THE CROSSOVER YOUTH PRACTICE MODEL (CYPM)
An Abbreviated Guide

Georgetown University
McCourt School of Public Policy
Center for Juvenile Justice Reform
http://cjjr.georgetown.edu/

Center for Juvenile Justice Reform
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The Crossover Youth Practice Model (CYPM) was developed by the Center for Juvenile Justice Reform (CJJR) at the Georgetown University McCourt School of Public Policy to improve outcomes for youth who are dually-involved in the child welfare and juvenile justice systems: crossover youth. The model uses a research-based approach to assist child welfare, juvenile justice and related agencies in adopting policies and practices that better address the needs of these youth and improve their life outcomes.

The primary authors of the Crossover Youth Practice Model are Lorrie Lutz and Macon Stewart, with contributions from Dr. Denise Herz and Lyman Legters. Shay Bilchik edited and provided guidance for the document. A more detailed version of the Crossover Youth Practice Model Manual and the accompanying research summary authored by Dr. Denise Herz is available at: http://cjjr.georgetown.edu/our-work/crossover-youth-practice-model/. This shorter version focuses primarily on the key implementation phases of the practice model and can be used by jurisdictions to gain an initial understanding of the approach and what it entails.

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CROSSOVER YOUTH PRACTICE MODEL: OVERVIEW AND GOALS

Young people who have been abused or neglected are more likely to engage in delinquent behavior and often have poorer outcomes than youth who have not experienced maltreatment. The Crossover Youth Practice Model (CYPM or practice model) helps to explain why this occurs and provides a way to interrupt this trajectory and better address the needs of youth known to both the child welfare and juvenile justice systems.

Although the two primary systems involved in this model, juvenile justice (JJ) and child welfare (CW), serve different functions, they have the same goal: improving the lives of their clients. The Crossover Youth Practice Model helps these systems become more efficient and effective—thereby helping them achieve their goals. This is accomplished by using research related to best practices in child welfare and juvenile justice, the research related to crossover youth, and the lessons learned in our CYPM practice.

The CYPM embodies a strength-based perspective that is essential in carrying out this work. It recognizes that we must seek to improve the lives of youth and families by building on their strengths and helping them to overcome their challenges. We must help the families with whom we work to use their untapped strengths and resources to create and plan for their futures. Creating a practice model that builds on the principle of ensuring family engagement and equitable treatment at every level of the system is paramount in this work. The overarching goals of this practice model are:

- A safe reduction in the number of youth placed in out-of-home care
- A reduction in the use of congregate care
- A reduction in the disproportionate representation of youth of color, particularly in the crossover population
- A reduction in the number of youth crossing over and becoming dually-involved

In addition to achieving the goals above, we anticipate that implementation of this practice model will result in the following:

- A reduction in the number of youth re-entering child welfare from juvenile justice placements
- A reduction in the level of penetration into the juvenile justice system by foster youth
- A reduction in the use of pre-adjudication detention
- A reduction in the rate of recidivism
- An increase in the use of diversion in the juvenile justice system
- An increase in interagency information sharing
- An increase in the inclusion of family voice in decision-making
- An increase in youth and parent satisfaction with the process
An increase in the use of a joint case assessment and planning process
A reduction in the use of Another Permanent Planned Living Arrangement (APPLA) as a permanency goal
A reduction in education instability
An increase in positive youth development and pro-social opportunities

We expect that, over time, jurisdictions involved in this process will change their practice in meaningful ways, including achieving the following results:

- Strong and consistent family engagement throughout the life of the case
- Alignment of the mission and vision of the child welfare and juvenile justice agencies
- Implementation of specific policies and changes in practices related to serving crossover youth
- Improved cross-systems engagement related to case management functions
- Creation of a capacity to track crossover youth data that informs decision-making at all levels of the organizations
- Cross-systems trainings to improve agency knowledge about other system functions and processes
- Development of a mechanism that provides continuous quality improvement across the two systems

### Research Support for the Crossover Youth Practice Model

Research conducted in jurisdictions that have implemented the CYPM shows that the practice model is having a positive impact on identification, case management and improved outcomes for dually-involved youth. Compared to pre-practice model youth, youth involved in the practice model were:

- Slightly more likely to have their cases dismissed or receive diversion and less likely to receive probation supervision or placement in corrections
- Three times more likely to receive a promising practice
- Less likely to live in congregate care settings
- Less likely to have Another Permanent Planned Living Arrangement (APPLA) as a permanency goal
- More likely to have remained at home as a permanency goal
- More likely to have one or both cases (e.g., child welfare and/or juvenile justice) closed
- More likely to show improvements in mental health

Additionally, there was a significant increase in the percentage of youth identified at an early stage of their crossing over. Contact with family and parents and involvement in extracurricular and structured activities also increased for youth that experienced the practice model.

To read the entire aggregate report, please click visit: [http://cjcr.georgetown.edu/our-work/crossover-youth-practice-model/]
Who Are Crossover Youth?

Improving outcomes for crossover youth requires a clear understanding of who crossover youth are to better identify and appropriately respond to their needs. Clear definitions of crossover youth are still forming as research expands in this area, but multiple references to different subgroups of this population can and do cause confusion. For instance, at least three terms are used to refer to this population: crossover youth, dually-involved youth and dually-adjudicated youth. Although these terms often are used interchangeably, we believe they refer to different subgroups of crossover youth. In our work, we use the following definitions:

- **Crossover Youth:** Any youth who has experienced maltreatment and engaged in delinquency (regardless of whether he or she has come to the attention of the child welfare and/or delinquency systems).

- **Dually-Involved Youth:** A subgroup of crossover youth who are simultaneously receiving services, at any level, from both the child welfare and juvenile justice systems.¹

- **Dually-Adjudicated Youth:** A subgroup of dually-involved youth, encompassing only those youth who are concurrently adjudicated by both the child welfare and juvenile justice systems.²

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1. Two clarifying notes: (1) the phrase “services at any level” encompasses a wide array of possible interventions by either the child welfare or delinquency system. For instance, dual involvement would include being adjudicated by one system and receiving diversionary services from the other, or receiving formal services after adjudication in both systems. (2) “Simultaneously,” in this case, does not require that involvement in both systems began at the same time. In most cases, a youth’s involvement will begin in one system first and include the second system at some point afterward. Thus, “simultaneous” in this context indicates that involvement in both systems occurs at the same time regardless of which system was initially involved.

2. Two clarifying notes: (1) Adjudication refers to formal court processing that results in a youth becoming a formal “dependent” or “delinquent.” Receiving diversionary services, for instance, would not constitute adjudication. (2) Similar to the note above, “concurrent” adjudication assumes that the adjudication of a youth in one system occurs before that youth’s adjudication in a second system. In other words, a youth will come to the attention of one system (e.g., the child welfare system) prior to coming to the attention of the second system (e.g., juvenile justice system).
What Do We Know About Crossover Youth?
A growing body of research on crossover youth indicates that:

- Crossover youth are often in the child welfare system for long periods of time
- Crossover youth are more likely to be female compared to the general delinquency population
- Minorities, particularly African Americans, appear to be over-represented in crossover populations in many jurisdictions
- Most crossover youth have been placed out of the home and often experience numerous placements, including multiple placements in congregate care
- Crossover youth are often truant and/or performing poorly at school
- Over half of crossover youth are detained prior to adjudication (Herz & Ryan, 2008b; HAlemba, Siegel, Lord, & Zawacki, 2004; Kelley, Thornberry, & Smith, 1997)
- Crossover youth are perceived as higher risk by juvenile justice decision-makers and receive harsher dispositions than their non-crossover counterparts (Ryan, Herz, Hernandez, & Marshall, 2007; Morris & Freundlich, 2004; Conger & Ross, 2001; Jonson-Reid & Barth, 2000).

Crossover youth research also provides guidance on what is needed to better meet the needs of and improve outcomes for this population. Multi-system collaboration is essential (Wiig & Tuell, 2004; Siegel & Lord, 2004; Halemba, G. & Lord, R, 2005; American Bar Association, 2008; Herz & Ryan, 2008; Nash & Bilchik, 2009), including (at a minimum) the use of:

- Coordinated case assignment
- Joint assessment processes
- Coordinated case plans
- Coordinated case supervision

Jurisdictions must also integrate the use of best practices and evidence-based programs as they relate to child welfare, juvenile justice, mental health, substance abuse and education practices. Without integrated and comprehensive efforts, crossover youth are less likely to receive the appropriate services and placements they need to improve their outcomes in both the short- and long-term (Widom & Maxfield, 2001; Cusick, Goerge, & Bell, 2009). This brief summary of research represents the foundation from which the Crossover Youth Practice Model is built. A more detailed discussion of the research is available as an appendix to the full version of this manual at: [http://cjjr.georgetown.edu/our-work/crossover-youth-practice-model/](http://cjjr.georgetown.edu/our-work/crossover-youth-practice-model/).
PRACTICE MODEL VALUES AND PRINCIPLES

The Crossover Youth Practice Model is rooted in foundational principles and values. These principles express the overarching values that must guide all policies, programs, practices, services and supports conducted within the practice model.

- **Youth and families have strengths and should be treated as unique individuals.** Those strengths should be reflected in our work with them and true partnerships should be developed in our working relationships in a manner that is fair and equitable. This includes on the individual case and systems level.

- **Systems must utilize data to make all policy and practice decisions.** Integration of data systems allows for timely exchange of information to improve cross-system case management and aggregate data exchange to assess population trends.

- **Strengthening workforce efficacy** and providing appropriate training to staff will ensure their knowledge and capacities about the newly developed processes and result in their improved ability to serve youth and families. This includes on-going supervision at all levels of staff.

The practice model is also deeply rooted in seven key overarching themes that permeate throughout its implementation. These are:

- **Family Engagement:** Engaging families by building good working relationships to meet individualized goals is a fundamental aspect of the practice model. Agencies/jurisdictions must be strength-based and family focused, including family voices in their decision-making, planning and case work.

- **Permanency:** All young people need lifelong, stable connections to others, but crossover youth may be less likely to achieve this. Permanency planning must begin at the initiation of the case and be a key focus of all case work.

- **Disproportionality:** Children of color are overrepresented in both the juvenile justice and child welfare systems, but among crossover youth this disproportionality is even greater. Looking at key decision points can help address this issue.

- **Gender:** Females are a higher percentage of the crossover youth population than the juvenile justice system generally. Addressing this issue starts with looking at key decision points to assess the trend in your jurisdiction, as well as focusing on alternatives to detention.

- **Information Sharing:** Information sharing is critically important and opportunities begin as soon as a young person crosses over. Important issues regarding how, when and with whom information can be shared must be addressed early on and throughout the case.
The narrative for each section below is intended to describe how the required practices should be carried out in each jurisdiction. While there are some aspects of the practice model that allow for jurisdictional variations, there are many aspects that must be implemented with fidelity. These distinctions will be made clear throughout this narrative. Whenever this symbol ☑ is shown, it indicates a required practice.
Implementation of the Practice Model

Since 2007, the Center for Juvenile Justice Reform (CJJR) at the Georgetown University McCourt School of Public Policy, in partnership with Casey Family Programs, has worked to implement the CYPM in over 73 local jurisdictions across the country. Jurisdictions implementing CYPM receive training and technical assistance through site visits, monthly calls, targeted guidance from experienced consultants and peer learning opportunities from other CYPM sites.

Working with jurisdictions from across the country to implement the practice model allows us to connect them for mutual support and to leverage their collective wisdom. This document gives jurisdictions a short primer on the phases and required practices of the practice model. For a more in-depth review of the model and the research supporting it, one should read the more detailed version of this manual and research summary at: http://cjjr.georgetown.edu/our-work/crossover-youth-practice-model/.

PHASE I

Importance of Leadership

Through our implementation efforts to date, we have learned that it is essential to have the leadership of the participating agencies (e.g., the presiding judge in the family court, the chief probation officer/head of juvenile services and the head of the child welfare agency) deeply committed to the work and actively involved. This level of dedication and support from these key leaders is an important factor in determining whether practice model implementation will succeed and be effective. If one or more of these leaders is not immediately invested in the work, it may be helpful to utilize one or both of the other key leaders to bring that person into the process.

Using an Implementation Team

The system reform needed to implement the Crossover Youth Practice Model requires both the hard work of staff internal to an agency and the input and buy-in of the broader community at large. The needs of the young people and families this model seeks to address relate to the work of a broad set of community and government partners, as well as the youth and families themselves.

In our one-on-one work with sites implementing the CYPM, we require each site to create an Implementation Team that is both knowledgeable and supportive of the work. This group of individuals (as a whole) is involved in the day-to-day implementation of the model, and is generally involved in the initiative from the onset. The type of individuals/organizations that should be involved in the Implementation Team include:

- Judiciary (e.g. judges, masters, court administrator)
- Juvenile justice (e.g. intake, probation, corrections)
- Child welfare (e.g. investigation, intake, case managers, permanency)
- Education
- Mental health and substance abuse treatment providers
- Youth
- Parents
- Law enforcement (local police and school resource officers)
- Attorneys
- CASAs and Guardian ad litem
Arrest, Identification and Detention

When youth who cross over from child welfare to juvenile justice are identified quickly following arrest, we can assess their needs and look for ways to divert them as appropriate from formal juvenile justice processing (The Annie E. Casey Foundation, 1999). Youth who are taken to an intake center or detention facility can be identified immediately; other youth in this situation must be identified when the case is received by the intake agency and reviewed for charging.

Research suggests that dually-involved youth may be detained more often and for longer periods than youth without child welfare involvement. Educating all professionals who work with crossover youth about these differences helps them understand that this isn’t a level playing field, and they are not being asked to give crossover youth “special treatment” but to give them the same chances other kids have by treating them fairly, equitably and individually.

What Does the Practice Model Require Sites to do?

Jurisdictions implementing the practice model must:

- Develop and implement protocols to ensure that the JJ system conducts a check at the time of admission to a pre-adjudication detention facility, arrest intake or issuance of a citation to determine if a youth is involved in the child welfare system. Training must be provided to explain the rationale for this practice and ensure protocols are fully understood.
- Require that when youth entering the juvenile justice system are identified as being involved in the child welfare system, the JJ case worker contacts the assigned CW social worker to inform them of the youth’s entry into the system and other information

Developing an Inventory of Assessment Tools, Resources and Services

Jurisdictions implementing the practice model must create an inventory of the assessment tools used in both child welfare and juvenile justice as a critical first step in developing a coordinated approach to serving crossover youth. This can lead to both achieving economies of scale and the strengthening of efforts to identify appropriate services and programs. Once each tool is identified, the following questions should be answered:

- What decisions are the tools designed to guide or facilitate?
- What population or problem is the target of their use?
- What tools do both systems use?
- Does the data collected by different tools from each system overlap?
- How are the assessment tools used?

From a discussion of the inventory, jurisdictions can identify gaps in assessment tools and processes and decide how to best utilize current tools in the practice model implementation including when the youth is in detention and during the joint assessment process discussed below. This discussion will also allow the jurisdiction to determine whether the amount of assessment that a family and youth experiences may be overwhelming and undermine efforts to work effectively with them.

The inventory should also include a listing of resources or services available to address issues identified by the assessments.
relevant to their detention status. (The JJ case worker should also receive medical, placement, and other important child welfare case related information.)

- Require CW social workers to attend all juvenile justice court hearings for their clients, starting for those who are detained, and continuing throughout the life of the case, so JJ case workers and CW social workers stay engaged with each other for as long as a youth is involved in both systems. Likewise, JJ caseworkers should also stay abreast of child welfare proceedings, which include attending court hearings where appropriate and/or feasible under local rules.

Other Required Practices

☑ Other required practices for serving crossover youth at this phase of the process involve:

- Assess the need for a memorandum of understanding that clearly describes the ability of child welfare and juvenile justice staff to share relevant information about youth and families involved in both systems. This agreement should account for privacy and confidentiality interests of the child and/or parent (or both) and may also include the sharing of educational and behavioral health information. In some jurisdictions this may also require the development and execution of consent forms to be signed by the parent and/or youth.
- Ensure the use of a validated screening and cross-system assessment tool that can be used while the youth is in detention.

Decision-Making Regarding Charges

Jurisdictions implementing the practice model must evaluate and explore the possibility of changing the way charging decisions are made, as charging is a key decision point for each case. Probation intake staff or prosecutors typically make a decision about charges shortly after a youth is arrested or immediately after the youth is detained (if applicable). They may decide to: drop the charges; offer diversion as an alternative to formal processing; petition the charge to the juvenile court; or request to file the case in adult court. To date,

Focusing on Prevention

Jurisdictions implementing the practice model should work on preventing youth from crossing over between the child welfare and juvenile justice systems. One way to do this is to form a workgroup of representatives from relevant agencies (child welfare, juvenile justice, law enforcement, placement providers, education and behavioral health) to look at the pathways young people follow to crossing over and create prevention strategies that can help decrease the number of young people entering the justice system from the child welfare system. This work may include:

- Looking at a small cohort (e.g., 50 or 60) of young people who have crossed over to identify site-specific “hot spots”—meaning those places from which young people are most frequently crossing over (e.g., certain schools or congregate care placements) and identifying current practices at those hot spots regarding discipline, suspension and push-out.
- Moving to institute new protocols and procedures that aim to reduce the likelihood of crossing over and identify delinquency risk factors (such as training for law enforcement or early identification of youth who cross over).
there is no research that indicates how crossover youth are charged and how charging for these youth compares to non-crossover youth.3

The practice model requires that when a youth involved in the child welfare system commits a delinquent offense, the youth, his/her family, the CW social worker, the JJ intake worker, attorneys assigned to the case and other service providers come together and explore diverting the youth from the juvenile justice system. At this meeting, stakeholders should consider many factors, including but not limited to:

- the nature of the offense
- the attitude and emotional status of the youth
- family dynamics
- educational status of the youth
- input from staff and providers currently involved in serving the youth and family
- what serves the best interests of the youth and public safety

These meetings are essential because they present an opportunity to prevent a youth involved in the child welfare system from formally entering the juvenile justice system. Identification of a crossover youth early in juvenile justice processing also facilitates information sharing, improves the quantity and quality of data available and provides a critical opportunity to give contextual explanations for particular factors (e.g., multiple placements, going AWOL from placements, etc.). These explanations can prevent exaggerated perceptions of risk by juvenile justice personnel (Conger & Ross, 2009). Ultimately, a more comprehensive and accurate understanding of the case may also help avoid the unnecessary penetration of the juvenile justice system (i.e., placement with a relative or foster care placement instead of congregate care or a correctional placement).

When diversion is not possible and a youth is formally charged and prosecuted (perhaps ultimately being placed on probation or committed into a juvenile justice institution), a “working” relationship between the CW social worker, JJ case worker and the family and youth must be supported. This will help to ensure the delivery of appropriate services and a seamless approach to case decision-making. As part of this integrated approach, the CW social worker must continue to attend all of the youth’s juvenile justice court hearings, just as the JJ caseworker must attend the child welfare hearings and remain abreast of what is happening in that case. The CW social worker’s involvement in these hearings is essential both because the child welfare agency is acting as the parent in the case as long as the youth is in their custody, and because the child welfare social worker may be able to provide parties in the juvenile justice case important information about the status of the

3 This is concerning for a number of reasons, but particularly concerning is the absence of numbers on how many crossover cases are processed in adult court. Once they enter the adult court system, it is extremely difficult to identify these cases.
child welfare case, service delivery and case planning. Likewise, the JJ caseworker should be knowledgeable and involved in the child welfare case so that certain services and dispositions on the CW side are not duplicated or in conflict with efforts in the juvenile justice court.

**Summary of Key Steps in Phase I**

Jurisdictions implementing Phase I of the practice model should:

- Identify crossover youth at the earliest time appropriate (i.e. arrest, juvenile justice intake).
- Upon identification of a crossover youth, initiate a joint assessment process that informs decision-making regarding charging, including diversion, and ongoing service planning.
- Hold diversion or similar meetings in all crossover cases and pursue strategies as appropriate to prevent crossover youth from becoming formally involved in the juvenile justice system.
- Ensure the child welfare agency works in a coordinated manner with the juvenile justice system to provide intensive services to address the needs and behaviors of youth, particularly those who are diverted from the juvenile justice system.
- Require CW social workers and JJ case workers to actively engage families in helping their youth refocus behaviors and reduce risk of further involvement in the juvenile justice system.
- Continue to require the CW social worker to attend all of the youth’s juvenile justice court hearings, as well as require the JJ caseworker to attend the child welfare hearings.
- Ensure child welfare and juvenile justice agencies partner on identifying and funding services to ensure that crossover youth have access to services funded by both systems. (Through the practice model, sites are expected to explore the development of specialized diversion programs that can best serve the needs of youth in foster care who are arrested, thereby reducing the risk of them entering out-of-home care in the juvenile justice system).
- Assess the need for a memorandum of understanding related to information sharing at an aggregate and case level. This may include the creation of consents for release of information.
PHASE II

Joint Assessment and Planning
If a youth is not diverted from the juvenile justice system and is formally prosecuted, the CW social worker and JJ case worker should immediately begin working with the youth and his or her family. Working across systems can be challenging for the workers and confusing for the youth and family, so one of the keys to a successful working relationship will be to build a relationship of trust and mutual respect between all parties. This takes time, and it requires that all parties begin engaging one another as soon as a decision is made to move forward with the case in the juvenile system.

This phase of the practice model explores case assignment across the two systems for court processing, joint assessment across systems and coordinated case planning. The importance of this phase is underscored by research that demonstrates that crossover youth receive different outcomes than their non-crossover counterparts.

Case Assignment
Regardless of how the case is charged (i.e., diversion or formal juvenile justice processing) all decision-making related to the case within and across systems must be coordinated. There are two types of promising approaches to ensure the continuity of decision-making throughout the court process, and to facilitate information sharing in a timely manner that have been identified by researchers: “case assignment” and “case flow management” (Siegel and Lord 2004, see also Petro, 2006 and Petro, 2007). Case assignment approaches consolidate court processing so that the dependency and delinquency cases are handled simultaneously and are supervised by attorneys familiar with both systems. At least three types of approaches fall into this category: one judge/one family, dedicated dockets and special qualifications for attorneys (see, for example, Herz et al. 2010; Scrivner, 2002). Case flow management approaches bring child welfare, juvenile justice and any other relevant personnel together to share information and make coordinated recommendations to the court. Approaches that fall into this category include: joint pre-hearing conferences, combining dependency and delinquency hearings, joint court orders and court reports and mandatory attendance of the case-carrying CW social worker and JJ case worker at hearings. These are considered promising approaches (rather than evidence-based) because their effectiveness has not yet been evaluated beyond the use of anecdotal evidence (Siegel and Lord 2004).⁴

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⁴ For a description of specific initiatives that fall into the categories defined by Siegel and Lord (2004), see Siegel and Lord (2004), Petro (2007), Herz and Ryan (2008a), and Halemba and Lord (2005).
Court Structures
The practice model strongly encourages jurisdictions to use either a dedicated docket or a one judge/one family approach to improve coordination and handling of cases.

- **Dedicated docket**: In this model, a particular court and court personnel (i.e., judge, prosecutor, public defender, and so on) are designated to hear all dually-involved cases. Court personnel become familiar with the special needs of dually-involved youth and ensure that they receive the services they need. JJ case workers, CW social workers and attorneys across the two systems are required to attend the hearings and to facilitate interagency communication. Cross-training is provided to all new juvenile justice and child welfare personnel, and supervisors from both agencies meet monthly to discuss new issues and improvement in handling dually-involved cases.

- **One judge/one family**: In this model, a single judge hears both the dependency and delinquency matters for all children and youth within a family. Many of these jurisdictions also require continuity of counsel for both the dependency and delinquency case.

The methods above ensure that the family, agency staff and judge are all prepared and on the same page and eliminates inconsistent decision-making. If a jurisdiction cannot implement one of the above and retains a bifurcated court model (handling child welfare and juvenile justice cases separately), then they must work to increase pre-court coordination by taking the following steps (these should also be done by jurisdictions using the above models):

- Requiring that the team of individuals serving the youth and their family come together prior to the court process and develop a single set of recommendations addressing the child welfare and juvenile justice issues.
- Coordinating hearing dates to ease the burden of multiple court appearances on the family (e.g., reducing the need for youth and family members to miss school or work on two separate days).
- Creating a single, comprehensive case plan, identifying services to meet the needs of the youth and family and adequately addressing child safety and child/community safety/risk issues.
- Ensuring that the assessment and case plan developed as part of this process is shared with and used in all courts.

The two court models and the additional pre-court coordination measures discussed above can reduce complexity and system redundancies for families, while at the same time ensuring a holistic view from the bench, providing consistency in oversight, facilitating
communication between agencies, improving case planning and holding agencies as well as service providers accountable.

**What Does the Practice Model Require Sites to Do?**

Jurisdictions implementing the practice model must:

- Require JJ caseworkers to make contact with the assigned CW social worker in new crossover cases within three to five days (this contact typically occurs pre-adjudication). Note that if the caseworker and social worker remain the same in this phase of the case as in the intake and charging stage, then these workers will just maintain their ongoing contact and continue working together.
- Ensure that both workers are communicating and sharing in case planning from the onset.
- Require the two workers to also begin to engage the family promptly so they are clear about the distinction between the agencies and workers.
- Take concrete steps to increase pre-court coordination and identify and implement other strategies for consolidated court processing, preferably using a dedicated court docket or one judge/one family model.

**Joint Assessment Process and Coordinated Case Planning**

The practice model calls for bringing information together across systems and using interagency discussions of this shared information to develop a coordinated plan for the youth and his/her family or caregiver. This includes using a joint assessment process and coordinated case planning for crossover youth. Conducting assessments for and providing appropriate levels of supervision and treatment to crossover youths is particularly challenging, because it requires coordination, at a minimum, and collaboration, ideally, across the dependency and delinquency court systems (Nash & Bilchik, 2009). While there is a growing amount of literature that documents the need to integrate treatment and accountability to successfully reduce recidivism, there is little evidence that such integration is occurring across systems (Brezina, 1998; Halemba & Lord, 2005; McMackin & Fulwiler, 2001; Pumariega et al., 1999).

For a crossover youth, the traditional method of having individual agencies conduct assessments could easily involve six different systems: child welfare, juvenile justice, education, mental health, substance abuse and medical. These systems rarely work with one another to coordinate assessments and may not consider the viewpoints of youth and their parent or caregiver. As a result, a youth and family may have multiple case plans that either conflict with one another, duplicate services or contain expectations that are unattainable. A joint assessment process seeks to improve upon this method by coordinating assessments in an effort to increase the validity of the information collected,
and decrease inconvenience to youth and their families or caregivers. This may involve the use of one tool that serves the needs of all agencies, or the use of multiple tools from which the recommendations are discussed across agencies and compiled into one case plan. To the extent possible, the youth’s and parents’ or caregivers’ perspectives should be central to the assessment process.\(^5\) A case plan collectively informed by all these perspectives should then be used as a basis for coordinated case supervision post-Disposition.

A joint assessment process involves systems coordinating multiple assessment tools and sharing information across agencies. Whenever possible, these assessments should utilize standardized tools and avoid duplication. The agencies must understand each other’s assessment tools and processes. The inventory of assessment tools and services developed during preparations around implementation of Phase I of the practice model is used to inform changes to the jurisdiction’s assessment practices. After the assessment tools have been used, agencies must share information gathered and use it in their planning. This process must include, at a minimum, viewpoints of the youth, his/her parents or caregivers, a juvenile justice representative, a child welfare representative, an educational representative and a behavioral health representative (note that any additional relevant parties should also be included in this discussion). Ideally this discussion will result in one case plan being developed and used by all agencies and in all courts related to the case. If that is not possible, separate case plans can be created but they must mirror each other in any areas not unique to each individual system and include consistent recommendations and goals.

In conducting a joint assessment process, it is important for agencies to document and describe family dynamics and interactions, youth risks and strengths, academic status and performance and youth well-being. The focus of a joint assessment process is to identify and understand the safety threats and risks facing the youth as well as contributing factors, such as family history. Safety threats and risks may include domestic violence, substance abuse, mental health issues and chronic health problems. To this end, a strong joint family assessment process requires engaging the family and youth in an extended discussion about family history, patterns and dynamics that may have contributed to the present circumstances. This assessment process is the foundation of effective case planning. It contributes to key decisions regarding steps to be taken for services, resources to be used and outcomes achieved. It is recommended that the joint assessment process begin as early as possible to inform all decisions being made in the case. At a minimum it should be conducted after fact finding (adjudication) and prior to disposition.

\(^5\) Including the youth’s voice in assessments pre-adjudication can be difficult given due process and confidentiality concerns related to the juvenile justice court process. Engaging public defenders in the development of a joint assessment process can help identify ways to include the youth’s voice as early as possible without putting him/her at risk for self-incrimination.
The Multi-Disciplinary Nature of the Joint Assessment Process
The joint assessment process includes compiling information from as many available sources as possible, including consideration of mental health, substance use, and educational needs. Ensuring that the joint assessment process involves all of these parties increases the likelihood that all agencies have the same information and are collaboratively planning for services.

Sharing information with judges from a multi-disciplinary joint assessment process arguably aids judges in making informed determinations at the time of case disposition, thereby improving the chances for rehabilitation and reduced levels of recidivism. Consequently, jurisdictions may have a greater opportunity to prevent youth from penetrating the delinquency system at all or further than necessary to provide for public safety.

What Does the Practice Model Require Sites to Do?
Jurisdictions implementing the practice model must:

- Develop a joint assessment process that includes the following aspects of a youth and family’s life:
  - Review of behavior patterns over time
  - Examination of family strengths and protective factors to identify resources that can support the family’s ability to meet its needs and better parent and protect their children
  - Assessment of the overall needs of the youth and family that affect the safety, permanency and well-being of children and youth in the family
  - Consideration of all possible contributing factors to family dynamics, such as domestic violence, substance abuse, mental health, chronic health problems and poverty
  - Assessment of criminogenic factors, including peer group, school performance, family dynamics, use of substances, self-regulation and history of delinquent behaviors
  - Assessment of educational, behavioral and medical needs, as well as any other needs specific to an individual youth and family

Coordinated Case Planning
Jurisdictions implementing the practice model use their joint assessment process to inform coordinated case planning, enhancing outcomes for dually involved youth. A coordinated case plan is developed and used collectively by all agencies as well as the youth and their parents or caregivers to guide and document progress. In particular, a coordinated case plan should be focused on change that reduces safety threats, reduces risks, increases
parental protective capacities and increases the youth’s decision-making (around school, peers, choices to offend) and self-monitoring behavior.

What Does the Practice Model Require Sites to Do?

Jurisdictions implementing the practice model must:

- Develop coordinated case plans that are directly related to a joint assessment process and related to the goals, interventions and services that comprise each case plan.
  - Case plans should provide the basis for understanding when the work is completed so that child welfare or juvenile justice involvement is no longer required. Conversely, they should provide the basis for deciding that sufficient change has not occurred so that further intervention may be justified and pursued.
  - Case plans should be focused, time limited, behaviorally specific, attainable, relevant, understandable to all and agreed to by the parent(s).
  - Interventions in the plan should be precisely focused on helping parents and/or caregivers improve their parenting skills and on helping the youth change his/her risk taking behaviors.
  - Agreement in the plan should be defined by the parent’s and youth’s true understanding of the areas for change, a demonstrated readiness for change and an understanding of the behavioral changes needed and how the interventions will help accomplish this change.

Family Involvement in the Coordinated Case Planning Process

When families and youth are involved in an assessment process, it is much easier to put that information to use in creating a case plan that really addresses what the family and youth need for the youth to remain living with their family—while jeopardizing neither community nor youth safety.

Family engagement is a requirement throughout all phases of practice model implementation. Families should help guide the process of determining what interventions could best address their situations within the context of a shared commitment to making necessary changes. This process should be transparent, with the CW social worker and JJ case worker team sharing the tools and information being used to build the service plan.

Evidence-Based Services to Include in the Case Plan

Because the practice model is built on research and implementation of evidence-based practices and services, jurisdictions need to make a concerted effort to fund and fully
support the implementation of services that have proven to be effective evidence-based, promising or emerging in serving crossover youth.

Jurisdictions should not exclude the use of local programs without rigorous evaluations, but they should prioritize the use of programs or types of programming consistent with “what works.” Simultaneously, they should strongly encourage local programs to demonstrate their effectiveness by tracking outcomes.

Placement of Crossover Youth
Research has shown that placement in group care is a contributing factor to youth crossing over from child welfare to juvenile justice, and that such placement is generally not the most effective form of intervention for crossover youth. There is virtually no evidence to support the efficacy of group care and some research has described these settings as unsafe, unable to support healthy development, unstable and expensive (Barth, 2002) or as creating barriers between children and families seeing one another (Wulczyn, Hislop, & Goerge, 2000). Research has shown that children in group care report seeing family members significantly less often as compared with children in kinship care and are less likely to experience reunification with biological caregivers (Wulczyn, Hislop, and Goerge, 2000).

One reason that congregate care in particular may increase the likelihood of delinquency is that it exposes youth to other high-risk adolescents, a process commonly referred to as peer contagion. Dishion and Poulin (1999) suggest that peer contagion refers to the exposure and socialization processes (e.g., social learning) that are likely to shape and support deviant attitudes and behaviors in group care settings. The authors argue that serving youth in congregated residential settings, and specifically the prolonged exposure to high-risk peers, has the unintended effect of exacerbating deviance via social relationships. Not all congregate care is the same, however. The following characteristics of congregate care placements may be driving the relationship with delinquency (Ryan, et al., 2008):

- the length of time spent in this type of care and the reason for placement in congregate care
- the use of inexperienced and untrained staff
- the absence of clear de-escalation techniques and procedures (i.e., relying on law enforcement to resolve situations)
- the absence of appropriate treatment modalities
- high concentrations of high-risk youth in one facility (e.g., the peer contagion effect as indicated above)
the absence of behavioral modification techniques appropriate for the population served by the facility

What Does the Practice Model Require Sites to Do?

Jurisdictions implementing the practice model must make a commitment to understand their use of group care and its usage (including residential and institutional) for crossover youth. Jurisdictions must implement relevant evidence-based, promising, and emerging best practices to achieve a reduction in group care and other practice model goals. Evidence-based services relevant to crossover youth and the practice model include (in alphabetical order):

- Cognitive Behavioral Therapy
- Family Preservation Services
- Functional Family Parole
- Functional Family Therapy
- Kinship Care
- Motivational Interviewing
- Multi-Systemic Therapy
- Treatment Foster Care
- Wraparound Services

Jurisdictions should consult the assessment and services inventory developed in Phase I to determine what existing resources are available and should consider seeking funding for new services or prioritizing crossover youth.

The practice model also requires that the JJ case worker and CW social worker attempt to engage the family as soon as the youth is identified as being known to both systems, and again at later stages of the case, in order to identify kin willing to care for the youth. Experience has taught us that, as family members become more comfortable with the system and more trusting, the team becomes more aligned with them in safely caring for their children and families are more willing to share names of kin who might be willing to assist in taking care of their child.

Use of Group Care

There is a significant amount of research that supports the placement of youth in family rather than group care settings. However, it is clear that there are times when the use of group care will occur. When such a placement occurs it should be time-limited. Jurisdictions should put in place the following practices to decrease the likelihood that a young person crosses over for issues specifically related to placement setting:
Sharing information with the group home staff about the youth’s history, background and needs while trying to develop as holistic of a picture of the youth as possible
- Adequately training group home staff in therapeutic and behavioral techniques
- Consistently and frequently engaging youth’s family and/or kin in the therapeutic process
- Maintaining school placement stability even when there is movement in placement setting
- Appropriately engaging youth in pro-social activities outside of the home
- Instituting policies that ensure CW social workers or JJ case workers—not law enforcement—are called for “normal teenage behavioral issues”
- Ensuring group home providers are part of the treatment planning team
- Ensuring the CW social worker and JJ case worker maintain regular weekly contact with the provider regarding the youth’s status

**Summary of Key Steps in Phase II**

Jurisdictions implementing Phase II of the practice model should:

- Implement one of the two preferred court models described above and, take significant steps to increase pre-court coordination.
- Require the newly assigned JJ case worker to immediately make contact with the assigned CW social worker upon notification of a new crossover youth case; this contact should be made within three to five days.
- Use a cross-systems inventory of all assessment tools to determine appropriate assessments to be conducted.
- Complete a comprehensive joint assessment process.
- Create an integrated case plan based on the joint assessment process.
- Ensure that families help guide the process of determining what interventions could best address their situation.
- Make a concerted effort to identify and fund evidence-based services and best practices that are found to improve outcomes for crossover youth.
- Make a commitment to reduce use of group care (including residential and institutional) for crossover youth.
- Identify kin willing to serve as caregivers or a support in some capacity.
PHASE III

Coordinated Case Management and Ongoing Assessment of Progress

In Phase II of the practice model, the child welfare and juvenile justice agency use a joint assessment process to develop recommendations and ultimately a coordinated or aligned case plan leading up to disposition. In Phase III, disposition has occurred and the agencies work to implement the case plan through coordinated case management/supervision, and ongoing assessment of the youth and family’s progress and making adjustments to the plan as necessary.

Methods of coordinated case supervision discussed in the research include: specialized case management and supervision units, multi-disciplinary team case management, special qualifications and/or training for case managers and the use of child protective services liaisons and/or probation liaisons (Siegel and Lord 2004, see also Petro, 2006; Petro, 2007; Halemba & Lord, 2005). Each of these approaches stresses the need to formally link case oversight to staff in both the child welfare and juvenile justice systems. Combining these approaches with collaborative funding agreements (e.g., blended, braided or pooled funding) increases access to the comprehensive services crossover youth need. (Siegel & Lord, 2004; Petro, 2006; Petro, 2007; Halemba & Lord, 2005).

Coordinated case supervision is often challenging because it requires several elements to be in place to be successful. Before coordinated case supervision is possible, for instance, administrators must formally develop a memorandum of understanding that clearly outlines the roles and responsibilities of each agency, resolve issues around the confidentiality of information, and provide clear and equitable procedures for the mediation of conflict (Wiig & Tuell, 2004; Siegel & Lord, 2004). Also, once an agreement is in place, staff interested in working with crossover youth and building collaborative approaches must be selected for the initiative, and ongoing cross-training and support must be provided to increase staff knowledge of and ability to access services and placements across systems (Wiig & Tuell, 2004).

Coordinated case management is not limited to the child welfare and juvenile justice systems; additional partners must be sought and engaged in this process. For instance, the youth’s parents and/or caregivers, school, mental health treatment provider, substance abuse treatment provider and any other relevant party (e.g., connections to the community such as pastor or mentor), many of whom may have been involved in the assessment and case planning process, must actively participate in the implementation and supervision of the case plan. At a minimum, the CW social worker and JJ case worker should be “on the same page,” keeping each other informed and presenting a united front as well as a “united support system” to the youth and his/her family or caregiver.
Research findings on crossover youth have underscored the importance of coordinated oversight. In one study of Los Angeles youth, those with substance abuse issues and who were truant from school were twice as likely to commit a new offense as their counterparts. These results stress the need to prioritize school engagement for crossover youth and making sure appropriate treatment services are provided to the youth and his/her family. Coordinated case plans will fall short of their potential if they are not fully implemented and closely monitored. For crossover youth, this requires child welfare and juvenile justice to work closely with a youth’s social network, school, treatment provider and community-based program to ensure he/she is effectively connected to the appropriate levels of supervision and treatment.

A significant challenge facing coordinated case supervision is the CW social worker’s and JJ case worker’s ability to access appropriate services and placements for crossover youth. Even though there is no research related to the effectiveness of programs specifically designed for crossover youth, a large body of research currently identifies characteristics of effective programs as well as specific promising or evidence-based programs for child welfare, juvenile justice and behavioral health (Whitehead & Lab, 1989; Palmer, 1991; Lipsey, 1992; Leone, Quinn, & Osher, 2002; Hansen, Litzelman, Marsh, & Milspaw 2004; Howell, Kelly, Palmer, & Mangum, 2004; Huser, Cooney, Small, O’Conner, & Mather, 2009). However, jurisdictions should not exclude the use of local “home grown” programs that have shown to be effective with youth in their community.

To achieve the best possible oversight and coordination of crossover cases, jurisdictions implementing the practice model are highly encouraged to use dedicated units where crossover youth are assigned to specific CW social workers and JJ case workers who are trained on this population. Our experience has shown that this approach improves communication across agencies, facilitates cross-training, improves case planning and management and improves the court experience for the youth and family.

Whether or not a dedicated unit is used, the two agencies must ensure that in each case one agency is designated as primary point of contact for the family and that the agencies jointly determine who will be primarily responsible for different aspects of the case. Although the child welfare agency often serves as the primary point of contact for the family because they already have a relationship with the youth and family, this can change if warranted by the circumstances of the case. No matter which agency is the primary point of contact, however, both agencies are responsible for participating in the coordinated case management required by the practice model.

When the same child welfare and juvenile justice staff work together frequently, it can lead to more consistency in case handling, a better understanding of the others’ system and
practice, clearer expectations, more contact and hopefully better outcomes for youth. Other ways jurisdictions have facilitated information sharing and coordination of activities include co-locating the CW social worker and JJ case worker, special qualifications and/or training of case managers and designating a crossover liaison.

A crossover liaison is an agency staff member who helps with clarifying policies, language, etc.; accessing information from both systems for case planning; screening and following up on referrals; responding to emergency situations; and participating in multi-disciplinary team meetings for youth and families with higher risks and needs. The purpose of the liaison is to cross-train agencies on the roles and responsibilities of each agency to avoid duplication, clarify who must take the lead in different circumstances, coordinate and manage the implementation of policies and procedures from both agencies in crossover cases and provide advocacy in specific cases.

**Ongoing Assessment of Progress**

Ongoing assessment requires that those involved in serving the youth and family (including at a minimum the CW social worker, JJ case worker, placement provider, community-based providers, school personnel and kin) take an active role in determining the efficacy of the case plan and bringing any issues to the team for problem resolution. As part of the coordinated case supervision process, the CW social worker and JJ case worker must speak about each case at least once per month. The ongoing sharing of information is critical to ensuring that issues the youth and family are facing are afforded the attention they require.

Progress reviews involve talking with and observing the family, talking with other key case participants, and reviewing progress reports from service providers. The focus of the progress review is to determine if the behaviors that contributed to the youth and family being involved in the child welfare and juvenile justice system have changed to the point that safety concerns are ameliorated and/or the youth’s criminogenic needs associated with their risk to recidivate have been reduced. The frequency of formal gatherings to review progress is dependent upon case dynamics but should occur at least:

- Prior to court hearings
- When there is a significant change in family dynamics
- When there is a major change in youth status (e.g., arrest, change in placement, school misbehavior leading to suspension or expulsion, increased socialization with peers involved in illegal behaviors, substance abuse or, conversely, positive changes)
- When the youth or a family member requests a meeting
During these reviews, it is critical to spend time evaluating whether the services in place are achieving the desired results because intervention needs may change as families make progress or face setbacks. New information can provide new insight into existing needs and could impact the kinds of services and interventions offered within the case plan. Family Team Meetings are an effective vehicle for progress reviews.

**What Does the Practice Model Require Sites to Do?**

- Jurisdictions implementing the practice model must:
  - Require the CW social worker and JJ case worker to make a determination as to which agency should be the main point of contact for the family, and determine who will have primary responsibility for other tasks. (As discussed above, however, no matter which agency is the primary point of contact both agencies are responsible for participating in the coordinated case management required by the practice model).
  - Create or use dedicated units of JJ and CW case workers/social workers for crossover youth; if this is not possible, use other methods (e.g., those described above such as co-locating staff, designating a crossover liaison) to increase coordination of case supervision.
  - Require the CW social worker and JJ case worker to speak regularly about the case (as often as the case requires) and at a minimum once per month.
  - Hold formal gatherings:
    - Prior to court hearings
    - When there is a significant change in family dynamics
    - When there is a major change in youth status
    - At the request of the youth or a family member

**Planning for Youth Permanency, Transition and Case Closure**

As part of successful case management, both CW social workers and JJ case workers must pay close attention to achieving youth permanency and effectively transitioning youth upon case closure. While these are important issues for all youth in child welfare and juvenile justice, they are particularly relevant for crossover youth, who often lose family and community connections and support as a result of their interactions with both systems.

**Why Youth Need Permanency**

All children and youth require security, love, acceptance, connectedness, a moral/spiritual framework and life-long intimate relationships for their healthy growth and development. They also need stable families and supportive communities to develop meaningful relationships, positive school achievement, and success in the adult world of family and
work. Sadly, child welfare and juvenile justice systems across the country have not successfully aided youth in meeting these permanency needs.

Too many youth languish in out-of-home care with no permanent and legal connections to adults who care about them. Often these youth “age out” of the system with no adult who is committed to being a support for them. Research has painted a bleak picture of how youth fare after system involvement, which underscores the importance of helping these youth develop and sustain permanent connections to caring adults. It underscores the importance of stabilizing permanency for crossover youth and providing them with the appropriate services that will increase their success after their cases close in both the child welfare and juvenile justice systems. Unfortunately, there is currently no research that examines “what works” for crossover youth in this area; however, there is a growing amount of research related to effective programs and practices for juvenile justice reentry (Altschuler & Armstrong, 1994; Zimmerman, Hendrix, Moeser, & Roush, 2004; Harris, 2006; Altschuler, 2008; Gagnon & Richards, 2008; Altschuler, Stangler, Berkley, & Burton, 2009) and to achieving permanency for youth in child welfare (Freundlich, 2009; Frey, 2009; Neff, 2000). Jurisdictions implementing the practice model should consider this broader literature as they develop their own approaches to improving long-term outcomes for crossover youth.

**Permanency Planning**

Permanency planning begins at the onset of serving every youth and family. Most families (depending upon the circumstances) are afforded the opportunity to be reunified as a result of their work with the system. All of the practices embedded within the practice model aid in the goal of achieving full reunification. Engaging families from the onset of a case with services and building a trustworthy relationship helps families achieve the goals of reunification and relinquishment from the juvenile justice and child welfare systems. Every professional working within these systems must make the principles and practices highlighted in this model a standard for work to increase the family’s ability to be self-sufficient, independent of any system of care and to decrease delinquent behavior.

Furthermore, at some point in time all the young people we serve will leave the system. They will need connections to loving and supportive adults. Therefore, we need to be diligent in our efforts to ensure they have meaningful permanent relationships. This includes assisting youth in connecting with their biological families and developing and maintaining healthy relationships. No youth should exit care without knowing the whereabouts of their parents, siblings and all other relatives of whom we are aware – and the support they need to rebuild or maintain those connections.
What Does the Practice Model Require Sites to Do?

Jurisdictions implementing the practice model must begin addressing permanency issues from the onset of the case. Permanency should not be an afterthought but a forethought in working with crossover youth. We know that when systems function at their best youth are able to matriculate quickly and return to safe homes and communities.

Concurrent Planning

Concurrent planning is one widely used way to ensure permanency in the lives of crossover youth. Concurrent planning involves a structured approach to moving youth more quickly from the uncertainty of out-of-home care to the stability and security of a permanent family. Concurrent planning serves as a backup to the initial permanency goal. It involves the following steps:

- Seeking to identify, early in the process of serving the youth and family, supportive individuals who may be willing to support the youth regardless of a plan to reunify or not
- Ongoing evaluation of whether the youth will be able to return home following placement when, even if at the time of placement, it seemed clear that the youth could not return home
- Approaching kin previously identified to assess their interest in caring for the youth
- Conducting background checks and home studies to ensure that placements are safe and provide structure

Concurrent planning seeks to ensure that youth do not leave the system without caring adults who are committed to them. It is consistent with a family-centered and community-based service orientation, one rooted in the belief that children and youth need stable families and supportive communities for their healthy growth and development (National Resource Center for Permanency Planning, 1998). Other permanency options or strategies that are employed by the juvenile justice and child welfare system include:

- Another permanent planned living arrangement
- Planning for self-sufficiency (such as through independent living services and access to educational opportunities)
- Permanency pacts, permanency roundtables and judicial benchmark conferences

Another Permanent Planned Living Arrangement

Because there are times when the birth family is unable to care for the youth and no other permanent option has been identified, youth may end up with another permanent planned living arrangement (APPLA). "Permanent" means enduring, lasting, or stable; an environment that is by design temporary, such as a group care environment, is not
intended to be permanent and is not an acceptable permanent option for a youth. A planned alternative permanent placement has, by definition, the following characteristics:

- Permanent physical placement of the youth
- Quality of support and guidance
- Supervision and adult support of the youth
- Nurturing and teaching
- Provision of an array of independent living supports

The practice model requires that youth be reunified with their families and if that’s not possible or best for the child in a specific case, another permanent option such as adoption or legal guardianship is preferred. Practice model sites should be working to minimize use of APPLA as much as possible.

**Self-Sufficiency**

While independent living services are not to be confused with a permanent plan, they are helpful in assisting youth transition to adulthood. Throughout the case (opening to closure) independent living services are embedded in the service delivery system. While there is no substitute for a family who supports the transition process, jurisdictions involved in the implementation of the practice model must be committed to ensuring that youth who leave the system (regardless of where they are going to live) are afforded education, support and skill development so that they are as prepared as possible to transition successfully to adulthood. A strong array of independent living services includes (but is not limited to):

- Vocational assessment and employment support
- Household maintenance
- Budgeting
- College and higher education planning
- Understanding how to navigate the health system
- Shopping and meal preparation
- Recreation
- Making healthy decisions and life choices

**Permanency Facts**

Youth transitioning from care without a family are often unsure whom they can count on for ongoing support. Many of their significant relationships with adults have been based on professional connections that will terminate once the transition from care is completed. It is critical to the youth’s success to identify those adults who will continue to provide various supports through and beyond their transition from care.
FosterClub.org is an organization that was developed by youth who had been in the foster care system and is designed to benefit children in care or aging out of care. One of their most powerful suggestions to ensure you have permanent adult connections is the development of permanency pacts for children leaving care without a permanent, legal family. A permanency pact is a pledge by a supportive adult to provide specific supports to a young person in care, with the goal of establishing a lifelong, kin-like relationship. A permanency pact meeting should be held as soon as it is clear that the youth does not have an adult who is involved with them, cares about them, or is committed to caring for them. The sooner a permanency pact meeting is held, the better chance the youth has of ensuring some form of adult connection as they transition to adulthood.

A permanency pact creates a formalized, facilitated process to connect youth in out-of-home care with a supportive adult. The process of bringing the supportive adult together with the youth and developing "their" permanency pact has proven successful in clarifying the relationship and identifying mutual expectations. Additionally, a committed, caring adult may provide a lifeline for a youth, particularly those who are preparing to transition from out-of-home care to life on their own.

While permanency pacts are not an evidence-based or even a research-based practice, they do represent a promising practice. Specifically, they represent a way to help youth transitioning with no consistent adult connections to develop such connections. As such, jurisdictions involved in the implementation of the practice model are expected to implement permanency pacts as appropriate.

Permanency Roundtables
Permanency roundtables are a type of meeting structure utilized for older youth to create a personalized permanency plan and give them an opportunity to bring people important in their life together and start planning for their future and their concrete needs (e.g., housing, employment). Traditionally the permanency roundtable is only for professionals working on the case, along with other invited professionals, such as permanency consultants. CYPM jurisdictions may choose to hold an initial meeting for the agency staff and other professionals and a subsequent one that includes the youth and family to better fulfill the goals of the practice model. In either case the individuals involved with the permanency roundtable must, well before the youth “ages out” of foster care, set goals that are achievable, and follow up to make sure the plan for the young person is being worked towards. Additional information about permanency roundtables is available at: [http://www.casey.org/Resources/Initiatives/PermanencyRoundtables/](http://www.casey.org/Resources/Initiatives/PermanencyRoundtables/).
Benchmarks

Another emerging practice that may help achieve permanency for crossover youth is judicial benchmarking. Several courts use this strategy, although the specifics vary. In New Orleans’ Model Court, one of the pioneers of the practice, judges hold regular meetings with adolescents in the foster care system to discuss the youths’ plans for the future, their relationships with caring adults and their preparation for the transition to adulthood. Participating parties include a child welfare agency staff member, the Benchmark Conference Coordinator and a staff member with the Department of Children and Family Services to work with the youth outside of and in preparation for the benchmark meetings. Ideally, as part of the court’s Benchmark Conference Program a supportive adult (the “Child Identified Advocate”) is found and signs a permanency pact. Learn more about the New Orleans’ Model Court approach at: http://www.ncjfcj.org/new-orleans-mentor-model-court.

Summary of Key Steps in Phase III

Jurisdictions implementing Phase III of the practice model must ensure that their juvenile justice and child welfare systems work together to:

- Begin planning for permanency at the outset of a case
- Engage in concurrent planning throughout the life of the case
- Embed learning opportunities for independent life skills throughout service delivery in all aspects of the case
- Implement permanency pacts
- Find ways to keep youth connected to their families in safe, positive ways; ensuring youth know their medical histories, where they have come from and who their family members are
- Seriously consider using other emerging practice that may help achieve permanency, such as benchmarking and permanency roundtables

CONCLUSION

A growing body of research suggests the need for multi-system collaboration in comprehensively addressing the complex and numerous risks and needs of crossover youth. The Crossover Youth Practice Model is a strength-based approach helping jurisdictions all over the country thoughtfully and meaningfully align their systems of care to benefit at-risk youth and their families. The practice model does so in a way that supports jurisdictional efforts to coordinate case management, jointly assess clients, coordinate case plans and case supervision as well as improve court processes. Without these integrated and comprehensive efforts, crossover youth are less likely to receive
needed services, placements and supports that improve their short- and long-term outcomes.

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THE CROSSOVER YOUTH PRACTICE MODEL (CYPM)


