

STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

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

Probation and Community Intervention-Circuit 7

Department of Juvenile Justice

(State-Operated)

210 North Palmetto Avenue, Suite 336

Daytona Beach, Florida 32114

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:

Jillian Lewandowski, Office of Program Accountability, Lead Reviewer (Standards 1, 2, and 3)
Tara Gilligan, DJJ Probation, Circuit 8, Juvenile Probation Officer (Standards 2 and 3)
Mike Marino, Office of Program Accountability, Regional Monitor (Standards 2 and 3)
Angela Mills, DJJ Probation, Circuit 4, Senior Juvenile Probation Officer (Standards 2 and 3)
Ines Parker, DJJ Probation, Circuit 4, Senior Juvenile Probation Officer (Standards 2 and 3)
Julie Vest, DJJ Probation, Circuit 5, Juvenile Probation Officer Supervisor (Standards 2 and 3)

Program Name: Probation and Community Intervention-Circuit 7
Provider Name: Department of Juvenile Justice
Location: Volusia County / Circuit 7
Review Date(s): July 23-25, 2019

MQI Program Code: 1182
Contract Number: N/A
Number of Beds: N/A
Lead Reviewer Code: 167

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.

Overall Rating Summary

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

Limited Ratings	Failed Ratings
3.05 * Referrals for Intervention and Treatment Services	

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

* 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 - 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	Limited
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 7 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 Flagler, St. Johns, Putnam, and Volusia counties in Florida. The circuit also has a screening unit located at the Volusia Regional Juvenile Detention Center. The circuit's management team consists of one chief probation officer (CPO), one assistant CPO position which is currently vacant, one reform specialist, seven juvenile probation officer supervisors (JPOS), twelve senior juvenile probation officers (SJPOs), thirty-six juvenile probation officers (JPOs), one administrative assistant, three secretary specialists, and three other personnel services (OPS) call center screeners. 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 and promising practices, such as, Redirections and Progress which utilize cognitive behavioral therapy, Associated Marine Institute (AMI) which utilizes Moral Recognition Therapy, and Council for Boys and Young Men, and Chemical Dependency Counseling (CDC) which provides sex offender specific counseling. 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 the call center are responsible for completing the intake wizard in the Department's Juvenile Justice Information System which captures each youth's demographic information and criminal record. The JPOs are also required to complete State Attorney Recommendations, a Community Assessment Tool (CAT), Mental Health/Substance Abuse Report and Referral forms, Massachusetts Youth Screening Instrument – Second Version, and other intake documents. The call center screeners are responsible for completing the Detention Risk Assessment Instrument. JPOs are responsible for completing a Youth-Empowered Success Plan for each youth. Youth identified with mental health, substance abuse, and/or medical needs are referred by the assigned JPO to appropriate community-based resources. At the time of the annual compliance review, the circuit had four vacancies; including one assistant chief probation officer, two senior juvenile probation officers, and one secretary specialist.

Strengths and Innovative Approaches

- According to the Civil Citation Dashboard Data, Circuit 7 civil citation usage has steadily increased over each of the last five reporting years and has developed into a strength for Circuit 7. The utilization rate was 23% from 2013 to 2014, 38% from 2014 to 2015, 55% from years 2015 to 2016 and 2016 to 2017, and 62% from 2017 to 2018. In addition, the circuit has a dedicated person who continues to expand the use of civil citation by continuing to expose additional law enforcement agencies throughout the circuit to the positive effects of civil citation, and a review of civil citation data on an ongoing basis.
- Circuit 7 - Crossover/Prevention/Local Review Team (LRT)/Multi-Disciplinary Team (MDT) Staffings – Circuit 7 has a dedicated staff person who handles and guides juvenile probation officer (JPO) staff through the complex process. Cases are regularly staffed, reviewed, and followed upon. Circuit 7 staff maintains strong relationships with the Department of Children and Families (DCF) and the providers to strengthen a collaboration protocol. Recent Integrated Practice Team (IPT) collaborations with DCF, Community Partnership for Children (CPC), and community providers have occurred in order to reduce lock outs and identify services.
- Circuit 7 actively works with the Associated Marine Institute (AMI) to not only provide referrals for youth to attend the program, but have provided physical transportation from Deland to Daytona Beach, Florida for youth who were previously unable to attend due to transportation problems to have daily access to transportation to the AMI program. Circuit 7 also has a great partnership with the PACE School for Girls by participating in their events, referring girls in need to the school, and is present for graduations.
- Circuit 7 has incorporated a multi-media approach to the Circuit 7 management team meetings incorporating videos, visual aids, and alternative learning methods into meetings in order to more effectively teach, learn, and share management strategies with the management team. The circuit incorporated a Circuit 7 procedure for staffing cases which utilizes an educational format to sharing information and experiences among supervisors. Circuit 7 has also set multiple benchmarks using Tableau and Juvenile Justice Information System data to track problem areas and improve performance.
- Circuit 7 has a prolific juvenile offender (PJO) Electronic Monitor program which is managed by the Volusia County Sheriff's Department. The Sheriff's Department manages both the daily report of youth on the electronic monitors and responds instantly twenty-four hours a day/seven day a week to all alerts and violations.

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>	

Since the last annual compliance review, the circuit hired three new employees and two new volunteers. Each employee and volunteer had a background screening completed prior to their hire or start date with each receiving an eligible rating from the Background Screening Unit (BSU). Each of the three staff members completed the IMPACT testing, which is the pre-employment assessment tool administered to direct care applicants. Two of the three staff members received a passing score which was documented in the employment record. The remaining staff member required follow-up training which was completed by the circuit. An Annual Affidavit of Compliance with Level 2 Screening Standards was completed and submitted to BSU on January 14, 2019. An interview with the administrative assistant confirmed an employment history and employment verification is completed through the Human Resources Employment System (HRES), the Central Communications Center (CCC) person involvement history report, the State Verification System (SVS) module, and the Florida Department of Law Enforcement (FDLE) Automated Training Management System (ATMS) results are reviewed.

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>	

The circuit had six staff applicable for requiring a five-year rescreening, with three of the six rescreening's completed after the staff members five-year anniversary date. One background screening was completed eight days after the staff member's five-year anniversary date, the second was completed seventeen days after the five-year anniversary date, and the third record documented the background screening was completed thirty-six days after the employee's five-year anniversary date. In this instance it was documented the information was re-submitted to the Department's Background Screening Unit twenty days after the initial submission and a new fingerprint card was required. An interview with the chief probation officer confirmed corrective action was implemented and demonstrated as the remaining three background screenings due in June and July 2019 were submitted at least ten days prior to the staff's five-year anniversary date and were completed within the required time frame. Two five-year re-screenings due in January 2019 were submitted nine business days prior to the staff member's five-year

anniversary date. One five-year re-screening due in January 2019 was submitted one business day prior to the staff five-year anniversary date.

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

There were 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>	

Five staff were applicable for pre-service training; however, only four staff were applicable for certification as the remaining staff member was other personnel services (OPS) call center screener. Each of the five staff members completed the required phase one training to include Protective Action Response (PAR), cardiopulmonary resuscitation (CPR), first aid, suicide prevention, and ethics. The four applicable staff completed phase two training and were certified. All requirements were documented in the Department’s Learning Management System (SkillPro).

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>	

A total of nine staff training records to include three juvenile probation officers (JPOs), three senior juvenile probation officers (SJPOs), and three juvenile probation officer supervisors (JPOS) were reviewed for in-service training. Each training record documented at least fifty-four hours of training to include Protective Action Response (PAR), cardiopulmonary resuscitation (CPR), first aid, ethics, and active shooter training. Each staff member completed eight hours of suicide recognition, prevention, and intervention which included two hours completed in the Department’s Learning Management System (SkillPro). Each supervisory staff completed between twenty-one and sixty-seven hours of training topics of management, leadership, personal accountability, employee relations, communication skills, and/or fiscal training. All training was documented in the Department’s Learning Management System (SkillPro). A list of in-service training was signed by the regional director and regional manager on January 14,

2019, and by the Department's Office of Staff Development and Training on May 15, 2019. An annual in-service training calendar is maintained by the circuit and is updated as changes occur.

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 circuit had ten reportable Central Communications Center (CCC) incidents since the last annual compliance review with six occurring in the past six months. All ten incidents reported to the CCC were reviewed. Three of the incidents were reported by the circuit, two were reported by staff at Volusia Regional Juvenile Detention Center, and five were reported by Headquarters staff when it pertained to the circuit. Each incident was reported within two hours of the incident occurring or the program becoming aware of the incident. There were no other documented internal incidents or grievances which should have been reported to the CCC.

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 did not have any allegations of abuse made against staff. The circuit documented a total of 176 calls were made to the Florida Abuse Hotline or the National Human Trafficking Hotline on behalf of the youth. Five of the incidents were reviewed and each allegation was accepted by the Florida Abuse Hotline and none of the allegations required a call to the Central Communications Center (CCC). The circuit ensures youth have unimpeded access to self-report alleged abuse. A review of forty-eight youth records confirmed staff report abuse allegations on behalf of the youth with no indications any instances of abuse not being reported to the Florida Abuse Hotline. Upon hire, staff acknowledge receipt of the Department of Juvenile Justice Employee Handbook, as well as the Employee Code of Ethics and Personal Responsibility. This acknowledgment is maintained in the Human Resource Employment System (HRES). A review of four personnel records confirmed this practice.

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>	

Forty records were applicable for a Community Assessment Tool (CAT) Pre-Screen. Four records documented a cannot complete CAT, and each remaining case documented a CAT was completed subsequently to the youth receiving new charges.

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>	

Six records were applicable for youth identified as a moderate-high or high-risk to re-offend according to the Community Assessment Tool (CAT), or the youth was being referred for Redirections services or residential placement was anticipated. Four records documented a Full Assessment was completed as required with the remaining two records not containing an initial CAT Full Assessment.

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

Forty records were reviewed for Community Assessment Tool (CAT) Reassessments. Four records were applicable for a youth identified as a moderate-high or high to re-offend according to the CAT had a reassessment completed at least once every 180 calendar days, as required. Sixteen of seventeen youth identified as a low or moderate risk to re-offend had a reassessment completed at least once every 180 calendar days as required. Twenty-six of twenty-seven applicable records documented a CAT Reassessment was completed when a new law violation was obtained, a new disposition, or as pre/post testing for certain delinquency interventions.

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>	

Twenty-nine of thirty-six applicable records documented a completed Massachusetts Youth Screening Instrument (MAYSI-2). Twenty-four of twenty-six records documented a need for a comprehensive assessment based on an identified need from the MAYSI-2 or other available information. Seven of nine applicable records documented the parent/guardian was provided the results of the screening and was given information as to the location of the comprehensive assessment provider. Each MAYSI-2 was administered in the Department's Juvenile Justice Information System (JJIS) by a staff member who completed the required training to administer the assessment. Two youth MAYSI-2 indicated an elevated suicide risk subscale was placed on

suicide precautions and referred for an Assessment of Suicide Risk (ASR). Each of the eighteen records applicable for a Suicide Risk Assessment Instrument (SRSI) documented the form was completed, signed by the juvenile probation officer (JPO) completing the SRSI, and contained completed entries including the summary and recommendations in the screening results sections. Six SRSI assessments documented a need for further assessment. Each youth was placed on suicide precautions and referred to the mental health department for a ASR. Each SRSI documented the detention center was notified. Two youth were released to their parent/guardian and a Suicide Risk Screening Parent/Guardian Notification Form was provided to the parent/guardian and filed in the youth's case record.

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>	

Thirty of thirty-two applicable records documented a youth was referred for a comprehensive assessment based on an identified need for further assessment. Fifteen of eighteen records documented referrals for services were made based on the recommendations of the comprehensive assessment. The three remaining three records did not have a completed referral for services. Three of four youth who were placed in secure detention contained documentation the comprehensive assessment was forwarded to the receiving detention center within fourteen days.

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>	

Twenty-five records were applicable for requiring a State Attorney Recommendation (SAR) and twenty-four records documented a completed SAR. Twenty-two SARs discussed the attitude of the youth, cooperation of the parent/guardian, ability of the parent/guardian to control the youth, attitudes of the complainant and the victim, information on the youth's involvement or association with a criminal street gang, and any available information related to mental health or substance abuse needs. Six of eight records considered the youth for non-judicial action based on charges, criminal history, and other relevant information. Twenty-three SARs were completed and submitted within the required time frame with one record documented as being late by twenty-two days. The supervisor or designee signed each SAR prior to its submission.

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>	

Twenty-one records were applicable for requiring a Pre-Disposition Report (PDR). A Pre-Screen or Full Screen Assessment was completed in each record prior to the PDR being generated. Eleven of twelve applicable records incorporated the recommendations of the Comprehensive Assessment and a copy of the assessment was attached to the PDR. Each PDR reflected treatment needs identified by the Community Assessment Tool or other sources. The PDR was

submitted to the court at least forty-eight hours prior to disposition in twenty of the twenty-one records, with one PDR documented as being submitted one day late. All twenty-one PDRs were signed by the supervisor prior to submission.

Standard 3: Intervention Services

3.01 Youth-Empowered Success (YES) Plan Development	Satisfactory Compliance
------------------------------------------------------------	--------------------------------

Staff complete the YES Plan for youth on Probation, Conditional Release, and Post-Commitment Probation.

Forty-eight records were reviewed for Youth-Empowered Success (YES) Plans. Forty-four records documented a Positive Achievement Change Tool (PACT) or Community Assessment Tool (CAT) was completed after a youth was placed on probation or released from a residential program and prior to the development of the YES Plan. Forty-one records documented the youth and the parent/guardian participated in the development of the YES Plan. Forty-five YES Plans were signed by the youth within thirty days of disposition or release from a residential program. Three YES Plans were signed beyond the thirty-day time frame with one plan signed thirty-three days, one ninety-one days late, and one 167 days late. Forty-six records were applicable for requiring a parent/guardian on the YES Plan. The remaining two records were for youth who were eighteen years of age or older. Forty-two YES Plans were signed by the parent/guardian and four plans were not signed by the parent/guardian. Forty-four records contained a YES Plan signed by the juvenile probation officer (JPO) and four YES Plans did not contain a JPO signature. Forty-four YES Plans were signed and approved by the supervisor within the required time frame. Three YES Plans were signed by the supervisor thirty-five, fifty-eight, and 167 days late. One YES Plan was not signed by the supervisor. Thirty-nine records documented the parent/guardian was provided a copy of the YES Plan within ten calendar days of being approved.

3.02 Youth Requirements/Change Goal Elements	Satisfactory Compliance
-----------------------------------------------------	--------------------------------

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).

Twelve records were applicable for youth who were identified as a moderate-high or high-risk to reoffend according to the Positive Change Achievement Tool (PACT) or Community Assessment Tool (CAT). The initial Youth-Empowered Success (YES) Plan in ten of the twelve records contained a change goal. Nine of the change goals addressed one of the youth's top three criminogenic needs. Four of five applicable records for youth identified as a high-risk to reoffend documented an evidence-based intervention. The remaining record did not document barriers to the youth receiving an evidence-based intervention; however, the youth was in an in-patient treatment program. A total of 291 youth requirements and goals were listed in the initial YES Plan with 290 requirements containing the required intervention plan elements for the youth, parent/guardian, and juvenile probation officer (JPO).

3.03 Pre-Release Notification (PRN)	Satisfactory Compliance
--------------------------------------------	--------------------------------

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

Nine records reviewed were applicable for a youth who was released from a residential commitment program. Each record documented the receipt of the Pre-Release Notification (PRN) in the case notebook module. Seven records documented the receipt of the discharge

summary and three applicable records documented receipt of other pertinent documentation from the residential program. Six records documented the juvenile probation officer (JPO) utilized the Request for Release Letter to notify the committing judge of the program's intent to release and a plan for aftercare supervision. Eight records documented the Request for Release Letter, PRN, and a copy of the program's Release Discharge Summary was submitted to the judge within three working days of receiving the PRN. None of the cases reflected the court denied the request for the release.

3.04 Transitional Planning/Reintegration (Critical)	Satisfactory Compliance
<i>The juvenile probation officer (JPO) will actively participate in the transitional planning process for youth who are being released from a residential program.</i>	

Nine records were applicable for a youth who was released from a residential commitment program. The case notebook module in the Department's Juvenile Justice Information System (JJIS) documented the juvenile probation officer (JPO) maintained contact with the parent/guardian thirty-three of the forty-three months while a youth was in a residential placement. The case notebook documented the JPO participated in treatment team meetings in thirty of the forty-three months. The case notebook documented the JPO conducted a follow-up with the program and the youth within seventy-two hours of the missed treatment team meeting in nine of the missed thirteen months. Each record documented the JPO assisted the parent/guardian and the program staff to ensure communication was conducive to the youth's successful completion of the program. Each record also reflected the JPO made contact and participated in the youth's transition conference. The case notebook documented the completion of a Community Re-Entry Team (CRT) Meeting. The participants in eight of the nine records, despite documentation confirming each youth had a CRT meeting prior to release from residential placement. Since the updated CRT policy went into effect, the five applicable records documented the JPO or circuit transition liaison sent a CRT meeting notification to all required participants using Microsoft Outlook calendar fourteen days prior to the youth's scheduled CRT meeting date. Case records documented the youth, parent/guardian, JPO, education liaisons, transition service providers, Career Source, and residential staff were invited to the CRT meetings. One record was applicable for a youth identified as a Crossover Youth and documented the involvement of the Department of Children and Families. Each record contained a CRT Case Summary which addressed the appropriate school placement, living arrangements, needed referrals for community-based services, transportation arrangements, needs or barriers the family may have identified, and insurance.

3.05 Referrals for Intervention and Treatment Services (Critical)	Limited Compliance
<i>Staff shall ensure all referrals for services are made as indicated by the court order or as negotiated to address criminogenic needs identified by the 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.</i>	

Forty-eight youth records were reviewed for referrals for intervention and treatment services. Thirty-five records identified the youth and the parent/guardian were provided referral

information or were referred for services. Twenty-seven of thirty-four records documented referrals for services were made within ten calendar days at the time of the Youth-Empowered Success (YES) Plan approval. Two referrals for services were completed beyond the ten-calendar day time frame after the approval of the Youth-Empowered Success (YES) Plan. Five referrals for services were not completed. Fourteen of the applicable thirty-nine records did not contain a follow-up by the juvenile probation officer (JPO) with the service provider within thirty calendar days of the approval of the YES Plan, when a youth was referred for or already participating in services. Six of the fourteen applicable records did not document any follow-up with the provider and eight cases documented late follow-up with the provider. Twenty-two records reflected the JPO received, reviewed, and documented written or verbal progress reports from the service provider on a regular basis. Seven records not containing progress reports or updates from the service provider on a regular basis. The JPO followed up on progress reports as needed in eighteen of nineteen applicable records.

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

During the first ninety-day supervision period the Youth-Empowered Success (YES) Plans required a total of 296 action steps. The case notebook documented the juvenile probation officers (JPO) completed 218 of the 296 identified action steps within the first ninety-day period. Within the second ninety-day period, the JPO completed thirty-five of fifty-three identified action steps. Forty-four records documented face-to-face interactions with the youth, the parent/guardian, and providers as required by the contact standards. Forty-five records documented telephone contacts with the youth, the parent/guardian, and providers as required. Thirty records reflected the JPO documented a review of written or verbal reports from collateral sources, such as educational institutions, employers, counselors, and electronic databases.

3.07 Youth and Parent/Guardian Contact	Satisfactory Compliance
<i>Juvenile probation officer (JPO) staff shall maintain on-going and regular contact with the youth and parent/guardian.</i>	

Forty-eight records were reviewed for youth and parent/guardian contacts. Thirty of thirty-two records applicable for a youth identified as a low or moderate-risk to re-offend documented the juvenile probation officer (JPO) made face-to-face contact with youth each month. One youth record was not applicable for face to face contact due to the youth being in residential placement. Twenty-eight of thirty-three records documented contact with the parent/guardian each month during the first ninety-day supervision period. Eight of ten records applicable for a youth identified as a moderate-high or high-risk to re-offend documented the JPO made face-to-face contact with the youth each month. One youth record was not applicable for face to face contact due to the youth being in residential placement. During the second ninety-day review period eight of nine applicable records documented the JPO maintained face-to-face contact with the youth at least once a month for youth identified as low or moderate-risk to re-offend. Seven of nine records documented contact with the parent/guardian each month during the second ninety-day supervision period.

Three records for a youth identified as a moderate-high or high-risk to re-offend were applicable for a second ninety-day review period. Two records documented the JPO made face-to-face

contact with the youth each month as required. One record was not applicable for face to face contact due to the youth being in residential placement. Each applicable record documented the JPO made telephone contact with the parent/guardian each month during the second ninety-day supervision period. None of the case records were applicable for a third or fourth ninety-day supervision period.

3.08 Ninety-Day Supervisory Reviews	Satisfactory Compliance
<i>Cases under supervision (probation, conditional release (CR), or post-commitment probation (PCP)) are reviewed by the supervisor at least once every ninety calendar days.</i>	

Forty-eight records were reviewed for ninety-day supervisory reviews. Each record reflected the juvenile probation officer supervisor (JPOS) or designee documented a review of the Youth-Empowered Success (YES) Plan in the case notes. Thirty of thirty-four records applicable for requiring a ninety-day supervisory review documented the JPOS completed the supervisory review within the required time frame. Four records documented the review was completed late. One record was documented as one day late, one was two days late, one was seven days late, and the remaining record was documented forty-four days late. Four records applicable for requiring a second ninety-day supervisory review documented the JPOS completed the supervisory review within the required time frame.

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

Thirty-eight records were applicable for a ninety-day Youth-Empowered Success (YES) Plan update. Twenty-eight records were applicable for requiring an update to the youth requirements and twenty-seven records documented the requirements were updated as required prior to the first ninety-day YES Plan update. Six of the seven records applicable for a change goal reflected the change goal was updated prior to the first ninety-day YES Plan update. Thirty-four of the thirty-five records documented target dates were updated and thirty-three records documented a new YES Plan was saved in JJIS prior to the first ninety-day YES Plan update. Documentation reflected when YES Plan updates required the input of the youth and the parent/guardian. The discussion was documented in the case notes. Two records were applicable for a second ninety-day review period which reflected the requirements were updated as required prior to the second ninety-day YES Plan update. The one applicable change goal was updated prior to the first ninety-day YES Plan update. Each record documented target dates were updated and a new YES Plan was saved in the Department's Juvenile Justice Information System (JJIS) prior to the second ninety-day supervisory review and at least within ninety days of the first updated YES Plan.

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.

Nine closed records were reviewed for termination of supervision. Six records reflected the termination was being requested for early termination, two unsuccessful terminations, and one loss of jurisdiction. Each record documented a progress report was completed when termination was requested or the Department lost jurisdiction. One record was applicable for a youth on conditional release; however, the record did not contain a Pre-Release Notification (PRN) with the progress report when termination was requested. Five of the nine records were applicable for youth who was identified as a moderate-high or high to re-offend according to the Positive Achievement Change Tool (PACT) or Community Assessment Tool (CAT). Four records reflected the Comparative Risk Factor and/or Comparative Protective Factor Scores were included or attached to the progress report when requesting termination or a loss of jurisdiction. Each record documented law enforcement was contacted prior to requesting termination to determine if there were outstanding warrants or charges for the youth. One record applicable for a loss of jurisdiction reflected the juvenile probation officer (JPO) notified the court at least fifteen working days prior to the loss of jurisdiction. Each record documented within five working days of receipt of the court's termination order or date of loss of jurisdiction, the JPO updated the Department's Juvenile Justice Information System (JJIS). Eight of the nine records contained documentation the JPO notified the youth and the parent/guardian in writing the youth was no longer under supervision. Four of the five applicable records documented the JPO notified the youth and the parent/guardian when the court retained jurisdiction for unpaid restitution and/or court fees. Each progress report submitted was signed by the supervisor and each date of admission and termination correlated with the Department's JJIS.