

STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

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

Probation and Community Intervention - Circuit 8

Department of Juvenile Justice

(State-Operated)

14107 US Highway 441, Suite 200

Alachua, Florida 32615

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:

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)
Laura Bridgeman, DJJ Probation, Government Operations Consultant III, North Region Program Operations (Standards 2 and 3)
Woody Douge, DJJ Probation, Juvenile Probation Officer, Circuit 7 (Standards 2 and 3)
Amy Tyson, Office of Program Accountability, Regional Monitor (Standards 2 and 3)

Program Name: Probation and Community Intervention - Circuit 8
 Provider Name: Department of Juvenile Justice
 Location: Alachua County / Circuit 8
 Review Date(s): August 28-30, 2018

MQI Program Code: 1183
 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.

Persons Interviewed

- | | | |
|--|--------------------------------|--|
| <input checked="" type="checkbox"/> Program Director | _____ # Case Managers | _____ # Maintenance Personnel |
| <input type="checkbox"/> DJJ Monitor | _____ # Clinical Staff | 3 # Program Supervisors |
| <input type="checkbox"/> DHA or designee | _____ # Food Service Personnel | 1 # Other (listed by title): Assistant |
| <input type="checkbox"/> DMHCA or designee | _____ # Healthcare Staff | Chief Probation Officer |

Documents Reviewed

- | | | |
|--|---|---|
| <input type="checkbox"/> Accreditation Reports | <input type="checkbox"/> Fire Prevention Plan | <input type="checkbox"/> Vehicle Inspection Reports |
| <input type="checkbox"/> Affidavit of Good Moral Character | <input type="checkbox"/> Grievance Process/Records | <input type="checkbox"/> Visitation Logs |
| <input checked="" type="checkbox"/> CCC Reports | <input type="checkbox"/> Key Control Log | <input type="checkbox"/> Youth Handbook |
| <input type="checkbox"/> Confinement Reports | <input type="checkbox"/> Logbooks | _____ # Health Records |
| <input type="checkbox"/> Continuity of Operation Plan | <input type="checkbox"/> Medical and Mental Health Alerts | _____ # MH/SA Records |
| <input type="checkbox"/> Contract Monitoring Reports | <input type="checkbox"/> PAR Reports | 6 # Personnel Records |
| <input type="checkbox"/> Contract Scope of Services | <input type="checkbox"/> Precautionary Observation Logs | 15 # Training Records/CORE |
| <input type="checkbox"/> Egress Plans | <input type="checkbox"/> Program Schedules | 10 # Youth Records (Closed) |
| <input type="checkbox"/> Escape Notification/Logs | <input type="checkbox"/> Sick Call Logs | 29 # Youth Records (Open) |
| <input type="checkbox"/> Exposure Control Plan | <input type="checkbox"/> Supplemental Contracts | 1 # Other: Screening Logs |
| <input type="checkbox"/> Fire Drill Log | <input type="checkbox"/> Table of Organization | |
| <input type="checkbox"/> Fire Inspection Report | <input type="checkbox"/> Telephone Logs | |

Surveys

0 # Youth **0** # Direct Care Staff **0** # Other: _____

Observations During Review

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

Comments

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

Standard 1: Management Accountability
Probation and Community Intervention Rating Profile

Indicator Ratings

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

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

Standard 2: Assessment Services Probation and Community Intervention Rating Profile

Indicator Ratings

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

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

Standard 3: Intervention Services Probation and Community Intervention Rating Profile

Indicator Ratings

Standard 3 - Mental Health and Substance Abuse Services		
3.01	Youth-Empowered Success (YES) Plan Development	Satisfactory
3.02	Youth Requirement/PACT Goal Elements	Satisfactory
3.03	* Transitional Planning/Reintegration	Satisfactory
3.04	* Referrals for Intervention and Treatment Services	Satisfactory
3.05	YES Plan Implementation/Supervision	Limited
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).

Strengths and Innovative Approaches

- The Alachua County probation office initiated an Adopt-a-Park program in one of the high crime neighborhoods in the Duval community. The program provides a community service work-site and environmental education. This is the third year of the Adopt-a-Park program in Alachua.
- In an effort to combat a long length of stay, Circuit 8 has implemented a Probation Orientation, which is held monthly for youth and families to attend. The purpose of the orientation is to send a united message to the youth and parents/guardians. The circuit has invited law enforcement, community partners, and motivational speakers to participate in the orientation. In addition, an intake orientation is held for youth in the detention center, as well as, in the community to provide information on the intake system with the Department and the juvenile court process.
- The Effective Principles in Community Supervision (EPICS) rollout occurred on May 1, 2018 and the three-day training for all staff occurred May 8-10, 2018. The Circuit's goal is to be fully operational by the end of 2018 and utilize this service with all moderate-high and high-risk youth.

Standard 1: Management Accountability

Overview

Probation and Community Intervention - Circuit 8 serves youth in Alachua, Baker, Bradford, Gilchrist, Levy, and Union Counties. There are three probation units in Circuit 8. One unit is located in Alachua at the Alachua Regional Service Center, one unit is located in Gainesville at the Alachua Juvenile Community Resource Center, and the third unit is located in Trenton with offices in Starke and MacClenny. One of the units is divided into three sections based on geography, with one serving youth in Levy and Gilchrist Counties, one serving youth in Bradford and Union Counties, and one serving youth in Baker County.

Circuit 8 staffing consists of one chief probation officer, one assistant chief probation officer, one reform specialist, one administrative assistant II, three juvenile probation officer supervisors (JPOS), five senior juvenile probation officers (SJPO), seventeen juvenile probation officers (JPO), two secretary specialists, and five other personnel services (OPS) detention screeners. Circuit 8 had two vacancies at the time of the annual compliance review to include two JPOs.

JPOSs are responsible for reviewing and signing all documentation submitted to the court, including but not limited to, the Detention Risk Assessment Instruments (DRAI), State Attorney Recommendations (SAR), Pre-Disposition Reports (PDR), Pre-Release Notifications (PRN), and progress reports. The supervisors are also responsible for reviewing Youth Empowered Success (YES) Plans in the Department's Juvenile Justice Information System (JJIS) and completing case reviews for all youth assigned to their unit.

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.

Since the last annual compliance review, the circuit has hired one juvenile probation officer (JPO), three other personnel services (OPS) detention screeners, and two secretary specialists. The circuit also had two volunteer interns since the last annual compliance review. A check with the Department's Background Screening Unit (BSU) reflected an initial background screening and clearance was obtained for each hired staff and intern prior to starting with the Department. Each staff member and intern was given a rating of eligible by the BSU. The circuit submitted an Affidavit of Compliance with Level II Screening Standards to the BSU on January 8, 2018, meeting the annual requirement.

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

Three staff members were applicable for a five-year rescreening based on their date of hire with the Department. All three staff members had a rescreening completed no more than one year prior to their anniversary date. Each staff member was given a rating of eligible by the Department's Background Screening Unit (BSU).

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

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

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

Since the last annual compliance review, the circuit has hired one juvenile probation officer (JPO) and three other personnel services (OPS) detention screeners. One JPO was hired just prior to the last annual compliance review; however, the certification requirement within 180-days of hire occurred during this annual compliance review period. Two of the JPOs were applicable for completion of both Phase One and Phase Two of the certification requirements. The three OPS detention screeners are not applicable for certification. The remaining staff member was previously a certified JPO with the Department and had a break in employment for approximately thirteen months. The returning staff member completed Protective Action Response (PAR), cardiopulmonary resuscitation (CPR), first aid, a review of program operations, and in-service training to include professionalism and ethics, suicide prevention, adolescent behavior, risk and needs assessment, and supervision within sixty days of their return to the Department. The two JPO staff applicable for certification requirements completed Phase One and Phase Two of their training, in accordance with Florida Administrative Code, and were certified within 180 days of their hire date. The remaining three other personnel services (OPS) detention screeners completed trainings in accordance with Department policy. All training completed was documented in the Department's Learning Management System (SkillPro).

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

Nine staff training records were reviewed for in-service training, which included three juvenile probation officer supervisors (JPOS), three senior juvenile probation officers (SJPO), and three juvenile probation officers (JPO). Each staff member exceeded the required twenty-four hours of annual in-service training, with hours ranging from fifty hours to 366 hours. Each staff member completed trainings to include at least six hours of suicide recognition, prevention and intervention training, professionalism, and ethics. One of the staff members was identified as the circuit's Protective Action Response (PAR), and cardiopulmonary resuscitation (CPR), and first aid instructor. The remaining eight staff completed a PAR update, CPR, and first aid training. The North Region submitted a list of in-service trainings to the Office of Staff Development and Training on February 6, 2017, which listed the course names, descriptions, objectives, and required training hours. In addition to the regional plan, the circuit maintained an annual in-service calendar for staff, which is updated as changes occur. Each of the three supervisory staff completed more than eight hours of supervisory training in the areas of management, leadership, personal accountability, employee relations, communication skills, and fiscal matters. All training was documented in the Department's Learning Management System (SkillPro).

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

Incidents reported to the Central Communications Center (CCC) for the last six months were reviewed. The circuit had four incidents reported to the CCC, with three of the incidents pertaining to an unauthorized release, and one due to media attention for a medical incident. Each incident was reported to the CCC within two hours of the incident occurring or within two hours of the individual becoming aware of the incident. There was no documentation or evidence of any internal incidents or grievances which would have required additional incidents reported to the CCC.

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

A review of the Central Communications Center (CCC) incidents, youth and staff records, and provided documentation did not reflect any allegations of abuse substantiated against staff.

Documentation provided by the circuit indicated ten reports were made to the Florida Abuse Hotline by the juvenile probation officers (JPO) on behalf of the youth. Only one of the ten reports were applicable for requiring a report to the CCC. The CCC was contacted by a detention center prior to the JPO becoming aware of the incident. The JPO did contact the CCC to ensure the incident was previously reported. Upon hire, all staff are given and sign the Department's Receipt of Employee Handbook and Oath of Loyalty form, which acknowledges their receipt of the code of conduct. All youth have unimpeded access to self-report alleged abuse to the Florida Abuse Hotline, if under the age of eighteen, or to the CCC if they are eighteen years of age or older. Documentation reviewed in the youth records did not reflect any instances of abuse not reported to the Florida Abuse Hotline.

Standard 2: Assessment Services

Overview

Juvenile probation officers (JPO) are responsible for completing forms in the Department's Juvenile Justice Information System (JJIS), including the Positive Achievement Change Tool (PACT) Pre-Screen, PACT Full Assessment, PACT Mental Health and Substance Abuse Screening Report and Referral Form, Massachusetts Youth Screening Instrument – Second Version (MAYSI-2), State Attorney Recommendation (SAR), and Pre-Disposition Report (PDR). All the forms, except for the PDR, are typically completed during the initial intake conference or detention screening.

The circuit has one detention screening unit. Detention screening in the circuit is accomplished at the Alachua Juvenile Community Resource Center (AJCRC). Detention screening for Circuit 3 and Putnam County in Circuit 7 also occurs at the AJCRC. Youth presented for detention screening will have a Detention Risk Assessment Instrument (DRAI), a PACT Pre-Screen, a PACT Mental Health and Substance Abuse Screening Report and Referral form, a MAYSI-2, a Suicide Risk Screening Instrument (SRSI) and, if meeting criteria for secure detention, a State Attorney Recommendation (SAR) completed by the detention screening unit. The remaining units in the circuit complete all other intake functions.

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.

Twenty-nine records were reviewed for a Positive Achievement Change Tool (PACT) Pre-Screen. Twenty-three records were applicable for a youth receiving a new law violation. Six records were not applicable, as the youth were on post-commitment probation or conditional release supervision and had not received a new law violation. The Department's Juvenile Justice Information System (JJIS) reflected a PACT Pre-Screen was completed in twenty-two records, with one record showing a "Cannot Complete PACT" documented.

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.

Eight records were applicable for a Positive Achievement Change Tool (PACT) Full Assessment during intake services based on a moderate-high or high-risk to re-offend designation. One record reflected a PACT Pre-Screen was initially completed; however, a PACT Full Assessment was required due to the PACT Pre-Screen reflecting the youth to be a moderate-high risk to re-offend. A PACT Full Assessment was completed for this youth. Each record contained a completed PACT Full Assessment in the Department's Juvenile Justice Information System (JJIS). A PACT was completed prior to the development of the Youth Empowered Success (YES) Plan and Pre-Disposition Reports (PDR).

2.03 PACT Reassessment**Satisfactory Compliance**

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

Twenty-three of the twenty-nine reviewed records were applicable for a Positive Achievement Change Tool (PACT) Reassessment. Thirteen records were applicable for a new law violation, a new disposition, or pre- and post-testing for certain delinquency interventions. PACT Reassessments were completed in all applicable records and at intervals of six months or less. The PACT Reassessment results were reflective of the 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**

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).

Thirteen records were applicable for a Positive Achievement Change Tool (PACT) Mental Health and Substance Abuse Screening Report and Referral Form, and a Massachusetts Youth Screening Instrument – Second Version (MAYSI-2). Twelve of the thirteen records contained a completed PACT Mental Health and Substance Abuse Report and Referral Form. In the remaining record, case notes documented the youth refused to attend the intake conference; therefore, the form could not be completed during the intake process. Each of the thirteen records contained a completed MAYSI-2. In the one record where the youth refused to attend the intake conference, the MAYSI-2 was completed when the juvenile probation officer met with the youth after being placed on probation supervision. Each MAYSI-2 was completed in a confidential manner. In three instances, the MAYSI-2 results conflicted with the PACT results in identifying a need for further assessment. One of the three records contained a PACT Mental Health and Substance Abuse Screening Report and Referral Form which documented a need for the override based on the information on the MAYSI-2. The remaining two records did not contain the MAYSI-2 information; however, all three youth were referred for services. Eleven of the thirteen MAYSI-2 assessments indicated a need for further assessment and a referral was completed in each record. Six youth were released to their parent/guardian and five records indicated the parents/guardians were provided the results of the PACT or MAYSI-2. Five of the six remaining records contained documentation the PACT results were forwarded to the receiving detention center.

Four MAYSI-2 assessments indicated an elevated risk of suicide and each youth was placed on suicide precautions and referred for an Assessment of Suicide Risk (ASR). A Suicide Risk Screening Instrument (SRSI) was completed in all thirteen applicable records. Twelve of the SRSIs had a complete entry to include the summary and recommendations in the screening results section. Ten of the thirteen SRSIs had a response which required a youth to be placed on suicide precautions. Six of the ten youth identified as a suicidal risk remained in the custody of the Department and were placed on suicide precautions. A suicide alert was entered into the Department’s Juvenile Justice Information System (JJIS) for each youth. The remaining four youth who had a response which required a youth to be placed on suicide precautions were released to the custody of a parent/guardian. Each record contained documentation the

parent/guardian was provided the Suicide Risk Screening Parent/Guardian Notification Form with a recorded signature.

2.05 Comprehensive Assessment (Critical)	Satisfactory Compliance
<i>Youth shall be referred for a comprehensive assessment (e.g., TASC/SAMH) if the PACT Mental Health and Substance Abuse Screening Report and Referral Form indicates a need for further assessment.</i>	

Thirteen records were applicable for a referral for a comprehensive assessment based on the results of the Positive Achievement Change Tool (PACT) Mental Health and Substance Abuse Screening Report and Referral Form, and/or a Massachusetts Youth Screening Instrument – Second Version (MAYSI-2). A referral for services based on the recommendations of the comprehensive assessment was completed in eleven applicable records. A review of two applicable youth who were detained in secure detention found one comprehensive assessment was forwarded to the receiving detention center.

2.06 State Attorney Recommendation (SAR)	Satisfactory Compliance
<i>Staff shall complete the State Attorney Recommendation (SAR) (Form DJJ/PACTFRM 3) to document the Department's recommendation of judicial or non-judicial handling of the case, unless waived pursuant to an Interagency Agreement with the local State Attorney's Office (SAO), or the SAO makes a filing decision prior to the twenty-day deadline for non-detained youth.</i>	

Documentation reflected eleven youth were screened for secure detention; however, a total of twelve records were applicable for requiring a State Attorney Recommendation (SAR). In each record, a SAR was completed after the Positive Achievement Change Tool (PACT) was completed. Information identified by the PACT was included in the narrative sections of the SAR in ten of the twelve SARs. Six youth were identified as a low risk to re-offend based on the PACT and, in two records, the youth were considered for non-judicial action or diversion. The remaining four SARs recommended judicial handling; however, each indicated the recommendation was due to the seriousness or nature of the offense, or the youth's prior history with diversion or the Department. In two of the records, the recommendation did not reflect the youth's risk to re-offend; however, it was explained in the narrative of the SAR. Each applicable SAR was submitted within the required timeframe and was initialed by the supervisor prior to submission.

2.07 Pre-Disposition Report (PDR)	Satisfactory Compliance
<i>Staff shall prepare the Pre-Disposition Report (PDR) (Form DJJ/PACTFRM 5) when ordered by the court, detailing the Department's recommendation for disposition and interventions to address needs in the most appropriate, least-restrictive environment reasonably ensuring public safety.</i>	

Twelve records were applicable for a Pre-Disposition Report (PDR). Nine of the twelve records reflected the youth were a moderate-high or high-risk to re-offend based on the Positive Achievement Change Tool (PACT). Each record indicated the PDR was completed after the PACT assessment. Each applicable PDR contained a recommendation which reflected treatment needs identified by the PACT or other sources. Eleven of the twelve PDRs were submitted to the court at least forty-eight hours prior to the disposition hearing. The remaining

PDR was submitted to the court approximately forty-one hours prior to the disposition hearing. Each PDR was signed by the supervisor or designee prior to submission.

Standard 3: Intervention Services

Overview

Juvenile probation officers (JPOs) are responsible for completing Youth-Empowered Success (YES) Plans, referrals for services for youth, and documenting case activities in the Department's Juvenile Justice Information System (JJIS) case notebook module. Once a youth is placed on probation, post-commitment probation, or conditional release, the assigned JPO has thirty days to develop a YES Plan with the youth and their parent/guardian. Youth designated as either moderate-high or high-risk to reoffend as the result of a Positive Achievement Change Tool (PACT) Assessment are required to have a PACT Change Goal incorporated into their YES Plan. Additionally, all youth designated as high-risk to reoffend must be referred to an evidence-based service, which is also to be included in the YES Plan. The YES Plans are required to be updated by the JPO every ninety days and subsequently approved by the juvenile probation officer supervisor (JPOS). JPOs are responsible for following the circuit's effective response system when youth are non-compliant with YES Plan goals and/or action steps. JPOs submit progress reports to the court to justify termination of supervision when youth have successfully completed all supervision requirements.

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.

Twenty-nine records were reviewed for Youth Empowered Success (YES) Plan development. Each record was applicable for requiring a YES Plan within thirty days of disposition or within thirty days of release from a residential commitment program. Twenty-two youth were placed on probation supervision and seven youth were released from a residential commitment program to include six youth on post-commitment probation (PCP) and one youth on conditional release (CR). Twenty-eight records had a Positive Achievement Change Tool (PACT) completed prior to the generation of the YES Plan. In one record, a PACT Pre-Screen was completed; however, a PACT Full Assessment was required due to the PACT Pre-Screen reflecting the youth to be a moderate-high risk to re-offend. A PACT Full Assessment was not completed prior to the initial YES Plan being generated. A subsequent YES Plan was completed and approved in the Juvenile Justice Information System (JJIS) and indicated a PACT Full Assessment was completed. Twenty-eight records documented the YES Plan was developed with the youth and parent/guardian. The YES Plans were signed by the youth, parents/guardians, juvenile probation officers (JPO), and the juvenile probation officer supervisors (JPOS) within thirty days of disposition or placement after residential commitment in twenty-eight of the twenty-nine applicable records. One record reflected a YES Plan was completed in the Department's Juvenile Justice Information System (JJIS) and signed by all parties; however, the YES Plan was rejected by the JPOS in JJIS. A subsequent YES Plan was generated and approved in JJIS, but a copy of the approved and signed YES Plan was not documented in the record. Twenty-seven records documented the youth and parent/guardian were provided a copy of the YES Plan.

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

Twenty-nine records were reviewed with a total of 253 youth requirements and Change Goal elements. A total of 234 youth requirements in the initial Youth Empowered Success (YES) Plans contained the intervention elements of who and what for the youth and parent/guardian. A total of 228 youth requirements contained the intervention elements of who, what, and how often for the juvenile probation officer (JPO). A total of 218 youth requirements contained appropriate target dates for completion. Twelve records were applicable for requiring a Change Goal in the initial YES Plan due to the PACT reflecting the youth was a moderate-high or high-risk to re-offend. Eleven YES Plans contained a Change Goal, which addressed one of the youth's top three criminogenic needs as identified by the PACT. The one remaining YES Plan did not contain a Change Goal. In this case, a PACT Pre-Screen was completed instead of the required PACT Full Assessment. A subsequent YES Plan indicated a PACT Full Assessment was completed and the addition of a Change Goal after the PACT was completed. Three records which identified youth as a high-risk to re-offend on the PACT contained an evidence-based intervention targeting one of the youth's top three criminogenic needs. There were no barriers documented for any youth not being able to receive evidence-based services.

3.03 Transitional Planning/Reintegration (Critical)	Satisfactory Compliance
<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>	

Seven records were applicable for transitional planning for youth being released from a residential commitment program. Six youth were released and placed on post-commitment probation (PCP) and one released on conditional release (CR) supervision. During the annual compliance review period, documentation reflected the juvenile probation officer (JPO) made contact with the parent/guardian in thirty-two of the applicable forty-four months. Case notes documented the JPO participated in monthly treatment team meetings with the residential program in thirty-two months of an applicable forty-four months. Documentation reflected the JPO conducted a follow-up with the residential program and the youth within seventy-two hours of the treatment team meeting in five of the twelve missed treatment team meetings. Each record documented the JPO participated in the transition conference and made contact with the youth during the transition phase. Five of the seven records contained a copy of the transition plan. The JPO participated in the exit conference from the residential program in six of the seven records. Each record contained a case note documenting the Pre-Release Notification (PRN) was received by the JPO and submitted to the court within three days of receipt. A Community Reentry Team (CRT) was held for all seven youth prior to their release from residential placement. Each initial Youth Empowered Success (YES) Plan addressed recommendations made by the residential program during transition. Referrals for services were made for needs identified at the transition and exit conferences. The JPO followed-up with the service provider within thirty days of the aftercare referral in six of seven records.

3.04 Referrals for Intervention and Treatment Services (Critical)	Satisfactory Compliance
<p><i>Staff shall ensure all referrals for services are made as indicated by the court order or as negotiated to address criminogenic needs identified by the PACT (for youth who are Moderate-High or High risk to reoffend), and youth identified as in need of further assessment on the PACT Mental Health and Substance Abuse Report and Referral Form are referred for and receive a Comprehensive Assessment. Referrals for mental health and substance abuse treatment services are based upon Comprehensive Assessment findings and recommendations and the youth's YES Plan. Staff shall develop a follow-up and monitoring plan for all referrals for treatment made as a result of the Comprehensive Assessment and YES Plan. If referred for services, staff follows up with the service provider within thirty days to ensure the youth and parent/guardian have taken the appropriate steps to initiate services. Staff receives, reviews, and documents written and verbal progress reports from the provider. Staff shall act upon negative reports, such as missed appointments or lack of participation, and document the response in the case notes.</i></p>	

Twenty-seven records were applicable for referrals for implementation and treatment services. Referrals for services were made within ten calendar days of the Youth Empowered Success (YES) Plan being approved in nineteen records. Seven referrals were completed late ranging from three days to eight days with one referral being fifty-three days late. One referral was not completed. Twenty-one records documented the juvenile probation officer (JPO) conducted a follow-up with the service provider within thirty calendar days of the YES Plan being approved to verify enrollment and initiation of services. One record did not contain documentation follow-up was conducted and five records documented late follow-up with the provider. The late follow-up with provider ranged from five days to fifty-two days. Twenty-one of twenty-four records reflected the JPO received, reviewed, and documented progress reports from the provider in case notes. In twelve of fifteen instances, the JPO followed-up on the progress reports for any missed appointments, non-participation, or other negative reports.

3.05 YES Plan Implementation/Supervision	Limited Compliance
<p><i>Youth on supervision (Probation, Conditional Release, or Post-Commitment Probation) are supervised in a manner ensuring compliance with the court order and the completion of the YES Plan (Youth Requirements and PACT Goals). Case notes demonstrate compliance (or attempted compliance) with youth, parent/guardian, and staff action steps contained in the YES Plan.</i></p>	

Twenty-nine applicable records were reviewed for Youth Empowered Success (YES) Plan implementation and supervision. Each record documented face-to-face interactions with the youth, parent/guardian, and providers. Twenty-eight records documented telephone contacts with the youth, parent/guardian, and providers. Twenty-six records documented a review of written or verbal progress reports from collateral sources. A total of 323 juvenile probation officer (JPO) action steps were required by the YES Plan within the first ninety-day supervision period. Of the 323 action steps, documentation reflected the JPO completed 158 of the required action steps. In the second ninety-day period the JPO completed seventeen of fifty-three required action steps. None of the records were applicable for a post 180-day review period.

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

Cases under supervision (probation, conditional release, post-commitment probation) are reviewed by the supervisor at least once every ninety calendar days. The supervisor ensures staff review any instructions given during the review, and ensures they were followed during the subsequent review.

Twenty-nine records reflected the juvenile probation officer supervisor (JPOS) documented a review of the Youth Empowered Success (YES) Plan in the case notes. Of the twenty-four records applicable for a supervisory case review within the first ninety-day period, twenty-three records documented the JPOS conducted a supervisory case review. The remaining record documented the supervisory review was one day late. Eight records were applicable for requiring a supervisory case review at least once during the second ninety-day supervision period. Each record reflected a supervisory case by the JPOS was completed, as required.

3.07 Ninety-Day YES Plan Updates**Satisfactory Compliance**

Staff adjust the YES Plan to reflect any new needs and progress made during the course of supervision. Staff must make necessary updates to Youth Requirements and PACT Goals and save a new YES Plan in the Juvenile Justice Information System (JJIS) prior to ninety-day supervisory reviews. When updates are made to the YES Plan reasonably requiring the input of the youth and parent/guardian, this discussion is clearly documented in the case notes. The case notes clearly document any communication regarding the YES Plan.

Twenty-four records were applicable for ninety-day Youth Empowered Success (YES) Plan updates. Twenty-two records had updates to the youth requirements in the Department's Juvenile Justice Information System (JJIS) prior to the first ninety-day YES Plan update. Change Goals were updated in JJIS prior to the ninety-day review in nine of ten applicable records. Target dates for sanctions were updated and a new YES Plan was saved in JJIS prior to the ninety-day supervisory review in each record. Eight records indicated YES Plan updates required the input of the youth and parent/guardian and the discussion was clearly documented in case notes for each record. One record was applicable for a second ninety-day YES Plan update. The youth requirements, change goal, and target dates were updated in JJIS prior to the supervisory review. An updated YES Plan was generated in JJIS prior to the supervisory review and at least within ninety days of the first updated YES Plan.

3.08 Termination of Supervision**Satisfactory Compliance**

The JPO requests termination for youth on Probation, Conditional Release, or Post-Commitment Probation upon successful completion of court-ordered sanctions and substantial compliance with restitution and/or court fees. Termination must also be requested if the Department is losing jurisdiction because the youth has reached the maximum age provided in statute or based on the maximum period of supervision applicable to the charge.

Ten closed records were reviewed for youth who were terminated from supervision. Seven records reviewed were for youth who were on probation supervision and three records reviewed were for youth who were on post-commitment probation supervision. Seven records contained a progress report requesting early termination and three records contained a progress report notifying the court at least fifteen business days prior to the loss of jurisdiction. A comparative risk factor score report, and/or comparative protective factor score report for youth designated

as a moderate-high or high-risk to re-offend, in accordance with the Positive Achievement Change Tool (PACT), was included in or with the progress report in four of five applicable cases. Each record documented the juvenile probation officer (JPO) conducted a check with local law enforcement to determine if the youth had any outstanding warrants or charges. Nine of the ten records contained documentation the JPO notified the youth and parent/guardian in writing indicating the youth was no longer under the Department's supervision. Eight of nine records applicable for the court retaining jurisdiction for court fees and/or restitution contained documentation the JPO notified the youth and parent/guardian of the court's order. The Department's Juvenile Justice Information System (JJIS) was updated within five working days of receipt of the court's termination order or the date of loss of jurisdiction in each record.

Program Name: Probation and Community Intervention - Circuit 8
Provider Name: Department of Juvenile Justice
Location: Alachua County / Circuit 8
Review Date(s): August 28-30, 2018

MQI Program Code: 1183
Contract Number: N/A
Number of Beds: N/A
Lead Reviewer Code: 167

Overall Rating Summary

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

Limited Ratings	Failed Ratings
3.05 YES Plan Implementation/Supervision	