

POLICY 3.10 (47) ASSESSING AND PLACING YOUTH IN JR

Policy Committee Chair

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Approved



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Authorizing Sources

RCW 13.40
WAC 388-730
Tribal Memorandum of Understanding
PREA

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I. PURPOSE AND SCOPE

This document establishes policy and procedure for the entry and placement of youth into the Juvenile Rehabilitation (JR) continuum of care. The policy provides guidelines for staff to determine the least restrictive environment for youth within the JR continuum of care based on assessment and identification of youth needs and strengths. The policy establishes guidelines for determining parole eligibility and preparing youth for transition between facilities and programs within the continuum of care as well as community reentry.

All staff, contractors, volunteers, and interns working in the Division of Juvenile Institution Programs, Division of Community Programs and Parole, and the Division of Operations and Support Services are responsible for reviewing and complying with JR policies.

II. POLICY

1. JR will maintain a formal system for the oversight of youth entry and placement into the JR continuum of care.

- 1.1. Assigned supervisors will provide quality assurance and oversight of the process.
- 1.2. Regional staff will gather information for youth placement into an institution. Information gathered will be entered into the Automated Client Tracking (ACT) system, which will assist in determining placement.
- 1.3. ITM Intake Specialists at each institution will complete the required screens and assessments and collect collateral contacts once youth arrive at the institution.

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- 2. JR staff will practice linguistic and cultural sensitivity and awareness throughout the entry and placement process.**
 - 2.1. Interpreter services may be accessed in accordance with Policy 2.50, *Accessing Interpreter and Translation Services For Youth & Families*, if needed.
- 3. JR staff will include both youth and family during the placement and assessment process to assist in identifying youth strengths and needs for treatment and reentry planning.**
- 4. JR will maintain a quality assurance process for entry and placement.**
- 5. Youth will be transferred from the court of commitment to the JR facility within 48 hours of notification of commitment, where possible.**
- 6. JR has the authority to determine the placement of youth who are committed to JR and the course of treatment in accordance with Policy 4.10 (35), *Adhering to the Integrated Treatment Model*.**
- 7. All information regarding entry and placement will be documented in ACT.**
- 8. Copies of forms requiring signature will be maintained in the youth's case file in accordance with Policy 2.40 (11), *Managing Youth Case Files*.**

PLACEMENT

- 9. JR must have a court order from the court of commitment in order to place a youth within its continuum of care.**
 - 9.1. Placement staff within the region of the court of commitment will follow up with the court to address any discrepancies in the court order.
 - 9.2. Placement staff will obtain information from the juvenile court in order to complete a Sentencing Worksheet (DSHS Form 20-198) and will document the information in ACT during the pre-placement process.
 - 9.3. Placement staff will complete the pre-placement form and the Risk Assessment Institution (RAI) in ACT, which will determine the youth's security classification level and the JR facility where the youth will be placed.
 - 9.4. Placement staff will only place youth and schedule transportation accordingly following the receipt of a court order.
- 10. Information regarding youth who return to court on a new charge after placement in JR will be input into ACT by the JR facility with custody at the time of the technical recommitment.**
- 11. Placement staff will utilize the Youth Placement Checklist when reviewing criteria and determining placement at a JR facility. Youth must be placed in the least restrictive environment based on risk and individual treatment needs.**
 - 11.1. Placement of Youthful Offenders from the Department of Corrections (DOC) are coordinated between the DOC Liaison and the designated institution staff.

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- 12. Youth committed to JR through tribal courts will be placed in collaboration with the sending tribal court, in accordance with Tribal Intergovernmental Agreements (IGA) and regional 7.01 Plans.**
- 13. JR will follow timelines for entry and placement per County Agreements and Tribal Intergovernmental Agreements with the juvenile and tribal courts as well as best practices outlined in the Initial Placement Checklist and the Intake and Assessment Checklist.**

ASSESSMENT

- 14. Youth committed by a juvenile court and Youthful Offenders from the DOC will complete the same assessment process.**
- 15. JR must ensure juveniles are assessed at intake to the assigned institution to determine appropriate treatment programming.**
 - 15.1. Ongoing risk and needs assessment must occur during a juvenile's commitment to JR.
 - 15.2. Assessments must include risk to public safety, risk for sexually aggressive behavior, and risk for vulnerability to sexual aggression. Other assessments may also be used to determine the course of treatment and placement of youth in the JR continuum of care.
- 16. The initial intake screening begins within the first hour of arrival. Institution staff are responsible for completing the following screens and assessments.**
 - 16.1. Youth interview
 - 16.2. Suicide/Self-Harm Screen (SSS)
 - 16.3. Mental Health and Substance Abuse Screen (GAIN-SS)
 - 16.4. The Intake Client Health Screen will be completed by trained staff.
 - 16.5. The PREA Youth Intake Form (DSHS Form 20-280) will be reviewed with the youth, in accordance with Policy 5.90 (49), *Applying PREA Juvenile Standards in JR*.
 - 16.6. Staff will collect the Consent for Release of Records (DSHS 20-250) and assign the youth to a living unit.
- 17. The assessment process begins in alignment with the Intake and Assessment Checklist.**
 - 17.1. ITM Intake Specialists will complete the SAVY within 72 hours of arrival at the initial JR facility in accordance with Policy 3.20 (39), *Assessing Sexually Aggressive or Vulnerable Youth (SAVY)*.
 - 17.2. ITM Intake Specialists will ensure the PREA Youth Intake Form (DSHS Form 20-280) has been completed and signed, in accordance with Policy 5.90 (49), *Applying PREA Juvenile Standards in JR*.
 - 17.3. Within 7 days of intake to a JR facility, ITM Intake Specialists will:
 - 17.3.1. Make collateral contacts with family and other natural supports.

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- 17.3.2. Collect records from other treatment or service providers or law enforcement, using authorization provided by Authorization to Disclose DSHS Records (DSHS Form 17-063).
 - 17.3.3. Notify youth of legal requirements with the Notification and Legal Requirements form (DSHS Form 20-236)
 - 17.3.4. Complete the Indian Heritage Assessment and Notice to Tribes (DSHS Form 09-539a) for tribal notification, if applicable. Forms are sent to the JR Tribal Liaison, who will complete the tribal notification process.
 - 17.3.5. Review registration requirements for youth who are required to register:
 - 17.3.5.1. For felony firearm offenders with a court order to register, use the Notice of Felony Firearm Offender Registration Requirements (DSHS Form 27-102),
 - 17.3.5.2. For youth who have sexually offended and have a registerable offense, use the Notice of Sex/Kidnapping Offender Registration Requirements (DSHS Form 09-746)
 - 17.3.6. Complete the Notice of Foreign National Incarceration (DSHS Form 20-246) if applicable, in accordance with Policy 2.60 (38), *Managing Youth who are Foreign Nationals*.
 - 17.3.7. Complete the Integrated Treatment Assessment (ITA)
 - 17.4. Within 14 days of intake to a JR facility, ITM Intake Specialists will:
 - 17.4.1. Prepare the Initial Client Information (ICI) report utilizing information gathered during the assessment process.
 - 17.4.2. Review and update the Risk Assessment Institution (RAI).
 - 17.4.3. Review and update identifying information in ACT.
- 18. The Case Manager must complete a Client Behavior Assessment within 14 days.**
- 19. A Reentry Team Meeting (RTM) meeting, convened by institution staff, will be held within 21 days of admission.**
- 19.1. Information collected during the assessment phase must be used to inform the Integrated Treatment Plan (ITP). The ITP must be completed at 30 days post-admission.
 - 19.2. Staff will work to ensure that the youth and family are present for the meeting.
- 20. If a youth discloses information about prior abuse or neglect, the staff who receives the report will immediately report to Child Protective Services (CPS) in accordance with Policy 5.91 (34), *Reporting Abuse and Neglect of JR Youth*, and Policy 5.90 (49), *Applying PREA Juvenile Standards in JR*.**
- 21. The ITM Intake Specialist will complete the ITA 30 days prior to release from residential programming and 30 days prior to discharge from parole. YOP youth do not complete a final ITA.**
- 22. Community Facility placement will be automatically assigned by ACT at intake.**

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23. Intensive Parole eligibility not mandated by offense type will be established by the Risk Assessment Recidivism (RAR) score 30 days following placement in JR. The RAR is automatically generated in ACT.

24. JR may assign other parole types based on youth and family needs after the initial 30 days depending on youth eligibility and program participation.

24.1. FIT Parole is assigned through Central Office.

24.2. Other parole is assigned by Community Programs staff.

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III. DEFINITIONS

Continuum of Care: A comprehensive system of integrated rehabilitative services and treatment in mental, behavioral and physical healthcare and social services facilitated via case management. The continuum organizes these services, treatments and placements according to assessed strengths and needs in determining the intensity of services delivered in appropriate settings. The movement in and through the continuum of care can either be promotional or demotional. Services are provided consistent with statutory authority. The continuum in JR begins with commitment to JR by the local juvenile court, progresses through diagnostic, institutions, community facility placement, release to community with or without parole and ends with discharge from commitment.

Disposition Alternative: Some youth who would otherwise be committed to JR are eligible for a alternate disposition that allows them to remain in the community and receive local services. Disposition alternatives may also be available to youth who have committed local sanction crimes and would not be committed to JR. The following programs are the available disposition alternatives:

- Special Sex Offender Disposition Alternative (SSODA)
- Chemical Dependency Disposition Alternative (CDDA)
- Suspended Disposition Alternative (SDA – Option B)
- Mental Health Disposition Alternative (MHDA)

Family: For purposes of rehabilitation, family means the people the youth lives with or relies on for support and who have a significant role in the youth's life. A spouse, biological parents, adoptive or foster parents, grandparents, guardians, siblings, aunts, uncles or person(s) with whom the youth lived for a significant period of time and who acted as the youth's parent is considered family for the purpose of this policy.

Initial Client Information (ICI): A report generated from information gathered during the assessment process to support the case management and treatment process.

Integrated Treatment Assessment (ITA): A validated tool with the juvenile justice population to measure risk and protective factors for JR youth. The information collected supports the treatment and transition work for JR youth and assists JR in measuring the impact of the Integrated Treatment Model as delivered in JR's residential and community treatment programs.

Global Appraisal of Individual Needs Short Screener (GAIN-SS): A screen for mental health and drug/alcohol needs which prompts a full assessment if needed.

Non-residential Commitment: A youth with enough detention credit from the local juvenile court as documented in the court order to have completed the assigned JR commitment without entering an institution.

Risk Assessment Institution (RAI): Risk assessment tool completed in ACT to determine initial security classification and to which institution (medium or maximum security) a youth will be initially placed. The RAI is completed following the initial diagnostic activities completed by assigned regional staff prior to youth placement in an institution.

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Sentencing Worksheet: The Sentencing Worksheet is used to report information pertinent to the disposition of each juvenile admitted to JR or those sentenced to community supervision through the Special Sex Offender Disposition Alternative (SSODA) or Option B (Chemical Dependency Disposition Alternative (CDDA)). The form serves as a worksheet for determining the minimum and maximum length of the standard range of confinement for each offense. The structure of the form conforms to and facilitates the application of the disposition standards developed by the Sentencing Guidelines Commission, as required by RCW 13.40.030.

Sexually Aggressive/Vulnerable Youth (SAVY) Assessment: An assessment tool developed by JR to assess a youth’s risk for sexually aggressive behavior or for vulnerability to sexual victimization.

Suicide/Self-harm Screen (SSS): A validated screening tool completed by staff on all youth to evaluate self-harm and suicide risk. Designated Suicide Prevention Specialists (DSPS) review the completed SSS with staff and determine a protective course of action for youth exhibiting signs and symptoms of self-harm or suicide risk. In addition to administration at initial intake into an institution or community facility; it is completed when staff perceive a youth is “at-risk” for self-harm or suicidal behavior; and prior to a Suicide Precaution Level (SPL) being reduced or increased.

Technical Recommitment: Any sentence a youth receives while already placed at the institution, including any charges accrued while in JR or any outstanding pending charges that were resolved. The administrative secretaries at the institutions are responsible for entering the new sentence information in the sentencing worksheet.

IV. REFERENCES

JR-DOC MOU	Tribal Intergovernmental Agreements (IGAs)
Juvenile Disposition Manual, 2013	Regional 7.01 Plans
Parole Standard 9	

V. RELATED JR POLICIES

Policy 2.40 (11) – Managing Youth Case Files	Policy 4.10 (35) – Adhering to the Integrated Treatment Model
Policy 2.50 (36) – Accessing Interpreter and Translation Services For Youth & Families	Policy 5.90 (49) – Applying PREA Juvenile Standards in JR
Policy 2.60 (38) – Managing Youth who are Foreign Nationals	Policy 5.91 (34) – Reporting Abuse and Neglect of JR Youth
Policy 3.20 (39) – Assessing Sexually Aggressive or Vulnerable Youth (SAVY)	

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VI. FORMS AND DOCUMENTS

Document Title	Available In ACT	Link to Paper form
Initial Placement Checklist		
Intake and Assessment Checklist		
Quality Assurance Process		<i>In Draft</i>
Authorization to Disclose DSHS Records		DSHS Form 17-063
Notification and Legal Requirements		DSHS Form 20-236
Indian Heritage Assessment and Notice to Tribes		DSHS Form 09-539a
Notice of Foreign National Incarceration		DSHS Form 20-246
PREA Youth Intake Form		DSHS Form 20-280
Notice of Felony Firearm Offender Registration Requirements		DSHS Form 27-102
Notice of Sex/Kidnapping Offender Registration Requirements		DSHS Form 09-746
Sentencing Worksheet		DSHS Form 20-198
