

Mental Health Advocacy for Juveniles

Hosted by Crossroads For Florida Kids

Presented by:

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JUVENILE MENTAL HEALTH COURT

Thirteenth Judicial Circuit Court



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Juvenile Mental Health Court

JMHC is a Problem-Solving Court that embraces the idea that treatment, rather than punishment alone is the most effective strategy to help youth avoid future involvement in the juvenile justice system



A different type of court

Differences from other delinquency courts:

- specialized dockets
- non-adversarial approach
- mental health treatment
- school involvement
- multidisciplinary teams
- team staffings
- competency treatment
- connection to community services

JMHC takes into account developmental differences and mental health diagnoses when creating contract requirements and plans for these youth. This is also taken into account when the youth is in court.
(example Intellectual Disability, low IQ, Autistic)

Conditions of JMHC CRC

- attend all court dates
- cooperate with evaluations
- participate in court
- engage in MH treatment
- attend school
- do not use or possess illegal drugs
- no new law violations
- obey reasonable demands of parents
- community service hours
- restitution
- letter of apology



Multidisciplinary Staffings

In attendance: Judge, Client's Attorney, Assistant State Attorney, Court Specialist, School Transition Specialist, YES, Twin Oaks, Attorney ad Litem, Guardian ad Litem, Child Welfare Case Managers, Therapists

- Held the day before court
- Discussion on the youth's progress or any issues that may prevent them from successfully completing their contract
- Team problem solving
- Updates on any completed contract tasks
- Plan for the hearing

Incentives and Sanctions



Incentives and Sanctions for behavior modification, not punishment:

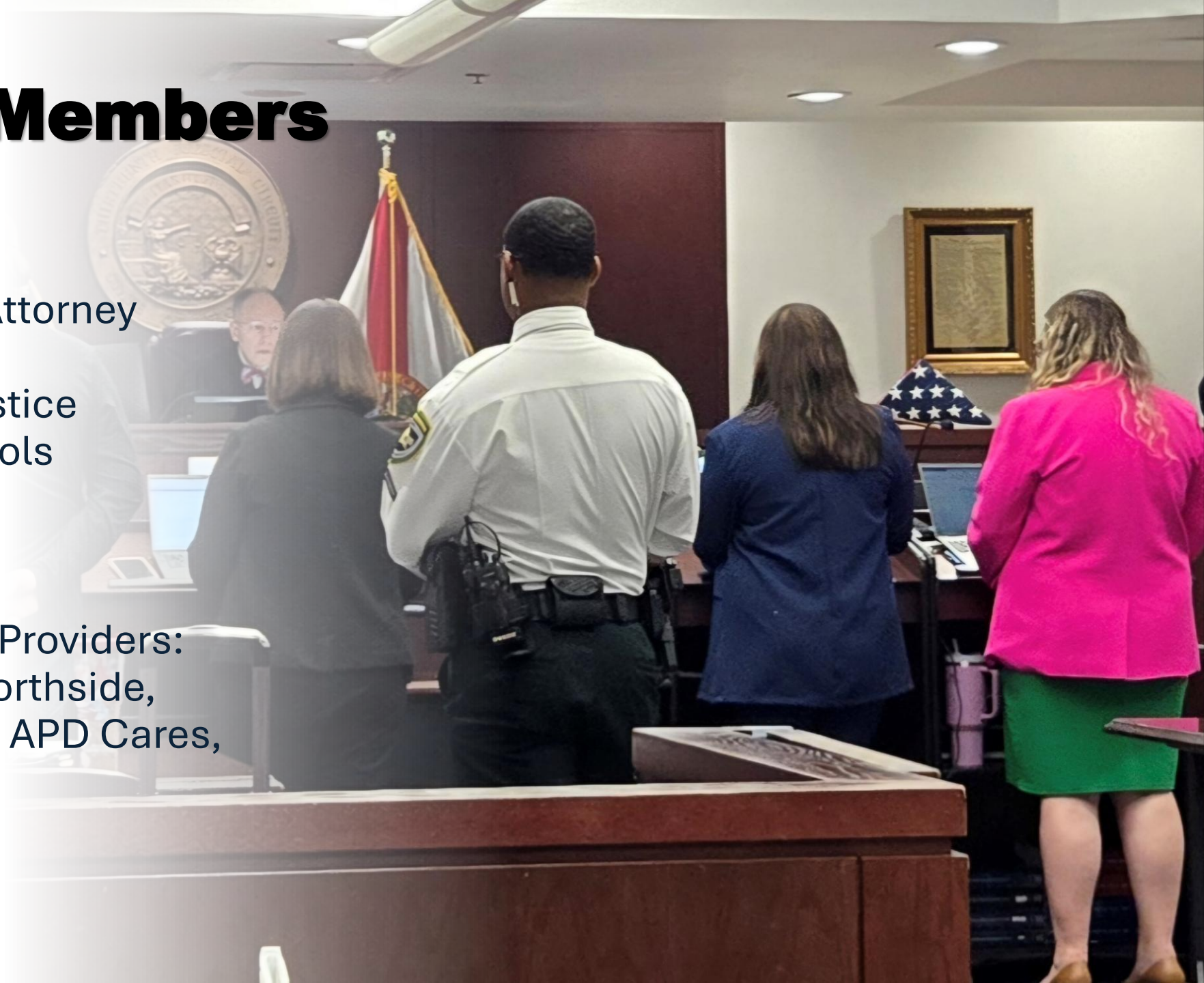
- waive court appearance
- increase appearances
- praise
- applause
- targeted essays
- certificates donated items
- (backpacks, school supplies)



JMHC Team Members

Judge
State Attorney
Public Defender / Private Attorney
Court Specialist
Department of Juvenile Justice
Hillsborough County Schools
Crisis Center
Twin Oaks

Collaborative Community Providers:
Chrysalis Health, ACTS, Northside,
Children's Home Network, APD Cares,
Gracepoint, Eckerd



Court Specialist

Case documentation, report retention, judiciary support, training, case staffing participation, program statistics

Department of Juvenile Justice – Juvenile Probation Officer

Monitors compliance, court and staffing participation, home visits

Twin Oaks Competency Trainer

Competency training for youth who are Incompetent to Proceed, evaluations, provides training updates & compliance

Dr. Cindy Ramos

YES Program Manager

S4KF a Division of Crisis Center of Tampa Bay

- YES program and its role in the courtroom
- Services provided
- Length of assistance
- Treatment plan for youth



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Youth Experiencing Success (YES)

- YES Program is part of the Success 4 Kids & Families, a Division from Crisis Center of Tampa Bay
- Referral to YES
 - Juvenile Mental Health Court
 - Juvenile Diversion Program
 - Juvenile Assessment Center
- Criteria
 - Hillsborough Co. residency
 - Ages: 12-20
 - Must be found incompetent to proceed by the Court, pursuant to Chapter 985, Florida Statutes or be determined eligible by the Office of the State Attorney to participate in a diversion program and/or offered a “Case Resolution Contract” if in JMHC
- Services
 - Family Navigation
 - YES Therapy

YES & JMHC

➤ Challenges

- Requirement to participate in therapy
- Lack of engagement from families
- Holding the client or their parent in contempt
- Enforce curfew, rather encouraged
- Sanctions are not the same as in juvenile court

➤ Mitigating challenges

- Staffing with the multidisciplinary team in JMHC to encourage participation (incentivize with PROPS, waived court appearances, positive reinforcement with clapping and recognition on the record, positive progress in their case file)

Melissa Russo

Hillsborough County Public Schools Juvenile Justice Transition Specialist



- Role in the courtroom
- Duties at school
- Services provided at school / home
- Links to other community resources

Q & A + Contact Info

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Mental Health Advocacy for Juveniles

An Overview of Attorney Ad Litem Advocacy
in Juvenile Mental Health Court

By Assistant Public Defenders Marie Marino and Khalila Frett

What is Juvenile Mental Health Court?

- **The 13th Judicial Circuit in Hillsborough County Florida is home to the first Juvenile Mental Health Court (JMHC) in the State.**
- **Treatment Courts are specialized problem-solving courts that address the underlying mental health needs of justice-involved youth through structured supervision, treatment, and judicial oversight.**
- **JMHC promotes a youth's well-being through engagement in treatment and pro-social community interactions while promoting public safety through recidivism reduction.**

Best Practices in Juvenile Mental Health Court

- **Multidisciplinary Team with distinct roles**
- **Staffings**
- **Individualized Treatment Plans**
- **Graduated Incentives and Sanctions**
- **Judicial Engagement and Rapport**

Eligibility for Entering Juvenile Mental Health Court

- **Youth Incompetent to Proceed pursuant to Florida Statute 985 or Youth Participating under a Case Resolution Contract**
- **Case Resolution Contracts (CRC):**
 - **Offered at the sole discretion of the State Attorney's Office.**
 - **Diversion agreement, upon successful completion, the charges are dismissed. If unsuccessful, the case is transferred back to the original division for prosecution.**
 - **Unique: Case Resolution Contracts may be entered into by a youth who is found Incompetent to Proceed.**

Unique Roles working Cooperatively

- **APD — statutory, essentially criminal defense representation**
- **AAL — Crossroads Guidelines**
 - **Does not give legal advice related to criminal defense.**
 - **Does not review the CRC with the Child and/or opine on child's ability to sign the contract.**
 - **Reaches out to the defense attorney or refers child and parent to defense attorney if there are questions/concerns.**
 - **Team approach with Defense Attorney: Expressed wishes vs. Best interest**
- **There should be no role creep, but Team Approach is essential!**
- **Expressed wishes vs. Best Interests; Consistency in messaging; Don't divide and conquer!**

What would you do as AAL?

Scenario #1 - You are the appointed AAL for a child in JMHC who has just turned 18 and is now in jail on an adult charge. The child is a verified trafficking victim and has no housing in place for when released from jail.

Here's what the AAL did: The AAL visited the child in jail. AAL then submitted a request to Selah Freedom via their website for someone from the program to visit the child in jail to educate child about the program. The AAL also informed the child's APD about the referral to Selah Freedom and the jail visit with the child.

Outcome: The child completed the screening process and was accepted at Selah Freedom. The placement at Selah Freedom helped to resolve the child's cases in JMHC and the adult case.

What would you do as AAL?

Scenario #2 - You are the appointed AAL for a child in JMHC. Child became dependent after you were appointed and frequently went on the run because the child does not like being dependent. You have not had contact with the child for months because the child ran away and whereabouts have been unknown. The child has picked up new charges in Pasco County and is in detentions in the Pasco.

Here's what the AAL did: The AAL reached out to the child's Pasco PD and attended the child's detention hearings in Pasco. AAL also visited child in Pasco and updated JMHC APD.

Outcome: AAL was able to convince child not to go on the run and coordinated with child's case manager and Guardian Ad Litem to have a safe transition from the detention center to a new placement. The child willingly went to the new placement. AAL's contact with child was also presented in JMHC which helped to get a pickup order set aside.

Side Note: AAL also discovered that the child entered a plea in Pasco even though child was ITP in Hillsborough and informed both APDs. APDs got the plea set aside.



What would you do as AAL?

Scenario #3 - You are the AAL for a child who is 17 years old and ITP in JMHC. The child's parent informed you that on his 18th birthday the child will be kicked out of the home. You try to convince the parent not to do so; parent seems receptive to your pleas but ultimately the child gets kicked out on his birthday. Child does not have a phone or a place to live. You lost contact with the child.

Here's what the AAL did: AAL contacted every known contact person for the child: parent, APD, JPO, Counselor, etc. AAL learned that the child had been in contact with his former JPO (not the JPO in JMHC). That JPO was able to provide contact information for Independent Living Services who opened a case for the child and found him placement. AAL was able to contact the child and visit the child at his new placement.

Outcome: Upon visiting the child at his new placement AAL learned that the child was in need of necessities like a food stamps card, bus passes, and medical treatment. AAL advocated to the ILS Case Manager for the child to get these necessities. The child received his food stamps card, vouchers to purchase his bus passes, and got his medical appointment.

Side note: AAL knew the child's JPO from attending detention hearings. Also, AAL located the child weeks before the child's next JMHC hearing which prevented the possibility of a pickup order for failure to appear.



What would you do as AAL?

Scenario #4 – You are the appointed AAL for a child who is ITP with severe mental illnesses and in JMHC. The child informed you that his mother has indefinitely locked him out of the house and he’s been sleeping in cars or at a friend’s house. The child has not been enrolled in school for a year. You’ve provided help to mom for school enrollment and have advocated with mom to let the child back in the home, but mom is refusing.

Here’s what AAL did: AAL filed a shelter petition in Dependency Court. The AAL followed up with a formal dependency petition seeking DCF services for the child, for emergency APD housing, and for mental health care. Mom was subpoenaed by Dependency Court to be present for the hearing.

Outcome: Mom was ordered to comply with a dependency court order to care for the child. Mom complied with the order and child was taken back into the home and enrolled in school with treatment services.