

# YOUTH SERVICES POLICY

<b>Title:</b> Work Details and Skills Building Incentives – Secure Care	<b>Type:</b> A. Administrative <b>Sub Type:</b> 7. Education <b>Number:</b> B.7.3
<b>Page 1 of 8</b>	
<b>References:</b> LSA-R.S.15:905, 23:161, 23:162, 23:166, 23:211, 23:251; ACA Standards 2-CO-5A-01 (Administration of Correctional Agencies); 4-JCF-5H-01, 4-JCF-5H-02, 4-JCF-5H-03, and 4-JCF-5H-04 (Performance-Based Standards for Juvenile Correctional Facilities); Youth Services Policy Nos. B.2.2 “Youth Classification System and Treatment Procedures”, B.8.8 "American With Disabilities Act (Youth)", B.8.10 “Access to Computers and Certain Office Equipment by Youth”, B.9.1 "Youth Welfare Fund (YWF)", B.9.3 "Youth Banking", C.2.3 "Searches of Youth", and C.2.7 “Youth Drug/Alcohol Testing”	
<b>STATUS: Approved</b>	
<b>Approved By:</b> <i>William A. Sommers, Deputy Secretary</i>	<b>Date of Approval:</b> 09/26/2022

## I. AUTHORITY:

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

## II. PURPOSE:

To provide youth an opportunity to acquire employability skills by developing a good work ethic through employment in on-campus jobs with pay incentives; and to integrate restorative justice by assessing a percentage of a youth's incentive compensation in order to make payment toward restitution.

## III. APPLICABILITY:

Deputy Secretary, Assistant Secretary, Undersecretary, Chief of Operations, Youth Facilities Director - Statewide, Executive Management Advisor, Facility Directors and all OJJ secure care youth.

#### IV. DEFINITIONS:

***On-Campus Worksite Supervisor*** - An employee who directly supervises and evaluates youth while working on campus.

***Restitution: court-ordered*** - Money that a youth has been ordered to pay by a court.

***Restitution: owed to the facility*** - Money a youth has been ordered to pay through the disciplinary process to reimburse the facility for financial loss due to his misconduct.

***Skills Building Incentive Multi-Disciplinary Team*** - A team at each facility where youth are participating in the on-campus Skills Building Incentive Program. The Team shall meet monthly to discuss the progress of youth enrolled in the program and to consider requests for new youth to enter the program. The Team shall be comprised of the following members:

- 1) Facility Director;
- 2) Skills Building Program Coordinator (SPC);
- 3) Youth's Probation and Parole Officer/Juvenile (PPO/J);
- 4) Group Leader; and
- 5) Youth's assigned Case Manager.

***Skills Building Placement Staffing*** – A staffing held to place, remove or reassign youth in the on-campus education/skills building program. This staffing may be incorporated into a youth's regularly scheduled reclassification staffing.

Required participants are as follows:

- 1) Skills Building Program Coordinator (SPC);
- 2) Youth's Probation and Parole Officer/Juvenile (PPO/J);
- 3) On-Campus Worksite Supervisor;
- 4) Group Leader; and
- 5) Youth's assigned Case Manager.

***Skills Building Program Coordinator (SPC)*** – A facility employee appointed by the Director who is charged with the responsibility of initial startup and oversight of the Skills Building Incentive Program (job details).

***Youth Portfolio*** - The portfolio is used as a purposeful collection of student work that exhibits the student's efforts, progress and achievements in one or more areas.

**V. POLICY:**

It is the Deputy Secretary's policy that there shall be a Skills Building Incentive Program to provide opportunities for youth in order to facilitate their reintegration into the community as responsible citizens upon release from commitment.

**VI. PROCEDURES:**

The On-Campus Skills Building Incentive Program provides youth with the opportunity to acquire marketable skills, necessary work habits and work experience. The program shall include skill building classroom instruction, learned skills processing, and hands-on skill building activities. Incentive payments will be made based on available resources. All YS secure care youth, who have received their GED, high school diploma or certificate of achievement are eligible for this program, subject to the screening and placement requirements in C below.

**A. Hours and Compensation**

1. Louisiana Law provides that youth under the age of 16 may be permitted to work 8 hours per day or no more than 40 hours per week after school hours and during non-school days.
2. Louisiana Law provides that youth 16 years of age and older may work any number of hours per day and per week.
3. Compensation to youth may be in the form of wages, learning a skill or gaining work experience.
4. Beginning wages shall be twenty-five (.25) cents per hour, and through merit raises may increase to a maximum of fifty (.50) cents per hour.

Merit raises of five (.05) cents per hour may be awarded upon the recommendation of the worksite supervisor, with the approval of the Skills Building Program Coordinator (SPC) and/or Facility Director. Payment of wages and merit raises are contingent upon available resources. If compensation is through the payment of wages, hourly payments shall range from .25 to .50 cents per hour.

5. Incentives paid shall be deposited pursuant to the procedures established in YS Policy No. B.9.3.

6. The SPC and the on-campus worksite supervisor shall identify skills expected to be obtained in each on-campus skills building position. Using these identified skills, the Multi-Disciplinary Team shall identify progressive skills and mastery levels needed for a youth to be eligible for an increase in incentive pay. Supporting documentation of exceptional work and behavior expectations / accomplishments must be provided to the Facility Director/designee for approval of an incentive pay increase.
7. Under no circumstances shall a youth be used as domestic help by employees of a Youth Services' secure care facility. This applies to employees who live on or off of State grounds.

Youth may be utilized, however, in grounds maintenance crews that are responsible for the upkeep of a State facility, including any residences that are on State property. Likewise, youth may be utilized as a carpenter/ electrician/plumber helper in repairs made to State residences, if this is the youth's normal job assignment.

**B. Job Announcements and Applications**

1. Job Announcements [see attachment B.7.3 (a) "Job Opening Announcement Form"] shall be developed by potential worksite supervisors and the SPC. All Job Announcements shall be approved by the Facility Director prior to posting.
2. Job Announcements and the Skills Building Incentive Program Application Forms [see attachment B.7.3 (b) "Application Form"] shall be posted in all living areas and schools.

**C. Application Review and Placement**

1. The SPC shall conduct an initial review of a youth's application to participate in the On Campus Skills Building Incentive Program, and shall provide copies of the youth's application to the persons attending the Skills Building Placement Staffing. The copies shall be distributed prior to the staffing to facilitate review of the application.
2. An Education/Skills Building Placement Staffing shall be held to discuss and reach a consensus concerning the youth's placement in the On Campus Work Program. The youth shall be in attendance at this staffing.

3. The outcome of the staffing shall be forwarded to the Facility Director for final approval.

**D. Medical Clearance**

All youth must receive medical clearance prior to beginning the hands-on skills building portion of the program. Medical clearance is defined as “the clinician has found the youth to be physically fit, emotionally stable, and the work does not interrupt the youth’s prescribed daily medication schedule”. The medical clearance shall be documented in the youth’s medical record and a copy sent to the SPC and EPC for filing with the youth’s application, utilizing the Medical Clearance Form [see attachment B.7.3 (c) “Medical Clearance Form”].

**E. Youth’s Notification**

1. A completed Youth Notification Form [see attachment B.7.3 (d) “Youth Notification Form”] confirming a youth’s placement in a particular job, following medical clearance, shall be sent by the SPC to the youth, the worksite supervisor, the youth’s Case Manager, the Group Leader assigned to the youth’s housing unit, and the youth’s portfolio within five (5) working days.
2. A completed Youth Notification Form shall also be sent by the SPC to those youth who timely applied and were not selected to participate within five (5) days.

**F. Skills Building Incentive Program Agreement**

An orientation conducted by the on-campus worksite supervisor shall be held on the youth’s first day of work. A Skills Building Incentive Program Youth/Worksite Supervisor Agreement Form [see attachment B.7.3 (e) “Work Agreement Form”] shall be signed by the youth and worksite supervisor.

The original document shall be maintained by the SPC, with a copy placed in the youth’s portfolio.

**G. Weekly Performance Evaluation and Incentive Schedule**

1. The on-campus worksite supervisor shall complete a Weekly Performance Evaluation Form [see attachment B.7.3 (f) “Weekly Performance Evaluation Form”], documenting how the youth has

functioned in his job, along with a Youth Work Incentive Schedule Form [see attachment B.7.3 (g) "Youth Work Incentive Schedule Form"] and forward these documents to the SPC on a weekly basis.

The SPC shall forward the Youth Incentive Schedule to the facility business office for calculation and processing of the youth's incentive payment. Payments to the youth shall be made from the Youth Welfare Fund pursuant to the guidelines outlined in YS Policy No. B.9.1.

2. Copies of all evaluation forms, hours worked, and any other documentation related to performance and pay shall be maintained by both the on-campus worksite supervisor and the SPC, with copies placed in the youth's portfolio.
3. A poor performance evaluation as documented on the on-campus worksite supervisor's Weekly Performance Evaluation form shall result in a documented conference between the SPC, the on-campus worksite supervisor, the youth, and the youth's assigned Case Manager. Youth may be subject to removal from the program or reassignment if the behavior does not improve by the next weekly evaluation report.

#### **H. Removal from Job**

1. An on-campus worksite supervisor, the SPC, the youth's Case Manager or the Group Leader assigned to the youth's housing unit may request removal of a youth from a skill building assignment by completing a Worksite Removal Request [see attachment B.7.3 (h) "Worksite Removal Request Form"] and submitting it to the SPC.

The request shall be heard within two (2) working days of receipt of the Site Removal Request at an Education/Skills Building Incentive Placement Staffing, which the youth shall attend.

If a youth is removed from a job assignment as a result of a staffing or due to poor behavior or performance evaluations, a new job assignment shall not occur again for a minimum of 14 days. If the reason for removal was based on a Code of Conduct Violation Report or a serious incident, the youth shall not be eligible for job reassignment for 90 days.

2. A youth may request the SPC remove him from a current skill building assignment and/or consider him for another skill building reassignment by completion of a new Skills Building Incentive Program Application form.

**I. Random Checks**

The Group Leader/designee shall be responsible for random checks on youth participating in the on-campus skills building program. Reviews shall be documented in the housing unit logbook.

**J. Life Skills Instruction**

Instruction and discussion/activities about life skills shall be incorporated into the LAMOD process.

**VII. RESTITUTION:**

Incentive payments made to a youth are subject to the payment of restitution assessed through the disciplinary process pursuant to YS Policy No. B.5.1, and/or by order of the court for restitution.

**VIII. PROGRAM REPORT:**

An annual report [see attachment B.7.3 (i) "Annual Report"] shall be prepared by the SPC and submitted to the Deputy Secretary/designee by June 30<sup>th</sup>. The report shall include the following:

- A. Number of youth who have participated in the Skills Building Incentive Program;
- B. Number of skills building job assignments;
- C. Duration of skills building job assignments;
- D. Skills building worksite incentive amounts paid; and
- E. Restitution payment amounts collected.

**IX. STAFF DEVELOPMENT:**

All YS employees shall receive annual in-service training on the contents of this policy.

## **YS Policy No. B.7.3**

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**Previous Regulation/Policy Number:** B.7.3

**Previous Effective Date:** 09/05/2019

**Attachments/References:**

- B.7.3 (a) Announcement of Job Opening September 2019.doc
- B.7.3 (b) Youth Application Form April 2018.doc
- B.7.3 (c) Medical Clearance Form September 2022.doc
- B.7.3 (d) Youth Notification Form April 2018.doc
- B.7.3 (e) Youth/Worksite Supervisor Agreement Form April 2018.doc
- B.7.3 (f) Weekly Performance Evaluation Form April 2018.doc
- B.7.3 (g) Youth Work Incentive Schedule Form April 2018.doc
- B.7.3 (h) Worksite Removal Request Form April 2018.doc
- B.7.3 (i) Annual Report September 2022.doc





**SKILLS BUILDING INCENTIVE PROGRAM  
ANNOUNCEMENT OF JOB OPENING**

**DATE:** \_\_\_\_\_

**POSITION:** \_\_\_\_\_

**AREA:** \_\_\_\_\_

**LOCATION/EMPLOYER:** \_\_\_\_\_

**WORKSITE SUPERVISOR:** \_\_\_\_\_

**JOB DESCRIPTION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CRITERIA FOR SELECTION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICATION DUE TO SKILLS BUILDING PROGRAM COORDINATOR ON:** \_\_\_\_\_

\_\_\_\_\_  
Facility Director Approval

\_\_\_\_\_  
Date

Original to: Skills Building Program Coordinator

Copies to: Worksite Supervisor  
Housing Units  
School Areas

**September 2019**



## SKILLS BUILDING INCENTIVE PROGRAM YOUTH APPLICATION

Name: \_\_\_\_\_ Client ID#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Release Date: \_\_\_\_\_ Dorm: \_\_\_\_\_ Case Manager: \_\_\_\_\_

**Have you obtained your GED?** ☐ YES ☐ NO

**IF YES:**

Are you currently enrolled in a vocational class? ☐ YES ☐ NO If Yes: ☐ AM OR ☐ PM

If Yes, have you completed a vocational program? ☐ YES ☐ NO

If Yes, which ones have you completed? \_\_\_\_\_

\_\_\_\_\_

**IF NO:**

Have you completed a vocational program? ☐ YES ☐ NO

If Yes, which ones have you completed: \_\_\_\_\_

\_\_\_\_\_

Please list any previous work or volunteer experience you have had.

\_\_\_\_\_

What position(s) are you interested in? \_\_\_\_\_

**MEDICAL:**

Do you have any physical limitations or health concerns? ☐ YES ☐ NO

If Yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**Job Reassignment Request:**

Is this a request for a change in your current job assignment? ☐ YES ☐ NO

If Yes, why are you requesting a change: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Youth Signature

\_\_\_\_\_  
Date Submitted

Original to: Skills Building Program Coordinator  
Copies to: Education/Skills Building Placement Staffing Participants  
Education/Skills Building Incentive Program Multi-Disciplinary Team



## EDUCATION/SKILLS BUILDING INCENTIVE PROGRAM MEDICAL CLEARANCE FORM

☐ **ACY**   
 ☐ **ACY-SM**   
 ☐ **BCCY**   
 ☐ **BCCY-WF**   
 ☐ **SCY**   
 ☐ **SCYC**

Youth Name: \_\_\_\_\_

Client ID#: \_\_\_\_\_

☐ This youth is under consideration to participate in an on-campus skills building assignment and may be under the supervision of on-campus worksite supervisor. It is necessary to establish that those participating in the **Skills Building Incentive Program** do not have any physical or mental health conditions that may be adverse to self or others in the work environment. To assist us in this determination, you are being asked to answer the following:

Has this youth been tested for Tuberculosis?	Date Tested	Test Type	Results
<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Skin Test <input type="checkbox"/> X-Ray <input type="checkbox"/> Sputum Culture	<input type="checkbox"/> Negative <input type="checkbox"/> Positive (explain in comments)

How would you describe the patient's general physical/mental condition and health from the statements below? (Use Comments section for explanations)

☐ No physical/mental condition or health problem exists that would limit the youth's ability to work with or around others.

☐ Physical/mental condition or health problem exists which would affect the youth's ability to work with or around others, with or without reasonable accommodation.

☐ No medication regime exists which would hinder the youth's ability to work off-campus for a minimum of 6 hours to 8 hours per day.

Comments (Please use back of this form if additional space is needed)

Facility Medical Provider's Signature	Date	Examination Date
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c: Skills Buildings Program Coordinator



**SKILLS BUILDING INCENTIVE PROGRAM  
YOUTH NOTIFICATION**

DATE:

TO: (Youth Name / Client ID#)

FROM: (Name)  
Program Coordinator

SUBJECT: Application of Employment  
Job Announcement Position: \_\_\_\_\_

\_\_\_\_\_ You have been selected to participate in the Skills Experience Incentive Program on the \_\_\_\_\_ job site beginning on \_\_\_\_\_.

\_\_\_\_\_ You have not been selected to participate in the Skills Building Experience Incentive Program for the following reason(s):  
\_\_\_\_\_  
\_\_\_\_\_

Please consider re-applying for this position or another position at a future date.

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Skills Building Program Coordinator

\_\_\_\_\_  
Date

Original to: Skills Building Program Coordinator

Copies to: Worksite Supervisor  
Case Manager  
Group Leader  
Youth Portfolio

April 2018



## SKILLS BUILDING INCENTIVE PROGRAM YOUTH/WORKSITE SUPERVISOR AGREEMENT

\_\_\_\_\_, Client ID# \_\_\_\_\_, a resident of \_\_\_\_\_  
 dorm does agree to the conditions set by \_\_\_\_\_,  
 Worksite Supervisor for the position of \_\_\_\_\_.  
 Scheduled days and hours are \_\_\_\_\_  
 and the rate of pay is \_\_\_\_\_.

The Worksite Supervisor's expectations are as follows:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_.

I agree to the terms listed above and I realize that violating any part of this agreement may result in my removal from the skills building job site, possible loss of pay and the possible remove from the Skills Building Incentive Program.

\_\_\_\_\_  
 Youth Signature

\_\_\_\_\_  
 Date

As the Worksite Supervisor, I agree to supervise the youth as well as provide a Weekly Performance Evaluation containing written feedback regarding the youth's skills building work performance.

\_\_\_\_\_  
 Worksite Supervisor

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Skills Building Program Coordinator

\_\_\_\_\_  
 Date

Original to: Skills Building Program Coordinator

Copies to: Worksite Supervisor  
 Youth Portfolio



## SKILLS BUILDING INCENTIVE PROGRAM WEEKLY PERFORMANCE EVALUATION

Youth: \_\_\_\_\_ Client ID#: \_\_\_\_\_ Dorm: \_\_\_\_\_ Week of: \_\_\_\_\_

**Please rate the youth on how well he has functioned on each indicator below over the last week.**

Performance Indicator	Exceeds Expectations (2)	Meets Expectations (1)	Does Not Meet Expectations (0)
Arrives on time and ready for work			
Has neat and clean appearance			
Follows facility/worksites rules and expectations at all times.			
Shows good work ethic			
Produces satisfactory quality of work			
Produces satisfactory quantity of work			
Shows initiative and follow-through on tasks			
Respectful and cooperative with supervisor			
Helpful and courteous to co-workers and/or other youth.			
Accepts construction feedback			
Engages in appropriate interactions with staff/worksites co-workers			
Shows appropriate behaviors and attitudes			
Other:			
<b>TOTALS:</b>			

**Days Worked (include date in the box below each day)**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

**Comments:**

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\_\_\_\_\_  
Worksite Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Youth Signature

\_\_\_\_\_  
Date

Original to: Skills Building Program Coordinator  
Copies to: Worksite Supervisor  
Business Office  
Youth Portfolio

Pay Period: \_\_\_\_\_

[illegible]

Skills Building Program Coordinator: \_\_\_\_\_

Date: \_\_\_\_\_

Original to: Skills Building Program Coordinator

Copies to:      Worksite Supervisor  
                         Business Office  
                         Youth Portfolio



**SKILLS BUILDING INCENTIVE PROGRAM  
WORKSITE REMOVAL REQUEST**

I am requesting that youth \_\_\_\_\_, Client ID# \_\_\_\_\_ be removed from the \_\_\_\_\_ worksite for the following reasons:

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Effective Date: \_\_\_\_\_

\_\_\_\_\_  
Worksite Supervisor

\_\_\_\_\_  
Date

**OR**

\_\_\_\_\_  
Case Manager/Group Leader

\_\_\_\_\_  
Date

**OR**

\_\_\_\_\_  
Skills Building Program Coordinator

\_\_\_\_\_  
Date

\_\_\_\_\_  
PC Date of Receipt: \_\_\_\_\_

\_\_\_\_\_  
Staffing Date: \_\_\_\_\_

Reason for Removal:

☐ Result of Staffing

☐ Poor Performance Evaluation

☐ COC Violation Report

☐ Serious Incident

Original to: Skills Building Program Coordinator

Copies to: Worksite Supervisor  
Parent/Guardian (off-campus only)  
Youth Portfolio



**Youth Services  
Skills Building Incentive Program  
ANNUAL REPORT**

☐ ACY    ☐ ACY-SM    ☐ BCCY    ☐ BCCY-WF    ☐ SCY    ☐ SCYC

Date: \_\_\_\_\_

Prepared by: \_\_\_\_\_  
(SPC)

The information below shall be submitted on an annual basis by June 30<sup>th</sup> by the Skills Building Incentive Program Coordinator.

PEFORMANCE INDICATOR	YEARLY TOTAL
# of youth who have participated in the Skills Building Incentive Program	
# of skills building job assignments	
Duration of skills building job assignments	
Skills building worksite incentive amounts paid	
Restitution payment amounts collected	