DYS Intensive In-Home Services for Prevention Referral Protocol:

The Division of Youth Services recognizes that supportive services for youth and their families are best delivered in their home and community most of the time. DYS will partner with three community organizations to provide Intensive In-Home Services (IIHS) to referred youth and their families as an alternative to commitment to DYS or other out-of-home placements.

IIHS providers implement evidence-based program models which strengthen family functioning to move families toward successful self-sufficiency. Families who are referred for services by the court will receive wraparound services for the whole family 2-3 times per week, for a minimum of 4 face-to-face hours of treatment in the family home. Treatment will be provided by an assigned Family Intervention Specialist. IIHS providers also offer 24/7 crisis intervention both by phone and in person, and any referred family may utilize these services at any time, including weekends and holidays. All services are individualized to the needs of the referred family by continuous updating of the family treatment plan and multidisciplinary staffings regarding the family's progress.

DYS partners with three experienced service providers to implement these services: Saint Francis Ministries, Youth Advocate Programs, and Youth Villages.

- Saint Francis Ministries is an independent, faith-based nonprofit serving children and families since 1945 by implementing the Family Centered Treatment (FCT) Model. The FCT model provides wraparound services to the whole family to identify strengths and areas of need, and to practice new skills to address these needs. The four phases of the FCT Model are Joining and Assessment, Restructuring, Valuing Change, and Generalization.
- Youth Advocate Programs is a nonprofit organization founded in 1975 serving children and families through the Family Centered Treatment (FCT) Model. The FCT model provides wraparound services to the whole family to identify strengths and areas of need, and to practice new skills to address these needs. The four phases of the FCT Model are Joining and Assessment, Restructuring, Valuing Change, and Generalization.
- Youth Villages is a nonprofit organization serving families since 1994 utilizing the Intercept Program Model. Intercept provides prevention and reunification services to families through such supports as service coordination, clinical oversight, education and job support, financial support, and assistance in building natural supports within the community.

When a court has determined that a youth with delinquency issues and their family would benefit from receiving Intensive In-Home Services as an alternative to out-of-home placement, the court will complete a DYS Intensive In-Home Services for Prevention referral packet and submit via email to DYSinhome@dhs.arkansas.gov. The referral will include history of delinquency, mental health/medical, family involvement, abuse and trauma, and risk and

protective factors. DYS will also accept any documentation that courts may wish to provide in addition to the referral form.

Upon receipt of a referral packet from a court, DYS will review the referral to ensure it is complete and accurate, and that it meets the requirements for the appropriate providers' IIHS program. Disqualifying criteria include youth who are over 18 years of age; youth who are placed out of their home; youth with no noted delinquency issues; and serious safety concerns which may prevent staff from entering the home to provide services. If the referral is determined appropriate by DYS, DYS staff will forward the referral and any additional documentation to the appropriate provider for review.

Upon receipt of a referral packet from DYS, the Intensive In-Home provider will conduct a review to determine whether they will accept or deny the referral.

- Saint Francis Ministries (SFM): Upon receipt of the referral packet, the Arkansas Intensive In-Home Services Director, Program Administrator, and Area Supervisor will review the submitted documentation. The case will be accepted unless there are extensive safety concerns which preclude Saint Francis Ministries staff from entering the home to provide services, including youth who are actively homicidal, suicidal, or psychotic and unmedicated. Decisions will be made on a case-by-case basis. Either DYS or SFM may request to staff a case before a decision is made to accept or deny the referral. Upon accepting the referral, the referral is forwarded to the appropriate Area Supervisor to open the case.
- Youth Advocate Programs (YAP): Upon receipt of the referral packet, the Arkansas State Director will review the submitted documentation. The case will be accepted unless there are extensive safety concerns which preclude Youth Advocate Programs staff from entering the home to provide services, including youth who are actively homicidal, suicidal, or psychotic and unmedicated. Cases will only be denied when YAP is unable to accommodate serious safety concerns, and decisions will be made on a case-by-case basis. Either DYS or YAP may request to staff a case before a decision is made to accept or deny the referral. Upon accepting the referral, the Arkansas State Director will forward the referral to the Administrative Manager to open the case.
- Youth Villages (YV): Upon receipt of the referral packet, the Program Representative will review the submitted documentation before introducing the family to the program and gaining consent for services. The Program Representative will complete a pre-screening assessment to identify potential safety concerns. The case will be accepted unless there are extensive safety concerns which prevent the assigned specialist from entering the home to provide services. Cases may be denied based on the following criteria: family member is actively suicidal or homicidal, untreated problem sexual behavior, extensive history of violent crime, active gang involvement, and unwillingness to safety plan to accommodate services. Decisions will be made on a case-by-case basis and either YV or DYS may request to staff a case before a decision is made to accept or deny the referral.

Upon accepting the referral, the referral will be forwarded to the Family Intervention Specialist to open the case.

The reviewing parties at each IIHS provider will consider the following risk and protective factors when determining whether to accept or deny a referral:

Risk Factors	Protective Factors
Defiant/Oppositional	Acknowledges risk-factors
Delinquent	Completed problem sexual behavior treatment
Family conflict	Completed substance use treatment
Fire-setting	Positive adult influences
Gang association	Pro-social activities
Homicidal ideation	Positive peers
Physical aggression	Positive school performance
Problem sexual behavior	Resilient personality
Property destruction	Strong family connection
Self-harm	Supportive caregiver(s)
Substance Use	Utilizes community resources (case management, counseling, etc.)
Suicidal ideation	
Trauma history	
Truancy	
Verbal aggression	

Upon determination that a referral has been denied, the IIHS provider will notify DYS immediately of the denial and reason for denial. DYS will notify the referring court of the decision to deny the referral and the reason for denial. Any denied family may be referred again for services if the safety concerns which led to denial are resolved.

Upon determination that a referral has been accepted, the IIHS provider will notify DYS immediately of the acceptance and the plan for opening the case. DYS will notify the referral court that the case has been accepted and provide an estimated timeline for when the case will open. When the IIHS provider has opened the case, they will notify DYS of the case opening and the family's participation in services. DYS will notify the referring court that the case has been opened and that the family is participating in services. The IIHS provider will provide weekly progress reports regarding the family's treatment to DYS, the referring court, and any other involved parties. Continuous updates will be made to the family's treatment plan and the family's progress monitored through these monthly updates.