

**Cook County Government Behavioral Health Services
Semi-Annual Report
Dec. 1, 2024 through May 31, 2025**

Name of Department: Circuit Court of Cook County, Juvenile Probation Department
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Behavioral Health: Fee for Service Providers

a. Data on the population served, including a breakdown of where patients of the program reside in Cook County and the total year-to-date number of patients served;

The Circuit Court's Juvenile Probation and Court Services Department (JPD) coordinates services for and supervises youth who have been diverted by the State's Attorney, offered pre-trial services, or sentenced to probation by order of the court. Many of the department's youth are referred to behavioral health services by the judges either during the pre-trial stage of court involvement or at sentencing, after social investigation interviews are conducted and social histories and the JRA (Juvenile Risk Assessment) are completed by probation officers. However, youth involved with JPD may also be referred to counseling directly by a probation officer, if a need is identified after sentencing.

JPD's behavioral health services are provided through community-based vendors. Ideally, court orders are not needed to address behavioral health services due to the fact that the change process takes time and the readiness to address behavioral health concerns needs to be considered. At any point during the time the youth is active with the department, referrals can be made to community-based programs. Individual, group, and family counseling are provided as follows:

- Community-based therapy through the Juvenile Justice Care Coordination program
- Community-based assessment and behavioral health services for youth with problematic sexual behaviors (PSB) through Infant Welfare Society (IWS) for Spanish-speaking youth and Youth Outreach Services (YOS)
- Community-based mentoring and behavioral health services through other providers, including NYAP's CANEI program.
- Community-based assessment and behavioral health services through private practice clinicians for youth with problematic sexual behavior

The referral pathway is influenced by provider capacity, the youth's home location, language, and other considerations. The length of services generally is six to nine months during the probation supervision period.

For the reporting period ending in **May of 2025** there were **100** youth receiving behavioral health services via fee for service vendors. Services included community-based therapy to 30 youth provided by CANEI and 35 youth engaged with Infant Welfare Society. There were 20 case closures with Infant Welfare Society and 13 case closures with CANEI during this reporting period. There were 13 children in PSB treatment with private clinicians with 5 case closures, and 22 youth receiving services through Youth Outreach Services for PSB treatment, with 8 case closures during this reporting period.

b. Overall goals of the behavioral health program(s) and information on the best practices in this type of programming;

JPD's probation officers develop case plans for all youth. These plans are designed to identify and coordinate services to meet the needs of the youth, in collaboration with community-based programs to support successful completion of court-ordered conditions and supervision, and increase skills development.

In certain complex cases, the court requests a psychological examination by the on-site Juvenile Court Clinic. Those clinical and forensic reports assist the court in making sentencing determinations.

c. Information on the providers, managers, operators, and/or contractual personnel of the behavioral health care program, activity, or service, and any information on external partners working with your agency on this program;

The fee for service behavioral health providers are licensed clinicians and psychologists who provide specialized services such as individual, family, or group counseling as well as multi-systemic therapy (MST), Problematic Sexual Behavior (PSB), cognitive behavioral therapy (CBT), bilingual services.

d. Key performance indicators that are used to measure the results of the program;

- Goals met for the clinical treatment plan
- Goals met for case plan
- Case plan objectives being met or revised and an increase in skills building
- Reduction in high risk JRA domains
- Number of sessions attended over the reporting period.

e. Quality measures or expectations for contracts involved in the program;

Community-based providers are required to prepare detailed plans and report on progress. They work collaboratively with assigned probation officers. Cases are staffed

to ensure treatments goals are appropriate for each youth, that they are being achieved, and/or need to be modified.

f. Information on how the care provided in this program serves the best interests of the patient/recipient of care;

Youth who are active with the JPD and are able to be referred to community-based organization(s) and work collaboratively with their assigned probation officer to achieve case plan and treatment goals.

g. Information on the participant's continuum of care plan and whether the participant has received follow-up care at a Cook County hospital(s) or clinic(s) including medication management as a part of aftercare;

Youth who have active cases with other stakeholders (e.g. Department of Children and Family Services) are often reviewed through a multidisciplinary conference to ensure all parties are aware of the goals. Youth needs may differ depending on the stage of change as well as the current factors in their lives and connection to resources.

h. An evaluation of the impact of the program and an overview of its effectiveness, particularly as it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access;

JPD assigns staff to review contractor billings and meets regularly with contract staff to discuss their services and review the progress of their cases. Probation officers also incorporate the results into their case plans.

i. Information with the costs associated with the program(s) and funding source(s);

Contract costs are allocated in JPD's operating budget, in the amount of \$989,565 for 2025.

j. Any additional information which may facilitate the Committee's understanding of the program, initiative, or activity; and

None

k. Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government's efforts around behavioral health care programs.

The Court collaborated with the Board of Commissioners and Cook County Health and Hospitals to transfer the responsibility of mental health services at the JTDC from a private provider to Cook County Health and Hospitals. Since that time, the court, along with JPD and the Juvenile Temporary Detention Center (JTDC) has worked closely with Cermak Behavioral Health (Cermak), a division of CCHH, to plan an integrated system of behavioral health care at the Juvenile Court, centered on trauma-informed care. We continue to enjoy close collaboration with Cook County Health and Hospitals and the treatment team of Cermak.

