STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

BUREAU OF QUALITY ASSURANCE
PROGRAM REPORT FOR

Probation and Community Intervention-Circuit 19
Department of Juvenile Justice
(State-Operated)
2215 South 25th Street
Fort Pierce, FL 34947

Review Date(s): June 7-9, 2011

PROMOTING CONTINUOUS IMPROVEMENT AND ACCOUNTABILITY IN JUVENILE JUSTICE PROGRAMS AND SERVICES

WANSLEY WALTERS, SECRETARY
JEFF WENHOLD, BUREAU CHIEF
## Community Supervision Performance Rating Profile

**Program Name:** Probation and Community Intervention-Circuit 19  
**Provider Name:** Department of Juvenile Justice  
**County/Circuit #:** St. Lucie / Circuit 19  
**Review Date(s):** June 7-9, 2011  

<table>
<thead>
<tr>
<th>Program Performance by Indicator/Standard</th>
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<tbody>
<tr>
<td><strong>1. Management Accountability</strong></td>
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<tr>
<td>1.01 Background Screening of Employees/Vol.</td>
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<tr>
<td>1.02 Provision of an Abuse Free Environment</td>
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<td>1.03 Incident Reporting</td>
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<td>1.04 Pre-Service/Certification Requirements</td>
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<tr>
<td>1.05 In-Service Training Requirements</td>
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<tr>
<td>1.06 Supervisory Reviews</td>
</tr>
<tr>
<td><strong>Acceptable 70%</strong></td>
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<table>
<thead>
<tr>
<th>Standard</th>
<th>Program Score</th>
<th>Max. Score</th>
<th>Rating</th>
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</thead>
<tbody>
<tr>
<td>1. Management Accountability</td>
<td>42</td>
<td>60</td>
<td>70%</td>
</tr>
<tr>
<td>2. Assessment and Intervention</td>
<td>55</td>
<td>80</td>
<td>69%</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Failed 0-59%</th>
<th>Minimal 60-69%</th>
<th>Acceptable 70-79%</th>
<th>Commendable 80-89%</th>
<th>Exceptional 90-100%</th>
</tr>
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<tbody>
<tr>
<td>X</td>
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## Overall Program Performance

**Minimal 69%**
Methodology

This review was conducted in accordance with Florida Administrative Code 63L-2 (Quality Assurance, 6/10/10 Hearing Draft), and focused on the areas of (1) Management Accountability and (2) Assessment and Intervention, which are included in the Community Supervision Standards (July 2010).

Persons Interviewed

- Program Director
- DJJ Monitor
- DHA or designee
- DMHA or designee
- # Case Managers
- # Clinical Staff
- # Food Service Personnel
- # Healthcare Staff
- # Maintenance Personnel
- # Program Supervisors
- 1 # Other (listed by title): Acting Chief Probation Officer

Documents Reviewed

- Accreditation Reports
- Affidavit of Good Moral Character
- CCC Reports
- Confinement Reports
- Continuity of Operation Plan
- Contract Monitoring Reports
- Contract Scope of Services
- Egress Plans
- Escape Notification/Logs
- Exposure Control Plan
- Fire Drill Log
- Fire Inspection Report
- Fire Prevention Plan
- Grievance Process/Records
- Key Control Log
- Logbooks
- Medical and Mental Health Alerts
- PAR Reports
- Precautionary Observation Logs
- Program Schedules
- Sick Call Logs
- Supplemental Contracts
- Table of Organization
- Telephone Logs
- Vehicle Inspection Reports
- Visitation Logs
- Youth Handbook
- Health Records
- MH/SA Records
- Personnel Records
- Training Records/CORE
- Youth Records (Closed)
- Youth Records (Open)
- Volunteer Files

Surveys

- # Youth
- # Direct Care Staff
- # Other: ___

Observations During Review

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

Comments

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

Performance ratings were assigned to each indicator by the review team using the following definitions and numerical values defined by F.A.C. 63L-2.002(10)(a) (6/10/10 Hearing Draft):

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
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<tbody>
<tr>
<td>Exceptional (10)</td>
<td>The program consistently meets all requirements, and a majority of the time exceeds most of the requirements, using either an innovative approach or exceptional performance that is efficient, effective, and readily apparent.</td>
</tr>
<tr>
<td>Commendable (8)</td>
<td>The program consistently meets all requirements without exception, or the program has not performed the activity being rated during the review period and exceeds procedural requirements and demonstrates the capacity to fulfill those requirements.</td>
</tr>
<tr>
<td>Acceptable (7)</td>
<td>The program consistently meets requirements, although a limited number of exceptions occur that are unrelated to the safety, security, or health of youth, or the program has not performed the activity being rated during the review period and meets all procedural requirements and demonstrates the capacity to fulfill those requirements.</td>
</tr>
<tr>
<td>Minimal (5)</td>
<td>The program does not meet requirements, including at least one of the following: an exception that jeopardizes the safety, security, or health of youth; frequent exceptions unrelated to the safety, security, or health of youth; or ineffective completion of the items, documents, or actions necessary to meet requirements.</td>
</tr>
<tr>
<td>Failed (0)</td>
<td>The items, documentation, or actions necessary to accomplish requirements are missing or are done so poorly that they do not constitute compliance with requirements, or there are frequent exceptions that jeopardize the safety, security, or health of youth.</td>
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Review Team

The Bureau of Quality Assurance 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:

Ann Little, Lead Reviewer, DJJ Bureau of Quality Assurance
Pam Graves, Review Specialist, DJJ Bureau of Quality Assurance
Alison Fulford, Juvenile Probation Officer Supervisor, DJJ Probation, Circuit 10
Lynda Tarus, Program Director, White Foundation CBIS-Circuit 7
Probation and Community Intervention-Circuit 19 serves St. Lucie, Martin, Indian River and Okeechobee Counties. There are two units in St. Lucie County, one in Martin County, and one in Indian River County; there are staff from the Martin County unit that are located in and serve Okeechobee County. Detention screening is conducted at the St. Lucie Regional Juvenile Detention Center by Juvenile Probation Officers. The circuit has an Acting Chief Probation Officer, four Juvenile Probation Officer Supervisors, nine Senior Juvenile Probation Officers, twenty-three Juvenile Probation Officers, and five Secretary Specialists. At the time of the quality assurance review, the circuit had four vacant Juvenile Probation Officer positions and one vacant Senior Juvenile Probation Officer position; the vacant positions for one Juvenile Probation Officer and the Administrative Assistant were eliminated. Effective April 30, 2011, the Chief Probation Officer retired, leaving the position vacant; the Assistant Chief Probation Officer has been acting since that time, along with supervising detention screening operations. The circuit is in the process of hiring a Chief Probation Officer.

The Assistant Chief Probation Officer (ACPO) participates in circuit board, county council, and other community meetings monthly. The ACPO continues to hold monthly meetings with all supervisory staff, to include: the management from the Community Based Intervention Services (CBIS) program, day treatment and Redirection programs. The ACPO also holds a circuit coordinator’s meeting monthly with the Data Integrity Officer (DIO), Prevention Specialist and Detention Superintendent. Also invited are the Distributive Computer Systems Administrator (DSCSA) and Commitment Manager. There are additional meetings with Department of Children and Families, law enforcement and other providers within the circuit.

During the quality assurance review, significant deficiencies were identified with background screening, supervisory reviews, and the Positive Achievement Change Tool.

1.01: Background Screening of Employees/Volunteers

- Of the ten staff applicable for five-year re-screenings, nine were not completed within the required timeframe; one was eleven months late, three were eight months late, three were five months late, one was one month late, and one was six days late.
1.02: Provision of an Abuse Free Environment  
Commendable (8)

- The program consistently met all requirements for this indicator without exception.

1.03: Incident Reporting  
Commendable (8)

- The program consistently met all requirements for this indicator without exception.

1.04: Pre-Service/Certification Requirements  
Commendable (8)

- The program consistently met all requirements for this indicator without exception.

1.05: In-Service Training Requirements  
Commendable (8)

- The program consistently met all requirements for this indicator without exception.

1.06: Supervisory Reviews  
Minimal (5)

- In one of nine applicable files, the supervisor did not initial the State Attorney Recommendation (SAR) before it was submitted to the Court.
- In eight of twenty-nine applicable files, the supervisor did not sign the Youth-Empowered Success (YES) Plan within thirty days of the youth’s placement on supervision.
- In two of twenty-nine applicable files, the supervisor did not document his/her review of the YES Plan in the case notes.
- In fifteen of thirty instances where one was required, a supervisory review was not conducted within the required ninety-day timeframe. There were three instances where a ninety-day supervisory review was required, but one was never completed.

**Standard 2: Assessment and Intervention**

Probation and Community Intervention-Circuit 19 provides or has access to various services to address the needs of youth in St. Lucie, Martin, Indian River and Okeechobee Counties. All of the counties have a Drug Court program, and the circuit has three staff trained to conduct ‘Thinking for a Change’ (T4C) groups. Other services provided by contracted agencies include: MultiSystemic Therapy (MST) provided through the Department’s Redirection program; Eckerd Leadership Program, a day treatment program for boys and girls operated by Eckerd Youth Alternatives; and Community Based Intervention Services (CBIS) program also operated by Eckerd Youth Alternatives. Diversion services are also available, to include: teen court/diversion panel program, civil citation, and pre-arrest diversion.
2.01: Positive Achievement Change Tool (PACT)  

- There were two instances where a Positive Achievement Change Tool (PACT) Pre-Screen was required, but was never completed.
- In three of twenty-one applicable files, the PACT Mental Health and Substance Abuse Screening Report and Referral Form had not been completed as required.
- In one of eight applicable files, the youth was not referred for a comprehensive assessment as indicated by the PACT Mental Health and Substance Abuse Screening Report and Referral Form.
- In three of five applicable files, the youth was not referred for services that were recommended by the comprehensive assessment.

2.02: State Attorney Recommendation (SAR)  

- In three of nine applicable files, the recommendation in the State Attorney Recommendation (SAR) did not reflect the youth’s risk to re-offend. However, two of those did provide a justification for the recommendation where required on the SAR.
- In one of nine applicable files, the SAR was not submitted within the applicable timeframe.

2.03: Pre-Disposition Report (PDR)  

- The program consistently met all requirements for this indicator without exception.

2.04: Youth-Empowered Success (YES) Plan Development  

- In seven of twenty-nine applicable files, there was at least one Youth Requirement/PACT Goal in the initial Youth-Empowered Success (YES) Plan that did not contain the intervention plan elements (who, what, and how often). 152 of 162 Youth Requirements/PACT Goals in the initial YES Plan contained the intervention plan elements (who, what, and how often).
- In two of twenty-nine applicable files, youth and/or parent/guardian participation in the development of the initial YES Plan was not documented.
- In eight of twenty-nine applicable files, the initial YES Plan was not signed by the youth, parent/guardian, JPO/case manager, and/or supervisor within thirty days of disposition/placement.

2.05: YES Plan Implementation/Supervision  

- In fourteen of thirty applicable ninety-day supervision periods, case notes did not reflect consistent compliance with JPO/case manager action steps contained in the Youth-Empowered Success (YES) Plan. However, case notes reflected consistent compliance with JPO/case manager action steps contained in 112 of 157 Youth Requirements/PACT Goals.
In one of six instances where noncompliance was documented, the JPO/case manager did not respond in a manner consistent with the progressive response/graduated sanctions plan.

### 2.06: Service Delivery/Referrals

- In three of twenty-two applicable files, referrals for services were not made as required by the court order and/or action steps contained in the Youth-Empowered Success (YES) Plan.
- In six of seventeen applicable files, the JPO/case manager did not follow up with the service provider within thirty days to verify enrollment and/or initiation of services.
- In two of sixteen applicable files, the JPO/case manager did not receive (or attempt to solicit), review, and/or document progress reports (written or verbal) from the provider.
- In one of one applicable file, the JPO/case manager did not address negative progress reports from the provider, such as missed appointments or non-participation.

### 2.07: PACT Reassessments and YES Plan Updates

- In seven of twenty-nine applicable ninety-day supervision periods, Youth Requirements/PACT Goals were not updated in JJIS prior to the ninety-day supervisory review.
- In five of thirty applicable ninety-day supervision periods, a new YES Plan was not saved in JJIS prior to the ninety-day supervisory review.
- In one of three instances where YES Plan updates reasonably required input of the youth and parent/guardian, this discussion was not documented in the case notes.

### 2.08: Termination of Supervision

- In one of seven files reviewed for this indicator, the Progress Report was not completed when termination was requested or the Department lost jurisdiction.

### Overall Program Performance

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Failed | Minimal | Acceptable | Commendable | Exceptional