Planning and Implementation Guide

FY2020 Juvenile Justice and Mental Health Collaboration Program

Description

This program supports public safety efforts through partnerships with juvenile justice, mental health, and substance use agencies to enhance responses to justice-involved youth with mental illnesses (MI) and co-occurring disorders. The Juvenile Justice and Mental Health Collaboration Program (JJMHCP) supports cross-system collaboration to improve responses and outcomes for youth with MI or co-occurring MI and substance use disorders who come into contact with the juvenile justice system.

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**About the Planning and Implementation Guide**

The Council of State Governments (CSG) Justice Center has prepared this Planning and Implementation Guide to support grantees in developing and refining their justice and mental health initiatives to improve outcomes for youth in the juvenile justice system who have mental illnesses and co-occurring mental illnesses and substance use disorders. The guide is not intended to serve as a step-by-step blueprint, but rather to foster discussion about best practices, help you identify considerations for your collaborative effort, and help you work through key decisions and implementation challenges. The guide was developed as a tool for grantees, but it also serves as an important mechanism for your CSG Justice Center technical assistance provider (TA coach) to understand the status and progress of your project, the types of challenges you are encountering, and the ways your TA coach might help you make your project successful. You and your TA coach will use your responses to the self-assessment to collaboratively develop priorities for technical assistance. Any questions about this guide should be directed to your TA coach.

**Contents of the Guide**

The guide is divided into seven sections, each with assessment questions, exercises, and discussion prompts. The self-assessment questions and exercises are built on evidence-based principles and emerging practices. You will be prompted to write short responses, attach relevant documents, and/or complete exercises for each section. Your answers will provide insight into your initiative’s strengths and identify areas for improvement. Your TA coach may also send you additional information on specific topics to complement certain sections. If you need additional information or resources on a topic, please reach out to your TA coach.

|  |  |
| --- | --- |
| TA Coach Contact Information | |
| Name: |  |
| Phone: |  |
| Email: |  |

|  |
| --- |
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**SECTION 1: GOALS**

Although your TA coach has read the project narrative that you submitted in response to the Office of Juvenile Justice and Delinquency Prevention (OJJDP) solicitation, there may have been a number of updates or developments since the submission of your original application, particularly related to the impact of the pandemic and racial justice efforts. This exercise is intended to give your TA coach a sense of your current project goals and your initial technical assistance needs. Please provide the following documents, if available and applicable, to your TA coach:

Memoranda of understanding (MOUs), Data Use Agreements (DUAs), and any other agreements

Graduated response decision matrix

Program policy and procedure manual(s)

Current strategic plan

Program flowchart

Training course materials

System/Program inventory and capacity analysis

Data/Performance measurement tools

Program evaluation plan

**1.1 Basic Information**

**1.1.A Grantee Information**

1. Grantee Name and Award Number:
2. Geographic Location:

*Indicate the specific city, county, or state where your program operations primarily occur. Additionally, please indicate if your jurisdiction is primarily rural, suburban, urban, or a mixture of these.*

1. Project Name:
2. Mental Health Partner(s):
3. Criminal Justice Partner(s):
4. Substance Use Partner(s):
5. Other:
6. Point(s) of Contact for all the Grant Partners collaborating on the project:

Name:

Email:

Agency:

Name:

Email:

Agency:

Name:

Email:

Agency:

**1.1.B Grant Initiative Updates and Information**

1. Have there been any changes to the initiative or its goals as outlined in your grant proposal?

Your answer may include changes in evidence-based practices used, screening and assessment tools selected, implementation of telehealth methods, program partner changes, staffing changes, new budget constraints, racial justice and equity additions, etc. If any programmatic, administrative, or financial changes have been made since you submitted your grant proposal, you are required to submit a Grant Award Modification (GAM) through the GAM module in the grant management system JustGrants. Please note that GAMs are subject to approval by OJJDP.

Yes *(Please specify.)*

No

1. Is there a relationship between this grant and any preexisting state-, local-, or federal-level initiatives or programs focusing on collaboration along the continuum of care for youth who are in the juvenile justice system?

Yes *(Please specify.)*

No

1. Is there any other funding being utilized to support the grant activities?

Yes *(Please specify.)*

No

**1.1.C Grant Initiative Focus**

1. Has your jurisdiction ever conducted a system-mapping exercise, gap analysis, or other assessment about the services available in your jurisdiction for youth with mental illnesses and/or co-occurring mental illnesses and substance use disorders?

Yes *(Please elaborate, and attach the assessment to this guide.)*

No

2. In the table below,[[1]](#footnote-1) indicate in which intercepts your grant program functions. (Note: Programs may fall under multiple intercepts.)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Intercept 0**  Community Services | **Intercept 1**  Law Enforcement | **Intercept 2**  Initial Detention/Initial Court Hearings | **Intercept 3**  Detention Facilities/  Courts | **Intercept 4**  Reentry | **Intercept 5**  Community Corrections |
| Check all that apply |  |  |  |  |  |  |

1. What non-grant-funded diversion interventions already exist in your jurisdiction? Specify the names of programs and what agency coordinates the diversion intervention.
2. Are you aware of any plans to implement additional diversion programming in your agency and/or juvenile justice system for youth with mental illnesses and/or co-occurring mental illnesses and substance use disorders?

Yes *(Please describe.)*

No *(Why not?)*

5. What are some service gaps in your jurisdiction that could limit youth’s access to mental health care?

6. What strategies is the program planning to implement to ensure equal access to culturally responsive services for all youth?

**SECTION 2: COLLABORATIVE PARTNERSHIPS**

Having a successful implementation team (i.e., the group that works directly on the grant program) and interagency workgroup (i.e., the larger group of people that has an interest in the program, such as a juvenile and criminal justice, behavioral health, or advisory council) are critical to program success. The interagency workgroup requires participation from the OJJDP grant-funded justice and mental health partners, as well as others, including elected officials, leaders of faith communities, victims of crime, consumers of mental health services and their family members, frontline staff, and youth who have been in custody and their family members.

**2.1 Implementation Team and Interagency Workgroup**

**2.1.A Implementation Team**

1. Which agencies and individuals are included in your implementation team?
2. Are there interagency agreements, MOUs, policies and procedures, or similar documents that define responsibilities for implementation team members?

Yes *(Please describe and attach.)*

No *(Why not?)*

1. How often will/does the implementation team meet?
2. Does the implementation team have a relationship to other local- or state-level task forces, councils, or advisory committees?

Yes *(Please describe.)*

No

1. How will the implementation team incorporate the perspectives of youth and their family members into the workgroup processes?

**2.1.B Interagency Workgroup**

1. List the name of your interagency workgroup and members of your interagency workgroup below. If the composition of your interagency workgroup has not yet been finalized, please list the people you intend to engage to participate, even if you haven’t yet done so. In your list, please include each person’s name, title, organization, and formal role in the workgroup.

*Consider including representatives of the following institutions/groups in your interagency workgroup: substance use disorder treatment providers; law enforcement; courts; correctional facilities; juvenile probation officials; workforce development, housing, and education providers; faith-based organizations; consumers of behavioral health services and their family members; victim services/representatives; other community-based services; and researchers/evaluators.*

1. Are there additional stakeholders that you would like to engage to join the interagency workgroup?

Yes *(Please describe.)*

No

1. Are there interagency agreements, MOUs, policies and procedures, or similar documents that define responsibilities for interagency workgroup members?

Yes *(Please describe and attach.)*

No *(Why not?)*

1. How often will/does the interagency workgroup meet?
2. How will/does the interagency workgroup inform the grant program’s operations and development?
3. Does the interagency workgroup have a relationship to other local- or state-level task forces, councils, or advisory committees?

*Yes (Please describe.)*

No

**2.1.C** **Information-Sharing Procedures**

1. Are there written policies, MOUs, or other interagency agreements to facilitate and formalize the sharing of information between partners/referral sources?

Yes *(Select all that apply, and please supply a copy of the agreement(s) to your TA coach if available to share.)*

Intra-agency policy and/or protocol

Interagency MOU or other agreement

Information-sharing agreement

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

No *(Are you planning to develop information-sharing procedures? Please elaborate.)­­*

1. Was your information-sharing policy and procedure reviewed by legal counsel specific to minors?

Yes

No *(Are there plans for it to be?)*

1. How and at which points in the program will program staff share relevant and necessary information with the youth’s family or caregiver?
2. Are there any barriers to information sharing that might impact the success of your program?

Yes *(Please describe.)*

No

**SECTION 3: TARGET POPULATION**

The grant award is a limited resource, so it is important to define the eligibility criteria of your target population; your grant project should serve those who are most likely to benefit from it. Having a clearly defined target population helps highlight what information you will need to obtain through screening and assessment or other processes to determine program eligibility. Clearly defined target population criteria will also be helpful for youth and families to understand why they are selected and for partner agencies that are seeking to refer youth to your initiative/program, which will increase the likelihood that referrals will be good matches for the program.

**3.1 Eligibility Criteria**

1. Please briefly describe the target population to be served, including demographics (age range, including Child Protective Services, gender, etc.) and other biopsychosocial stessors (e.g., school achievement, environmental factors, etc.) to be addressed.
2. What is the legal status of the target population? (Select all that apply.)

Pre-arrest

Post-arrest/pre-adjudication/pretrial

Post-trial/post-adjudication

Sentenced to probation

Released without supervision

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How many youth do you plan to serve for the grant period?
2. What processes has your team put in place to meet these target population criteria?
3. Is your program:

Voluntary

Involuntary

Both

1. Are family members or supportive adults required to participate in the program?

Yes

No

1. Who is invovled in deciding whether a youth is accepted into the program (e.g., prosecutor, judge, case manager, detention facility administrator)?
2. What outreach methods will you use to ensure referrals are received for the program?
3. Who are your intended referral sources (e.g., client, judge, defense atttorney, case manager, detention factility administrator)?
4. What processes are or will be put in place to ensure that referrals begin upon the start of the project’s implementation?
5. Are there youth with particular types of mental illness or developmental disabilities that you are not able to serve?

Yes *(Please explain what the illness or disability is and how the program will connect the youth to an appropriate level of care.)*

No

1. Are there youth with a particular level of co-occurring mental illness and substance use disorder that you are not able to serve?

Yes *(Please elaborate.)*

No

N/A

1. Are there any charges/offenses that will be excluded from the grant initiative’s eligibility criteria?

Yes *(Please elaborate.)*

No

N/A

1. Does the program prioritize youth with medium to high criminogenic risk and needs levels for program slots?

Yes *(Please describe how.)*

No

N/A

1. Does your target population include youth with different criminogenic risk and needs levels (e.g., low, medium, high)? If yes, how will the program case plan determine intensity of services for the low- to high-risk youth?

Yes

No

* 1. **Youth Support System**

1. What is the process for including the youth in the case planning, and at what point will engagement begin?
2. How will the program help youth identify and develop natural supports (positive relationships developed in family, school, and community environments).
3. How will the program incorporate natural supports into youth’s programming, including case management plans, crisis plans, prosocial activities, reintegration (family, school and community), etc.?
4. How will youth’s strengths and protective factors be incorporated in case planning?
5. Please describe how the program will balance youth’s participation with formal and natural supports (e.g., ratio of clinical treatment to recreational/vocational activities).
6. What specific strategies will be used to engage a youth’s family in the program (e.g., use of a family support specialist)?

**3.3 Screening and Assessment Processes**

For your grant program, you will need to develop processes for screening youth for MI and co-occurring disorders, assessing them for criminogenic risk/needs, identifying youth who need further assessment for mental health and substance use, and developing case plans based on results from validated instruments (*section 4.1.B*). This section will help the implementation team inventory the current screening and assessment tools available to them and determine if additional tools are needed.

| **Type of tool** | **Name of validated tool** | **Who administers the tool?** | **When is it administered (e.g., at booking, upon first appointment with behavioral health provider)?** | **How is it being administered (remotely, in person, or both)?** | **How are results recorded and stored?** | **Which individuals or agencies have access to the results?** |
| --- | --- | --- | --- | --- | --- | --- |
| Criminogenic Risk & Needs Assessment |  |  |  |  |  |  |
| Mental Illness Screening[[2]](#footnote-2) |  |  |  |  |  |  |
| Substance Use Disorder Screening |  |  |  |  |  |  |
| Mental Illness Assessment[[3]](#footnote-3) |  |  |  |  |  |  |
| Substance Use Disorder Assessment |  |  |  |  |  |  |
| Any additional screenings and assessments performed (e.g., trauma screening)? |  |  |  |  |  |  |

1. How frequently is each tool listed above administered?
2. How are results from each tool used to inform quality assurance?
3. Please indicate if the program will receive other collateral information on the youth (i.e., individualized educational plan, foster care service, child welfare services/referrals, court ordered community programs, services pre and post disposition).

**SECTION 4: EVIDENCE-BASED SERVICES[[4]](#endnote-1) AND SUPPORTS**

Responses to the complex needs of youth in the juvenile justice system who have mental illnesses or co-occurring mental illnesses and substance use disorders are not effective without the necessary services and supports. Understanding what services and resources are available and where there are gaps can help you develop a strategy for making connections to existing services to address the gaps. Conducting an inventory of services, supports, and trainings will also help ensure that the referral process for various resources is as seamless as possible by facilitating a conversation about quality, capacity, and connections.

**4.1 Programs and Services**

**4.1.A** **Programs and Services Inventory**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Service | Curriculum  Name  (if applicable) | Service Delivery Method[[5]](#footnote-4) | Service Provider[[6]](#footnote-5) | Available for all program youth? | Length of Service | Funded by this grant? | Funded in any part by Medicaid? |
|  |  |  |  | **Yes**  **No** |  | **Yes**  **No** | **Yes**  **No** |
|  |  |  |  | **Yes**  **No** |  | **Yes**  **No** | **Yes**  **No** |
|  |  |  |  | **Yes**  **No** |  | **Yes**  **No** | **Yes**  **No** |
|  |  |  |  | **Yes**  **No** |  | **Yes**  **No** | **Yes**  **No** |
|  |  |  |  | **Yes**  **No** |  | **Yes**  **No** | **Yes**  **No** |
|  |  |  |  | **Yes**  **No** |  | **Yes**  **No** | **Yes**  **No** |
|  |  |  |  | **Yes**  **No** |  | **Yes**  **No** | **Yes**  **No** |

**4.1.B** **Program Questions**

1. How long, on average, are youth expected to be enrolled in the program? (If not applicable, please indicate.)

Briefly describe a typical youth’s pathway from the time they enter the grant program until they complete it. (If your jurisdiction has completed a program flowchart, attach it to this document and skip this question.)

1. Does your program currently connect youth mentors?

Yes *(How so?)*

No *(Do you plan to do this in the future?)*

1. Does your program provide integrated treatment for co-occurring mental illnesses and substance use disorders?

Yes *(How so?)*

No

1. What is the process for providing referral(s) for integrated treatment for co-occurring mental illnesses and substance use disorders?
2. What culturally responsive strategies does your program use or is thinking about using to increase engagement and improve outcomes for all youth?
3. What services do you provide or refer to that are tailored to specific needs such as those relating to gender, race, culture, or developmental or cognitive abilities?
4. What does your program offer related to trauma-informed care, or does it offer trauma-specific interventions?
5. How will the information gleaned from assessments, mentioned in Section 3, inform the development of [Collaborative Comprehensive Case Plans](https://csgjusticecenter.org/nrrc/collaborative-comprehensive-case-plans/)?

**4.2 Training**

1. Please complete the table below on trainings offered as part of the grant program.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Training** | **Intended Audience** | **Who delivers the training (e.g., law enforcement, mental health personnel, advocates, etc.)?** | **What instruction methods are used (e.g., lecture, virtual, role play, site visits, etc.)?** | **Do trainees evaluate the training?** | **Are you administering pre-/post-tests to evaluate knowledge and skills acquired from the training?** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

2. Is there a plan for ongoing cross-training to bridge any knowledge gaps and educate grant partners on other service systems and coordination efforts at key decision points?

Yes *(Which partners?)*

No

**4.3 Health Care Coverage and Other Benefits**

This section contains questions for assessing basic needs (food, water, shelter, clothing, security, safety), including access to health care. The [Coordinated Entry](https://www.usich.gov/solutions/crisis-response/coordinated-entry/)[[7]](#footnote-6) system, available through your [local Continuum of Care](https://www.hudexchange.info/grantees/contacts/?params=%7B%22limit%22%3A20%2C%22sort%22%3A%22%22%2C%22order%22%3A%22%22%2C%22years%22%3A%5B%5D%2C%22searchTerm%22%3A%22%22%2C%22grantees%22%3A%5B%5D%2C%22state%22%3A%22%22%2C%22programs%22%3A%5B3%5D%2C%22coc%22%3Atrue%7D),[[8]](#footnote-7) provides a unified entry point to your local homeless provider system and should be considered for partnership when developing the housing assessment and referral process.

1. Do you, or a grant partner, enroll youth in health care coverage?

Yes *(Please describe the enrollment process, including specifically when the youth is enrolled.)*

No

1. Do you, or a grant partner enroll youth and their families in other public benefits, such as the Special Supplement Nutrition Program for Women; Women, Infants, Children (WIC); Supplemental Nutrition Assistance Program (SNAP); Social Security Insurance/Disability Insurance (SSI/SSDI); or Children’s Health Insurance Program (CHIP)?

Yes *(Please indicate which public benefit(s) and describe the enrollment process for each, including specifically when the youth is enrolled.)*

No

1. Does the program anticipate any barriers to accessing services or coverage of services (e.g., CHIP, Medicaid, private insurance, services paid by grant, etc.)? If so, is there an alternative for meeting the youth’s health care needs?

Yes

No

1. How does the program assess the basic needs of youth?

Formal assessment *(Please describe the process.)*

Through conversation *(Please describe the process.)*

Other *(Please elaborate.)*

Assessment for homelessness/at risk of homelessness

1. How will the program collaborate with providers on placement and aftercare for a youth in the foster care system?

1. What options are available in the community for youth who are at risk of becoming or are currently homeless?
2. What resources does the program offer to address basic needs that the youth is missing or at-risk of losing?

**SECTION 5: DATA COLLECTION PERFORMANCE MEASURES, AND PROGRAM EVALUATION**

OJP will require each successful applicant to submit regular performance data that demonstrate the results of the work carried out under the award. The performance data directly relate to the goals, objectives, and deliverables identified under “Goals, Objectives, and Deliverables.”

Applicants should visit OJP’s performance measurement page at [www.ojp.gov/performance](http://www.ojp.gov/performance) for an overview of performance measurement activities at OJP.

Award recipients will be required to provide the relevant data by submitting semi-annual performance metrics through the JustGrants system. Applicants should review the complete list of performance measures for this solicitation here: [OJJDP FY 2020 Juvenile Justice and Mental Health Collaboration Program](https://ojjdp.ojp.gov/funding/opportunities/ojjdp-2020-17927).

**5.1 Data-Collection and Performance-Measurement Strategy**

**5.1.A Baseline Data**

1. What are the key baseline data metrics[[9]](#footnote-8) that you will focus on as you implement this grant program and compare your outcome data to (e.g., current recidivism, service referral, engagement, retention, or service utilization rates)?
2. Who holds the baseline data metrics you’ve identified in question 1? (Check all that apply.)

Government entity

Private corporation

Community-based organization

Individual stakeholders

1. Please describe any previous analysis of these baseline data metrics or plans in the future to conduct an analysis.

**5.1.B Data Collection**

1. Do you currently collect the data you need for any relevant grant requirements (e.g., the PMT from OJJDP)?

Yes *(Please describe.)*

No *(How can you improve your data collection to get the data you need?)*

1. Do you currently collect the data you need to measure the outcomes of interest to your interagency workgroup or other stakeholders?

Yes *(Please describe.)*

No *(How can you improve your data collection to get the data you need?)*

1. Are there any other data points that you collect?

Yes *(Please describe.)*

No

1. What key agency or individual(s) are responsible for collecting and reporting outcome data? Are there written policies and procedures that delineate responsibilities?
2. What data collection instruments are used to track your program’s performance (e.g., questionnaires, pre/post-tests, etc.)?
3. Who completes the above data collection instruments? (Check all that apply.)

Client

Client’s family members

Staff

Other *(Please explain.)*

1. How are the data collected? (Check all that apply.)

Electronically

Manually

In-person

Remote

**5.1.C Performance Measures**

1. How do you define the “successful completion” of the program?[[10]](#footnote-9)

1. How does your program define “engagement” in the program[[11]](#footnote-10)?
2. Does the program plan to track youth after completion? If so, for how long and what will be the focus of the data tracked (e.g., completed outpatient therapy, completed probation)?

Yes *(How is this information collected?)*

No

1. What is your definition of recidivism? (Select all that apply.)

Rearrests

New offense

Adjudication

Technical Violation

Juvenile Detention

Other (Please specify.)

1. How do you plan to track youth’ recidivism rates?
2. For what period of time will you track recidivism for youth in the program?

Six months

One year

Two years

Three years

Five years

Other (Please specify.)

1. How will the grant project address short-term recidivism-reduction goals (e.g., one year) and long-term goals (e.g., three and five year)? Please consider whether the goals are clearly defined, measurable, and realistic.

Short-Term Recidivism Reduction:

Long-Term Recidivism Reduction:

1. Please describe what outcomes the program will track beyond recidivism across the domains (family, school, peers, vocational, etc.) of the youth as they progress through the program?

**5.2 Program Evaluation**

1. Are you conducting an evaluation of your grant program?

Yes, a process evaluation

Yes, an outcome evaluation

No *(Skip to Section 6: Sustainability.)*

1. Have you found an evaluator/research partner yet?

Yes *(Who are they? Are they internal or external?)*

No *(What are you looking for in an evaluator/research partner?)*

1. How often and by what method(s) do you plan to communicate with your evaluator/research partner?

1. What are the start and end dates for when data will be collected to evaluate program youth?[[12]](#footnote-11)12
2. With whom do you intend to share evaluation data?
3. How will program evaluation data be used to inform program operations?
4. How will clinicians, case managers, and other providers regularly evaluate whether the interventions provided to youth are matched to their criminogenic needs, strengths, and treatment responsivity based on assessment results?

**SECTION 6: SUSTAINABILITY**

This section focuses on strategies for achieving long-term sustainability for your program through focused efforts initiated at the beginning of the grant. Sustainability is difficult to achieve and becomes even more challenging if neglected until the grant funding is coming to an end; developing a sustainability plan at the onset is essential to building a strong program that can continue after the OJJDP funding concludes.

**6.1 Program Sustainability**

1. What goals does your program seek to achieve after the life of the grant?

2. List the activities that will lead to meeting those goals after the life of the grant.

3. List the key stakeholders and partners who will be involved in sustaining your program

after the life of the grant, and by what means they plan to support this effort (e.g., financially, building collaborations, politically).

4. What key data metrics do you need to track for stakeholders to support sustainability

of the program (i.e., tracking cost savings)?

5. List any funding sources available to sustain the program after the life of the grant (e.g.,

foundation, federal/state [such as Medicaid] or local funding, private donation, etc.).

6. Do you have a “champion” of your project work who can support your sustainability efforts?

**SECTION 7: TECHNICAL ASSISTANCE PLAN**

Now that you have completed all the other sections of the guide, we would like you and your team to reflect on any areas of program development where you would be interested in receiving technical assistance (e.g., refining evaluation plan, training and supervising staff, developing a process and template to be used for case planning, addressing racial equity, identifying sustainability).

You and your team will work with your TA coach to develop a TA plan to include goals and action steps to help the grant project move forward and meet deliverables on time. Your comments in this section will help your TA coach develop your team’s TA plan.

**7.1 Technical Assistance Goals**

1. Please identify program development and/or implementation areas where you may want assistance.

2. What challenges do you anticipate encountering for each of the areas identified?

3. List any unique aspects/achievements to your project that you would like to share?

1. This table was adapted from Policy Research Associates, *The Sequential Intercept Model* (Delmar, NY: Policy Research Associates, 2017), 2. [↑](#footnote-ref-1)
2. A screening tool is a standardized instrument that is designed to identify the potential presence of a mental illness or substance use disorder. These tools do not provide diagnostic information nor do they provide guidance on the severity of any mental illness or substance use disorder. They are typically used as a preliminary step in determining if further, more comprehensive assessment is necessary. Mental illness/substance use disorder screening tools do not need to be administered by a licensed mental health professional. [↑](#footnote-ref-2)
3. A mental illness assessment tool gathers information about a person with the purpose of making a diagnosis, providing appropriate treatment referrals, and using this information as part of case planning. A licensed mental health professional *must* administer the mental illness/substance use disorder assessment tools. [↑](#footnote-ref-3)
4. [↑](#endnote-ref-1)
5. Service delivery can come in many forms. Examples include individual counseling, group counseling, or telehealth. [↑](#footnote-ref-4)
6. This should Include the name of the provider and whether the provider is in house, contracted, or engaged via referral. [↑](#footnote-ref-5)
7. Coordinated Entry is a centralized and streamlined system for accessing housing and support services. It is required by the U.S. Department of Housing and Urban Development for all Continuums of Care. [↑](#footnote-ref-6)
8. A Continuum of Care is a regional or local planning body that coordinates and funds housing and services for homeless families and individuals. Each jurisdiction has a local Continuum of Care. [↑](#footnote-ref-7)
9. Baseline data metrics provide you with the current figures and trends against which you will measure all subsequent changes implemented by your program. [↑](#footnote-ref-8)
10. “Successful completion” refers to when a participant discontinues participation in the program after completing all program requirements. See the [performance measures offered by OJJDP](file:///C:\Users\csinclair\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\XWM396PV\.%20https:\www.bjaperformancetools.org\help\JMHCPMeasuresPlanningandImplementation.pdf). [↑](#footnote-ref-9)
11. Engagement services include an array of strategies that begin in the initial intake and can extend across the continuum of care. Ultimately, they are designed to promote appropriate access to treatment, to increase treatment utilization, to promote treatment retention, and to enhance treatment outcome. See (Treatment Improvement Protocol (TIP) Series, No. 51.) Chapter 5: Treatment Engagement, Placement, and Planning. <https://www.ncbi.nlm.nih.gov/books/NBK83238/> [↑](#footnote-ref-10)
12. 12 The tracking period must allow for uniform “time at risk to recidivate” for all youth tracked. For example, all youth in a group have at least one year of exposure to street time after completing the program or upon release from prison (for prison-based programs) when determining the one-year recidivism rate. [↑](#footnote-ref-11)