

STATE OF FLORIDA  
DEPARTMENT OF JUVENILE JUSTICE

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

**Probation and Community Intervention - Circuit 9**  
*Department of Juvenile Justice*  
(State-Operated)  
8500 Laurel Hill Drive  
Orlando, Florida 32818

*Review Date(s): November 19 - 21, 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:

<b>Satisfactory Compliance</b>	No exceptions to the requirements of the indicator; or limited, unintentional, and/or non-systemic exceptions that do not result in reduced or substandard service delivery; or systemic exceptions with corrective action already applied and demonstrated.
<b>Limited Compliance</b>	Systemic exceptions to the requirements of the indicator; exceptions to the requirements of the indicator that result in the interruption of service delivery; and/or typically require oversight by management to address the issues systemically.
<b>Failed Compliance</b>	The absence of a component(s) essential to the requirements of the indicator that typically requires immediate follow-up and response to remediate the issue and ensure service delivery.

## Review Team

The Bureau of Monitoring and Quality Improvement wishes to thank the following review team members for their participation in this review, and for promoting continuous improvement and accountability in juvenile justice programs and services in Florida:

Bonita Williams, Office of Program Accountability, Lead Reviewer (Standard 1 & 3])  
Paul Czigan, Office of Program Accountability, Regional Monitor (Standard 2 & 3)  
Stephanie Floyd, DJJ Probation, Circuit 10, Senior Juvenile Probation Officer (Standard 2 & 3)  
Sharon Lawrence, DJJ Probation, Circuit 18, Senior Juvenile Probation Officer (Standard 2 & 3)  
Stephanie Lobzun, Office of Program Accountability, Regional Monitor (Standard 2 & 3)  
Tamara Mahl-Adkins, Office of Program Accountability, Regional Monitor (Standard 2 & 3)  
Tracy Olson, Government Operations Consultant II, Reform Specialist Circuit 18, (Standard 2 & 3)  
Kamille Payne, Office of Program Accountability, Regional Monitor (Standard 2 & 3)  
Korri Stallworth, DJJ Probation, Circuit 10, Juvenile Probation Officer Supervisor, (Standard 3 & 3)

Program Name: Circuit 9 Probation and Community Intervention  
Provider Name: Department of Juvenile Justice  
Location: Orange County / Circuit 9  
Review Date(s): November 19 - 21, 2019

MQI Program Code: 1184  
Contract Number: NA  
Number of Beds: NA  
Lead Reviewer Code: 148

### **Methodology**

This review was conducted in accordance with FDJJ-2000 (Contract Management and Program Monitoring and Quality Improvement Policy and Procedures), and focused on the areas of (1) Management Accountability, (2) Assessment and Performance Plan, (3) Mental Health and Substance Abuse Services, (4) Health Services, and (5) Safety and Security, which are included in the Residential Standards.

### **Overall Rating Summary**

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

Limited Ratings	Failed Ratings
3.04 Transition Planning/Reintegration	

## 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**

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

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**Standard 3: Intervention Services**  
**Probation and Community Intervention Rating Profile**

**Indicator Ratings**

<b>Standard 3 - Intervention Services</b>		
3.01	Youth-Empowered Success (YES) Plan Development	Satisfactory
3.02	Youth Requirement/PACT Goal Elements	Satisfactory
3.03	Pre-Release Notification	Satisfactory
<b>3.04</b>	<b>Transition Planning/Reintegration</b>	<b>Limited</b>
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 9 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 Orange and Osceola Counties in Florida. The circuit's management team includes a chief probation officer, an assistant chief probation officer, a reform specialist, and nine juvenile probation officer supervisors. The circuit receives support from the regional director, two government operations consultants, and a management review specialist. 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 Teen Court and Juvenile Diversion Alternative Program (JDAP) and the Juvenile Intervention Services Program, available to the youth in Circuit 9. Juvenile probation officers (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 Juvenile Assessment Center (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/or JAC Screeners are also required to complete the Detention Risk Assessment Instrument, State Attorney Recommendation, Massachusetts Youth Screening Instrument – Second Version, and other intake documents. 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 twelve vacancies, including one JPO supervisor and eleven JPOs.

## Standard 1: Management Accountability

1.01 Initial Background Screening (Critical)	Satisfactory Compliance
<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>	

The circuit conducts background screenings for all Department employees, contracted providers, volunteers, and interns who have access to the youth in the circuit. All twelve newly hired staff and one volunteer had their background screenings completed before their hire date. Each of the twelve newly hired staff completed the pre-employment assessment tool and passed with a high score. The circuit submitted the Annual Affidavit of Compliance with Level 2 Screening Standards on December 28, 2018, to the Department's Background Screening Unit, 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>	

The circuit had five staff applicable for a five year background rescreening since the last annual compliance review. Each of the rescreenings were submitted within the required timeframe. The circuit submitted the rescreens to the Department's Background Screening Unit more than ten days prior to the five year anniversary date for each of the five applicable staff. All of the rescreenings were completed less than twelve months prior to the staff's 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 have been no Protective Action Response (PAR) incidents during this annual compliance review period; therefore, this indicator rates as non-applicable.



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

Nine staff records were reviewed for pre-service/certification training during this annual compliance review period. Six of the nine staff completed their certification within 180 days of hire. Two staff are in the pre-academy stage of training. The remaining one staff is pending completion of the academy due to not passing the final exam to successfully complete the academy. Each of the three staff has time remaining before their 180 days of hire expire. One of the nine trainings were not entered in the Department's Learning Management System (SkillPro), the trainer's at the academy did not enter the academy completion. Eight of the nine trainings were documented in SkillPro.

<b>1.05 In-Service Training</b>	<b>Satisfactory Compliance</b>
<i>Contracted and state non-residential staff completes in-service training in accordance with Florida Administrative Code. Contracted and state non-residential staff completes twenty-four hours of in-service training, including mandatory topics specified in Florida Administrative Code, each calendar year, effective the year after pre-service/certification training is completed.</i>	
<i>Supervisory staff completes eight hours of training (as part of the twenty-four hours of annual in-service training) in the areas specified in Florida Administrative Code.</i>	

A review of nine in-service training records were reviewed for in-service training. The training records included three juvenile probation officer supervisors. On December 28, 2018, the circuit received approval for their in-service training plan by the Office of Staff Development and Training. Each of the staff records included documentation showing the completion of Protective Action Response (PAR) annual update, cardiopulmonary resuscitation (CPR), first aid, suicide recognition, prevention and intervention, professionalism/ethics, and active shooter trainings. Two of the three supervisors completed the required eight annual trainings. The remaining supervisor completed three of the eight required supervisory training hours; however, due to the supervisor's recent promotion, still has time within the calendar year to complete the required training hours. All trainings were entered into the Department's Learning Management System (SkillPro).

<b>1.06 Incident Reporting (CCC) (Critical)</b>	<b>Satisfactory Compliance</b>
<i>Whenever a reportable incident occurs, the program notifies the Department's Central Communications Center (CCC) within two hours of the incident, or within two hours of becoming aware of the incident.</i>	

Since the last annual compliance review, the circuit had a total of thirteen incidents reports to the Central Communications Center (CCC). A review of five CCC reports was conducted. Each of the CCC incidents was reported within the two hour timeframe, as required. During the annual compliance review, the annual compliance review team did not observe any additional incidents requiring an incident report.

**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 Florida Abuse Hotline and the Central Communications Center (CCC) phone numbers were found to be posted throughout the building. In addition, during intake/orientation, the youth sign a form acknowledging the staff advised them of the CCC and Florida Abuse Hotline phone numbers. A review of each of the nine pre-service and nine in-service personnel records included a signed Department Employee Code of Conduct indicating they received and reviewed the Code of Conduct expectations. The circuit had a total of thirteen CCC incidents since the last annual compliance review. A review of the CCC reports confirmed none of the incidents were applicable for reporting of abuse incidents. The chief probation officer and the assistant chief probation officer confirmed there were no incidents for alleged abuse since the last annual compliance review.

## **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.*

Eighty records were reviewed for the completion of the Positive Achievement Change Tool (PACT)/Community Assessment Tool (CAT) Pre-Screen assessment. Fifty-three of the eighty records were applicable for a PACT/CAT Pre-Screen. Fifty-two of the fifty-three applicable records documented a PACT/CAT Pre-Screen was completed when the referral was received for the youth. The remaining record did not contain a completed PACT/CAT Pre-Screen; the circuit concurred with the findings. Each of the applicable fifty-two records documented the PACT/CAT Pre-Screen was completed during the intake process.

### **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.*

Eighty records were reviewed for Positive Achievement Change Tool (PACT)/Community Assessment Tool (CAT) Full Assessment. Ten of the eighty records were applicable for a PACT/CAT Full Assessment, as the youth were identified as either moderate-high or high on the PACT/CAT Pre-Screen. Each of the applicable records included a completed CAT Full Assessment.

### **2.03 CAT Reassessment**

**Satisfactory Compliance**

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

Fifty-two of the eighty reviewed records were applicable for completion of Positive Achievement Change Tool (PACT)/Community Assessment Tool (CAT) reassessments. Eight of the fifty-two applicable records were for youth identified as either moderate-high or high risk to reoffend and the remaining forty-four youth were identified as either low or moderate risk to reoffend on the PACT/CAT. Each of the reassessments were completed at least once every 180 calendar days. Twenty-one of the fifty-two records were applicable for reassessment as a result of a new law violation, new disposition or referral for delinquency intervention. In eighteen of the twenty one applicable records, the PACT/CAT reassessment was completed.

### **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 MAYSI-2, and applicable sections of the Suicide Risk Screening Instrument (SRSI) in JJIS.*

Forty-nine of the eighty reviewed records were applicable for mental health/substance abuse screening. Forty-nine applicable records contained a completed Massachusetts Youth

Screening Instrument, Second Version (MAYSI-2). Twenty-nine MAYSI-2s indicated a need for a comprehensive assessment. In twenty-three of the records, the youth was released to their parent/guardian; in seventeen of these records, documentation validated the parent/guardian was provided the results of the screening and given information as to the location of the comprehensive assessment service provider.

Each MAYSI-2 administered was completed by a trained staff member. Nine records indicated elevated suicide risk, and each youth was placed on suicide precautions and referred for an Assessment of Suicide Risk (ASR). Upon intake, fifty-one youth were administered the Suicide Risk Screening Instrument (SRSI), which was entered in to the Department’s Juvenile Justice Information System and signed electronically by the juvenile probation officer or Juvenile Assessment Center screener. Each SRSI included a completed summary and recommendations in each section. In thirteen of the fifty one records, the SRSI had positive responses. In each of the thirteen records, a mental health referral was completed, indicating a need for an ASR.

Eight of the thirteen youth requiring an ASR were held in secure detention. Each record had documentation indicating a suicide risk alert was entered in to JJIS and the youth was placed on constant supervision until transported to the detention center. The detention center was notified of the results of the SRSI. Three youth were released to their parent/guardian and a signed copy of the Suicide Risk Screening Parent/Guardian Notification Form was provided.

<b>2.05 Comprehensive Assessment (Critical)</b>	<b>Satisfactory Compliance</b>
<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-three youth records had indication for further assessment and the juvenile probation officer made a referral for a comprehensive assessment. Eleven comprehensive assessments were completed and of those, nine documented where the juvenile probation officer made referrals based on the recommendations of the comprehensive assessment. The remaining twenty-two records had documentation of referrals and/or follow up to receive the complete assessments, the juvenile probation officers are waiting on responses to referrals and/or follow up. Six youth were detained. The juvenile probation officer forwarded the comprehensive assessment to the detention center within fourteen days in four of the six records.

<b>2.06 State Attorney Recommendation (SAR)</b>	<b>Satisfactory Compliance</b>
<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>	

Forty-nine applicable youth were screened at the Juvenile Assessment Center (JAC) or screening location. Fifty-one records required a State Attorney Recommendation (SAR). Each of the SARs included issues identified at screening or intake and documented if the youth was considered for non-judicial action/diversion, when applicable. The SARs were submitted within the required timeframe in each of the fifty-one applicable records. Each of the SARs were signed by the supervisor/designee before being submitted.

**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.*

Only one of the eighty reviewed records was applicable for Pre-Disposition Report (PDR); therefore, an additional nine PDRs were provided for review. In each of ten PDRs, the Positive Achievement Change Tool (PACT)/Community Assessment Tool (CAT) was completed prior to completion of the PDRs. The PDRs included the recommendations from the comprehensive assessment and other collateral information. There was documentation in case notes indicating the PDRs were submitted to the court at least forty-eight hours prior to disposition. The supervisor/designee signed the PDRs prior to being submitted to the court.

### 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.*

Seventy-five reviewed youth records required the creation of a Youth-Empowered Success (YES) Plan as of a result of the youth being placed on probation or released from a residential program. Two records had documentation indicating the Positive Achievement Change Tool (PACT)/Community Assessment Tool (CAT) was completed after placement on probation or released from residential program and prior to the development of the YES Plan.

The parent/guardian and youth participated in the development in fifty-nine of the seventy-five applicable records; the remaining sixteen records did not have documentation of youth or parent/guardian participation. The youth signed seventy-two of seventy-five YES Plans within thirty days of disposition/release from a residential program, One of the remaining YES Plans was not signed, one was signed two days late, and the remaining YES Plan was signed five days late. The parents/guardians signed sixty-seven of seventy-five YES Plans within thirty days of disposition/release from a residential program. One YES Plan was not signed by the parent/guardian and the remaining seven were signed late. The parents/guardians signed the remaining YES Plans fourteen, four, forty-seven, one, five, and twenty seven days late. The juvenile probation officer signed seventy-one of seventy-five YES Plans within thirty days of disposition/release from residential program; the remaining four YES Plans were signed late, one not signed, two days late, and seven days late. Sixty-two of seventy-five reviewed records indicated the youth and parents/guardians received a copy of the approved YES Plans within ten calendar days of approval.

#### **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).*

Sixteen of the eighty reviewed records indicated the youth scored either moderate-high or high risk to reoffend on the Positive Achievement Change Tool (PACT)/Community Assessment Tool (CAT). Fifteen of the sixteen applicable Youth Empowered Success (YES) Plans included a Change Goal, as required. Thirteen of the YES Plans incorporated one of the youth's top three criminogenic needs addressed as a Change Goal. Six of the seven youth who scored high risk to reoffend on the PACT/CAT had documentation of evidence-based intervention's which targeted the top criminogenic needs included on the youth's YES Plan. One of youth records documented clear documentation of the barriers to participating in evidence-based interventions.

There was a total of 620 youth requirements and goals in the eighty initial YES Plans. There was a total of 594 youth requirements/goals in initial YES Plans containing the intervention plan elements (who and what) for the parent/guardian. There was a total of 582 youth requirements/goals in the initial YES Plans containing the intervention plan elements (who, what, and how often) for the youth. There was a total of 617 youth requirements/goals in the

initial YES Plans containing the intervention plan elements (who, what, and how often) for the juvenile probation officer.

**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.*

Ten of the eighty reviewed youth records were reviewed for completion of a Pre-Release Notification (PRN). Eight of the ten records contained documentation indicating receipt of the PRN in the Department's Juvenile Justice Information System (JJIS) case notebook module. Six of the ten PRNs included the discharge summary and other pertinent documentation. When the Department agreed with the proposed tentative release date and plan for aftercare supervision, the juvenile probation officer (JPO) notified the committing judge for each of the ten PRNs. The JPO delivered the Request for Release Letter, PRN, and copy of the program's release discharge summary to the judge within three working days of receipt of the PRN in each of the ten records. One PRN was denied by the court and the JPO notified the residential program of the denial.

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

**Limited Compliance**

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

A review of ten youth records were reviewed for transition planning/reintegration. The juvenile probation officer is required to make at least one monthly contact with parent/guardian while the youth is placed in a residential program. There was documentation indicating the juvenile probation officer (JPO) completed all required monthly contacts with the parent/guardian in five of the ten reviewed youth records. In the remaining five records, documentation revealed the JPO did not conduct eleven monthly contacts with the parent/guardian.

The JPO participated in all monthly treatment team meetings in five of the ten reviewed youth records; however, in the remaining five youth records, the JPO did not participate in six treatment team meetings. The JPO did not follow-up within seventy-two hours of missing a treatment team meeting in three of the six applicable youth records; the JPO missed five out of eight required treatment team follow-ups. In eight of the ten youth records, the JPO assisted the parent/guardian and program staff to ensure communication is conducive to the youth's successful completion of the program. During the transition conference, six of the ten youth records had documentation of at least one contact between the youth and JPO during the meeting.

Each of the ten youth records had documentation youth participated in a Community Re-Entry Team (CRT) meeting. Of the ten youth records, nine had documentation indicating the CRT meeting notifications were sent to all required participants using Microsoft Outlook Calendar invites fourteen days in advance of the youth's CRT meeting. In each of the ten youth records, there was documentation showing the JPO provided the link for video conference to each of the parties invited. The parent/guardian was not invited to the CRT meetings in any of the nine applicable records; one youth is involved with Department of Children Families. The youth, JPO, regional education coordinator, receiving school district transition contact, transition services provider, representative from the residential program education department and case management/transition coordinator, Career Source Representative, and residential clinical

therapist were invited to the CRT meetings. One of the ten youth was in the Department of Children and Families custody; however, the assigned case worker was not invited. Of the ten youth, two required documentation of discussion of barriers or needs the families may have identified; however, only one had clear documentation. Eight of the ten youth records documented discussion of insurance during the CRT meeting. In each of the ten records, the CRT meeting summaries included documentation to support appropriate school placement, living arrangements, need for referrals for community based services, and transportation arrangements were discussed.

<b>3.05 Referrals for Intervention and Treatment Services (Critical)</b>	<b>Satisfactory Compliance</b>
<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 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></p>	

Sixty-nine of the eighty reviewed youth records were applicable for submission of referrals. Sixty-four of sixty-nine records had documentation indicating referrals were made within ten calendar days of the Youth Empowered Success (YES) Plan being approved. Twenty-four of the sixty-nine youth records had documentation showing the youth were already participating in services at the time of the YES Plan approval. Sixty-three of the sixty-nine youth records contained documentation indicating follow-up with service providers within thirty calendar days of the YES Plan. Follow-up was completed seventy-one, sixty-six, eighty-one, thirty-four, five, and seventy-seven days late in the remaining six records. In sixty of the sixty-nine youth records, the juvenile probation officer received, reviewed, and documented progress reports from the service provider on a regular basis. In forty youth records, it was necessary for the juvenile probation officer to follow-up on progress reports.

<b>3.06 YES Plan Implementation/Supervision</b>	<b>Satisfactory Compliance</b>
<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 goals). Case notes demonstrate compliance (or attempted compliance) with the youth and parent/guardian.</i></p>	

Sixty-nine youth records were applicable for Youth Empowered Success (YES) Plan implementation/supervision. In each of the youth records, a Positive Achievement Change Tool (PACT)/Community Assessment Tool (CAT) was completed prior to the development of the initial YES Plan. There was documentation in the youth records indicating the YES Plans were developed/negotiated, completed, and signed by the youth and parent/guardian within thirty calendar days. A copy of the approved YES Plan was also provided to the youth and parent/guardian.

During the first ninety day review, 501 of the required 549 actions were completed by the juvenile probation officers (JPO). During the second ninety day review, 137 of the required 169 actions were completed by the JPOs. During the third ninety day review, seventeen of the



required seventeen actions were completed by the JPOs. There were no applicable action steps required for the fourth ninety day review.

The JPOs documented face-to-face and telephone interactions with the youth, parent/guardian, and providers in seventy-four of the seventy-five records, as required. Sixty-five of the seventy-four reviewed records were applicable for review of written or verbal reports from collateral sources. Each of the sixty-five records had clear documentation the JPO reviewed documents.

<b>3.07 Youth and Parent/Guardian Contact</b>	<b>Satisfactory Compliance</b>
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<i>Juvenile probation officer (JPO) staff shall maintain on-going and regular contact with the youth and parent/guardian.</i>
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Sixty-nine records were applicable for youth and parent/guardian monthly contact. Each of the sixty-nine youth records had documentation validating contacts with each youth and parent/guardian were met for each of the sixty-nine youth for the monthly contacts during each applicable ninety-day review period.

During the first ninety day review period, ninety-four of the required ninety-seven youth face-to-face contacts were completed. For the parent/guardian monthly contacts during the first ninety day review, seventy-three of the required eighty-six contacts were met. For the moderate-high and high risk to reoffend youth contact, twenty-seven of the required twenty-nine face-to-face contacts were met. Sixteen of the seventeen required contacts were met for the parent/guardian monthly contacts.

During the second ninety day review period, sixty of the required sixty-four youth face-to-face contacts were completed. For the parent/guardian monthly contacts during the second ninety day review, forty-three of the required fifty one contacts were met. For the moderate-high and high risk to reoffend youth contact, fifteen of the required sixteen face-to-face contacts were met. Ten of the twelve required contacts were met for the parent/guardian monthly contacts.

During the third ninety day review period, eight of the required nine youth face-to-face contacts were completed. For the parent/guardian monthly contacts during the third ninety day review, seven of the required seven contacts were met. For the moderate-high and high youth risk to reoffend youth contact, there were no required contacts for the third ninety day review period.

There were no required monthly contacts for youth or parent/guardians for the fourth ninety day review period.

<b>3.08 Ninety-Day Supervisory Reviews</b>	<b>Satisfactory Compliance</b>
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<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>
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Sixty-three records were applicable for ninety-day supervisory reviews. Each record reflected the juvenile probation officer supervisor (JPOS) documented a review of the Youth-Empowered Success (YES) Plan in the case notes. Sixty-three of the seventy-six applicable records required a ninety-day supervisory review and documented the JPOS completed the supervisory review at least once during the first ninety-day supervision period. Three records documented the review was completed late. Nineteen records were applicable for requiring a review during the second ninety-day supervision period and each was completed on time.

**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.*

Seventy-five youth records were applicable for at least one ninety-day Youth-Empowered Success (YES) Plan update. Youth requirements were updated in the Department's Juvenile Justice Information System (JJIS) prior to the first ninety-day YES Plan update for sixty-one of the seventy-five applicable records. Six records were applicable for an update in Change Goals in JJIS prior to the first ninety-day YES Plan and only four of the six were updated. Target dates were updated in JJIS prior to the first ninety-day YES Plan update for sixty-seven of seventy-five records. A new YES Plan was saved in JJIS prior to the first ninety-day supervisory review for seventy-two of seventy-five records. Three YES Plans were completed late. For twenty-seven of the twenty-nine applicable records, when the YES Plan updates reasonably required the input of the youth and parent/guardian, the discussion was clearly documented in the case notebook module.

Seventeen youth records were applicable for a second ninety-day YES Plan update. Youth requirements were updated in the JJIS prior to the second ninety-day YES Plan update for fifteen of the seventeen applicable records. Six records were applicable for an update in Change Goals in JJIS prior to the second ninety-day YES plan and only four of the six were updated. Target dates were updated in JJIS prior to the second ninety-day YES Plan update for sixteen of the seventeen records. A new YES Plan was saved in JJIS prior to the second ninety-day supervisory review for fourteen of the seventeen applicable records. For six of the seven applicable records, when the YES Plan updates reasonably required the input of the youth and parent/guardian, the discussion was clearly documented in the case notebook module.

**3.10 Termination of Supervision****Satisfactory Compliance**

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

Ten closed youth records were reviewed for termination of supervision. Eight records were for youth placed on probation and two records were for post-commitment probation youth. Six records documented a request for early termination and two were for loss of jurisdiction. For six probation records, the progress report was completed when termination was requested. The remaining two youth were terminated from supervision judicially. For each of the six who were applicable for terminations, the juvenile probation officer (JPO) checked with local law enforcement to determine if there were any outstanding warrants or charges for the youth prior to requesting termination. In each record, the JPO updated the Department's Juvenile Justice Information System (JJIS) within five working days of receipt of the court's termination order. All nine records contained documentation the JPO notified the youth and the parent/guardian in

writing indicting the youth was no longer under supervision. None of the records were applicable for the JPO to document notification to the youth and 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 JJIS.