



**Deschutes County Juvenile Community Justice**  
**Community Partner CHART / FFT Referral Criteria**

**PART 1: REFERRAL CRITERIA**

**YES - REFER:**

1. Youth with individual risk factors in at least two (2) of the following life domains. **Must be confirmed by completing a JCP Quick Screen/Assessment (v2006.1):**

- School
- Peer and Other Relationships
- Behavior
- Family Functioning
- Substance Use
- Attitudes, Values and Beliefs, Mental Health.

*Examples of risk factors include:*

<ul style="list-style-type: none"> <li>• Substance use beginning at 13 or younger</li> <li>• Substance use beyond experimental use</li> <li>• Current substance use causing disturbance or conflict</li> <li>• Anti-social thinking, attitudes, beliefs</li> <li>• Friends with anti-social thinking, attitudes, beliefs</li> <li>• Academic failure and/or chronic truancy</li> </ul>	<ul style="list-style-type: none"> <li>• Has at least one instance of running away / being kicked out</li> <li>• Family trauma / disruption (death, divorce, frequent moves, job loss etc) in last 12 months</li> <li>• Poor family supervision History of Physical Abuse or Domestic Violence</li> <li>• History of Sexual Abuse</li> <li>• History of Emotional Abuse or Neglect</li> </ul>
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2. Youth with the following stabilized DSM IV categories are eligible: Conduct Disorder, Oppositional Defiant Disorder, Mood Disorder, Dual Diagnosis Mood Disorders and Substance Abuse, Substance Dependence or Substance Abuse. Most intelligence quotient scores are eligible.

**NO – CANNOT REFER:**

1. Youth without risk factors in at least two (2) life domains.
2. Youth currently pending out of home placement.
3. Youth currently having success with another therapy model in the community (private counseling, intensive out-patient, etc).
4. Youth without a permanent family option or possibility.



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### PART TWO: REFERRAL PROCESS

#### *Referring Agency / Caseworker:*

**Step 1:** Identify youth through agency or personal assessment. Confirm risk eligibility by completing JCP Risk Screen v.2006.1 (September 2008 date). Complete and fax or deliver Referral Cover Sheet and JCP Assessment to Ken Mathers at DCJCJ.

**Step 2:** Contact family and youth with intent to refer for FFT services. Give family the FFT overview information pamphlet.

**Step 3:** Upon receipt of Discharge Summary, FFT Therapist completes Post FFT JCP Risk Screen for youth and fax or deliver to Ken Mathers at DCJCJ.

#### *DCJCJ Therapist:*

**Step 1:** Confirm intake within 7 days of referral. If intake does not occur (family refuses service, does not show, referral inappropriate, etc.) therapist will call caseworker within 24 working hours to discuss.

**Step 2:** Therapy commences. The therapist communicates weekly (by phone, e-mail or in person) with caseworker about attendance and provides monthly written updates. Therapist attends treatment related meetings as needed.

**Step 3:** Therapist coordinates with caseworker in Generalization Phase when referral to additional service is recommended or when youth is in need of additional resource.

**Step 4:** At completion of services (successful or otherwise) therapist informs caseworker and provides written Discharge Summary to Ken Mathers and caseworker within 7 days.

**Step 5:** Booster sessions are available. Agency can request booster sessions by contacting Ken Mathers.

Questions? Call Ken Mathers (541) 385-1738 or email [kennm@deschutes.org](mailto:kennm@deschutes.org)