



Justice Center

THE COUNCIL OF STATE GOVERNMENTS

**STEPPING UP FOR YOUTH:
KANSAS STATE TASK FORCE ON IMPROVING
BEHAVIORAL HEALTH SERVICES FOR YOUTH WITH
JUSTICE EXPERIENCES**

RECOMMENDATIONS FROM STATE ASSESSMENT

November 14, 2024



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We are a national nonprofit, nonpartisan organization that combines the power of a membership association, serving state officials in all three branches of government, with policy and research expertise to develop strategies that increase public safety and strengthen communities.



Stepping Up for Youth in Kansas: Initiative Overview

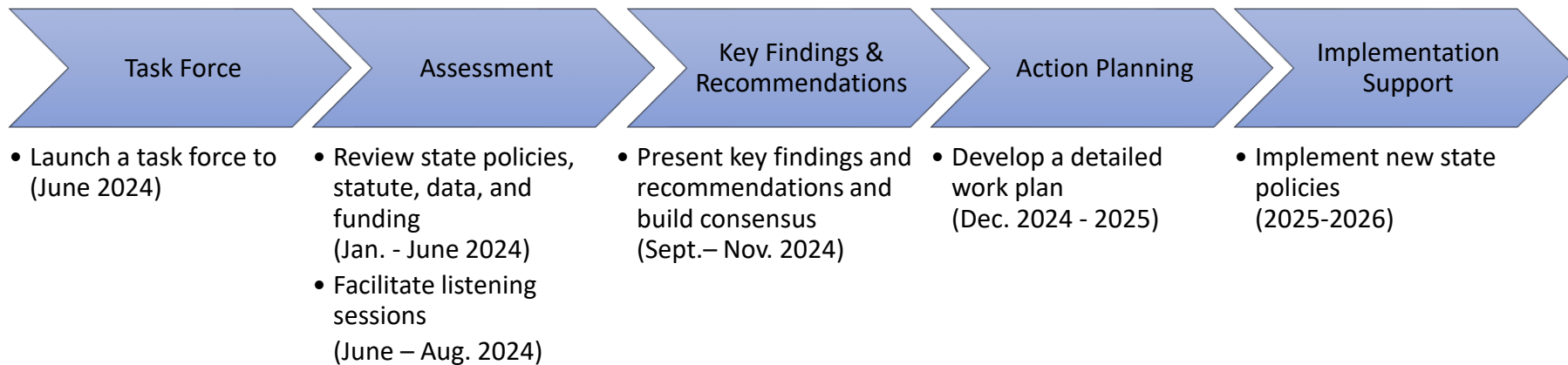
Stepping Up for Youth in Kansas

Goal of this initiative:

- Identify, implement, and expand best practices centered on improving community-based services, cross system collaboration, the efficient use of resources, and outcomes for youth with behavioral health needs who experience the juvenile justice system.



The state assessment has five key phases:




The Task Force oversees the assessment and represents diverse leaders committed to improving public safety and youth outcomes.

Clay McCarter, Director of Special Projects, KDOC	Jeff Butrick, Director of Community-Based Services, KDOC	Andrew Brown, Deputy Secretary of Programs, KDADS	Drew Adkins, Commissioner, Behavioral Health Services, KDADS	Brenda Soto, Director of Medicaid and Children's Mental Health, DCF	Ashley Brown, Cross Over Youth Policy and Practice Coordinator, DCF
Hon. Delia M. York, Wyandotte County District Court Judge	Rep. Stephen Owens	Rep. Angela Martinez	Rep. Timothy Johnson	Sen. Molly Baumgardner	Don Hymer, Chief ADA, Juvenile Division, Johnson County; Chair of JJOC
Sheriff Bill Carr, Ford County	Trish Backman, School Mental Health Coordinator, KSDE	Dr. Sherrie Vaughn, Executive Director, NAMI Kansas	Mike Fonkert, Deputy Director, Kansas Appleseed	Angela McHardie, Director, Shawnee County Juvenile Detention Center	Dustin Browning, Director of 4 th Judicial District Community Corrections
Ann Sagan, Director of Special Projects, Kansas State Board of Indigents' Defense Services	Jennifer Zirkle, Intake Supervisor, NWKS Juvenile Service	Andrea Diaz Buezo, ACMHCK, Special Projects Coordinator	Marquetta Atkins, Executive Director, Progeny	Christopher Esquibel, Chief of District Court Operations, Office of Judicial Administration	Rachel Bell, Policy Analyst, Governor's Office



Key Questions for the Task Force to Consider



What behavioral health services are available to youth with and without justice involvement?

How do diversion, detention, and disposition policies account for behavioral health needs?

What cross-system collaborations support effective planning and implementation?

Are resources being utilized efficiently?

What data are being collected and what quality assurance processes exist?

Key Findings from the State Assessment

Many youth in Kansas have behavioral health needs and are pushed into the juvenile justice system primarily to receive services, rather than because they are a public safety risk.

Kansas lacks a coordinated, statewide, cross-systems network of community-based services to meet youth's needs, protect public safety, and ensure resources are used efficiently.

Youth end up in costly detention or correctional facilities due to the lack of community-based services, and there is a lack of consistency in the services they receive in such facilities statewide.



Recommendations

Process for Today's Meeting

We will briefly review the 10 recommendations and provide an opportunity to ask questions before the vote.

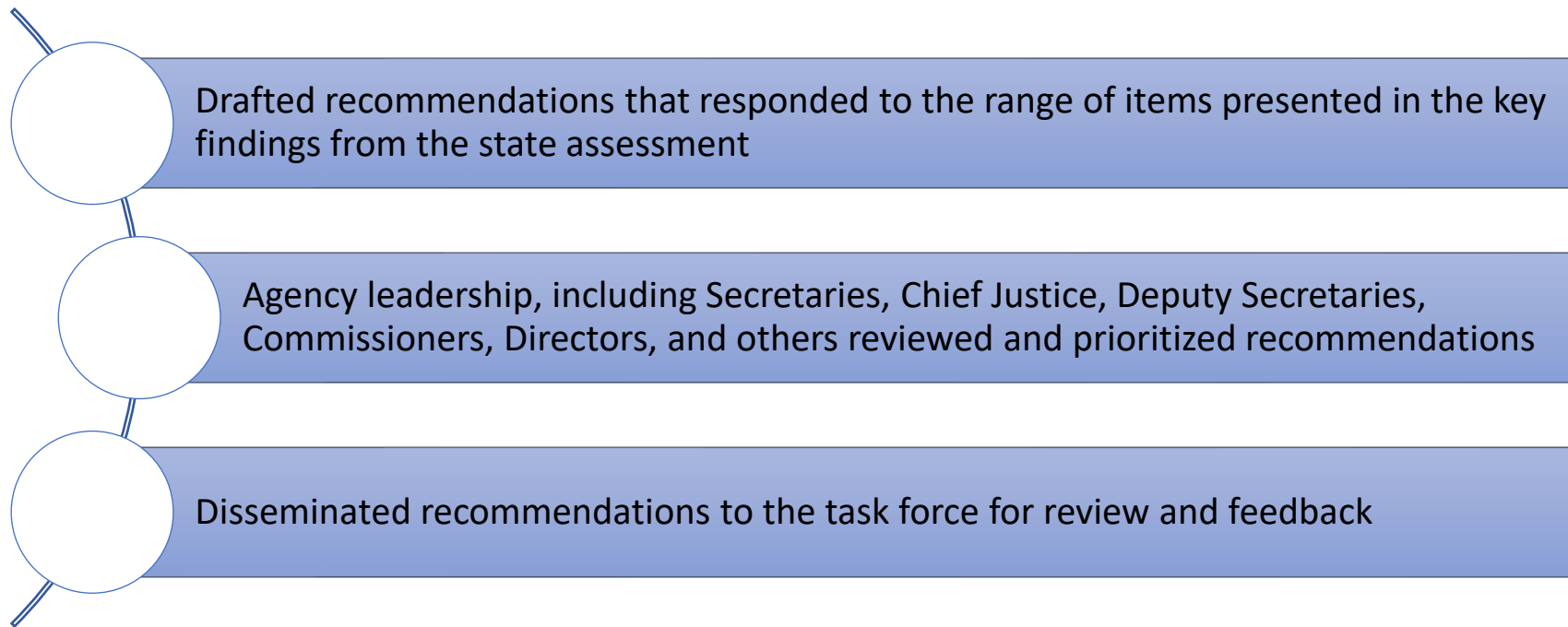
The task force members will then vote—YES, NO, or ABSTAIN—on each individual recommendation.

Task force members are voting on the substance of the recommendation, not exact language, and a recommendation passes if the majority votes YES.

The goal is to move through the voting process as efficiently as possible, with an opportunity for taskforce members to affirm their support for the recommendations, ask clarifying questions, and propose amendments, if necessary.



Recommendations Development



Recommendations Overview

Large scale improvements that require planning:

1. Developing an early intervention system for youth
2. Establishing statewide detention standards

Discrete recommendations:

3. Adopt MHIT into statute
4. Standardize IIP (diversion)
5. Establish behavioral health caseloads with supervision agencies
6. Implement shared standards for supervision agencies on risk assessments and behavioral health screenings
7. Develop trainings for judges on behavioral health and family engagement
8. Create information sharing on youth behavioral health needs and service outcomes for supervision agencies
9. Require multisystem care coordination team meetings for youth that the court is seeking to commit to KJCC
10. Enhance data collection and reporting across supervision

1. Develop an early intervention system for youth

Reduce inappropriate involvement in the juvenile justice and child welfare systems and promote the more efficient and coordinated use of state funding

- Led by KDADS, in partnership with KDOC, DCF, OJA, KSDE, KDHE and others
- Strengthen cross-systems coordination
- Scale and strengthen existing/new community-based interventions statewide
- Address gaps in public agency and provider capacity and the workforce

2. Establish statewide detention standards

Strengthen the appropriate use of detention and improve the use of research-based assessments, services, behavior management strategies, and reentry practices.

- Led By KDOC, in collaboration with KDADS, DCF, KSDE, KDHE, JDC representatives, and others
- Establish statewide oversight
- Develop detention best practice standards
- Require all JDCs to participate in performance-based standards
- Leverage and maximize the use of Medicaid and existing state funding to support detention alternatives
- Strengthen reentry planning and services for youth

3. Adopt the Mental Health Intervention Team program into statute. (KDADS)



4. Standardize the Immediate Intervention Plan across the state, including adopting best practices and engaging in training, peer sharing, and policy development. (KDOC, OJA)



5. Establish specialized behavioral health caseloads and contracts for youth under community supervision with KDOC and OJA.



6. Establish shared standards related to training on and the use of risk assessment tools and behavioral health screenings across the state. (KDOC, OJA)



7. Develop and facilitate trainings for juvenile court judges on behavioral health and family engagement. (OJA)



8. Create information sharing on youth behavioral health needs and service outcomes across juvenile justice stakeholders and design strategies to improve how behavioral health information is utilized to inform disposition. (KDOC, OJA)



9. Require multisystem care coordination team meetings for any youth for which the juvenile court is considering commitment to KJCC as a disposition to determine if another residential or community-based option is more appropriate to meet youth's needs and protect public safety. (KDOC, OJA)



10. Enhance data collection and reporting across KDOC and OJA to include behavioral health needs and other juvenile justice outcomes through an annual report and other formal mechanisms.



Next Steps

Next Steps

Present recommendations to various legislative committees

Develop action plans for planning and discrete recommendations



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