STATE OF FLORIDA DEPARTMENT OF JUVENILE JUSTICE

BUREAU OF MONITORING AND QUALITY IMPROVEMENT PROGRAM REPORT FOR

Probation and Community Intervention - Circuit 2

Department of Juvenile Justice
(State-Operated)
2020 Capital Circle S.E.
Tallahassee, Florida 32399

Review Date(s): July 16-19, 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:

Craig Swain, Office of Program Accountability, Lead Reviewer (Standard 1)
Jill Foy, Office of Program Accountability, Regional Monitor (Standard 2 & 3)
Dione Maxwell, Office of Program Accountability, Operations Review Specialist (Standard 2 & 3)
Michelle McCaskill, DJJ Probation, Circuit 14, Senior Juvenile Probation Supervisor (Standard 2 & 3)

Angel Perez, Office of Program Accountability, Operations Review Specialist (Standard 2 & 3) Fred Vrgora, DJJ Probation, Circuit 1, Juvenile Probation Officer Supervisor (Standard 2 & 3) Juan Youman, Office of Program Accountability, Regional Monitor (Standard 2 & 3)

Program Name: Probation and Community Intervention - Circuit 2 MQI Program Code: 1177

Provider Name: Department of Juvenile Justice

Location: Leon County / Circuit 2 Review Date(s): July 16-19, 2019 MQI Program Code: 1177
Contract Number: N/A
Number of Beds: N/A
Lead Reviewer Code: 169

Methodology

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

Overall Rating Summary

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

Standard 1: Management Accountability Probation and Community Intervention Rating Profile

Indicator Ratings

Standard 1 - Management Accountability				
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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)	Non-Applicable		
2.07	Pre-Disposition Report (PDR)	Satisfactory		

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Standard 3: Intervention Services Probation and Community Intervention Rating Profile

Indicator Ratings

Standard 3 - Intervention Services				
3.01	Youth-Empowered Success (YES) Plan Development	Satisfactory		
3.02	Youth Requirement/PACT Goal Elements	Satisfactory		
3.03	Pre-Release Notification	Satisfactory		
3.04	Transition Planning/Reintegration	Satisfactory		
3.05	* Referrals for Intervention and Treatment Services	Satisfactory		
3.06	YES Plan Implementation/Supervision	Satisfactory		
3.07	Youth and Parent/Guardian Contact	Satisfactory		
3.08	Ninety-Day Supervisory Reviews	Satisfactory		
3.09	Ninety-Day Yes Plan Updates	Satisfactory		
3.10	Termination of Supervision	Satisfactory		

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

Program Overview

Probation and Community Intervention - Circuit 2 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 three office locations throughout Circuit 2 in Florida. The circuit utilizes the Juvenile Assessment Center (JAC), which is contracted through Disc Village Inc. to screen all youth entering the juvenile justice system from Leon County and those youth who score for secure detention in the surrounding counties. The circuit's management team consists of one chief probation officer (CPO), one assistant CPO. one government operations consultant II (or reform specialist), three juvenile probation officer (JPO) supervisors, one senior JPOs, fourteen JPOs, and one administrative assistant. The circuit provides services which include diversion, probation supervision, day treatment, commitment, and transition services. The program also utilizes specialized services including evidence-based programming, such as Redirections, Young Parent Project, White Foundation, and Progressus. JPOs are responsible for conducting intake and assessment services for all vouth presented to the Department with violations of the criminal code. During the intake process. JPOs and JAC screeners 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 and JAC screeners are also required to complete the Detention Risk Assessment Instrument, Mental Health/Substance Abuse Referrals Form, Massachusetts Youth Screening Instrument – Second Version, and other intake documents. The circuit has an established agreement with the State Attorney's Office in the second judicial circuit waiving the Department's responsibility to complete State Attorney Recommendations. JPOs are responsible for completing a Youth-Empowered Success Plan for each youth. Youth who are identified with mental health, substance abuse, and/or medical needs are referred by the assigned JPO to appropriate community-based resources. At the time of the annual compliance review, the circuit had five vacancies, including two senior JPOs and three JPOs.

Standard 1: Management Accountability

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 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.

The circuit has a policy and procedures in place which requires all new employees, volunteers, and interns to undergo a level two background screening prior to hire. A review of the staff roster revealed four new employees and four volunteers were applicable for a background screening since the last annual compliance review. Reviewed documentation confirmed each of the applicable volunteers and employees received the required background screening. On January 7, 2019, the Annual Affidavit of Compliance with Level Two Screening Standards was completed and submitted to the Department's Background Screening Unit.

1.02 Five-Year Rescreening

Satisfactory Compliance

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

A review of the staff roster revealed none of the employees or volunteers were eligible for a fiveyear rescreen since the last annual compliance review. However, the circuit has a policy and procedures in place to ensure five year re-screenings are completed based on the hire date.

1.03 Protective Action Response (PAR)

Non-Applicable

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.

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

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.

Four staff were applicable for pre-service certification training during the annual compliance review period. Three of the four staff were recently hired and were still in the process of completing phase one training requirements. On July 11, 2019, the Office of Staff Development and Training granted each of the three staff a ninety day extension to complete their certification training; however, none of the three untrained staff were supervising any youth. The remaining staff completed all three phases of training but is no longer with the Department.

1.05 In-Service Training

Satisfactory Compliance

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.

Supervisory staff completes eight hours of training (as part of the twenty-four hours of annual inservice training) in the areas specified in Florida Administrative Code.

A review of nine staff training records was conducted for in-service training, three of the nine were supervisors. Each of the nine staff completed all of the required trainings, as outlined by the Department. Each staff exceeded twenty-four hours of in-service training. The three supervisors completed over thirty hours of supervisory training, which exceeds the required eight hours. The North Region Probation annual training plan, which includes Circuit 2, was signed by the regional manager and submitted to the Office of Staff Development and Training on January 14, 2019. All trainings were documented in the Department's Learning Management System (SkillPro).

1.06 Incident Reporting (CCC) (Critical)

Satisfactory Compliance

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.

Within the last six months, the circuit had a total of eight incidents which were reported to the Central Communications Center (CCC). A review of five CCC reports revealed each incident was reported within two hours of the caller to becoming aware of the incident. A review of records found there were no additional incidents which should have been reported to the CCC.

1.07 Abuse-Free Environment (Critical)

Satisfactory Compliance

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

The circuit maintains a policy which requires all staff to sign the Department's Code of Ethics The circuit posts flyers throughout the building informing staff, youth, and visitors of the Florida Abuse Hotline numbers. A review of forty-one youth records found no indications of abuse which should have been reported to the Florida Abuse Hotline.

Standard 2: Assessment Services

2.01 Community Assessment Tool (CAT) Pre-Screen

Satisfactory Compliance

Staff complete the CAT Pre-Screen whenever a youth is referred to the Department for a new law charge.

Thirty-three youth records were reviewed; twenty-three youth records were applicable for an initial Community Assessment Tool (CAT)/Positive Assessment Change Tool (PACT) screening. In each of the twenty-three youth records, a CAT/PACT Pre-Screening was conducted. The results of the CAT/PACT assessments were documented in the Department's Juvenile Justice Information System (JJIS) after each youth was referred to the Department for a new law charge or for a non-law violation of supervision.

2.02 CAT Full Assessment

Satisfactory Compliance

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.

Thirty-three youth records were reviewed; five youth records were applicable for a Community Assessment Tool (CAT)/ Positive Assessment Change Tool (PACT) Full Assessment. In each of the five youth records, the CAT/PACT Full Assessment was completed due to each youth being identified as moderate-high or high risk to reoffend. The results of the CAT/PACT assessments were documented in the Department's Juvenile Justice Information System (JJIS).

2.03 CAT Reassessment

Satisfactory Compliance

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

Thirty-three youth records were reviewed; twenty-two youth records were applicable for an Community Assessment Tool (CAT) Reassessment. In each of the twenty-two youth records, documentation confirmed a CAT Reassessment was completed in the Department's Juvenile Justice Information System (JJIS) at least once every 180 days. Documentation showed CAT Reassessments were completed after each new law violation, after each new disposition, and as pre- and post-testing for certain delinquency interventions such as Redirection, Day Treatment, and Transition Services. The CAT 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 atlarge) 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.

The circuit has a contract Juvenile Assessment Center to conduct screenings on all youth who are detained in Leon County and all youth who score for secure detention in Circuit 2. Thirty-three youth records were reviewed; twenty-three youth records were applicable for a mental

health and substance abuse screening. In each of the twenty-three youth records, a Massachusetts Youth Screening Instrument – Second Version (MAYSI-2) was completed by a trained staff member. Ten of the twenty-three youth records indicated a need for a comprehensive assessment and reviewed documentation determined the youth received the required services. Sixteen of the twenty-three youth screened were released to their parent/guardian. Eight of the sixteen youth required information to be provided to the parent/guardian concerning their screening results; only six of the eight parents/guardians were informed of the results. Three youth records indicated the youth had an elevated suicide risk; of the three, only two were referred for a suicide risk services.

Twenty-three of thirty-three reviewed records were applicable for the completion of a Suicide Risk Screening Instrument (SRSI). In each of the twenty-three youth records, a SRSI was completed and included a summary, recommendation, and screening results. Two youth were applicable for "YES" responses and were referred for mental health services and place on precautions. One youth was placed in secure detention after the detention center was notified of the SRSI. The other youth was release to the custody of their parent/guardian, who also signed acknowledging the SRSI notification.

2.05 Comprehensive Assessment (Critical)

Satisfactory Compliance

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.

Thirty-three youth records were reviewed, of which fourteen youth records were applicable for a Comprehensive Assessment. In each of the youth records, a referral was made based on the comprehensive assessment.

2.06 State Attorney Recommendation (SAR)

Non-Applicable

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.

On May 2, 2016, the circuit entered into a five-year agreement with the State Attorney's Office in the Second Judicial Circuit to wave the responsibility of the Department to complete State Attorney Recommendations, unless requested by the State Attorney's Office. Therefore, this indicator rates as non-applicable

2.07 Pre-Disposition Report (PDR)

Satisfactory Compliance

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.

Four of the reviewed thirty-three records were applicable for a Pre-Disposition Report (PDR). In each of the four youth records, the PDR was completed after the Community Assessment Tool (CAT) assessment was completed and other screening assessments. The PDR recommendations incorporated the recommendations of the CAT assessment and other comprehensive assessments. In each of the four youth records, the PDR was signed by the supervisor and submitted to the court at least forty-eight hours prior to the disposition.

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.

Each of the thirty-three reviewed records were applicable for a Youth Empowered Success (YES) Plan. In each youth record, a Community Assessment Tool (CAT) screening was completed prior to the development of the YES Plan. In each of the records reviewed, the youth, parent/guardian, and the juvenile probation officer (JPO) participated in the development of the YES Plan and signed the YES Plan. The YES Plans were approved by the JPO supervisor within thirty days of disposition/release and documentation indicated the youth and parent/guardian were provided a copy of the YES Plan after it was 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).

Thirty-three youth records were reviewed and each record was applicable for youth requirements to be included on the Youth Empowered Success (YES) Plan. Each of the youth requirements contained specific action steps for the youth, parents/guardians, and juvenile probation officers (JPO), clearly defining who is responsible, what action should be taken, and how often the action should be taken. Each youth requirement also contained appropriate target dates for completion. Twelve of the thirty-three youth records reviewed were applicable for a Change Goal. Eleven of the twelve YES Plans contained a Change Goal which addressed at least one of the youth's top three criminogenic needs. The remaining youth completed the required Change Goal; therefore, the requirement was closed successfully. One of the twelve youth was applicable for an evidence-based intervention and reviewed documentation found the youth received the required services.

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.

Thirty-three youth records were reviewed, of which ten youth records were applicable for a Pre-Release Notification (PRN). In each of the ten youth records, the case notes documented the juvenile probation officer's (JPO) receipt and submission of the Discharge Summary and PRN to the court within three days of receipt from the residential program.

3.04 Transitional Planning/Reintegration (Critical)

Satisfactory Compliance

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

Thirty-three youth records were reviewed, of which ten youth records were applicable for transitional planning. Each of the youth records contained documentation which reflected the

juvenile probation officer (JPO) maintained monthly contact with the parent/guardian while the youth was in the residential program. Each record showed the JPO participated in the monthly interventions/treatment team meetings, transition conferences, and the Exit Conferences. In each of the youth records, case notes documented an internal staffing/Community Re-Entry Team Meeting (CRT) based on the Statewide Community Re-Entry Team Protocol which included invitations to all of the required team members. The case notes also documented the referrals for aftercare services were finalized at the Exit Conference. The case notes in all three youth records documented referrals and follow-up made for aftercare services made within thirty days of approval of the YES Plan.

3.05 Referrals for Intervention and Treatment Services (Critical)

Satisfactory Compliance

Staff shall ensure all referrals for services are made as indicated by the court order or as negotiated to address criminogenic needs identified by the CAT (for youth who are moderate-high or high risk to reoffend). Referrals for mental health and substance abuse treatment services are based upon court-ordered requirements. Staff shall develop a follow-up and monitoring plan for all referrals for treatment made as a result of the Comprehensive Assessment and YES Plan. If referred for services, staff follows-up with the service provider within thirty days to ensure the youth and parent/guardian have taken the appropriate steps to initiate services. Staff receives, reviews, and documents written and verbal progress reports from the provider.

Thirty-three youth records were reviewed; twenty-eight youth records were applicable for referrals for intervention and treatment services. Each record contained documentation of referrals for services being made within ten calendar days of the Youth Empowered Success (YES) Plan being approved. In each youth record, the juvenile probation officer (JPO) followed-up with the provider within thirty calendar days of the YES Plan being approved. In twenty-seven applicable youth records, the JPO followed-up with the provider/youth concerning a progress report.

3.06 YES Plan Implementation/Supervision

Satisfactory Compliance

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

Thirty-three youth records were reviewed and each was applicable for Youth Empowered Success (YES) Plan Supervision. In each of the youth records, a Community Assessment Tool (CAT) was completed prior to the development of the initial YES Plan. Each YES Plan was developed within thirty calendar days of disposition, in the case of probation, or release, in the case of conditional release or post-commitment probation, and was signed by all parties, including the youth, parent/guardian, juvenile probation officer (JPO), and JPO supervisor. Documentation confirmed the youth and parent(s)/guardian(s) participated in the development of action steps and target dates for the completion of all sanctions and goals. In each youth record, documentation confirmed a copy of the approved YES Plan was provided to the youth and family within ten calendar days of approval.

During the first ninety-day review, 343 of the required 360 actions were completed by the JPOs. At the time of the annual compliance review, one youth's actions for the first ninety-day review period was still in process.

During the second ninety-day review, 115 of the required 263 actions were not completed by the JPOs. At the time of the annual compliance review, eleven reviewed youth actions for the second ninety-day review period were still in process.

3.07 Youth and Parent/Guardian Contact

Satisfactory Compliance

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

Each of the thirty-three reviewed records were applicable for youth and parent/guardian contact. In all of the youth records, documentation revealed the juvenile probation officer (JPO) met the required monthly contacts with the youth and parent/guardian during each applicable ninety-day review period.

3.08 Ninety-Day Supervisory Reviews

Satisfactory Compliance

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

Thirty-three youth records were reviewed, thirty-one youth records were applicable for ninety-day supervisory reviews. Each of the thirty-one youth records contained a supervisory note initiating the ninety day review period. Documentation confirmed the juvenile probation officer supervisor (JPOS) conducted a supervisory case review in thirty youth records at least once every ninety calendar days for each applicable review period, while the youth is under supervision (probation, conditional release, or post-commitment probation). In one youth record, the supervisor review was seventy-eight days late.

3.09 Ninety-Day YES Plan Updates

Satisfactory Compliance

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

Thirty-three youth records were reviewed, of which thirty-one youth records were applicable for Youth Empowered Success (YES) Plan updates. Each of the thirty-one youth records, when applicable, documented the juvenile probation officer (JPO) made the necessary updates to the youth target dates, youth requirements, and Change Goals in the Department's Juvenile Justice Information System prior to the supervisory case review, which included closing completed or terminated sanctions and goals, updating action steps for pending sanctions and goals to reflect the youth's progress, or adding sanctions or goals to address additional needs identified during the course of supervision.

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