

# FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

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**PROGRAM TITLE:** Family Behavioral Health Court (FBHC)    **PROVIDER:** Department of Behavioral Health

**PROGRAM DESCRIPTION:** Mental health clinicians and a case manager serve on a multi-agency treatment team to serve incarcerated youth at the Juvenile Justice Campus. In order to be eligible, a minor may not have a previous sexual or seriously violent offense against another person, be actively involved in a gang, or sold or had in their possession to sell illegal drugs, and must be diagnosed with a Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED). It is a voluntary program and parental involvement is expected. The court meets every other week with the entire collaborative team that also includes the judge, two probation officers, attorneys, treatment providers and the BHC Coordinator. Since its inception in late 2006 through June 2015, 470 total cases have been referred to the court, with 226 minors accepted for entry and receiving services. It began its current 3 phase structure midway through 2008. The program is designed to take 12 months to complete, although as with most juvenile courts, it actually takes longer.

A total of **59 youth were referred in 2014 through June 30, 2015, of which 31 were accepted.** During the 18 months, **71 youth participated in FBHC, with a total of 41 exits.** Of those 41, **21 successfully graduated**, 9 terminated in Stage 1, and the remaining 11 terminated in Stage 2 or Stage 3. It currently has 29 active cases. Approximately 50% are co-occurring with substance use disorders, mostly marijuana use. The average graduation completion time in the past 18 months was one year and 4 months. Of those served, 72% were male, 28% female; 45% were Latino/Hispanic, 36.6% white/non-Hispanic, 17% Black, and 1.4% Asian.

**AGES SERVED:**

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Children<br><input type="checkbox"/> Adult | <input checked="" type="checkbox"/> TAY<br><input type="checkbox"/> Older Adult |
|--|---|

**DATES OF OPERATION:** Fall 2006 - present

**DATES OF DATA REPORTING PERIOD:** Jan-Dec 2013

<u>OUTCOME GOAL</u>	<u>OUTCOME DATA</u>
<ul style="list-style-type: none"> <li>• 80% of youth advancing to stage 2 of the Behavioral Health Court will successfully graduate from the program.<sup>1</sup></li> </ul>	<ul style="list-style-type: none"> <li>• 21 minors successfully graduated out of 32 clients (66%) who separated from the program from January 2014 through June 30, 2015 after advancing to stage 2 of the</li> </ul>

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<sup>1</sup> This 80% is an arbitrary goal originally developed without reference to other juvenile mental health court models or experience, of which few are documented.

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Minors must comply with the following for one to three months or longer to progress to stage 2 of the FBHC:

- 1) Compliance with the direction of parent/guardian in the home;
- 2) positive school attendance;
- 3) participate in assessments;
- 4) active involvement in the treatment plan;
- 5) attend all court dates as scheduled;
- 6) compliance with terms and conditions of the court.

Stages 2 and 3 continue the areas above and add the additional components of

- 7) attendance or involvement of guardians for the treatment appointments;
- 8) developing a plan with the therapist to handle symptoms if they return;
- 9) accessing services outside the FBHC are established;
- and 10) the psychiatric condition has stabilized for six months.

Behavioral Health Court program.

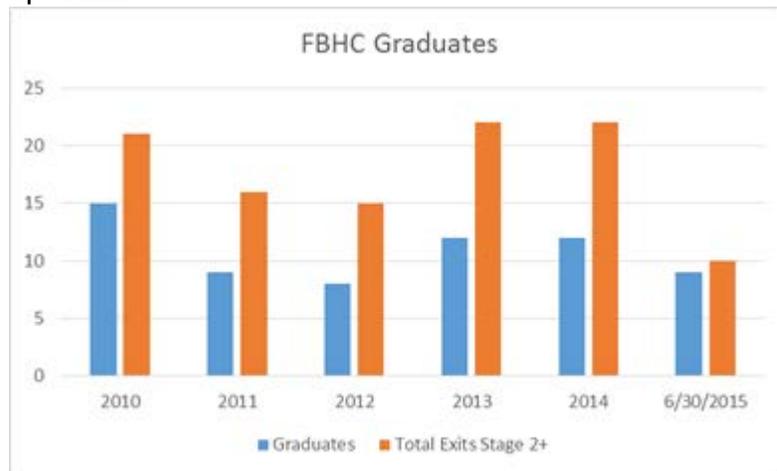
This is an improvement from the 12 minors who successfully graduated out of the 22 clients (54 %) in 2013 after advancing to stage 2 of the Behavioral Health Court program.

In 2012, 8 minors successfully graduated out of 15 clients (53%) who separated from the program.

9 of 16 clients (62.5%) who separated in 2011 successfully graduated after advancing to Stage 2.

15 of 21 clients (71%) successfully graduated in 2010 after advancing to Stage 2

2009 clients were still transitioning into the more structured phases.



**A five-and-a-half year cumulative successful graduation rate for those advancing to Stage 2 is 61% or 65 graduates of 106 exiting FBHC from 2010 through**

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<ul style="list-style-type: none"><li>• Reduce recidivism of program participants who have in the past been repeat juvenile offenders due to oversight of Behavioral Health Issues.</li></ul>	<p>June 30, 2015.</p> <ul style="list-style-type: none"><li>• There has been insufficient time to assess recidivism for most of the graduates in the past 18 months, as 71% have not been out of the program for 12 months. Six of the 12 graduates for CY 2014 are included in the recidivism calculations below, as they have met the criteria of 12 months following graduation.</li></ul> <p>Two of six 2014 graduates had Violations of Probation in 2015 as juveniles.</p> <p>For the 12 juvenile graduates in 2013, 3 have adult convictions in 2014 or 2015 (25%).</p> <ul style="list-style-type: none"><li>• For the eight 2012 graduates, there was one juvenile who re-offended in 2013 as an adult and another with an offense in 2015 as an adult. A juvenile from the Exit Class of 2011 re-offended in 2013 as a juvenile and then in 2014 and 2015 reoffended in the adult system. The Exit Class of 2010 had 2 individuals reoffend in the adult system in 2012, a third individual reoffend in 2013, and a repeat individual in 2014, both in the adult system.</li><li>• Consequently, out of 44 total juvenile graduates from 2010 through June 30, 2014, 8 individuals re-offended in either the juvenile or adult system during January 2014 through June 30, 2015 and 32 stayed out of the justice system.</li><li>• Cumulatively (excluding Exit Class FY 2014-15), a total of <b>11 individuals have re-offended in any year from 2010 through June 30, 2014 or 25%</b>. Of those 11, nine were adult offenses or 25% of those juvenile graduates now legally adults. That graduate group of 44 had 36 legally</li></ul>
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<ul style="list-style-type: none"><li>• Improvement in coping skills, education, discipline and behavior.</li></ul>	<p>considered adults as of June 30, 2014.</p> <ul style="list-style-type: none"><li>• In order to graduate, improvement is necessary in school attendance and grades; participants must regularly attend therapy, learn new coping tools, and show consistent improvement in behavior skills. 95% of the graduates showed such improvement, although not uniformly across all areas and to varying levels. One graduate had such strong learning disabilities, that such improvement was difficult to assess.</li></ul>
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**DEPARTMENT RECOMMENDATION(S):**