Monitoring and Quality Improvement Standards for
Probation and Community Intervention Programs
FY 2018-2019

Office of Program Accountability
Promoting continuous improvement and accountability
in juvenile justice programs and services.

The Department acknowledges the Monitoring and Quality Improvement (MQI) Standards are built upon Department rules, policies, procedures and manuals. As we continue to improve and refine our competitive procurement process, there may be instances in which requirements negotiated between the Provider and the Department exceed the MQI Standards. In instances where contractual obligations surpass requirement(s) set forth in the published Standards, the contract requirement will prevail.
## MQI Standards for Probation and Community Intervention Programs

### Standard 1: Management Accountability

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1.01 Initial Background Screening

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.

— CRITICAL —

Guidelines/Requirements: Background screening is mandatory for employees, volunteers, mentors, and interns with access to youth and confidential youth records to ensure they meet established statutory Level 2 screening requirements of good moral character. The Department is mindful or aware of its status as a criminal justice agency and its special responsibilities in dealing with the youth population, and has determined it is appropriate to establish stringent screening requirements for all DJJ and provider personnel and volunteers. Therefore, the Department utilizes Level 2 Screening Standards as required in s. 435.05, F.S.

Contracted/grant provider volunteers, mentors, and interns who assist or interact with provide youth on an intermittent basis for less than ten hours per month do not need to be background screened if an employee who has been background screened is always present and has the volunteer within his or her line of sight. (Note: Intermittent basis means the volunteer provides assistance on a non-continuous basis or at irregular intervals; visiting no more than once a quarter.)

Current employees of the Department or a provider are not required to submit a new background screening request when they are promoted, demoted, or transferred into another position within their organization, as long as there is no break in service.

A new background screening is required when a Department employee is hired by a provider or when a provider...
employee is hired by the Department or another contracted provider company.

Moving from DJJ to a contracted provider or from a contracted provider to DJJ, or from one contracted provider company to another contracted provider is considered a new hire.

Neither the Department nor contracted providers shall hire any applicant until:

a. An eligible background screening rating has been received, and the criminal history report has been reviewed.

b. An application with an ineligible rating has received an approved exemption from disqualification from the Department, has received an eligible rating, and the criminal history report has been reviewed.

c. The provider has administered a pre-employment assessment tool to the direct-care position applicant prior to hiring and has determined what is a passing score. (volunteers are not required to take or pass the assessment tool).

d. The provider has placed a copy of the pre-employment tool and passing score in the applicant/employee file.

e. The provider has added the employee or volunteer to their Clearinghouse employment roster.

The provider is responsible for ensuring their hiring authority has reviewed the CCC Person Involvement Report, the SVS module, FDLE’s ATMS result, and completed any agency personnel file review prior to hiring or utilizing a volunteer that will have contact with youth, or access to confidential youth records.

A new background screening is not required for a volunteer who has been hired by the center, as long as there is no break in service.

a. Once the volunteer screening is completed, the volunteer is considered active as long as the fingerprints are being retained by FDLE/FBI, the 5-year rescreening/resubmission is being completed, and the volunteer is added to the Clearinghouse employee roster within 90-days of completing the screening request.

Teachers who are paid by the school board or who are paid through funding provided by the school board or Department of Education to provide instruction to youth in programs are not required to undergo background screening by the Department. (Contact contract manager to review
Review records of all staff hired and volunteers starting since the last annual compliance review to determine a clearance was received prior to the employee being hired and volunteers starting. This includes all contracted staff (medical, mental health, designated health authority (DHA), designated mental health clinician authority (DMHCA), psychiatrist, and any education position hired by the program).

An exemption was granted by the Department prior to hiring or utilizing any staff or volunteer currently working in the program who were rated ineligible for employment by DJJ Inspector General to continue employment.

Review documentation to determine whether the Affidavit of Compliance with Level 2 Screening Standards was submitted to the Background Screening Unit (BSU) prior to January 31 of the current calendar year. (Review spreadsheet sent from BSU.)

Reference:

- FDJJ-1800 PC, Background Screening Policy and Procedures
- F.S. 985.644 Departmental Contracting Powers; Personnel Standards and Screening
1.02 Five-Year Rescreening

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.)*

**Guidelines/Requirements:** A rescreening/resubmission is completed every five years, calculated from the agency hire date (original date of hire). This date does not change when a staff transfers within a DJJ or provider program or when a staff member is promoted. Five-year rescreens/resubmission shall not be completed more than twelve months prior to the employee’s five-year anniversary date.

When a rescreening/resubmission is submitted to the Background Screening Unit (BSU) at least ten business days prior to the five-year anniversary or retained prints expiration date, but it is not completed by the BSU on or before the anniversary or retained prints expiration date, the screening shall meet annual compliance review standards.

a. Clearinghouse resubmissions must be initiated in the Clearinghouse portal at least ten business days prior to the Retained Prints Expiration Date.
b. Clearinghouse rescreening/resubmission request forms must be submitted to the BSU at least ten business days prior to the Retained Prints Expiration Date.

When a rescreening/resubmission is not submitted to the BSU at least ten business days prior to the five-year anniversary or retained prints expiration date and the BSU does not complete the rescreening prior to the anniversary or retained prints expiration date, the screening shall not meet annual compliance review standards.

Review the employee and volunteer roster to determine which staff and volunteers required a five-year rescreening/resubmission since the last annual compliance review. All eligible staff and volunteers should be reviewed.

Yes ☐  No ☐  N/A ☐
Review records and Clearinghouse records of all applicable staff and volunteers hired since five years from the initial hire date of employment to determine a clearance was submitted at least ten days prior to the employee anniversary date of being hired within the agency (not promotional date) or to check retained prints expiration dates. This includes all contracted staff (medical, mental health, designated health authority (DHA), designated mental health clinician authority (DMHCA), psychiatrist and any education position hired by the program – not employees paid by the school board).

Reference:

- FDJJ-1800 PC, Background Screening Policy and Procedures
1.03 Protective Action Response (PAR)

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.

Guidelines/Requirements: This indicator shall be rated “Non-Applicable” if the program has not used physical interventions or mechanical restraints during the scope of the annual compliance review.

Program staff should be familiar with Florida Administrative Rule 63H-1, which establishes the statewide framework to implement procedures governing the use of verbal and physical intervention techniques and mechanical restraints.

Review the program’s Department approved PAR Plan.

Review a sampling of PAR reports to determine if:

- A review was conducted by a PAR certified instructor/supervisory staff.
- A post-PAR interview was conducted with the youth by the superintendent, or designee, within thirty minutes after the incident.
- A review of the PAR incident report by the program director/supervisor or designee was conducted within seventy-two hours of the incident, excluding weekends and holidays.
- Statements were completed by all witnesses and participants.
- The reports were completed on the same day the incident occurred.
- The youth was referred to the licensed medical professional on-site, or was taken off site as appropriate should medical staff not be present, if findings of the post-PAR interview indicate the need for a PAR medical review.
- The techniques applied were approved by the Department.
A PAR report shall be completed after an incident involving the use of counter move, control techniques, takedowns, or the application of mechanical restraints. A PAR report is not required when mechanical restraints are used for the movement of youth outside of the secure area of operations or during transports.

**Reference:**

- F.A.C. 63H-1, Basic Curricula (PAR)
1.04 Pre-Service/Certification Training

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.

Guidelines/Requirements: It is the expectation of the Department all training, both in-service and instructor-led, be documented in the Department’s Learning Management System (SkillPro). (It may be helpful to view the “All Trainings Completed” report for each staff.)

State Non-Residential Staff:

This training consists of two phases:

▪ Phase one: Workplace training, which consists of ninety-six hours, completed in the areas listed in F.A.C. 63H-2.006(2a).
▪ Phase two: Training at the academy, which consists of 224 hours, completed in the areas listed in F.A.C. 63H-2.006(2c).

OPS staff who have no direct care responsibilities are exempt from direct care juvenile probation officer (JPO) certification training.

State non-residential staff are not required to be PAR certified and CPR/First Aid certified prior to contact with youth. However, the following requirements shall apply:

▪ The staff shall be assigned to a fully certified officer who has successfully completed all certification requirements, outlined in F.A.C. 63H-2.006(2a).
▪ The staff shall not supervise a caseload or have direct contact with youth where Department certified staff are not present until they complete all certification requirements in F.A.C. 63H-2.006(2a).

Review a sample of new employee training records to determine the staff have completed the required Phase One and Phase Two training requirements.

Yes ☐  No ☐  N/A ☐
**Contracted Non-Residential Staff:**

Staff must complete a minimum of 120 hours of pre-service training, instructor-led and web-based, completed in the areas listed in F.A.C. 63H-2.004(b).

All Contracted Non-Residential programs shall submit, in writing, a list of pre-service training to Staff Development and Training including course names, descriptions, objectives, and training hours for any instructor-led training, completed in the areas listed in F.A.C. 63H-2.004(b).

Contracted Non-Residential staff are authorized to be in the presence of youth prior to the completion of the training requirements outlined in F.A.C. 63H-2.004(b), however, the following essential skills must be completed first:

- PAR trained (must be successfully completed within ninety days of hire)
- CPR/First Aid certified
- Professionalism and ethics
- Suicide prevention
- Emergency procedures
- Human Trafficking

If a staff member who has previously attended the JPO Academy separates from their current position and is rehired by a state-operated program within four years of separation, they will not be required to complete the Academy training again.

They shall complete the following requirements within sixty calendar days of their return to the Department:

1. All PAR training pursuant to Chapter 63H-1, F.A.C.
2. CPR/First Aid certification
3. Overview of program operating procedures
4. In-service training to include: professionalism and ethics, suicide prevention, adolescent behavior, risk and needs assessment, and supervision.

For Contracted Non-Residential staff:

(10) Returning staff who return more than one year from separation shall complete all requirements set forth in subsection 63H-2.004(1), F.A.C., as they are no longer considered trained.

(11) Contracted staff who cross over from residential to non-
residential shall complete all training requirements set forth in subsection 63H-2.004(1), F.A.C.

**Reference:**

- F.A.C. 63H-1.009, Basic Curricula (PAR), Certification
- F.A.C. 63H-2.004, Direct Care Staff Training, Contracted Non-Residential Staff
- F.A.C. 63H-2.006, Direct Care Staff Training, State Non-Residential Staff
1.05 In-Service Training

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 the 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 in-service training) in the areas specified in Florida Administrative Code.

Guidelines/Requirements:

State Non-Residential Staff:
The following are mandatory training topics that must be completed each year by State Non-Residential Staff (unless specific certification is good for more than one year, in which case, training is only necessary as required by certification):

- PAR update (As required by PAR Rule Chapter 63H-1)
- CPR (annually)
- First Aid (annually)
- Suicide Recognition, Prevention, and Intervention
- Professionalism and Ethics

Each region shall submit, in writing, a list of in-service training to Staff Development and Training including course names, descriptions, objectives, and training hours for all instructor-led in-service training other than the mandatory training topics listed above.

Contracted Non-Residential Staff:
The following are mandatory training topics that must be completed each year by Contracted Non-Residential Staff (unless specific certification is good for more than one year, in which case, training is only necessary as required by certification):

- PAR update (As required by PAR Rule Chapter 63H-1)
- CPR
- First Aid
- Professionalism and Ethics
All Contracted and State Non-Residential facilities/programs shall submit, in writing, a list of in-service training to Staff Development and Training including course names, descriptions, objectives, and training hours for all instructor-led in-service training other than the mandatory training topics listed above.

Staff designated as OPS-JPOs will be considered direct care staff and must meet the same training requirements as DJJ JPOs (180 + academy).

Supervisory Staff Training for Contracted and State Non-Residential Facilities:

Supervisory staff shall complete eight hours of training in the areas of:
- Management
- Leadership
- Personal Accountability
- Employee Relations
- Communication Skills
- Fiscal

It is the expectation of the Department all training, both in-service and instructor-led, be documented in the Department’s Learning Management System (SkillPro).

In-service training begins the calendar year after a staff completes his/her certification training.

Programs shall develop an annual in-service calendar, which must be updated as changes occur.

Review training records and/or the Department’s Learning Management System (SkillPro) for state non-residential staff in subsequent years of employment to ensure training was completed as required. This sample must include supervisory staff.

This indicator shall be rated based on a review of training completed during the last full calendar year prior to the annual compliance review.

**Reference:**
- F.A.C. 63H-2.004, Direct Care Staff Training, Contracted Non-Residential Staff
- F.A.C. 63H-2.006, Direct Care Staff Training, State Non-Residential Staff
- F.A.C. 63H-1.012, Annual Training Requirement
1.06 Incident Reporting (CCC)

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.

— CRITICAL —

Guidelines/Requirements: This indicator shall be rated “Non-Applicable” if the program has not had any reportable incidents during the scope of the annual compliance review. If there are no Central Communications Center (CCC) reports for the past six months, the regional monitor(s)/reviewer(s) may sample reports since the date of the last annual compliance review, but no more than twelve months.

Incidents discovered and reported by the regional monitors during the annual compliance review shall be considered “Non-Applicable,” unless documentation exists the program was aware of the incident, but failed to report it.

The purpose of the CCC is to provide a service to DJJ, the providers, and programs in maintaining a safe environment for the treatment, care, and provision of services to youth. The CCC activities are conducted twenty-four hours a day, seven days a week. The telephone number for the CCC is 1-800-355-2280.

Violations of criteria outlined in the Department’s FDJJ 1920 policy will be reported to the CCC for dissemination to the related program area and contracted providers. The reporting of incidents shall be consistent with the Department’s requirements.

The regional monitor(s)/reviewer(s) shall be familiar with the Department’s incident reporting requirements and list of reportable incidents.

Review CCC reports for the past six months to determine compliance with CCC reporting procedures.
Review internal incidents/grievances to determine if additional incidents should have been reported to CCC.

**Reference:**
- F.A.C. 63F-11, Central Communications Center.
1.07 Abuse-Free Environment

Any person who knows, or has reasonable cause to suspect, a child is abused, abandoned, or neglected by a parent/guardian, 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, guardian, 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.

— CRITICAL —

Guidelines/Requirements: The program shall provide an environment in which youth, staff, and others feel safe, secure, and not threatened by any form of abuse or harassment. To promote an abuse free environment, the program shall:

1. Adhere to a code of conduct forbidding staff from using physical abuse, profanity, threats, or intimidation.
2. Ensure all allegations of child abuse or suspected child abuse are immediately reported to the Florida Abuse Hotline.
3. Ensure youth have unimpeded access to self-report alleged abuse.
4. Ensure youth eighteen years of age or older have unimpeded access to self-report abuse allegations to the Central Communications Center (CCC).

Review CCC reports and program incident reports to determine if there have been any abuse allegations substantiated against staff or if staff have reported abuse on behalf of a youth.

If any allegations have been made against staff, review any documentation of management interventions and disciplinary actions in response to the incident.

Review youth records to ensure there were not any indications of abuse not being reported to the Florida Abuse Hotline.

Reference:

- F.S. 39.201, “Mandatory reports of child abuse, abandonment, or neglect; mandatory reports of death; central abuse hotline.”
- F.A.C. 63F-11.004, Central Communications Center
- FDJJ Policy 1100 - Rights of Youth in DJJ Care, Custody, or Supervision
- F.A.C. 63E-7.006 (1)(e), Residential Services, Quality of Life and Youth Grievance Process
**Standard 2: Screening and Assessment Services**

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2.01 Positive Achievement Change Tool (PACT) Pre-Screen

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.

Guidelines/Requirements: Review a sample of youth who received a new law violation. For youth screened at a JAC or screening location, the PACT Pre-Screen will be completed during screening. For youth not taken into custody and screened, the PACT will be completed during the intake process. For youth who are already under DJJ supervision, a new full assessment may take the place of a new pre-screen.

Review the Department’s Juvenile Justice Information System (JJIS) to ensure a new PACT was completed subsequent to the youth receiving new charges.

The PACT is completed prior to the State Attorney Recommendation (SAR). The regional monitor(s)/reviewer(s) can see when the most recent PACT was completed prior to the SAR by reviewing the information provided on the report before the narratives.

Reference:

- F.A.C. 63D-9.004 (1), Probation, Assessment, Risk and Needs Assessment
- Community PACT Statewide Business Rules
2.02 PACT Full Assessment

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.

Guidelines/Requirements: Review sample of records in the Department’s Juvenile Justice Information System (JJIS) Intake Web PACT Module to determine whether the juvenile probation officer (JPO) completed a 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.

The PACT Full Assessment is completed prior to the Pre-Disposition Report (PDR) for Moderate-High and High risk youth. For youth designated Moderate-High or High risk to reoffend by the PACT, the PACT Full Assessment is completed prior to the Youth-Empowered Success (YES) Plan.

Reference:
- Community PACT Statewide Business Rules
- PCI-13-004, Redirection Eligibility and Referrals.
2.03 PACT Reassessment

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

Guidelines/Requirements: Review sample of records in the Department’s Juvenile Justice Information System (JJIS) Intake Web PACT Module to determine whether the JPO completed a PACT Reassessment.

Review a sample of records to ensure PACT Reassessment results are reflective of the youth’s current status, including changes in behavior and progress with YES Plan sanctions and goals.

Reassessments should be completed each time there is a new law violation, after each new disposition, and as pre- and post-testing for certain delinquency interventions such as Redirection services, Day Treatment, and Transition Services. Refer to contract language for specific requirements.

At a minimum, assessments shall not be more than six months old for any youth on supervision.

The PACT Full Assessment may be used in lieu of the Pre-Screen, but a Pre-Screen may not substitute for a Full Assessment.

Reference:

- F.A.C. 63D-10.003 (7), Probation, Intervention, Community Supervision Services
- Community PACT Statewide Business Rules.
2.04 Mental Health/Substance Abuse Screening

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

Guidelines/Requirements: Mental Health and Substance Abuse Screening is accomplished through administration of the MAYSI-2 and PACT. Suicide Risk Screening is accomplished through administration of the DJJ Suicide Risk Screening Instrument (SRSI) and MAYSI-2 – Suicide Ideation Subscale.

Upon a youth’s intake to a Juvenile Assessment Center (JAC) or Probation Screening Unit, a JAC screener or Juvenile Probation Officer administers the Positive Achievement Change Tool (PACT) and Massachusetts Youth Screening Instrument, Second Version (MAYSI-2) and probation sections of the Suicide Risk Screening Instrument (SRSI) (MHSA 002) to youth.

When there are “hits” for further assessment on the PACT, the PACT Mental Health and Substance Abuse Screening Report and Referral Form is generated in JJIS. When the PACT Mental Health and Substance Abuse Screening Report and Referral Form indicates the need for further mental health or substance abuse assessment, the JPO or JAC intake screener refers the youth for Comprehensive Assessment in accordance with the provisions of Rule 63D-9.004, F.A.C.

When further assessment is indicated by the SRSI, MAYSI-2 suicide ideation subscale or the PACT Mental Health and Substance Abuse Screening Report and Referral Form suicide category, or information obtained at initial intake suggests the youth is a Potential Suicide Risk, and the youth is to remain in the custody of DJJ, a Suicide Risk Alert must be entered into JJIS and the youth placed on suicide precautions and constant supervision until an Assessment of Suicide Risk is conducted.

When there are “hits” on the PACT Mental Health and Substance Abuse Screening Report and Referral Form suicide scale or SRSI indicates a need for further assessment
for a detained youth, the JAC or JPO Screener should have notified the detention center and made a referral to Mental Health for an Assessment of Suicide Risk. The JAC or JPO should enter a suicide risk alert on the JJIS Critical Alert list if one was not created automatically by JJIS.

**PACT:**

Staff shall complete a PACT Pre-Screen prior to generating the PACT Mental Health and Substance Abuse Screening Report and Referral Form. Staff shall refer the youth directly to the designated assessment provider(s) for the comprehensive assessment (i.e., TASC/SAMH) using the PACT Mental Health and Substance Abuse Screening Report and Referral Form. If the “Cannot Complete” function was used to complete the PACT Pre-Screen, the Forms Library version of the PACT Mental Health and Substance Abuse Screening Report and Referral Form is required if the youth was screened for detention. This process shall be documented in case notes.

If the MAYSI results conflict with the PACT results in identifying a need for further assessment, the results of the PACT shall be override and a referral for further assessment shall be made. The reason for the override shall be documented on the PACT Mental Health and Substance Abuse Screening Report and Referral Form.

If staff observations or collateral contacts reveal the need for further assessment regardless of the results of the PACT, SRSI or MAYSI-2 a referral for further assessment shall be recommended. The reason for the override shall be documented on the PACT Mental Health and Substance Abuse Screening Report and Referral Form.

**Massachusetts Youth Screening Instrument - Second Version (MAYSI-2):**

- The MAYSI-2 shall be administered upon each youth’s admission.
- MAYSI-2 is administered on the day of admission in a confidential manner.
- MAYSI-2 is administered on JJIS by a staff member who has completed the DJJ training specific to its administration.
- If MAYSI-2 indicates assessment is required, a referral shall be made for further evaluation or immediate attention.
- Youth whose MAYSI-2 indicate elevated suicide risk subscales shall be placed on Suicide Precautions and referred for an Assessment of Suicide Risk.
• If staff believes youth has a mental health or substance abuse problem or is a suicide risk, the staff should make a referral for further evaluation, regardless of MAYSI-2 findings.

• If staff determines referral for further evaluation is needed, but MAYSI-2 does not indicate referral is necessary, staff person enters into JJIS the information, observations, events, or concerns leading to the determination a referral was needed.

• When the MAYSI-2 or other admission information indicates the need for an assessment, crisis intervention, or emergency services, the program director or designee shall be notified and referral made.

• The program director shall ensure an Assessment of Suicide Risk (ASR) is conducted within twenty-four hours when the MAYSI-2 category "Suicide Ideation" indicates further assessment is needed, or other information obtained at intake/admission suggests potential suicide risk (and ensure the youth is referred for an immediate assessment or emergency services if he/she is in crisis).

**Suicide Risk Screening Instrument (SRSI):**

• Upon intake, the DJJ Suicide Risk Screening Instrument (SRSI) Form MHSA 002 must be administered on JJIS.

• Complete entries include summary and recommendations in "Screening Results" sections.

• Youth with ANY positive ("YES") responses on the SRSI (Form MHSA 002) are placed on suicide precautions and a mental health referral is completed, which documents the youth's need for an Assessment of Suicide Risk.

Review sample of youth records for PACT Prescreen, MAYSI-2, and SRSI.

**Release Notifications:**

If the youth is to be released to the parent/guardian, the parent/guardian shall be informed of the results of the PACT and shall be given information as to the location of the comprehensive assessment provider, the appointment time, if arranged by the juvenile probation officer (JPO), and the importance of delivering the youth for the follow-up appointment. The parent/guardian shall be provided a copy of the completed PACT Mental Health and Substance Abuse Screening Report and Referral Form. This process shall be documented in case notes.
For detained youth, the JPO shall provide written notification to the detention center using the PACT Mental Health and Substance Abuse Screening Report and Referral Form of any need for crisis intervention or for youth who are indicated as at-risk for suicide, and shall notify the detention center of any need for referral to the center’s mental health professional for youth who are in need of further mental health or substance abuse evaluation. This process shall be documented in case notes.

Notifications of Suicide Risk:

- If suicide risk is indicated by the SRSI, MAYS1-2 suicide ideation subscale or the PACT Mental Health and Substance Abuse Screening Report and Referral Form suicide category, or information obtained at initial intake suggests the youth is a Potential Suicide Risk, the following action must be taken in these circumstances:
  - If the youth is to remain in the custody of DJJ, a Suicide Risk Alert must be entered into JJIS and the youth placed on Constant Supervision until an Assessment of Suicide Risk is conducted.
  - If the youth is to be placed in a secure detention center, the detention center is to be notified and notification documented on the Suicide Risk Screening Instrument (SRSI) (MHSA 002).
  - If the youth is to be released to the custody of the parent/guardian, the parent/guardian must be informed that Suicide Risk Factors were disclosed during screening and an Assessment of Suicide Risk should be conducted by a Mental Health Provider in the community.
  - The parent or guardian must be provided the Suicide Risk Screening Parent/Guardian Notification Form (MHSA 003). The parent/guardian’s signature is to be recorded on MHSA 003.
  - A copy of form MHSA 003, signed by the parent or guardian, is to be permanently filed in the youth’s case management record and Individual Healthcare Record.

Review a sample of records on JJIS New Web Forms to verify the documents were generated in JJIS. Case notes must outline the referral process.

Reference:

- F.A.C. 63D-9.004 (2), Probation, Assessment, Risk and Needs Assessment
- F.A.C. 63D-9.004 (4), Probation, Assessment, Risk and Needs Assessment
- Community PACT Statewide Business Rules
2.05 Comprehensive Assessment

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.

— CRITICAL —

**Guidelines/Requirements:** If further services are recommended as a result of the comprehensive assessment, staff refer youth for services as indicated, regardless of legal status. Staff do not wait for disposition to refer youth for identified service needs.

If the youth is on intake status, or otherwise not court-ordered, staff document referral and denial if youth and/or parent/guardian refuses services.

A comprehensive assessment is a report on the youth’s physical, psychological, educational, vocational, social condition and family environment as they relate to the youth’s need for rehabilitative and treatment services, including substance abuse and mental health treatment services, literacy services, medical services, psychiatric services, family services, and other specialized services, as appropriate.

The comprehensive assessment is designed to guide the Department to the right level of intervention and treatment needs based on the individualized needs of the youth.

When the comprehensive assessment is received, the JPO shall forward the assessment to the detention center for youth held in secure detention.

The comprehensive assessment is not equivalent to the comprehensive evaluation.

Review a sample of PACT mental health and substance abuse screening report and referrals to determine the need for referral for a comprehensive assessment.

Review records to determine if a referral was made for those youth recommended for further services. In areas where no comprehensive assessment provider is in place, the juvenile probation officer (JPO) shall refer the youth to a community based provider for a comparable assessment.
Reference:

- F.A.C. 63D-9.004 (2), Probation, Assessment, Risk and Needs Assessment

- F.A.C. 63D-9.005, Probation, Assessment, Comprehensive Assessment
2.06 **State Attorney Recommendation (SAR)**

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.

**Guidelines/Requirements:** The intake process is an analysis of the facts resulting in the youth being presented to the Department for an alleged law-violation. A summary of those facts is provided within the State Attorney Recommendation. Review sample of records to ensure the SAR addressed the following: attitude of the youth, cooperation of the parent/guardian, ability of the parent/guardian to control the youth, attitudes of the complainant and the victim, information related to the youth’s involvement or association with a criminal street gang, and any available information on mental health and/or substance abuse needs.

In order for the SAR to appropriately generate in the Department’s Juvenile Justice Information System (JJIS), staff must complete a PACT prior to the SAR.

If the “Cannot Complete” function is used to complete the PACT Pre-Screen, determine if the staff indicated the reason why the youth did not participate in the intake process in the narrative section of the SAR.

Review sample of records to ensure the Department’s recommendation should reflect the youth’s risk to reoffend. (All youth at low risk to reoffend shall be considered for non-judicial action or diversion.) If the recommendation does not reflect the risk to reoffend, determine if it was explained in the narrative section of the SAR.

Review sample of records to determine if the SAR is submitted to the State Attorney within the required time frame (twenty-four hours if detained, twenty days if released or at-large). If the circuit has an agreement with the local State Attorney waiving SARs or requiring SARs only in certain circumstances, review the program in accordance with the agreement. When reviewing if the SAR was submitted...

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within the appropriate timeframe, the SAR should have also been signed by the juvenile probation officer supervisor (JPOS) or designee prior to submission.

Reference:
- F.A.C. 63D-9.003(4)(b), Probation, Assessment, Intake Services
- Community PACT Statewide Business Rules
2.07 **Pre-Disposition Report (PDR)**

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.

**Guidelines/Requirements:** The juvenile probation officer (JPO) shall not attempt to summarize or interpret the comprehensive assessment summary or any subsequent evaluation in the PDR.

The PDR shall include an intervention plan recommending the most appropriate placement to meet the youth’s needs at the minimum restrictiveness level reasonably ensuring public safety and the youth’s accountability.

While the Department has the final responsibility for making recommendations, the youth and parent/guardian shall be given the opportunity to be involved in the development of sanctions and intervention plans.

If the PDR includes a recommendation for residential commitment, the recommendation must be the result of a pre-staffing between the JPO and the juvenile probation officer supervisor (JPOS), and a commitment conference with the commitment manager.

In order for the PDR to appropriately generate in the Department’s Juvenile Justice Information System JJIS, staff must complete a PACT prior to generating the PDR. For Moderate-High and High risk to reoffend youth, staff must complete a PACT Full Assessment.

Review sample of records to determine whether critical issues identified by the PACT are discussed in the narrative section of the PDR and recommendations in the PDR reflect treatment needs identified through the PACT and/or other sources.

Review sample of records to ensure PDRs were submitted to the court at least forty-eight hours prior to disposition.

Review a sample of records to ensure whether the JPO incorporated the recommendations of the comprehensive assessment and attached the comprehensive assessment
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<td>summary to the PDR. Ensure the PDR was also signed by the JPOS or designee prior to submission.</td>
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<td>- F.A.C. 63D-9.003(6), Probation, Assessment, Intake Services</td>
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Standard 3: Intervention Services

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* The Department has identified certain key critical indicators. These indicators represent critical areas requiring 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.
3.01 Youth-Empowered Success (YES) Plan Development

Staff complete the YES Plan (Form DJJ/PACTFRM 4) for youth on Probation, Conditional Release (CR), and Post-Commitment Probation (PCP).

Guidelines/Requirements: Review a sample of files to ensure the initial YES Plan was developed within thirty calendar days of disposition in the case of probation or release from a residential program for CR or PCP youth.

Review files to ensure the YES Plan was signed by all parties, including the youth, parent/guardian, juvenile probation officer (JPO), and juvenile probation officer supervisor (JPOS) within 30 calendar days of disposition in the case of probation or release from a residential program for CR or PCP youth. (Electronic signature for JPOS is acceptable.)

Youth and parent/guardian signatures do not indicate cooperative development of the YES Plan.

Review sample of files to ensure the youth and parent/guardian participated in the development of the YES Plan (i.e., action steps and target dates for the completion of all sanctions and goals). Case notes should clearly reflect the youth and/or parent/guardian were involved, or refused to be involved, in the development of the YES Plan.

The youth and parent(s)/guardian(s) shall be provided with a copy of the initial YES Plan upon their review and signature.

Parent/guardian requirements are waived whenever a youth is eighteen years of age or older, living independently, or otherwise disengaged from his/her parent/guardian as documented in the case notes.

All youth shall have a PACT completed prior to the development of the initial YES Plan. If a youth is identified as Moderate-High or High risk to reoffend by the PACT, the JPO shall complete a PACT Full Assessment prior to the development of the initial YES Plan.

Reference:
- F.A.C. 63D-10.003 (4), Probation, Intervention, Community Supervision Services
- Community PACT Statewide Business Rules
3.02 **Youth Requirement/PACT Goal Elements**

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).

**Guidelines/Requirements:** Court-ordered sanctions relevant to the youth’s needs shall be documented in JJIS in the Youth Requirements module. Each Youth Requirement shall contain at least one specific action step for the youth, parent/guardian, and juvenile probation officer (JPO) clearly defining who is responsible, what action should be taken, and how often the action should be taken, if applicable. Sanctions and goals are “relevant” if they require specific tasks of the youth, involve treatment or counseling, or are something the JPO will be monitoring during the 90-day plan periods. Sanctions that may be omitted from the YES Plan may be driver’s license suspensions, possession of weapons, or other general conditions that do not warrant or require on-going JPO supervision.

For youth who are Moderate-High or High risk to reoffend, at least one of the top three criminogenic needs shall be addressed by creating a Change Goal in the Department’s Juvenile Justice Information System (JJIS). The criminogenic needs are the dynamic risk factors. Each Change Goal shall contain at least one specific action step for the youth, parent/guardian, and JPO clearly defining who is responsible, what action should be taken, and how often the action should be taken.

For youth who are identified by the PACT as high risk to reoffend, the YES Plan shall include an evidence-based intervention as defined in Rule 63E-7.002, F.A.C., targeting one of the top three criminogenic needs, unless the JPO documents, in writing, barriers to participation, such as the lack of available services, lack of youth readiness to voluntarily participate, transportation difficulties, or lack of parental/guardian approval for participation.

A Change Goal may address an item that is part of the court order, as long as it is also one of the top three criminogenic needs.
Review a sample of files to ensure completion of Youth Requirements Goals and confirm required elements.

**Reference:**

- F.A.C. 63D-10.003 (4), Probation, Intervention, Community Supervision Services
- Community PACT Statewide Business Rules

Yes ☐  No ☐  N/A ☐
3.03 Transition Planning/Reintegration

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 Discharged. 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).

— CRITICAL —

Guidelines/Requirements: While the youth is receiving treatment at the residential facility, the juvenile probation officer (JPO) shall assist the parent/guardian and program staff, as necessary, to ensure communication is conducive to the youth’s successful completion of the program. Planning for the youth’s transition to the community shall begin at the commitment conference, when the appropriate post-residential services are identified. Planning for the youth’s successful transition involves the ongoing efforts of the youth, parent/guardian, treatment team, and JPO.

Review case notes for youth in a residential program. The case notes must document the JPO’s participation in intervention and monthly treatment team meetings. If the JPO does not participate in a treatment team meeting, he/she must follow-up with the program and youth and document the youth’s treatment updates. Monthly contact with the youth and program is required.

Review case notes for youth in a residential program. The case notes must document at least one phone call per month during the youth’s placement to the youth’s parent/guardian unless the youth is 18 years of age or older and has requested in writing that his/her parent(s)/guardian(s) not be contacted. (The contact must be transition focused.)

Review case notes for youth in a residential program. The case notes must document the JPO’s participation in the Transition Conference held in accordance with paragraph 63T-1.004(1)(a), F.A.C. The case notes must clearly state the transition plan/aftercare services.

Review case notes for youth in a residential program. The case notes must document the JPO’s participation in the Exit Conference held in accordance with paragraph

Yes □ No □ N/A □

Yes □ No □ N/A □

Yes □ No □ N/A □

Yes □ No □ N/A □
63T-1.004(1)(a), F.A.C.

Review case notes for youth in a residential program. The case notes must document receipt of the Pre-Release Notification (PRN) and documentation of the PRN being forwarded to the court within three working days of JPO receiving it. Notes should indicate if the PRN was not submitted due to disagreement or insufficient content.

Review the case notes for youth in a residential program. All youth being released from a residential commitment program must have an Internal Staffing or a Community Reentry Team Meeting (CRT) based on the Statewide Community Reentry Team Protocol. The case notes should document who was in attendance and the youth’s transition plan.

Review case notes for youth on conditional release and/or post-commitment probation. The case notes must document referrals for any aftercare services identified during the transition conference, exit conference, CRT, and/or discharge summary (if applicable).

Review the YES Plan for youth on conditional release/post commitment probation to ensure treatment and intervention recommendations identified at the transition conference, exit conference, CRT, and/or in the discharge summary are included.

Review case notes for youth on conditional release and/or post-commitment probation. The case notes must document follow-up on any aftercare services made within 30 days of approval of the YES Plan.

Reference:

- F.A.C. 63D-10.005, Probation, Intervention, Residential Case Management and Transitional Planning
- F.A.C. 63T-1.003 (Transition) Community Supervision
- Statewide Community Reentry Team Protocol
3.04 Referrals for Intervention and Treatment Services

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). 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.

— CRITICAL —

Guidelines/Requirements: The juvenile probation officer (JPO) shall refer the youth and parent/guardian to the appropriate mental health and/or substance abuse treatment service(s) based upon the youth’s Comprehensive Assessment findings and recommendations and provide support and follow-up as necessary to ensure the completion of sanctions and goals identified in the youth’s YES Plan.

The JPO shall either provide the youth and parent/guardian with referral information or make a direct referral to the service provider within ten calendar days of the approval of the YES Plan.

The JPO shall make contact with the service provider within thirty calendar days of the approval of the YES Plan to ensure the youth and parent/guardian have participated in the admission process and are receiving services.

The JPO shall ensure progress reports, written or verbal, are received from the provider on a regular basis. The JPO shall follow-up with the youth and parent/guardian on any compliance issues communicated by the service provider.

The JPO shall document referrals for services, follow-up with the service provider, youth, and parent/guardian, and any other related contacts in the case notes.
Staff shall be responsible for coordinating services for the youth in accordance with the youth requirements and PACT goals. This includes using formal and informal interagency agreements to link the youth and their families with the services they need. Staff may initially need to broker services, schedule appointments, and arrange transportation for these services. Staff is also responsible for maintaining contact with service providers to ensure services are being received and to follow-up on any recommendations made.

Review files/case notes to determine youth and parent/guardian were referred or provided referral information for services identified in Youth Requirements and Goals.

**Reference:**

- F.A.C. 63D-10.003 (5), Probation, Intervention, Community Supervision Services.
3.05 YES Plan Implementation/Supervision

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 youth, and parent/guardian.

— CRITICAL —

Guidelines/Requirements: Staff shall be responsible for monitoring the youth’s compliance with the court order and the completion of the YES Plan sanctions and intervention goals.

At a minimum, regardless of PACT risk level, the JPO shall supervise youth as follows:

Initial 180 Days:
Low and Moderate: The juvenile probation officer (JPO) shall make one (1) face-to-face contact with youth and one (1) contact with parent or guardian every month to ensure the youth’s compliance with the court order and the completion of YES Plan sanctions and goals. (Contact with the parent/guardian can be made via telephone, email, email-to-text, written, or face-to-face.)

Moderate-High and High: The JPO shall make two (2) face-to-face contacts with youth and one (1) contact with parent or guardian every month to ensure the youth’s compliance with the court order and the completion of YES Plan sanctions and goals. (Contact with the parent/guardian can be made via telephone, email, email-to-text, written, or face-to-face.)

Post 180 Days:
If, after 180 days, the youth has successfully completed all intervention services and sanctions except restitution, but is making regular payments and has no pending violations, but the court does not terminate probation, the JPO shall supervise the youth as follows:

Low and Moderate: The JPO shall make one (1) face-to-face contacts with youth every month (either face-to-face or by telephone) to ensure the youth’s compliance with the court order and the completion of YES Plan sanctions and goals. The JPO shall make one (1) contact with parent/guardian via telephone, email, email-to-text, written, or face-to-face.
**Moderate-High and High:** The JPO shall make one (1) face-to-face contacts every month to ensure the youth’s compliance with the court order and the completion of YES Plan sanctions and goals. The JPO shall make one (1) contact with parent/guardian via telephone, email, email-to-text, written, or face-to-face. These contacts may be made at circuit identified Youth Reporting Centers located in each community, at the family’s home, school, or community event, or at the probation office.

The JPO shall make one contact with the youth and a program staff member once every month for any youth in a community-based substance abuse/mental health program. This contact can be made via telephone, written, or face-to-face.

**Note:** The JPO is permitted to step a youth down if restitution and/or court fees are the only sanctions remaining, so long as the youth has made a good faith effort to make regular payments.

The components of maintaining regular and quality contact will continue until supervision is terminated or jurisdiction expires. The schedule shall be adjusted accordingly if the risk to reoffend changes as a result of any PACT reassessments conducted in accordance with F.A.C. 63D-10.003(7). If the youth incurs a new-law or technical violation of supervision, the schedule shall revert to that outlined under Initial 180 Days.

Review a sample of files to determine if staff documents all case activities, including face-to-face interactions and telephone contacts with the youth, parent/guardian, and providers, and reviews written or verbal reports from collateral sources, such as educational institutions, employers, counselors, and electronic databases.

**Reference:**
- F.A.C. 63D-10.003 (6), Probation, Intervention, Community Supervision Services
- Community Supervision Contact Schedule
- PCI-16-003, Contact with Youth and Families – Amendment I
3.06 Ninety-Day Supervisory Reviews

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

Guidelines/Requirements: Once the initial YES Plan has been finalized and approved, the JPOS shall conduct a supervisory case review of each case at least once every 90 calendar days while the youth is under supervision (Probation, CR, or PCP). A JPOS review of a case can occur at any time or at multiple times during a 90-day window.

JJIS case notebook module shall be reviewed to confirm supervisory reviews are being completed appropriately.

Reference:

- F.A.C. 63D-8.001 (23), Probation, General, Definitions
- F.A.C. 63D-10.003 (8), Probation, Intervention, Community Supervision Services
- Statewide PACT Business Rules
3.07 Ninety-Day YES Plan Updates

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 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.

Guidelines/Requirements: After changes are made in the Youth Requirements Module a new YES Plan must be generated in the Department’s Juvenile Justice Information System (JJIS) at least once every ninety-days. This ensures progress made by the youth during each ninety-day window is clearly documented by the YES Plan in JJIS.

The juvenile probation officer supervisor (JPOS) shall ensure the youth is receiving appropriate supervision and interventions.

Review a sample of files to determine at each ninety-day update, the juvenile probation officer (JPO) updates target dates, Youth Requirements and Goals in JJIS prior to the supervisory case review, to include 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.

Reference:

- F.A.C. 63D-10.003 (8)(b)(c)(d), Probation, Intervention, Community Supervision Services
- Community PACT Statewide Business Rules.
3.08 Termination of Supervision

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.

Guidelines/Requirements: Staff completes the Progress Report (DJJ/IS Form 12) to request termination for youth on Probation or Post-Commitment Probation, or the Pre-Release Notification and Acknowledgment (PRN) form (Form RS 008) and Progress Report form to request termination for youth on Conditional Release. For youth who are Moderate-High or High risk to reoffend, staff uses the Comparative Risk Factor Scores and/or Comparative Protective Factor Scores reports in the JJIS PACT module to demonstrate changes in criminogenic needs and/or protective factors.

Substantial compliance means the youth has exhibited, through routine payments, the intention to follow through with his or her obligation. The juvenile probation officer (JPO) shall verify the amount of restitution paid with the clerk of court. The JPO shall recommend the court retain jurisdiction for restitution and/or court fees if full payment has not yet been made.

Prior to requesting termination, the JPO shall check with local law enforcement to determine if there are outstanding warrants or charges for the youth who have not been filed. At a minimum, this includes the sheriff and police department of the youth’s county and city of residence.

The JPO shall notify the court fifteen working days prior to the loss of jurisdiction of a case by submitting a Progress Report. Upon loss of jurisdiction, the JPO shall close the case.

Within five working days of receipt of the court’s termination order or the date of loss of jurisdiction, the JPO shall update JJIS.

The JPO shall notify the youth and parent/guardian in writing the youth is no longer under supervision. (Electronic communication is acceptable.)
Review closed files. Review the case notes in JJIS to confirm JPO or case manager checked on youth’s status to ensure there were no outstanding warrants or charges.

Review the progress reports in the closed youth records. Confirm youth who are Moderate-High or High risk reoffend had the Comparative Protective Factor Scores or risk factor report and request of termination.

When there is a loss of jurisdiction review documentation that the JPO or case manager notified the court fifteen work days prior to loss of jurisdiction, and within five working days of receipt of loss or jurisdiction from the court, the JPO or case manager updated JJIS.

**Reference:**

- F.A.C. 63D-10.006, Probation, Intervention, Termination of Supervision
- Community PACT Statewide Business Rules.