

# History of Dual Status – Crossover Youth Policy and Practice in Pennsylvania

Juvenile Court Judges' Commission  
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# Who Are Dual Status/Crossover Youth?

- Youth that have been abused/neglected and engaged in delinquent behavior, unknown to either formal system
- Youth that have been involved in both the child welfare and juvenile justice systems, but not concurrently
  - Current juvenile justice, historical child welfare
  - Current child welfare, historical juvenile justice
- Youth involved concurrently in both the child welfare and juvenile justice systems

# Characteristics and Outcomes of Multi-System Youth

## Child Welfare Involvement

- Histories of neglect and/or abuse
- High rate of out-of-home and group placements
- Frequent placement changes
- More likely to have longer CW stay

## Psychosocial

- Higher levels of substance use
- More likely to have mental health challenges
- Increased likelihood of familial mental health and substance use histories

## Education

- School placement instability
- Higher rates of truancy, suspension, and expulsion
- Behavioral problems
- Lower academic achievement

## Juvenile Justice

- Detained at higher rates
- Less likely to be considered for diversion
- More likely to receive out-of-home placement
- Typically younger at age of first arrest

# Related Outcomes for Multi-System Youth

- Discrepancies between service referral and access for youth in LA (Culhane et al., 2011)
  - Replicated in NY
- More likely to recidivate in both the juvenile and adult justice systems (CIDI, 2015; Herz et al., 2019)
- Low levels of school connectedness and difficulty accessing appropriate services (Herz et al., 2019)
- Higher average cumulative cost across service areas (CIDI, 2015)

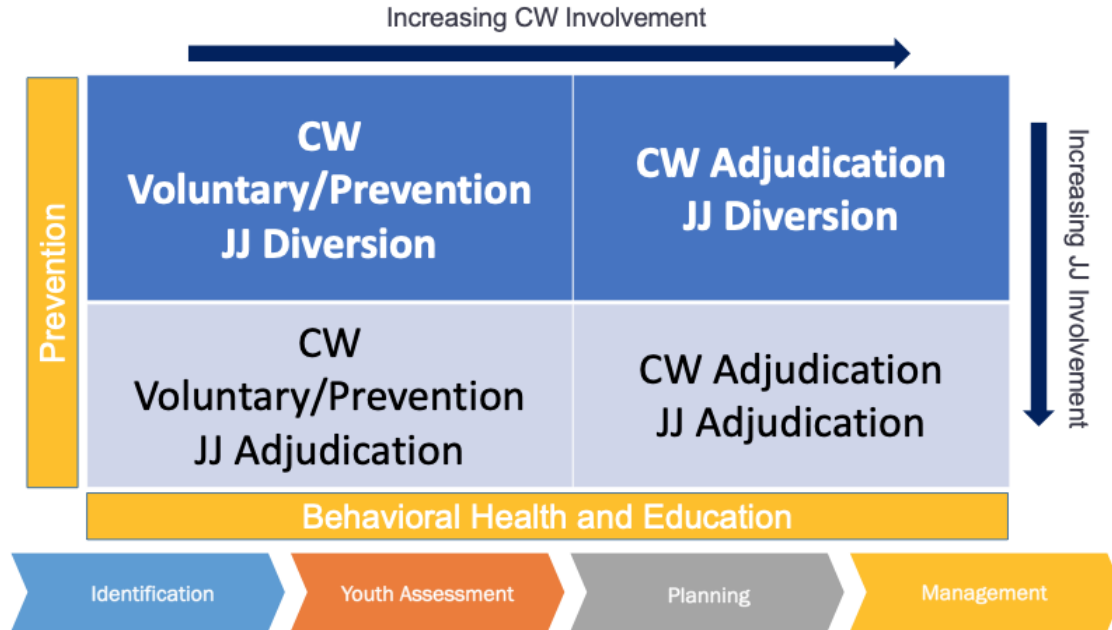
# Characteristics and Outcomes of Multi-System Youth

## Demographics

- Increased likelihood of being female
- Increased likelihood of being Black
- High proportion of LGBTQ/GNCT
- Higher probability of crossing over from child welfare to juvenile justice
  - Older age at first foster care placement creates greater risk for juvenile justice involvement

# Where Do We Find Dual Status/Crossover Youth?

## Multi-System Status Youth Degree of System Involvement



# Shared Case Responsibility (SCR) in Pennsylvania

- Office of Children, Youth and Families Bulletin May 3, 2010 (Effective 10/1/2010)
- Subject: Shared Case Responsibility Policy and Procedures
- Scope:
  - County Commissioners and Executives, Children and Youth Service Agencies, Juvenile Probation Offices
  - Private Children and Youth Social Services Agencies, Chief Juvenile Probation Officers, Juvenile Court Judges, Juvenile Court Judges Commission, Juvenile Law Center and Orphans Court Judges
- Purpose:
  - To provide a framework in which County Children and Youth Agencies (CCYA) and Juvenile Probation Offices can work to support the practice of Shared Case Management
  - Target Population: Care of and services to youth who are under the direct supervision of either CCYA or JPO or both concurrently, and the families of these youth
- Built on prior bulletins and policies adopted after enactment of the Adoption and Safe Families Act of 1997

# Shared Case Responsibility (SCR) in Pennsylvania

- Policies and procedures designed to encourage coordination of services to youth and their families, including intake protocols designed to identify crossover youth, share information pertinent to the needs of the youth and their families, align service planning and ongoing care management and reduce duplication of efforts across systems
- Adoption and Safe Families Act (ASFA) pillars: Safety, Permanency and Well-being as core aspects to effective SCR and care management
- Building on state law and prior bulletins sets the stage for cross-systems efforts at the county level in Pennsylvania



# System of Care in Pennsylvania – PA Care Partnership

- Historically, systems of care have focused on improving access and availability of services and on reducing service and funding fragmentation, as well as focusing on strengthening treatment efficacy and ensuring effective therapeutic interactions between practitioners and children in care and their families
- Applied through public policy and system change and more specifically in the way service providers interact with children and their families in need of assistance
- The approach is demonstrated through multiagency and community stakeholder sharing of resources and responsibilities and evaluating service and system outcomes

# System of Care in Pennsylvania – PA Care Management

- System of Care (SOC) efficacy is supported by system of care partners and communities by:
  - Agreeing on common goals, values and principles to guide their work
  - Developing a shared infrastructure to coordinate efforts toward the common goals of safety, permanency and well-being for system involved youth
  - Ensuring within that infrastructure the availability of a high-quality array of evidence-based and promising practices and supports designed to support families and protect children from maltreatment while promoting their well-being in a permanent home

# The Crossover Youth Practice Model in Pennsylvania Allegheny County

- In 2014/2015 leadership in Allegheny County across child welfare (CYF), juvenile justice (JPO), and behavioral health (DHS) entered into a Memorandum of Understanding related to a shared vision and commitment to the needs of Crossover Youth
  - Coordinated and collaborative case practice
  - Facilitating interagency data and information sharing as provided by law or consent of the holder of the privacy interest
  - Intentional and meaningful involvement of youth and families in case planning –teaming
  - Ensuring out of home placements are the least restrictive available to meet the needs of dually adjudicated youth, while also providing for public protection
  - Reduction of youth crossing over
  - Addressing racial and ethnic disproportionality and disparity
  - Development of cross system training which is trauma-informed
- Implementation supported by Georgetown University's Center for Juvenile Justice Reform

# The Crossover Youth Practice Model in Pennsylvania Allegheny County

- CYPM fully launched in January 2016
- Center for Juvenile Justice Reform provided Allegheny County leadership with a Next Steps Memo
  - Maintain leadership structure
  - Emphasis on ongoing data collection and analysis – review of both process- and population-level outcomes
  - Maintain training efforts in support of CYPM implementation – pre-service and in-service
  - Utilize quality assurance tools to ensuring that policy and practices that were adopted have been implemented with fidelity
  - Bring to fruition the work of the Prevention and Disproportionality work groups

# The Crossover Youth Practice Model in Pennsylvania Allegheny County

- Crossover Youth Practice Model remains key part of the Allegheny County Juvenile Probation 2023 Annual Report
- Tracks crossover episodes per year and trend of crossover youth trajectory, i.e., CYF first or JPO first
- CYF, JPO and Court officials (the “Bravo” team) meet monthly to ensure the smooth operation of the Protocols and adherence to the Memorandum of Understanding, working in coordination with the Allegheny County Rapid Response Team to address policy and practice issues involving multi-system involved youth
- Point of Contact: Marsha Landers: [Mlanders@alleghenycourts.us](mailto:Mlanders@alleghenycourts.us)

# RFK Dual Status Youth in Pennsylvania Lancaster County

- Memorandum of Understanding adopted July 23, 2020 between Lancaster County Children and Youth, Lancaster County Office of Juvenile Probation and the Lancaster County Court of Common Pleas
- Outlined the commitment between those entities to provide a structured format to enhance collaboration, coordination and service delivery to meet the needs of Lancaster County's dual status youth and their families
- Defined the scope of work including data collection and analysis, evaluation of court and agency processes for handling dually involved youth and practice barriers to information sharing across agencies, mapping of agency policies, practices and resources, and establishing case practice protocols for dually involved youth

# RFK Dual Status Youth in Pennsylvania Lancaster County

- Desired outcomes:
  - Reduction in recidivism, new referrals to CYS
  - Placement/family stability
  - Mental health stability and functioning
  - Substance abuse access/treatment
  - Education stability and achievement
  - More effectively and efficiently serve youth and families that touch both systems
  - Use evidence-based research and promising practices to inform changes in both systems so that youth and families can be better served
- Executed by CYS, Juvenile Probation and Judge of Lancaster County Court of Common Pleas

# Multi-Systems Integration Pilot Program –Launched 2023

## Supporting Partners

- Stoneleigh Foundation, Philadelphia, Pennsylvania
- Georgetown University's Center for Juvenile Justice reform at the McCourt School of Public Policy
- Staffed by:
  - Shay Bilchik, Stoneleigh Foundation Visiting Fellow
  - Dr. Meg Ogle, JCJC Research Analyst



# Goal of the Pilot Program

- Utilize the Crossover Youth Practice Model (CYPM) and System of Care (SOC) to strengthen the manner in which systems work together to provide support and services to children, youth, and families known to multiple systems of care
  - CYPM: moving research to practice
  - SOC: creating a strength-based, family- and youth-centered approach to addressing mental health issues
- Through enhanced multi-system policies and practices, improve system-level operation and population-level outcomes in child welfare, juvenile justice, behavioral health, and education
- Selection of two counties to demonstrate the effectiveness of bringing together these two approaches

# Rubric Policy and Practice Domains

- Infrastructure to Support Cross-Systems

  - Collaboration

    - Interagency Collaboration
    - Judicial Leadership
    - Culturally Competent and Responsive

  - Services

    - Youth and Family Voice
    - Information Sharing
    - Data Collection
    - Training

- Identifying and Managing Dual-System Cases

  - Identification of Multi-System Youth
  - Assessment Process
  - Case Planning and Management
  - Permanency and Transition (PT) Planning
  - Placement Planning
  - Service Provision and Tracking

# Rubric Policy and Practice Domains

## Multi-Systems Integration Pilot Program Rubric Domains

### I. Infrastructure to Support Cross-Systems Work

Domain Name	Practice Not in Place	Initial Efforts in Place	Emerging Practice	Developed Practice	Highly Developed Practice
Judicial Leadership	No judicial support or leadership, or there is active judicial opposition.	No active opposition. Some judicial support but not very involved or does not provide leadership in the work.	Active judicial support for collaboration.  Attends cross-systems meetings of the key stakeholder group but may not take a leadership role.	Active judicial support. Regularly attends cross-system meetings of the key stakeholder group and trainings; provides leadership but in a limited capacity.	Active judicial support and leadership. Convenes and leads cross-system meetings of the key stakeholder group, drives the work, and provides accountability.

# Structural and Operational Goals for the MSI Pilot Program

- Adoption of Protocols establishing both policies and practices pertaining to Multi-System Youth
- Establish information sharing guidelines across child welfare, juvenile justice, behavioral health and education
- Create a training regimen supporting the Protocols and information sharing guidelines
- Evaluate the implementation of the new policies and practices both quantitatively and qualitatively – including process and population level outcomes
- Adopt and implement Quality Assurance measures

# Outcome Related Goals for the MSI Pilot Program

## Reductions In:

- Recidivism in the justice system
- New sustained juvenile justice petitions
- Use of pre-adjudication detention
- Use of APPLA as a permanency goal

## Increases In:

- Improved educational outcomes
- Pro-social activities
- Positive behavioral health outcomes
- Diversion/dismissal
- Home placement/reunification
- Social supports

Significant jurisdictional cost savings (University of Nebraska at Omaha, 2017)

# Outcome Related Goals for the MSI Pilot Program

## Youth

- Decreased behavioral and emotional problems, suicide rates, and substance use
- Improved school attendance and grades
- Decreased arrests and involvements with juvenile justice
- Increased stability of living situations

## Families

- Decreased caregiver strain
- Increased capacity to handle child/youth's challenging behavior

## Service-Level

- Expanded accessibility to home- and community-based services
- More individualized services
- Improved care coordination
- Increased family-driven, youth-guided services
- Increased cultural and linguistic competence
- Increased use of evidence-informed practices

# TTA Offered

- Personalized, jurisdiction-specific assistance in areas identified by Delaware and Erie Counties through the Rubric as needing to be strengthened and/or codified
- Support time-limited and ongoing work groups assisting with implementation in the identified areas
  - Examples: policies and practices, information sharing, racial and ethnic disparities, training, data, etc.
- On-site and virtual meetings
- Networking, as needed and requested, with CYPM and SOC sites
- Support in measuring impact of Pilot Program: system-level operation and population-level outcomes

# Improving Outcomes for Youth Involved in Multiple Systems of Care

Multi-Systems Integration Pilot Program:  
Delaware County, Pennsylvania



# Key Elements of Newly Adopted MSI Protocols

- Protocols adopted to assure enhanced coordination of care between Juvenile Probation, Children and Youth Services (CYS)/Office of Children and Youth (OCY), Department of Human Services/Behavioral Health and education partners (through the efforts of the Delaware County Intermediate Unit and Erie City Schools)
- Adopted enhanced care management procedures as applied to Crossover Youth, Shared Case Responsibility Youth and Multiple-System Youth (youth receiving services through CYS and Juvenile Probation at any stage, and receiving or in need of, behavioral health services while registered in a public or private school)
- Established intake protocols for CYS/OCY and Juvenile Probation, requiring cross agency communication in order to identify youth known to multiple systems of care, including education and behavioral health information, thereby enhancing coordination of care (case assessment, planning and ongoing care management across systems)
- Created contact expectations and teaming for all Crossover and MSI Youth, including monthly meetings

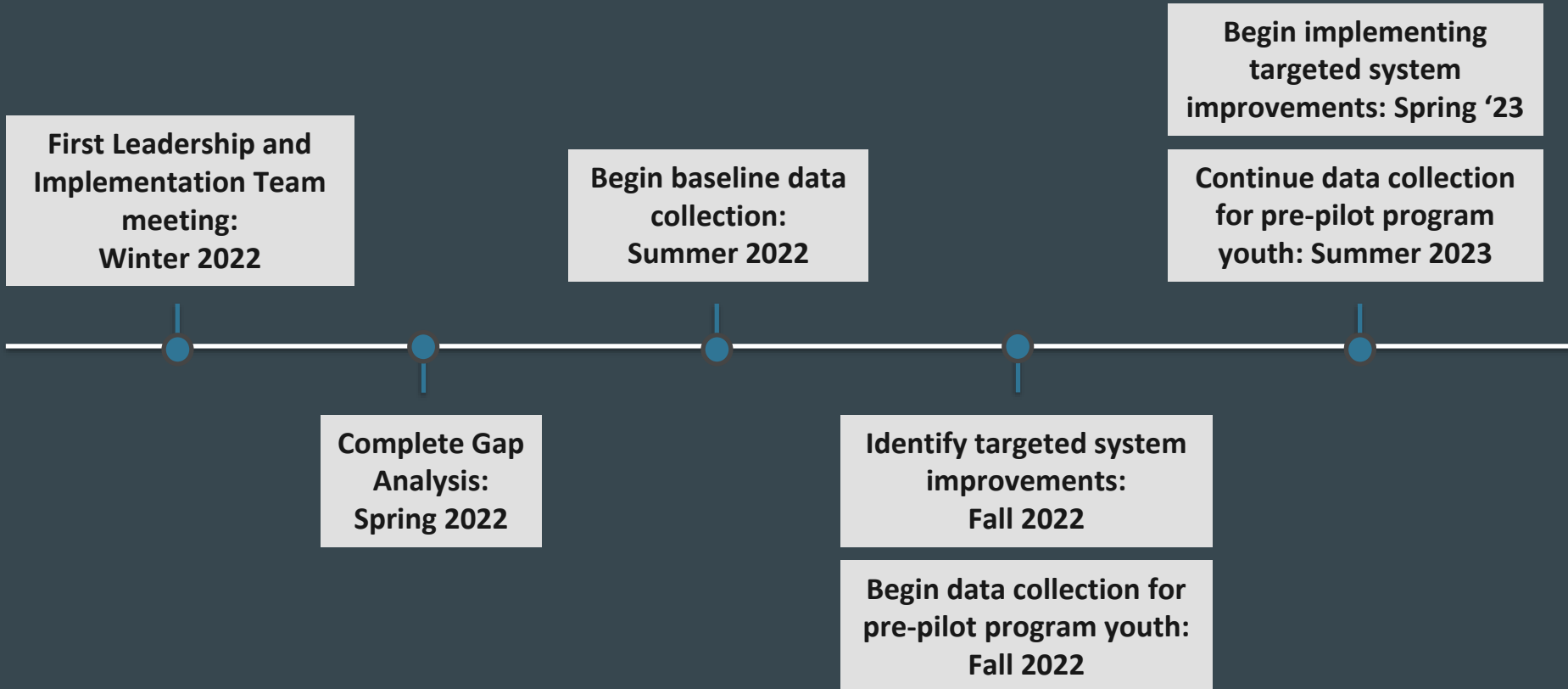
# Key Aspects of MSI Information Sharing Enhancements

- A consensus statement across systems of care (Coordination of Services Memorandum of Understanding) committing to significant cooperation and coordination in order to achieve improved outcomes for children, youth and families, including the exchange of minimally necessary individual information to assure timely access to and planning for treatment, services and payment for such treatment/services
- Applied to both individual case information and data collection/reporting
- Adoption of a universal information sharing consent form

# Improving Outcomes for Youth Involved in Multiple Systems of Care

Multi-Systems Integration Pilot Program:  
Delaware & Erie Counties, Pennsylvania

# Steps Taken: 2022 - 2023



# Steps Taken: 2023-2024

**Complete data collection  
for pre-pilot program  
youth: Fall 2023/Spring  
2024**

**Continue implementing  
targeted system  
improvements:  
Summer/Fall 2023**

**Last pilot program  
youth identified: Fall,  
2023\***

**Survey stakeholders:  
Fall 2024**

**Begin data collection for  
pilot program youth:  
Spring/Summer, 2023**

**Last day of tracking for  
pilot program youth:  
Summer/Fall 2024\***



# MSI Pilot Program Successes and Challenges Delaware County

- Successes:
  - Strong core leadership commitment to the Pilot Program
  - Judicial leadership
  - Broad agency/staff involvement in workgroup activity
  - Extensive outreach to and connection with school liaisons from every county school district
  - Open willingness to engage in system change process and focus on prevention
  - Identification of areas for targeted system improvement
  - Development of new Policy and Practice Protocols, Memorandum of Understanding on Information Sharing and Information Sharing Consent Form
  - Staff and partner training
  - Commitment to and engagement around data collection
  - Initial implementation and extension of Protocols to both pre-existing and newly identified MSI and Crossover populations of youth

# MSI Pilot Program Successes and Challenges Delaware County

- Challenges:

- Implementation during period of time when impact of pandemic still being felt
- Staff turnover and fatigue
- Need to complete training for all system partners
- Need for expansion of training plan moving forward
- Impact of the higher level of demand on staff time required by Protocols
- Achieving and sustaining fidelity to the Protocols, information sharing processes and data collection

# A History of Dual Status/Crossover Youth Practice in Pennsylvania



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# Data Overview

1. Data Types
2. Baseline Data Review
3. Initial Pre-Pilot Data Observations
4. Pilot Data Sneak Peek

# Data Types

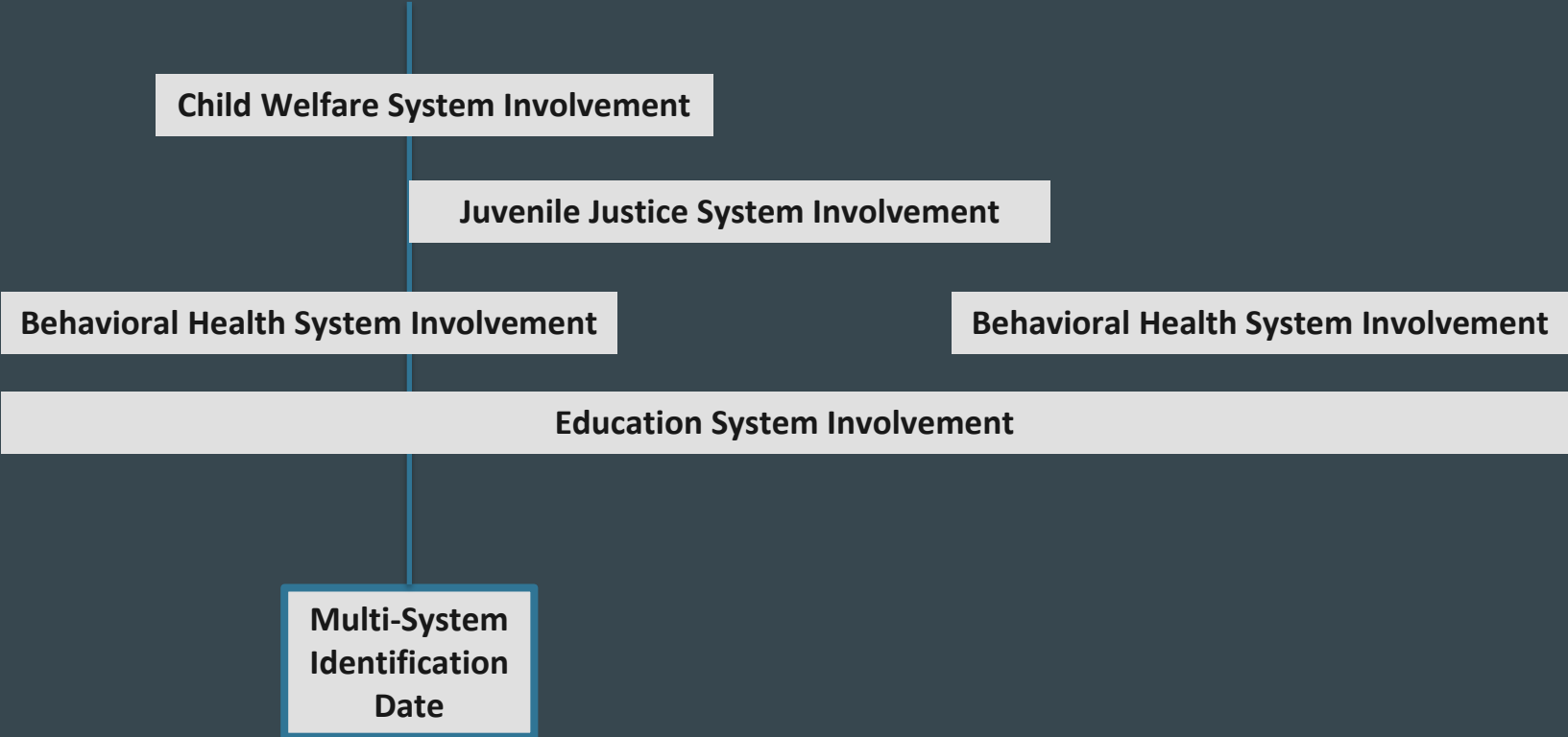
## 1. Baseline Data

- Systems' populations data for calendar year 2018 (school year 2018-2019)

## 2. Pre-Pilot Data

- Delaware County: Youth simultaneously served by 3 or 4 systems during 2018
  - 51 pre-pilot youth were identified in Delaware County
    - 16 of these youth (31%) were simultaneously involved in 3 systems (“pre-pilot crossover”)
      - The 3 systems were: Juvenile Justice, Child Welfare, and Education
    - 35 of these youth (69%) were simultaneously involved in 4 systems (“pre-pilot MSI”)
- Erie County: Youth simultaneously served by 4 systems during 2017-2018
  - 15 pre-pilot youth were identified in Erie County

# Multi-System Involved (MSI Cases)



# Data Types

## 1. Baseline Data

- Systems' populations data for calendar year 2018 (school year 2018-2019)

## 2. Pre-Pilot Data

- Delaware County: Youth simultaneously served by 3 or 4 systems during 2018 (n = 51)
- Erie County: Youth simultaneously served by 4 systems during 2017-2018 (n = 15)

## 3. Pilot Data

- Delaware County: Youth simultaneously served by 3 or 4 systems from April 3, 2023 through December 31, 2023
  - 48 pilot youth were identified in Delaware County
    - 13 of these youth (27%) were simultaneously involved in 3 systems (“pilot crossover”)
    - 35 of these youth (73%) were simultaneously involved in 4 systems (“pilot MSI”)
- Erie County: Youth simultaneously served by 4 systems from August 1, 2023 through March 31, 2024
  - 20 pilot youth were identified in Erie County

# Baseline Data Review

# Baseline Data Review – Delaware County

- Male youth were over-represented in Behavioral Health, Juvenile Justice, and Behavioral Incidents at school
- Black youth were over-represented in all 4 systems relative to their proportion of the youth population/enrolled

	Youth in Delaware County	Youth Receiving Child Welfare Services	Youth Receiving Juvenile Probation Services	Youth Receiving Behavioral Health Services	Youth Enrolled in Participating School Districts	School Behavioral Incidents
Gender						
<b>Male</b>	<b>51.6%</b>	48.9%	<b>78.5%</b>	<b>58.8%</b>	<b>51.5%</b>	<b>59.8%</b>
Female	48.4%	51.1%	21.5%	41.2%	48.5%	40.2%

# Baseline Data Review – Erie County

- Both Black and male youth were over-represented in all 4 systems relative to their proportion of the youth population/enrolled

	Youth in Erie County	Youth Receiving Child Welfare Services	Youth Receiving Juvenile Probation Services	Youth Receiving Behavioral Health Services	Youth Enrolled in Erie City School District	School Behavioral Incidents
<b>Gender</b>						
<b>Male</b>	<b>49.6%</b>	<b>62.0%</b>	<b>79.9%</b>	<b>66.9%</b>	<b>51.5%</b>	<b>63.9%</b>
Female	50.4%	45.1%	20.1%	45.1%	48.5%	36.1%
<b>Race</b>						
<b>Black</b>	<b>7.6%</b>	<b>40.0%</b>	<b>39.8%</b>	<b>15.3%</b>	<b>35.9%</b>	<b>60.5%</b>
Asian	0.4%	2.7%	0.7%	0.3%	4.9%	1.8%
White	77.8%	55.3%	45.7%	77.8%	41.3%	21.7%
Other/Unknown	2.7%	2.0%	13.9%	6.6%	17.9%	16.0%

# Baseline Data Findings Review – Both Counties

- Black or African American youth were under-represented in SAP (Student Assistance Program) referrals relative to their proportion of disciplinary actions/behavioral incidents in schools
- Black or African American youth were under-represented in diversion without court referrals relative to their proportion of all referrals to Juvenile Justice



# Initial Pre-Pilot Data Observations

# Pre-Pilot Youth Pathways – Delaware County

- The most common pathway to multi-system involvement was: Behavioral Health -> Juvenile Justice -> Child Welfare
  - 55.5% (n = 20) of youth transitioned from Juvenile Justice to Child Welfare
  - 41.7% (n = 15) of youth transitioned from Child Welfare to Juvenile Justice
- The most common crossover pathway was: Juvenile Justice -> Child Welfare
- The most common final system entered, regardless of whether the youth was Crossover or MSI was Child Welfare

# Pre-Pilot Youth Pathways – Erie County

- The most common pathway to multi-system involvement was: Behavioral Health -> Juvenile Justice -> Child Welfare
  - 87% of youth transitioned from Juvenile Justice to Child Welfare
  - 13% of youth transitioned from Child Welfare to Juvenile Justice
- The most common final system entered was Child Welfare

# Pre-Pilot Data Demographics

- In Delaware County, girls were over-represented in the Crossover and MSI populations relative to their proportion of all youth involved in the Juvenile Justice system

	Youth Receiving Juvenile Probation Services	Pre-Pilot Crossover Youth	Pre-Pilot MSI Youth
Gender			
Male	78.5%	60.0%	69.4%
<b>Female</b>	<b>21.5%</b>	<b>40.0%</b>	<b>30.6%</b>

- This was not the case in Erie County's pre-pilot data

# Pre-Pilot Data Initial Paths for Additional Inquiry

1. Do most MSI youth have an IEP, behavioral problems, and attendance issues at school?
2. Which behavioral health services are MSI youth most likely to access prior to becoming multi-system involved?
3. What proportion of MSI youth are involved in prosocial/positive youth development programming?
4. What are the most common reasons for referral to the Juvenile Justice system for youth who ultimately become MSI?

# Pre-Pilot Youth: 9 Month Outcomes to Examine

1. Are most MSI youth enrolled in a different school or the same school 9 months after identification?
2. Do most MSI youth move to a more severe legal status 9 months after identification?
3. What percentage of MSI youth are still open with Child Welfare 9 months after identification?

# Pilot Data Sneak Peek

# Pilot Data Sneak Peek – Delaware County

- Black youth and 13 year old youth are over-represented in the Crossover population
- Hispanic youth are over-represented in the Crossover and MSI populations

	Youth in Delaware County	Youth Receiving Child Welfare Services	Youth Receiving Juvenile Probation Services	Youth Receiving Behavioral Health Services	Crossover Youth	MSI Youth
<b>Race</b>						
<b>Black</b>	<b>31.3%</b>	<b>53.7%</b>	<b>70.3%</b>	<b>47.2%</b>	<b>75.9%</b>	<b>51.0%</b>
White	61.0%	36.0%	24.4%	42.8%	20.7%	40.0%
<b>Age</b>						
Ten	12.3%	14.4%	0.2%	8.9%	0%	0%
Eleven	11.9%	12.0%	1.0%	12.1%	4.0%	3.3%
Twelve	12.5%	11.5%	3.8%	12.2%	4.0%	9.8%
<b>Thirteen</b>	<b>12.5%</b>	<b>12.3%</b>	<b>5.0%</b>	<b>13.6%</b>	<b>24.0%</b>	<b>11.5%</b>
Fourteen	12.4%	10.0%	13.8%	13.4%	4.0%	11.5%
Fifteen	12.6%	13.3%	20.1%	13.0%	24.0%	18.0%
Sixteen	12.9%	14.6%	26.6%	13.6%	24.0%	26.2%
Seventeen	12.9%	11.8%	29.5%	13.2%	16.0%	19.7%



# Pilot Data Sneak Peek – Erie County

- Hispanic youth appear to be under-represented in the MSI population

	Youth in Erie County	Youth Receiving Child Welfare Services	Youth Receiving Juvenile Probation Services	Youth Receiving Behavioral Health Services	MSI Youth
Gender					
Male	49.6%	54.9%	79.9%	54.9%	71.4%
Female	50.4%	45.1%	20.1%	45.1%	28.6%
Race					
Black	7.6%	40.0%	39.8%	15.3%	31.4%
White	77.8%	55.3%	45.7%	77.8%	65.7%
Ethnicity					
<b>Hispanic</b>	<b>8.5%</b>	<b>5.5%</b>	<b>11.9%</b>	<b>5.2%</b>	<b>2.8%</b>
Non-Hispanic	91.5%	84.3%	88.0%	94.8%	97.1%

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# Additional Resources

## Multi-Systems Integration Pilot Program Rubric Domains

I. Infrastructure to Support Cross-Systems Work					
Domain Name	Practice Not in Place	Initial Efforts in Place	Emerging Practice	Developed Practice	Highly Developed Practice
Interagency Collaboration	Cross-system teams/committees have not been established, and key stakeholders have not been engaged.	Potential cross-system teams/committees and key stakeholders have been identified but not engaged.	Cross-system teams/committees and members of each key stakeholder group have been engaged in the work but do not meet regularly.	Cross-system teams/committees are established and meet regularly. Members of each key stakeholder group are engaged but not in a consistent manner.	Cross-system teams/committees are established and meet regularly. Members of each key stakeholder group are consistently engaged and participate in ongoing review of the work.
Judicial Leadership	No judicial support or leadership, or there is active judicial opposition.	No active opposition. Some judicial support but not very involved or does not provide leadership in the work.	Active judicial support for collaboration.  Attends cross-systems meetings of the key stakeholder group but may not take a leadership role.	Active judicial support. Regularly attends cross-system meetings of the key stakeholder group and trainings; provides leadership but in a limited capacity.	Active judicial support and leadership. Convenes and leads cross-system meetings of the key stakeholder group, drives the work, and provides accountability.

# Additional Resources

Domain Name	Practice Not in Place	Initial Efforts in Place	Emerging Practice	Developed Practice	Highly Developed Practice
Culturally Competent and Responsive Services	No culturally competent and responsive services, no data collection or analysis of disproportionality.	Commitment to culturally competent and responsive services, though services may not be developed, and no data collection or analysis.	Limited culturally competent services available, limited disproportionality data is collected and analyzed.	Culturally competent services exist but are not evaluated; disproportionality analyses are robust but not linked to practice change.	Services are monitored and evaluated for cultural competence and responsiveness; protocol to conduct disproportionality-based analyses is in place and linked to practice change.
Youth and Family Voice	Youth and family members with lived experience are not engaged.	Youth and family members with lived experience are engaged periodically, but no formal board or committee exists.	Advisory board or committee of youth and family members with lived experience is engaged.	Youth and family members with lived experience hold staff positions across systems; youth and family committee is engaged.	Youth and family members with lived experience hold leadership positions across systems and hold decision-making power; youth and family committee is engaged.
Information Sharing	There is not an MOU/MOA or a protocol building on state law in place that supports or allows information sharing between key system partners in clearly defined circumstances.	An MOU/MOA or a protocol building on state law is in the process of being developed that allows information sharing between key system partners in clearly defined circumstances.	An MOU/MOA or a protocol building on state law is in place that allows information sharing between key system partners in clearly defined circumstances, but information is never exchanged <i>or</i> is only shared under special circumstances (e.g., challenging case, emergencies, etc.).	An MOU/MOA or a protocol building on state law is in place that allows information sharing between key system partners in clearly defined circumstances, but information is not consistently shared.	An MOU/MOA or a protocol building on state law is in place that allows information sharing between key system partners in clearly defined circumstances, and information is regularly shared between systems in a structured and collaborative manner.

# Additional Resources

Domain Name	Practice Not in Place	Initial Efforts in Place	Emerging Practice	Developed Practice	Highly Developed Practice
Data Collection	There are no data collection efforts in place to identify the prevalence of multi-system involved youth and their characteristics.	There is an effort to build a data collection system, but it is not in place, <i>or</i> there is a data collection protocol, but it is not currently in use.	Data collection efforts, informal or formal, are in place separately at each agency, but data are not consistently collected, <i>or</i> data are not complete.	Formal data collection efforts are in place and consistently collected and available to be shared as appropriate. However, data systems are not integrated between child welfare, juvenile justice, behavioral health, and education.	Data collection efforts are established and ongoing and include key characteristics of the target population (as defined by the jurisdiction). Data are centralized in one database containing information from child welfare, juvenile justice, behavioral health, and education.
Training	Training on multi-system youth is not provided to staff.	Training is provided to staff on multi-system youth, but there is no protocol for working with the population.	Training on the protocol for working with multi-system youth is typically available at one point in time. These trainings may be conducted by each agency and may or may not include staff from multiple agencies.	Training on the protocol for working with multi-system youth is conducted regularly (i.e., in an ongoing manner). These trainings are done in a cross-system format with staff from multiple agencies attending.	Training on the protocol for working with multi-system youth is conducted regularly (i.e., in an ongoing manner) along with related training (e.g., CW 101, JJ 101, BH 101, and ED 101). These trainings are done in a cross-system format with staff from multiple agencies attending.

# Additional Resources

II. Identifying and Managing Dual System Cases					
Domain Name	Practice Not in Place	Initial Efforts in Place	Emerging Practice	Developed Practice	Highly Developed Practice
Identification of Multi-System Youth	There is no process for the identification of multi-system youth.	There is an informal and/or inconsistent process for the identification of multi-system youth.	Process for identification of multi-system youth is in place but occurs at varying stages of the case.	Multi-system youth are identified but not consistently and not always at entry into the system, whether JJ or CW.	Multi-system youth are identified as involved in more than one system at the point they enter the system, whether JJ or CW, regularly and consistently.
Assessment Process	Assessment of risks and needs specific to multi-system youth is not routinely completed and is not done jointly between JJ and CW staff and staff from relevant systems of care. There is no use of an assessment protocol.	Assessment of risks and needs specific to multi-system youth is completed separately by JJ and CW staff and staff from other relevant systems of care. There is no use of an assessment protocol.	Assessment of risks and needs specific to multi-system youth is completed separately by JJ and CW staff and staff from other relevant systems of care. There is a plan in place, however, to implement an aligned assessment protocol within 12-18 months.	Assessment of risks and needs specific to multi-system youth is generally completed separately by JJ and CW staff, with staff from other systems conducting their own assessment. However, some joint assessment processes are used regularly in a more narrowly defined population of cases.	Assessment of risks and needs specific to multi-system youth is completed. Assessment is conducted in a coordinated manner using a “team” approach, with staff from all relevant systems contributing to the process (e.g., during a family team meeting, team decision-making meeting, or multidisciplinary team meeting) on a regular basis.

# Additional Resources

Domain Name	Practice Not in Place	Initial Efforts in Place	Emerging Practice	Developed Practice	Highly Developed Practice
Case Planning and Management	There is no contact between JJ, CW, and other relevant caseworkers on a case, and there is no use of a coordinated or integrated case plan.	There is occasional communication between JJ, CW, and other relevant caseworkers, but no formal coordinated or integrated case plan.	There is regular communication between JJ, CW, and other relevant caseworkers, but no formal coordinated or integrated case plan.	Coordinated case planning is done with one integrated case plan between JJ, CW, and other relevant agencies, but there are not regular interagency or multidisciplinary meetings throughout the life of the case.	Coordinated case planning is done, with one integrated case plan between JJ, CW, and other relevant agencies, in a collaborative and ongoing fashion. There are frequent interagency/multidisciplinary team meetings and/or contact between JJ, CW, and other relevant caseworkers throughout the life of the case, including caseworkers attending parallel hearings.
Permanency and Transition (PT) Plans	PT plans are minimal and often only meet legal requirement minimums.  Plans do not involve both CW and JJ systems, nor are they informed by BH or ED.	PT plans meet legal requirement minimums, and there is some coordination between CW and JJ systems, with limited consultation with BH or ED.	PT plans meet or exceed legal requirements and are developed jointly by CW and JJ systems with input from BH and ED.	PT plans meet or exceed minimum legal requirements and are developed jointly by CW and JJ systems, with input from BH and ED, well before release.	PT planning is conducted jointly by CW and JJ systems at disposition with input from BH and ED, leading to a formal plan within 90 days. PT plans meet or exceed all legal requirements and are reviewed on a regular basis by the PT team.

# Additional Resources

Domain Name	Practice Not in Place	Initial Efforts in Place	Emerging Practice	Developed Practice	Highly Developed Practice
Placement Planning	There is no communication or collaborative placement planning between CW, JJ, BH, and ED. Other parties to the case (and family members) are not routinely informed about youth changing placements.	There is occasional communication between CW, JJ, BH, and ED regarding placement changes but no formal collaborative placement planning that includes other parties to the case and family members.	There is regular communication between CW, JJ, BH, and ED regarding placement needs and transitions. Collaborative placement planning occurs on an inconsistent basis and occasionally includes other parties to the case and family members.	There is regular communication between CW and JJ regarding placement needs and transitions. This includes collaborative placement planning with other parties to the case (BH and ED) and family members.	There is a robust placement process that includes regular communication between CW and JJ, collaborative pre-placement planning (with all parties to the case, including family members, BH, and ED) for the transition, and a phased-in approach that supports an adjustment phase into the new living situation. Relatives and next of kin are consistently reviewed for their viability as a placement or supportive resource.
Service Provision and Tracking	There is no access to behavioral health, education, and/or prosocial services/supports for youth known to both the CW and JJ systems.	There are some options for behavioral health, education, and/or prosocial services/supports for youth known to both the CW and JJ systems, but they are not provided regularly, and whether youth connect to the agency/service is not tracked.	Behavioral health, education, and prosocial services/supports are regularly provided to youth known to both the CW and JJ systems, but whether youth connect to the agency/service is not tracked.	Behavioral health, education, and prosocial services/supports are regularly provided to youth known to both the CW and JJ systems, and referrals are made to evidence-based and/or trauma-focused treatment when the need is indicated. But, whether youth connect to the agency/service is not tracked.	Behavioral health, education, and prosocial services/supports are regularly provided to youth known to both the CW and JJ systems, and referrals are made to evidence-based and/or trauma-focused treatment when the need is indicated. There is also a process in place to track whether youth connect to the agency/services to which they are referred.