

JUSTICE AND PUBLIC SAFETY CABINET DEPARTMENT OF JUVENILE JUSTICE POLICY AND PROCEDURES REFERENCES: 505 KAR 1:110 2-CO-4F-01 1-JCF-4E-07; 5C-02, 04, 07 4-JCF-5C-02, 07 3-JTS-5C-01, 02, 04-06 3-JCRF-5C-01, 03 1-JDF-5B-01, 04, 05 1-JDTP-3D-10 1-JBC-5C-01, 05-07

CHAPTER: Program Services

SUBJECT: Counseling Services

POLICY NUMBER: 307

TOTAL PAGES: 4

EFFECTIVE DATE: 4/05/2019

APPROVAL: Carey D. Cockerell , COMMISSIONER

I. POLICY

Counseling services shall be provided to each youth in accordance with the youth's Individualized Treatment Plan (ITP) and the timeframe identified by the youth's assigned Track.

II. APPLICABILITY

This policy shall apply to each Department of Juvenile Justice (DJJ) group home and youth development center (YDC).

III. DEFINITIONS

Refer to Chapter 300.

IV. PROCEDURES

- A. Each program shall utilize a trauma informed approach and evidence based practices in the provision of counseling services as approved by the Chief of Mental Health Services.
- B. Assigned youth counselors shall demonstrate competency in counseling skills through a combination of training, mentoring, supervision, licensure, or certification.
- C. Staff shall be available to provide counseling in emergency situations and upon a youth's request in accordance with each youth's ITP.
- D. Each youth placed in a YDC or group home shall have an opportunity for individual, group, and family counseling.
- E. Family counseling sessions required on development level and demonstration level can replace one (1) hour of individual counseling for that same week.
- F. DAP notes shall be completed for every individual and group counseling session for each individual youth participating. For each session completed,

POLICY	NUMBER
DJJ 307	

EFFECTIVE DATE 4/05/2019

PAGE NUMBER 2 of 4

the DAP note shall contain all three (3) components as required below specific to the session which is being documented. DAP notes shall be written as follows:

- 1. "D" shall include what the youth says and does during the respective individual or group counseling session, as well as observations from outside observers.
- 2. "A" shall be the counselors assessment based on the information in "D".
- 3. "P" shall be the action the counselor intends to take as a result of the information in both "D" and "A".

G. Individual counseling shall be:

- 1. Conducted by the youth's assigned counselor. If the assigned counselor is absent, one (1) of the following staff shall provide counseling services: the Treatment Director, another youth counselor, Superintendent, or Superintendent's designee;
- 2. Provided to each youth at a minimum of one (1) scheduled hour per week. Any exceptions to this protocol shall be approved through the Treatment Director by the Regional Psychologist or Chief of Mental Health Services. Individual counseling sessions may be held more often to meet the treatment needs of the youth or as deemed appropriate by the treatment team;
- 3. Utilized to help the youth make changes in thinking and behavior consistent with pro-social norms;
- 4. Utilized to assist youth in meeting goals and tasks identified on the youth's ITP; and
- 5. Documented in the Individual Client Record (ICR) within seven (7) days. In circumstances when critical information pertinent to safety and security is gained during individual counseling, that critical information shall be documented in the appropriate facility log by the end of the shift and up-lined through the chain of command.

H. Group Counseling shall be:

- 1. Led by staff trained in methods approved by DJJ;
- 2. Limited to twelve (12) youth in any one session;
- 3. Conducted for one (1) hour and regularly scheduled at a minimum of three (3) times per week for each youth assigned. The Chief of Mental Health Services or designee or the Regional Psychologist shall approve any exceptions to this protocol;
- 4. Utilized to help youth make changes in thinking and behavior consistent with pro-social norms;
- 5. Utilized to discuss specific and common issues, conflicts, and concerns;
- 6. Documented in each participating youth's ICR within seven (7) days from the end of treatment team; and

POLICY	NUMBER
DJJ 307	

EFFECTIVE DATE 4/05/2019

PAGE NUMBER 3 of 4

- 7. Recorded by the group leader in summary form in the appropriate facility log no later than the end of the shift.
- I. Family counseling shall be provided as follows:
 - 1. Conducted by the youth's assigned counselor or Treatment Director;
 - 2. Conducted for a minimum of one (1) hour and shall occur at a minimum consistent with the requirements of the youth's Track. Requirements contained in the Tracks are outlined below:
 - a. Misdemeanor Track
 - i. Awareness Level: One (1) required family counseling session.
 - ii. Development Level: Two (2) required family counseling sessions.
 - iii. Demonstration Level: Two (2) required family counseling sessions; and
 - b. Felony Track
 - i. Awareness Level: One (1) required family counseling session.
 - ii. Development Level: Two (2) required family counseling sessions; and
 - iii. Demonstration Level: At a minimum, four (4) required family counseling sessions;
 - 3. Conducted with the parent or caregiver with whom the youth will live following placement as identified on the preliminary home evaluation;
 - 4. Utilized to work on the family goals and tasks outlined on the youth's ITP;
 - 5. Utilized to assist the parent or caregiver in making changes to thinking and behaviors consistent with pro-social norms;
 - 6. Documented into the ICR within seven (7) days of the session;
 - 7. Family counseling may be scheduled face-to-face, via telephone, or via the video conferencing system in collaboration with the youth's Juvenile Service Worker (JSW). It may also be scheduled around visitation times to increase the family's willingness to participate. Family counseling sessions shall supplement but shall not replace a youth's visitation time with family.
 - 8. Family counseling sessions shall be utilized for participants to address any reported incidents involving the youth which have occurred since the last counseling session.
 - 9. Refusal of the parent or caregiver to participate in family counseling shall not affect the youth's ability to move through the treatment program. In situations where the family refuses to participate the following shall occur:
 - a. The JSW shall be notified in an attempt to encourage participation;
 - b. The counselor shall continue efforts throughout the youth's treatment to engage the parent or caregiver; and

POLICY NUMBER	EFFECTIVE DATE	PAGE NUMBER
DJJ 307	4/05/2019	4 of 4

c. The counselor shall document in any family refusal of participation in youth's ICR along with attempts made to engage the parent or caregiver at the required treatment intervals.

V. MONITORING MECHANISM

A. In each YDC:

- 1. The Treatment Director shall observe one (1) group counseling session per supervisee, quarterly.
- 2. The Treatment Director shall review the ICR monthly, one (1) case per supervisee, for compliance with individual and group counseling standards, treatment protocol, and documentation standards.
- 3. The Treatment Director shall provide a written report of observations and findings to the Superintendent, FRA, Regional Psychologist, and Chief of Mental Health Services. If appropriate, the Treatment Director or counselor supervisor shall submit a corrective action plan with a timetable for implementation to the FRA, Regional Psychologist, and the Superintendent within one (1) week of the review.
- 4. The Quality Assurance (QA) Branch shall conduct monitoring on an annual basis.

B. In each group home:

- 1. The Superintendent shall observe one (1) group counseling session per supervisee, quarterly.
- 2. The Superintendent shall review a sampling of the ICR monthly, for compliance with individual and group counseling standards, treatment protocol, and documentation standards.
- 3. The Superintendent shall provide a written report of observations and findings to the FRA, Regional Psychologist, and Chief of Mental Health Services within one (1) week of the review. If appropriate, the Superintendent shall submit a corrective action plan with a timetable for implementation to the FRA and Regional Psychologist, within one (1) week of the review.
- 4. The QA Branch shall conduct monitoring on at least an annual basis.