

STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

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

Probation and Community Intervention- Circuit 19

Department of Juvenile Justice

(State-Operated)

337 North 4th Street, Suite 312

Fort Pierce, Florida 34950

Review Date(s): January 8-10, 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:

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:

Shakela Minns, Office of Program Accountability, Lead Reviewer (Standards 1 and 3, and Juvenile Assessment Center)

Keith Bennis, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Rondarrell George, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Marie Lockwood, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Tiffany Patrick, DJJ Probation, Senior Juvenile Probation Officer, Circuit 15 (Standards 2 and 3)

Maryann Sanders, Office of Program Accountability, Regional Deputy Supervisor (Standards 2 and 3)

Marissa Stress, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Program Name: Probation and Community Intervention- Circuit 19 MQI Program Code: 1194
 Provider Name: Department of Juvenile Justice Contract Number: N/A
 Location: Saint Lucie County / Circuit 19 Number of Beds: N/A
 Review Date(s): January 8-10, 2019 Lead Reviewer Code: 159

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

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 checked="" 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
17 # Personnel Records
17 # Training Records/CORE
9 # Youth Records (Closed)
53 # Youth Records (Open)
8 # Other: <u>Chief Probation Officer,</u>
<u>Assistant Chief Probation Officer,</u>
<u>Juvenile Probation Officer</u>
<u>Supervisor, and Administration</u>
<u>Secretary</u> |
|---|--|--|

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 checked="" type="checkbox"/> Posting of Abuse Hotline
<input type="checkbox"/> Program Activities
<input type="checkbox"/> Recreation
<input type="checkbox"/> Searches
<input type="checkbox"/> Security Video Tapes
<input type="checkbox"/> Sick Call
<input type="checkbox"/> Social Skill Modeling by Staff
<input type="checkbox"/> Staff Interactions with Youth | <input type="checkbox"/> Staff Supervision of Youth
<input type="checkbox"/> Tool Inventory and Storage
<input type="checkbox"/> Toxic Item Inventory and Storage
<input type="checkbox"/> Transition/Exit Conferences
<input type="checkbox"/> Treatment Team Meetings
<input type="checkbox"/> Use of Mechanical Restraints
<input type="checkbox"/> Youth Movement and Counts |
|--|---|--|

Comments

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

Standard 1: Management Accountability
Probation and Community Intervention Rating Profile

Indicator Ratings

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

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

Standard 2: Assessment Services Probation and Community Intervention Rating Profile

Indicator Ratings

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

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

Standard 3: Intervention Services Probation and Community Intervention Rating Profile

Indicator Ratings

Standard 3 - Mental Health and Substance Abuse Services		
3.01	Youth-Empowered Success (YES) Plan Development	Satisfactory
3.02	Youth Requirement/PACT Goal Elements	Satisfactory
3.03	* Transitional Planning/Reintegration	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

* 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).

Program Overview

Probation and Community Intervention - Circuit 19 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 five office locations throughout Saint Lucie, Okeechobee, Indian River, and Martin Counties in Florida. The circuit has one Juvenile Assessment Center (JAC) and one regional juvenile detention center, which are both state operated and are located in Saint Lucie County. The circuit's management team consists of one chief probation officer (CPO), one assistant CPO, one reform specialist, one special project liaison, six secretary specialists, five juvenile probation officer (JPO) supervisors, nine senior JPOs, and twenty-six JPOs. The circuit provides services which include diversion, probation supervision, day treatment, commitment, and transition services. The program also utilizes specialized services including evidence-based programming, such as Redirection programs operated by Chrysalis Health, which provides Cognitive Behavioral Therapy (CBT) and Functional Family Therapy (FFT). 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/or JAC screeners are responsible for completing the intake wizard in the Department's Juvenile Justice Information System (JJIS), which captures each youth's demographic information and criminal record. The 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. The circuit has an interagency agreement with the 19th Judicial Circuit State Attorney's Office indicating State Attorney Recommendations (SAR) are only submitted for drug court, diversion, and direct filing to adult court. 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 reported no vacancies.

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 has a practice in place to complete an initial background screening on all new staff, volunteers, and interns prior to their date of hire. Fourteen staff and sixteen volunteers were eligible for an initial background screening. 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 circuit's Annual Affidavit with Level 2 Background Screening Standards was submitted to the BSU, on December 13, 2018, meeting the annual requirement. Each staff and volunteers' criminal history report was reviewed. The circuit's hiring authority reviewed the Central Communications Center (CCC) person involvement report, Staff Verification System module (SVS) and FDLE ATMS results. There were no staff or volunteers applicable for obtaining an exemption prior to working with youth. Each newly hired staff's personnel record contained a completed pre-employment assessment tool with a passing score. All staff and volunteers were added to the Department's Clearinghouse employment roster, when applicable.

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 three staff who were eligible for a five-year background re-screening. A review of the three staff 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

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 annual compliance 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>	

Eleven pre-service training records were reviewed. Reviewed documentation found three staff were previously employed with the Department and were still within their first year of their original hire dates. Three staff successfully completed all of the required training in phase one and phase two, as specified by Florida Administrative Code, within the required 180-days of hire. Five staff were still within the initial 180-days of hire and are still completing training. All trainings were documented in the Department’s Learning Management System (Skill Pro). The circuit submitted the annual pre-service training plan to the Department’s Office of Staff Development and Training for approval on December 21, 2018. The circuit maintains a training calendar which is updated monthly.

1.05 In-Service Training	Satisfactory Compliance
<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 the required annual twenty-four-hours of in-service training. Each record included the required training, including suicide recognition, first aid, cardiopulmonary resuscitation (CPR), Protective Action Response (PAR), and professionalism and ethics. Three supervisor training records were reviewed for the required eight-hours of management training. All three records contained, at minimum, the required eight-hours of supervisory training. The training plan for 2018 was approved by the Department’s Office of Staff Development and Training on December 21, 2018. All trainings were recorded in the Department’s Learning Management System (SkillPro).

1.06 Incident Reporting (CCC) (Critical)	Satisfactory Compliance
<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>	

The program had a total of eight incidents reported to the Department's Central Communications Center (CCC) since the last annual compliance review. All incidents were reported within two hours of the reporter gaining knowledge of the incident. All incidents were called into the CCC, accepted, and entered into the CCC database. The annual compliance review team did not observe any reportable incidents during the annual compliance review which should have been reported to the CCC and were not.

1.07 Abuse-Free Environment (Critical)	Satisfactory Compliance
<i>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.</i>	

The circuit provides an environment in which youth, staff, and others feel safe, secure, and not threatened by any form of abuse or harassment. A review of eight Central Communications Center (CCC) reports found there were no reports regarding allegations of abuse or neglect against staff, or reports of staff reporting allegations on the behalf of a youth. A review of nine staff personnel records documented each of the staff signed a code of conduct prohibiting staff from using physical abuse, profanity, threats, or intimidation. Information regarding abuse reporting is provided to the youth and parents/guardians, as well as the telephone number to the Florida Abuse Hotline during the intake conference. Additionally, observations made of the probation office found signs posted in the waiting area listing the telephone numbers for the Florida Abuse Hotline and CCC.

Standard 2: Assessment Services

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.

Forty-seven reviewed youth records were applicable for a Positive Achievement Change Tool (PACT) Pre-Screen. A review of the documentation indicated forty-five youth records contained a PACT Pre-Screen completed by a Juvenile Probation Officer (JPO) 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. Forty-five youth PACT Pre-Screens were completed prior to the completion of the State Attorney Recommendation (SAR), when applicable. Two PACT Pre-Screens were not completed.

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.

Forty-seven reviewed Positive Achievement Change Tool (PACT) Pre-Screens found one youth who was applicable for youth classified as either moderate-high or high-risk to re-offend and required a PACT Full Assessment. The one applicable reviewed record included a PACT Full Assessment completed by a Juvenile Probation Officer (JPO). Reviewed documentation confirmed the PACT Full Assessment was completed prior to the development of the Youth Empowered Success (YES) Plan.

2.03 PACT Reassessment

Satisfactory Compliance

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

The Juvenile Probation Officer (JPO) is responsible for completing a Positive Achievement Change Tool (PACT) Reassessment for all youth on either probation, conditional release, or post-commitment probation every 180-calendar days. Forty-six applicable probation youth records were reviewed for a PACT Reassessment. A PACT Reassessment was completed at least once within 180-calendar days for one applicable youth identified as either moderate-high or high risk to reoffend. Forty-five youth were identified as low or moderate risk to re-offend, and a PACT Pre-Screen was completed at least once within 180-calendar days for forty-two of the forty-five youth. Three youth PACT Pre-Screens were not completed at least once within 180-calendar days. There were fourteen of fifteen PACT Reassessments or new PACT Pre-Screenings completed on youth who had a new law violation, new disposition, or pre/post-testing for certain delinquency interventions. One PACT Reassessment or new PACT Pre-Screening was not completed.

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).

Forty-four of forty-seven reviewed youth records had a completed Positive Achievement Change Tool (PACT) Mental Health and Substance Abuse (MH/SA) Referral form completed, as required. Three were not completed. Forty-five youth had the Massachusetts Youth Screening Instrument, Second Version (MAYSI-2) form completed. Two were not completed. There were thirty-one of forty-seven youth who were released to the custody of their parent/guardian. Twenty-five of the thirty-one applicable youth released to the parent/guardian documented the parent/guardian was informed of the results of the PACT and given information regarding the comprehensive assessment service provider. In eighteen reviewed records, the MAYSI-2 results conflicted with the PACT results in identifying a need for further assessment and sixteen of eighteen PACTs were overridden with a referral for further assessment made. Ten of eleven applicable reviewed youth records indicated staff observations or collateral contacts revealed the need for further assessment regardless of the results of the PACT, the Suicide Risk Screening Instrument (SRSI) or MAYSI-2, and a referral for further assessment was made. Forty-four of forty-five reviewed MAYSI-2 assessments were completed at the time of admission in what was reported to be a confidential manner. When the MAYSI-2 indicated an assessment was required, a referral for further evaluation or immediate attention was conducted in twenty-eight of twenty-eight applicable records. The SRSI was completed for two applicable youth who were identified with an elevated risk of suicide ideation and were referred for an Assessment of Suicide Risk (ASR). In seventeen reviewed youth records, staff determined a referral for further evaluation was needed; however, the MAYSI-2 did not indicate a referral was necessary. In all seventeen records, the staff documented the information, observations, events, and/or concerns leading to the determination a referral was needed. All seventeen youth records documented a need for a referral for an assessment, crisis intervention, or emergency services, notification of the Juvenile Probation Officer (JPO), and a completed referral. Four of five youth records reflected a ASR was conducted within a twenty-four-hour time frame when the MAYSI-2 suicide ideation category indicated a further assessment was needed, or other information obtained at intake/admission suggest potential suicide. Forty-seven of the forty-seven reviewed youth records contained the SRSI form administered in the Department's Juvenile Justice Information System (JJIS). Thirty-two of the forty-seven applicable youth records confirmed a completed SRSI to include a summary and recommendations in the screening result sections. There were seven youth identified as having a "yes" response on the SRSI and each youth remained in the Department's custody and an alert was entered into JJIS. In each instance, the detention center was notified of the youth's suicide risk and documented on the SRSI. Seven applicable youth records validated the parents/guardians were informed when suicide risks were identified and given information as to where to have the youth evaluated for suicide risk. Five of seven applicable reviewed youth records indicated each contained a copy of the SRSI Parent/Guardian Notification form (MHSA 003), which were signed by the parents/guardians. Four youth were detained in secure detention and all reviewed records contained documentation of the detention staff receiving the results of the PACT. Each of the four applicable reviewed records documented the JPO utilized the Department's PACT MH/SA 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.

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>	

Thirty-three youth records required a referral for a comprehensive assessment and each was completed, as required. There were twenty-nine applicable reviewed records where a referral for services was made based on the recommendations of the comprehensive assessment. Five instances of the youth being securely detained found the Juvenile Probation Officer (JPO) forwarded the comprehensive assessment results to the 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>	

The circuit has a current interagency agreement with the 19th Judicial Circuit State Attorney's Office, which was entered on February 24, 2016, specifying the circumstances which will require a State Attorney Recommendation (SAR) and those which do not require a SAR. This interagency agreement will remain in effect for five years from the date it was entered. The agreement stipulated the Department shall submit a recommendation to the State Attorney for those youth who needed a referral to drug court or diversion, youth who may be incompetent to proceed or developmentally delayed, youth in the custody of the Department of Children and Families (DCF), youth qualifying for diversion based upon prior history who have disqualifying factors such as truancy, ungovernable behavior, or runaway issues, and/or any departmental requests for direct filing to the adult court. There were eighteen applicable youth records reviewed where the youth was screened for detention, of which five were applicable for completion of completion of a SAR based on the interagency agreement. Four reviewed records supported the SAR was completed after the Positive Achievement Change Tool (PACT) Pre-Screen. One SAR was not completed. Issues identified by the PACT Pre-Screen were discussed further in the narrative sections of the SAR in four of the applicable reviewed records. Five youth were identified as low risk to re-offend on the PACT and were considered for non-judicial action or diversion. All five youth records who were identified as low risk to re-offend on the PACT Pre-Screen found the Juvenile Probation Officer (JPO) provided a justification for judicial handling in the narrative section of the SAR. All five reviewed SARs were found to have been submitted within the applicable time frames. In addition, all SARs were noted to have been signed and/or initialed by the JPO Supervisor before submission.

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>	

Six reviewed records were applicable for the completion of a Pre-Disposition Report (PDR). There were no youth identified as moderate-high or high-risk to re-offend requiring a PDR. Six

applicable records documented a discussion of the applicable treatment recommendations. In all six reviewed PDRs, the Juvenile Probation Officer (JPO) and JPO Supervisor signed the PDR and submitted it to the court at least forty-eight hours prior to the disposition hearing.

Standard 3: Intervention 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.

Fifty-three applicable youth records were reviewed for the initial development of the Youth-Empowered Success (YES) Plan. Fifty-two of the fifty-three applicable youth had a completed Positive Achievement Change Tool (PACT) Full Assessment for those youth identified as moderate-high risk and high-risk to reoffend, or a PACT Pre-Screen for those youth identified as moderate or low-risk to reoffend, prior to the development of the YES Plan. A review of youth records found fifty of fifty-three records contained documentation showing the parent/guardian and youth participated in the development of the youth's YES Plan. Three youth records did not have the signature of the youth. Forty-three of fifty-three YES Plans contained the youth's signatures on the plan within the initial thirty-days of case disposition. Two YES Plans did not have the youth's parent/guardian signature. Forty of fifty YES Plans were signed by a parent/guardian within thirty-days of disposition. Three youth were eighteen years of age and did not require a parent/guardian signature. Forty-seven of the fifty-three reviewed YES Plans contained the Juvenile Probation Officer's (JPO) signature within the thirty-day time frame. Forty-four of the fifty-one reviewed youth records contained the JPO Supervisor's signature within the initial thirty-day time frame. Seven were either signed late or not at all. Thirty-six of the forty-nine applicable reviewed youth records had supporting documentation to reflect the youth and the applicable parent/guardian were provided a copy of the YES Plan.

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).

A review of fifty-three youth records found five of were identified as moderate-high or high-risk to reoffend, which required at least one Change Goal on the Youth-Empowered Success (YES) Plan. The Change Goals addressed one of the youth's top three criminogenic needs in all five records. Two reviewed YES Plans for youth identified as high-risk to re-offend, required an evidence-based intervention. Two applicable YES Plans included an evidence-based intervention. There was documentation in one of the two applicable high-risk youth records indicating the youth was not participating in the evidence-based interventions; however, the record clearly documented barriers to the youth's participation. There were 377 youth requirements and Change Goals identified on the initial YES Plans reviewed, of which 377 contained the intervention plan elements. There were 327 youth requirements which included the intervention plan elements for the Juvenile Probation Officer (JPO). There were 320 youth requirements in the initial YES Plan, 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).

Seven youth records were applicable for transition planning and each required the Juvenile Probation Officer (JPO) to contact the youth's parent/guardian by telephone monthly. Monthly contacts with the parent/guardian during residential placement were documented in four of the seven reviewed youth records. Case notes reflected the JPO participated in interventions and treatment team meetings for six of the seven youth. The JPO followed-up with treatment team meetings within seventy-two hours for three of the seven applicable youth records. Reviewed documentation confirmed the JPO participated in the transition conference for each of the seven records reviewed. Reviewed case notes clearly stated a transition plan and aftercare services were observed in each of the seven youth records. There was clear documentation in six of seven 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. In all seven-youth records, documentation reflected the JPO had at least one face-to-face contact with youth within a fifty-mile radius during the transition phase. The case notes documented the JPO's participation in the Exit Conference in six of seven applicable youth cases. The case notes documented receipt of the Pre-Release Notification (PRN) and contained documentation indicating the PRN was forwarded to the court within three working days of the JPO receiving it in all seven applicable youth records reviewed. 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 each reviewed record indicated the JPO made post-residential service referrals. Case notes documented referrals for aftercare services identified during the transition conference, exit conference, and/or discharge summary in all seven youth records. A review of five out of seven applicable YES Plans for youth on conditional release/post-commitment probation determined treatment and intervention recommendations identified at the transition conference, Exit Conference, and/or the Discharge Summary were included in five applicable youth records. Six of seven applicable youth records documented follow-up on aftercare services by the JPO 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>	

Forty of the forty-three reviewed youth records documented referrals for services being made within ten calendar days of the Youth-Empowered Success (YES) Plan being approved by the Juvenile Probation Officer Supervisor (JPOS). One referral was not completed, and two referrals were completed late. Forty-three applicable youth records revealed the Juvenile Probation Officer (JPO) followed-up with the community service provider within thirty calendar days of the YES Plan being approved to verify enrollment and/or initiation of services. There was one referral not completed, and two referrals completed beyond the thirty-calendar-day time frame. In each of the thirty-seven applicable youth records, documentation found the JPO received, reviewed, and documented progress reports received from the service provider. In thirteen applicable youth records, the JPO followed-up on the progress reports which required the JPO's intervention.

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>	

Fifty-three reviewed youth records found a total of 326 Juvenile Probation Officer (JPO) action steps were required within the first ninety-day supervision period. The JPO documented 318 actions completed within the first ninety-day period. There were 140 JPO action steps required during the second ninety-day supervision period and 120 JPO action steps were documented as completed. There was a total of 200 JPO action steps required by the Youth Empowered Success (YES) Plan, in the post-180 days of the development of the YES Plan, of which 192 JPO action steps were completed within the first ninety-day period of supervision. There were eighty-two JPO action steps required by the second ninety-day, post-180-day supervision period. The JPO documented eighty-one action steps were completed within the first post-180-day supervision period. The JPO documented forty-four of forty-seven applicable face-to-face contacts with the youth, parent/guardian, and/or providers. The JPO documented forty of forty-seven applicable telephone contacts with the youth, parent/guardian, and/or providers. The JPO documented their receipt and review of written or verbal reports from collateral sources, such as educational institutions, employers, counselors, and electronic databases in all thirty-nine applicable youth records.

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.

Fifty-three youth records were reviewed for ninety-day supervisory reviews. Fifty-three 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. Thirty-nine of the forty-seven reviewed youth records contained documentation of a supervisory case review being completed at least once during the first ninety-day supervision period. Six supervisory reviews were completed outside the required time frame. One was not completed. Twenty-five reviewed applicable youth records 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 IF tPlan 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.

There were forty-five youth records reviewed indicating ninety days had passed since the approval of the initial Youth-Empowered Success (YES) Plan. Thirty-nine of the forty applicable updates were made in the Department's Juvenile Justice Information System (JJIS), prior to the first ninety-day YES Plan update. Four of four applicable Positive Achievement Change Tool (PACT) Change Goals required modification and the updates were documented in JJIS. Target dates were updated in JJIS, prior to the first ninety-day YES Plan update in twenty of twenty applicable reviewed records. A new YES Plan was saved in JJIS prior to the first ninety-day Juvenile Probation Officer Supervisor (JPOS) review in forty-three of the forty-five applicable reviewed records. Two were not completed. One was completed beyond the required time frame. Two of two 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 twenty-six reviewed records where ninety-days had passed since the first ninety-day YES Plan review. Youth requirements were updated in JJIS prior to the second ninety-day YES Plan update in twenty-one applicable records. Change Goals were updated in JJIS prior to the second ninety-day YES Plan update in one of one applicable record for youth requiring Change Goals. Target dates were updated in JJIS prior to the second ninety-day YES Plan update in ten applicable youth records. A new YES Plan was created and saved in JJIS prior to the second ninety-day supervisory review and within at least ninety days in twenty-three of the twenty-six applicable youth records requiring new YES Plans. There were no applicable YES Plan requiring the youth and parent/guardian input.

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.

A review of nine closed youth records was conducted. Each youth record contained a completed progress report when termination was requested. There were no youth applicable for direct release from court. Each of the nine progress reports were signed by the Juvenile Probation Officer (JPO) and Juvenile Probation Officer Supervisor (JPOS) prior to submitting it to court. There was documentation of the JPO checking with local law enforcement in all nine applicable records to determine if there were outstanding warrants for the youth. There was documentation in each record of the JPO notifying the youth and parent/guardian in writing or electronically when the youth was no longer under supervision. The date of admission and the date of termination documented in the case record correlated with the Department's Juvenile Justice Information System (JJIS) in all nine reviewed records.

Program Name: Probation and Community Intervention- Circuit 19 MQI Program Code: 1194
Provider Name: Department of Juvenile Justice Contract Number: N/A
Location: Saint Lucie County / Circuit 19 Number of Beds: N/A
Review Date(s): January 8-10, 2019 Lead Reviewer Code: 159

Overall Rating Summary

Overall Rating Summary

All indicators have been rated Satisfactory and no corrective action is needed at this time.