

STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

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

Probation and Community Intervention - Circuit 9
Department of Juvenile Justice
(State-Operated)
8500 Laurel Hills Drive
Orlando, Florida 32818

Review Date(s): November 13-15, 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:

Donna Connors, Office of Program Accountability, Lead Reviewer (Standards 1, 2 and 3)

Derrick Burkett, DJJ Probation, Circuit 18, Juvenile Probation Officer Supervisor (Standards 2 and 3)

Beth Cantrell, DJJ Probation, Circuit 18, Juvenile Probation Officer Supervisor (Standards 2 and 3)

Nathaniel Culbertson, DJJ Probation, Circuit 12, Senior Juvenile Probation Officer (Standards 2 and 3)

Paul Czigan, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Rose Leto, DJJ Probation, Circuit 13, Juvenile Probation Officer Supervisor (Standards 2)

Tamara Mahl-Adkins, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Paul Sheffer, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Bonita Williams, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Program Name: Circuit 9 Probation and Community Intervention
 Provider Name: Department of Juvenile Justice
 Location: Orange County / Circuit 9
 Review Date(s): November 13-15, 2018

MQI Program Code: 1184
 Contract Number: n/a
 Number of Beds: n/a
 Lead Reviewer Code: 97

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 type="checkbox"/> Program Director
<input checked="" type="checkbox"/> DJJ Monitor
<input type="checkbox"/> DHA or designee
<input type="checkbox"/> DMHCA or designee
_____ # Case Managers | _____ # Clinical Staff
_____ # Food Service Personnel
_____ # Healthcare Staff
_____ # Maintenance Personnel
7 # Program Supervisors | 2 # Other (listed by title): Chief Probation Officer and Assistant Chief Probation Officer |
|---|---|--|

Documents Reviewed

- | | | |
|--|---|--|
| <input type="checkbox"/> Accreditation Reports
<input checked="" type="checkbox"/> Affidavit of Good Moral Character
<input checked="" type="checkbox"/> CCC Reports
<input type="checkbox"/> Confinement Reports
<input type="checkbox"/> Continuity of Operation Plan
<input 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 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
18 # Training Records/CORE
10 # Youth Records (Closed)
80 # Youth Records (Open)
_____ # Other: _____ |
|--|---|--|

Interviewed

0 # Youth **0** # Direct Care Staff **0** # Other: _____

Observations During Review

- | | | |
|--|--|--|
| <input type="checkbox"/> Admissions
<input type="checkbox"/> Confinement
<input 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 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

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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	Satisfactory
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	Satisfactory
3.08	Termination of Supervision	Limited

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Standard 1: Management Accountability

Overview

Probation and Community Intervention - Circuit 9 serves the youth in Orange and Osceola counties who have been placed on probation, conditional release or post commitment probation. There are nine units in the circuit; seven in Orange County and two in Osceola County. One unit works exclusively with youth from all areas of the circuit who have been placed in residential commitment programs. The circuit's management team includes a chief probation officer, an assistant chief probation officer, a reform specialist and nine juvenile probation officer supervisors. The circuit receives support from the regional director, two government operations consultants, and a management review specialist. The program's management team members are active in the community, maintaining strong partnerships and networking relationships through multidisciplinary meetings with community agencies. At the time of the annual compliance review, there were seven vacant juvenile probation officer (JPO) positions. There are diversion programs, such as Teen Court, available to the youth in Circuit 9. The circuit has a Protective Action Response (PAR) Training Plan, which was approved by the Department's Office of Staff Development and Training on December 14, 2017. There has not been any documentation of a physical restraint being used since the last annual compliance review. The circuit has a training coordinator to ensure training requirements for the staff are met. The circuit has an automated external defibrillator (AED) on-site, which was noted as operational. The batteries were installed in the AED on February 10, 2016 and will expire in February 2020. The AED pads will expire March 28, 2020.

1.01 Initial Background Screening (Critical)

Satisfactory Compliance

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.

The circuit has a process in which potential staff are screened through the Department's Background Screening Unit (BSU) prior to hire. The circuit's administrative assistant submits the background screening forms to the BSU and tracks their return. There were twelve staff hired since the last annual compliance review requiring a background screening. A review of the BSU website confirmed a screening was conducted on each staff prior to hire. The criminal history of the staff was reviewed by the BSU. The screening form for four staff documented an exemption was granted to allow the staff to work with youth; the remaining eight staff did not require an exemption. The personnel records of all twelve staff were reviewed and each contained documentation of the completion of a pre-employment assessment tool. Eleven staff received passing scores on the pre-employment assessment tool and one staff did not receive a passing score. The central region director for Probation provided written approval for the staff who did not receive a passing score on the pre-employment assessment tool to proceed to the next phase of hiring. The director further advised the field training officer and unit supervisor to review the results of testing and to supplement trainings deemed appropriate for the staff. The circuit had four new volunteers since the last annual compliance review. A positive background

screening clearance was received for each volunteer prior to working with the youth. The Affidavit of Compliance with Level 2 Screening Standards was submitted to the BSU on December 11, 2017, meeting the annual requirement.

1.02 Five-Year Rescreening	Satisfactory Compliance
<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>	

The circuit has a process in which staff are screened through the Department's Background Screening Unit (BSU) every five years. The circuit's administrative assistant tracks the hire dates of all staff and completes the five-year rescreening for submission to the BSU prior to the staff's anniversary date. There were eight staff eligible for a five-year rescreening. There was a rescreening form submitted to the BSU for each applicable staff prior to their respective anniversary date. None of the rescreening's were completed more than twelve months prior to the staff's anniversary date.

1.03 Protective Action Response (PAR)	Non-Applicable
<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>	

There have been no Protective Action Response (PAR) incidents during this review period; therefore, this indicator rates as non-applicable.

1.04 Pre-Service/Certification Training	Satisfactory Compliance
<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>	

The circuit requires juvenile probation officers (JPOs) to complete two phases of pre-service/certification training. There is a written list of job observations, which includes an activities checklist which addresses pre-service training requirements for staff. The activities checklist includes expectations for staff to complete prior to their attendance at the JPO academy, and the completion of activities upon their return from the academy. The checklist is signed by the staff who observed the staff performing the activities, and the trainee. The training records of nine staff were reviewed for the receipt of pre-service training. Reviewed documentation supports each staff completed phase one of the training and the JPO training academy. Eight staff were certified within 180 days of hire. One staff failed the initial test for certification, the staff passed the test on the second attempt; however, the staff was certified beyond 180 days of hire. All training was documented in the Department's Learning

Management System (SkillPro). The training was provided in a combination of web-based and instructor-led courses.

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 circuit has a written training plan to address the provision of in-service training for staff, which requires twenty-four hours of annual training. The training plan was approved by the Department’s Office of Staff Development and Training on December 14, 2017. The training records for nine staff, including three supervisors, were reviewed. Reviewed documentation supports the staff received between forty-nine and 210 hours of in-service training in 2017. All nine staff were certified in Protective Action Response (PAR), cardiopulmonary resuscitation (CPR) and first aid. The CPR and first aid trainings are taken annually. All nine staff received training in professionalism and ethics. Seven staff received training in suicide recognition, prevention and intervention training. The training records of two staff did not document receipt of suicide prevention training, the circuit concurred with this finding; however, the circuit did not offer an explanation for the oversight. Supervisors are required to have eight additional hours of training annually, on specific supervisory topics. The training records of three supervisors documented between ten and 153 hours of supervisory training, which included the required topics of management, leadership, personal accountability, employee relations, communication skills, and fiscal training. All training was documented in the Department’s Learning Management System (SkillPro). The training was provided in a combination of web-based and instructor-led courses.

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 circuit responds to incidents as required, by reporting applicable incidents to the Central Communications Center (CCC). There were nine calls to the CCC from Circuit 9 in the last six months. Five CCC reports were reviewed, which addressed loss of the staff’s badge, car accidents, media involvement and the medical issues of a youth. Four of the five calls were made within two hours of the staff gaining knowledge of the incident. One staff was in a minor car accident which was reported twenty-four hours following the accident. There were no incidents documented which the circuit failed to report to the CCC.

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 circuit ensures youth are provided with an abuse-free environment while placed on probation. There are signs posted throughout the building with the telephone numbers of the Florida Abuse Hotline and the Central Communications Center (CCC). During the intake process, youth receive information on the circuit's grievance process, which also includes the telephone numbers for the Florida Abuse Hotline and the CCC. Upon hire, new staff are provided with the employee code of ethics/personal responsibility and the Department of Juvenile Justice handbook. Each staff signs to document their receipt of these items. The personnel records of twelve staff were reviewed and each contained a checklist which included the employee code of ethics/personal responsibility and the Department of Juvenile Justice handbook. Each record contained a signed receipt of the code of conduct and handbook. In March 2018, the circuit received a complaint regarding an allegation of inappropriate conduct of a staff. The incident was reported to the CCC and investigated by the Office of the Inspector General. The circuit provided discipline to the staff in the form of a written reprimand.

Standard 2: Assessment Services

Overview

The juvenile probation officers (JPOs) are responsible for completing the intake and assessment services for all youth presented to the Department of Juvenile Justice on a criminal charge. This process, which is completed by JPOs and screeners at the juvenile assessment center, includes the completion of the intake wizard in the Juvenile Justice Information System (JJIS). The youth's demographic information and criminal record are reviewed. A Positive Achievement Change Tool (PACT) Pre-Screen is completed on all youth, which provides a determination regarding the youth's risk to reoffend. For youth scoring moderate-high or high-risk to reoffend, a PACT Full Assessment is required to be completed. During the intake process, the JPOs are required to complete a PACT Mental Health and Substance Abuse Screening Report and Referral form on each youth. This form documents the youth's need to have a comprehensive evaluation or further evaluation completed. There is a state-operated detention center in the circuit in which the JPOs provide electronic monitoring and home detention services for applicable youth, as well as attend weekly detention meetings.

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.

Eighty open records were reviewed to document the circuit's compliance with completion of the Positive Achievement Change Tool (PACT) Pre-Screen requirements. There was documentation in each record to support a PACT Pre-Screen was completed when the referral was received for the youth, whether for a new law violation, or when the youth was screened for violation of probation. There were forty-three instances in which a (PACT) Pre-Screen was applicable due to a new law violation. There was a PACT Pre-Screen in all applicable records; two PACTs were documented as 'cannot complete'.

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.

Eighty open records were reviewed; however, a Positive Achievement Change Tool (PACT) Pre-Screen was required in forty-three cases. The PACT Pre-Screen was completed for each applicable youth. Six youth required the completion of the PACT Full-Assessment due to being identified as moderate-high or high-risk to reoffend. Five PACT Full Assessments were completed as required and one PACT Full Assessment was not completed.

2.03 PACT Reassessment**Satisfactory Compliance**

Staff complete PACT Reassessments for youth on probation, conditional release, and post-commitment probation.

Eighty open records were reviewed in which forty-three were applicable for the completion of a Positive Achievement Change Tool (PACT) Pre-Screens and all were completed. Six youth were identified as moderate-high or high-risk to reoffend. The PACT Full-Screen was completed within 180 days for three youth in which two were completed late and one was not completed. Thirty-seven youth were identified as low or moderate-risk to reoffend. The PACT Pre-Screen was completed within 180 days for thirty-five youth and two were completed late. The circuit concurred with the findings and did not offer any reasons for the deficiencies. There were twenty-three youth with a new law violation, a new PACT Reassessment was completed for each applicable youth.

2.04 Mental Health/Substance Abuse Screening**Satisfactory Compliance**

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).

The Department of Juvenile Justice requires youth to be screened for mental health and substance abuse issues with the completion of a Positive Achievement Change Tool (PACT) Pre-Screen. The circuit use the following screening tools; the Massachusetts Youth Screening Instrument, Second Version (MAYSI-2) and the Suicide Risk Screening Instrument (SRSI). Eighty open records were reviewed and forty-three records were applicable for the completion of a mental health and substance abuse screening. The PACT Mental Health and Substance Abuse Report and Referral form was completed in all forty-three records. A MAYSI-2 screening was completed as required in forty-three records and the MAYSI-2 was consistently administered on the day of the youth's intake, in a confidential manner. Thirty-eight records documented the need for the completion of a comprehensive evaluation in which twenty-six youth were released to the custody of their parent/guardian. The results of the MAYSI-2 were provided to the youth's parent/guardian in twenty-three cases. In eleven records, the MAYSI-2 results conflicted with the results of the PACT results. In eight records, there was an override, and a referral for further assessment was made. In nine records, there were either staff observations or collateral contacts which revealed the need for further assessment and there was a referral in seven applicable records. In twenty-three records, the results of the MAYSI-2 required a further evaluation which was completed in all applicable records. In six records, the youth's MAYSI-2 indicated an elevated suicide risk and reviewed documentation revealed each youth was placed on suicide precautions and referred for an Assessment of Suicide Risk (ASR). An ASR was completed within twenty-four hours for all six youth. The information was entered into the Juvenile Justice Information System (JJIS) for all six youth. In eight records, there was a documented need for an assessment, crisis intervention or emergency services. In all eight records, the referral was made, and the chief probation officer (CPO) was notified. The SRSI was required for forty-three youth and each record contained a completed SRSI. The summary and recommendations were completed in the 'screening results' section in thirty-nine of forty-three records. In seven records, the youth were placed on suicide precautions as a result of the SRSI and reviewed documentation revealed a mental health referral was entered for all seven youth. Four youth were placed in secure detention, a suicide risk alert was entered for each youth. Each of the four youth were placed on constant supervision, and the detention center

was notified of the youth's heightened risk. Three youth were released to the custody of their parent/guardian. Each youth's parent/guardian was informed the SRSI factors were disclosed during the screening, and an ASR should be conducted by a community mental health provider. Each parent/guardian was provided the SRSI notification form and each form was signed by the youth's parent/guardian. In nine applicable records, the youth's PACT score was forwarded to the detention center. In three applicable records, the youth was identified as being in need of a crisis intervention or at risk for suicide. The Mental Health and Substance Abuse Report and Referral form was used to notify the detention center of the youth's needs.

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>	

Eighty records were reviewed and thirty-one records were applicable for a referral for a comprehensive evaluation. The referral was completed in thirty records. In seventeen records, referrals were required as a result of recommendations from the comprehensive assessment which was completed as required in sixteen records. In two records, the youth were detained and the comprehensive evaluation was forwarded to the receiving detention center.

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>	

Eighty open records were reviewed and forty required a State Attorney Recommendation (SAR). A SAR was completed for each applicable youth and each SAR was completed after the completion of the Positive Achievement Change Tool (PACT) Pre-Screen. The issues identified by the PACT were discussed in the narrative of all forty SAR forms. Twenty-nine youth were identified as low-risk to reoffend on the PACT and eight were considered for non-judicial action or for placement in a diversion program. In twenty-four records, the SAR recommendation did not reflect the youth's risk to reoffend, this was consistently explained in the narrative of the SAR. Thirty-eight of the forty SARs were submitted within the required time frames. The supervisor signed thirty-nine of forty SAR prior to submission of the form.

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>	

There were four records in which a pre-disposition report (PDR) was required and all applicable records contained a completed PDR. In two records, the youth was identified as moderate-high or high-risk to reoffend as a result of the Positive Achievement Change Tool (PACT). In both records, the PDR was completed after the PACT Full Assessment. In each PDR, the youth's identified treatment needs were addressed. All PDRs were submitted to the court at least forty-

eight hours prior to the youth's disposition hearing. The supervisor signed each reviewed PDR prior to submission.

Standard 3: Intervention Services

Overview

The juvenile probation officers (JPOs) in Probation and Community Intervention – Circuit 9 are responsible for case management requirements for youth, such as completing Positive Achievement Change Tool (PACT) assessments, developing Youth-Empowered Success Plans, and documenting case activities in the Juvenile Justice Information System (JJIS) case notebook module. When youth are identified in need of mental health and/or substance abuse services, the youth are referred to appropriate service providers within the local communities. The circuit has developed a disposition recommendation matrix, which is used to assist youth struggling with supervision requirements. Upon the youth's successful completion of supervision requirements, the JPOs submit termination documentation to the court. The circuit refers applicable youth to Paxen Community Connections for day treatment services and to the Eckerd Family Foundation for transition services.

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.

Eighty open cases were reviewed to document the circuit's compliance with the development of Youth-Empowered Success (YES) Plans. There was an initial YES Plan completed for each youth. In seventy-five records, a new Positive Achievement Change Tool (PACT) was completed on the youth following the youth's placement on probation or release from a residential commitment facility. There was documentation in the case notes to support the participation of youth and the youth's parent/guardian in the development of the YES Plan in seventy-three cases. Sixty-seven initial YES Plans were signed by the youth within thirty days of their placement on probation or release from a residential program. Sixty-five initial YES Plans were signed by the youth's parent/guardian within thirty days of the youth's placement on probation or release from a residential program. Seventy initial YES Plans were signed by the juvenile probation officer (JPO) within thirty days of the youth's placement on probation or release from a residential program. The initial YES Plan was approved by the juvenile probation officer supervisor (JPOS) within thirty days of the youth's placement on probation or release from a residential program in sixty-nine cases. In seventy-one records, the youth and the youth's parent/guardian were provided a copy of the YES Plan upon their review and signature.

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).

Eighty open case records were reviewed to document the circuit's compliance with youth requirements on Youth-Empowered Success (YES) Plans. A Positive Achievement Change Tool (PACT) assessment was completed on all eighty youth. Twenty-two youth were identified on the PACT assessment as moderate-high or high-risk to reoffend. The initial YES Plan for nineteen youth included a Change Goal. The Change Goal addressed one of the youth's top

three criminogenic needs in seventeen records. Six youth were identified on the PACT as high-risk to reoffend. Three youth received an evidence-based intervention which targeted one of their top three criminogenic needs. In the remaining three applicable records, there was clear documentation to address the barriers to the youth being involved in an evidence-based intervention. There were 544 youth requirements and PACT goals for the eighty youth. Of these, 541 youth requirements and goals contained the intervention plan element of who and what for the youth and the youth's parent/guardian. There were 530 youth requirements and goals which contained the intervention plan element of who, what and how often for the juvenile probation officer (JPO). There were 537 youth requirements and goals which provided appropriate target dates for completion.

3.03 Transitional Planning/Reintegration (Critical)	Satisfactory Compliance
<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>	

Eighty open case records were reviewed in which eleven were applicable for the provision of transitional planning. The case notes were reviewed to review the youth's last months in their residential commitment program. There were fifty-eight treatment team meetings for the youth in the last nine months. The juvenile probation officer (JPO) participated in fifty-two treatment team meetings. Of the six meetings missed, there were no documented follow-up for two meetings within seventy-two hours. There were fifty-eight parental contacts required and fifty-six parental contacts were made. There were documentation to support the JPO attended the community-based reentry meeting for ten of the eleven youth. The initial Youth-Empowered Success (YES) Plans addressed recommendations made during the youth's transition in nine of eleven records. The case notes for ten youth documented the JPO made referrals for post-residential services which were finalized at the youth's exit conference. In nine records, the case notes documented referrals for services identified at the youth's transition or exit conferences or in the youth's discharge summary. There was follow-up made for ten referrals within ten days of the referral being made.

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>	

Eighty open case records were reviewed to document the circuit's compliance with requirements for referrals for treatment services. There were fifty-six referrals for services required. All referrals were made within ten calendar days of the approval of the youth's Youth-Empowered Success Plan. There was documented follow-up on fifty-one referrals within thirty days of the referral. The follow-up on the referral was late in two records and was not completed in three records. There was documentation to support the juvenile probation officer (JPO) received and reviewed progress reports from a provider in forty-one of forty-six records. The JPO documented follow-up on progress reports in twenty-five of twenty-six records.

3.05 YES Plan Implementation/Supervision	Satisfactory Compliance
<i>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.</i>	

Eighty open case records were reviewed to document the circuit's compliance with Youth-Empowered Success (YES) Plan implementation. Each record contained an initial YES Plan. There were 491 actions steps required to be monitored by the juvenile probation officer (JPO) in the first ninety days of the youth's probation. These action steps included face-to-face visits, school visits, curfew checks, collateral contact checks, and home visits. There was documentation to support the JPO completed 438 action steps. For the second ninety-day time frame, there were eighty-seven action steps requiring monitoring by the JPO and eighty-three action steps were completed. None of the records required monitoring beyond the second ninety-day period. The JPO completed face-to-face interactions with the youth, the youth's parent/guardian and providers for sixty-eight of seventy required instances. There was documented telephone contact by the JPO to the youth, the youth's parent/guardian and providers in sixty-seven of sixty-nine required instances. In forty-seven of fifty-two required instances, the JPO documented a review of reports from collateral sources such as community agencies, schools, employers, and electronic databases.

3.06 Ninety-Day Supervisory Reviews	Satisfactory Compliance
<i>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.</i>	

Eighty open case records were reviewed to document the circuit's compliance with ninety-day supervisory reviews. Each record contained an initial Youth-Empowered Success (YES) Plan. In sixty-eight records, there was a documented review of the YES Plan by the juvenile probation officer supervisor (JPOS). A JPOS review was required during the first ninety days in sixty-two records. There was documentation the JPOS conducted at least one case review in fifty-eight records in which the JPOS review was late in four records. The circuit concurred with the findings and did not offer any reason for the deficiencies. In twenty-two records, a JPOS review was required for the second ninety-day period and there was documentation to support the completion of a supervisory review in all twenty-two records.

3.07 Ninety-Day YES Plan Updates**Satisfactory 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.

Eighty open case records were reviewed for the circuit's compliance with ninety-day Youth-Empowered Success (YES) Plan updates. Each record contained an initial YES Plan. The initial ninety-day period had passed in sixty-two records. There were fifty-two action steps requiring updates prior to the first ninety-day update in which forty-nine action steps were updated prior to the initial YES Plan update. There were fifteen Positive Achievement Change Tool (PACT) goals requiring an update, eleven were updated prior to the initial YES Plan update. There were forty-seven target dates requiring an update, forty-three target dates were updated prior to the initial YES Plan update. All updates were completed on the Juvenile Justice Information System (JJIS). In fifty-four of sixty-two applicable records, a new YES Plan was saved in JJIS prior to the juvenile probation officer supervisor (JPOS) review. In seven records, a new YES Plan was saved late and one was not completed. In fifteen records, the YES Plan updates reasonably required the input of the youth and the youth's parent/guardian. The discussion was clearly documented in the case notes in thirteen records. In twelve records, a supervisory review was required for the second ninety-day review period. In ten records, youth requirements were required to be updated. Youth requirements were completed in all ten records. In seven records, PACT goals were required to be updated. The PACT goals were completed in all seven records. In eleven records, target dates were required to be updated. The target dates were completed in ten records. For all twelve records, a new YES Plan was saved prior to the second ninety-day JPOS review. All updates were completed on JJIS. In two records, the YES Plan updates reasonably required the input of the youth and the youth's parent/guardian. The discussion was clearly documented in the case notes in one record.

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.

Ten closed records were reviewed to document the circuit's compliance with termination of supervision requirements. In seven records, a progress report was completed when termination was requested, or the Department lost jurisdiction of the youth. Each progress report was signed by a supervisor prior to being submitted to the court. In three records, a progress report was not required, as the youth's probation was terminated in court. Three youth were identified as moderate-high or high-risk to reoffend. There was no documentation of the youth's comparative risk factors being discussed or placed within the progress report for the youth. In all five applicable records, the juvenile probation officer (JPO) checked with local law enforcement to determine whether there were any outstanding warrants on the youth. In four applicable records, the JPO notified the court within fifteen days of the loss of jurisdiction. In all ten records, within five days of the receipt of the court's order terminating supervision, the JPO updated the Juvenile Justice Information System (JJIS). In eight of ten records, the JPO

provided written notification to the youth and the youth's parent/guardian of the termination of the youth's probation. In one record, jurisdiction was retained. This information was provided to the youth and the youth's parent/guardian. The date of admission and the date of termination of supervision in each record correlated with the date documented in JJIS.

Program Name: Circuit 9-Probation and Community Intervention
Provider Name: Department of Juvenile Justice
Location: Orange County / Circuit 9
Review Date(s): November 13-15, 2018

MQI Program Code: 1184
Contract Number: n/a
Number of Beds: n/a
Lead Reviewer Code: 97

Overall Rating Summary

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

Limited Ratings	Failed Ratings
3.08 Termination of Supervision	