



**Department of Juvenile Justice, Division of Operations  
Standard Operating Procedure for Institutions**

<b>SOP VOL IV – 4.4-6</b>	<b>Statutory Authority:</b> §§66-13, 66-18, 66-19, and 16-20 of the <u>Code of Virginia</u>
<b>Subject:</b>  <b>Mental Health Treatment Plans</b>	<b>Regulations:</b> N/A
	<b>ACA #</b> 4-JCF-4D-05

**6-1.0 PURPOSE**

To ensure that mental health treatment plans are developed for all residents in the juvenile correctional centers (JCCs) being treated on an ongoing basis by a qualified mental health professional (QMHP).

**6-2.0 SCOPE**

This procedure applies to all JCC employees and staff assigned to the JCCs by other units, agencies, or departments.

**6-3.0 DEFINITIONS**

*Individual Therapy* – Psychotherapy provided to a resident on an individual and ongoing basis at least every thirty (30) days.

*PRN Status* – Therapist sees resident for psychotherapy on an as-needed basis.

*Mental Status Check* – An assessment conducted by a QMHP of the resident’s current psychological functioning.

*Qualified Mental Health Professional (QMHP)* – A physician, psychiatrist, psychologist, social worker, nurse, or other advanced degree professional that is designated as a QMHP by the DJJ Behavioral Services Unit (BSU). These professionals will be qualified by virtue of appropriate training and experience to render mental health services within their discipline. In collaboration with the DJJ Health Services Division, BSU will maintain a database of QMHPs within DJJ institutions.

*Medication Monitoring* – The facilitation of psychopharmacological education, medication compliance, and behavioral adjustment by a BSU staff member with a resident.

*MHSTP Monitoring* – Resident is being monitored and receiving treatment according to meeting criteria for a mental health services transition plan (MHSTP).

**6-4.0 PROCEDURE**

**6-4.1 New Admission Treatment Plan**

1. All residents will receive an initial psychological evaluation (SOP VOL IV – 4.4-5) by a QMHP upon intake that will include treatment recommendations.
2. Upon permanent facility assignment or transfer, each resident will receive a mental health screening (SOP VOL IV – 4.4-2) by a QMHP to include a treatment plan that addresses programmatic and individual treatment needs.
3. Upon entry into a specialized treatment programs, residents shall receive program-specific treatment plans as indicated according to the appropriate program manual(s).
4. Upon resident assignment to a primary therapist, the therapist will meet with the resident within 30 days and determine level of treatment and/or monitoring services required. If the resident is assessed as being in need of psychotherapy, a treatment plan addendum will be developed. The treatment plan shall include:
  - a. Suicide History;
  - b. Whether resident meets criteria for a MHSTP and the associated diagnoses;
  - c. Target problems;
  - d. Client resiliencies;
  - e. Treatment goals;
  - f. Interventions;
  - g. Primary therapist's signature;
  - h. Resident's Signature
5. Upon completion, the treatment plan (Attachment 1) will be placed in the Behavioral Health Record (BHR).

**6-4.2 Treatment Plan Reviews**

1. Treatment plans are to be updated by the primary therapist as clinically indicated.
2. Treatment plans shall be revised upon the emergence significant new symptoms or upon a placement on suicide precautions for the first time.
3. Treatment plans shall be reviewed following any placement on precautions lasting longer than 24 hours. If the plan is not updated, the clinician shall document the review without need of changes in a case management note. .

**6-5.0 RESPONSIBILITY**

The Treatment Director shall have primary responsibility for ensuring implementation and compliance with this operating procedure.

**6-6.0 INTERPRETATION**

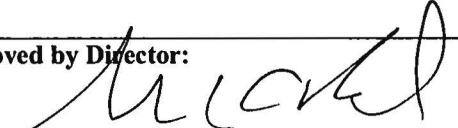
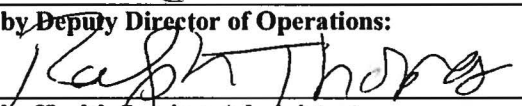

The Health Service Administrator shall be responsible for interpreting and granting any exceptions to this operating procedure.

**6-7.0 CONFIDENTIALITY**

All procedures and bulletins are DJJ property and shall only be used for legitimate business purposes. Any redistribution of the documents or information contained in the procedures or bulletins shall be in accordance with applicable state and federal statutes and regulations and all other DJJ procedures. Any unauthorized use or distribution may result in disciplinary and/or criminal action, as appropriate and applicable.

**6-8.0 REVIEW DATE**

This procedure shall remain in effect until rescinded or otherwise modified by the appropriate authority.

Approved by Director: 	Date: 3/12/15
Approved by Deputy Director of Operations: 	Date: 2-25-15
Approved by Health Services Administrator: 	Date: 2/24/15
Effective Date: March 25, 2015	Office of Primary Responsibility: Deputy Director of Operations, Health Services Administrator The BSU Treatment Director Local BSU Treatment Directors – Juvenile Correctional Centers
Supersedes: N/A	Forms: None.