

April 17, 2003

TO: All Participants in the Los Angeles County Juvenile Justice System

FROM: Michael Nash, Presiding Judge  
Juvenile Court

**SUBJECT: W.I.C. 241.1 PROTOCOL - ROLE OF DEPARTMENT OF MENTAL HEALTH (DMH)**

This memorandum is intended to supersede all previous memoranda on the role of DMH in the WIC 241.1 process and is effective immediately.

DMH can play an important role in the WIC 241.1 process. Its role should be to present information regarding the mental health services received by a youth, within the parameters of this policy, to the representatives of the Probation Department (Probation) and the Department of Children and Family Services (DCFS) who are doing a joint assessment to recommend to the Juvenile Court whether a youth should ultimately be declared to WIC 300 status or WIC 602 status or remain under WIC 300 status or WIC 602 status. With the authorization of the youth and/or the youth's delinquency or dependency attorney, the role of DMH may be expanded to provide additional information or recommendations as noted in Sections 4e and 5 of this policy.

When a joint assessment pursuant to WIC 241.1 is ordered, the following procedures shall occur with respect to DMH.

1. DCFS or Probation will refer the matter to the DMH Juvenile Court Mental Health Services (JCMHS) using Attachment 1.
2. JCMHS will screen the referral by obtaining a Management Information System (MIS) printout to determine if there has been any previous involvement with DMH.
  - a. If no information or involvement exists or the information is inconsequential, the role of DMH will end unless a specific request for

assistance is made by Probation and/or DCFS, or the youth's delinquency attorney, if in Delinquency Court, or the youth's dependency attorney, if in Dependency Court. DMH will report the lack of or inconsequential nature of the information to the preparer of the 241.1 assessment.

3. If the DMH investigation continues, a JCMHS clinician will be assigned to the case:
  - a. The JCMHS clinician will preferably proceed in the following order:
    - (1) talk to the probation officer and/or social worker to determine their specific concerns, or if they have concerns. No privileged or confidential information shall be divulged by the JCMHS clinician during this discussion.
    - (2) review the juvenile court files and any mental health records contained therein and/or any other mental health records available to them
    - (3) talk to the youth's dependency and delinquency attorneys to inform them of Probation or DCFS concerns and to obtain their perspective as to those concerns
  
4. Except as provided in Section 5, the JCMHS clinician will send a report to the probation officer and social worker who are preparing the assessment, and to the minor's delinquency and dependency attorneys. The report from the JCMHS clinician shall contain the following information:
  - a. whether the youth is currently in treatment
  - b. the provider(s) of the treatment
  - c. whether the dependency file contains information regarding approved psychotropic medications; if so, what medications and the stated reason for the medication
  - d. whether the youth previously received treatment, the treatment provider(s), and the dates of the treatment.
  - e. at no time should the report include other details of therapy or any statements made by the youth in therapy unless the youth's dependency attorney, if the youth has one, or the youth if the youth is found by the court to be of sufficient age and maturity, has authorized the release of this information after consulting with the youth's delinquency attorney. If the youth is not under 300 status, either the youth, if found by the court to be of sufficient age and maturity, or the youth's delinquency attorney may authorize the release of this information.

5. \*If authorized by the youth's delinquency attorney in pending 602 proceedings or the youth's dependency attorney in pending 300 proceedings, the JCMHS clinician may talk to the youth and/or conduct further investigation in order to:

- a. make recommendations for future treatment
- b. assess the youth's amenability to future treatment
- c. describe how treatment may best be obtained in light of (a) and (b) above
- d. assess whether other factors exist which suggest either WIC 300 or WIC 602 status may be harmful to the youth.

- If the above recommendations cannot be made without further evaluation, the clinician's report will so state.

6. The following conditions shall apply when talking to a youth:

- a. The youth's Delinquency Court attorney may be present if he/she desires, and/or another person such as a parent or caretaker may be present if requested by the attorney.
- b. The JCMHS clinician must identify himself/herself, state that he/she is there to obtain information for the court hearing to decide the youth's court status and identify the youth's needs. Further the youth must be told that he/she does not have to participate in the interview, can discontinue the interview at any time, and that anything that is said by the youth might be reported to the court.

7. Following the interviews, the JCMHS clinician will provide the information in No. 4 and No. 5 above to Probation and/or DCFS for inclusion in the joint assessment.

\*In all cases the delinquency or dependency attorneys should consult with their dependency or delinquency counterpart before authorizing JCMHS to proceed.

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Attachment