

# POLICE-BASED JUVENILE DIVERSION

A manual for creating a  
diversion program based on  
the Cambridge Safety Net Model



# ACKNOWLEDGMENTS

Contributors from Health Equity Research Lab:

**James Barrett, Ph.D.**  
**Dharma Cortes, Ph.D.**  
**Margo Moyer**

**Benjamin Cook, Ph.D.**  
**Esther Lee**

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# INTRODUCTION

Nationally, there is a movement to divert criminal justice-involved youth from the juvenile justice system to less punitive systems of treatment and support. As one landmark study in Montreal revealed, once a youth becomes involved with juvenile court, he or she is seven times more likely to go to prison as an adult (Petitclerc, Gatti, Vitaro & Tremblay, 2013). This is one of many studies demonstrating how critical it is to divert criminal justice-involved youth before they get to court; and police have a tremendous capacity to impact the trajectory of outcomes for a young person committing an arrestable offense.

Through “police-based diversion,” a young person can receive services and supports that address the underlying causes of the risky behavior. Moreover, if the diversion is managed “pre-complaint” by the police, as opposed to during court hearings, it circumvents the first point of contact for that young person with the juvenile court entirely and leaves no record of an arrest. In order for diversion to be optimally effective, it must involve sustainable partnerships between the police and behavioral health providers,

schools and afterschool programs, families, and youth to ensure that the appropriate services and supports are in place to best serve the youth and their families. Diversion practices improve outcomes for youth and provide significant cost-savings for communities. The Justice Policy Institute estimates that detaining a youth costs approximately \$400 per day and \$150,000 per year. In contrast, linking that youth to services and supports costs about \$75 a day (Justice Policy Institute, 2014).

Despite the significant potential for police-based diversion programs, there is a lack of manualized training protocols for police departments to initiate these programs. The purpose of this manual is to help police departments implement a police-based, pre-complaint juvenile diversion program. Throughout the manual, we will share the history and processes that led to the development and implementation of police-based diversion through the Cambridge Safety Net Collaborative, a national model for integrating behavioral health, social services, with juvenile policing and pre-complaint diversion.

Other communities and police departments initiating diversion programs have asked how to implement a Safety Net diversion program in their own towns and cities. We recognize that some police departments who will use this manual come from cities and towns that are very dissimilar to Cambridge, Massachusetts. With that in mind, we summarize the essential components of our diversion program and include them in this manual so they can be adapted and used by all types of police departments, large or small, urban or rural.

Throughout this manual, we feature quotes from the Cambridge Youth Resource Officers whom we asked to speak about the successes and challenges of implementing the Cambridge Safety Net model.





# THE CAMBRIDGE SAFETY NET MODEL

## BACKGROUND

Under the leadership of then-Commissioner Robert Haas, the Cambridge Police Department in 2007 established the Youth/Family Services Unit (YFSU). In establishing the unit, the Cambridge Police reached out to community partners in the schools, after-school programs, and behavioral health service providers to help interview and select the officers for the YFSU. The goal of the YFSU is to intervene early and interact with youth and their families to help address and resolve issues that have led to a negative act or crime and to provide support for youth and families when needed. The officers within the YFSU have the title of Youth Resource Officers (YRO), and they interact with youth in schools, city youth programs, and after school

programs. The activities of the YFSU are guided by the philosophy that youth and families can benefit from an all-encompassing and collaborative program that addresses factors — substance and alcohol use, mental health, lack of social services — that may be contributing to the risk for juvenile delinquency and/or crimes. Current partners involved with YFSU include the Department of Human Service Programs, Cambridge Prevention Coalition, Cambridge Public Schools, Cambridge Health Alliance, Clerk of the Courts Office, District Attorney’s Office, Department of Social Services, Juvenile Probation, and Riverside Community Care.

*“I mean, I always think it’s great for kids to have a second chance so I’m always for that, so I’m glad that this department and being in this unit that affords me the opportunity to extend that to the kids.”*

## SAFETY NET COLLABORATIVE

The partnership efforts built through the Youth and Family Services Unit, led to the creation of the Safety Net Collaborative with the mission to foster positive youth development, promote mental health, support safe school and community environments, and limit youth involvement in the juvenile justice system through coordinated prevention, early intervention, and diversion services for Cambridge youth and families. Safety Net is a partnership established between the Cambridge Police Department and community partners that provide health, mental health, and social services to youth and families in Cambridge Massachusetts, with the goal of curtailing youth involvement in the juvenile justice system.

At the core of Safety Net (SN) are the biweekly meetings that occur among all Safety Net partners. At the table are police officers, psychologists, social workers, school personnel, social services and youth development staff who update the team on cases that they are working on and bring new cases to the table who are in need of services. Safety Net uses a Release of Information so that the partners at the table are able to share information about the youth and families participating in SN to determine what services and supports may be needed. For more information on Safety Net see the references section of this manual.

Safety Net was founded on the OJJDP Delinquency Prevention Model (see [Appendix A](#)) and attempts to reduce juvenile delinquency through three primary strategies implemented by Youth Resource Officers (YROs): prevention, early intervention, and diversion.

### 1

#### Prevention

Through their presence in the schools, youth centers, and community, YROs work to build relationships with Cambridge youth and serve as positive role models to prevent risky, unsafe, or delinquent behavior.

### 2

#### Early Intervention

YROs work with schools, youth centers, and parents to identify youth with concerning social, emotional, or behavioral challenges. YROs intervene and connect youth with resources before these issues escalate to delinquency.

### 3

#### Diversion

For youth who have committed a non-violent criminal offense, YROs may place them in a police diversion program, through which they take responsibility for their actions and make reparations to the Cambridge community as an alternative to entering the juvenile justice system.

## POLICE-BASED DIVERSION THROUGH SAFETY NET

The capacity to provide police-based diversion through Safety Net started in 2008 but the nature of the interventions that accompanied the diversions has developed and expanded over time. Diversion within Safety Net, which is offered to those who have committed an arrestable offense, is voluntary and requires the consent of a parent or guardian for the youth to participate in diversion. Safety Net diversion differs from court diversion, which can be offered to Cambridge youth after they have been formally charged and processed by the juvenile court. Safety Net diversion occurs pre-complaint and the diversion is managed by the YRO and the Safety Net partners from the schools, afterschool programs and mental health providers.

In the Safety Net model, the YRO acts as the “point-person” for the diversion. YROs are trained to recognize trauma and mental health issues in youth and to directly collaborate with mental health professionals and other community providers. To initiate a diversion plan, the YRO first meets with the family and youth and fills out a risk and needs assessment. All YROs in Safety Net are trained on how to administer the Youth Level of Service-Case Management Inventory (YLS-CMI) (Guy, Nelson,

Fusco-Morin, & Vincent, 2014). The YLS-CMI is an empirically validated strength and needs assessment for at-risk youth. Every youth diverted receives the YLS-CMI, and if the results indicate that mental health or social services supports are needed, the YRO can assist in making that referral. The results of the YLS-CMI are also used to create a Diversion Agreement and Youth Service Plan. The YRO uses the Service Referral Matrix to put in place the specific services needed to address the need areas and build upon areas of strength.

The YROs act as case managers to ensure follow-through with the services and supports, including afterschool sports and arts programs, mentoring and family support services. The typical length of diversion through Safety Net is three to six months. Once the youth has completed diversion, the family receives a letter indicating that the diversion has been completed. In order to avoid “net widening,” it is important to note that SN diversion is not offered to youth who have not committed an offense or who otherwise would not have been in contact with the legal system. The vignette on the next page illustrates a youth’s trajectory from an arrestable offense to Safety Net.

*“I love that we do that [diversion]. To me, it’s huge. It’s the future of policing in my opinion. If you have the resources to implement this, you’d see so much change you know in juvenile offender’s relation; you see change in the relationship between the police and the community and it’s not easy. It takes time to build trust and get the community to understand why you’re not being so hard on me anymore and why are things different now and why you’re giving me this break, like what’s really going on. But if other departments put a team like ours in place and started this program, I think that’s huge.”*



## From an arrestable offense to diversion

**John is a 14-year-old who was caught shoplifting headphones from a local department store.** When the juvenile detective spoke to the security manager from the store, the manager explained that the store did not necessarily want to press charges, but wanted some kind of consequence since the value of the item was close to \$300. The juvenile detective explained the police diversion program through Cambridge Safety Net to the store manager and she agreed that this would be a good option for John. The detective met with John and his parents and explained the diversion program and that John would not be charged in court if they agreed to diversion. The family agreed and the detective set up a home visit for later in the week where the Youth Resource Officer (YRO) from John's school and the Cambridge Police Department's social worker would come out and meet with John and his parents.

During that meeting, it was discovered that John did not have much to do after school and was encouraged by some older kids, who he just started hanging out with, to steal the expensive headphones. John's parents were concerned about his lack of productive things to do after school and were also worried about impulsive behavior, which had been getting him into trouble at school. The YRO completed the Youth Level of Service-Case Management Inventory (YLS-CMI) with the social worker and John's scores indicated an elevated risk in the areas of Leisure/Recreation and Peer Relations. It was also noted that John may have undiagnosed issues with impulsivity. During the interview, John expressed a strong interest in making beats and music, one reason he wanted the expensive headphones.

John's diversion Youth Service Plan, as part of his diversion contract, involved completing an intake at the local mental health clinic to screen for impulsivity and to start treatment if indicated. The Youth Service Plan also included having John participate in a beat-making class at a local studio. Through that class, John connected to other youth with an interest in music and began collaborating with them. He successfully completed the diversion in three months and a follow-up with parents indicated they were pleased with how he was spending his time after school and there were no new incidents of concern.

## IMPACT OF THE SAFETY NET MODEL

Research studies have demonstrated that Safety Net has had a significant impact on juvenile arrests, recidivism and service utilization since its implementation in 2008. In the city of Cambridge, juvenile arrests have declined at a statistically significant rate when compared to local and national averages (Barrett & Janopaul-Naylor, 2016). Safety Net has also had a significant impact on reducing rates of juvenile recidivism (Barrett et al., 2019). In terms of linking at-risk youth to services, juveniles who were

diverted through Safety Net accessed behavioral health supports at a significantly higher rate than youth who were arrested or summonsed through juvenile court (Janopaul-Naylor, Morin, Mullin, Lee & Barrett, 2019). We hope the initial successes of the Safety Net model can translate into a police-based juvenile diversion program in your community that can help keep promote safety and well-being for youth and families.

## YOUTH RESOURCE OFFICERS

Key to the implementation of police-based diversion is the YRO. In Safety Net, the term “youth resource officer” is used rather than school resource officer (SRO) because the officer interacts with youth in settings outside of the school (e.g., afterschool, home visits, community events, etc.). A unique curriculum is used to train Safety Net’s YROs. The curriculum includes the application of child development and trauma theories (see **Training**).

Within Safety Net, the YRO acts as a case manager, which affords the officer the opportunity to act in a preventative manner as part of the team trying to help the youth and family rather than solely in an enforcement capacity. In the Safety Net model, the YRO stays involved, working with the family and following up, a contrast to the “usual protocol” for

police-behavioral health that typically involves an officer providing a handoff to behavioral health/ youth service providers with no further follow-up or outreach. The YROs use a flow chart to guide the decisions they make in processing a case (see **Appendix B**)

Although the Cambridge Police Department has the needed resources to deploy YROs throughout all of the city’s schools, this is not a requirement. What is most important is to provide needed resources for them to fulfill their responsibilities in a way that they are aligned with the goals of the community collaborative/partnership. Youth Resource Officers can participate in multiple prevention efforts by supporting and/or leading various programs and activities. Here we provide some illustrative examples:

Support existing programs at youth centers and non-profit organizations. Having officers participate in activities like these gives youth the opportunity to build meaningful relationships with police officers and identify police officers as a resource to the community.

Support interventions and diversions by serving as the primary case managers. In this capacity, officers conduct risks and needs assessments, work with collaborative partners to develop Youth Service Plans, connect youth and families to programs and services, and conduct follow-up to verify and ensure utilization of services.

Connect youth to a variety of programs, services, and resources such as after-school activities, leadership activities, mentoring and support services, mental health and substance abuse treatment. They communicate with families and schools to get a holistic understanding of a youth’s life context and to also explore potential root causes of their concerning behavior.

Instead of solely investigating criminal incidents (as typical police work requires), YROs use their training to also “investigate” non-criminal juvenile incidents and behavior, in order to identify the needs of a youth and his/her family and connect them with community resources.

As they begin to build relationships with youth and school/youth center staff, YROs also begin to help youth whose behavior or experience flagged them as “at risk” for social/emotional problems or predispose them to delinquency, despite not having committed an actual crime.

**For a YRO assigned to a Cambridge school, a typical day might include prevention-related activities like:**

**Greeting students** and parents during “critical” school times — morning drop-off, lunchtime, recess, dismissal

**Spending time** in the cafeteria in the morning, engaging with students and resolving problems

**Checking in** with the school administrators:

**When school** administrators inform YRO about any problems with youth or parents on which they would like to consult or involve the YRO, or any upcoming events they would like the YRO to attend (e.g., field day, school dance)

**When YRO** informs school staff about any relevant criminal activities that have recently occurred off school grounds (e.g., a mugging down the street over the weekend, “Johnnie was detained by police Friday night,” etc.)

**Talking to** a classroom about bike safety, bullying, theft, etc.

**Being present** in the halls between classes, engaging with students

**Visiting the** lunchroom or cafeteria to interact and talk to students, to make connections with students

**Responding to** a request from a principal to immediately address a situation at school that merits YRO’s presence

**Generally being** around the school in uniform as a deterrent to crime near or in the school

During the school year or summer, YROs' prevention-related activities in the youth centers may include:

Helping staff with youth groups

Leading stretching exercises before sports activities

Joining a pick-up game of basketball

Running a youth basketball or hockey league

Interacting and building relationships with youth and program staff

By engaging with students and families at schools, youth centers, and in the community, YROs can:

Be positive role models and mentors for youth

Instruct youth in safety issues and understanding the law

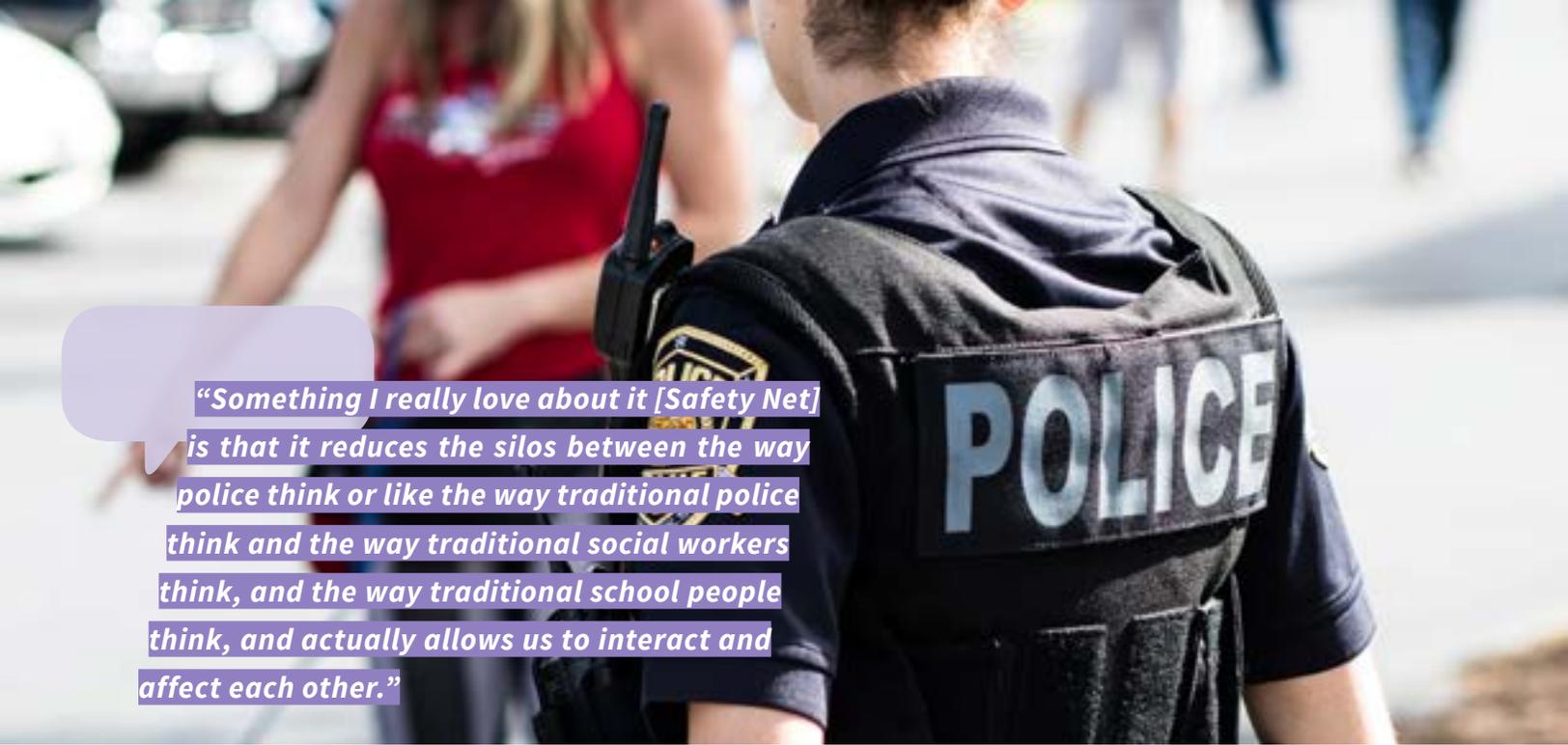
Deter criminal activity in the schools and youth programs

Help make schools a safer environment

Be a trusted resource for youth and parents when they need help and/or advice

Improve community-wide perceptions of the police

*"If a kid at the high school is on diversion, I get to see them every day. I get to know what he's doing every day in the neighborhood, in the other communities from other kids. So there's a huge difference in that our activity level is much, much greater."*



*“Something I really love about it [Safety Net] is that it reduces the silos between the way police think or like the way traditional police think and the way traditional social workers think, and the way traditional school people think, and actually allows us to interact and affect each other.”*

## THE YOUTH RESOURCE OFFICER AS CASE MANAGER

Within the Cambridge Safety Net model, the YRO acts as a case manager, meaning that the YRO actually carries a caseload of families that he or she follows-up with regularly. These cases may be diversions that are assigned to the YRO or interventions (see **Police-Based Diversion**). It is important to note that because the Cambridge Police Department was able to establish the Youth/Family Services Unit

(YFSU), our officers had the capacity to act as case managers. We recognize that not all departments will have the capacity for the YRO to act as a case manager. In these instances, the police department can partner with a community service agency or state social services so that a member of that agency could serve as a case manager.

## TRAINING THE YOUTH RESOURCE OFFICER

Training YROs is important for many reasons. First, it promotes a proactive police culture that aims to prevent crime, specifically juvenile delinquency, and identify what causes or triggers certain behavior in youth. Second, cross-training along community partners fosters teamwork and allows collaborative partners to interact and build relationships. Training also ensures officers and collaborative partners have the necessary knowledge and skills to work effectively and efficiently with youth and families. Lastly, training reinforces important concepts and maintains skills and knowledge.

Proactive policing involves preventing youth from committing a first-time offense or recidivating by investigating and addressing what triggers a youth to behave in a certain way. Training that contributes to effective proactive policing includes but is not limited to the following resources. It is recommended that police departments leverage local resources (e.g., colleges and universities, training centers, community partners) to provide training for officers.

On the following pages, we present the domains covered during YRO training and resources associated with those training domains.

## Person-Centered Case Management

### **FAMILY SELF- SUFFICIENCY (FSS) PROGRAM**

*US Department of Housing & Urban Development*

This checklist helps practitioners determine if they are supporting their client on an individual level by using techniques and principles of Motivational Interviewing. A checklist of questions, developed by the Center for Evidence-Based Practices at Case Western Reserve University, complies questions that determine if you are following a client-centered approach in your practices.

<https://www.hudexchange.info/trainings/fss-program-online-training/3.1-client-centered-approach.html>

### **TRAINING MANUAL FOR PERSON-CENTERED, STRENGTHS-BASED CASE MANAGEMENT**

*Kansas Department of Addiction Prevention Services and the Kansas Association of Addiction Professionals*

This manual provides knowledge and skills that will promote efficient and effective organization and delivery of both residential and community-based treatment services. This includes a person-centered strengths assessment includes different assessment tools to be utilized when working is a social work setting.

[https://www.georgiacollaborative.com/wp-content/uploads/sites/12/providers/clin\\_ut/PCCM\\_Training\\_Manual.pdf](https://www.georgiacollaborative.com/wp-content/uploads/sites/12/providers/clin_ut/PCCM_Training_Manual.pdf)

## Conflict Resolution

### **OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION**

*U.S. Department of Justice, Office of Justice Programs*

Created by the U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, this fact sheet highlights four approaches to conflict resolution education: process curriculum, peer mediation, peaceable classroom, and peaceable school. This explores each of these approaches and how they can be applied when working with youth.

<https://www.ncjrs.gov/pdffiles/fs-9755.pdf>

### **CRITICAL CRIMINAL JUSTICE ISSUES**

*U.S. Department of Justice, Office of Justice Programs*

This manual includes a section titled “Early Prevention and Intervention for Delinquency and Related Problem Behavior”. This includes general prevention strategies best implemented with other federal agencies, prevention and intervention strategies with the justice system, and additional justice system research.

<https://www.ncjrs.gov/pdffiles/158837.pdf>

## **YOUTH DE-ESCALATION AND CONFLICT RESOLUTION FOR SCHOOL SAFETY OFFICERS WEBINAR**

*International Association for Chief of Police*

This webinar is a crisis intervention tool for interacting with youth in schools, particularly youth de-escalation and conflict resolution. In addition, it provides tools for helping students learn to resolve conflicts appropriately provides them with leadership tools to build positive relationships between themselves, other students, and staff.

<https://www.theiacp.org/resources/webinar/youth-de-escalation-and-conflict-resolution-for-school-safety-officers-webinar>

## **ADOLESCENT DEVELOPMENT: STRATEGIES FOR YOUTH AND LAW ENFORCEMENT INTERACTIONS WEBINAR**

*International Association for Chief of Police*

The purpose of this webinar is to discuss adolescent brain development and how it affects youth behavior. The presenter will discuss youth thinking and behavior, strategies to improve police interaction with youth and legal considerations when interviewing or interrogating youth, as well as providing resources to improve interactions and outcomes when dealing with youth.

<https://www.theiacp.org/resources/webinar/adolescent-development-strategies-for-youth-and-law-enforcement-interactions>

## **Mental Health First Aid**

### **USA MENTAL HEALTH FIRST AID**

*Youth Mental Health First Aid*

Mental Health First Aid is an 8-hour course that teaches you how to help someone who may be experiencing a mental health or substance use challenge. The training helps you identify, understand and respond to signs of addictions and mental illnesses. Youth Mental Health First Aid is designed to teach caregivers, teachers, school staff, health and human services workers, and other individuals working with adolescents' tools to deal with someone who is experiencing mental health challenges or is in a crisis.

<https://www.mentalhealthfirstaid.org/take-a-course/find-a-course/>

### **FIND SUPPORT — LAW ENFORCEMENT OFFICERS**

*National Alliance on Mental Illness (NAMI)*

NAMI Basics is a free six-week class for parents and family caregivers of children and adolescents with emotional or behavioral issues. It provides critical strategies for taking care of young children and learning the ropes of recovery. NAMI Basics is taught by NAMI-trained teachers who are parents or caregivers or children with similar issues. Participants will learn communication tips, how to problem-solve, and the skills to help them cope with emotional impact of caring for their child.

<https://www.nami.org/find-support/law-enforcement-officers>

## Child and Adolescent Development

### **PARTNERSHIP UNIVERSITY**

#### *Youth Development Institute(YDI) Courses-Descriptions and Information*

The Youth Development Institute is a series of online training courses for youth-serving paraprofessionals and volunteers seeking to increase their knowledge and enhance their skills. This online course provides background on adolescent brain development, the role of self-concept and self-esteem in identity development, how youth respond to puberty, and what youth workers can do to be supportive during this time of change.

<https://www.partnershipuniversity.org/youth-development-institute-ydi-courses-descriptions-and-information#Adolescent>

## Policing the Teen Brain

### **STRATEGIES FOR YOUTH, CONNECTING COPS & KIDS**

#### *Juvenile Justice Training for Law Enforcement*

SFY's training expands officers' understanding of adolescent behavior and builds their de-escalation tactics for interactions with youth. The foundation of this training is based on regional, agency, demographic or subject area's needs. The course Policing the Teen Brain is a training program that provides officers with the information and skills they need to effectively interact with youth.

<https://strategiesforyouth.org/sfysite/for-police/>

<http://strategiesforyouth.org/for-communities/think-about-it/>

### **THE EFFECTS OF ADOLESCENT DEVELOPMENT ON POLICING**

#### *International Association of Chiefs of Police*

This brief provides an overview of adolescent brain development and its effects on law enforcement interactions with youth. Reviewing youth development stages and their effects on youth behavior may increase understanding of how and why teenagers think and act the way they do. This brief includes strategies for law enforcement to apply this knowledge during youth interactions, outlining important considerations for integrating this information into everyday practices, procedures, and programs.

<https://www.theiacp.org/resources/webinar/the-effects-of-adolescent-development-on-policing>

## 1-2-3 CARE, A Trauma-Sensitive Toolkit for Caregivers of Children

*Spokane Regional Health District*

This fact sheet outlines what is considered as an Adverse Childhood Experience, what exposure to childhood ACEs can increase the risk of in children, and how ACEs affect the physical health of children.

[https://srhd.org/media/documents/1-2-3-Care-Toolkit\\_LowResolution.pdf](https://srhd.org/media/documents/1-2-3-Care-Toolkit_LowResolution.pdf)

## TRAUMA-INFORMED CARE: PERSPECTIVES AND RESOURCES

*Georgetown University Center for Child and Human Development*

This video “Trauma-Informed Care: Perspectives and Resources” is a comprehensive web-based resource tool. This video comprises issue briefs, video interviews, and resource lists for implementation. The issue briefs provide an introduction and overview for each of the tools eight models. The comprehensive resources list support users in understanding how to build trauma-informed systems and organizations.

<https://gucchdtacenter.georgetown.edu/TraumaInformedCare/>

## TRAUMA TRAINING FOR CRIMINAL JUSTICE PROFESSIONALS

*Substance Abuse and Mental Health Service Administration (SAMHSA)*

The GAINS Center offers a one-day training on trauma-informed responses from criminal justice professionals about the impact of trauma and how to develop trauma-informed responses. This training has been developed specifically for criminal justice professionals to raise awareness about trauma

and its effects. The course, “How Being Trauma-Informed Improves Criminal Justice System Responses,” is a one-day training for criminal justice professionals to increase their awareness and impact of trauma, develop trauma-informed responses, and to provide strategies for developing and implementing trauma-informed policies.

<https://www.samhsa.gov/gains-center/trauma-training-criminal-justice-professionals>

## National Association of School Resource Officers Basic Training

### TRAINING COURSES — BASIC SRO COURSE

*National Association of School Resource Officers (NASRO)*

The NASRO Basic School Resource Officer Course is a forty-hour block of instruction designed for law enforcement officers and school safety professionals working in an educational environment and with school administrators. The course provides tools for officers to build positive relationships with both students and staff.

<https://nasro.org/training/nasro-training-courses/>

A photograph of two young women outdoors. The woman on the left is seen from the back, wearing a purple backpack and a dark shirt. The woman on the right is facing her, wearing a red t-shirt with 'GO WING' printed on it, a dark cap, and a black backpack. She is smiling and gesturing with her right hand. The background is a blurred green field.

# ESTABLISHING CRITICAL PARTNERSHIPS

While this manual uses “police-based diversion” to describe a model of juvenile diversion that occurs outside of the court system, the term is also frequently referred to as “community-based diversion.” An effective juvenile diversion program cannot occur without significant buy-in from community partners. A collaborative approach to youth development and preventing juvenile delinquency is necessary, because adolescent behavior happens in a variety of settings and many individuals impact youth development. No one agency has the resources to effectively and efficiently support youth at-risk of delinquency. Identifying and building relationships with agencies that have a stake in adolescent development will allow officers to connect youth and families to the needed services.

Within community-based diversion, the police act as the main point of contact because they are often the first and most critical point of contact for juveniles committing an offense. From that point, the community partners are crucial in providing the supports and services needed to address the underlying issues that contributed to that young person coming into contact with the police in the first place. We recommend taking an inventory of existing services and agencies before reaching out to partners. In many communities, the local school department or the public health office will already have a listing or inventory of youth service providers. The following community partners are essential in forming an effective police-based juvenile diversion program: schools, youth development agency, and a community mental health provider.

## SCHOOLS

The schools and the police department should develop a memorandum of understanding. This document outlines how the police department, schools, and the District Attorney will coordinate their efforts to prevent violence involving students; to prevent the use, abuse, and distribution of alcohol and other illegal drugs; and to promote a safe and nurturing environment in the school community. The memorandum should include designated liaisons, prevention strategies, reporting guidelines, and procedure guidelines. The MOU for school resource officers in Massachusetts can be found at <https://www.mass.gov/doc/sro-mou-final-9-5-18>.

The police supervisor can meet with the youth development program and school principals to conduct a quality of service review of the police department's role in the diversion program once per year. The supervisor would inquire about what the individual school's needs are and how the police department can assist in meeting their needs. The supervisor would report their findings to the Commanding Officer and they hold one-on-one meetings with YROs to discuss strengths and areas of improvement.

## YOUTH DEVELOPMENT AGENCIES

YROs can have a formal meeting with the youth development program at least once per quarter to discuss programming at the youth development program and the role the YROs can take in the programs. The Unit Supervisor and Director of

Programming for the youth center can meet with the youth development program and YRO to ensure that the meetings are taking place and a dialogue is happening between both agencies.

## COMMUNITY MENTAL HEALTH PROVIDERS

Mental health problems in young people can lead to risk behaviors that put a young person in contact with law enforcement. Using diversion to link a young person to mental health services can greatly reduce the risk of future involvement with law enforcement (Wilson & Hoge, 2013). It is important to recognize that mental health records are protected by privacy laws such as **HIPAA**. However, HIPAA does not prevent police from partnering with mental health providers to ensure that at-risk youth receive

evaluation and treatment. A clinician from the community health provider can serve as a point of contact with police to follow-up on whether a family was able to be connected with services. No other health information needs to be shared beyond this point, in order to protect the privacy of the youth and family. Also, police and mental health agencies can partner in a manner that does not require the sharing of protected health information (e.g., making referrals, cross-training, etc.).

## OTHER POTENTIAL PARTNERS

We have named vital partners that are essential to form a robust community-based juvenile diversion program. However, if feasible in your community, other community partners can make key contributions to the diversion program. For example, the departments of social services and juvenile proba-

tion can both be important partners in these efforts. Also, if there is a local provider of restorative justice practices fostering reconciliation with potential victims and the community at large after an offense has been committed, such a provider could be a partner in your diversion program.

## MEETINGS WITH PARTNERS

It is important that the partners in the police-based diversion program are able to meet regularly to: 1) update the partners on the progress of cases; and 2) bring up new cases for diversion or intervention. In the Safety Net model, we meet on the 1st and 3rd Mondays of the month at 9:00 am at police headquarters. An email is sent the Wednesday before the meeting for partners to send names of youth or other agenda items to be discussed to the meeting coordinator. As cases are discussed in the meeting,

a list of follow-ups is generated and emailed to the group so that there are assigned tasks for team members to work on between meetings. See **Appendix C** for sample agenda and follow-ups. Communication between collaborative partners can take place at any of the regularly scheduled meetings. If updates or information are needed in between meetings, phone and e-mail communication should be utilized by following the established information-sharing protocols.

## INFORMATION SHARING PROTOCOLS

The partners in the Safety Net Collaborative have developed a Release of Information (ROI) that, once signed by a parent or guardian, allows the youth to be discussed at Safety Net meetings. It is important to note that the ROI is not a HIPAA protected **release of information**, rather it allows a general discussion of the youth and family with the purpose of having partners contribute ideas as to what might be helpful for the youth or family. It should be noted that the information shared in the Safety Net meetings does not result in criminal complaints being sought out nor is protected criminal justice information (e.g., report of sexual assault) shared

in the meetings. It is important that all partners respect the rights of privacy of the families and only share the minimal amount of information necessary to put the proper services and supports in place. If a more detailed information exchange is needed, that can occur outside of the meeting between the relevant partners. An example of this might include an individual therapist from a community agency and a school counselor getting the proper releases signed so that they can coordinate around treatment goals and progress. Also, when partners are emailing names for the agenda, initials are used to protect confidentiality.



# DELIVERING POLICE-BASED DIVERSION

As noted earlier, Youth Resource Officers (YRO) serve as the point person for interventions and diversions and link youth to positive youth development activities such as sports and mentoring programs. Each YRO is trained to conduct a risk and needs assessment and then collaborate with partners in mental health programs/services and in the schools to develop youth service plans, connect youth and families to programs and services, and conduct follow-up visits.

The Cambridge Safety Net Police-Based Diversion model centers around a structured case management process that involves the five key stages shown on the following page.

*Being part of Safety Net and being part of community activities, I've compiled a list of community resources and my contact people at those places. I've shared that with all of the school psychologists, social workers, guidance counselors, deans of students in the city for the public schools.*

---

**1** Identify an at-risk youth who has committed an arrestable offense.

---

**2** Case enters the diversion program and risk assessment is conducted - The risk assessment is completed by the YRO ideally with a clinician after the YRO has met with the youth and family and gathered the necessary information to complete the assessment. There are a variety of risk and need assessment tools available, however, most of them focus on youth post-adjudication. When selecting a risk and needs assessment tool, it is important to consider the mission and goals of the collaboration and select the tool that can most effectively help the collaboration. The Safety Net Steering Committee selected the **Youth Level of Service/Case Management Inventory (YLS)**, because it identifies specific risk and need areas for individuals that could be addressed in the Youth Service Plan. While YLS was designed for youth post-adjudication, it is flexible enough to meet the needs of a community-based diversion program. However, other tools can serve this purpose; one example is the MAYSI: <https://www.ncjfcj.org/massachusetts-youth-screening-instrument-maysimaysi-2>.

---

**3** Provide a Diversion Agreement and Youth Service Plan. The terms and conditions of the diversion plan are managed by the assigned YRO with input from the family and community partners, and the process circumvents juvenile court altogether. Diversion is viewed as an opportunity to implement the services and supports needed to address the underlying issues that put the young person in contact with police in the first place.

Diversion is offered to as many youths as possible and eligibility for diversion is a joint decision among the YRO and the police supervisor on the case. There are some instances when diversion would not be appropriate. For example, youth whose offenses involved a victim or for which arrest is mandated (e.g., domestic assault). All youth in the city are eligible to receive outreach and support through the community partners regardless of eligibility for diversion.

---

**4** YRO manages case progress: Once a decision on eligibility for diversion is made, the YRO meets with the youth and family to offer diversion and inform them that participation in the diversion process is voluntary. If the family declines diversion, charges will not be brought forth in juvenile court; however they will not be offered an opportunity for diversion in the future if further offenses are committed. The results of the risk and needs assessment are used by the YRO to develop goals for diversion and determine what services and supports may be needed. This diversion plan is then presented to the family and, if they agree, the plan is put into place for a period of three to six months.

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**5** Track youth outcomes in terms of compliance with diversion contract, follow through on services and supports and whether family feels the intervention has been effective. Also, see the Data Tracking section for tracking data on recidivism and youth development outcomes.

# KEY DOCUMENTS FOR DIVERSION

**Diversion Agreement**

**Risk/Needs Assessment**

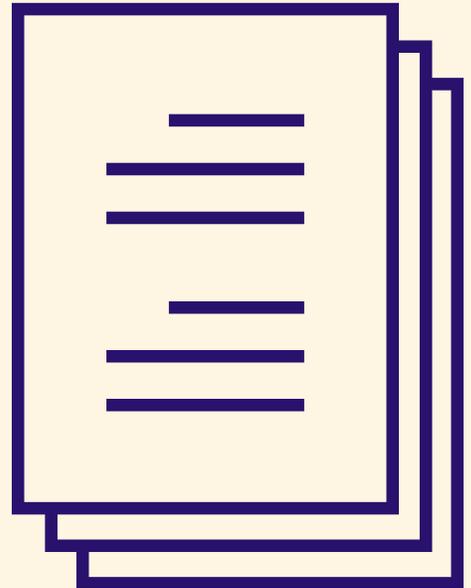


Cambridge purchased the YLS-CMI, but other validated assessments are also available for order.

**Youth Service Plan**

**Service Referral Matrix**

**Completion Letter**



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*While the YRO is the point person throughout implementation of diversion according to the Youth Service Plan, the community partners play a critical role in helping to implement the interventions linked to the plan and to monitor progress. At the regular partner meetings, it is important for staff from schools and afterschool programs to provide updates on the youth's progress towards the goals of the Youth Service Plan. Mental health providers can also provide feedback about whether the youth was able to connect with services.*

*Remember, the provider only has to tell the group that the connection was made to services; all other personal information is kept private due to rules with HIPAA and confidentiality. Also, remember that a diversion contract is not written in stone. If an intervention is not working or a service has stopped or there is a lack of follow-up by providers, the supports and services in the youth service plan can be adjusted as needed. Once the diversion is complete, the diversion completion letter is sent to the family and the diversion is closed.*

---

## INTERVENTIONS OUTSIDE OF DIVERSION

*Police-based diversion is a critical mechanism to keep youth from entering the juvenile justice system. However, police departments do not have to wait until a youth has committed a criminal offense to intervene. As the Cambridge Safety Model expanded, cases came to the group before an offense was committed and at a younger and younger age. Our partners in the schools and afterschool programs reach out if they worried about a young person exhibiting risk behaviors they were concerned could develop into delinquent behaviors. Our partners trusted the YROs would intervene in a preventative manner to link the youth and family to services and did not feel they were “calling the police” on the family.*

*Within Safety Net, we began to track “interventions” which are YRO interactions with young people that did not involve a criminal offense. The YROs in the Safety Net model would also follow up with families if there was a service call to the home for a domestic issue or a psychiatric issue. The nature of these follow-up calls or home visits would be to see if the family was in need of additional supports and services.*



# EVALUATING DIVERSION OUTCOMES

To determine whether a police-based diversion program is effective, it is important to draft an evaluation plan prior to beginning the diversion program in order to identify what indicators need to be tracked (e.g., arrests, summons, diversions), how they will be documented and measured (qualitatively vs. quantitatively), and who will track them.

Two types of indicators should be identified: **process** and **outcome**. Process indicators look at what the program actually does (e.g., number of meetings held and meeting attendance), whereas outcome measures look at the impact of the program (e.g., number of juvenile arrests, number of youth opting diversion, whether or not a youth recidivates).

The effectiveness of the diversion program can be evaluated by tracking the following indicators:

- » Juvenile arrest and summons rate (to first see if the police-based diversion program was able to reduce the number of youth in the community who were either arrested or involved with juvenile court)
- » The number of service referrals made to the diversion program
- » Interventions that the officers perform that are outside of diversion. This can be accomplished by having the officers complete a monthly log that tracks interventions and referrals made

This data can be tracked over time and pre- and post- comparisons can be made to evaluate if diversion has been success in reducing the arrest and recidivism rate within the town or city. These numbers can also be compared to state and local averages available online. For an example of such a study see the article by Barrett and Janopaul-Naylor (2016) in the **References** section.

## CONDUCTING INTERVIEWS

We also recommend conducting semi-structured interviews with officers and partners related to the principles of diversion, collaboration with other systems, and engaging families sometime after the program has been implemented in order to obtain a qualitative evaluation focused on:

- » **Acceptability:** the program's participants' satisfaction with the content, delivery, and credibility of the training curriculum
- » **Adoption:** participants' uptake and intention to use the skills learned in the training curriculum
- » **Appropriateness:** the relevance and perceived fit of the program's training curriculum, skills, and processes with the culture of the police department, schools, healthcare systems.

It is recommended to conduct up to 20 semi-structured interviews with the diversion program's participants (police officers, social workers, clinical psychologists, school and afterschool personnel, and families of the youth involved in the program).

The police leadership can identify and invite police officers from the police department; school and afterschool staff who are involved in the diversion program; and families of youth in the diversion program to participate in the qualitative assessment. Please work with the IRB to detail the consent process. The interview guide should ask respondents to reflect upon the acceptability (were participants satisfied with the training content?), adoption (have participants used the information?), and appropriateness (were the skills learned relevant to the participants' work to divert youth?) (see **Appendix D**). This process will provide concrete information on the extent to which program has been taken up among its partners; how the program resonates with the culture and processes of social service systems; and the initial success in changing police officers' knowledge and attitudes and creating linkages across systems. The entire interview can last approximately 60 to 90 minutes. Interviews are then transcribed and analyzed in order to generate a report on the program's acceptability, adoption, and appropriateness.





## ADVANCED DATA ANALYSES

To conduct an advanced data analysis or outcome evaluation of the diversion program, it is recommended that the police department partner with a local university or research institution to form an evaluation team. The evaluation team can conduct data analyses using existing data collected by your police department, schools, and existing electronic medical records (EMR), from a healthcare provider participating in the diversion program, from a specific time period to present. Police department data should already be tracked for program purposes. School data should be tracked for assessment of school outcomes purposes. From the EMR, you can extract data on individual patient's utilization of services, diagnoses, and demographic information. The evaluation team will need to submit an Institutional Review Board (IRB) application during this process that outlines the use, parameters of data-sharing and

safe-keeping of the data, especially if data is merged across systems (e.g., police department, school, and health care).

The primary purpose of the data analyses should be to identify predictor variables that connect the diversion program's operations to individual outcomes. This process can begin by gathering basic descriptive statistics for all variables at the individual, organization, and community level. After gathering descriptive statistics, you can move on to cross tabulations to identify the main variables of interest. Then you will need to identify moderator and predictor variables. Identifying predictor variables will allow you to examine individual-level outcomes (e.g., successful program completion or criminal activity), and regress them against potential predictor variables.

## CONCLUSION

*Police-based juvenile diversion is a critical mechanism in preventing at-risk youth from entering into the juvenile justice system. By partnering with community providers and support agencies, police officers can use the first point of contact with law enforcement as an opportunity to address the issues that underlie youth risk behavior. The Cambridge Safety Net Collaborative model for juvenile diversion has demonstrated effectiveness in reducing juvenile arrests and recidivism as well as improving behavioral health service utilization for diverted youth (Barrett & Janopaul-Naylor, 2016; Barrett, et al., 2019; Janopaul-Naylor, Morin, Lee, Mullin, & Barrett, 2019). This manual provides a template for how other municipalities can implement police-based juvenile diversion. The hope is that the policies and procedures successfully developed in Cambridge can be adapted to help youth and families locally and nationally.*

## DIVERSION AGREEMENT

Youth Name: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_

This agreement sets forth the conditions under which the above-named youth, with the express consent of his/her parent or guardian will enter the Police Department's Community-Based Juvenile Diversion Program:

I, \_\_\_\_\_, do hereby, voluntarily and after having been provided a full opportunity to ask questions, and to discuss this matter with a parent or legal guardian, agree to the following:

1. On \_\_\_\_\_ I did engage in the following, which constitutes a violation of state and/or municipal law:

In return for the Department's agreement not to pursue criminal charges against me, I agree to meet the following conditions for this Diversion program:

Restorative Justice Elements	Community Service Elements	Counseling and Service Plan
<input type="checkbox"/> Restitution Payment \$ _____ <input type="checkbox"/> Letter of Apology <input type="checkbox"/> Mediation Session w. Victim <input type="checkbox"/> Other: _____ _____	<input type="checkbox"/> _____ Hours Community Service Service Program Options Include: 1. 2. 3.	<input type="checkbox"/> Adhere to the attached Youth Service Plan form.
<input checked="" type="checkbox"/> Avoid any future status or criminal offenses	<i>These terms are to be met not later than:</i> _____	

I understand that should I fail to comply with the conditions set forth in this agreement, the Cambridge Police Department may institute criminal charges against me for the conduct described above in paragraph 1.

**Signatures:**

\_\_\_\_\_  
Youth

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Officer

\_\_\_\_\_  
Date of Agreement

\_\_\_\_\_  
Unit Supervisor

**Closeout:**

I certify that the youth listed above has:      **Completed**      **Failed**      the terms of this diversion contract.

Officer's Name and Signature: \_\_\_\_\_

Date: \_\_\_\_\_

[Date]

To [YOUTH'S NAME]:

This letter certifies that as of [Completion Date] the Cambridge Police Department recognizes your successful completion of our juvenile diversion program. Your diversion contract and service plan began on [Contract start date], and contained the following items:

1. X hours of Community Service
2. Letter of Apology
3. Youth Service Plan including counseling sessions
4. [etc...]

We praise you for entering the diversion program, and demonstrating the responsibility and commitment needed to complete the terms of your diversion contract and service plan. We hope you will continue to behave responsibly and can serve as a role model for your peers in the future. Your choices and actions going forward can make a difference in our community.

Our officers remain a valuable resource to you and your family. We offer many chances to get involved, and hope to see you in the future at the community events and activities that we support. We are always here to provide help and support. If you have any questions, comments, or concerns, do not hesitate to approach any of our Youth Resource Officers.

Regards,

Commanding Officer  
Police Department

## RELEASE OF INFORMATION

Client Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

1. I, \_\_\_\_\_, parent/guardian of the child named above, hereby authorize the health provider and its clinical and administrative staff, to disclose protected health care and student record information concerning my child to member agencies of the police diversion program.
2. I understand that the Police Department, as a criminal justice agency, has an obligation to keep CORI concerning my child confidential. I also understand that I have the right to authorize the Cambridge Police Department to release CORI to certain individuals or agencies.
3. I understand that the police diversion program consists of the organizations listed below:
  - Community Health Provider
  - Police Department
  - After school program
  - Public Schools
  - Other:
4. I also hereby authorize the Public Schools to disclose student record information concerning my child to member agencies of the police diversion program.
5. By signing this release, I also authorize communication between all the above police diversion program organizations, for the limited purposes of evaluating my child's eligibility to participate in the Police Department's juvenile diversion program, and making recommendations for participation in intervention programming, which may include referrals to clinical services and/or other community programs.
6. I understand that in making such determinations and recommendations, members of the police diversion program may also conduct assessments of my child's service needs and risks. Such assessments, and any other written or verbal communication resulting from the police diversion program participation, will not create a criminal record for my child.
7. The information exchanged may include:
  - Diagnostic Information
  - Treatment / Discharge Summary
  - Summary of Interactions
  - Records of School Performance
  - Risk Assessment Information
  - Report of Evaluation
  - CORI
8. I understand that my child's and my family's participation in the police diversion program is entirely voluntary, and that I have the right to revoke this authorization at any time by sending written notification to the Police Department.
9. I understand that information used or disclosed pursuant to this authorization may be subject to re-disclosure by the recipient of the information, and will no longer be protected by federal HIPAA privacy provisions and federal and state student record privacy provisions. I understand that this document constitutes a HIPAA and student records release form.
10. This authorization shall remain in effect for one (1) year from the time of signature, unless
11. another end date is specified here: \_\_\_\_\_. If additional time is required to meet the purposes of this release, I understand that a new release form must be signed.
12. I, for myself and for my child above-named, hereby release the City and all its officers, employees, agents and servants from any liability which may arise from the release of information pursuant to this authorization.

**13.** I have carefully read and understand the above statements, and do herein expressly and

**14.** voluntarily consent to the release of information as described above.

Signature of Parent/Guardian Dated \_\_\_\_\_

Printed Name of Parent/Guardian \_\_\_\_\_

Contact Number \_\_\_\_\_

Contact email \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

## Risk and Needs Assessment Interview Questions

As part of the diversion process we complete a risk and needs assessment to help us both address any needs with your son/daughter and most importantly help build on his/her strengths. I am going to ask a few questions to help us better understand him/her.

### Prior and Current Offenses/Dispositions

Has your son/daughter been in any trouble with the law previously?

### Family Circumstance/Parenting

Do you have any concerns about him/her following your rules at home or your ability to effectively discipline him/her?

### Education/Employment

Does he or she have any behavior problems in school? For example, suspensions, truancy?

### Peer Relations

Do you have concerns about the other youth he/she hangs out with?

### Substance Abuse

Any concerns with drug or alcohol use for him/her?

### Leisure/Recreation

Does he/she participate in afterschool activities? Which ones?

### Personality/Behavior

Any concerns about aggression, impulsivity, tantrums, talking back, or inflated self-esteem?

### Attitudes/Orientation

Any concerns about his/her attitude towards authority or attitudes that support breaking rules or criminal behavior?

### Assessment of Other Needs and Special Considerations

Are there any other issues in the family or medical, educational or mental health issues with him/her that it would be important for us to know to best support you?

# Service Referral Matrix

		Need Areas							
	Family Circumstances/ Parenting	Education/ Employment	Peer Relations	Substance Use	Leisure/Recreation	Personality/Behavior	Attitudes/Orientation		
Score	<b>Low</b>	Recognize Family Parenting as potential strength and consider adding strong parental involvement/oversight in treatment planning	Recognize Education/ Employment as a potential strength and consider adding school resources or job in treatment planning	Recognize Peer Relations as potential strength and consider adding peer group involvement in treatment planning	Consider whether Substance Abuse prevention programming may be helpful	Recognize Leisure/ Recreation as potential strength and consider adding sports/activities or coaches/mentors in treatment planning	Recognize Personality/ Behavior as potential strength and see if these positive personality factors can enhance treatment planning (e.g., resiliency, leadership, etc.)	Recognize Attitudes/ Orientation as potential strength and see if these positive attitudes and desire to do well can enhance treatment planning (e.g., goal-oriented, respect for authority, etc.)	
	<b>Moderate</b>	<ul style="list-style-type: none"> <li>In-home therapy (IHT) &amp;/or Intensive Care Coordination (ICC)</li> <li>Family Support &amp; Engagement Program</li> <li>Mentoring program</li> <li>Outpatient therapy</li> </ul>	<ul style="list-style-type: none"> <li>SPED evaluation/re-evaluation</li> <li>Tutoring</li> <li>School-based behavioural supports</li> <li>Employment Program</li> </ul>	<ul style="list-style-type: none"> <li>After-school program</li> <li>Employment program</li> <li>Mentoring program</li> </ul>	<ul style="list-style-type: none"> <li>Parent-child contract on substance use</li> <li>Outpatient drug treatment program</li> </ul>	<ul style="list-style-type: none"> <li>Mentoring program</li> <li>After-school program</li> <li>Athletic Program</li> </ul>	<ul style="list-style-type: none"> <li>Outpatient Therapy</li> <li>Therapeutic group</li> <li>Medication evaluation &amp;/or management</li> <li>Mentoring program</li> <li>After-school program</li> <li>Athletic Program</li> </ul>	<ul style="list-style-type: none"> <li>Outpatient Therapy</li> <li>Therapeutic group</li> <li>Medication evaluation &amp;/or management</li> <li>Mentoring program</li> <li>After-school program</li> <li>Athletic Program</li> </ul>	
	<b>High</b>	<ul style="list-style-type: none"> <li>Family support &amp; engagement program</li> <li>Social services involvement or voluntary services application</li> <li>Intensive in home therapy</li> <li>Therapeutic mentor</li> </ul>	<ul style="list-style-type: none"> <li>Discuss requesting SPED evaluation/re-evaluation with parent/guardian</li> <li>Employment Program</li> <li>Alternative diploma program</li> </ul>	<ul style="list-style-type: none"> <li>Therapeutic group</li> </ul>	<ul style="list-style-type: none"> <li>Intensive outpatient drug treatment program</li> <li>Detox &amp; stabilization program</li> <li>Residential drug treatment</li> <li>Recovery High School</li> <li>Young people's AA meeting</li> </ul>	<ul style="list-style-type: none"> <li>Therapeutic mentor</li> </ul>	<ul style="list-style-type: none"> <li>Emergency mental health screening</li> <li>Outpatient psychological evaluation</li> <li>Partial Hospitalization Program</li> <li>Juvenile Court Involvement</li> <li>Dept Mental Health referral</li> </ul>	<ul style="list-style-type: none"> <li>Emergency mental health screening</li> <li>Outpatient psychological evaluation</li> <li>Juvenile Court Involvement</li> <li>Life skills program</li> </ul>	

# Youth Service Plan

Youth Name: \_\_\_\_\_

Date: \_\_\_\_\_

## Part A. Goals

Risk Area	Goal
Select a risk area	
General	<input type="checkbox"/> Avoid all status and criminal offenses <input type="checkbox"/> Attend all recommended services as listed in Part B <input type="checkbox"/> Observe terms of a Diversion Contract

## Part B. Referrals to Safety Net Partners and Community Service Providers

Program or Resource Referred To	Provider	Date Referred	Risks Areas Addressed

## Part C. Additional Notes:

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**Closeout:**

I certify that the youth listed above has:     **Completed**     **Failed**     the terms of this Youth Service Plan.  
 Officer's Name and Signature: \_\_\_\_\_ Date: \_\_\_\_\_



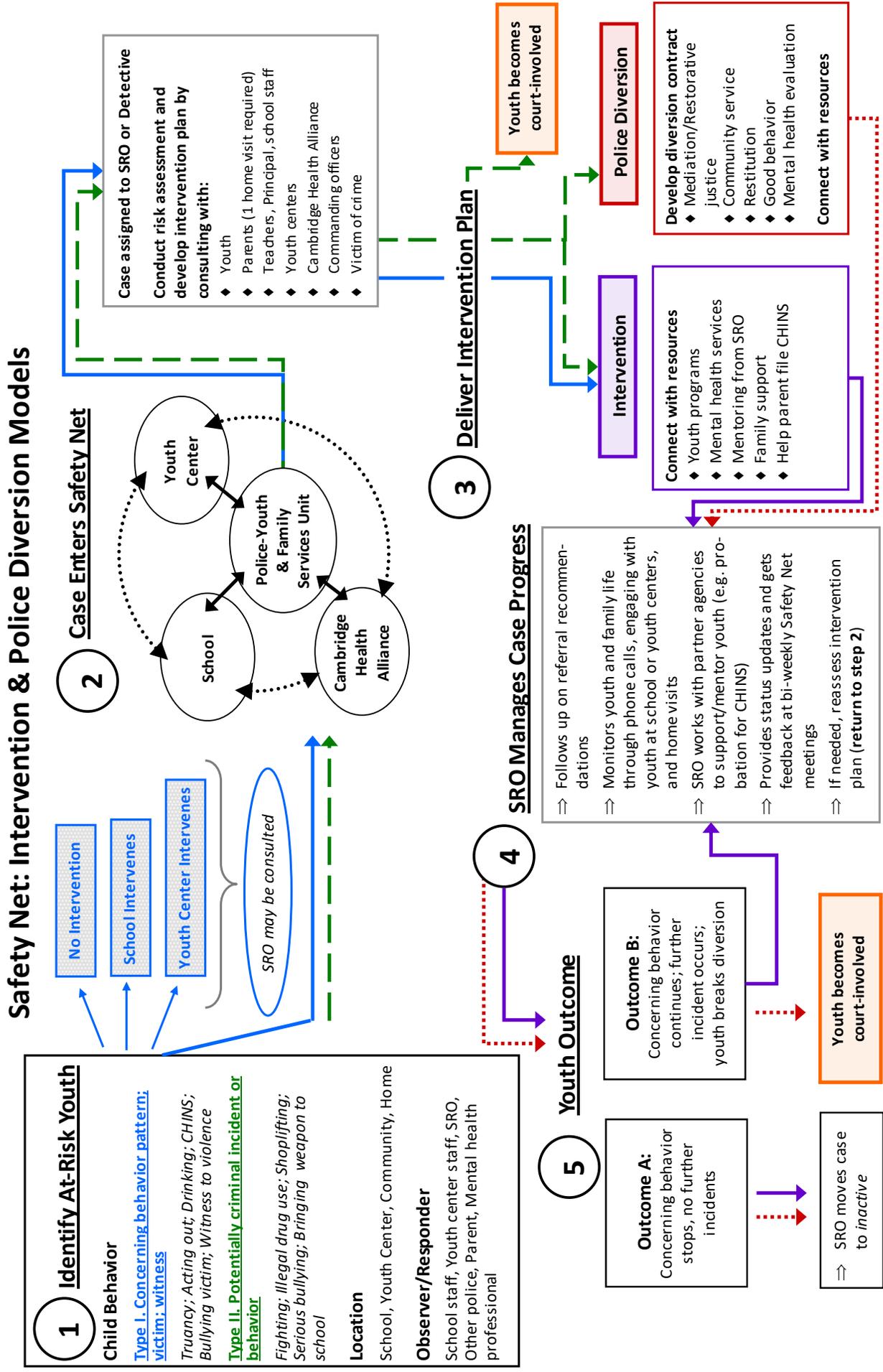
# APPENDIX A: THE OFFICE OF JUVENILE JUSTICE & DELINQUENCY PREVENTION (OJJDP) MODEL

Over the past decade, research has uncovered a high prevalence of mental disorders among the juvenile justice population. Data from a study supported by the National Center for Mental Health and Juvenile Justice (NCMHJJ) estimated that 70% of youth in juvenile justice settings met criteria for at least one mental health disorder. The most common mental health problems were disruptive disorders, substance abuse, anxiety disorders, and mood disorders. According to NCMHJJ, “Many of these youth are detained or placed in the juvenile justice system for relatively minor, non-violent offenses but end up in the system simply because of a lack of community-based mental health treatment.”

In order to address the mental health needs of youth involved in the juvenile justice system, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) issued important guidelines under the Comprehensive Model for the Identification and Treatment of Youth with Mental Health Needs in Contact with the Juvenile Justice System. The model identifies four cornerstones or key elements to enhance the delivery of mental services to youth in contact with the juvenile justice system:

<b>FOUR CORNERSTONES OF THE OJJDP MODEL</b>	
<b>COLLABORATION</b>	In order to appropriately respond and effectively provide services to youth with mental health needs, the juvenile justice and mental health systems should collaborate in all areas and at all critical intervention points.
<b>IDENTIFICATION</b>	The mental health needs of youth should be systematically identified at all critical stages of juvenile justice processing.
<b>DIVERSION</b>	Whenever possible, youth with identified mental health needs should be diverted into effective community-based treatment.
<b>TREATMENT</b>	Youth with mental health needs in the juvenile justice system should have access to effective treatment to meet their needs.

# APPENDIX B: THE CAMBRIDGE SAFETY NET FLOW CHART



# APPENDIX C: SAMPLE SAFETY NET AGENDA



## SAFETY NET AGENDA 4/1/19

### Follow-ups from 3/18 meeting:

- Adam S/Claire G: update on JF
- Helen S/DCF/Dan B: update on EK
- Ofc. P Morris: update on AG
- Kim C: follow up on family therapy for SL
- Ofc. J Jones: update on mentoring referral for JP
- Matt S: update on SPED referral for FL

### New Cases/Updates from Partners

- Claire G: JL
- J Barrett: CA
- CRLS staff:
  1. CR
  2. AD
- New cases or updates?

### Next Meeting

April 22 @ 9 AM @ CPD

# APPENDIX D: SAFETY NET QUALITATIVE INTERVIEW GUIDE

## POLICE OFFICERS

1. How long have you been part of Safety Net?
2. Please tell me what you do as a member of Safety Net.
  - a. Could you describe the typical tasks that you perform on behalf of Safety Net?
  - b. How do you determine that a youth is ready for diversion?
  - c. How do you determine that a youth has completed the diversion process?
3. Think about the training you received to be part of Safety Net:
  - a. What aspects of the training did you find most helpful as you interact with youth and their families?
  - b. What aspects of the training did you find most helpful to work with school and healthcare partners?
4. What has it been like to work with school partners?
  - a. What are the challenges?
  - b. What has it been like to work with health care partners?
  - c. What are the challenges?
5. What has it been like to work with families?
  - a. What are the challenges?
6. If you were to improve the program what would you do differently?
  - a. What would you add?
  - b. What would you eliminate?
7. To what extent is Safety Net integrated within the police department?
8. How is juvenile diversion perceived within the culture of the police department?
9. To what extent, if any, have your views about diversion changed as you have participated in this program?
10. Is there anything else you would like to tell me about Safety Net?

## **TEAM PARTNERS (SOCIAL WORKERS, CLINICAL PSYCHOLOGISTS, ETC.)**

1. How long have you worked with police officers and families who are part of Safety Net?
2. Could you describe a typical interaction with a police officer involved with a youth referred to Safety Net?
  - a. What has your experience of working with them been like?
  - b. Is there anything you feel should be done differently?
3. Please describe a typical interaction with the family of a youth referred to Safety Net.
  - a. Is there anything you feel should be done differently?
4. Who are other partners you interact with when addressing the needs of a youth referred to Safety Net?
  - a. How would you describe the experience of working with them?
  - b. Is there anything you feel should be done differently?
5. How do you share the youth's sensitive information with police officers and other school or health care staff?
6. What would you say are the most beneficial aspects of Safety Net?
  - a. Is there anything you would you change?
  - b. Is there anything you would you add?
7. To what extent, if any, have your views about diversion changed as you have participated in this program?
8. Is there anything else you would like to tell me about Safety Net?

## **FAMILY MEMBERS**

1. What was your first reaction when your child was referred to this program?
2. How long have you been in touch with police officers and social worker/psychologist/teacher/case manager working with youth [NAME]?
3. Tell me about the first meeting you had with a police officer?
  - a. What has happened after that first meeting?
4. Tell me about the first meeting with the social worker/psychologist/teacher/case manager assigned to youth [NAME].
  - a. What has happened after that first meeting?
5. Can you tell me what happens when you meet with a police officer?
  - a. Using a scale from 0-10, where 0 is not comfortable at all and 10 is extremely comfortable, how comfortable do you feel interacting with the police officer?
    - i. What would need to happen to go from X to Y?
6. Can you tell me what happens when you meet with the social worker/psychologist/teacher/case manager working with youth [NAME]?
  - a. Using a scale from 0-10, where 0 is not comfortable at all and 10 is extremely comfortable, how comfortable do you feel interacting with the social worker/psychologist/teacher/case manager?
    - i. What would need to happen to go from X to Y?
7. How has the police officer helped youth [NAME]?
  - a. What are some of the things, if any, that you would like to happen that haven't happened?
8. How has the social worker/psychologist/teacher/case manager helped youth [NAME]?
  - a. What are some of the things, if any, that you would like to happen that haven't happened?
9. How has this program help you?
10. If you were to describe this program to someone who does not know about it what would you say?
11. Is there anything else you would like to tell me about this program?

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