual or developmental disabilities.
- Formal review of a child's continued needs must be conducted at intake, monthly, and upon program completion.

Service	Minimum Frequency
Individual Therapy:	2/50 minute sessions/monthly
Group Therapy:	4/50 minute sessions/monthly
Family Therapy:	1/50 minute sessions/monthly
Skills/Process/ Psychoeducational:	2/50 minute sessions/weekly
Psychiatric Consultation:	Initial, PRN

Specialized Level of Care

- Consists of a structured, residential treatment setting designed to improve the child's functioning.
- Includes routine supervision, intervention and therapeutic services to ensure the child's safety, involvement in age-appropriate structured activities, educational and rehabilitative services, and guidance from professionals and paraprofessionals to help attain or improve functioning appropriate to the child's age and development.
- Services reflect a full range of treatment and rehabilitative interventions including educational, social, recreational and psychoeducational and include a focus on a clearly identified specialized population not limited to: substance abuse, sexual behavior, mental health treatment, programming for pregnant females, female offenders, young offenders, or offenders with intellectual or developmental disabilities.
- Formal review of a child's continued needs must be conducted at intake, monthly, and upon program completion.

Service	Minimum Frequency
Individual Therapy:	4/50 minute sessions/monthly
Group Therapy:	8/50 minute sessions/monthly
Family Therapy:	1-2/50 minute sessions/monthly
Skills/Process/ Psychoeducational:	3/50 minute sessions/weekly
Psychiatric Consultation:	Initial, PRN

Intensive Level of Care

- Consists of a highly specialized and structured therapeutic setting that serves a clearly identified unique population of youth (e.g., identified range of clinical/behavioral health/mental health diagnoses, including complete DSM-5 multi-axial diagnoses) with a focus on short term intervention or psychiatric stabilization.
- The clinical program structure and service-mix will be used to effectively stabilize, manage, and treat this population in a developmentally appropriate fashion.
- Appropriately licensed medical and mental health professionals manage and administer this intensive service model.
- Formal review of a child's continued needs must be conducted at intake, monthly, and upon program completion.

Service	Minimum Frequency
Individual Therapy:	4/50 minute sessions/monthly
Group Therapy:	8/50 minute sessions/monthly
Family Therapy:	1-2/50 minute sessions/monthly
Skills/Process/ Psychoeducational:	5/50 minute sessions/weekly
Psychiatric Consultation:	Initial, PRN