

STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

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

Probation & Community Intervention Circuit 3
Department of Juvenile Justice
(State-Operated)
690 E. Duval St
Lake City, Florida 32055

Review Date(s): July 23-25, 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:

Warren Garrison, Office of Program Accountability, Lead Reviewer (Standard 1)

Lisa Cooper, Circuit 5 Community & Probation, Senior Juvenile Probation Officer (Standard 2 & 3)

Sophia Aikens, Circuit 4 Community & Probation, Senior Juvenile Probation Officer (Standard 2 & 3)

Juan Youman, Office of Program Accountability, Operations Review Specialist (Standard 2 & 3)

Program Name: Probation & Community Intervention Circuit 3
Provider Name: Probation & Community Intervention Circuit 3
Location: Columbia County / Circuit 3
Review Date(s): July 23-25, 2019

MQI Program Code: 1178
Contract Number:
Number of Beds:
Lead Reviewer Code: 122

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 and Performance Plan, (3) Mental Health and Substance Abuse Services, (4) Health Services, and (5) Safety and Security, which are included in the Residential Standards.

Overall Rating Summary

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

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	Community Assessment Tool (CAT) Pre-Screen	Satisfactory
2.02	CAT Full Assessment	Satisfactory
2.03	CAT 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 - Intervention Services		
3.01	Youth-Empowered Success (YES) Plan Development	Satisfactory
3.02	Youth Requirement/PACT Goal Elements	Satisfactory
3.03	Pre-Release Notification	Satisfactory
3.04	Transition Planning/Reintegration	Satisfactory
3.05	* Referrals for Intervention and Treatment Services	Satisfactory
3.06	YES Plan Implementation/Supervision	Satisfactory
3.07	Youth and Parent/Guardian Contact	Satisfactory
3.08	Ninety-Day Supervisory Reviews	Satisfactory
3.09	Ninety-Day Yes Plan Updates	Satisfactory
3.10	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 3 is a state-operated program. Circuit 3 services every youth under the age of eighteen charged with a crime in Columbia, Dixie, Hamilton, Lafayette, Madison, Suwanee, or Taylor counties, who are referred to the Department of Juvenile Justice (DJJ). Circuit 3 provides recommendations to the State Attorney and the Court regarding appropriated sanctions and services for the youth. One option is diversion. Diversion uses alternative programs over the formal juvenile justice system. Conditional release and post-commitment probation are programs designed to transition the youth back into the community after being in a residential program. Lastly, the circuit provides the more traditional probation designed to assist youth with court ordered sanctions and goals.

Circuit 3 is unique in such because they do not have a Juvenile Assessment Center (JAC) located in their circuit. Circuit 3 utilizes the JAC in Circuit 2 (Leon County) and the JAC in Circuit 8 (Alachua County). Because the JAC are so disbursed throughout the Circuits, Law Enforcement Officers do not arrest the youth, depending on their law violation and the juvenile probation officers (JPO) meet the youth, for the first introduction, in court as they are placed on the docket. As a result, youth not arrested are not afforded an intake as they are placed on probation during their first placement with the Department. The Circuit comprises of one chief probation officer, one assistant chief probation officer, one reform specialist, one administrative assistant, one clerk, two juvenile probation officer supervisors (JPOS), two senior juvenile probation officers (SJPO), and eleven juvenile probation officers (JPO). The circuit current has one vacant JPO position.

To accomplish these services, the program utilizes assessments such as the Community Assessment Tool (CAT)/Positive Achievement Change Tool (PACT), Massachusetts Youth Screening Instrument – Version II (MAYSI-2), and the Suicide Risk Screening Report (SRSI). These assessments assist the Juvenile Probation Officer (JPO) gauge what services are needed. Once the services are identified the JPO, parent/guardian, and youth creates a Youth Empowered Success (YES) Plan to map out a plan for successfully completing all the court sanctions. Youth are often required complete community service hours, a letter of apology to the victim(s), local social service agencies, and Substance abuse or mental health counseling.

Standard 1: Management Accountability

1.01 Initial Background Screening (Critical)	Satisfactory Compliance
<p><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 and confidential youth records. A contract provider may hire an employee to a position which 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 does not demonstrate he or she exhibits any behaviors which warrant the denial or termination of employment. An Annual Affidavit of Compliance with Level 2 Screening Standards is completed annually.</i></p>	

Probation and Community Intervention Circuit 3 did not require a new background screening as the circuit did not hire any new employees, utilize any volunteers, or mentors during the scope of the annual compliance review. The Annual Affidavit was submitted to the Background Screening Unit (BSU) on December 11, 2019 and received on December 12, 2019.

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

A review of the program's staff roster revealed two staff were applicable for a five year rescreening. A rescreening was submitted to the Background Screening Unit (BSU) for both staff at least ten business days prior to the five-year anniversary date. Staff are required to submit their finger prints and the circuit must retain these prints within the required submission date. In one instance, one staff's finger prints were not retained within the expiration date due to the staff's prints being rejected. When prints are rejected, it is not uncommon for the expiration date to end before BSU submissions. As a result of the finger prints being rejected, the BSU had to submit a "name check" to the Federal Bureau of Investigation (FBI) causing the prints to not be retained within the required timeframe. However, the program provided documentation of each staff having a five year rescreening.

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

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

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

The circuit did not have any new employees within the scope of the annual compliance review period. Therefore, the circuit did not have any staff applicable for new employee training. The circuit submitted, in writing, a list of pre-service training to the Office of Staff Development and Training on December 12, 2018.

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>	

Five staff records were reviewed. Each staff completed the yearly mandatory training topics as follows: Protection Action Response (PAR), cardiopulmonary resuscitation (CPR), first aid, suicide recognition, prevention and intervention, active shooter, and professionalism and ethics. Two of the five staff selected were supervisors. Each supervisor had completed the required eight hours of training in the appropriate areas. All training was documented in the Department's Learning Management System (SkillPro). The program submitted, in writing, a list of in-service training to the Office of Staff Development and Training on December 12, 2018.

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>	

A review of the Department's Central Communications Center (CCC) report revealed four applicable CCC reports. One of the four reports were not submitted within the required two hour time frame as it was eleven days late. The remaining three were submitted within the required time frame. A review of internal incidents/grievances determined no additional incidents should have been reported to CCC. The remaining three CCC reports were consistent with the Department's requirements.

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.

Five employee records reviewed and confirmed staff adhere to a code of conduct forbidding staff from using physical abuse, profanity, threats or intimidation towards youth. A review of the Department's Central Communications Center (CCC) reports found one CCC report on behalf of a youth by staff. No allegations were substantiated against staff. There were also no indications of abuse not being reported to the Florida Abuse Hotline.

Standard 2: Assessment Services

2.01 Community Assessment Tool (CAT) Pre-Screen	Satisfactory Compliance
<i>Staff complete the CAT Pre-Screen whenever a youth is referred to the Department for a new law charge.</i>	

Fifteen youth records were reviewed as each youth received a new law violation. A new Community Assessment Tool (CAT)/Positive Achievement Change Tool (PACT) was completed for each youth subsequent to receiving a new charge.

2.02 CAT Full Assessment	Satisfactory Compliance
<i>Staff complete a CAT Full Assessment for youth identified as moderate-high or high risk to reoffend by the CAT Pre-Screen, referred for Redirection services, or if a residential commitment is anticipated.</i>	

Fifteen youth records reviewed determined none of the youth were identified as moderate-high or high risk to reoffend. None of the youth selected were referred to Redirection services or committed to a residential facility. Each of the youth were identified as low or moderate risk to reoffend on the Community Assessment Tool (CAT)/Positive Achievement Change Tool (PACT) Prescreen.

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

Fifteen youth records reviewed determined none of the were applicable for a Community Assessment Tool (CAT)/Positive Achievement Change Tool (PACT) Reassessment. Each youth received an initial CAT/PACT. None of the youth selected had a new law violation or participated in delinquency interventions as the court placed eight of them on probation prior to the juvenile probation officer being allowed the opportunity to complete an intake with the youth. The remaining seven youth were not afforded an intake.

2.04 Mental Health/Substance Abuse Screening	Satisfactory Compliance
<i>Whenever a youth is referred to the Department for a new law charge (taken into custody or at-large) or taken into custody and screened for a non-law violation of supervision, staff shall complete the MAYSI-2, and applicable sections of the Suicide Risk Screening Instrument (SRSI) in JJIS.</i>	

The mental health and substance abuse screening was accomplished through the administration of the Massachusetts Youth Screening Instrument – Version II (MAYSI-2) in eight of the fifteen youth selected. The remaining seven youth were not applicable as their initial placement with Department was probation and not intake. Five staff training records determined the completion of the Department’s training specific to its administration of the MAYSI-2.

Four of the applicable eight youth’s MAYSI-2s indicated assessments were required as the JPO completed a referral for further evaluation for each youth. Two of the youth were detained and

the other two were released. The JPO made a referral for each of the four youth requiring further assessments based on the MAYSI-2.

The Suicide Risk Screening Instrument (SRSI) was administered in the Juvenile Justice Information System (JJIS) in eight of the fifteen youth selected. The remaining seven youth were not applicable as their initial placement with the Department was probation and not intake. Two of the of the eight youth had a positive (“YES”) response on the SRSI as the youth were placed on suicide precautions and a mental health referral was completed. The two youth were detained and the JPO provided a written notification to the detention center using the MAYSI-2 form. The parents/guardians also received a copy of the Mental Health & Substance Abuse Form 003 (MHSA 003).

2.05 Comprehensive Assessment (Critical)	Satisfactory Compliance
<i>Youth shall be referred for a comprehensive assessment (e.g., TASC/SAMH) if the MAYSI Form or any other information indicates a need for further assessment.</i>	

A review of fifteen youth records found further services were recommended for two of the youth due to their Comprehensive Assessment. The two youth were not held in a secure detention facility. A referral for further services was made for each of the two youth.

2.06 State Attorney Recommendation (SAR)	Satisfactory Compliance
<i>Staff shall complete the State Attorney Recommendation (SAR) 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 written agreement with the State Attorney’s Office waiving the State Attorney Recommendations (SAR).

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

Fifteen youth records were reviewed. None of the youth records required a Pre-Disposition Report (PDR). In each case, either the PDR was waived or there was a plea agreement.

Standard 3: Intervention Services

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

Thirteen youth records were reviewed. Each youth has a Youth Empowered Success (YES) Plan. Three youth were released from a program for post-commitment probation (PCP) and ten youth were placed on probation. The plan was developed within thirty calendar days. Eleven plans were signed within thirty calendar days as the remaining two were signed late. One of the late plans was signed thirteenth days late and the other one was ninety-days late. The YES plan for each youth was signed by all parties. Case notes clearly delineated the youth and parent/guardian participated in the development of the YES plan for each youth record reviewed.

3.02 Youth Requirements/Change Goal Elements	Satisfactory Compliance
<i>For youth identified as moderate-high or high risk to reoffend by the CAT, 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 requirements and goal action steps include the intervention plan elements (i.e., who, what, and how often).</i>	

Thirteen youth records were reviewed. Two of the youth were a moderate-high risk to reoffend and the remaining youth was a low risk to reoffend. For the two youth who were a moderate-high risk to reoffend, each had at least one of the top three criminogenic needs addressed and each had specific action step for their Change Goal addressed. None of the youth were identified as a high risk to re-offend as the program did not have a sample of this occurrence during the scope of the annual compliance review. A review of the thirteen youth revealed the Change Goals and evidence-based interventions for each youth were completed and addressed as required.

3.03 Pre-Release Notification (PRN)	Satisfactory Compliance
<i>For all youth being released from a residential program, a Pre-Release Notification (PRN) shall be completed and submitted to the courts for approval.</i>	

A review of thirteen youth records determined three of the youth were applicable for a pre-release notification as their status with the Department was Post Commitment Probation (PCP). Each youth was released from a residential program and a Pre-Release Notification (PRN) was completed and submitted for to courts for approval in two of three youth. The Department's Juvenile Justice Information System (JJIS) case note module clearly documented receipt of the PRN for two of the three youth. JJIS did not clearly document the receipt of the PRN in one of the youth's records. The Department concurred with the youth about the proposed release date and a plan for aftercare release for two of the three youth reviewed. The Department did not document the occurrence of concurring with the remaining youth. The JPO delivered all appropriate documentation to the judge within three working days of receipt of the PRN for two of the three youth reviewed. This did not occur within three days for the remaining youth.

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

The juvenile probation officer (JPO) will actively participate in the transitional planning process for youth who are being released from a residential program.

A review of thirteen youth records determined three of the youth were applicable for transitional planning/reintegration as their status with the Department was Post Commitment Probation (PCP) subsequent the release from a residential program. The Department’s Juvenile Justice Information System (JJIS) case notebook module was utilized to determine the outcome of compliance. A total of fifty-three ongoing contacts was required for the three youth. Case notes reflect the juvenile probation officer (JPO) completed this requirement forty-six times as the JPO either followed up after a missed correspondence or attended the monthly Community Re-Entry Team (CRT). There was a total of twelve missed CRTs as the JPO followed up a total of six times subsequent to missing CRT. Case notes reflect the JPO sent notifications for each CRT meeting to the appropriate individuals. The youth’s parent/guardian and the regional education coordinator was included in the CRT meetings for each of the youth. A link for video conferencing was provided to the participants in each of the three youth records reviewed.

3.05 Referrals for Intervention and Treatment Services (Critical)**Satisfactory Compliance**

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 CAT (for youth who are moderate-high or high risk to reoffend). Referrals for mental health and substance abuse treatment services are based upon court-ordered requirements. 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.

A review of thirteen youth determined eight youth were appropriate for mental health and/or substance abuse treatment service(s) based upon the youth’s Comprehensive Assessment findings and recommendations. The remaining six youth were not appropriate. Case notes determined the juvenile probation officer (JPO) made a direct referral to the service provider within ten calendar days of the approval of the YES Plan. Case notes determined the JPO contacted the service provider within thirty calendar days of the approval of the YES Plan for seven of eight youth. Case notes determined the JPO did not contact the service provider within thirty calendar days of the approval of the YES Plan for the remaining youth. Case notes determined the JPO documented referrals for services, follow-ups with the service provider, youth, and parent/guardian, and any other related contacts in seven of eight youth reviewed. This did not occur for one of the eight youth reviewed. Case notes determined the JPO documented referral information for services identified in youth requirements and goals as the information was shared with the parent/guardian and youth.

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

Youth on supervision (probation, conditional release, or post-commitment probation) are supervised in a manner ensuring compliance with the court order and the completion of the YES Plan (youth requirements and goals). Case notes demonstrate compliance (or attempted compliance) with the youth and parent/guardian.

A review of thirteen youth records determined there were a total of eight-six youth requirements derived from the Youth Empowered Success (YES) Plan sanctions and other intervention services. Case notes reflect the juvenile probation officer (JPO) monitored these requirements as required seventy-nine times. The remaining seven requirements were monitored late by the JPO. Each youth had a Community Assessment Tool (CAT)/Positive Achievement Change Tool (PACT) completed prior to the development of the initial YES Plan. The JPO updated the previous CAT/PACT assessment when applicable for each youth reviewed. The initial YES plan was developed within thirty calendar days of the disposition and signed for each of the youth reviewed as case notes reflected the youth and parent(s)/guardian(s) participated in the development of the YES Plan. Two of the youth were a moderate-high risk to reoffend and the remaining youth was a low risk to reoffend. For the two youth who were a moderate-high risk to reoffend, each had at least one of the top three criminogenic needs addressed. Case notes reflected the youth and parent/guardian were informed of the importance of complying with the YES Plan. A copy of the approved YES Plan was provided to the youth and family within ten calendar days of approval.

3.07 Youth and Parent/Guardian Contact**Satisfactory Compliance**

Juvenile probation officer (JPO) staff shall maintain on-going and regular contact with the youth and parent/guardian.

A review of thirteen youth records determined on-going and regular contacts was required a combined twenty-five times to ensure compliance. Contacts with the youth was missed three times out of the required twenty-five requirement contacts. None of the required contacts were missing during the initial ninety-days. Ten youth were low and moderate risk to re-offend youth as the juvenile probation officer (JPO) completed face-to-face contacts each month. Three youth were a moderate high risk to re-offend youth as the JPO completed curfew monitoring each month. At a minimum, one contact with the youth's parent(s)/guardian(s) was completed monthly.

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

Cases under supervision (probation, conditional release (CR), or post-commitment probation (PCP)) are reviewed by the supervisor at least once every ninety calendar days.

A review of thirteen youth records determined a supervisory case review of each case at least once every ninety calendar days was required for each youth. Each youth received a supervisory case review. Within thirty days of the Youth Empowered Success (YES) plan being signed, the juvenile probation officer supervisor (JPOS) entered a note in the case notebook module indicating a formal supervisor review was conducted.

3.09 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 goals and save a new YES Plan in the Department's Juvenile Justice Information System (JJIS) prior to the 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.

A review of thirteen youth records determined twelve needed new Youth Empowered Success (YES) Plan with the required ninety days. The juvenile probation officer (JPO) generated a new YES plan in the Department's Juvenile Justice Information System (JJIS) within the required ninety-days. The JPO updated all target dates, youth requirements, and goals in JJIS prior to the supervisory case review in each record reviewed.

3.10 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.

Ten terminations of supervision were reviewed. A progress report to request termination was completed for each youth. The Department's Juvenile Justice Information System (JJIS) Community Assessment Tool (CAT)/Positive Achievement Change Tool (PACT) module was utilized to demonstrate changes in criminogenic needs and/or protective factors for each moderate-high or high risk reoffend youth selected. The juvenile probation officer (JPO) verified the amount of restitution paid with the clerk of court when applicable for each youth. At a minimum, the JPO checked with the sheriff and police department of the youth's home county to determine if there were outstanding warrants or charges. The JPO notified the youth and parent/guardian in writing the youth was no longer under supervision in each record reviewed.

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Lead Reviewer Code: 122

Overall Rating Summary

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