

STATE OF FLORIDA  
DEPARTMENT OF JUVENILE JUSTICE

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

**Probation and Community Intervention - Circuit 17**  
*Department of Juvenile Justice*  
(State-Operated)  
5070 Coconut Creek Parkway  
Margate, Florida 33063

*Review Date(s): June 4 - 6, 2019*



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:

<b>Satisfactory Compliance</b>	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.
<b>Limited Compliance</b>	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.
<b>Failed Compliance</b>	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:

Keith Bennis, Office of Program Accountability, Lead Reviewer (Standard 1)  
Teves Bush, Office of Program Accountability, Regional Monitor (Standard 2 and 3)  
Ann Marie Campbell, DJJ Probation, Juvenile Probation Officer Supervisor, Circuit 19 (Standard 2 & 3)  
Paula Friedrich, Office of Program Accountability, Regional Monitor (Standard 2 and 3)  
Tonya Gittens, Office of Program Accountability, Regional Monitor (Standard 2 and 3)  
Stephanie Mack, DJJ Probation, Juvenile Probation Officer Supervisor, Circuit 11 (Standard 2 and 3)  
Gabriel Medina, Office of Program Accountability, Regional Monitor (Standard 2 and 3)  
Sheila Miller, DJJ Probation, Juvenile Probation Officer Supervisor, Circuit 11 (Standard 2 and 3)  
Shakela Minns, Office of Program Accountability, Regional Monitor (Standard 2 and 3)  
Nancy Romero, DJJ Probation, Juvenile Probation Officer Supervisor, Circuit 11 (Standard 2 and 3)  
Lana Wilcox, DJJ Probation, Juvenile Probation Officer Supervisor, Circuit 11 (Standard 2 and 3)

Program Name: Probation and Community Intervention - Circuit 17 MQI Program Code: 1192  
 Provider Name: Department of Juvenile Justice Contract Number: State  
 Location: Broward County / Circuit 17 Number of Beds: N/A  
 Review Date(s): June 4 - 6, 2019 Lead Reviewer Code: 142

### 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<br><input checked="" type="checkbox"/> DJJ Monitor<br><input type="checkbox"/> DHA or designee<br><input type="checkbox"/> DMHCA or designee<br>_____ # Case Managers | _____ # Clinical Staff<br>_____ # Food Service Personnel<br>_____ # Healthcare Staff<br>_____ # Maintenance Personnel<br><b>12</b> # Program Supervisors | _____ # Youth<br>_____ # Direct Care Staff<br><b>1</b> # Other (listed by title): <b>Senior Juvenile Probation Officer</b> |
|---|--|--|

#### Documents Reviewed

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Accreditation Reports<br><input checked="" type="checkbox"/> Affidavit of Good Moral Character<br><input checked="" type="checkbox"/> CCC Reports<br><input type="checkbox"/> Confinement Reports<br><input type="checkbox"/> Continuity of Operation Plan<br><input type="checkbox"/> Contract Monitoring Reports<br><input type="checkbox"/> Contract Scope of Services<br><input type="checkbox"/> Egress Plans<br><input type="checkbox"/> Escape Notification/Logs<br><input type="checkbox"/> Exposure Control Plan<br><input type="checkbox"/> Fire Drill Log<br><input type="checkbox"/> Fire Inspection Report | <input type="checkbox"/> Fire Prevention Plan<br><input type="checkbox"/> Grievance Process/Records<br><input type="checkbox"/> Key Control Log<br><input type="checkbox"/> Logbooks<br><input type="checkbox"/> Medical and Mental Health Alerts<br><input type="checkbox"/> PAR Reports<br><input type="checkbox"/> Precautionary Observation Logs<br><input type="checkbox"/> Program Schedules<br><input type="checkbox"/> Sick Call Logs<br><input type="checkbox"/> Supplemental Contracts<br><input checked="" type="checkbox"/> Table of Organization<br><input type="checkbox"/> Telephone Logs | <input type="checkbox"/> Vehicle Inspection Reports<br><input type="checkbox"/> Visitation Logs<br><input type="checkbox"/> Youth Handbook<br>_____ # Health Records<br>_____ # MH/SA Records<br>_____ # Personnel Records<br>_____ # Training Records/CORE<br><b>9</b> # Youth Records (Closed)<br><b>66</b> # Youth Records (Open)<br>_____ # Other: _____ |
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#### Observations During Review

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

<b>Standard 1 - Management Accountability</b>		
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	Satisfactory

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## Program Overview

Probation and Community Intervention - Circuit 17 is a state-operated program which serves youth who have been placed on probation, post-commitment probation (PCP), or conditional release (CR) by a circuit court judge. The circuit currently has three office locations throughout Broward County, Florida. The circuit has a state-operated Juvenile Assessment Center (JAC) consisting of state and provider screening staff. Security at the JAC is provided by the Broward Sheriff's Office's Department of Detention. The circuit's management team consists of one chief probation officer (CPO), one assistant CPO, one circuit reform specialist, thirteen juvenile probation officer supervisors (JPOS), seventeen senior juvenile probation officers (SJPO), sixty juvenile probation officers (JPO), and one administrative assistant II. The circuit provides services which includes diversion, probation supervision, day treatment, commitment, and transition services. The program also utilizes specialized services including evidence-based programming, such as the Redirections Program, which utilizes Functional Family Therapy, Effective Practices in Community Supervision (EPICS), and IMPACT- integrated mental health and substance abuse services. JPOs are responsible for conducting intake and assessment services for all youth presented to the Department with violations of the criminal code. During the intake process, JPOs and JAC screeners are responsible for completing the intake wizard in the Department's Juvenile Justice Information System, which captures each youth's demographic information and criminal record. The JPOs and JAC screeners are also required to complete the Detention Risk Assessment Instrument, State Attorney Recommendation, Positive Achievement Change Tool (PACT) Pre-Screen, PACT Mental Health/Substance Abuse Report and Referral Form, Massachusetts Youth Screening Instrument – Second Version, and other intake documents. JPOs are responsible for completing a Youth-Empowered Success Plan for each youth. Youth who are identified with mental health, substance abuse, and/or medical needs are referred by the assigned JPO to appropriate community-based resources. At the time of the annual compliance review, the circuit had nine vacancies, including five JPOs, one senior JPO, one other personal services (OPS) maintenance staff, one OPS juvenile justice officer, and one secretary specialist.

## Strengths and Innovative Approaches

- The circuit provides on-site mentoring in structured groups which are held weekly at the circuit's north service center office. One group focuses on males called, "Men2Boys" and the other group focuses on females and is called, "Leading Ladies."
- The circuit hosts "Education Never Ends Seminars" at their north and south service centers on teacher planning days and/or over the summer presented by Hanley Foundation, Inc. on alcohol literacy.
- The circuit has increased its use of technology by utilizing Skype presentations held to introduce new resources (Healing Arts & Bougainville House) to the circuit management team (CMT) and to facilitate CMT meetings with supervisory staff.



## Standard 1: Management Accountability

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 circuit hired thirty-six new staff and six volunteers since the last annual compliance review. A review of personnel records found each staff and volunteer received a clearance from the Department's Background Screening Unit (BSU) with an eligible rating prior to their hire dates. The program utilizes an impact test through the Ergometric & Applied Personnel Research, Inc. as a pre-employment assessment tool for all direct care applicants. Reviewed documentation reflected each newly hired staff completed this pre-employment assessment tool with a passing score. The circuit's practice is to maintain these scores within a centralized binder. Reviewed documentation confirmed the program submitted the Affidavit of Compliance with Level 2 Screening Standards on December 14, 2018, 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 practice in place to complete a five-year background rescreening for Department staff and volunteers calculated from the date of their original date of hire. Since the last annual compliance review, the circuit had two staff who were eligible for a five-year background re-screening. A review of the two staff's personnel records indicated a rescreening was submitted to the Department's Background Screening Unit (BSU) at least ten business days prior to each staff's original anniversary hire date. There were no volunteers or interns who were eligible for a five-year re-screening.

<b>1.03 Protective Action Response (PAR)</b>	<b>Non-Applicable</b>
<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 annual compliance review period; therefore, this indicator rates as non-applicable.

<b>1.04 Pre-Service/Certification Training</b>	<b>Satisfactory Compliance</b>
<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>	

Nine newly hired staff training records were reviewed and found supporting documentation indicating each successfully completed all required trainings in phase one and phase two within the required 180-days of hire, as specified by Florida Administrative Code. All trainings completed by the staff were recorded in the Department's Learning Management System (SkillPro).

<b>1.05 In-Service Training</b>	<b>Satisfactory Compliance</b>
<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>	
<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>	

Nine staff training records were reviewed for in-service training, inclusive of five juvenile probation officer supervisors, one senior juvenile probation officer, and three juvenile probation officers (JPO). Two of the three JPOs were screeners at the circuit's Juvenile Assessment Center (JAC). One supervisor's personnel record contained a medical exemption regarding completing Protective Action Response (PAR) training. Reviewed documentation reflected all other training was completed by each reviewed staff, including cardiopulmonary resuscitation (CPR), first aid, suicide prevention, PAR, and professionalism and ethics, except for one staff. Reviewed documentation reflected one of the nine staff members, who was a transfer from another circuit, did not complete PAR refresher training during the 2018 calendar year. An informal interview with the circuit's special projects liaison confirmed it was an oversight and once realized, they had this staff member complete the required training. Reviewed documentation confirmed this staff member completed PAR refresher training on January 25, 2019. Each reviewed training record reflected staff exceeded the required twenty-four hours of annual training. Each supervisor's training record found each supervisor completed a minimum of eight hours of supervisory training in the areas of management, leadership, personal accountability, employee relations, and communication skills. The training plan for 2018 was approved by the Department's Office of Staff Development and Training on December 15, 2017. All trainings were recorded in the Department's Learning Management System (SkillPro).

**1.06 Incident Reporting (CCC) (Critical)****Satisfactory Compliance**

*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.*

The program had a total of twelve incidents reported to the Department's Central Communications Center (CCC) since the last annual compliance review. A review of five randomly selected incidents reported to the CCC during the past nine months found four of the five incidents were reported within two hours of the reporter gaining knowledge of the incident, while one was reported beyond the two-hour requirement. In response to this, the circuit's administration implemented corrective action with the employee and also provided additional training on CCC reporting for all staff during their next circuit management team meeting, as evidenced by an agenda and sign-in sheets. Each reviewed incident was called into the CCC, was accepted, and was entered into the CCC database. A review of the program's internal incidents did not reveal any additional incidents and/or grievances which should have been reported 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 program provides an environment in which youth, staff, and others feel safe, secure, and not threatened by any form of abuse or harassment. Program staff provide unimpeded access to the Florida Abuse Hotline and the Department's Central Communications Center (CCC) for youth who are eighteen years of age or older. A review of CCC reports for the past six months, coupled with reviewed youth case notes during the week of the review, indicated the circuit had no applicable incident reports needing to be called in to the CCC or Florida Abuse Hotline since the last annual compliance review. An interview with the program's chief probation officer confirmed there have been no internal incidents regarding abuse since the last annual compliance review. Furthermore, it was explained all youth have unimpeded access to the Florida Abuse Hotline and/or the CCC. If a youth would like to contact the CCC or Florida Abuse Hotline, they may use the JPO's telephone to call or call themselves while at the field office. Observations made of the probation's field office during the week of the annual compliance review reflected the Florida Abuse Hotline and the CCC telephone numbers were posted throughout the building.

## **Standard 2: Assessment Services**

<b>2.01 Positive Achievement Change Tool (PACT) Pre-Screen</b>	<b>Satisfactory Compliance</b>
<i>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.</i>	

Fifty-nine reviewed youth records were applicable for a Positive Achievement Change Tool (PACT) Pre-Screen. Reviewed documentation indicated fifty-eight of fifty-nine youth records contained a PACT Pre-Screen completed by a juvenile probation officer when the youth was referred for a new law violation, or when the youth was taken into custody and screened for a new-law violation of probation, while one was not completed.

<b>2.02 PACT Full Assessment</b>	<b>Satisfactory Compliance</b>
<i>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.</i>	

Fifty-nine reviewed Positive Achievement Change Tool (PACT) Pre-Screens found ten were applicable for youth classified as either moderate-high or high-risk to re-offend, requiring a PACT Full Assessment. Each of the ten reviewed records contained a PACT Full Assessment completed by a juvenile probation officer. Each PACT assessment was completed prior to the development of the Youth-Empowered Success Plan.

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

Fifty-nine applicable probation youth records were reviewed for the completion of Positive Achievement Change Tool (PACT) Reassessments, which are completed for youth placed on either probation, conditional release, or post-commitment probation at least once within 180-calendar days. PACT Reassessment results are reflective of the youth's status, including changes in behavior and progress with Youth-Empowered Success (YES) Plan sanctions and goals. A PACT Reassessment was completed at least once within 180-calendar days for each of the ten youth who were identified as either moderate-high or high risk to reoffend. Four of the forty-nine youth have not been on supervision for longer than 180-days. The remaining forty-five youth identified as either low-risk or moderate-risk to re-offend and each contained a PACT Pre-Screen completed at least once every 180-calendar days. Nineteen reviewed youth records containing a new law violation, new disposition, and/or pre/post testing for certain delinquency interventions each included a completed PACT Reassessment.

**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).*

Each of the fifty-nine reviewed youth records had a completed Positive Achievement Change Tool (PACT) Mental Health and Substance Abuse Referral form, as required. Fifty-seven of fifty-nine youth had the Massachusetts Youth Screening Instrument, Second Version (MAYSI-2), form completed. Two were not completed for the reviewed referral. Forty-one of fifty-nine reviewed records documented a need for a comprehensive assessment. Thirty-three applicable youth were released to their parent/guardian. Thirty-two of the thirty-three applicable parents/guardians were provided the results of the PACT or MAYSI-2 and were given information as to the location of the comprehensive assessment provider and one reviewed record did not clearly document the parent/guardian received the information. Six youth records indicated the MAYSI-2 results conflicted with the PACT results in identifying a need for further assessment. Each of the six applicable records indicated the results of the PACT was overridden and a referral for further assessment was made. Fifteen of sixteen applicable reviewed youth records indicated each contained documentation reflecting staff made observations or reviewed collateral contacts which revealed the need for further suicide assessment and a referral was completed and one record did not clearly document if the referral was completed. Fifty-seven applicable youth records each contained documentation verifying the MAYSI-2 was administered on the day of admission in a confidential manner. Thirty-nine of forty-one applicable MAYSI-2 assessments documented a referral was made for further evaluation. Four of four applicable youth whose MAYSI-2 results indicated elevated suicide risk were placed on suicide precautions and were referred for an Assessment of Suicide Risk (ASR). Reviewed documentation of twelve applicable youth records reflected the MAYSI-2 did not indicate a referral was necessary; however, staff documented a referral for further evaluation was needed in each of the reviewed records. One applicable youth record indicated the chief probation officer was notified, and a referral made when the MAYSI-2 or other assessment indicated the need for an assessment, crisis intervention, or an emergency service. In the one applicable record, the ASR was conducted within the twenty-four-hour time frame. Reviewed documentation confirmed the staff documented information, observations, events, and/or concerns leading to the determination a referral was needed. There were fifty-nine records reviewed for the Suicide Risk Screening Instrument (SRSI) documentation. Fifty-five of fifty-nine applicable reviewed youth records contained documentation showing upon intake, the SRSI, form MHSA 002, was administered in the Department's Juvenile Justice Information System (JJIS) while four records were not applicable. Seven applicable youth each received a positive "YES" response on the SRSI, were placed on suicide precautions, and a mental health referral was made. Each of the seven applicable records documented a suicide risk alert was entered into JJIS and each youth was placed on constant supervision until an ASR was conducted. There were five youth detained in the custody of the Department which required the detention center to be notified of the youth's elevated suicide risk. In each instance, the center was notified of the youth's suicide risk and documented on the SRSI. Two youth were released to the parent/guardian and each applicable record contained a copy of the SRSI Parent/Guardian Notification form (MHSA 003), which were signed by the parents/guardians. Each youth record documented the parent/guardian was informed of the youth's suicide risk factors and an ASR would need to be conducted by a mental health provider in the community. Five youth were securely detained, and all reviewed records contained documentation of the detention staff receiving the results of the PACT. Five applicable reviewed records documented the juvenile

probation officer utilized the Department's Mental Health Substance Abuse Report and Referral Form to notify the detention center of youth identified in need of a crisis intervention or for youth identified as at-risk for suicide.

<b>2.05 Comprehensive Assessment (Critical)</b>	<b>Satisfactory Compliance</b>
<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>	

Thirty-nine youth records required a referral for a comprehensive assessment and each was completed, as required. Thirty-four applicable reviewed records each reflected a referral for services was made based on the recommendations of the comprehensive assessment. There were eight youth detained and who required a comprehensive assessment. Reviewed documentation indicated the juvenile probation officer forwarded the comprehensive assessment results to the detention center in seven of the eight applicable records.

<b>2.06 State Attorney Recommendation (SAR)</b>	<b>Satisfactory Compliance</b>
<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>	

Thirty-six applicable youth records were reviewed of youth screened for detention, requiring a State Attorney Recommendation (SAR). Twenty-three SARs were not completed, as the youth had already appeared in court. Thirty-four SARs were completed after the Positive Achievement Change Tool (PACT) Pre-Screen. Thirty-four applicable youth records reflected the SAR presented issues identified in the PACT which discussed and documented in the appropriate section of the SAR. Thirty-three youth were found to have scored low-risk on the PACT and thirteen of the thirty-three youth were considered for non-judicial action and/or diversion. Twenty youth records were applicable for the recommendation in the SAR not reflecting the risk to reoffend and in seventeen of the twenty applicable records, the juvenile probation officer (JPO) explained it in the narrative while three were not. Each reviewed SAR was submitted within the applicable time frame and was signed by the supervisor/designee prior to being submitted.

<b>2.07 Pre-Disposition Report (PDR)</b>	<b>Satisfactory Compliance</b>
<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>	

Six youth records were applicable for completion of a Pre-Disposition Report (PDR). In each of the six applicable youth records, a Positive Achievement Change Tool (PACT) Full Assessment was completed prior to the completion of the PDR for those youth identified as moderate-high or high-risk to re-offend. Recommendations were made in each of the six PDRs reflecting mental health and/or substance abuse treatment needs identified by the PACT and other sources. Each of the PDRs was signed by a juvenile probation officer supervisor or designee prior to

submitting it to the court. Each PDR was submitted to the court at least forty-eight hours prior to disposition.

## Standard 3: Intervention Services

<b>3.01 Youth-Empowered Success (YES) Plan Development</b>	<b>Satisfactory Compliance</b>
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*Staff complete the YES Plan (Form DJJ/PACTFRM 4) for youth on Probation, Conditional Release, and Post-Commitment Probation.*

Sixty-six applicable youth records were reviewed for the initial development of the Youth Empowered Success (YES) Plan. Each plan indicated the juvenile probation officer (JPO) completed the appropriate Positive Achievement Change Tool (PACT) assessment after placement on probation or release from a residential program and prior to development of the YES Plan. A PACT Full Assessment was completed for moderate-high risk and high-risk youth and a PACT Prescreen for moderate-risk and low-risk youth. Eleven youth were eighteen years of age or older and did not require the participation of a parent/guardian. Sixty-one of sixty-six reviewed youth records indicated the youth and parent/guardian participated in the YES Plan development. Sixty-one of sixty-six YES Plans were signed by the youth within the required thirty-day time frame while one was not signed. The parent/guardian documented their signature in fifty-three of fifty-five applicable records within the required thirty-day timeframe. One YES Plan was signed late by the parent/guardian and one was not signed at all. The assigned JPO documented their signature in sixty-three of the sixty-six applicable reviewed YES Plans and within the required thirty-day time frame while three were late. Sixty-four of sixty-six reviewed YES Plans documented a review and signature by the juvenile probation officer supervisor (JPOS) within the required thirty-day timeframe while two were late. Fifty-five of fifty-five applicable reviewed youth records had supporting documentation to reflect the youth and the applicable parents/guardians were provided a copy of the YES Plan upon approval. Eleven youth were eighteen years of age; therefore, did not require a copy to be provided to the parent/guardian.

<b>3.02 Youth Requirements/PACT Goal Elements</b>	<b>Satisfactory Compliance</b>
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*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).*

Eighteen applicable youth were identified as moderate-high or high-risk to reoffend, which required at least one Change Goal to be included on the Youth-Empowered Success (YES) Plan. Fifteen applicable reviewed youth records indicated the YES Plan contained one of the top three criminogenic needs addressed as a Change Goal. There were five youth identified as high-risk to reoffend and each documented evidenced-based interventions, which targeted one of the top three criminogenic needs. Two youth records were applicable and contained documentation of barriers for the youth not participating in evidenced-based interventions. There were 301 total youth requirements and goals identified on the initial YES Plans and each contained an intervention plan for the youth and parent/guardian. There were 298 youth requirements and goals identified on the YES Plan for the juvenile probation officer (JPO). There were 287 youth requirements and goals in the initial YES Plans which provided appropriate target dates for completion.



**3.03 Transitional Planning/Reintegration (Critical)****Satisfactory Compliance**

*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).*

There were seven applicable youth records reviewed for transition planning. Six required the juvenile probation officer (JPO) to contact the youth's parent/guardian by telephone monthly, while each youth was in the residential commitment placement. One youth was eighteen years of age or older. A review of youth case notes indicated the JPO made monthly contact with the parents/guardians outside of the monthly treatment team conference calls with the residential program in five of the six applicable records. In six of the seven applicable reviewed records, case notes documented the JPO participated in the intervention and treatment team meetings. In one of two applicable records, documentation verified the JPO followed-up with the program and youth within the seventy-two-hour time frame while one did not. There was clear documentation to support the JPO participated in the transition conference for six of the seven applicable records reviewed. Reviewed case notes clearly stated a transition plan and aftercare services were documented in six of the seven applicable youth records. There was clear documentation in each of the five applicable records to support the JPO assisted the parent/guardian and program staff, when necessary, to ensure communication was conducive with the youth's successful completion of the program. Five of six applicable records documented the JPO had at least one face-to-face contact with the youth during transition. One youth was within the fifty-mile radius and face-to-face contact was not maintained during the transition phase. Seven applicable reviewed records indicated the JPO participated in the youth's exit conference from the residential program and each applicable record contained documentation to support the JPO was in receipt of the Pre-Release Notification (PRN) and submission to the court was made within three days of the JPO's receipt. Six of seven applicable reviewed records indicated a Community Re-Entry Team meeting was held and the recommendations made by the residential program were incorporated in the youth's Youth-Empowered Success (YES) Plan. Treatment intervention recommendations were identified at the transition conference, exit conference, or in the discharge summary and six of seven reviewed records indicated the JPO made post-residential service referrals while one did not. Reviewed case notes for six of the seven applicable youth records supported the JPO documented follow-up on any aftercare services within thirty days of the referral.

3.04 Referrals for Intervention and Treatment Services (Critical)	Satisfactory Compliance
<p><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></p>	

There were forty-two of forty-five applicable youth records reviewed which required referrals for services to be made within ten-calendar days of the Youth-Empowered Success (YES) Plan being approved. Documentation found forty-two of forty-five referrals were made within the required time frame. Two referrals were completed late while one was not completed. Thirty-four of forty-four applicable youth records indicated the juvenile probation officer (JPO) conducted a follow-up on the referral within the thirty-calendar day time frame of the YES Plan being approved. Nine JPOs conducted a follow-up late and one follow-up was not conducted. Thirty-eight of forty applicable youth records verified the JPO received follow-up progress reports. Twenty-three youth received progress reports and were applicable for a JPO follow-up. In twenty-one of the twenty-three applicable records, the JPO conducted a follow-up with the youth and parent/guardian on any missed appointments or non-participation while two did not.

3.05 YES Plan Implementation/Supervision	Satisfactory Compliance
<p><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></p>	

Sixty-six applicable youth records were reviewed and found a total of 583 juvenile probation officer (JPO) action steps were required within the first ninety-day supervision period of the initial 180-days. The JPOs documented 514 actions completed within the first ninety-day period. There were 378 JPO action steps required by the Youth-Empowered Success (YES) Plan during the second ninety-day supervision period, of which 325 of the action steps were completed timely. There was a total of fifty-nine JPO action steps required by the YES Plan in the post-180 days of the development of the YES Plan, of which forty-seven JPO action steps were completed within the first ninety-day period of supervision. There were twenty-three JPO action steps required by the YES Plan during the second ninety-day supervision period, of which twenty-three of the action steps were completed timely. Each of the sixty-six reviewed youth records indicated the JPO documented a face-to-face interaction with the youth, parent/guardian, and/or providers. The JPO documented all telephone contacts with the youth, parent/guardian, and/or providers in each record. In sixty applicable youth records, the JPO documented their receipt and review of written or verbal reports from collateral sources, such as educational institutions, employers, counselors, and electronic databases.

**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.*

Sixty-six youth records were reviewed for ninety-day supervisory reviews. Sixty-five of sixty-six reviewed records contained documentation within the case notes where the juvenile probation officer supervisor (JPOS) documented a review of the Youth-Empowered Success (YES) Plan. Sixty-five of sixty-six reviewed youth records contained documentation of a supervisory case review being completed at least once during the first ninety-day supervision period while one was completed outside the required timeframe. Forty-two applicable reviewed youth records each indicated the JPOS conducted a supervisory case review at least once during the second ninety-day supervision period.

**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.*

Sixty-five applicable youth records were reviewed indicating ninety days had passed since the approval of the initial Youth-Empowered Success (YES) Plan. Each of the sixty-five youth records indicated updates were made in the Department's Juvenile Justice Information System (JJIS), prior to the first ninety-day YES Plan update. Thirteen of thirteen applicable Change Goals required modification and reflected the updates were documented in JJIS. Fifty-three of fifty-five youth records documented YES Plan target dates were updated in JJIS prior to the first ninety-day YES Plan update. A new YES Plan was saved in JJIS prior to the first ninety-day juvenile probation officer supervisor (JPOS) review in sixty-four of sixty-five applicable reviewed records while one was completed beyond the required timeframe. Eight of eight youth records indicated the YES Plan updates reasonably required the input of the youth and parent/guardian and the discussion was clearly documented in the case notes. There were forty-eight records where ninety-days had passed since the first ninety-day YES Plan review. Forty-six applicable youth records documented youth requirements being updated prior to the ninety-day YES Plan update. Fourteen of fourteen reviewed YES Plans documented Change Goals were updated prior to the second YES Plan update. Forty-four of forty-five reviewed YES Plans indicated target dates were updated prior to the second YES Plan update. There were forty-eight applicable YES Plans saved in JJIS prior to the second ninety-day JPOS review. Nine of nine required the input of the youth and parent/guardian and the discussion was clearly documented in the case notes.

**3.08 Termination of Supervision****Satisfactory 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.*

Nine closed youth records were requested and reviewed for termination of supervision and/or loss of jurisdiction for youth placed on probation, post-commitment probation, or conditional release. A progress report and/or a Pre-Release Notification (PRN) were completed in eight of the nine applicable reviewed records when termination was requested or when the Department lost jurisdiction. The one remaining youth was terminated in open court. Documentation supported the juvenile probation officer (JPO) checked with local law enforcement in each of the applicable records to determine if there were any outstanding warrants or pending charges. Each of the nine applicable closed youth records contained a court order successfully terminating the youth's supervision. Applicable progress reports were completed when termination was requested. Each of the applicable records documented the JPO supervisor reviewed and signed the applicable progress report prior to submission to the court. Each of the nine reviewed youth records documented the date of termination being updated in the Department's Juvenile Justice Information System (JJIS) within five working days of the receipt of the termination order from the court. Reviewed documentation confirmed the JPO notified the youth and parent/guardian, in writing, of the youth no longer being under supervision for eight of the nine reviewed records. Reviewed documentation within JJIS reflected seven of the nine youth's dates of admission and dates of termination correlated with the termination orders while one did not. One youth was terminated on March 28, 2019 and JJIS reflected the youth was terminated on March 31, 2019 while the other youth was terminated on April 16, 2019 and JJIS reflected the youth was terminated on April 22, 2019. One of the nine reviewed cases were applicable for the court retaining jurisdiction. Reviewed documentation reflected the JPO did not notify the youth and parent/guardian of the court retaining jurisdiction and the court may find the youth in contempt for failure to make timely payments. Program staff updated the letter to include restitution information and mailed the letter to the youth's parent/guardian on the last day of the annual compliance review.

Program Name: Probation and Community Intervention - Circuit 17 MQI Program Code: 1192  
Provider Name: Department of Juvenile Justice Contract Number: State  
Location: Broward County / Circuit 17 Number of Beds: N/A  
Review Date(s): June 4 - 6, 2019 Lead Reviewer Code: 142

### **Overall Rating Summary**

<b>Overall Rating Summary</b>
<b>All indicators have been rated Satisfactory and no corrective action is needed at this time.</b>