

STATE OF FLORIDA  
DEPARTMENT OF JUVENILE JUSTICE

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

**Probation and Community Intervention- Circuit 3]**  
*Department of Juvenile Justice*  
(State-Operated)  
690 East Duval Street  
Lake City , Florida 32055

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



PROMOTING CONTINUOUS IMPROVEMENT AND ACCOUNTABILITY  
IN JUVENILE JUSTICE PROGRAMS AND SERVICES



## Rating Definitions

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

<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:

Craig Swain, Office of Program Accountability, Lead Reviewer ([Standard1)  
Ryan Dorenbush, DJJ Probation, Reform Specialist, Circuit 5 (Standard 2 and 3)  
Warren Garrison, Office of Program Accountability, Regional Monitor (Standard 2 and 3)  
Tara Gilligan, DJJ Probation, Juvenile Probation Officer, Circuit 8 (Standard 2 and 3)

Program Name: Probation & Community Intervention - Circuit 3  
 Provider Name: Department of Juvenile Justice  
 Location: Columbia County / Circuit 3  
 Review Date(s): August 28-30, 2018

MQI Program Code: 1178  
 Contract Number: N/A  
 Number of Beds: N/A  
 Lead Reviewer Code: 169

### Methodology

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

#### Persons Interviewed

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

#### Documents Reviewed

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Accreditation Reports<br><input 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 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><b>9</b> # Personnel Records<br><b>9</b> # Training Records/CORE<br><b>9</b> # Youth Records (Closed)<br><b>8</b> # Youth Records (Open)<br>_____ # Other: _____ |
|---|---|---|

#### Surveys

- |           |                       |                      |
|-----------|-----------------------|----------------------|
| 0 # Youth | 0 # Direct Care Staff | _____ # Other: _____ |
|-----------|-----------------------|----------------------|

#### 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 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 |
|--|--|--|

#### 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	Non-Applicable
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

\* 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 1: Management Accountability

## Overview

Probation and Community Intervention - Circuit 3 serves youth in Columbia, Hamilton, Suwannee, Taylor, Dixie, Lafayette, and Madison Counties. Circuit staff consists of ten juvenile probation officers, two senior juvenile probation officers, and two juvenile probation officer supervisors. Circuit leadership consists of one reform specialist, an assistant chief probation officer, and a chief probation officer. There were no staff vacancies at the time of the annual compliance review. The circuit has two probation units, housed in two separate offices, with one located in Perry, Florida and the main office in Lake City, Florida.

### 1.01 Initial Background Screening (Critical)

**Satisfactory Compliance**

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

The circuit has a policy and procedures in place which requires all new employees, volunteers, and interns to undergo a level two background screening prior to hire. A review of the staff roster concluded there were no new staff hired since the last annual compliance review. There were also no volunteers or interns rendering their services to the circuit during this annual compliance review period. On January 4, 2018, the Annual Affidavit of Compliance with Level 2 Screening was approved by the Department's Background Screening Unit, meeting the annual requirement.

### 1.02 Five-Year Rescreening

**Satisfactory Compliance**

*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.)*

A review of the staff roster concluded one employee was eligible for a five-year background rescreening since the last annual compliance review. The Department's Background Screening Unit received and were granted an eligible clearance approximately forty days prior to the employee's anniversary date.

<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>Non-Applicable</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>	

There were no staff eligible for pre-service training during this annual compliance review period; therefore, this indicator rates as non-applicable.

<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>	

A review of nine staff training records was conducted for in-service training, two of which were for supervisors. Each staff exceeded twenty-four hours of in-service training, ranging from ninety-seven to twenty-one additional hours. Six of the nine staff completed all of the required trainings, as outlined by the Department. The remaining three staff did not complete suicide recognition, prevention, and intervention training. The two supervisors completed the additional eight hours of supervisory training, as required. The North Region Probation Annual Training Plan, which includes Circuit 3, was submitted to and approved by the Department's Office of Staff Development and Training on February 16, 2017.

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

Within the last six months, the circuit had one incident which was report to the Central Communications Center (CCC). The incident was reported due to media attention. The incident was reported to the CCC within two hours of the staff becoming aware of the incident. The program did not have any additional internal incidents or grievances which should have been reported.



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

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

The circuit maintains a policy which requires all staff to sign the Department's Code of Ethics and Personal Responsibility Procedures. The circuit has a flyer posted throughout the building informing staff, youth, and visitors of the telephone numbers for the Florida Abuse Hotline. An interview with the chief probation officer (CPO) and a review of Central Communications Center (CCC) reports, found there were no allegations of abuse reported during this annual compliance review period. A review of eight youth records did not support indications of abuse not reported to the Florida Abuse Hotline.

## Standard 2: Assessment Services

### Overview

When appropriate, the circuit utilizes the Leon and/or Alachua Regional Juvenile Detention Centers, based on the location of the youth's offense and if the youth is required to be held in secure detention. The circuit does not have a juvenile assessment center (JAC). The juvenile probation officers (JPO) are responsible for conducting intake conferences with youth to assess their needs and to make the necessary referrals for services. The JPOs are responsible for completing the State Attorney Recommendation (when requested), Suicide Risk Screening Instrument (SRSI), the Positive Achievement Change Tool (PACT) Pre-Screen, the PACT Mental Health and Substance Abuse Screening Report and Referrals, Massachusetts Youth Screening Instrument – Second Version (MAYSI-2), and referrals for services based on the findings in the screenings.

#### 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.*

A review of eight youth records found six youth were eligible for and received a Positive Achievement Change Tool (PACT) Pre-Screen. The results of the PACT Pre-Screens were documented in the Department's Juvenile Justice Information System (JJIS) after each youth was referred to the Department for a new law charge or for a non-law violation of supervision. The remaining two youth required PACT Full Assessments.

#### 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.*

Two of the eight records reviewed were applicable for a Positive Achievement Change Tool (PACT) Full Assessment. Based on the PACT Pre-Screen, both youth were identified as moderate-high or high risks to reoffend. Both PACT Full Assessments were completed prior to the development of each youth's Youth-Empowered Success (YES) Plan, as well as any applicable Pre-Disposition Reports.

#### 2.03 PACT Reassessment

#### Satisfactory Compliance

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

Five of the eight youth records reviewed were applicable for a Positive Achievement Change Tool (PACT) Reassessment. The remaining three youth were not under the Department's supervision long enough to require a PACT Reassessment. A review of the Department's Juvenile Justice Information System (JJIS) confirmed each PACT Reassessment was completed at least once every 180 days. Results from each of the PACT Reassessments were

reflective of each youth's current status, including changes in behavior and progress with Youth-Empowered Success (YES) Plan sanctions and goals.

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

Eight youth records were reviewed of which five youth were applicable to receive a Positive Achievement Change Tool (PACT) Mental Health and Substance Abuse (MH/SA) Screening Report and Referral and a Massachusetts Youth Screening Instrument – Second Version (MAYSI-2). Three youth were placed on post-commitment probation (PCP) and an intake was not required. Four of the five applicable youth had a PACT MH/SA Screening and Referral form and MAYSI-2 which were completed upon intake.

A review of five applicable youth records found three youth were applicable for a Suicide Risk Screening Instrument (SRSI) form MHSA 002. The remaining two youth were placed on probation before the Department received the referral; however, each of the two records had documentation of a SRSI being completed upon intake. In each record, a suicide alert was entered into the Department's Juvenile Justice Information System (JJIS) and the youth was referred for further services.

A review of five applicable youth records found three youth records indicated a need for a comprehensive assessment, and a referral for further assessment was made. Each of the youth received an assessment. In one of the five records reviewed, the juvenile probation officer (JPO) determined a referral for further evaluation was needed even though the MAYSI-2 did not indicate a referral was necessary. One of the three applicable youth records indicated staff observations or collateral contacts revealed the need for further assessment regardless of the results of the PACT. In three of the eight youth records, the youth were held in secure detention and notification was sent to the parents/guardians.

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

In each of three applicable youth records, the juvenile probation officer (JPO) referred the youth for comprehensive assessments. Referrals for services were made based on the recommendations of the comprehensive assessment in all three youth records. One youth's comprehensive assessment was forwarded to the to the detention center due to the youth being held in secure detention.

<b>2.06 State Attorney Recommendation (SAR)</b>	<b>Non-Applicable</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>	

On March 26, 2018, the circuit entered into a five-year agreement with the State Attorney's Office (SAO) in the 3<sup>rd</sup> Judicial Circuit to wave the responsibility of the Department to complete State Attorney Recommendations, unless requested by the SAO. The SAO did not request a State Attorney Recommendation for any of the youth; therefore, this indicator rates as non-applicable.

<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>	

One of eight youth records reviewed was applicable for a Pre-Disposition Report (PDR). Prior to the development of the PDR, a Positive Achievement Change Tool (PACT) Full Assessment was completed. The recommendations of the PACT Full Assessment reflected the treatment needs identified by the PACT. The PDR was signed by the juvenile probation officer supervisor and submitted to the court at least forty-eight hours prior to disposition.

## Standard 3: Intervention Services

### Overview

Juvenile probation officers (JPO) are responsible for completing the Youth-Empowered Success (YES) Plan with input from the youth, parents/guardians, and courts when a youth is placed on probation, post-commitment probation (PCP), or conditional release (CR) supervision. The JPO is also responsible for utilizing motivational interviewing techniques to gather information concerning the youth and family to complete the Positive Achievement Change Tool (PACT) Assessment, which is completed prior to the development and creation of the YES Plan. Any youth determined to be moderate-high or high-risk to reoffend, is required to have a PACT Change Goal included in their YES Plan. This PACT Change Goal is used to address one of the youth's top three criminogenic needs.

#### 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.*

Eight youth records were reviewed and applicable for a Youth Empowered Success (YES) Plan. Seven youth received a new Positive Achievement Change Tool (PACT) assessment prior to the development of the YES Plan. In seven of the eight records reviewed, the youth, parent/guardian, and the juvenile probation officer (JPO) participated in the development of the YES Plan. The remaining youth record did not have documentation to support the youth and parent/guardian participated in the development of the YES Plan. Seven of the eight YES Plans were signed by the youth, parents/guardians, and JPOs and were approved by the JPO supervisor within thirty days of disposition. The remaining YES Plan was signed four days late by the youth, parent/guardian, and JPO and approved five days late by the JPO supervisor. In five of the records reviewed, documentation indicated the youth and parents/guardians were provided a copy of the YES Plan after it was approved.

#### 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 eight youth records found six youth were identified as either low or moderate risk to reoffend on the Positive Achievement Change Tool (PACT) assessment. The remaining two youth were identified as either moderate-high or high risk to reoffend on the PACT. One of the two youth who were identified as either moderate-high or high risk to reoffend did not have at least one of the top three criminogenic needs incorporated in the Youth Empowered Success (YES) Plan as a Change Goal. However, the youth's top three criminogenic needs were addressed through Effective Practices in Community Supervision (EPICS), a practice with demonstrated effectiveness utilized for high risk youth. The remaining youth's top three criminogenic needs were addressed in the Change Goals.

There was a total of thirty-seven youth requirements and Change Goals in the initial YES Plans, all of which contained the elements who, what, and how often for the youth and parent/guardian.

Thirty six of the thirty-seven youth requirements contained the elements who, what, and how often for the juvenile probation officer (JPO). Thirty-five of the thirty-seven youth requirements and Change Goals in the initial YES Plan provided appropriate target dates for completion.

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

Three youth records were applicable for transition planning. Two of the three youth records reflected the juvenile probation officer (JPO) maintained monthly contact with the parent/guardian while the youth was in the residential program. All three records showed the JPO participated in monthly interventions/treatment team meetings, transition, and exit conferences. In all three youth records, case notes documented an Internal Staffing/Community Re-entry Team Meeting (CRT) based on the Statewide Community Re-entry Team Protocol. One youth record did not contain a transition plan.

In two of the three youth records, the case notes documented the JPO's submission of the Pre-Release Notification (PRN) to the court within three days of receipt from the residential program. The remaining youth record did not document the receipt of the PRN from the program or the submission to the judge.

All three Youth Empowered Success (YES) Plans incorporated the treatment and intervention recommendations identified at the transition conference, exit conference, CRT meeting, and/or in the discharge summary. The case notes also documented the referrals for aftercare services were finalized at the exit conference. The case notes in all three youth records documented referrals and follow-up made for aftercare services made within thirty days of approval of the YES Plan.

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

Seven youth records were applicable for referrals for intervention and treatment services. A review of seven applicable records found five contained documentation of referrals for services

being made within ten calendar days of the Youth Empowered Success (YES) Plan being approved. The remaining two youth were referred for services. In six youth records, the juvenile probation officer (JPO) followed-up with the provider within thirty calendar days of the approval of the YES Plan. In two applicable youth records, the JPO followed-up with the provider and youth concerning a progress report.

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

Eight youth records were reviewed and each was applicable for a Youth Empowered Success (YES) Plan. Six of the eight records reviewed were applicable for an initial ninety-day review. All six records documented all case activities, including face-to-face interactions and telephone contacts with the youth, parent/guardian, and providers, and reviews written or verbal reports from collateral sources. The juvenile probation officers (JPO) completed all twenty-eight action steps required within the first ninety-day period. The JPOs completed seventeen of the twenty-one action steps required within the second ninety-day period.

In the post-180-days of supervision, six of ten JPO action steps were completed within the first ninety-day supervision period. Seven of fourteen JPO action steps were completed within the second ninety-day supervision period.

<b>3.06 Ninety-Day Supervisory Reviews</b>	<b>Satisfactory Compliance</b>
<i>Cases under supervision (probation, conditional release, post-commitment probation) are reviewed by the supervisor at least once every ninety calendar days. The supervisor ensures staff review any instructions given during the review, and ensures they were followed during the subsequent review.</i>	

Eight youth records were reviewed and five were applicable for a Youth Empowered Success (YES) Plan. In each youth record, the juvenile probation officer supervisor (JPOS) documented their review of the YES Plan and conducted both the first and second ninety-day supervisory case reviews in five applicable records. The remaining three youth records were not applicable for the initial ninety-day supervisory review, as the youth had not yet been under supervision for ninety-days. None of the supervisory reviews were conducted late.

<b>3.07 Ninety-Day YES Plan Updates</b>	<b>Satisfactory Compliance</b>
<i>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.</i>	

In five applicable youth records, the youth requirements, Positive Achievement Change Tool (PACT) Change Goals, and target dates were updated in the Department's Juvenile Justice

Information System (JJIS) prior to the first ninety-day Youth Empowered Success (YES) Plan update. In all five youth records, a YES Plan was saved in JJIS prior to the first ninety-day supervisor review.

Four youth records were applicable for a second ninety-day supervision period. In all four records, the youth requirements, Change Goals, and target dates were updated in JJIS prior to the second ninety-day YES Plan update. In all four youth records, a YES Plan was saved in JJIS prior to the second ninety-day supervisor review.

3.08 Termination of Supervision	Satisfactory Compliance
<i>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.</i>	

Nine closed records were reviewed for termination of supervision. Each record contained a progress report which was submitted to the court requesting termination. A check with local law enforcement for any outstanding warrants or pending charges was conducted for each youth prior to requesting termination. One youth was applicable for a comparative risk score which was completed and accompanied the progress report to the court. In each record, the Department's Juvenile Justice Information System (JJIS) was updated within five days of receipt of the termination orders, and the juvenile probation officers (JPO) provided the youth and parent/guardian a copy of the termination orders. In each record, the dates for admission and termination correlated with JJIS. None of the youth reviewed were applicable for loss of jurisdiction.



Program Name: Probation and Community Supervision - Circuit 3  
Provider Name: Department of Juvenile Justice  
Location: Columbia County / Circuit 3  
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Lead Reviewer Code: 169

### **Overall Rating Summary**

#### **Overall Rating Summary**

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