

**2019**

**Standard Operating Procedures  
For  
Contract Providers**



**Office of Juvenile Justice**

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## MISSION, VISION, GUIDING PRINCIPLES

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### MISSION:

OJJ protects the public by providing safe and effective, individualized services to youth to become productive, law-abiding citizens.

### VISION:

OJJ is a quality system of care which embraces partnerships with families, communities and stakeholders to assist youth in redirecting their lives toward responsible citizenship.

### GUIDING PRINCIPLES:

<b>Honesty</b>	To be honest; do everything with integrity.
<b>Achievement</b>	To be outcome-oriented in achieving results consistent with our mission.
<b>Versatility</b>	To value, promote and support diversity and cultural competence.
<b>Ethical</b>	To be ethical; to do the right thing, both legally and morally.
<b>Focused</b>	To be focused on empowering people to succeed.
<b>Accountable</b>	To be accountable for the effective and efficient management of our resources.
<b>Informed</b>	To be informed and guided in our decisions by appropriate and valid data.
<b>Team Work</b>	To be an effective and efficient team of professionals.
<b>Harmonious</b>	To be inclusive – involve all parties, both External and internal, who need to be a part of the process.

**HAVE FAITH: Together We Help Change Lives**

## SECTION 1:      PHYSICAL PLANT

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The Youth Services, Office of Juvenile Justice (YS/OJJ) position is that the condition and appearance of the physical surroundings where participating youth are located may influence their behavior. The provider shall ensure that all buildings used to house, feed, supervise or instruct youth are structurally sound, adequately maintained, appropriately furnished and sanitary at all times.

### **1.1            Compliance with State and Local Codes and Ordinances**

The provider shall comply with all state and local building codes as determined by the State Fire Marshal.

The provider shall maintain documentation that the facility meets all applicable zoning laws, regulations and neighborhood restrictions.

The provider shall comply with all state and local fire safety codes and submit documentation according to the terms of the contract.

The provider shall comply with all local and state health and sanitation standards and submit documentation according to the terms of the contract.

### **1.2            Location of Facilities**

Facilities should be located on a site conducive to the purposes and goals of the program. The design of the facility shall promote the purposes of the program and provide an environment consistent with the functions of the program.

If the program has been established or is seeking to exclusively serve youth referred by YS/OJJ, YS/OJJ reserves the right to approve the site, design and proposed floor plan for any new or relocated provider. The provider shall be asked to produce:

- A.     Evidence that the site location is appropriate to the population to be served, program goals, access to essential services and individual needs of the youth.
- B.     A description of how the facility physically harmonizes with the neighborhood where it is located, considering issues including scale, appearance, density and population.

### **1.3            Accessibility, General Safety & Maintenance of Buildings & Grounds**

The program shall have a written plan for preventative and ongoing maintenance and safety. The record of routine inspections shall be kept on file for review by YS/OJJ. The program buildings, parking lots and other facilities shall be accessible as required by the



Americans with Disabilities Act and other federal and state laws and regulations. The provider shall ensure that all structures are maintained in good repair and are free from hazards to health and safety. The provider's grounds shall also be maintained and free from any hazard to health and safety.

Each provider shall have a designated staff member responsible for the safety program at the facility. This individual shall conduct monthly inspections of the facility to identify:

- A. Fire safety
- B. Existing hazards
- C. Potential hazards
- D. Corrective action that should be taken to address identified hazards.

#### **1.4 Vehicles**

Vehicles used to transport youth shall be mechanically sound, road worthy, in good repair and meet the Agency's requirements for insurance coverage. The interior of the vehicle shall be free of loose items, i.e. jacks, tools, crowbars, fire extinguishers, etc.

All vehicles shall display current state licenses, proof of annual motor vehicle inspections, and proof of insurance and shall be in compliance with all applicable state laws.

When in use, all vehicles shall carry a standard first aid kit and a fire extinguisher.

The program shall have a vehicle maintenance and equipment check list, which shall include a list of all critical operating systems and equipment inspections, the date of the last inspection and the type of service or action taken.

All repairs required to critical operating systems (i.e., brakes, headlights, air conditioning and heating) shall be made immediately.

All worn or missing critical equipment shall be replaced immediately (i.e., tires, jacks, seat belts). Providers are to ensure that the appropriate number of vehicles is maintained and available at all times to transport youth to and from their programs without causing disruption of program services.

##### **1.4.1 Drivers**

All designated drivers of vehicles, as well as anyone who may potentially transport youth shall possess a valid Louisiana Driver's License and proper licenses required by state law for the type of motor vehicle operated. Verification of proper license(s) and insurance is required prior to an employee being allowed to transport youth.

All operators' driving records shall be checked upon hiring and at least annually thereafter through the Office of Motor Vehicles to assess their suitability to transport youth. If the driving record is checked by the insurance agency, which reports acceptability to the provider, this is sufficient to meet the terms of this section. Verification shall be maintained in personnel files.

## **SECTION 2: STAFF AND STAFFING REQUIREMENTS**

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### **2.1 Staff Qualifications**

All individuals providing services to youth under the supervision or in the custody of the Agency shall possess all licenses and/or certifications required by statute or by the Department of Children and Family Services (DCFS), Bureau of Programs, Licensing Section, the Department of Health Health Standards Section, or the program's accrediting body, as applicable.

All individuals providing services shall be qualified to do so by educational background and experience.

#### **2.1.1 Position Descriptions and Qualification Criteria**

**Program Director** - An individual who is responsible for the overall management of the treatment program/curriculum at a facility. This individual shall be directly involved in the hiring and training of facility staff and the direct supervision of treatment staff which includes providing regular staff meetings and observation of treatment staff. This individual must hold a bachelor's degree and/or advanced degree, preferably in one of the helping professions (e.g. social work, criminal justice, psychology, education, family counseling, recreational therapy, etc.).

**Case Manager** - An individual to whom the youth is assigned at admission who assists the youth with his/her Individualized Service Plan (ISP), assesses needs of the youth and maintains his/her case record, presents the case in staffing, communicates with appropriate individuals regarding the youth, and prepares written communications including discharge reports. With appropriate credentials, the Case Manager may also serve as the Counselor.

Individuals providing this function shall possess, at minimum, a bachelor's degree from a fully accredited college or university in the social sciences or related field.

**Teacher** - An individual who provides basic educational services as required by state and federal statutes. This individual shall hold a valid Louisiana Teaching Certificate in the appropriate instructional field.

**Instructor** - An individual who provides skill training or vocational training. The instructor's expertise may have been gained through formal education or direct experience.

This individual shall possess at a minimum, a bachelor's degree in the field of instruction, high school diploma or its equivalent with a minimum of two years of practical experience in the field.

**Direct Care Worker** - An individual responsible for supervising the youth's day-to-day living activities and performing such duties as preparing nutritious meals, supervising, observing activities and training youth in basic living skills, and providing some community transportation. This individual shall be at least age 20, and have a high school diploma or its equivalent, and at least two years post-high school employment experience working with youth in a treatment setting.

**Recreational Specialist** - An individual who develops and implements an individualized and goal-directed recreational plan for a youth.

The individual providing this function shall possess a bachelor's degree in recreational therapy, health and physical education, or a related field or have a high school diploma and two years related experience in providing recreational services to youth.

**Social Worker/Counselor/Therapist** - An individual responsible for the assessment of treatment needs, development and implementation of a plan for therapeutic services and the provision and monitoring of therapeutic and /or rehabilitative treatment services including individual, group, and family counseling to youth participating in a residential treatment program.

Individuals providing this function shall possess, at a minimum, a master's degree from a fully accredited college or university in a social service related field and be supervised by a licensed mental health professional.

## **2.2 Program Staffing Requirements**

Providers must maintain, at minimum, staff ratios in accordance with federal and/or state licensing mandates to supervise youth and provide for their health, safety and well-being.

Staffing patterns should concentrate maximum case manager availability to youth when they are in the facility and should provide consistency and stability so youth know the roles of each staff member.

The staffing pattern of the provider shall concentrate staff during periods when youth are able to use provider resources including but not limited to the following:

- A. After school, until bedtime (generally 3:00 p.m. until 10:00 p.m.).
- B. On Saturdays, Sundays, and holidays when administrative and support staff are generally not scheduled.
- C. During visiting times, leisure times when fewer than 50% of the youth are on home visits, recreational times and evenings when youth return from home visits.

The provider shall ensure that youth being transported are properly supervised.

All providers shall comply with minimum staffing standards established by the DCFS Licensing Section. Any modification of minimum staffing requirements set by the Licensing Section requires the written concurrence of the Section.

Any deviation from the established staffing criteria shall be specifically waived in writing by the Deputy Secretary or his/her designee or stated specifically in the contract with the Agency.

### **2.3 General Requirements for Staff Development**

Staff development is an essential program component. A well planned and executed staff development program increases the competency and performance of staff and volunteers and establishes a common understanding of a program's objectives, policies and rules.

Staff development includes formal classroom instruction, on-the-job training under the direction of an instructor, staff development meetings, or conferences that include a formal agenda and instruction by qualified personnel.

This section does not preclude the appropriate use of videotapes, films, and other audio/visual methods of staff development.

All support staff who do not have direct contact with the youth shall receive 16 hours of pre-service training.

All direct care workers, teaching parents, supervisors, counselors and case managers (including all volunteers in these positions) shall receive a total of 56 hours of training during the first year of employment: 16 hours pre-service and 40 hours of in-service training. An additional 40 total hours of training is required each subsequent year.

#### **Providers are required to participate in Agency sponsored staff development opportunities.**

Training shall be documented and content shall be in accordance with a "nationally recognized accrediting body." Training for staff and volunteers shall be conducted in accordance with a written program plan for staff development and coordinated by a designated staff member at the supervisory level.

All training programs shall be presented by persons qualified by education or experience in areas in which they are conducting training. Training programs shall define requirements for completion and provide for attendance recording, a system to recognize completions, and an evaluation of the training.

Training programs shall:

- A. Include professional development and skills development for all personnel and volunteers.
- B. Meet the needs of each staff member according to their job classification and be pertinent to his/her individual work with youth.
- C. Where available, involve the use of community resources.
- D. Include in-service training in existing practices, procedures and skills necessary for working with youth.

All pre-service and in-service training for Direct Care and Treatment staff shall include at least 40 hours of annual training relevant to program and service delivery which does not include CPR/First Aid, crisis intervention or security procedures.

### **2.3.1 Pre-Service Orientation**

Pre-service orientation for all staff, contractors and volunteers shall include, but not be limited to, the following:

- A. YS/OJJ vision, mission and guiding principles
- B. Program procedures and programmatic goals, including behavior management, theory and practice of interventions employed by the program
- C. Job responsibilities
- D. Personnel policies
- E. Youth supervision
- F. Report writing
- G. Instruction in safety and emergency procedures including non-violent crisis intervention
- H. Current certification in CPR and First Aid
- I. Confidentiality issues
- J. Youth Rights and Grievance Procedure
- K. Disciplinary Process
- L. Activity Report-UOR Operational Unit
- M. Program's Standard Operating Procedures
- N. Communicable diseases
- O. Boundary issues
- P. Prison Rape Elimination Act (PREA)

In addition to meeting the pre-service requirements listed above, individuals employed as direct child care staff who do not possess at least one year of direct child care experience shall complete a 30-day internship. During their first 30 days on the job, they

shall be under the supervision of an experienced child-care worker or direct care supervisor. They are not to be assigned sole responsibility for the supervision of youth until this phase of training is completed and shall not qualify when computing staff to youth ratio.

**2.3.2 In-Service Training Requirement (Direct Care Workers, Counselors, Case Managers, Contractors and Volunteers)**

Training course content shall include at least the following:

- A. Principles and practices of youth care and supervision (i.e., signs and symptoms of medical and mental illness in children and adolescents)
- B. Program procedures, programmatic goals (i.e., behavior management system) and the theory and interventions employed by the program
- C. Youth Rights and Grievance Procedures (i.e., appeals process)
- D. Disciplinary Process
- E. Detecting and reporting suspected abuse and neglect
- F. Reporting and documentation of critical incidents
- G. Behavioral observation, adolescent psychology and child growth and development, including gender-specific issues
- H. Counseling techniques (i.e., interpersonal communication, motivational interviewing, active listening)
- I. Conflict Resolution (i.e., passive restraints, use of force/crisis intervention, de-escalation)
- J. Significant legal issues (i.e., Children's Code)
- K. Security procedures (i.e., key control, searches and contraband)
- L. Socio-cultural life-style of youth (i.e., diversity, human dignity, cultural competency)
- M. Implementation of ISPs
- N. Instruction on documentation and communication procedures with fellow employees and YS/OJJ staff
- O. Report Writing (i.e., progress notes, treatment plans, quarterly reports)
- P. Emergency and safety procedures, including medical
- Q. Current certification in CPR and First Aid
- R. Safe administration and handling medication, including psychotropic drugs
- S. Activity Report-Unusual Occurrence Report (UOR) Operational Unit
- T. Program's Standard Operating Procedures
- U. Universal precautions regarding injury and illness, including Communicable Diseases

- V. Prison Rape Elimination Act (PREA) (annually)

### **2.3.3 Documentation of Training**

- A. Staff training records shall be kept by a designated staff person. Separate training records shall be established for each staff member
- B. Contractor and volunteer shall include the following:
  - 1. Name;
  - 2. Assignment category (position, type of employee full-time/part-time/volunteer);
  - 3. Employment beginning date;
  - 4. Annual training hours required; and
  - 5. A current chronological listing of all training completed.
- C. Training programs shall be documented by the following:
  - 1. Date and times training was conducted;
  - 2. Topic of the training session;
  - 3. Name and qualifications of the instructor; and
  - 4. A roster with signatures of all participants including training subject, date, trainer(s) name, and duration of training.

### **2.4 Volunteers**

A volunteer is any person who provides goods or services to the provider with no monetary or material gain.

Programs serving youth should solicit the involvement of volunteers to enhance and expand their services; however, the services provided by volunteers shall not replace or substitute for those activities or functions normally provided by staff.

#### **2.4.1 Volunteer Plan**

Programs that utilize volunteers regularly shall have a written plan and corresponding program policies that ensure the following:

- A. Volunteer recruitment is conducted by the chief administrative officer or his/her designee. Recruitment is encouraged from all cultural and socio-economic segments of the community.
- B. Volunteers shall be at least 20 years of age, of good character, and sufficiently mature to handle the responsibilities involved in the position.
- C. Volunteers shall complete an application for the position and are suited for the position to which they are assigned.

- D. Volunteers shall agree in writing to abide by all program policies.
- E. Volunteers who perform professional services shall be licensed or certified as required by state statute or regulation.
- F. Written job descriptions are provided for each volunteer position.
- G. Volunteers shall agree to background and criminal record checks prescribed by state statutes.
- H. Volunteers are adequately trained and the training is documented.
- I. Volunteers shall be supervised by a paid employee of the program, who shall coordinate and direct the volunteers' activities. Volunteer performance shall be evaluated periodically and evidence of this evaluation shall be made part of the volunteer's personnel record.
- J. A procedure shall be established for termination of volunteers when substantial reasons for doing so exist.

## **2.5 Criminal Background Checks and State Central Registry Checks**

All program employees, mentors, volunteers, interns, and contract providers with access to youth must undergo criminal and State Central Registry background checks.

- A. The criminal background and State Central Registry checks are to be conducted prior to hiring an employee or utilizing the service of a volunteer, mentor, intern or contract provider directly rendering services to youth (i.e., counselor, social worker).
- B. All employees, volunteers and contract providers are to undergo an annual rescreening which shall be maintained in each person's personnel file.

The "Criminal Record Check" form [see Attachment A.4.2 (b), LSP Form DPSSP 6696] is also available on the following internet site: [http://www.lsp.org/pdf/Bureau\\_Authorization\\_Form.pdf](http://www.lsp.org/pdf/Bureau_Authorization_Form.pdf).

In accordance with RS 46:51.2 and RS 46:1414.1 [see Attachments A.4.2 (c) and (d)], any owner, operator, prospective employee, or volunteer of a child care facility licensed by DCFS is required to complete a "State Central Registry Disclosure Form" (see Attachment (e), SCR-1 form) upon hire, annually thereafter, and at any time upon the request of OJJ, and within three (3) days of any such individual receiving notice of a valid determination of child abuse and/or neglect.

R.S. 15:587.1, Louisiana Child Protection Act [see Attachment A.4.2 (f)] requires that any person who maintains supervisory or disciplinary authority over youth shall be subject to a criminal background check. Non-residential programs shall complete a criminal background check prior to employment.



All programs providing social services to YS/OJJ shall ensure that all employees and volunteers, as required by statute, have submitted the required fingerprint cards and releases to the Department of Public Safety and Corrections/Bureau of Criminal Identification. Documentation of appropriate requests and responses shall be kept in the employee's personnel record.

Persons convicted of the following crimes shall not be employed by the child care agency: first degree and second degree murder; manslaughter; rape; aggravated, forcible or simple rape; aggravated oral sexual battery; aggravated sexual battery; oral sexual battery; sexual battery; second degree sexual battery; aggravated or simple kidnapping; criminal neglect of family; incest; criminal abandonment; carnal knowledge of a juvenile; felony carnal knowledge of a juvenile; indecent behavior with a juvenile; prostitution; soliciting to prostitution; pandering; letting premises for prostitution; enticing to prostitution; crime against nature; aggravated crime against nature; contributing to the delinquency of a juvenile; cruelty to a juvenile; child desertion; cruelty to the infirm; obscenity; operating a place of prostitution; sale of minor children; manufacture and distribution of narcotics, controlled dangerous substances or marijuana; or conviction for attempt or conspiracy to commit any of these offenses. In addition, OJJ prohibits the provider from employing anyone with felony DWI convictions into positions which require them to transport youth (trackers, mentors, drivers, etc.). If employed in other positions that do not require the employee to transport youth, this employee cannot be used at any time to fulfill the duty of a driver.

Residential Contract Providers must maintain a log of State Police Criminal Background Checks and State Central Registry checks completed as required by the DCFS Licensing Section. A copy of the completed log must be provided to OJJ annually. (See Attachment A.4.2 (g)]

## **2.6 Abuse Free Environment**

Programs must provide an environment in which youth, staff, and others feel safe, secure, and not threatened by any form of abuse or harassment.

- A. Programs shall have a written code of conduct which prohibits the use of physical abuse, profanity, threats or any form of intimidation towards youth. Youth shall not be deprived of basic needs, ex: food, clothing, shelter, medical care, and security. The Program Director or designee **shall** ensure immediate action is taken to address any incidents of physical abuse, profanity, and/or excessive force.
- B. Any person who knows or has reason to believe that a youth in the program is abused, abandoned, or neglected by a parent, legal custodian or other person responsible for the youth's welfare, or that a youth is in need of supervision and care and has no parent, legal custodian or other person responsible for a youth's welfare as defined in the Louisiana Children's Code, must report this information to the DCFS/ Child Welfare Regional

Office, by completing the DCFS “Mandated Reporters of Abuse Neglect Form” (see Attachment (h), DCFS/CW Form CPI-2), and notify the OJJ regional office of such report (s) within 24 hours of discovery of such abuse/neglect. For additional information refer to Section 5.10 of this document.

If a staff member is made aware of abandonment, abuse or neglect of a youth in the program, the staff should follow the mandatory reporter requirements.

If it has been determined that a youth in OJJ custody does not have a permanent plan/guardian/parent/custodian to return to, OJJ will be in contact with DCFS regularly to determine placement after release from custody.

- C. Programs must have written rules and regulations mandating zero tolerance toward all forms of sexual abuse and sexual harassment. Written policy must outline the program’s approach to preventing, detecting and responding to such conduct by residents, staff, volunteers, etc. Programs shall comply and adopt the Prison Rape Elimination Act (PREA) Standards set forth by the United States Department of Justice.
- D. The facility shall cooperate with the YS/OJJ PREA Coordinator and investigators during all investigations of sexual abuse and sexual harassment allegations. Where sexual abuse and sexual harassment is alleged, the Facility Director must authorize the facility staff to be available without any impediment to allow YS/OJJ, DCFS, and/or local law enforcement to conduct an investigation into the allegation. The investigation may include, but is not limited to, reviewing relevant electronic monitoring recordings, interviewing alleged victims, perpetrators and witnesses, and reviewing and collecting any physical evidence.

## SECTION 3: PROGRAM

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### 3.1 Referral Process

- A. A referral packet for each youth shall be submitted to the provider for consideration. Referral packets shall contain at least a social history, Individualized Service Plan (ISP) (if applicable), Structured Assessment of Violence Risk in Youth (SAVRY) summary results, and current educational records, and the residential level determination form if the youth has been deemed to be a Level II youth. The probation officer shall contact the provider to confirm receipt of the entire packet within five (5) working days and discuss when placement can be finalized. A youth’s admission into a

program shall be based on an assessment of the youth's comprehensive problems and needs and on the ability of the provider to address them.

- B. A provider shall not, without just cause, prevent admission of any referred youth.

### **3.1.1 Admission Policy**

- A. Each provider shall have clearly defined written policies and procedures governing admission, including any clinical, community or legal criteria for the exclusion of certain types of youth from program participation. The policy and procedures shall include, but not be limited to, the types of information to be gathered on all applicants before admission and procedures to be followed when accepting or rejecting referrals.
- B. No youth shall be refused admission due to race, ethnic origin or religion.
- C. A provider shall not admit more youth than the number specified on the license or contract without prior authorization from the OJJ and the DCFS Bureau of Licensing and Certification. Written documentation from the Bureau of Licensing and Certification is required for any change in capacity. A copy of this documentation shall be forwarded to the Regional Program Specialist.

### **3.2 Discharge Process**

A youth placed in the program by YS/OJJ shall not be released without prior authorization by YS/OJJ.

- A. The program may request the discharge of a youth who has successfully completed the program. The successful completion must be evident through his/her treatment progress, including educational goals.
- B. An unplanned discharge may occur when a contractor requests termination of a youth who has not yet completed the treatment program. All unplanned discharges shall be approved by YS/OJJ. The contractor shall submit a written request for staffing that explains, in detail, justification for the youth's removal from the program. If approved, the PPO/J will remove the youth from the program within 14 days. The contractor may request an unplanned discharge under the following circumstances: youth's negative behavior is unsafe/injurious to self or others, lack of treatment progress, appeal to admission, etc. At a minimum, the youth, parent, counselor, teacher, program director, and originating/supervising probation officer(s) should participate in the unplanned discharge staffing. (See SOP 3.2.2)

- C. OJJ may discharge a youth from the program at any time due to the following: recommendation to return youth to the community, court order to a less or more restrictive setting, lack of treatment progress, or youth has reached maximum period of supervision/full term date, etc.
- D. The program shall complete a formal discharge summary within 5 (five) working days of a youth's release/discharge. The discharge summary must provide details of the youth's progress during enrollment and recommendations for further treatment. The discharge summary must be forwarded to the Probation Officer and parent within five (5) working days of the youth's release from the program.
- E. Reintegration planning begins with the initial development of an ISP and is an ongoing process throughout the youth's program. A reintegration plan shall be developed within 14 days of admission and updated on an on-going basis.

### **3.2.1 Planned Discharges**

- A. A planned discharge is a discharge following the youth's successful completion of his/her treatment program or the discharge of a youth on his/her full term date.
- B. A program shall provide the supervising region and placing region (if different) a written recommendation for release at least 30 days prior to the youth's completion of the program. This recommendation shall include the following:
  - 1. A current summary of the youth's progress;
  - 2. A summary of the efforts to reach the youth's goals and objectives;
  - 3. Any unresolved goals and objectives;
  - 4. Goals and objectives for parents/aftercare workers to reinforce;
  - 5. Recommendations for continuing service in his/her home community;
  - 6. The prognosis; and
  - 7. The current address of the recommended custodian.
- C. YS/OJJ shall submit the official recommendation for release to the court.
- D. The following procedures shall be followed at the time of discharge:
  - 1. The program shall provide a release agreement, to include the following:
    - a. The name of the person or agency to whom the youth is to be released;
    - b. A statement confirming the return of personal effects;
    - c. A statement of completion of any pending actions (grievances, claims for damages, lost possessions, etc.); and

- d. A statement of return of provider-issued articles (sheets, pillowcases, bedspreads, towels, washcloths, etc.).
- 2. The program shall immediately provide to the individual or agency authorized to transport the youth, his/her medication, prescriptions and Medicaid card.
- 3. Within five (5) working days, the provider shall provide to the supervising Region the following:
  - a. Any dental or medical records available; and
  - b. All school records available from the school(s) the youth attended while in the program.

### **3.2.2 "Unplanned" Discharges**

- A. An "unplanned" discharge is a youth's termination prior to the completion of the planned treatment program, either at the request of the provider or on the initiative of YS/OJJ.
- B. When a program believes a youth is at risk of an unplanned discharge or chooses to appeal the admission, the provider shall request a case staffing with the placing and supervising Region, if different, to determine if the identified needs/problems can be resolved.
- C. A provider shall have a written policy concerning unplanned discharges. The policy shall include, at a minimum, the following provisions:
  - 1. If the discharge is at the request of the provider, the program shall notify the Regional Program Specialist, supervising region and placing region (if different) in writing at least 14 days prior to the recommended date of removal. This request shall include, at a minimum, the following information:
    - a. A current summary of the youth's progress;
    - b. A summary of the youth's efforts towards achieving individual goals and objectives;
    - c. Specific offense(s) and where applicable, dates and incident reports regarding the offense(s) which precipitated the request for removal; and
    - d. Any unresolved goals or objectives.
  - 2. Upon receipt of the 14 day request for removal notification, the supervising and placing regions, if different, shall schedule a staffing within fourteen (14) days with the provider and Regional Program Specialist to discuss whether the request is appropriate and determine steps to be taken to execute the discharge.

### 3.2.3 Emergency Discharges

- A. Emergency discharge situations include, but are not limited to the following:
  - 1. Youth participation in a major disturbance at the facility (i.e., riot or hostage situation, etc.);
  - 2. Involvement and/or arrest of a youth for use or threatened use of a weapon against another person; and/or
  - 3. Attempted suicides and other psychiatric emergencies.
- B. Emergency discharges shall be initiated only when the health and safety of a youth or staff is endangered by the youth's continued placement at the facility.
- C. Emergency discharge situations resulting in hospitalization in a private facility for psychiatric or medical care shall require prior authorization from the supervising Region.

If the emergency occurs after hours or during the weekend, the provider shall contact the Regional Duty Officer, who shall contact the region of origin and the Community Based Services Program Manager on the next business day.

- D. In cases of emergency discharge, the provider shall, at a minimum, do the following:
  - 1. Unless an urgent situation exists, the provider shall give YS/OJJ a 72- hour notice of discharge.
  - 2. Except in cases of life threatening emergencies, emergency discharges shall take place after consulting with the supervising Region.
  - 3. In cases of life-threatening emergencies, the Regional Manager of the supervising region or the Regional Duty Officer shall be contacted as soon as possible, but no later than 24 hours of the incident.
  - 4. In all cases of emergency discharge, the provider shall provide a comprehensive discharge summary to the supervising region to include, at a minimum, the following:
    - a. A report on progress/lack of progress on all treatment plan areas;
    - b. Recommendations for follow-up; and
    - c. Prognosis as determined by a qualified professional.

The report shall be forwarded to the supervising region within five (5) business days of the date of discharge.

### **3.3 Home Passes [see Attachment A.4.2 (i)]**

- A. Home passes shall be granted to allow the youth to visit with the person(s) identified as the parent/guardian at the multidisciplinary team staffing. Home passes for youth shall be considered an integral part of the youth's treatment plan. Frequency and duration of passes shall be determined by the multidisciplinary team and incorporated into the ISP. Any changes or variations shall be approved by the placing Region. Prior to granting home passes, the potential risk to public safety, benefit to youth and adequacy of home supervision shall be considered.

A youth must be in placement no less than 45 days prior to being considered for a regular home pass. Prior to granting an initial home pass to a youth, the provider shall contact the placing region to determine whether the court or YS/OJJ has placed restrictions on the youth's pass privileges. A youth's initial home pass may not exceed 48 hours.

Request for a home pass shall be submitted to the placing region no less than five (5) business days prior to the dates requested for the pass and shall include information as to:

- a) Youth's current progress in the program (to include level if applicable);
- b. Details regarding prior successful and/or unsuccessful home passes;
- c. Details on last family session conducted;
- d. Goals for the home pass;
- e. Curfew and/or other conditions; and
- f. Transportation arrangements.

Provider shall have a written plan to monitor youth during home passes which can include regular phone contact, curfew checks, and/or random home visits, etc.

Requests shall be approved in writing by the placing Regional Manager for home passes up to 72 hours. Home passes in excess of 72 hours must be approved by the Regional Manager, who shall then forward to the placing Regional Director for approval.

At the conclusion of each pass, the provider shall determine whether problems occurred or other significant positive or negative events transpired. This information shall be documented in the youth's case record, and reported to YS/OJJ in writing in accordance with the guidelines outlined in Section 9.3 (Incident Reporting).

- B. Frequency of passes shall be determined by the provider in accordance with the program description, subject to the following:
1. No youth shall be allowed to remain on a pass for more than 168 hours (7 days) in any given calendar month, nor shall they be allowed to remain away from the facility for two (2) consecutive weeks (i.e. last week of May and first week of June).
  2. To the extent possible, youth should be in compliance with the behavioral treatment program to be eligible for a home pass (i.e., level system).
  3. The length of the pass should be based on the needs of the youth rather than those of provider staff.
  4. Under no circumstances shall a home pass interfere with the educational process.
- C. **All** other special passes (i.e., funerals, extra passes due to weather conditions, etc.) shall be approved by the Regional Manager, or his/her designee, of the placing region.

### **3.4 Temporary Closure of Facility**

Programs providing services to YS/OJJ are expected to provide these services on a continuous basis consistent with the terms of the contract.

Without prior approval of YS/OJJ, a provider cannot be closed by assigning all youth on home pass.

The only situation not requiring prior approval for temporary closure shall be a natural disaster, fire, flood or other emergency situation in which the provider may be closed temporarily, at the discretion of the provider, to ensure safety and well-being of the residents.

Payment may be withheld if a program cannot provide YS/OJJ with satisfactory justification describing the nature of the emergency or potential hazard to residents, which precipitated the closing of the facility.

Once the safety of the youth is assured, the provider shall immediately notify the supervising Regional Manager or Regional Duty Officer. Notification shall include the physical location of each youth assigned to the program.

#### **3.4.1 Evacuation**

The provider shall submit the facility's evacuation plan to the supervising Regional Manager and the assigned Regional Program Specialist no later than May 15<sup>th</sup> of each year.



### **3.5            Travel**

The following guidelines shall be adhered to for in-state and out-of-state travel:

#### **3.5.1            In-State Overnight Travel**

- A. Planned overnight outings, within the state, shall be approved by the Regional Manager of the supervising region.
- B. The program's administrator or his/her designee shall notify the Regional Manager of the supervising region of the following:
  - 1. The date(s) of the outing;
  - 2. Location of overnight accommodations (address and telephone number);
  - 3. Scheduled location of outing;
  - 4. The number of youth involved; and
  - 5. The number of staff providing supervision as well as their names and positions.
- C. Notice to the supervising Regional Manager shall occur at least seven (7) days prior to the scheduled outing. The seven (7) day notice may be either verbal or written. Written documentation of a verbal notice shall be provided to the Regional Office at least three (3) days prior to the outing.
- D. Travel for non-custody youth requires parental consent only unless otherwise required by the court of jurisdiction and/or the La. R.S. 15:542 (State Sex Offender & Child Predator Registry/Notification).
- E. Any unusual occurrences during the outing shall be reported to the supervising Regional Office in the manner outlined in Section 9.3 (Incident Reporting).

#### **3.5.2            Out-of-State Travel – Youth in Custody**

Authorization for out-of-state travel for youth in the custody of YS/OJJ must have written approval of the Regional Director and the court of jurisdiction. Proper notification under the provisions of the La. R.S.15:542 (State Sex Offender & Child Predator Registry/Notification) must be made where appropriate. Below is the procedure to follow:

- A. The provider notifies the supervising region in writing at least 30 days prior to the scheduled outing. The following information shall be included:
  - 1. The dates of the scheduled trip;
  - 2. The destination of the trip;
  - 3. The transportation arrangements;

4. The address and phone number of overnight accommodations; and
5. The staff, by name and position, and youth.

B. Supervising Region:

1. Shall notify the placing region of the proposed travel.
2. Shall obtain youths' signature on the "Interstate Compact Out-of-State Travel Permit and Agreement to Return" form and maintain forms in the youths' file.
3. Shall contact the Regional Director or his/her designee for authorization for out-of-state travel after court approval is obtained. The court permission, parent permission and the Interstate Compact for Juveniles (ICJ) documents must be provided a minimum of seven (7) days, excluding weekends, prior to the travel date.
4. Shall notify provider of final decision.

C. Placing Region:

1. Obtains court approval after notification;
2. Obtains written approval from the youth's parent/guardian; and
3. Advises supervising region when court approval is obtained.

Any unusual occurrences during the outing shall be reported to the supervising Regional Office in the manner outlined in Section 9.3 (Incident Reporting).

### **3.5.3 Out-of-State Travel – Non Custody Youth**

Travel for non-custody youth requires parental consent only unless otherwise required by the court of jurisdiction and/or the La. R.S. 15:542 (State Sex Offender & Child Predator Registry/Notification). The provider, however, shall notify the supervising region of the youth's name and date(s) of travel.

### **3.6 Recreation**

A provider shall have a written recreation plan consisting of a minimum of one (1) hour of structured recreation services daily, which shall not include television. Activities shall be determined by the individual needs, interests, and levels of functioning of the youth served.

The recreational program shall include both indoor and outdoor activities. Activities must minimize television and make use of a full array of table games and other activities that encourage both solitary entertainment and small group interaction. A comfortable furnished area should be designated inside the facility for leisure activities.

The provider shall have an adequate number of qualified recreational staff to ensure effective organization and supervision of all recreational activities. It is the provider's responsibility to arrange transportation and maintain adequate supervision. Utilization of community recreational resources shall be maximized.

Any costs associated with recreational activities shall be the responsibility of the provider. No youth shall be required to pay to participate in recreational activities. Participation in recreation shall be documented and maintained in the youth's case file.

### **3.7      Employment**

The provider shall maintain written policy and procedures that ensure YS/OJJ resources and staff time are devoted to assist employable youth in locating employment, when appropriate. Employment shall not interfere with the education or treatment program as identified in the ISP.

Staff shall ensure that youth are employed only in settings that meet all legal and regulatory requirements. The provider shall periodically visit the job-site to verify the youth is working under acceptable conditions. The provider shall regularly consult the employer concerning the youth's performance.

Every reasonable effort shall be made to select employment opportunities that are consistent with the youth's age and interests. Preference will be given to jobs that are related to prior training or work experience which may be suitable for continuing post-release employment. Reasonable effort shall be made to provide youth with the highest paying job possible. Utilization of community and state job training and employment resources shall be maximized. Earned income by a youth in a residential setting/facility shall be managed in accordance with the provisions of SOP 3.12.1.

Incremental progress toward this treatment goal shall be recorded in the ISP monthly.

### **3.8      Education**

Provider shall ensure that each youth has access to appropriate educational and vocational services that are consistent with the youth's abilities and needs, taking into account age, level of functioning, and any educational requirements specified by law.

- A. All youth of mandatory school age shall be enrolled in a school system or in a program approved by the Louisiana Department of Education. Any program that provides education on the grounds of the facility through a cooperative agreement with the local education agency or by virtue of an approved alternative school status shall ensure provision of all educational services by teachers certified by subject/grade as defined by the

Department of Education. **Regardless of the status of the school system utilized by the facility, every effort shall be made to ensure youth in the program are afforded the opportunity to take all state-mandated standardized testing.**

- B. The program shall provide structured educational activities for youth pending their enrollment in an appropriate educational/vocational setting.

It is the provider's responsibility to facilitate referral to the School Building Level Committee (SBLC) when a youth is not making progress in the regular educational setting.

The program shall ensure that the special education needs of youth assigned to its care are addressed through the youth's Individual Education Plan (IEP) as required by state and federal regulation (see Attachment (j), Title 28, Bulletin 1530).

- C. The program shall maintain cooperative relationships with local school systems, colleges/universities, and trade schools for the purpose of developing and maintaining suitable programs for youth.
- D. All eligible youth shall be given the opportunity to participate in a program of instruction leading to a traditional high school diploma or GED.
- E. All youth who have obtained a high school diploma or GED and who desire to be enrolled in ACT preparation shall be given the opportunity to enroll and complete ACT testing.
- F. All youth who have obtained a high school diploma or GED and desire vocational education shall be given the opportunity to participate in a vocational program.
- G. All youth who have obtained a high school diploma or GED and have taken the ACT shall be given the opportunity to enroll in a college/university. Incremental progress toward this treatment goal shall be recorded in the ISP monthly.

### **3.9 Religion**

Written policy and procedure shall ensure that attendance at religious services is voluntary. No youth shall be required to attend religious services.

- A. All youth shall be provided the opportunity to voluntarily practice their respective religion.
- B. Youth should be permitted to attend religious services of their choice in the community.
- C. The provider shall arrange transportation and maintain adequate supervision for youth who take part in religious activities in the community.

- D. If the youth cannot attend religious services in the community because staff has reason to believe he/she would attempt to flee, the provider shall make every effort to ensure that he/she has the opportunity to participate in religious services on-site.
- E. Youth should be permitted to receive visits from official representatives of their respective faiths.
- F. When the youth is a minor, the provider shall determine the wishes of the legally responsible person with regard to religious observances and shall make every effort to ensure these preferences are accommodated.

### **3.10 Behavior Management**

Each provider shall have comprehensive written policies and procedures regarding a best practice or evidence-based behavior management program, which shall be explained to all youth, families and staff. These policies shall include positive responses for appropriate behavior, a provision for notice to the youth being disciplined, a mechanism for a fair and impartial hearing by a disciplinary committee and a process for appeal. The Behavior Management Plan is subject to modifications and approval by OJJ.

- A. The program must use a behavior management system that provides rewards and consequences to encourage youth to achieve programmatic expectations. Providers must integrate the following elements within their behavior management systems:

- 1. Rewards and consequences are fair and directly relate to the target behavior(s).

Rewards should include a range of token, tangible, and social rewards and can include earning privileges, certificates of completion, praise, points/tokens, etc.

Consequences should be used to extinguish anti-social behavior and to promote behavioral change in the future by showing youth that behavior has consequences. Appropriate punishers include extra chores, time-out, response cost (e.g. loss of privileges, points, levels, extra homework, etc.)

Consequences and rewards should be consistently applied. Rewards should be positive reinforcement for appropriate behavior.

- 2. Application of rewards outnumber consequences by a ratio of at least 4:1 (ex: there should be 4 rewards for every 1 consequence).
- 3. Facility restriction (no home pass, no outings) should never be used as a consequence, unless absolutely necessary and the Regional Program Specialist and Regional Manager have been notified.

Facility restriction should not exceed five (5) consecutive days without formal discharge from the program or authorization from OJJ.

4. Youth should never have control over the discipline of other youth.
5. If “time-out” is used, it should be therapeutic and not interrupt the educational goals of the youth. All “time-out” incidents must be properly recorded in the youth’s case file to include reason, location, length and monitoring of “time-out” incidents. For any youth experiencing an excessive number of “time-out” incidents (ex: more than two (2) per day or three (3) per week), the Program Director or his/her designee shall notify the youth’s parent, Probation Officer and Counselor.

Providers shall make every effort to resolve behavioral problems with the least amount of formal disciplinary activity possible.

### **3.10.1 Characteristics of the Formal Disciplinary Process**

Providers are required to have a formal disciplinary procedure written in clear and plain language which provides: notice of the rules, penalties and process; notice to youth being disciplined; notice of the possibility of restitution; a mechanism for a fair and impartial hearing by a disciplinary committee; and a process for appeal. Restitution must be included for a particular rule violation to be used as a penalty. Youth shall receive training in the disciplinary process at orientation.

Prior to initiating a report or disciplinary action, careful attention must be given to the program rules to determine the seriousness of the behavior and the appropriate type of discipline. Discipline shall not compromise the safety and well-being of the youth. Disciplinary procedures must be carried out promptly and parents should be notified of infractions timely.

- A. Staff shall make every effort to manage the behavior of youth by using positive reinforcement, setting clear expectations, and providing appropriate incentives.
- B. Discipline shall be administered in a way that creates a learning experience for the youth.
- C. Discipline is not to be administered in a way that degrades or humiliates a youth.
- D. No youth shall supervise or carry out disciplinary actions over another youth.
- E. Providers are prohibited from using the following actions as disciplinary penalties:
  1. Corporal punishment of any kind

2. Physical exercise or repeated physical motions
3. Denial of meals/fluids
4. Denial of services
  - a. Education
  - b. Vocational services and employment
  - c. Medical services
  - d. Communication with family, probation officer, or legal counsel
5. Extra work detail

### **3.10.2 Restitution**

YS/OJJ policy holds youth responsible for the financial consequences of their actions by authorizing restitution as part of the disciplinary process.

#### **A. Basis for Restitution**

1. Actual cost restitution may be ordered as part of the disciplinary process when a youth has willfully damaged or destroyed property, or when an incident results in outside medical care for staff or youth.
2. All youth shall be afforded an administrative hearing in accordance with the disciplinary procedures of the provider and standards set forth in this document if restitution is to be considered. The facts shall be documented by staff and a hearing shall be conducted with the multidisciplinary team.

#### **B. Collection of Restitution**

1. Funds for restitution may be withdrawn from the youth's personal funds, not to exceed one-half the total in the account. The youth's personal needs allowance can be used to pay restitution only with the youth's agreement. If the youth does not agree, and has no other funds available or insufficient funds, a plan shall be developed by the provider to assist the youth with restitution. In no instance shall a provider withdraw **all** funds in a youth's account to satisfy a restitution claim.
2. A summary of restitution activity shall be included in the quarterly report.

### **3.10.3 Appeal of Disciplinary Penalties**

Each provider's formal disciplinary procedures shall include a procedure for an appeal, or review, of the decision of the disciplinary committee by an individual or body who is not involved in the disciplinary action which the youth is appealing. Imposition of the consequence can be delayed at the discretion of the disciplinary committee. At

orientation and at the time of any disciplinary action, the provider shall explain to the youth how to use the appeal process. This process shall be submitted to the Regional Program Specialist for approval.

### **3.11 Youth Records**

The provider maintains confidential records on youth that include medical, mental health, substance abuse, educational, pre-vocational, vocational, social and life skills, behavior management, and other pertinent information involving the youth and his/her treatment at the facility.

- A. Below are additional criteria for the maintaining of youth's case files.
1. Youth records shall be kept confidential in locked areas and shall be directly supervised and controlled by an authorized staff member.
  2. Youth records must include the following information:
    - SAVRY social history and summary
    - Criminal history
    - Psychological/psychiatric evaluation, if available
    - Educational records, IEP if applicable
    - ISP
    - Progress notes corresponding to history of problems and assessment results
    - Progress Reports for specialized services provided by other agencies or professionals, including subcontractors (addictive disorders clinic, sexual behavior problem treatment, etc.)
    - Vital statistics (birth certificate, social security card and immunization record)
  3. Youth records are organized consistently so that information is readily available to appropriate OJJ staff.

#### **3.11.1 Confidentiality**

Confidentiality of records is of utmost importance.

At a minimum, the provider shall adhere to the following procedures:

- A. All youth records shall be stamped "confidential" on the cover or outside folder.
- B. Youth records shall be kept in locked areas and shall be directly supervised and controlled by an authorized staff member.
- C. Automated records shall include a procedure to ensure confidentiality.
- D. The provider shall have written policy and procedures to address the confidentiality of youth records.



1. Written policy shall specify what information shall be available to the youth and/or to the youth's parent/guardian, and/or employer, particularly in the following instances: if the youth's mental and/or social adjustment might be negatively affected; if a co-defendant is involved; if a confidential youth record is included; or if informants are named in the record.
2. Written procedures shall specify who shall supervise the maintenance of the records, who shall have custody of records, and to whom records may be released.

### **3.11.2      Access**

- A. Access to confidential youth files (e.g., medical, therapy, education, etc.) shall be limited to the following authorized persons:
  1. Staff authorized by the provider and members of the administrative staff of the provider's parent agency;
  2. A parent/guardian for youth under age 18 or the youth if he/she is age 18 or over;
  3. Appropriate staff of YS/OJJ;
  4. Counsel for the youth with signed consent form;
  5. Judges, prosecutors, and law enforcement officers, when essential for official business;
  6. Individuals and agencies approved by YS/OJJ to conduct research and evaluation or statistical studies;
  7. State licensing reviewers;
  8. Social service agencies; and
  9. Official auditing authorities (e.g., PREA auditors)
- B. If YS/OJJ believes that information contained in the record would be damaging to the youth's treatment/rehabilitation, the damaging information may be withheld from the youth and/or his/her parent(s) or others except under court order.

### **3.11.3      Youth Images**

- A. Youth in YS/OJJ custody or under its supervision shall not be utilized to or be allowed to participate in fund raising benefitting the contract provider. Using photographs or audio/video recordings for fund raising is also prohibited.
- B. Written policy and procedure shall specify instances under which information concerning a youth shall be released. This policy shall include, but not be limited to, release of photographs to law enforcement, media,

third party agencies (local probation departments, community service providers, and other state agencies, etc.) or for inclusion in provider newsletters or publications.

Release of photographs to the media is prohibited unless a consent form signed by the parent.

- C. Permission to release or use the photographs of youth in the custody of YS/OJJ shall require written authorization from the Deputy Secretary or his/her designee. For youth under the supervision of YS/OJJ, the provider shall obtain signed authorization from the youth and his/her parent or guardian on an appropriate release waiver.

#### **3.11.4 Release Forms**

- A. The youth and legal authority (parent/guardian or Probation Officer) shall sign a “Release of Information Consent Form” before information is released.
- B. The “Release of Information Consent Form” shall include the following:
  - 1. Name of person, agency or organization requesting information;
  - 2. Name of person, agency or organization releasing information;
  - 3. The specific information to be disclosed;
  - 4. Date consent form is signed;
  - 5. Signature of the youth and the legal guardian parent/guardian if the youth is under 18 years of age;
  - 6. Signature of the person witnessing the youth’s signature; and
  - 7. An expiration date giving consent to release the information.
- C. A copy of the consent form shall be maintained in the youth’s record.
- D. No documents provided by YS/OJJ shall be reproduced or distributed without YS/OJJ written permission.

#### **3.11.5 Retention of Youth Records**

Providers shall have a written policy on the retention and disposal of youth records which requires records to be kept for a minimum of the end of the fiscal year in which the youth leaves the custody/supervision of Youth Services, plus six (6) years, in accordance with YS Policy No. A.1.9.

If the youth is a sex offender required to register, the record shall be kept six (6) years after the end of the fiscal year in which the youth leaves Youth Services custody/supervision or for the youth’s lifetime, whichever is longer.

### **3.12            Personal Funds**

Provider shall be required to deposit all personal funds collected for the youth in a public banking institution's non-interest bearing account specifically designated "Youth Personal Funds" and to maintain a ledger showing the status of each youth's account.

If a youth's personal funds exceed \$250.00, the provider shall open an individual interest-bearing account in the name of the youth.

All withdrawals by a youth or expenditures made on behalf of a youth shall be documented by a withdrawal request, signed and dated by the youth.

A provider may limit the amount of a withdrawal if possession of excessive amounts of money creates a security problem within the program or with the behavior management plan.

Restriction of access to earned income shall require the approval of the multidisciplinary team.

#### **3.12.1            Reporting Requirements**

A report shall be filed with YS/OJJ by July 15 for the year ending June 30 showing a list of all youth account balances, date of admission and, if appropriate, the date of discharge. This includes all residents who were in the program at any time during the preceding year. The personal fund account is subject to review or audit by YS/OJJ or its representatives at any time. Any discrepancies in youth accounts shall be resolved within 14 days of notification.

#### **3.12.2            Transfer of Personal Funds**

When a youth is discharged from the program, the balance of his/her account minus any funds due the provider shall be given or mailed to him/her within seven (7) working days, regardless of the reasons for discharge.

If the youth is to be reassigned to another program, a check made in the name of the youth shall be forwarded to the new program within seven (7) working days.

The provider shall document efforts made, including contact with YS/OJJ, in attempting to locate a youth for transfer of funds. When a youth cannot be located, funds held on his/her behalf are considered abandoned after 90 days and shall be remitted to YS/OJJ. The refund check shall be accompanied by the youth's name, and case number.

#### **3.12.3            Claims Against a Youth's Account**

A provider shall not require youth to pay for services and supplies which are to be provided by the facility (i.e., toiletries, linens, laundry service, drug screens, routine supplies and lunch money).

The provider shall not access the youth's account for damages without conducting an investigation into allegations against the youth which merit restitution to the facility and then holding a hearing per disciplinary procedure requirements, allowing for the youth to file an appeal on the findings. The appeal shall be reviewed and a final decision made and the youth shall be provided the results, in writing. If restitution is paid, the youth shall be told how much and how often the money shall be taken out of the youth's account.

#### **3.12.4 Earned Income**

The provider is responsible for accounting of income earned by the youth.

The provider shall establish a written plan for the youth to save at least 20% of his/her net earnings. The plan shall specify the purpose for which funds saved shall be used at program completion (i.e., deposits on utilities and housing, purchase of tools necessary for training or employment.)

#### **3.13 Food Service**

Programs required to provide meals shall serve a varied and nutritionally adequate diet with menus approved annually by a qualified nutritionist, physician or dietician, to ensure that nationally recommended allowances for basic nutrition are met. Youth with special nutritional needs for medical or religious purposes shall be provided a specialized diet.

The program shall accommodate YS/OJJ Food Services Director during routine inspections of food service facilities and review of menus.

#### **3.14 Transportation**

It shall be the responsibility of the program to provide all transportation associated with the youth's ISP. It is YS/OJJ responsibility to assure the youth's appearance at all court proceedings and to arrange transportation as indicated.

The provider shall be responsible for transportation to and from the facility for passes earned under the program's behavior management system and those offered in accordance with the youth's ISP.

- A. Arrangements for transportation and care shall be made between the provider and placing region immediately upon receiving written notification requesting the youth's appearance at a court hearing.
- B. The facility shall have an adequate number of vehicles to move the entire population at any given time.

#### **3.15 Clothing**

Youth shall have sufficient clothing appropriate to participate in activities included in their ISP. Prior to placement, an inventory of all the youth's clothing shall be completed by the placing Region and given to the provider.

Youth should arrive at the provider with their own clothing. If the youth does not have sufficient clothing, the program director or his/her designee shall contact the placing Region for authorization to make an initial clothing purchase.

Replacement clothing shall be purchased at the expense of the provider. Clothing left behind when a youth runs away from a facility shall be immediately secured, inventoried and delivered to the supervising region upon discharge.

### **3.16 Reimbursable Program-Related Expenses**

YS/OJJ shall reimburse the provider for certain program-related expenses, according to the following terms:

- A. The item or service must be provided to promote the health, well-being, and/or treatment goals of the youth.
- B. The item or service is not available, nor fundable through any other source, including the youth's family.
- C. The cost of the item or service is not specifically funded by the per diem paid to the provider, nor uses the cost of other items or services submitted by the provider for the purpose of any part of a per diem rate.
- D. The provider gets prior approval from the Deputy Secretary or his/her designee to make the expenditure.

#### **3.16.1 Examples of Reimbursable Expenses**

In certain emergency or unusual circumstances a youth may need an item or service not included in the per diem rate.

Each item or service submitted for reimbursement shall be reviewed on a case-by-case basis. Examples of reimbursable expenses include the following:

- A. **Clothing Purchases** - A basic wardrobe shall be provided to any youth placed in the custody of YS/OJJ when the youth has insufficient clothing and no means to provide for clothing. Requests for initial clothing purchases shall include a clearly documented need and shall be submitted to YS/OJJ within the first 15 days of placement.  
  
The initial clothing purchase shall be limited to a maximum of \$350.00 per youth and shall constitute a one-time expenditure.  
  
The program shall provide for other basic clothing needs to include seasonal garments and replacement of outgrown/worn clothing.
- B. **Medication Not Covered By Medicaid** - YS/OJJ shall reimburse the provider for medications and/or health care items/services based on the following criteria:

1. The item or service is prescribed by a physician, or other health care professional licensed to provide such services.
2. The item or service is directly related to the health and well-being of the youth.
3. The item or service is denied reimbursement by Medicaid
4. The item or service is directly related to the treatment of an existing condition.

- C. School Expenses - YS/OJJ shall reimburse the provider for certain expenses directly related to educational or vocational services. Reimbursement shall not include the routine purchase of school supplies, paper, pencils, pens, notebooks, workbooks, lunch fees, etc.

Program-related expense reimbursement for educational and vocational expenses shall be limited to those items not included in the per diem rate and may include expenses such as the following:

1. Tuition for approved course work, vocational education or required summer school; and
2. Tools, textbooks, supplies and special clothing required by vocational courses.

For reimbursement of vocational or post-secondary educational expenses, the provider shall submit documentation that the student has applied for and been denied financial assistance from state and federal programs or vocational assistance.

- D. Reimbursement for Mileage - The cost of transportation that is necessary due to extraordinary or extenuating circumstances that arise during the course of a youth's treatment program may be borne by YS/OJJ under the following circumstances:

1. Transportation of the youth is not part of the routine services provided by the program for which it is reimbursed in the per diem rate; and
2. The transportation required is to meet a specific unplanned or extraordinary need of the youth.

- E. One-on-One Staffing - When extraordinary circumstances require one-on-one supervision of a youth, the additional costs of such an arrangement shall be requested by a provider and negotiated on a case-by-case basis. The request shall include the hourly rate of pay and the title and name of the person(s) providing the supervision. Requests are handled by the supervising region. One-on-one staffing may only be considered in crisis situations to address the safety of the youth and other residents.

One-on-one staffing is strictly short term (three (3) to five (5) days). Extensions beyond five (5) days require written justification and authorization by YS/OJJ.

All invoices with required documentation shall be provided to the supervising region within seven (7) working days of the one-on-one staffing incident.

## **SECTION 4: TREATMENT/LAMOD**

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Minimum treatment standards established herein shall apply to all services provided by the program. Any waiver or variation from the standards stated in this section shall be specified in the contract with YS/OJJ.

LOUISIANA MODEL (**LAMOD**) is an integral part of the Juvenile Justice Reform Movement. LAMOD was designed by the Office of Juvenile Justice (OJJ) with assistance from the Missouri Youth Services Institute (MYSI) and the Casey Strategic Consulting Group (CSCG). LAMOD provides a therapeutic environment that focuses on youth and staff interacting in small groups, involving family, and fostering positive peer culture. LAMOD prepares youth for re-entry into the community as productive citizens. All current residential facilities have been trained and shall implement LAMOD.

### **4.1 Individualized Service Plan**

- A. The provider shall develop a written ISP designed to enhance the growth and development of each youth assigned to its care. The plan shall address the youth's individual educational, vocational, medical, personal, behavioral, placement and chemical dependency needs. Goals must be clear, concise, attainable, measureable, and individualized. This plan shall be developed by the provider in collaboration with the multidisciplinary team, utilizing all available resources including, but not limited to the following:
  - 1. OJJ ISP;
  - 2. Psychological evaluation/Psychiatric evaluation, if available;
  - 3. Structured Assessment of Violence Risk in Youth (SAVRY) Summary Results;
  - 4. Educational Records; and
  - 5. Social History.
  
- B. The plan shall be completed within 14 days of admission and a written copy shall be submitted to the supervising region, the placing region if different, and the youth and youth's parents within seven (7) days of completion. The treatment plan shall include:
  - 1. Anticipated program completion date;

2. Individualized goals and objectives to be achieved while in the program with anticipated completion dates; and
3. Reintegration Plan – plans to support and resources to be provided to the youth to continue to meet treatment goals in the community; these may include action steps to be taken by OJJ, the program, and the parent/guardian.

The ISP shall be reviewed monthly and updated by the multidisciplinary team at least quarterly. Progress or lack thereof shall be noted in the youth's record.

## **4.2 Assessments and Reassessments**

Staff must review all assessment instruments provided to the program for placement in education and treatment services. Providers are to ensure receipt of the SAVRY Summary Results at intake and reassessments at minimum, every six (6) months.

### **4.2.1 Reintegration Plan**

- A. The reintegration component of the plan shall be completed within 14 days of admission and submitted to the supervising region, the placing region if different, and the youth and youth's parents within seven (7) days, and shall include the following:
  1. Continued medication/mental health needs
  2. Vocational/educational goals
  3. Continued coordinated and integrated service delivery.

The reintegration plan shall be reviewed monthly and updated in conjunction with the ISP.

## **4.3 Counseling**

Counseling/therapy may take place in-house and/or through community resources, but must be provided as per contract requirements by a qualified counselor/social worker/therapist. If a specialized counseling service is not a contract requirement, community resources shall be utilized to satisfy a youth's need for counseling.

Group treatment should be provided utilizing a cognitive-behavioral, social learning model and have the ability to separate treatment groups by risk level. Group size should not exceed eight (8) to ten (10) per facilitator. The program should have the ability to provide individual counseling and family training on an as-needed basis.

For the purpose of this section, all counseling/therapy services provided to a youth, whether individual, group or family, must include the following elements:



- A. Counseling/therapy should be planned, goal-directed, and focused on changing criminogenic behavior (conflict resolution, anger management, substance abuse, anti-social peer associations, problem solving, victim awareness, and deviant sexual arousal, etc.).
- B. The methods and techniques applied in counseling and the frequency and intensity of the sessions should be determined by assessment and noted in the ISP. Frequency or “dosage” of treatment should be clearly matched to the youth’s level of risk and need measured by a standardized and objective instrument, such as the SAVRY provided by OJJ. Recent research indicates that the following guidelines can be useful to determine “dosage” of treatment: for “Moderate” risk youth with few needs (three or fewer) 100 hours is sufficient to reduce recidivism; for youth either “High” risk or multiple needs, but not both, 200 hours are required to significantly reduce recidivism; and “High” risk youth with multiple needs (more than three) should receive well over 300 hours of direct service delivery. The hours spent in treatment should be cognitive behavioral, and would not include time spent in other activities.
- C. Counseling/therapy should utilize evidence based program/curriculum. The curriculum manual should outline the following items: therapeutic approach, goals and content of treatment sessions, recommended facilitation methods, and activities/homework assignments. Treatment curricula and strategies shall be delivered as designed.
- D. The minimum standard for the frequency of counseling/therapy services shall be specified in the contract with YS/OJJ and shall be based on the identified needs of the youth.
- E. Incremental progress towards treatment goals shall be recorded in the ISP on a monthly basis.

#### **4.3.1 Individual Counseling/Therapy**

Individual counseling/therapy shall be conducted by a qualified counselor/social worker/therapist under supervision of a licensed mental health professional.

Individual counseling/therapy shall be an ongoing component of the youth’s ISP. Each youth shall be assigned an individual who shall be responsible for providing the counseling/therapy.

Individual counseling/therapy shall be utilized in support of curriculum based group therapy, goals/behaviors identified in the youth’s ISP and crisis intervention.

In order to be considered individual counseling/therapy, sessions shall be a minimum of 30 minutes and shall be conducted by a qualified counselor/social worker/therapist under the supervision of a licensed mental health professional. Individual counseling/therapy

services shall be provided to each youth in accordance with their level of risk and need identified through assessments. All sessions shall be conducted by the youth's counselor/therapist.

Each individual counseling/therapy session shall be documented on the Progress Notes form using an accepted format and shall document beginning and ending time, date, goal addressed, and signature of individual providing the service.

Adequate space shall be provided for conducting private interviews and counseling/therapy.

#### **4.3.2 Group Counseling [see Attachment A.4.2 (k)]**

Group counseling/therapy shall be conducted by a trained and qualified facilitator.

Group counseling shall be an ongoing component of the youth's ISP and aligned with the identified needs of each youth.

Group interventions targeted to specific issues shall use a curriculum-based, best practices model. The most effective interventions are cognitive behavioral within a social learning environment.

Organized staff development in the specific model of intervention shall be included in the facility's staff orientation plan for staff providing the intervention.

Group counseling sessions are to be a minimum of one (1) hour in duration. Group notes shall be individualized and state information relevant to the content, behavior, progress for each youth, rather than a general summary of the group. A separate group note shall be written for each participant and shall include only the name of the individual being discussed. Notes shall include beginning and ending time, date, and signature of facilitator.

#### **4.3.3 Treatment Groups**

Treatment groups are designed to provide youth with the opportunity to acquire skills that foster healthy decision making and effective critical thinking.

As outlined in YS/OJJ contracts, residential programs shall provide:

- A. Social and other Soft Skills
  - 1. Anger management
  - 2. Conflict resolution
  - 3. Refusal skills
  - 4. Interactions with authority figures
  - 5. Negotiation/compromising skills

B. Gender Specific Group/Education

These groups may be provided by trained and qualified staff under supervision of the master's level mental health professional.

The purpose of this group is to address the risk factors that predispose youth to delinquency and maladaptive behaviors. The group focus is on education and support, and deals with such issues as relationships, intimacy, self-esteem relative to gender, sexuality, identity, trauma, substance abuse education, moral development, parenting, etc.

C. Independent Living Skills Training

A contractor shall have a program to teach all youth independent living skills consistent with their needs. This program shall include, at a minimum, instruction in:

1. Appropriate social skills
2. Hygiene and grooming skills
3. Laundry and maintenance of clothing
4. Housekeeping
5. Use of recreation and leisure time
6. Use of community resources
7. Money management

When appropriate, the program shall also include instruction in:

1. Use of transportation
2. Budgeting
3. Shopping
4. Cooking
5. Punctuality, attendance, and other employment-related matters
6. Vocational planning

Incremental progress toward this treatment goal shall be recorded in the ISP monthly.

D. Parenting/Early Childhood Development

These groups shall be conducted by an individual with demonstrated instruction and/or experience in prenatal care and early childhood development.

The purpose of this group is to educate youth in the importance of prenatal nutrition and healthcare, proper care for children in the early stages of development, and various parenting skills, including discipline techniques and strategies to cope with the responsibility of parenthood.

#### **4.3.4 Family Counseling/Training**

The purpose of the family education/parenting skills program is to train parents/guardians to use effective interventions to increase acceptable behavior and decrease problem behavior, show parents/guardians how to manage stressful situations and teach their children skills to manage themselves in such situations, and to provide parents/guardians with ways to open lines of communication within the family and encourage constructive use of leisure time.

Family training shall be provided by any staff member trained and qualified to provide this service.

Family counselors shall have documented instruction and experience in family counseling.

Family counseling/therapy shall be conducted by an individual with, at minimum, a master's degree in a mental health field and documented instruction and experience in family counseling, who is supervised by a licensed mental health professional.

Family counseling services shall be an integral part of the youth's ISRP and shall be provided to all youth who shall return home upon release. Family counseling shall specifically address issues that directly or indirectly resulted in the youth's removal from his/her home and the issue of his/her eventual reintegration into the community.

Family counseling shall be made available to families of youth with clinically identified child-parent relational issues, unless a licensed mental health professional has identified and documented in the client record that such intervention would be detrimental, at the time, to the youth's mental health. A statement of goals to be achieved or worked towards by the youth and his/her family shall be part of the ISP.

Family counseling may include private family counseling sessions and/or family group sessions. These sessions shall be made in person whenever possible, but the facility shall also utilize telephone conference sessions if distance makes face-to-face sessions unachievable. Family sessions shall be conducted as needed in accordance with the ISP.

Each family counseling session shall be documented in session notes using an accepted format (DAGP) and shall document beginning and ending time, date, goal addressed, and signature of the individual providing the service.

#### **4.4 Specialized Services for Youth with Severe Emotional Disturbance**

Providers shall have written plans for providing specialized services to youth enrolled in their programs, including procedures for staff to follow and proper notification of the program director, parent/guardian, and probation & parole officer.

#### **4.4.1 Psychiatric Services**

Psychiatric services shall include evaluation, medication management, and consultation with program staff in the overall treatment/management of the youth's mental illness.

The psychiatrist providing the services shall be a licensed board-eligible child/adolescent psychiatrist or a licensed board-eligible adult psychiatrist with at least three years of experience in providing services to children/adolescents.

Psychiatric services shall be provided when indicated, based on the acuity level of the youth, but no less frequently than once per month.

#### **4.4.2 Crisis Intervention**

The facility shall have a written plan for the provision of crisis evaluation and intervention services on a 24-hour basis. When the plan includes service provision by an outside agency or individual, there shall be a written contract or cooperative agreement with the outside party.

#### **4.4.3 Family Education/Counseling**

Family education regarding mental illness signs and symptoms, behavior management, and medication compliance shall be made available to families of youth with severe emotional disorders.

Family education shall be provided by an individual with a master's degree in a mental health field or any staff member who has documented training in the above.

Youth with Special Needs/Learning Disabilities/ADHD

Accommodations shall be provided as needed to all youth with mental or learning disabilities to adequately understand and participate in any services/programs provided by the facility.

#### **4.5 Reporting Treatment Progress**

Beginning with the date of admission, the provider shall complete, in writing, a Quarterly Progress Report on each youth.

- A. The quarterly report shall document the youth's progress toward meeting the goals and objectives set forth in the ISP. Quarterly reports should focus on areas of positive change in behavior, participation level, and skill acquisition, as well as on the factors required for successful program completion. Progress in treatment provided by outside providers shall also be included in the report.

The quarterly report shall also include, at a minimum:

1. The youth's medical condition, any medical treatment and/or medications prescribed;
  2. The youth's current grades (if applicable, attach copy of current report card);
  3. Any unusual occurrence reports involving the youth;
  4. The dates of any home visits during the reporting period and documentation of any problems reported;
  5. The dates of family counseling sessions and documentation of parental participation;
  6. Summary of restitution activity, if applicable; and
  7. Reintegration Plan update including follow-up services.
- B. Copies of the ISP and quarterly report shall be distributed, by the provider, to the court of jurisdiction, district attorney, supervising and placing region(s), and parent or guardian within seven (7) days of completion. Documentation of compliance shall be maintained in the youth's case file.

#### **4.5.1 Supervisory Reviews**

- A. Supervisors must routinely (at least quarterly) conduct reviews of the work product of staff under their supervision. At minimum, the following must be reviewed:
1. Youth's case file, including completion of assessments, psychological evaluation, ISP, case notes (chronological order), progress reports, and discharge and after care reports.
  2. Observation of staff on service delivery skills: communication skills, behavioral reinforcements, implementation and knowledge of treatment model, redirection techniques, and group facilitation, etc.
- B. Supervisors should provide feedback to the employee regarding any areas needing improvement. The supervisor should follow-up to ensure implementation was accomplished and corrections were completed.

#### **4.6 The Juvenile Sexual Behavior Problem Treatment Program**

The JSBPTP Program is a community based treatment program approved by OJJ, for youth that have been adjudicated (convicted) for a sex crime. Participants must be age 12-18, and have been adjudicated for a hands-on sex offense. A typical period of treatment is 1 – 1½ years, but may require longer participation depending on progress and cooperation in treatment. The frequency of treatment will be one (1) to three (3) times per week depending on risk level and other factors. Therapy will include individual, family and group sessions.

## SECTION 5: SECURITY AND SUPERVISION

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### 5.1 Monitoring Movement of Youth

Youth in residential placements are in the legal custody of YS/OJJ. YS/OJJ has a responsibility both to the court of jurisdiction and the public to know the location of youth at all times.

The provider shall follow a written plan to allow staff in residential and non-residential alternative programs to monitor movement into and out of the facility. Program staff shall be able to account for the whereabouts of its participants at all times.

Providers shall develop and implement written policies and procedures that enable youth to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures must require staff of the opposite gender to announce their presence when entering a dorm/housing unit. Providers that do not have discrete housing units (group homes) must require staff of the opposite gender to announce their presence when entering areas where youth are likely to be showering, performing bodily functions, or changing clothing.

### 5.2 Runaway

A youth shall be considered a runaway if he/she leaves the facility's grounds without permission and fails to return within two hours, or if in the reasonable judgment of the staff, there is cause to suspect the youth has left with no intent to return.

- A. In all instances the provider shall immediately notify the supervising Regional Duty Officer, local law enforcement, and contact the parent/guardian of the youth.
- B. Clothing and other personal belongings shall be secured immediately.
- C. Discharge shall occur at the time of runaway. (Refer to Section 3.2.2)

### 5.3 Routine Searches

Searches should be a part of every provider's program and shall be conducted on a routine basis. The primary objective of a search is to ensure the safety of all youth, staff, and visitors. Searches shall be completed in the least intrusive manner possible for the type of search being conducted. The program shall maintain and make public written policies and procedures for conducting searches of residents, all areas of the facility, staff and visitors, to control contraband and/or locate missing property. The provider shall also have written policy and procedures establishing the consequences for residents found with contraband. The youth shall acknowledge, with their signature, that they were informed of what constitutes contraband and the consequences of possession.

### **5.3.1 Provider Searches**

In order to ensure the safety of residents, staff and visitors, periodic house searches for contraband shall be conducted. The frequency and extent of the facility and ground searches should be consistent with program policies, and can be included during other routine inspections or activities. Searches shall be conducted by staff trained in the appropriate search techniques. Searches called by the provider staff can be limited to specific areas or youth. Youths' belongings shall be disturbed no more than necessary during the search. The search shall be documented, including who conducted the search, what areas were searched and what type of contraband was found, if any. If a search yields contraband, the supervising probation officer shall be notified and if necessary, the appropriate law enforcement agency should be notified.

The program director may request the services of YS/OJJ (i.e., training and technical assistance) to assist its staff in conducting a search. YS/OJJ may conduct housing searches if conditions warrant.

### **5.3.2 Personal Items Search**

Routine searches of suitcases, and/or personal items brought into the facility shall be conducted by facility staff prior to the youth taking possession of his/her property, or when the youth is returning from a home pass. Searches of a youth's belongings may be conducted at any time and shall be as minimally intrusive as possible. Every effort must be made to have youth present when his/her belongings are being searched. All searches shall be documented in the facility's logbook and if a search yields contraband, the supervising officer shall be notified and if necessary, the appropriate law enforcement agency must be notified.

### **5.3.3 Youth Pat-Down Searches**

- A. Pat-down searches of youth may be conducted whenever the provider feels it is necessary, to discourage the introduction of contraband into the facility, or to promote the safety of staff and other youth. A pat-down search shall be conducted when a youth returns from a visit, outside appointment or activity when there is reason to believe contraband is on his/her person.
- B. Pat-down searches are conducted as follows:
  - 1. The search shall be conducted by staff trained in proper search techniques.
  - 2. The search shall be conducted by a staff member of the same sex and shall be in the presence of another staff member.
  - 3. The youth shall be told he/she is about to be searched.
  - 4. The youth shall remove all outer clothing (gloves, coat, hat, socks, shoes and belt) and empty all pockets.
  - 5. The staff person shall then pat the outer clothing of the youth using only enough contact to conduct an appropriate search.



6. If the staff member finds a bulge, odd shaped lump, etc., the youth shall be asked to identify the item and appropriate steps should be taken to remove the item for inspection.
  7. If the youth refuses to comply, the program's director shall be notified immediately, and shall determine what action is appropriate.
- C. All pat-down searches shall be documented in the facility's logbook. Documentation shall include name of youth being searched, staff conducting the search and results of the search. A written report shall be completed when contraband is found to indicate the specific item discovered and reported to the supervising officer. If necessary, the appropriate law enforcement agency shall be notified.

#### **5.3.4 Youth Strip Searches**

A strip search is a visual search of a youth's nude body, in a place out of the view of other persons. Strip searches may be performed by facility staff upon prior documented approval by the program director only and only after a pat-down search causes reasonable suspicion to believe that weapons or contraband may be found through additional searches.

The facility shall not search or physically examine a transgender or intersex youth for the sole purpose of determining the youth's genital status, it may be determined through general conversation with the youth, medical records review or as part of a broader medical examination conducted in private by a medical practitioner.

The following are procedures for a strip search:

- A. A strip search shall be conducted by two (2) staff members of the same sex as the youth who is being searched. One staff observes the youth to conduct the search. The second staff member observes the staff member conducting the search.
- B. A strip search shall be performed in an area and in a manner that ensures the privacy and dignity of the youth.
- C. The youth shall remove all clothing and move away from the articles.
- D. Staff shall NOT TOUCH the youth.
- E. The youth shall be asked to run his/her hands through his/her hair.
- F. Staff shall search clothing carefully and return it to the youth.

#### **A body cavity search—Visual or otherwise is PROHIBITED.**

All strip searches are to be documented in writing, and if a search yields contraband, the supervising officer shall be notified and if necessary, the appropriate law enforcement agency should be notified.

### **5.3.5 Visitor Searches**

Visitors to the facility shall be advised that their property and personal items may be subject to a search. Visitors may be required to submit packages, handbags and briefcases for inspection by trained staff. If there is reason to believe additional searches are necessary, admission to the facility shall be denied.

All visitor searches shall be documented in the facility log. If a search yields contraband, the supervising officer shall be notified and if necessary, the appropriate law enforcement agency shall be notified.

### **5.3.6 Staff Searches**

All staff members shall receive rules that govern what is considered contraband in the facility. An acknowledgement of receipt of these rules shall be placed in their personnel file. The program director may authorize a search of a staff person's belongings and/or a pat-down search to follow established guidelines. Refusal to comply with the search, or if contraband is found, shall be handled by the program director in accordance with the provider's rules and regulations governing employees.

### **5.4 Contraband Disposal**

All contraband found in the possession of youth, visitors, or staff shall be confiscated by staff and secured under lock and key in an area inaccessible to youth/residents. Local law enforcement shall be notified in the event illegal drugs, weapons, or paraphernalia are found. The program director, in consultation with YS/OJJ, shall be responsible for disposal of all contraband not confiscated by police. Visitor's items that are unauthorized but not illegal will be taken and locked in an area inaccessible to the youth during the visit. These items will be returned to the visitor upon exit from the facility.

### **5.5 Youth Drug Screens**

Drug screens shall be done randomly or on an as-needed basis with the approval of the program director.

- A. A record shall be kept of all drug screens and results.
- B. A positive drug screen shall immediately be reported to the officer supervising the case.
- C. Drug screens shall be conducted when a youth returns from home pass.

### **5.6 Use of Force**

The program shall use the least amount of force necessary to prevent and/or deter undesired behavior, including runaway behavior.

- A. Physical force shall never be used as punishment.

- B. Any use of force shall be documented in writing, dated, and signed by staff reporting the incident. The documentation shall be submitted to the program's director.
- C. Program staff shall abide by the mandatory reporter laws as reflected in Ch.C. Articles 603, 609, and 610; and La. R.S. 14:403, which requires staff working with youth who become aware of abuse and neglect take appropriate measures based upon their belief that abuse or neglect has occurred.

The program shall ensure that youth in the program receive adequate and humane treatment. All instances of suspected child abuse or neglect shall be reported to the DCFS toll-free number 1-855-4LA-KIDS (1-855-452-5437), which is manned 24 hours a day, seven (7) days a week.

Staff shall follow-up with a written report to DCFS using Attachment (h), the DCFS/CW Form CPI-2 noted in Section 2.6 above, and also available on the Internet at <http://www.dcf.louisiana.gov/assets/docs/searchable/OCS/CPI-2.pdf>. A copy of this report shall be provided to the OJJ supervising regional office.

The program shall ensure no reprisals are taken against the youth or the staff reporting an incident.

- D. A program shall not use any form of chemical restraint. If physical restraints are to be used, the program shall submit in writing for approval from YS/OJJ and the DCFS, Bureau of Licensing and Certification, the following:
  - 1. The type(s) of restraining techniques;
  - 2. The restraints to be used; and
  - 3. Staff training to be provided in regard to physical restraint.

## **5.7 Restrictions**

The provider shall have written policies and procedures regulating the use of room restriction or unauthorized areas. The policy shall ensure that:

- A. There are procedures for recording each incident involving the use of restriction.
- B. The reason for the room restriction is explained to the youth and he/she has an opportunity to explain the behavior.
- C. Other less restrictive measures have been applied prior to restrictions.
- D. Youth in room restriction shall have access to the bathroom.
- E. Staff shall check on a youth in room restriction a minimum of once every 15 minutes and document such.
- F. Room restriction may only be used in an unlocked area.

- G. Room restriction shall not exceed a total of two hours for youth in residential programs. Restriction from a particular area (unauthorized area) due to behavior, misuse of property, etc. shall last no longer than the time needed to bring control to the situation.

### **5.8 Battery on Staff**

All instances of battery committed on staff shall be documented and, whenever appropriate, charges shall be filed with appropriate authorities. Each incident shall be reported to the supervising regional office within 24 hours of occurrence via the completion of an OJJ/Unusual Occurrence Report (UOR) [see Attachment (I)].

### **5.9 Suicide Precautions**

All providers shall have a written suicide prevention plan detailing the proper response to youth who demonstrate a risk of suicide. The procedure shall, at a minimum, include the following elements:

- A. A process for determination or assessment of suicidal behavior and risk by qualified professional.
- B. A procedure for contacting appropriate health authorities and YS/OJJ.
- C. A plan, created by a qualified professional, of direct supervision of a youth until a suicide crisis has ended and ongoing assessment.

### **5.10 Abuse/Neglect Reports**

In accordance with the DCFS, all allegations of abuse and neglect shall be reported to the local parish DCFS Office or the Crisis Intervention Protection hotline. (Refer to Section 5.6 above for more information)

The Louisiana Children's Code defines abuse and neglect as follows:

Abuse - any of the following acts which seriously endanger the physical, mental, or emotional health and safety of the child:

- A. The infliction, attempted infliction, or as a result of inadequate supervision, the allowance of the infliction or attempted infliction physical or mental injury upon the child by a parent or any other person.
- B. The exploitation or overwork of a youth by a parent or any other person.
- C. The involvement of the youth in any sexual act with a parent or any other person, or the aiding or toleration by the parent or the care of the youth's sexual involvement with any other person or of the youth's involvement in pornographic displays, or any other involvement of a youth in sexual activity constitutes a crime under the laws of this state.

Neglect – the unreasonable refusal or failure of a parent or caretaker to supply the youth with necessary food, clothing, shelter, care, treatment, or counseling for injury, illness, or condition of the youth, as a result of which the youth’s physical, mental, or emotional health and safety is substantially threatened or impaired.

## **SECTION 6:      ORIENTATION**

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### **6.1              Youth’s Rights and Responsibilities**

All youth shall be advised of their rights and responsibilities, the provider’s zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse and sexual harassment and the expectations of the provider, through the orientation process which shall be conducted within 24 hours of admission [see Attachment A.4.2 (m)]. A signed copy of the attachment shall be filed in the youth’s case record.

### **6.2              Mail**

Youth shall be allowed to send and receive letters from all persons, including people in other programs or institutions, unless specifically prohibited by order of the Court of Jurisdiction. All restrictions of mail shall be documented in the youth’s ISP. There shall be no restriction on the number of letters written, the length of any letter, or the language (English, Spanish, French, etc.) in which a letter may be written. Profanity, graffiti and/or gang symbols shall not be allowed on incoming or outgoing mail (refer to 6.2.5).

#### **6.2.1           Letters**

- A.      Inspection of Outgoing Letters  
Outgoing letters are to be posted unsealed and inspected for contraband.

EXCEPTION: Outgoing “privileged” mail may be posted, sealed and may not be opened except with a search warrant, if it is confirmed addressed to an identifiable source. For purposes of this regulation “an identifiable source” means the official or legal capacity of the addressee is listed on the envelope and the name, official or legal capacity, and address of the addressee has been verified. Identifiable sources are as follows:

1.      Courts;
2.      Attorneys;
3.      Probation and Parole Officers/Juvenile;
4.      Deputy Secretary, Regional Director, Regional Manager; and
5.      Other state and federal departments, agencies and their officials

Upon determination that the letter is not identifiable as privileged mail, the item shall be opened and inspected for contraband.

B. Inspection of Incoming Letters

Letters from the following identifiable sources shall be opened by the youth to whom they are addressed and may be inspected for contraband only in the youth's presence:

1. Courts;
2. YS/OJJ officials and probation and parole officials;
3. Prosecuting attorneys;
4. Other attorneys; and
5. State and federal agencies and officials.

C. Reading of Letters

Routine reading of letters by staff is prohibited. The program director may determine that reading of a youth's mail is necessary to maintain security, order, or program integrity. The youth's supervising probation officer shall be notified when mail is read by program staff. If there is a determination made that it is necessary to read a youth's mail, the reasons must be documented.

**6.2.2 Stationery and Stamps**

Programs shall provide youth with sufficient stationery, envelopes and postage for all legal and official correspondence and for at least two (2) personal letters each week.

**6.2.3 Packages**

All packages shall be inspected prior to being given to youth in an effort to prevent contraband.

**6.2.4 Publications**

Books, magazines, newspapers and printed matter which may be legally sent to youth through the postal system shall be approved, unless deemed a threat to the security of the program, content contrary to treatment plan; porn.

**6.2.5 Withholding of Correspondence**

If it is determined that any letters or publications passed through the mail illegally or present a threat to security or contains graffiti, they may be withheld from the youth it is addressed to. This decision shall be made by the program director. The decision and reasons are to be discussed with the youth and documented in his/her case file. The youth has the right to appeal this decision to the supervising Regional office.

All youth, regardless of status, shall be allowed to receive approved correspondence. However, youth on restriction may have their privilege of originating correspondence restricted to communications with the courts, YS/OJJ, parent/guardian and legal counsel.

### **6.2.6 Collection and Distribution of Mail**

Collection and distribution of mail is never to be delegated to a youth, nor should the mail to be dropped on a table or other convenient location for each youth to come and look for his/her mail. Mail shall be delivered promptly to the youth to whom it is addressed.

### **6.3 Visitation**

The provider shall develop written rules governing visitation and shall provide a copy to each youth, his/her parent or guardian and the placing region. In all cases, the provider, in collaboration with YS/OJJ, shall screen potential visitors and approve or disapprove their visitation in accordance with the provider's criteria. The program's written visitation policy is subject to approval by YS/OJJ.

#### **6.3.1 Attorney Visits**

- A. The program shall develop written policies governing visits between attorney and client/youth. Policy must include at least the following: Attorney visits (face-to-face or telephone) with clients/youth must be approved in advance by the program director.
- B. Attorney credentials must be verified through the Louisiana State Bar Association (LSBA). Verification can be obtained through the LSBA website @ [www.lsba.org/default.aspx](http://www.lsba.org/default.aspx) or by calling LSBA direct at 1-800-421-5722. Approval/Denial shall be provided by the program director.
- C. Visits by Authorized Legal Representatives (ALR) may be permitted at the discretion of the program director. However, ALRs must not be on the visiting list of the youth and supervising attorney must provide an affidavit indicating the following information:
  - 1. ALR's name, social security number, and date for birth;
  - 2. Length of employment and supervision; and
  - 3. Attach copy of certification or license to affidavit.
- D. Youth may refuse visits with an attorney at any time and such refusal must be indicated in writing. A logbook of all attorney and ALR visits must be maintained. The logbook shall include the name of the legal representative, date, and length of visit.
- E. Visual observation of visits between youth and legal counsel is permitted; however, audio recording of the conversation is not permitted.

#### **6.4 Personal Safety**

Every youth has the right to feel safe. Providers have the responsibility to ensure that youth are safe while in their care.

Every youth shall be advised by the provider of the procedure to contact a professional staff person on a 24-hour basis if he/she does not feel safe.

The program's director should make periodic contact with youth in the program to determine if they feel safe and comfortable when interacting with peers and staff. Case managers should routinely ask youth questions regarding perceptions of safety during individual treatment sessions and note responses in case notes.

Further, providers must have a written policy and procedure that allows intermediate-level or higher level supervisors to conduct unannounced rounds on all shifts to identify and deter staff sexual abuse and sexual harassment. Documentation of such rounds must be maintained and made available for review by OJJ and PREA auditor(s).

#### **6.5 Smoking/Sale of Cigarettes**

Every provider shall establish written policies and procedures banning use of cigarettes and other tobacco products at the facility or while exercising supervision over youth. The provider shall assist the youth in accessing smoking cessation programs, when needed.

#### **6.6 Research**

The provider shall not authorize any youth participation in research without written approval of YS/OJJ Deputy Secretary.

#### **6.7 Telephone**

Programs shall have written policies and procedures regarding the youths' use of the telephone.

#### **6.8 Television Programming**

Programs may utilize television programming, cablevision services, satellite dishes, videotape/DVD rentals and sales or other appropriate means to provide basic and educational television in accordance with applicable state and federal laws and regulations.

Programming for cablevision/satellite services shall exclude premium movie channels, music video channels and other expanded programs due to excessive violence and sexually explicit subject matter.

Examples of basic channels allowed without restriction (not exclusive due to variations in channels available):



- Local television station(s)
- Educational channels (i.e., Louisiana Public Broadcasting, The Learning Channel, The Discovery Channel, etc.)
- Cable News
- Network ESPN
- WTBS
- WGN
- Nickelodeon
- USA
- TNT

Examples of expanded basic, music, video and premium channels not allowed (not inclusive due to variations in channel availability)\*:

- Home Box Office (HBO)
- Cinemax
- Showtime
- Encore
- Starz
- Pay-per-view
- The Playboy Channel
- FLIX
- Music Video Channels (MTV, TNN, CMT, etc.)

**\*These channels are not allowed regardless of whether available as part of the basic or expanded basic package.**

Rentals of videos/DVDs rated “R” or “X” are strictly prohibited.

Program directors shall periodically review and monitor television programming

## **6.9 Video Games**

Video games rated T for Teen, M for Mature, or U for Unrated are strictly prohibited.

## **6.10 Computer/Electronic Device Use**

Providers must have a policy governing youth’s access and use of computers and other electronic devices (netbooks, tablets, and smartphones, etc). Procedures must ensure that computers and electronic devices under the physical custody of youth limits access to unauthorized sites (adult content, social networking, EBay, etc.). In addition, they must not compromise the safety of the youth in the program. Use of content filters, such as firewalls to block access to unauthorized sites must be installed on electronic devices used by youth. Computers shall be used by youth for the purpose of education, rehabilitation, and vocational development.

Any misuse of computers or electronic devices (gaining access to unauthorized sites, downloading inappropriate/unapproved material, transmission of abusive or harassing language, etc.) by a youth must be reported to the probation officer via a UOR by the next business day following the incident.

## **6.11 Grievance Procedures**

Each program shall have a written grievance procedure for youth. The procedure shall be written in clear and simple language and shall allow youth to make complaints without fear of retaliation.

The grievance procedure shall be explained verbally and in writing to the youth upon admission and quarterly thereafter. Written verification of receipt shall be maintained in the youth's record.

## **SECTION 7: MEDICAL**

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### **7.1 Medical Services (Residential)**

The provider shall have a written plan to access routine medical and dental services for youth assigned to its program. The plan shall include a written agreement with a licensed clinic, physician and dentist for routine care services. It shall establish procedures for staff to follow for making appropriate appointments and providing transportation for youth for the medical and/or dental service needed.

Upon admission, the provider shall obtain a "Consent for Medical Treatment Authorization Form" signed by the youth's parent(s)/guardian or Youth Services. The consent form shall be filed in the youth's case record at the facility.

Routine care shall be provided by a provider that accepts Medicaid reimbursement.

#### **7.1.1 Physical Examination & Medical History**

- A. If a physical examination has not been performed on a youth within the previous 30 days, an exam shall be completed within one (1) week of admission to the program, which is to include an assessment of the child's general health with focus on any injuries and/or diseases, and vision, hearing and dental screenings. It is not necessary to obtain a medical exam when a youth is transferred from another licensed program, if documentation of the previous examination was within one (1) year and includes vision, hearing and dental screenings. Each youth shall have a routine medical and dental examination annually.
- B. Medical information shall be obtained immediately upon a youth's admission to the program. A person trained by a recognized health

authority shall obtain this information for youth placed in residential care. The health screening evaluation report shall be filed in the youth's program file. The evaluation shall include the following information:

1. Whether the youth is presently on medication;
  2. Whether the youth has a current medical or dental complaint;
  3. Medical and dental conditions for which the youth received treatment in the past;
  4. The youth's general appearance and behavior;
  5. Physical disabilities;
  6. Evidence of abuse and/or trauma; and
  7. If needed, the program shall make referral(s) for substance abuse, mental health and suicide risk assessment/treatment. Medical/health related issues require documentation of parent/guardian notification. The parent and Probation Officer must be informed in writing of all referrals made as a result of screening(s).
- C. Identified medical, dental and/or mental health needs shall be immediately addressed through prompt referral to the appropriate person (s) (e.g., healthcare service, parent/guardian, or YS/OJJ).

#### **7.1.2 Access to Emergency Services (Residential & Non-Residential)**

The program shall have a written plan for access to 24-hour emergency medical, psychiatric and dental care for assigned youth. The plan shall define the circumstances that constitute a medical emergency and include instructions to staff regarding their conduct once the existence of a medical emergency is suspected or has been established. The plan shall include arrangements for the following:

- A. Transportation.
- B. Use of hospital emergency rooms or other appropriate health facilities. In the event a youth is admitted to a medical hospital, the provider shall immediately notify the youth's parent/guardian and the supervising or Regional Duty Officer, to facilitate direct supervision of the youth while in the hospital.
- C. Emergency on-call physician and dental services when a health care provider is not readily accessible in a nearby community.
- D. Notification procedure for youth's parent/guardian, OJJ and program director, if not involved at the time of emergency. Notifications must be documented in either the youth's case file or medical logbook and must include the date, time and name of person making notification.
- E. Follow-up care for any medical, psychiatric or dental services determined necessary.

## **7.2 Refusal of Medical Treatment**

If a youth refuses necessary medical treatment or medication recommended by a physician, the youth shall sign a “Statement of Refusal to Submit to Treatment”. A staff member shall witness the youth's signature and this documentation shall be filed in the youth's case record.

In the event of a medical or mental health emergency, as determined by the provider, medical attention for the youth shall be sought immediately. The provider should encourage the youth to comply with medical advice.

Although a provider may consent to medical treatment for a youth, the youth has the right to refuse.

### **7.2.1 Youth 18 Years of Age or Older**

If a youth 18 years or older refuses medical treatment, the provider shall notify the supervising regional office immediately via UOR.

### **7.2.2 Youth Under 18 Years of Age**

If a youth 18 years or younger refuses medical treatment, the provider shall immediately notify YS/OJJ via UOR and request assistance from the youth's parent(s)/guardian and the supervising regional office.

## **7.3 Suicide Prevention/Precaution**

- A. The program has a written plan to safely assess and protect youth who have been identified as at risk of suicide.
  - 1. The program has a written suicide plan that includes procedures for the initial identification and ongoing assessment of suicide risk, as well as precautions.
  - 2. The plan details levels of appropriate supervision/observation used by the program to monitor the youth until trained mental health professional help is obtained.
  - 3. The plan outlines the protocol for immediate notification of youth's parent, OJJ, and program director, if not already directly involved in incidents concerning severe bodily injury and/or psychiatric episode. Notification must be documented in the youth's case file.

## **7.4 Notification of Serious Illness, Severe Bodily Injury or Severe Psychiatric Episode**

The program shall report any incidence of severe bodily injury, serious illness and severe psychiatric episodes, immediately, to the youth's parents/guardians, supervising regional office (Regional Duty Officer) and placing regional office (if different).

## **7.5 Use of Pharmaceutical Products**

- A. A program shall have written policies and procedures governing the use, storage, inventory, disposal, and administration of medication to youth. Policies shall conform to all applicable laws and regulations including, but not limited to, those of the DCFS, Licensing Section.
- B. Written policy must include at least the following elements:
  - 1. Medications shall be administered as prescribed by treating physician;
  - 2. Medications are stored in a secure and locked area. Inventory is maintained by a designated person on a routine basis; and
  - 3. Medical equipment (e.g. needles, syringes, scissors, etc.) are also kept secured, locked and inventoried.

## **7.6 Communicable Diseases**

The health authority (i.e. the physician health administrator of an agency responsible for provision of healthcare services to the provider) shall establish policies and procedures for serving youth with infectious diseases such as tuberculosis, hepatitis-B, and AIDS. These policies and procedures shall address the management of communicable diseases; provide orientation for new staff and youth concerning the diseases, and ongoing education for staff and youth regarding infectious diseases. Counseling should be provided to youth with a positive HIV diagnosis. Policies and procedures shall be updated as new information becomes available.

- A. In accordance with law, a youth may request to be tested for HIV. HIV testing should be conducted by the public health provider or a provider that accepts Medicaid reimbursement.
- B. Examinations shall be performed on youth by proper medical authorities for all symptomatic cases of communicable diseases such as tuberculosis, ova and parasites, infectious hepatitis and venereal disease. Youth shall be tested and, if indicated, treated.
- C. Staff shall be provided information about a youth's medical condition only when that knowledge is necessary for the performance of their job duties. The health authority shall determine policies regarding any necessary labeling of files for staff protection, protection of other youth or proper treatment.
- D. Confidentiality shall be maintained.

## **7.7 Pregnancy**

- A. Individual Treatment Plan goals and objectives shall be developed when a pregnancy has been confirmed. The plan shall be based on the orders of the youth's community obstetric physician and shall include special care, regular medical check-ups, special dietary and recreational needs, and a proposed plan for the youth and baby following delivery.
- B. Parenting classes shall be an integral part of the Individual Treatment Plan for all pregnant females in care.
- C. Medical services relating to pregnancy shall be provided by a physician/hospital accepting Medicaid reimbursement, unless medical expenses are paid by the youth's family.
- D. In the event the infant is unable to remain with the mother in residential care, the child shall be placed with an appropriate family member or in the temporary care of the DCFS. All efforts should be made to continue contact between the mother and the infant.

## **7.8 First Aid Kits**

- A. First aid kits shall be locked and secured in an area of the facility readily accessible to program staff. Each kit shall include, at a minimum, the following:
  - Latex gloves
  - Rolled gauze
  - Sponges
  - Triangle bandages
  - Band-Aids
  - Instruction pamphlets for first aid
  - Salves and other over-the-counter medication approved by a recognized health authority
  - Antiseptic lotion
  - Note paper and pencil
  - Blunt end scissors, safety pins and tweezers
  - Ammonia inhalant
- B. The contents, location and use of first aid kits shall be reviewed annually with all staff. Contents of the kits shall be inventoried monthly and replenished as needed, taking into account the expiration dates of individual kit items.

## **7.9 Notification of Death (Youth in OJJ Custody)**

In the event of the death of a youth in YS/OJJ custody, the provider shall immediately notify the appropriate law enforcement agency, youth's legal guardian, supervising Regional Duty Officer and placing Regional Duty Officer, if different, and the local coroner.

Unless a waiver is requested by YS/OJJ and approved by the local coroner, an autopsy is required pursuant to LA R.S. 33:1563.

## **7.10 Medical Staffing & Training**

Direct care workers and other staff shall be trained to respond to health related emergencies.

At least one staff member qualified to administer first aid and cardiopulmonary resuscitation shall be on duty at all times.

- A. Training shall include, at a minimum, the following:
1. Recognition of signs and symptoms of physical illness and knowledge of action required in emergency situations;
  2. Signs and symptoms of mental illness, suicide risk, retardation, chemical use and/or dependency;
  3. Methods of obtaining assistance, including emergency medical back-up plans; and
  4. Procedures for transferring youth to appropriate medical facilities or health care providers.

# **SECTION 8 QUALITY ASSURANCE/QUALITY IMPROVEMENT**

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## **8.1 Contract Monitoring**

Contract programs shall be continuously monitored by the assigned Regional Program Specialist and other YS/OJJ personnel to ensure that youth are receiving safe and effective, high quality services that are consistent with contract requirements, including but not limited to service grid compliance, performance and outcome measuring, operating procedures, maintenance and upkeep of the physical plant, qualifications of staff, staffing patterns and staff development.

Programs will be monitored in accordance with assigned level of risk. Generally, residential programs are considered high risk and receive monthly monitoring, while non-residential programs such as Tracker and Mentor are considered moderate risk and receive bimonthly monitoring.

Upon completion of a monitoring visit, the assigned Regional Program Specialist will meet with the program director or designee to discuss findings.

**NOTE:** OJJ reserves the right to conduct random unscheduled quality assurance reviews to ensure program effectiveness and fidelity.

## **8.2 Non-Compliance**

During the exit interview, the provider shall be notified of any deficiencies. The provider shall then be afforded the opportunity to take immediate corrective action. YS/OJJ shall address any remaining deficiencies in writing, and shall identify a specific deadline for correction. The provider shall be required to submit a corrective action plan outlining proposed solutions to have all deficiencies corrected by the deadline. Additional visits shall be made to each program as necessary to monitor contract compliance and ensure that progress is made on corrective action plans. Providers who fail to comply with the written corrective action plan shall be subject to sanction.

Sanctions may be imposed on any provider who fails to adhere to any provision of the Standard Operating Procedure (SOP), either intentionally or through negligence. These sanctions shall be issued by YS/OJJ Deputy Secretary and General Counsel, and shall not exceed three percent (3%) of the gross monthly billing. One sanction may be levied for each individual violation.

These sanctions are intended to create a positive change of compliance to the SOP and contract and are not intended to cause any negative or detrimental effect on the services available to youth.

Continued sanctions may jeopardize the future of the provider's contract with YS/OJJ.

Sanctions may include, but are not limited to:

- Reducing the number of youth assigned to the facility
- Monetary sanctions (reduction of monthly payment)
- Moratorium on placements
- Termination of Contract

## **8.3 Correctional Program Checklist (CPC)**

The OJJ will evaluate programs using the evidence-based CPC designed to assess treatment programs. More specifically, the tool will assess how closely programs meet known principles of effective intervention.

The evaluation examines the programs in five (5) domains in the areas of content and capacity: Leadership & Development, Staff Characteristics, Quality Assurance, Assessment and Treatment. There are 77 items to be scored giving the program a rating of Very High Adherence, High Adherence, Moderate Adherence or Low Adherence to Evidence Based Practices.



OJJ desires for providers to score within the Very High Adherence to High Adherence range. Providers will be required to participate in the CPC evaluation process at least every 2 (two) years.

### **8.3.1 Correctional Program Checklist Provider Response**

Following the review, the lead evaluator will complete and provide a comprehensive written report to the program director. The CPC report will discuss positive program components as well as provide recommendations to improve program effectiveness. Programs shall submit a written plan of action to OJJ within 30 days of receiving the report. The action plan must outline efforts being made to address the individual weaknesses identified in the CPC report with implementation timelines. The program shall work towards improving their score and compliance with the CPC.

## **Section 9 REPORTING**

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### **9.1 Monthly Report**

Providers shall submit a monthly report by the tenth (10<sup>th</sup>) of each month to the Regional Program Specialist who is the Contract Performance Coordinator. The template is provided by OJJ and shall be submitted electronically.

### **9.2 Annual Report**

Providers shall submit a written annual report within 30 days of the end of each contract year and at the expiration/termination date. The report shall reflect the efficiency and effectiveness of services for youth and the overall performance and outcome measure identified in the contract.

No later than May 15<sup>th</sup> of each year, the provider shall submit the facility's evacuation plan to the supervising Regional Manager and the Regional Program Specialist.

### **9.3 Incident Reporting**

- A. Each program must have a written policy indicating the manner in which all incidents outlined below are reported to the OJJ, including the name(s) of the responsible reporting person.
- B. An Unusual Occurrence Report (UOR) shall be completed for reportable incidents and forwarded to the Regional OJJ Office as outlined below:

#### **Level I Incidents:**

- 1. Escapes, runaways and/or apprehensions
- 2. Deaths;
- 3. Life-threatening events;

4. Any other high profile or large scale event warranting immediate notification of authority (e.g., natural disaster, hostage situation, facility riot, large scale evacuation, etc.).

Level I Incidents are to be reported to the regional OJJ office immediately. If the regional office is closed, the Regional Duty Officer must be contacted.

**Level II Incidents:**

1. Fistic/Physical Encounters resulting in injury
2. All reported allegations of abuse by staff or other youth
3. Any medical/mental illness or injury requiring hospital/clinic visit.

Level II incidents are to be reported to the regional OJJ office within 24 hours of occurrence or by the next business day, if applicable. Level II incidents do not require after-hours notification.

## **DEFINITIONS:**

**AGENCY** – Youth Services, Office of Juvenile Justice

**BEHAVIOR MANAGEMENT SYSTEM** – A structured system designed to increase appropriate behavior through the use of graduated sanctions and/or consequences and rewards applied in a consistent manner and typically influences the milieu of the living unit or dorm.

**BEST PRACTICE** – Systems or procedures that have demonstrated over time, the ability to produce positive outcomes.

**CHEMICAL AGENT** – An active substance, such as pepper spray, used to deter activities that might cause personal injury or property damage.

**CONTRABAND** – Items possessed by youth, staff, or visitors or found within the facility that are illegal or as expressly prohibited by persons legally responsible for administration and operation of the facility.

**CONTRACT COMPLIANCE** – Conformance to the programmatic expectations of effectiveness, efficiency, and efficacy of service delivery as defined within the contract, i.e. staff qualifications, housing, and security.

**CONTRACT PERFORMANCE COORDINATOR/CONTRACT MONITOR/REGIONAL PROGRAM SPECIALIST** – An agency employee assigned to review program effectiveness, compliance with contract provisions and accepted standards and public policy or state law; assists in staff development and provides technical assistance to support quality and compliance, as needed.

**CORRECTIONAL PROGRAM CHECKLIST** – Evidence based tool used by OJJ to evaluate program effectiveness and adherence to the known principles of effective intervention.

**CRIMINOGENIC NEEDS** – Major risk factors associated with delinquent/criminal conduct (e.g. anti-social attitudes, anti-social peers, substance abuse, impulsive behavior, and family factors).

**DAGP** – Data Assessment Goal and Plan – a standard format for writing progress notes. It includes data (information obtained from talking with the client and from observation); assessment (the counselor's assessment of the information and of the client's current functioning); goal (what the client will be responsible for), and a plan (plan for future treatment and as it relates to progress noted and updating of the treatment plan, may include homework assignments) necessary to reach the goal.

**DEPUTY SECRETARY** – Department of Public Safety and Corrections, Youth Services, appointing authority and agency head.

**EMERGENCY SHELTER** – A facility for the temporary placement of youth in OJJ custody who have not committed a felony-grade delinquent act or a misdemeanor-grade delinquent act based upon an offense against the person of another.

**EVIDENCE-BASED PRACTICE** – A practice that has been tested against a control group and has been scientifically proven to produce positive outcomes.

**FACILITY LOGBOOK** – A bound book with numbered pages in which program staff documents daily activities and important events on a regular basis.

**FULL TERM DATE** – Expiration date of disposition (date after which the Agency no longer has authority over the youth).

**FUNCTIONAL FAMILY THERAPY (FFT)** - A family-based intervention program for high-risk youth that addresses complex multidimensional problems through flexibly structured clinical practice. The FFT clinical model concentrates on decreasing the individual risk factors and increasing the individual protective factors that directly affect program participants, with a particular emphasis on the family.

**HOUSING SEARCHES** – Announced/unannounced searches of a youth’s living area designed to uncover contraband or stolen items, maximize sanitary standards, and eliminate fire and safety hazards.

**INDIVIDUALIZED SERVICE PLAN (ISP)** – A plan to address the individual needs of a youth. The plan outlines goals, objectives and interventions with timeframes and progress.

**LAMOD** – A therapeutic environment that focuses on youth and staff interacting in small groups, involving family, and fostering positive peer culture. LAMOD prepares youth for re-entry into the community as productive citizens.

**MODEL PROGRAMS** – (Evidence-Based Programs) – Programs with scientifically proven outcomes that can be replicated.

**MULTIDISCIPLINARY TEAM** – A group of individuals from diverse disciplines who provide comprehensive assessment and consultation and assist in identifying the goals of the Individual Treatment/Intervention Plan. The MDT should include facility and/or community providers, mental health professional, educators, agency staff, youth and family members.

**MULTISYSTEMIC THERAPY (MST)** - An evidence based intensive family and community-based treatment program that focuses on addressing all environmental systems that impact youth -- their homes and families, schools and teachers, neighborhoods and friends.

**NON-COMPLIANCE** – Failure to meet the terms of the contract.

**OJJ** – Youth Services, Office of Juvenile Justice, formerly Office of Youth Development (In 2008 the name was changed by statute to Office of Juvenile Justice)

**OUTCOMES** – The desired impact and effectiveness of the service to the client; shall be measurable and observable.

**PAT-DOWN** – A search of a fully clothed person. He/she may be required to remove all outdoorwear for the search, i.e., coats, jackets, hats, shoes, socks and belt only.

**PERFORMANCE COMPLIANCE** - Conformance to the programmatic expectations of effectiveness, efficiency, and efficacy of the service delivery as defined by contract performance standards (examples are staff qualifications, housing and security).

**PHYSICAL RESTRAINT** – The act of applying appropriate physical force to a youth to control dangerous behaviors and minimize the chance of injury to staff, other residents, and/or the youth being restrained, and/or to prevent a youth from absconding from custody.

**PLACEMENT** – The assignment of a youth to a residential or non-residential contract program by the Office of Juvenile Justice.

**PLACING OFFICER** – The officer who initially assigns the youth to a contract program.

**PLACING REGION** – The Office of Juvenile Justice region from which a placement originates.

**PPO/J** – Probation and Parole Officer/Juvenile, Office of Juvenile Justice Probation Officer

**PREA** – Prison Rape Elimination Act of 2003 was enacted by Congress to address issues of sexual abuse and sexual harassment of persons in the custody of U.S. correctional agencies. This legislation requires the Bureau of Justice Statistics (BJA) to initiate new national data collections on the incidence of prevalence of sexual violence within correctional facilities. PREA defines four categories of sexual abuse for purposes of data collection: abusive sexual contacts, nonconsensual sexual acts, staff sexual harassment and staff sexual misconduct.

**PROGRAM UNIT/SLOT** – Contract designation for the approved number of youth who can be assigned to a program at any one time.

**PROVIDER** – An individual or organization providing services to the Office of Juvenile Justice, through a duly executed contractual agreement; the terms “facility” and “program” are also used to mean provider.

**REGION** – An organizational subdivision of the Office of Juvenile Justice, Youth Services.

**REGIONAL DIRECTOR** – OJJ staff responsible for the Northern, Central/Southwest or Southeast service areas. The Regional Director supervises the Regional Managers.

**REGIONAL DUTY OFFICER** – The person designated by the Regional Office to be responsive to provider contacts in emergency and crisis situations.

**REGIONAL MANAGER** – Managers of the Community Based Services (CBS) field offices located throughout the state.

**RESIDENTIAL** – Placement for custody youth in a structured setting more restrictive than supervision, but not as restrictive as secure care.

**RESIDENTIAL LEVEL DETERMINATION FORM** – Form used by OJJ and the Department of Children and Family Services (DCFS) to determine the level of residential care and billing reimbursement.

**RUNAWAY** – A youth in the custody or under the supervision of the Agency who leaves the grounds of a program without authorization, fails to return within two hours of the authorized time by the program, or there is reason to believe youth will not return to a program.

**STRUCTURED ASSESSMENT OF VIOLENCE RISK IN YOUTH (SAVRY)** – Structured and objective assessment used to predict violence and general delinquency in youth.

**STRIP SEARCH** – The search of a youth’s person during which the youth is required to remove all clothing.

**SUPERVISING REGION** – Region in which the contract program is geographically located.

**SUPERVISING OFFICER** – The officer responsible for monitoring a placement of the youth while he is assigned to a particular community contract program.

**TREATMENT** – Any therapeutic or rehabilitative service provided to a youth by a provider.

**YOUTH** – A young person adjudicated delinquent or Families in Need of Services (FINS) and placed in custody or under the supervision of the Office of Juvenile Justice.