

STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

**BUREAU OF MONITORING AND
QUALITY IMPROVEMENT
PROGRAM REPORT FOR**

Oaks Specialized Community Supervision Program
Orange County Board of County Commissioners
(Contract Provider)
823 W. Central Boulevard
Orlando, Florida 32806-1808

Review Date(s): August 28-30, 2018



PROMOTING CONTINUOUS IMPROVEMENT AND ACCOUNTABILITY
IN JUVENILE JUSTICE PROGRAMS AND SERVICES



Rating Definitions

Ratings were assigned to each indicator by the review team using the following definitions:

Satisfactory Compliance	No exceptions to the requirements of the indicator; or limited, unintentional, and/or non-systemic exceptions that do not result in reduced or substandard service delivery; or systemic exceptions with corrective action already applied and demonstrated.
Limited Compliance	Systemic exceptions to the requirements of the indicator; exceptions to the requirements of the indicator that result in the interruption of service delivery; and/or typically require oversight by management to address the issues systemically.
Failed Compliance	The absence of a component(s) essential to the requirements of the indicator that typically requires immediate follow-up and response to remediate the issue and ensure service delivery.

Review Team

The Bureau of Monitoring and Quality Improvement wishes to thank the following review team members for their participation in this review, and for promoting continuous improvement and accountability in juvenile justice programs and services in Florida:

Tamara Mahl-Adkins, Office of Program Accountability, Lead Reviewer (Standard 1 & 3)

Teresa Andersen, Office of Program Accountability, Deputy Regional Supervisor, (Standard 2 & 3)

Kamille Payne, Office of Program Accountability, Regional Monitor, (Standard 2 & 3)

Program Name: Oaks Specialized Community Supervision Program MQI Program Code: 615
 Provider Name: Orange County Board of County Commissioners Contract Number: 10346
 Location: Orange County / Circuit 9 Number of Beds: 65
 Review Date(s): August 28-30, 2018 Lead Reviewer Code: 156

Methodology

This review was conducted in accordance with FDJJ-2000 (Contract Management and Program Monitoring and Quality Improvement Policy and Procedures), and focused on the areas of (1) Management Accountability, (2) Assessment Services, and (3) Intervention Services, which are included in the Probation and Community Intervention Standards.

Persons Interviewed

- | | | |
|--|--------------------------------|--|
| <input checked="" type="checkbox"/> Program Director | _____ # Case Managers | _____ # Maintenance Personnel |
| <input type="checkbox"/> DJJ Monitor | _____ # Clinical Staff | _____ # Program Supervisors |
| <input type="checkbox"/> DHA or designee | _____ # Food Service Personnel | _____ # Other (listed by title): _____ |
| <input type="checkbox"/> DMHCA or designee | _____ # Healthcare Staff | |

Documents Reviewed

- | | | |
|--|--|--|
| <input type="checkbox"/> Accreditation Reports
<input checked="" type="checkbox"/> Affidavit of Good Moral Character
<input type="checkbox"/> CCC Reports
<input type="checkbox"/> Confinement Reports
<input type="checkbox"/> Continuity of Operation Plan
<input checked="" type="checkbox"/> Contract Monitoring Reports
<input type="checkbox"/> Contract Scope of Services
<input type="checkbox"/> Egress Plans
<input type="checkbox"/> Escape Notification/Logs
<input type="checkbox"/> Exposure Control Plan
<input type="checkbox"/> Fire Drill Log
<input type="checkbox"/> Fire Inspection Report | <input type="checkbox"/> Fire Prevention Plan
<input type="checkbox"/> Grievance Process/Records
<input type="checkbox"/> Key Control Log
<input type="checkbox"/> Logbooks
<input type="checkbox"/> Medical and Mental Health Alerts
<input type="checkbox"/> PAR Reports
<input type="checkbox"/> Precautionary Observation Logs
<input type="checkbox"/> Program Schedules
<input type="checkbox"/> Sick Call Logs
<input type="checkbox"/> Supplemental Contracts
<input checked="" type="checkbox"/> Table of Organization
<input type="checkbox"/> Telephone Logs | <input type="checkbox"/> Vehicle Inspection Reports
<input type="checkbox"/> Visitation Logs
<input type="checkbox"/> Youth Handbook
_____ # Health Records
_____ # MH/SA Records
9 # Personnel Records
9 # Training Records/CORE
4 # Youth Records (Closed)
10 # Youth Records (Open)
_____ # Other: _____ |
|--|--|--|

Surveys

_____ # Youth _____ # Direct Care Staff _____ # Other: _____

Observations During Review

- | | | |
|---|---|--|
| <input type="checkbox"/> Admissions
<input type="checkbox"/> Confinement
<input checked="" type="checkbox"/> Facility and Grounds
<input type="checkbox"/> First Aid Kit(s)
<input type="checkbox"/> Group
<input type="checkbox"/> Meals
<input type="checkbox"/> Medical Clinic
<input type="checkbox"/> Medication Administration | <input checked="" type="checkbox"/> Posting of Abuse Hotline
<input type="checkbox"/> Program Activities
<input type="checkbox"/> Recreation
<input type="checkbox"/> Searches
<input type="checkbox"/> Security Video Tapes
<input type="checkbox"/> Sick Call
<input type="checkbox"/> Social Skill Modeling by Staff
<input type="checkbox"/> Staff Interactions with Youth | <input type="checkbox"/> Staff Supervision of Youth
<input type="checkbox"/> Tool Inventory and Storage
<input type="checkbox"/> Toxic Item Inventory and Storage
<input type="checkbox"/> Transition/Exit Conferences
<input type="checkbox"/> Treatment Team Meetings
<input type="checkbox"/> Use of Mechanical Restraints
<input type="checkbox"/> Youth Movement and Counts |
|---|---|--|

Comments

Items not marked were either not applicable or not available for review.

Standard 1: Management Accountability Probation and Community Intervention Rating Profile

Indicator Ratings

Standard 1 - Management Accountability		
1.01	* Initial Background Screening	Satisfactory
1.02	Five-Year Rescreening	Satisfactory
1.03	Protective Action Response (PAR)	Non-Applicable
1.04	Pre-Service/Certification Training	Satisfactory
1.05	In-Service Training	Satisfactory
1.06	*Incident Reporting	Satisfactory
1.07	*Abuse Free Environment	Satisfactory

* The Department has identified certain key critical indicators. These indicators represent critical areas that require immediate attention if a program operates below Department standards. A program must therefore achieve at least a Satisfactory Compliance rating in each of these indicators. Failure to do so will result in a program alert form being completed and distributed to the appropriate program area (detention, residential, probation).

Standard 2: Assessment Services Probation and Community Intervention Rating Profile

Indicator Ratings

Standard 2 - Assessment and Performance Plan		
2.01	Positive Achievement Change Tool (PACT) Pre-Screen	Satisfactory
2.02	PACT Full Assessment	Satisfactory
2.03	PACT Reassessment	Satisfactory
2.04	Mental Health/Substance Abuse Screening	Satisfactory
2.05	* Comprehensive Assessment	Satisfactory
2.06	State Attorney Recommendation (SAR)	Satisfactory
2.07	Pre-Disposition Report (PDR)	Satisfactory

* The Department has identified certain key critical indicators. These indicators represent critical areas that require immediate attention if a program operates below Department standards. A program must therefore achieve at least a Satisfactory Compliance rating in each of these indicators. Failure to do so will result in a program alert form being completed and distributed to the appropriate program area (detention, residential, probation).

Standard 3: Intervention Services Probation and Community Intervention Rating Profile

Indicator Ratings

Standard 3 - Mental Health and Substance Abuse Services		
3.01	Youth-Empowered Success (YES) Plan Development	Satisfactory
3.02	Youth Requirement/PACT Goal Elements	Satisfactory
3.03	* Transitional Planning/Reintegration	Non-Applicable
3.04	* Referrals for Intervention and Treatment Services	Satisfactory
3.05	YES Plan Implementation/Supervision	Satisfactory
3.06	Ninety-Day Supervisory Reviews	Satisfactory
3.07	Ninety-Day Yes Plan Updates	Limited
3.08	Termination of Supervision	Limited

* The Department has identified certain key critical indicators. These indicators represent critical areas that require immediate attention if a program operates below Department standards. A program must therefore achieve at least a Satisfactory Compliance rating in each of these indicators. Failure to do so will result in a program alert form being completed and distributed to the appropriate program area (detention, residential, probation).

Strengths and Innovative Approaches

- The program provided youth with opportunities to participate in field trips to the Orange County Library and Full Sail University. The purpose of the library tour was to educate the youth on the library system, and the tools and opportunities the library provides to them. The purpose of the campus tour was to provide the youth (many of whom have an interest in the entertainment business) with an opportunity to experience a college campus, help them see things outside of their communities and provide them with information to help them achieve their potential career goals.
- The program uses an ecomap with families who are receptive to doing so. The ecomap provides a picture of informal support systems (for example: family, positive friends, churches, and more) and formal support systems (for example: Oaks counselor, juvenile probation officer, attorney, school teacher/dean, and more) to aid the family in identifying and organizing persons and services helpful and a source of strength for the family.
- The program adopted Central Boulevard and Washington Street, through the city of Orlando and their Keep Orlando Beautiful Adopt-A-Street Program. This program has allowed the youth to earn community service hours by cleaning up their own community.

Standard 1: Management Accountability

Overview

The Department of Juvenile Justice (DJJ) and the Orange County Board of County Commissioners entered into a contract to operate the Oaks Specialized Community Supervision Program (SCSP) in Orange County, Circuit 9 probation. The program provides services to youth ages ten to eighteen, scoring moderate to high risk on the Positive Achievement Change Tool (PACT) Assessment, who are referred by DJJ for specialized counseling and probation services in the community and the home.

The Oaks program staff includes a program manager, a licensed clinical social worker (LCSW), an administrative specialist, five master's-level senior children services counselors and three juvenile probation officers (JPO).

The LCSW has a clear and active license in the State of Florida. The LCSW provides clinical supervision for the five senior children services counselors. A review of the last six months of weekly clinical supervision logs was conducted. Other than one counselor not receiving clinical supervision the week of May 28, 2018, the LCSW provided clinical supervision at least one hour for all five of the senior children services counselors, when applicable.

Service emphasis is placed on public safety while providing quality and specialized community-based services to families. The Oaks program provides individual and family counseling to include impulse control, life skills, substance abuse education, and anger management using the Cognitive Behavioral Therapy (CBT) model, an evidence-based program. Counseling is provided in the youth's home, at school, at the Oaks SCSP office or other agreed upon location. Comprehensive family and mental health assessments, individual case planning services, treatment teams and specialized probation supervision services are also provided. The program promotes positive community and extracurricular activities (for example: tour of Orange County facilities, museum tours, college tours, community service through the Keep Orlando Beautiful Adopt-A-Street Program, and more).

1.01 Initial Background Screening (Critical)	Satisfactory Compliance
<i>Background screening is conducted for all Department employees and volunteers and all contracted provider and grant recipient employees, volunteers, mentors, and interns with access to youth. A contract provider may hire an employee to a position that requires background screening before the screening process is completed, but only for training and orientation purposes. However, these employees may not have contact with youth or confidential youth records until the screening is completed, the rating is eligible and the employee demonstrates that he or she exhibits no behaviors that warrant the denial or termination of employment. An Annual Affidavit of Compliance with Level 2 Screening Standards is completed annually.</i>	

The program has a written policy and procedures regarding initial background screening for all employees. The program did not have any new hires for the last twelve months. The Affidavit of Compliance with Level 2 Screening Standards was submitted to the Background Screening Unit (BSU) on January 4, 2018, prior to January 31, 2018, meeting the annual requirement.

1.02 Five-Year Rescreening	Satisfactory Compliance
<p><i>Background rescreening/resubmission is conducted for all Department employees and volunteers and all contracted provider and grant recipient employees, volunteers, mentors, and interns with access to youth and confidential youth records. Employees and volunteers are rescreened every five years from the initial date of employment. When a current provider staff member transitions into the Clearinghouse, the rescreen/resubmission date starts anew and is calculated by the Clearinghouse. (Note: For the new date, see the Retained Prints Expiration Date on the applicant's personal profile page within the Clearinghouse.)</i></p>	

The program has a written policy and procedures regarding background screening, which includes five-year rescreening. Three staff were eligible for a five-year rescreening. One of the three staff received the screening prior to the anniversary date but no more than twelve months before. One other staff was rescreened at the beginning of 2017 due to being entered into the Clearinghouse system and is due for a rescreening January 9, 2022. The rescreening/resubmission for the third staff was submitted six business days late, on the first day of the annual compliance review.

1.03 Protective Action Response (PAR)	Non-Applicable
<p><i>The program uses physical intervention techniques in accordance with Florida Administrative Code. Any time staff uses a physical intervention technique, such as countermoves, control techniques, takedowns, or application of mechanical restraints (other than for regular transports), a PAR Incident Report is completed and filed in accordance with the Florida Administrative Code.</i></p>	

The center has a written policy and procedures regarding Protective Action Response (PAR). There have been no PAR incidents during this review period; therefore, this indicator rates as non-applicable.

1.04 Pre-Service/Certification Training	Satisfactory Compliance
<p><i>Contracted and state non-residential staff are trained in accordance with Florida Administrative Code. Contracted and state non-residential staff satisfy pre-service/certification requirements specified by Florida Administrative Code within 180 days of hiring.</i></p>	

The program has a written policy and procedures regarding pre-service/certification training for new staff. The program has a pre-service training requirements list, which includes the training name, description, course objective, and training hours. The training requirement list was submitted to the Office of Staff Development and Training on January 4, 2018.

One staff was eligible for pre-service/certification training. The staff completed the required training as specified on the list, which included: program orientation, defensive driving, Department of Juvenile Justice (DJJ) and the law for probation officers, Prison Rape Elimination Act (PREA), effective verbal and nonverbal communication, sexual harassment, human trafficking, cardiopulmonary resuscitation (CPR), first aid, blood-borne pathogens, trauma informed care, Health Insurance Portability and Accountability Act (HIPPA), confidentiality and documentation, proper document techniques and training/documentation, suicide prevention, social inclusion, conflict resolution, diversity, child abuse recognition, reporting and prevention, Continuity of Operations Plan (COOP) incident reporting, DJJ Central Communications Center (CCC) reporting, non-residential annual disaster/emergency response training, Federal

Emergency Management Agency (FEMA) training/introduction to incident command system/single resource and initial action incidents/national incident management systems/national response framework, ethics, improving mental health and substance abuse services and information security awareness training. All the training was captured in the Department's Learning Management System (SkillPro).

1.05 In-Service Training	Satisfactory Compliance
<p><i>Contracted and state non-residential staff completes in-service training in accordance with Florida Administrative Code. Contracted and state non-residential staff completes twenty-four hours of in-service training, including mandatory topics specified in Florida Administrative Code, each calendar year, effective the year after pre-service/certification training is completed.</i></p> <p><i>Supervisory staff completes eight hours of training (as part of the twenty-four hours of annual in-service training) in the areas specified in Florida Administrative Code.</i></p>	

The program has a written policy and procedures regarding annual in-service and supervisory training. Nine staff records in the Department's Learning Management System (SkillPro) were reviewed; one of which was the only eligible supervisory staff. All nine staff completed the required mandatory training topics to include cardiopulmonary resuscitation (CPR), first aid, suicide recognition, prevention and intervention, and professionalism and ethics. Three of the nine staff, who are juvenile probation officers (JPOs), and the one supervisor completed the Protective Action Response (PAR) training. The nine staff each had between seventy and ninety-eight and a half hours of training documented in SkillPro. The supervisory staff completed a total of sixteen hours of supervisory training in management, leadership, personal accountability, employee relations and communication skills.

The program has an in-service training requirements list, which includes the training name, description, course objective and training hours. The training requirement list was submitted to the Office of Staff Development and Training on January 4, 2018. The program administrative assistant submits outlook calendar invites for each employee concerning the training requirements to be completed each month.

1.06 Incident Reporting (CCC) (Critical)	Satisfactory Compliance
<p><i>Whenever a reportable incident occurs, the program notifies the Department's Central Communications Center (CCC) within two hours of the incident, or within two hours of becoming aware of the incident.</i></p>	

The center has a written policy and procedures regarding incident reporting. The program had three Central Communications Center (CCC) reports in the last twelve months. Each incident report included the staff name and title, the description of the incident, the location, date and time of incident, names of those involved, summary of the incident, other important information, corrective action taken, and the date and time the CCC on-call duty officer was contacted. All three of the incidents were regarding youth absconding. In two of the three reports the CCC was contacted over one hour late. The program manager has conducted training during two separate staff meetings regarding the requirements for contacting the CCC. The trainings occurred in October 2017 and January 2018 and there were no new incidents warranting a call to the CCC hotline since.

1.07 Abuse-Free Environment (Critical)**Satisfactory Compliance**

Any person who knows, or has reasonable cause to suspect, a child is abused, abandoned, or neglected by a parent, legal custodian, caregiver, or other person responsible for the child's welfare, as defined by Florida Statute, or a child is in need of supervision and care and has no parent, legal custodian, or responsible adult relative immediately known and available to provide supervision and care, reports such knowledge or suspicion to the Florida Abuse Hotline.

The program has a written policy and procedures regarding child abuse reporting. The program has a process in place to track reports of abuse to the Florida Abuse Hotline. A logbook is maintained but contained no allegations of abuse for the last twelve months. An interview with the program manager confirmed there were no grievances or incidents in the last twelve months. A review of fourteen youth records did not reveal any circumstances requiring a call to the Florida Abuse Hotline.

A review of nine staff personnel records was completed. All staff had a signed acknowledgement of access to the standard operating procedures manual and agreement to be held accountable for its content.

Standard 2: Assessment Services

Overview

The Oaks Specialized Community Supervision program is for youth requiring intensive probation supervision and treatment services, age ten to eighteen. Youth are referred to the program once they are placed on probation with the Department. Within seven days of admission, the program is required to conduct a Positive Achievement Change Tool (PACT) Full Assessment with each youth and complete updated PACT Full Assessments every ninety days. The program only conducts mental health/substance abuse screenings, makes referrals for comprehensive assessments, and completes State Attorney Recommendations (SAR) if the youth receives an at-large charge while in the program. If youth are arrested and go through the Juvenile Assessment Center (JAC), the JAC screener will complete the mental health/substance abuse screenings and SARs, as well as making the referral to a provider for a comprehensive assessment, and the juvenile probation officer (JPO) is then responsible for follow-up with the provider concerning the completion and results of the comprehensive assessment. The program only completes Pre-Disposition Reports (PDR) if the youth receives new charges while already enrolled in the program and if the court orders a PDR to be completed.

2.01 Positive Achievement Change Tool (PACT) Pre-Screen

Satisfactory Compliance

Staff complete the PACT Pre-Screen whenever a youth is referred to the Department for a new law charge (taken into custody or at-large) or taken into custody and screened for a non-law violation of supervision.

The program's contract requires the juvenile probation officer (JPO) to complete a Positive Achievement Change Tool (PACT) Full Assessment within seven days of each youth's admission. Ten youth records were reviewed for completion of a PACT Full Assessment and nine were completed within the required timeframe. The remaining record indicates the PACT was completed four days late. The program documented difficulty completing the PACT due to the mother's schedule; however, the JPO met with the youth and mother two times prior to the due date in which the information could have been gathered to complete the PACT.

2.02 PACT Full Assessment

Satisfactory Compliance

Staff complete the PACT Full Assessment for youth designated Moderate-High or High-risk to reoffend by the Pre-Screen PACT, if being referred for Redirections, or if residential commitment is anticipated.

The program's contract requires the juvenile probation officer (JPO) to complete a Positive Achievement Change Tool (PACT) Full Assessment within seven days of each youth's admission regardless of the youth's risk level. The PACT Full Assessment for each youth were completed prior to the Youth-Empowered Success (YES) Plan. Ten youth records were reviewed for completion of a PACT Full Assessment and nine were completed within the required timeframe. The remaining record indicates the PACT was completed four days late. The program documented difficulty completing the PACT due to the mother's schedule;

however, the JPO met with the youth and mother two times prior to the due date in which the information could have been gathered to complete the PACT.

2.03 PACT Reassessment	Satisfactory Compliance
<i>Staff complete PACT Reassessments for youth on probation, conditional release, and post-commitment probation.</i>	

The program’s contract requires a Positive Achievement Change Tool (PACT) reassessment to be completed by the juvenile probation officer (JPO) at least every ninety days, regardless of the youth’s risk level. A review of ten youth records found each included a completed PACT reassessment at least every ninety days. None of the youth required an updated Youth-Empowered Success (YES) Plan as a result of a change in risk level due to a PACT reassessment.

2.04 Mental Health/Substance Abuse Screening	Satisfactory Compliance
<i>Whenever a youth is referred to the Department for a new law charge (taken into custody or at-large) or taken into custody and screened for a non-law violation of supervision, staff shall complete the PACT Mental Health and Substance Abuse Screening Report and Referral Form (Form DJJ/PACTFRM 1).</i>	

The program’s practice is to conduct mental health/substance abuse screenings if the youth receive an at-large charge while on probation; youth in the Oaks program are already adjudicated and on probation when referred. None of the ten records reviewed were applicable for a mental health/substance abuse screening.

2.05 Comprehensive Assessment (Critical)	Satisfactory Compliance
<i>Youth shall be referred for a comprehensive assessment (e.g., TASC/SAMH) if the PACT Mental Health and Substance Abuse Screening Report and Referral Form indicates a need for further assessment.</i>	

The program only conducts mental health/substance abuse screenings and makes referrals for comprehensive assessments, if the youth receive an at-large charge while on probation; youth in the program are already adjudicated and on probation when referred. If youth are arrested and go through the Juvenile Assessment Center (JAC), the JAC screener will complete the referral to a provider for a comprehensive assessment and the juvenile probation officer (JPO) is responsible for follow-up with the provider concerning the completion and results of the comprehensive assessment.

Ten youth records were reviewed and three were applicable for a new charge. Each youth was arrested while enrolled in the program and received a referral for a comprehensive assessment during their intake at the JAC. In the three applicable reviewed youth records, two required follow-up from the program to ensure the recommendations of the comprehensive evaluation were carried out. One of the two youth records confirmed the program ensured the comprehensive evaluation, recommended as a result of the assessment, was completed. For the other youth record, the case notes in the Juvenile Justice Information System (JJIS) did not indicate the program referred the youth for a neuropsychological evaluation and substance abuse evaluation and treatment, which were recommended in the comprehensive assessment on June 7, 2018. During the annual compliance review, the program made the referral and

provided the review team with a copy of the referral and scheduled evaluation time which is now reflected in the JJIS case notes.

2.06 State Attorney Recommendation (SAR)	Satisfactory Compliance
<i>Staff shall complete the State Attorney Recommendation (SAR) (Form DJJ/PACTFRM 3) to document the Department's recommendation of judicial or non-judicial handling of the case, unless waived pursuant to an Interagency Agreement with the local State Attorney's Office (SAO), or the SAO makes a filing decision prior to the twenty-day deadline for non-detained youth.</i>	

The program only completes State Attorney Recommendations (SAR), if the youth receive an at-large charge, while on probation; youth in the program are already adjudicated and on probation when referred. Ten youth records were reviewed, and none were applicable. Three youth were arrested while in the program and the Juvenile Assessment Center (JAC) screener completed the SAR.

2.07 Pre-Disposition Report (PDR)	Satisfactory Compliance
<i>Staff shall prepare the Pre-Disposition Report (PDR) (Form DJJ/PACTFRM 5) when ordered by the court, detailing the Department's recommendation for disposition and interventions to address needs in the most appropriate, least-restrictive environment reasonably ensuring public safety.</i>	

The program only completes Pre-Disposition Reports (PDR), if the youth receive new charges while already enrolled in the program and if the court orders a PDR to be completed. Ten youth records were reviewed and two were applicable for completion of a PDR. In each record, the PDR was conducted after completion of a Full Positive Achievement Change Tool (PACT) and prior to the youth's disposition on the new charges. The recommendations in the PDRs reflect the youth's treatment needs and address the youth's staffing for the possibility of being committed to a residential program. The PDRs were signed by the juvenile probation officer (JPO) and JPO supervisor prior to being submitted to the court.

Standard 3: Intervention Services

Overview

The program provides supervision and counseling services for each youth in the program. The youth's juvenile probation officer (JPO) is responsible for administering the Positive Achievement Change Tool (PACT), completing a Youth-Empowered Success (YES) Plan, and providing case management and supervision for the youth. The youth is also assigned a counselor who conducts therapy sessions with the youth following an initial needs assessment. The JPO and counselor work with the youth and their family in the office, home, school, and other locations to accommodate the needs of the family. If the JPO and counselor cannot meet the service needs of the youth, a referral must be made to a community organization and follow-up provided by the youth's JPO, to ensure service delivery. All case notes are to be entered into the Juvenile Justice Information System (JJIS) by the JPO.

3.01 Youth-Empowered Success (YES) Plan Development

Satisfactory Compliance

Staff complete the YES Plan (Form DJJ/PACTFRM 4) for youth on Probation, Conditional Release, and Post-Commitment Probation.

The program's contract requires the juvenile probation officer (JPO) to negotiate a Youth-Empowered Success (YES) Plan with each youth within thirty days of their program admission. A review of ten youth records found each documented the initial YES Plan was created in the Juvenile Justice Information System (JJIS) within thirty days of the youth's admission. Each record included a Positive Achievement Change Tool (PACT) Full Assessment completed prior to the creation of the YES Plan. A review of the JJIS case notes reflected the youth and their parent/guardian were involved in the creation of the YES Plan and nine of the ten youth were provided with a copy of their YES Plan. One youth did not have documentation of receiving the YES Plan in the JJIS case notes; however, the program reported the YES Plan was provided, but the JPO failed to document. A YES Plan was found in each youth's record, signed by the JPO, the JPO supervisor, the youth, and the parent/guardian, when applicable, within the thirty-day required timeframe.

3.02 Youth Requirements/PACT Goal Elements

Satisfactory Compliance

For youth designated Moderate-High or High-risk to reoffend by the PACT, the YES Plan includes at least one Change Goal. The YES Plan provides appropriate and individualized target dates for the completion of each Youth Requirement and Goal. All Youth Requirement and Goal action steps include the intervention plan elements (i.e., who, what, and how often).

Ten youth records were reviewed for youth requirements in the Youth-Empowered Success (YES) Plan and incorporation of the Positive Achievement Change Tool (PACT) goal elements. Each of the ten youth had youth requirements which included the intervention plan elements for the youth, the parent/guardian, and the juvenile probation officer (JPO), and provided appropriate target dates for each sanction.

Six of the ten youth were applicable for creation of a Change Goal to be included in their YES plan, which was based on their PACT risk level. Five of the six applicable youth included a Change Goal which addressed one of the youth's top three criminogenic needs. The sixth youth did not have a Change Goal included on the YES plan. Three of the ten youth were applicable

for inclusion of an evidence-based intervention in their YES plan based on their PACT risk level. All three youth were receiving evidenced-based services; however, one youth's YES Plan included counseling services provided by the program but did not clearly document the evidence-based intervention. The program reported the youth's referral to a program counselor satisfied this requirement as the counselors complete cognitive behavioral therapy (CBT), which is an evidence-based intervention, with each youth in the program.

3.03 Transitional Planning/Reintegration (Critical)	Non-Applicable
<i>Juvenile Probation Officers actively participate in the transitional planning process for youth who are being released from a residential program on Conditional Release (CR), Post-Commitment Probation (PCP), or Direct Discharge. For conditional release and post-commitment probation youth, the YES Plan must address recommendations from the residential program made during transition and any other criminogenic need(s).</i>	

The program is not contracted to serve conditional release or post-commitment probation youth; therefore, this indicator rates as non-applicable.

3.04 Referrals for Intervention and Treatment Services (Critical)	Satisfactory Compliance
<i>Staff shall ensure all referrals for services are made as indicated by the court order or as negotiated to address criminogenic needs identified by the PACT (for youth who are Moderate-High or High risk to reoffend), and youth identified as in need of further assessment on the PACT Mental Health and Substance Abuse Report and Referral Form are referred for and receive a Comprehensive Assessment. Referrals for mental health and substance abuse treatment services are based upon Comprehensive Assessment findings and recommendations and the youth's YES Plan. Staff shall develop a follow-up and monitoring plan for all referrals for treatment made as a result of the Comprehensive Assessment and YES Plan. If referred for services, staff follows up with the service provider within thirty days to ensure the youth and parent/guardian have taken the appropriate steps to initiate services. Staff receives, reviews, and documents written and verbal progress reports from the provider. Staff shall act upon negative reports, such as missed appointments or lack of participation, and document the response in the case notes.</i>	

Ten youth records were reviewed for the completion of referrals for intervention and treatment services. Eight of the ten youth were applicable for referrals for additional services and seven records had documentation the referral was made within fourteen calendar days of the Youth-Empowered Success (YES) Plan being approved or identification of the treatment need. One youth's record reflected the referral for additional services was made twelve days late. In each of the eight youth records there was documentation the juvenile probation officer (JPO) followed up within thirty days to ensure service delivery and at regular intervals; thereafter, to monitor progress if applicable. Six youth were applicable for progress reports from the service provider and there was documentation the JPO followed-up with the youth and the service provider to discuss the report.

3.05 YES Plan Implementation/Supervision**Satisfactory Compliance**

Youth on supervision (Probation, Conditional Release, or Post-Commitment Probation) are supervised in a manner ensuring compliance with the court order and the completion of the YES Plan (Youth Requirements and PACT Goals). Case notes demonstrate compliance (or attempted compliance) with youth, parent/guardian, and staff action steps contained in the YES Plan.

The program’s contract outlines the requirements for the implementation of the Youth-Empowered Success (YES) Plan and supervision of the youth. The juvenile probation officer (JPO) must comply with each JPO action step in a youth’s YES Plan in the identified timeframe. Further, the JPO is to document all case activities in the Juvenile Justice Information System (JJIS) case notes, including interaction with the youth and the parent/guardian. The contract requires the JPO to contact both the youth and the parent/guardian at least once every thirty days and conduct a monthly home visit, regardless of the youth’s risk level.

A review of ten youth records found each had documentation all action steps in the youth’s YES Plan were completed by the JPO during the youth’s first ninety days of supervision. Two youth were applicable for the second ninety-day time period, and each had documentation all JPO actions were completed. Each youth’s case notes in JJIS documented at least one face-to-face contact and home visit with the youth and the parent/guardian each thirty-day period. Often, the JPO had telephonic and in-person contact with the youth multiple times during the thirty-day period. For each youth, the JPO documented all face-to-face, telephonic, and electronic contacts with the youth, the parent/guardian, and any providers, as well as any review of written or verbal reports pertaining to the youth.

3.06 Ninety-Day Supervisory Reviews**Satisfactory Compliance**

Cases under supervision (probation, conditional release, post-commitment probation) are reviewed by the supervisor at least once every ninety calendar days. The supervisor ensures staff review any instructions given during the review, and ensures they were followed during the subsequent review.

The program’s contract requires supervisory reviews to be conducted two business days after completion of the juvenile probation officer’s (JPO) case review, identified as the treatment team. The treatment teams are to occur every thirty days. Once the treatment team is completed, the supervisor reviews the case and documents the review in the case notes for each youth within two days of the treatment team case review. This requirement is also reflected in the program’s standard operating procedures.

A review of ten youth records found each were applicable for a supervisory review. Thirty-six supervisory reviews were conducted amongst the ten youth and twenty-nine were completed within the required timeframe. The remaining seven reviews were completed between one and seven days late. The program reports the supervisor was out on medical leave on the day two of the reviews were due and had Juvenile Justice Information System (JJIS) logon difficulties for two of the other review due dates; however, for each of the instances there were additional business days the review could have been conducted prior to the completion of the supervisory review. Further, the program indicated they do not have a procedure for covering supervisory reviews unless the supervisor were to be out on extended leave.

3.07 Ninety-Day YES Plan Updates**Limited Compliance**

Staff adjust the YES Plan to reflect any new needs and progress made during the course of supervision. Staff must make necessary updates to Youth Requirements and PACT Goals and save a new YES Plan in the Juvenile Justice Information System (JJIS) prior to ninety-day supervisory reviews. When updates are made to the YES Plan reasonably requiring the input of the youth and parent/guardian, this discussion is clearly documented in the case notes. The case notes clearly document any communication regarding the YES Plan.

The program’s contract requires Youth-Empowered Success (YES) Plans to be reviewed and updated in conjunction with the completion of a treatment team every thirty days. According to the program’s standard operating procedures, the first update and treatment team is to occur within forty-five days of the youth being admitted into the program. The program’s observed practice is for the treatment team to occur, the results to be documented in treatment team and Juvenile Justice Information System (JJIS) case notes, and then the juvenile probation officer (JPO) updates the YES plan for supervisory approval.

A review of ten youth records found each was applicable for a treatment team completion and YES Plan updates. Thirty-six treatment teams and YES Plan updates were reviewed amongst the ten youth and each had documentation the YES Plan was updated in the Juvenile Justice Information System (JJIS) as required; however, thirteen were not completed within the required timeframe. Of those which were completed late, four were one day late, one was two days late, two were three days late, one was four days late, three were five days late, one was eleven days late, and one was thirteen days late. Three of the late treatment teams documented the parent/guardian did not attend and the treatment team and was rescheduled; however, the original dates of the scheduled treatment teams were outside the required thirty-day timeframe. The program indicated one of the treatment teams was late due to the youth’s parent/guardian taking the youth to Puerto Rico; however, this was not reflected in the case notes until after the youth returned. For eleven of the thirteen treatment teams, the originally scheduled and agreed upon treatment team date was past the required due date.

3.08 Termination of Supervision**Limited Compliance**

The JPO requests termination for youth on Probation, Conditional Release, or Post-Commitment Probation upon successful completion of court-ordered sanctions and substantial compliance with restitution and/or court fees. Termination must also be requested if the Department is losing jurisdiction because the youth has reached the maximum age provided in statute or based on the maximum period of supervision applicable to the charge.

The program has a written policy and procedures regarding release and termination of supervision. None of the ten records reviewed were applicable for termination of supervision. The program provided a list of youth in which their probation was terminated in the last six months. Four youth records were selected for review. In two of the four records, the youth’s jurisdiction was terminated by the court. The juvenile probation officer (JPO) requested termination from the court upon the youth completing the required court ordered sanctions. In the other two youth records, loss of jurisdiction occurred. The progress report was completed and submitted to court a minimum of fifteen working days before the loss of jurisdiction occurred. In all four youth records, the JPO completed a progress report after law enforcements checks were conducted, a Positive Achievement Change Tool (PACT) was completed, and the supervisor signed the report prior to submittal to the court. In two records the youth scored

moderate-high risk to reoffend on the PACT; however, only one included the PACT Comparative Risk/Protective Factor Scores in the progress report narrative or attached. In three youth records a letter was sent to the parent/guardian to advise the youth was no longer under community supervision. In the other youth record, the youth was terminated from community supervision in court; therefore, the program manager reported a letter was not sent to the parent/guardian. In all four youth records, the Juvenile Justice Information System (JJIS) was updated when the program was made aware of the youth's termination of supervision or loss of jurisdiction. The program's contract specifies a PACT shall be completed within three calendar days of program completion. However, none of the four youth records confirmed a PACT was completed within the required timeframe; PACTs were completed between four and eighteen days early.

Program Name: Oaks Specialized Community Supervision Program MQI Program Code: 615
Provider Name: Orange County Board of County Commissioners Contract Number: 10346
Location: Orange County / Circuit 9 Number of Beds: 65
Review Date(s): August 28-30, 2018 Lead Reviewer Code: 156

Overall Rating Summary

The following limited and/or failed indicators require immediate corrective action.

Limited Ratings	Failed Ratings
3.07 Ninety-Day YES Plan Updates	
3.08 Termination of Supervision	